UCSF

UC San Francisco Previously Published Works

Title

A Qualitative Analysis of Low-Income Pregnant and Parenting Caregivers Experiences With Home Visiting in California During the First 2 Years of the COVID-19 Pandemic.

Permalink

https://escholarship.org/uc/item/85w2d46s

Journal

Journal of Public Health Management and Practice, 30(2)

Authors

Johnson, Isabella Mehra, Renee Remy, Linda et al.

Publication Date

2024-03-01

DOI

10.1097/PHH.0000000000001820

Peer reviewed





A Qualitative Analysis of Low-Income Pregnant and Parenting Caregivers' Experiences With Home Visiting in California During the First 2 Years of the COVID-19 Pandemic

Linda S. Franck, PhD, RN, FRCPCH, FAAN; Isabella Johnson, BS; Renee Mehra, PhD, MS; Linda Remy, PhD, MSW; Jennifer Rienks, PhD

ABSTRACT

Context: In-person home visiting programs that provide evidence-based parenting and child development support improve outcomes for low-income children and families. The COVID-19 pandemic led to a shift from primarily in-person to virtual home visiting services, and little is known about clients' experience of home visiting in this context.

Objective: To describe the experience of clients in the California Work Opportunity and Responsibility to Kids (CalWORKs) Home Visiting Program (HVP) across California during the first 2 years of the pandemic.

Design: Three repeated cross-sectional surveys over a 2-year period. Clients' free-text responses to open-ended questions were analyzed using a directed content analysis approach.

Setting: Forty-one counties in California.

Participants: Current CalWORKs HVP clients and those who left the program in the 6 months prior to each survey.

Main Outcome Measures: Clients' experience of the CalWORKs HVP.

Results: Five main themes emerged: (1) benefits received from the program; (2) life challenges; (3) COVID-19–related or other program changes; (4) client dissatisfaction and suggestions for improvement; and (5) appreciation for the program. Clients valued the practical, financial, parenting, and interpersonal support provided to themselves and their children. Almost three-quarters commented on life challenges experienced during the program. Significant programmatic changes related to COVID-19 pandemic public health safety and organizational constraints impacted clients both positively and negatively. Very few clients experienced overt dissatisfaction with the program. Many clients expressed appreciation for the program, particularly the individualized and relational support offered by a consistent home visitor.

Conclusions: The findings provide insights into the benefits and challenges experienced by clients receiving evidence-based home visiting services. The findings highlight the ongoing life challenges faced by clients who experience poverty, and how those challenges were exacerbated by a global pandemic. The CalWORKs HVP may buffer the substantial personal stresses clients experience related to parenting in the context of poverty and major public health challenges.

KEY WORDS: COVID-19 pandemic, home visiting, parenting, telehealth, virtual

Author Affiliations: Departments of Family Health Care Nursing, School of Nursing (Drs Franck and Mehra and Ms Johnson) and Family and Community Medicine (Drs Remy and Rienks), University of California San Francisco, San Francisco, California.

The authors are grateful to RDA Consulting, the CalWORKs Home Visiting Program (HVP) staff in each participating county, the Evaluation Advisory Workgroup, and the California Department of Social Services for supporting this work, and to the HVP clients for sharing their views in the survey.

This project was funded by the California Department of Social Services. The contents may not necessarily reflect the official views or policies of the State of California.

The authors declare no conflicts of interest.

Supplemental digital content is available for this article. Direct URL citation appears in the printed text and is provided in the HTML and PDF versions of this article on the journal's Web site (http://www.JPHMP.com).

This is an open-access article distributed under the terms of the Creative Commons Attribution-Non Commercial-No Derivatives License 4.0

vidence continues to build across the United States regarding the positive child and family outcomes for low-income pregnant and parenting individuals receiving home visiting services. ¹⁻³ In recent years, federal- and state-level support has

(CCBY-NC-ND), where it is permissible to download and share the work provided it is properly cited. The work cannot be changed in any way or used commercially without permission from the journal.

Correspondence: Linda S. Franck, PhD, RN, FRCPCH, FAAN, Department of Family Health Care Nursing, School of Nursing, University of California San Francisco, 2 Koret Way, N411F, Box 0606, San Francisco, CA 94143 (linda.franck@ucsf.edu).

Copyright © 2023 The Authors. Published by Wolters Kluwer Health, Inc.

DOI: 10.1097/PHH.0000000000001820

focused on improving access to these services. In California, there are several agencies with home visiting programs, including the California Department of Social Services (CDSS) California Work Opportunity and Responsibility to Kids Home Visiting Program (CalWORKs HVP).4 CalWORKs is a public assistance program that provides cash aid and services to eligible families with young children in California.⁵ The CalWORKs HVP is a voluntary program supervised by the CDSS and administered by participating California county welfare departments, often partnering with community organizations, to deliver evidence-based home visiting services to Cal-WORKs clients. Evidence-based home visiting models were defined as those meeting the criteria developed by the US Department of Health and Human Services,⁶ or another evidence-based program approved by the CDSS. The most common home visiting models provided by counties participating in Cal-WORKs HVP were Parents as Teachers, Healthy Families America, Nurse Family Partnership, and Early Head Start—Home Visiting.⁷ Pregnant people, parents, or caretaker relatives of children younger than 24 months enrolled in CalWORKs are invited to join the CalWORKs HVP in their county of residence and receive home visiting services and other services to support positive child health and development, parenting, and family well-being. The whole family approach aims to improve family engagement practices, support healthy development of young children living in poverty, and prepare parents for robust engagement in Welfare-to-Work activities and employment. The long-term goals are to help families build a strong foundation for future educational opportunities, economic progress, and greater financial opportunities. CalWORKs HVP, along with all other home visiting services in the state, underwent a dramatic shift from primarily in-person to virtual home visiting when the COVID-19 pandemic state of emergency was declared in California on March 4, 2020.8

There are few reports of clients' views of home visiting programs offered by public benefit agencies and not as part of research trials. These few studies indicate that clients value the professional support for themselves and their children, as well as advice on their child's development, and struggle with the practical and emotional challenges of child-rearing. Other studies have explored the processes by which positive outcomes are achieved and these include home visitors' focus during the visits on topics such as early childhood development, physical care of children, and the parent-child relationship. 11

As part of a larger, legislatively mandated program evaluation of the CalWORKs HVP, we sought to examine clients' views and experiences. Clients' ratings of program services needed and received are

reported elsewhere.¹² In this article, we report an analysis of clients' experiences from the free-text survey responses of CalWORKs HVP clients across California during the first 2 years of the COVID-19 pandemic.

Methods

Design

We conducted a prospective primary data evaluation using a repeated cross-sectional survey design, with 3 rounds of surveys over a 2-year period (May 2020 to October 2021), to evaluate clients' experiences participating in CalWORKs HVP.

Participants

Client enrollment in the program increased over the evaluation period. In each survey round (May-June 2020; January March 2021; September-October 2021), all current CalWORKs HVP clients and those who had left the program in the 6 months prior to the survey were invited by email or SMS text messages to take the survey. Clients received a \$10 to \$20 gift card for completing the surveys. The response rate for each of the 3 surveys was 26% (n = 243), 30% (n = 2182), and 30% (n = 712), respectively, with clients from 41 of California's 58 counties participating. The evaluation project was deemed exempt from human subjects review by the university and California state institutional review boards.

Survey instrument

The 43-item electronic survey asked about clients' demographics (themselves, their family, their children), relationship with their home visitor, access to and experience of home visiting services and referrals, child's development and parenting skills they gained, and engagement with educational and economic self-sufficiency services.⁴ In addition, 6 open-ended questions invited clients to comment on the following topics: skills learned or services received that helped clients with parenting; services received for job searching; job skills, education, or any other services they found useful; challenges clients faced in meeting job and/or education goals; experience of home visiting over the course of the COVID-19 pandemic (and other major events including wildfires and civil unrest); and anything else they wanted to share about their experience participating in the CalWORKs HVP (see Supplemental Digital Content Table 1, available at http://links.lww.com/JPHMP/B231).

Data analysis

We examined the free-text responses to the openended questions using a directed content analysis approach, wherein existing theory or prior research is used as the basis for the initial coding.¹³ The initial codebook was developed from the CalWORKs HVP aims, evaluation plan, and fixed-choice survey responses.4 The main a priori categories aligned with the survey domains and included relationship with the home visitor, services received through program participation, ongoing service or referral needs, perceived benefits, impact of COVID-19 pandemic-related program changes, and dissatisfaction or suggestions for program improvement. Data were coded using Dedoose Version 9.0.17 (Los Angeles, California). The codebook was then refined iteratively by 2 members of the study team (L.F. and I.J.) as coding progressed to characterize the content, language, and context of responses. Discrepancies were resolved through consensus. Themes, subthemes, and illustrative quotes were discussed with the larger study team until consensus was reached. Finally, we used summative thematic content analysis¹⁴ to quantify the frequencies of themes and subthemes. Demographic characteristics of clients who did and did not provide comments were compared using χ^2 tests or Fisher exact tests, where appropriate, using SAS software (version 9.4, SAS Institute Inc, Cary, North Carolina). All percentages are rounded to nearest whole numbers.

Results

Participants

Of the 1617 complete surveys received, 1189 (74%) clients provided a total of 4277 comments to 1 or more of the 6 open-ended questions. Characteristics of clients providing comments were similar to those of clients not providing comments, except for age, where clients providing comments were older (71% aged 26 years or older) than those not providing comments (62% aged 26 years or older; Table 1). We estimate that about 10% to 15% of clients participated in 2 surveys.

Major themes and subthemes

Five main themes emerged from the analysis of the client comments: (1) benefits received from the program; (2) life challenges; (3) COVID-19 related or other program changes; (4) client dissatisfaction and suggestions; and (5) appreciation for the program.

TABLE 1 Demographics of Survey Respondents Who Did and Did Not Provide Comments ^a			
Demographic Characteristic	Survey Respondents Who Provided Comments (n = 1189), N (%)	Survey Respondents Who Did Not Provide Comments (n = 428), N (%)	P(χ² Test or Fisher Exact Test)
Age, y			.02
<25	329 (29%)	102 (38%)	
26-39	708 (63%)	145 (55%)	
≥40	87 (8%)	19 (7%)	
Gender			NS
Female	1107 (99%)	262 (98%)	
Other	15 (1%)	7 (3%)	
Race			NS
Hispanic or Latine	703 (65%)	159 (64%)	
Non-Hispanic Black or African American	119 (11%)	36 (14%)	
Non-Hispanic White	171 (16%)	33 (13%)	
Non-Hispanic other race	91 (8%)	22 (9%)	
English as primary language	704 (74%)	179 (75%)	NS
Parenting role			NS
Parent	1114 (95%)	387 (93%)	
Pregnant	100 (9%)	34 (8%)	
Caretaker	104 (9%)	39 (9%)	

Abbreviation: NS, not significant.

^aPercentages calculated using nonmissing data, rounded to nearest whole number. Other gender includes genderfluid, genderqueer, male, other gender, and questioning. Non-Hispanic other race includes American Indian or Alaska Native, Asian, Native Hawaiian or other Pacific Islander, other race, and 2 or more races. Primary language available for rounds 2 and 3 of data collection. Clients could choose all responses that apply for parenting role.

Most clients providing comments discussed the benefits they received in the program for their child and for themselves and they also commented on life challenges they experienced during the program. Clients commonly described how COVID-19 pandemic–related or other contextual factors affected program services they received or their experience of those services. Relatively few clients expressed dissatisfaction or offered suggested improvements to the program, whereas clients commonly expressed appreciation for the program. The themes and subthemes are shown in the Figure and discussed in greater detail later with illustrative quotes. Additional illustrative quotes are shown in Table 2 for each subtheme.

Benefits received from the program

Seventy percent of clients commented about benefits from the program and these were categorized within 4 main subthemes: parenting and child skills building, tangible benefits, personal/emotional benefits, and job and career skills. Within skills building, clients frequently noted that the program helped them learn about their child's development and develop skills as a parent including communication skills, coping mechanisms, and feeding techniques. They also commented on the value of learning together with their child. One wrote, "It helped me understand my children more, how to help with potty training, their eating, with their behaviors! Now I understand more why they

sometimes act a certain way and I can help with it. I do more activities with them to learn. This program has literally [taught] me to be a better mommy and more understand[ing], and I learned to deal with my stress and how to not think of my stress and do better things."

Many clients commented on the tangible benefits they and their families received because of participating in the program. Examples of tangible benefits included direct financial or goods assistance or referrals for assistance or medical care. One client wrote, "It [CalWORKs HVP] has helped pay for childcare, gas and diapers. When times are tough, I know where to go to get the help I need. I have friends and family members who had fallen on tough times ask about the program. I can tell them about the program knowing it would be a big help and that they will receive the help they need when/if they apply for the program."

Clients often cited the personal and emotional benefits of participating in the program, including the supportive relationships they developed and practical advice and encouragement received from their home visitors. An example of practical help was shared by one client, "When my baby was newborn we struggled with breastfeeding and weight gain and the nurse helped me to create a feeding system that greatly improved the health of my baby." Other benefits included positive feelings, motivation, more control over their lives, and feeling supported and belonging. One client described, "I was a strong marijuana user

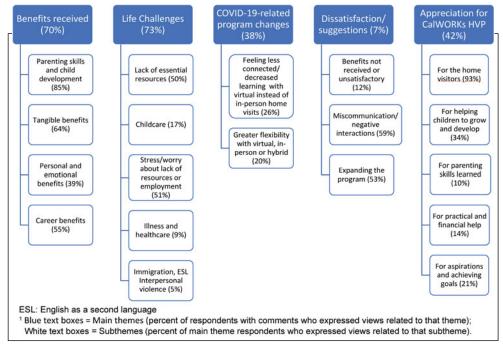


FIGURE Main Themes and Subthemes Arising From Clients' Free-Text Survey Comments^a Abbreviations: ESL, English as a second language; HVP, Home Visiting Program.

^aBlue text boxes: main themes (percentage of respondents with comments who expressed views related to that theme); white text boxes: subthemes (percentage of main theme respondents who expressed views related to that subtheme). This figure is available in color online (www.JPHMP.com).

TABLE 2

Additional Illustrative Quotes by Theme and Subtheme

Benefits Received From the Program

Parenting skills and child's development

- "When my son was only a few months old, my CalWORKs Home Visiting Program educator taught me various positions and techniques that helped my son's strength and endurance and has continued to do so. My son's physical milestones have always been at or above the average thanks to her help."
- "She [home visitor] not only helps with learning activities for the kids, she makes sure I have all resources I could possibly need to help me become a better parent."

Tangible benefits

- "How to make affordable toys for my 18-month-old. Got help with finding a good doctor, housing, lawyer, school. All these things I was able to get help with and it helped me maintain my stress level low which allowed me to be more attentive to my son."
- "I get counseling, they gave me a laptop, they are going to fix my car, they are helping me get more organized with my home business tracking hours/Income/expenses, and with my deadline to make minimum wage, it motivated me to go back to school. They can't help financially, but I got a Pell Grant, and I can get government loans."

Personal and emotional benefits

- "It gives me a sense of security to know that I have someone that I can directly call to help me get the resources that I need. I so feel more confident in my ability to parent my children through these trying and unsure times."
- "During COVID-19 I was very isolated and at risk for depression when my nurse recommended a family support group that helped my mental and physical well-being. This has been an amazing resource and I am very grateful for the help as a new parent."

Career benefits

- "I think without the home visiting program I wouldn't have gotten the courage to go to school and get my mental health services. It has been a very helpful program for me personally and for my daughter."

 "So my home [vicitor] support gave me resources so I can go back and get my GED and she helped me
- "So my home [visitor] support gave me resources so I can go back and get my GED and she helped me with all the steps to applying, I'm just one test away to receiving my GED."

Life Challenges

Lack of essential resources

- "It is nearly impossible to live in California going to school and receiving cash aid. If I have to work, then it will take me twice as long to earn my degree and we are still dirt poor . . . but if I don't work we are homeless."
- "[We] need more resources. I wish housing vouchers were accessible through this program."

Childcare

- "I won't be able to work if I get into the competitive program I am working towards for dental hygiene. I also don't know how I am going to be able to pick up my son from kindergarten and take him to the childcare while I am in school."
- "My children not having adequate day care or transportation services... for me working a full shift; Not enough room at one center or have trouble finding a place for all three."

Stress/worry about lack of resources or employment

- "I have a disability, but going to school and living independently is not an issue. Finding work might be a little more of a challenge because 70% of the population of people with visual impairment [are] unemployed."
- "I have been out of the work force for a while. I have been at home with my children. We have been staying at home due to COVID and my fear is I don't have consistent job history."

Illness and health care

"My children. They have upcoming procedures and surgeries and I'm awaiting a full knee replacement." "[I have] two underline illnesses, fibromyalgia and leukopenia and [we are] currently homeless."

Immigration, interpersonal violence, ESL

- "Living in a new environment and new language is big problem but I am doing my best to learn and help my family."
- "Expecting next baby in 3 months and dealing with a domestic violence situation. My first priority is getting out my living situation and into safe housing."

COVID-19 Pandemic-Related or Other Program Changes

Feeling less connected/decreased learning with virtual instead of in-person home visits

- "Because of the pandemic I was no longer able to meet in person for a whole year. I lost the connection the trust the bond with my workers. Even though we made contact by phone, it was never the same. I felt as if my time with my home visiting program was cut short. This made me sad, and thus I stopped looking forward to meeting with my workers."
- "[Home] visiting services have changed drastically [during the COVID-19 pandemic] because we haven't been able to meet as much and we've been very limited to contact so it has been a bit isolating and unfortunate that we haven't been able to interact as much."

Greater flexibility with virtual, in-person, or hybrid

- "COVID zoom meetings is an easy way to meet and I like it. I like that I can meet up with the other moms on zoom and I don't have to miss out because I can't drive."
- "We have had to do over the phone appointments because of needing outside visits and then the bad air quality but it never gets in the way of her dropping off or mailing our activities and resources needed. I can also reach her through email she is available even through the obstacles."

(continues)

TABLE 2

Additional Illustrative Quotes by Theme and Subtheme (Continued)

Client Dissatisfaction and Suggestions for Improvement

Benefits not received or unsatisfactory

- "My previous worker helped me jump through a bunch of hoops to get mental health help. I ended up having to do it on my own without the help of my worker. I also need legal help to file for full custody of my youngest daughter. I have not received help with that either. I have been doing this program for almost 10 months now. I feel like it has not done much in the way of helping. I've reached out for more help on my own then I've got from the program."
- "It's been more than six months already I believe people have gotten their stuff (\$500) ... I still have not received anything ... I thought all along my new baby would come home in a new car seat and sleep in a new bed, but nope."

Miscommunication/negative interactions

- "[The] only thing I would ask for is people who work for the Home Visiting Program to be more considerate and caring about us and what we go through and also know that we're humans also who have feelings and emotions."
- "My worker was supposed to give me information about immigration legal services but never heard back."

Expanding the program

- "This program has a lot to offer to us parents, especially with amazing people like the one that I got. She has helped me out like you don't have any idea. She helped me out through my toughest times just by listening to my problems and then she'll let me know what I could do to look for help, or things I can do to relax or to don't stress or just to be able to express myself. [It] is a great feeling. The only thing is that you guys need to advertise it more because I had never heard of this program before until that day and I accepted to participate."
- "Having more home visitors be people of color for clients who might feel more comfortable with such person."

Appreciation for the Program

For the home visitors

- "We have had to do over-the-phone appointment [then] outside visits and then the bad air quality stopped that [but] it never gets in the way of her dropping off or mailing our activities and resources needed. I can also reach her through email; she is available even through the obstacles."
- "My home advisor, [name of home visitor], has been a great asset to my family. She has shown me how to stimulate my children by play learning. She has helped me get a computer and take classes so that I can use these new skills to either go back to school or get a job when the time is right."

For promoting child's development

- "Even though parents may know these things about our children and how they grow or how to teach them, it is always a benefit to have others lead you and guide you cause as a parent there's times, we may need some help on teaching our children. I would really recommend this for all mommies to get more input on your child's milestones."
- "The program has helped me to raise my child. I learned a lot from raising a child thanks to this program. I am a good mom and patient one too. Seeing my daughter go through her milestones since she was a baby when she started is awesome. Now she is starting to speak, brushing her teeth in her own, being potty trained, learning how to sing songs. She likes to sit and look at pictures in the books. She is leaning her colors, now also trying to count. There is a lot I can go on with. [Child's name] is a very bright kid and I'd like to thank [home visitor] for helping me with a lot, including struggles Thank you to this program."

For parenting skills learned

- "[I have learned about] discipline, nutrition, bonding, childcare, parenting support during the pandemic shut down, attachment vitamins group, self-regulation, heathland boundaries, self-care reading cues, avoiding tantrums, safety in general, support reaching goals."
- "CalWORKs home visiting program has helped me grow and learn so much. Learning how to keep track on my child milestones is the best memories a mother can ever have. I've learned so much on parenting skills and how to calm my child down when my child is a little grumpy. But most of all my home visitor is the best I [could]'ve ever asked for; she has helped me become the women I am today."

For practical and financial help

- "I loved how [HVP] helped me during this pandemic financially, [with]my daughters learning activities and helped me with diapers I'm very blessed with this program."
- "So my home visitor gave me resources so I can go back and get my GED and she helped me with all the steps to applying; I'm just one test away to receiving my GED."

For aspiration and achieving goals

- "My [HVP] provider inspired me to enroll in school to become a drug and alcohol counselor."
- "My kids are changing in good ways since I've been doing the weekly meetings. I hope to get my son in school and help him be able to feel supported and capable of anything. I may struggle with learning to teach him alone. I'm very grateful for my worker and all she has helped me with."

Abbreviation: ESL, English as a second language.

before and during my pregnancy. My home visitor helped me learn how to cope with stress by bringing me pamphlets or she always showed me how to do breathing exercises. Also, she always had easy ways of me finding simple steps to do yoga online. That helped me quit smoking. Now I meditate and do yoga, which is awesome."

Benefits received related to job and career skills focused on practical and coaching support for clients to pursue employment or acquire education toward a career. One client remarked on the practical supports provided, "This program has helped me with a laptop which was the main tool I needed to further my education especially with COVID. Before I would just do homework at the library and now I have a personal laptop which has been a huge help especially in these times."

Life challenges

Many clients (73%) offered comments and provided detailed descriptions of the numerous and wideranging challenges that impeded their ability to pursue their goals and aspirations to give their children a better life, even with the benefits and supports of the CalWORKs HVP. These life challenges were grouped into the following subthemes: lack of essential resources, childcare, stress and worry about lack of resources and employment, child or caregiver illness and health care, and other issues related to immigration status, English as a second language, or interpersonal violence. Clients also commented on the added life challenges brought by the COVID-19 pandemic.

Clients commented most about resource challenges. For example, one client commented, "Money is very tight despite my full-time hospital job making minimum wage in an area where the cost of living unfortunately is very high does not set one up to succeed."

Childcare was a major life challenge. Concerns included the lack of availability and cost of quality childcare. The conflicting schedules with work or education presented challenges for clients. Many clients commented about struggles finding safe, affordable childcare that fits their schedules. For example, one client commented, "Finding childcare is a nightmare. It took me three months to find one with an opening and the hours are not realistic for working a full-time iob."

Clients also faced significant mental and emotional stress associated with poverty, such as worry about food and housing insecurity, finding a job, struggling with time management, lack of support, and worklife balance. Clients expressed many worries about needing to work so that their family's basic needs would be met and they also had many worries about reentering the workforce. For example, one client shared their worries about reentering the workforce, "Being afraid! I have been away from the job field for so long there are things that I know I have to re-learn. Also, I have to learn how to trust myself and know that I am capable of being a great worker like I once was."

Clients faced additional challenges because of their child's or their own health conditions. These health conditions interfered with their ability to participate in CalWORKs HVP and also in employment and educational opportunities, while creating additional financial and emotional strain. One client commented, "[I have] two underlying illnesses, fibromyalgia leukopenia...and [we're] currently homeless."

Few clients commented about challenges with language barriers, immigration challenges, or domestic violence, and yet these comments are compelling. Notably, most of these comments were from clients where Spanish was their primary language. One client shared, "In my case, I'm dealing with a domestic violence situation and my CalWORKs case manager has been very helpful. She connected me with a program that got me out the house for two weeks and paid for a hotel. With that time, I was able to fill out housing applications, which she provided me with, and connected me with other supportive people in the community."

The COVID-19 pandemic added to the existing life challenges faced by clients, particularly for first-time parents. One client shared their experience with the emotional stress of the pandemic and how the program helped them cope. "With the current pandemic happening it's been stressful repeatedly explaining why I can't take my son to the park or why he has to wear a mask. Learning to cope with everything hasn't been easy but it has definitely helped to know that I'm not alone and that I have help if needed."

COVID-19 pandemic-related or other program changes

Clients also experienced changes to the CalWORKs HVP because of COVID-19-related disruption to services or from program disruption due to other major regional or national events, for example, the California wildfires that occurred during the same period. Overall, 38% of clients commented about COVID-19 pandemic–related program changes, with some of the participants noting a negative change and others commenting on positive benefits from the program

Some of the comments related to negative changes resulting from the lack of in-person or in-home

165

contact, such as experienced by this client, "Well my worker can't visit and show me steps on taking better care of my child. Having her come by the house made it so easy for me to understand and see what I was doing wrong, and she was able to help me and show me how to fix it. I'm a first-time mom and I needed that interaction with my worker. Because she took the time out of her day to show me step by step on what I needed to do. She also helped me make monthly goals for mine and my daughter's life. COVID-19 really messed things up for me. Not having family here is hard enough and my worker always made me feel like family." There were comments by other clients who viewed the change to virtual home visiting as negative cited feelings of being less connected and not learning as much as they would have with in-person home visiting. One client explained, "COVID kind of ruined the whole thing. It's hard to figure out the activities without our parent educator and my child does not want to participate over Zoom on the phone. The in-person visits were also good for helping my child socialize."

In contrast, some clients described how the COVID-19–related program changes were positive and brought greater flexibility and ability to participate in program activities. One client described the program changes, "Our meetings are over the phone which is fine. Between phone visits we communicate often by text or email. Occasionally, I have to go to the office to pick up diapers or gift cards. The protocol has changed slightly but I feel comfortable with the process." The flexibility and skilled communications of CalWORKs HVP staff either in-person or with technology-assisted contact were strengths of the program that some clients appreciated.

Client dissatisfaction and suggestions for improvement

Few clients (7%) expressed direct dissatisfaction with the program beyond the disruption caused by COVID-19 pandemic-related program changes. The comments expressing dissatisfaction related to problems with receiving some of the promised tangible program benefits such as the \$500 cash payment or other resources such as car seats or diapers. Some of the comments expressing dissatisfaction indicated miscommunication between home visitors or other CalWORKs HVP staff or differences in expectations about program benefits. One client commented, "Be more reliable. If you tell a family you're going to help and offer assistance or supplies, please follow through. It's disappointing being let down, and or not receiving the help you thought you were gonna get." Although relatively rare, negative interactions

with program staff members led to significant dissatisfaction for clients. This highlights the importance of communication and positive relationships between staff and clients.

Some clients used the free-text comments to offer suggestions on how the program could be improved, and these comments focused on extending eligibility, services, and marketing of the program to reach more people. For example, one client said, "I would like the program to be extended for [children] 3-4 years of age for the reason that I can be prepared for him to get ready for school/childcare/preschool. The program is short and is really helpful in every way, and I would appreciate more time."

Appreciation for the program

Overall, 42% of clients used the invitation to provide free-text comments in the survey to express appreciation for the program and they provided a wide range of examples of how the program helped them and their children. There were expressions of appreciation for all of the program offerings. Almost half (47%) of the expressions of appreciation were for the home visitor and the many ways in which the home visitors provided relational support to the clients. One client wrote, "She helps me with resources and actually makes me feel appreciated and accepted. She has helped me identify a lot of things about myself and always offers ways to help. I used to feel so alone, but now I feel like I have the program and [name of Home Visitor]. She goes above and beyond for me and checks on me even when we don't have visits."

Appreciation was also expressed for how the programming and home visitor supported their child's development. One client commented, "Learning with my child is an everyday process. Seeing my baby learn is such a wonderful thing. And also, teaching her how to do things and [learn] words is such fun. My home visitor has me on the right path of what to look for and how to teach my baby. My home visitor is awesome."

Clients expressed appreciation for the parenting skills learned in the program. One client contrasted her experience with that of other mothers who were not in the program, "I've talked with moms on their third child that have been astonished at how much support I've been given thanks to the nurse and the program, and I have shared knowledge with them that I'm sure eases their stress and/or keeps them informed about their child. It's made such a difference. I came into parenthood never before caring for infants or babies and I was nervous but the nurse made me feel so empowered and confident." Clients who were first-time or single parents expressed gratitude for

how the program supported their specific needs. One first-time parent described, "I think for myself, the Home Visiting Program has been a very big part of my daughter's life and my own, I will always look back as this playing a huge role in this family of two. Have been so helpful, so supportive in my child's development and my own as a first-time parent."

Clients also expressed appreciation for the educational and financial support, which enabled them to pursue their goals and aspirations for a better future for themselves and their children. For themselves, they primarily described educational and career aspirations and discussed how they were striving to improve their lives for the sake of their children. One client expressed, "I want to enroll in school but I have a toddler and that was my fear to leave my child at a day care. Since the program, I have learned to face my fears and when this epidemic is over, I'm going to enroll." For their children, they described their hopes for their children to be kept safe and healthy as they grow and develop.

Discussion

The benefits of home visiting for improving health and economic outcomes for low-income and at-risk pregnant and parenting individuals are well established in the research literature, and home visiting scale-up is underway in many regions of the United States. Our findings provide insights into the benefits and challenges experienced by CalWORKs HVP clients who received evidence-based home visiting services during a global pandemic. The 5 main themes drawn from the data support our a priori premise of the importance of the relationship with the home visitor, the value to clients from services and referrals received through program participation, and the impact of COVID-19 pandemic-related program changes on the client and family experience. The findings revealed ongoing challenges for clients related to lack of essential resources, balancing parenting with the need to pay for housing, food, and other essentials, or pursue education.

Our findings strongly suggest that clients recognize and value the breadth of benefits received, including the practical, financial, parenting, and interpersonal support. They greatly appreciate individualized and relational support offered by a consistent home visitor. Our findings also draw attention to the ongoing life challenges faced by clients who experience poverty and how those challenges were exacerbated by a global pandemic. Clients experienced significant programmatic changes related to COVID-19 public health safety and organizational constraints, and their views on the impact of those changes varied from positive to negative. Few clients experienced overt

dissatisfaction with the program and a small number offered suggestions for improved outreach and access. Overall, clients expressed strong appreciation for the program benefits and for the positive relationships they and their children developed with their home visitor. Our findings also suggest that the CalWORKs HVP may buffer to some degree the substantial personal stresses clients experience related to parenting in the context of poverty and other major public health challenges.

Limited data are available about the impact of COVID-19 pandemic service–related disruptions on home visiting services delivery and outcomes. We found two analyses of the pivot from in-person to virtual visits for home visiting programs. One evaluation focused on staffs' perceptions of programmatic

Implications for Policy & Practice

- CalWORKs HVP is unique among home visiting programs in that it is imbedded within a larger program of economic and employment assistance for low-income pregnant and parenting individuals.⁵ The benefits of the home visiting services and the economic and employment components of the comprehensive programing are highly valued by clients.
- Other home visiting programs should consider to intentionally partner with social, educational, and economic agencies to provide a holistic program of support to address the many life challenges faced by clients.
- The COVID-19 pandemic led to significant modifications to the programming, most notably pivoting from in-person to virtual services. Given that this change was perceived positively by some clients and negatively by others, home visiting programs should consider offering both in-person and virtual services in the future to maximally engage with and serve clients according to their needs and preferences. Attention must also be given to addressing technology access and affordability so as not to exacerbate disparities.
- Central to the benefits described and the appreciation expressed is the trusting relationship established between home visitors and their clients and maintained over a period of one to several years. For sustainable success of programs that rely on building strong, long-term relationships, organizational policies and practices must be in place to recruit, develop, and retain a workforce with the necessary expertise, empathy, and communication skills.
- Finally, the structural barriers that prevent clients from aspiring to and achieving economic self-sufficiency while parenting need to be addressed so that clients are enabled to join and complete the program with realistic hope that it will enable them to provide a brighter future for their children.

changes in Florida's statewide home visiting program and noted that in addition to shifting from in-person to virtual visits, home visiting programs increased tangible and practical support offerings to clients.¹⁵ Two evaluations, one in Durham, North Carolina,¹⁶ and one in Los Angeles, California,¹⁷ compared home visiting before and during the pandemic, finding small variations in missed visits, completed visits, and visit length. No data were provided on the clients' perceptions of the program changes. Our findings suggest that some clients welcomed the increased flexibility and potential for additional contact enabled by virtual technology, whereas other clients felt less supported and more isolated because of the shift from in-person to virtual contact.

Limitations

The findings from this analysis should be considered in light of its limitations and strengths. Although we had a large sample that was representative of the home visiting population served, it may not be representative of the views of all the clients, especially those from hard-to-reach communities such as those with low literacy, lack of Internet or cell phones, and those who had left the program. Strengths of the study include the extensive comments provided by a large and representative subset of those who completed the survey.

References

- Avellar S, Paulsell D, Sama-Miller E, Del Grosso P, Akers L, Kleinman R; Office of Planning, Research and Evaluation, Administration for Children and Families, US Department of Health and Human Services. Home visiting evidence of effectiveness review: executive summary. http://homvee.acf.hhs.gov/HomVEE_ Executive_Summary_2015.pdf. Published 2015. Accessed July 17, 2023
- Peacock S, Konrad S, Watson E, Nickel D, Muhajarine N. Effectiveness of home visiting programs on child outcomes: a systematic review. BMC Public Health. 2013;13:17.

- 3. Duffee JH, Mendelsohn AL, Kuo AA, et al. Early childhood home visiting. *Pediatrics*. 2017;140(3):e20172150.
- California Department of Social Services. California Work Opportunity and Responsibility to Kids (CalWORKs) Home Visiting Program. https://www.cdss.ca.gov/inforesources/calworkshome visitinginitiative. Accessed July 17, 2023.
- California Department of Social Services. California Work Opportunity and Responsibility to Kids (CalWORKs). https://www.cdss.ca.gov/calworks. Accessed July 17, 2023.
- US Department of Health and Human Services, Health Resources and Services Administration. Demonstrating improvement in the maternal, infant and early childhood home visiting program. A report to Congress. https://mchb.hrsa.gov/sites/default/files/mchb/ programs-impact/reportcongress-homevisiting.pdf. Published 2016. Accessed July 17, 2023.
- US Department of Health and Human Services. Home Visiting Evidence of Effectiveness (HOMVEE). https://homvee.acf.hhs.gov/ model-search. Accessed July 17, 2023.
- Office of Governor Gavin Newsom. Proclamation of a state of emergency. https://www.gov.ca.gov/2020/03/04/governor-newsom-declares-state-of-emergency-to-help-state-prepare-for-broader-spread-of-covid-19/Last. Published March 4, 2020. Accessed July 17, 2023.
- Bäckström C, Thorstensson S, Pihlblad J, Forsman AC, Larsson M. Parents' experiences of receiving professional support through extended home visits during pregnancy and early childhood—a phenomenographic study. Front Public Health. 2021;9:578917.
- Lowe K, Cartagena D, Gudger K. Evaluation of a home visiting program: perspectives of mothers. Home Healthc Now. 2021;39(2): 91-98.
- Nygren P, Green B, Winters K, Rockhill A. What's happening during home visits? Exploring the relationship of home visiting content and dosage to parenting outcomes. *Matern Child Health J.* 2018; 22(suppl 1):52-61.
- Franck LS, Mehra R, Remy L, Rienks J. Home visiting in California during the first two years of the COVID-19 pandemic: a repeated cross-sectional study of low-income pregnant and parenting caregivers. Under review.
- Miles MB, Huberman AM. Qualitative Data Analysis: An Expanded Sourcebook. 2nd ed. Thousand Oaks, CA: Sage Publications, Inc; 1994:xiv, 338-xiv.
- 14. Hsieh HF, Shannon SE. Three approaches to qualitative content analysis. *Qual Health Res.* 2005;15(9):1277-1288.
- Marshall J, Kihlström L, Buro A, et al. Statewide implementation of virtual perinatal home visiting during COVID-19. Matern Child Health J. 2020;24(10):1224-1230.
- Bock MJ, Kakavand K, Careaga D, Gozalians S. Shifting from inperson to virtual home visiting in Los Angeles County: impact on programmatic outcomes. *Matern Child Health J.* 2021;25(7):1025-1030
- Rybińska A, Best DL, Goodman WB, Bai Y, Dodge KA. Transitioning to virtual interaction during the COVID-19 pandemic: impact on the family connects postpartum home visiting program activity. *Infant Ment Health J.* 2022;43(1):159-172.