

Introduction and Methods

The Region X Home Visiting Workforce study collected data from 629 home visiting professionals in the Health Resources and Services Administration's (HRSA) Region X, which includes Alaska, Idaho, Oregon, and Washington. Researchers recruited participants from 147 home visiting organizations in the region that used an evidence-based home visiting model approved by Maternal, Infant, and Early Childhood Home Visiting grantees (MIECHV) (see <http://homvee.acf.hhs.gov> for a complete list) or work for an organization that used "promising practices" or evidence-informed models as defined by criteria determined by the states comprising Region X.

The survey focused on identifying current strengths, gaps, and unmet needs in the home visiting workforce and asked questions about respondents' personal characteristics, education background, the nature of their work, the quality of their work environment, and their health and well-being. We invited survey respondents who left their jobs within six months following completion of the survey to complete a short exit survey. Researchers also conducted telephone interviews with 20 respondents to the initial survey.

Predictors of Job Role

Home visiting professionals with:

- A master's degree
- More early childhood education experience
- Less direct home visiting experience

Are **more likely** to be a supervisor



This analytic model accounts for educational attainment, area of study, years of experience in early childhood education and as a home visitor, and race

SAMPLE

WORKFORCE SURVEY

468 home visitors,
161 home visiting supervisors (29% of whom carry a caseload)

EXIT SURVEY

21 home visitors

INTERVIEWS

14 home visitors,
6 supervisors

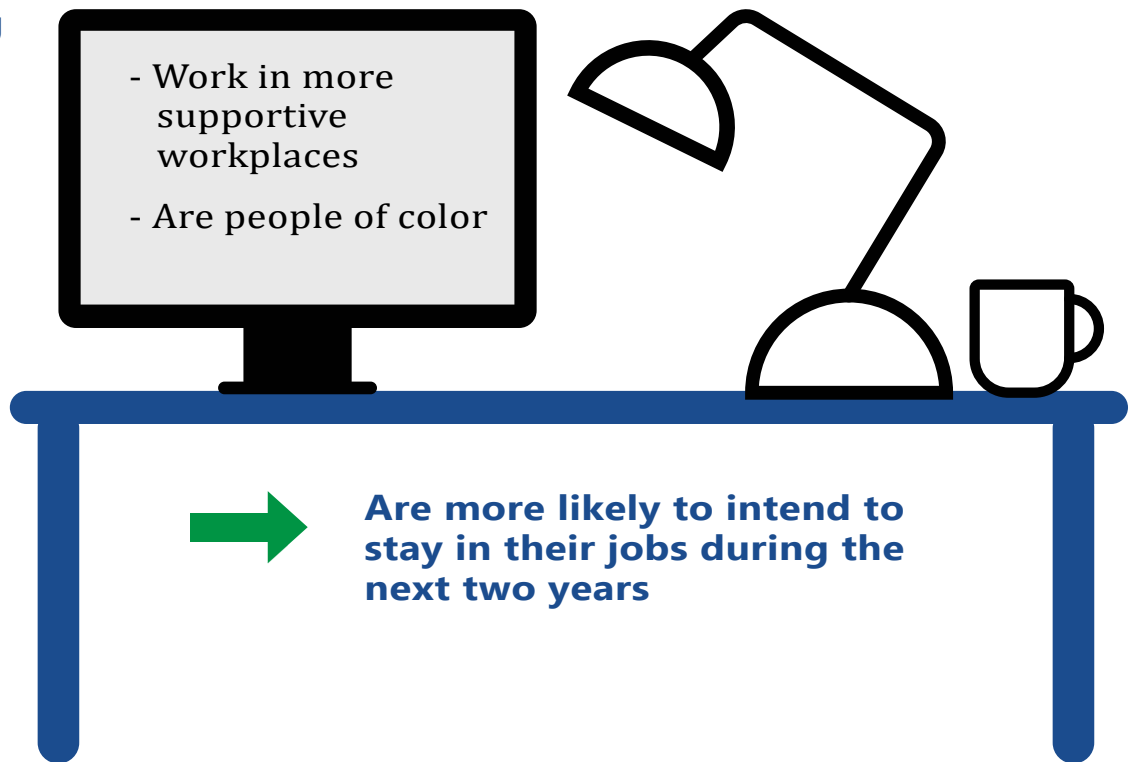
Predictors of Hourly Pay



This analytic model accounts for: educational attainment, area of study, years of experience, job role, and race.

Predictors of Intent to Stay

Home visiting professionals who:



This analytic model accounts for adverse childhood experiences (ACEs), reflective supervision, psychological climate, pay, hours work per week, hours spent doing paperwork, caseload, age, job role, and race

Predictors of Health Status

Depression:

Home visiting professionals who:

- Have more ACEs
- Lack access to behavioral health services
- Have less supportive reflective supervision
- Have fewer employer-sponsored benefits



Are more likely to report symptoms of depression



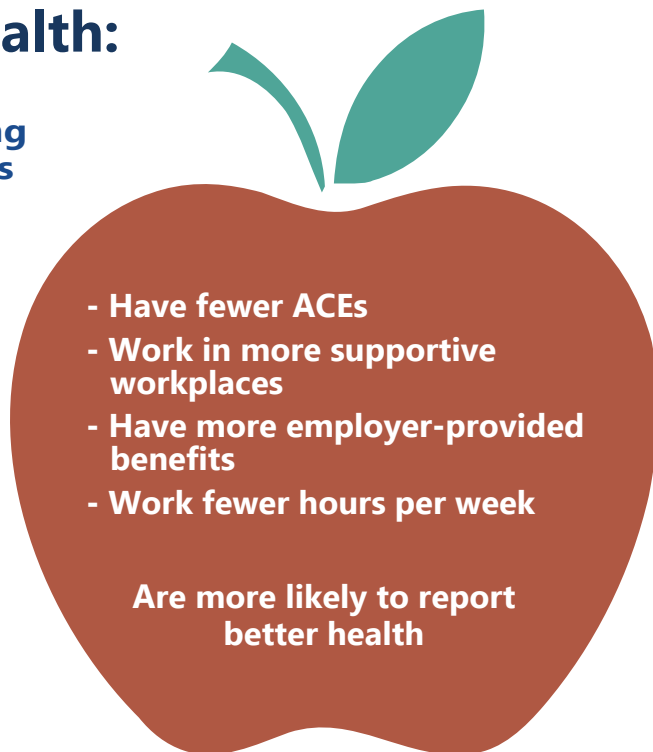
This analytic model accounts for ACEs, reflective supervision, psychological climate, pay, hours work per week, hours spent doing paperwork, caseload, age, job role, and race

Overall Health:

Home visiting professionals who:

- Have fewer ACEs
- Work in more supportive workplaces
- Have more employer-provided benefits
- Work fewer hours per week

Are more likely to report better health



This analytic model accounts for ACEs, reflective supervision, psychological climate, pay, hours work per week, hours spent doing paperwork, caseload, age, job role, and race