



Region X Innovation Grant

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Growing Together to Support Our Home Visiting Workforce

# Region X Home Visiting Workforce Study



## RESEARCH BRIEF #2

Job Characteristics of the Region X Home Visiting Workforce

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This research brief is the second in a series that is part of the *Region X Home Visiting Workforce Study* funded by the *Region X Innovation Grant* at the Washington Department of Children, Youth, and Families, in partnership with the Alaska Division of Public Health, the Idaho Department of Health and Welfare, and the Oregon Health Authority. The study was designed to identify the current strengths, gaps, and unmet needs in the home visiting workforce in Region X to inform workforce recruitment, retention, and professional development efforts. For more information about the study, please see *The Region X Home Visiting Workforce Study: Introduction*.<sup>vii</sup>

## Key Findings

Across Region X, home visitors report using eighteen different home visiting models; approximately one-quarter of home visitors in the region regularly deliver services using two or more home visiting models.

As a region, median home visitors' wages were \$19.22 per hour, while supervisors' were \$26.08 per hour.

Over one-quarter of home visitors who have at least one year of experience have not received a raise in over a year.

On average, home visitors and supervisors in Region X are offered approximately nine benefit options as part of their employment. The most common benefits offered include: health insurance, paid vacation days, dental insurance, paid sick days, mileage reimbursement, vision insurance, and employer-contributed retirement savings. One of the least common benefit offerings is tuition reimbursement.

Regionally, 23.4% of home visitors and 17.4% of supervisors receive public assistance, and use an average of 2.2 and 1.6 public assistance services, respectively. The most common public assistance services received are child health subsidies, Medicare/Medicaid, and free and reduced lunch.

Approximately one-third of Region X home visitors and over half of Region X supervisors report working longer hours than their paid hours suggest. Nearly half of the regional sample conducts home visits in the evenings (after 5:00pm).

Across the region, home visitors carry an average caseload of 16.0 families, and home visiting supervisors carry an average caseload of 10.5 families, of which they visit approximately 8.9 and 4.0 families, respectively, each week. Over 80% of home visits last longer than 60 minutes.

Home visitors across the region spend the largest amount of time each week delivering face-to-face home visitation services (12.9 hours on average). They also report spending 10.1 hours each week completing paperwork.

Families on Region X home visitors' caseloads are under stress: two-thirds are low-income, one-third experience family health / mental health issues, and one in five has a special needs child and/or has experience domestic violence.

Home visitors share common racial, ethnic, or cultural traits with fewer than half of the families they serve; approximately one-third of families speak a different language than their home visitors.






# Introduction


Evidence shows that home visiting can support positive outcomes for parents and children.<sup>i</sup> The effectiveness of home visiting programs depends, in part, on the home visitor. Home visitors must be knowledgeable in the content and delivery of the home visiting model, and they must effectively communicate with multiple families in their caseload, build and sustain relationships, and adhere to professional requirements and policies. Given how integral home visitors are to the success of home visiting programs, it is important to understand the characteristics of the home visiting workforce, including the home visiting models they use, their compensation and work schedules, their caseloads and responsibilities, and the characteristics of the families they serve, all of which can vary across and within regions.

There are a variety of home visiting models that programs and individuals can implement. In a recent review, 45 home visiting models were identified.<sup>ii</sup> These models vary in the training and experience required, screening and assessment tools used, scope and sequence of topics addressed with families, and overall duration of the home visiting program. Furthermore, individual home visitors may implement elements of multiple home visiting models. Given this complexity, it is necessary to understand the home visiting model(s) used because the model can determine the scope, sequence, and requirements of the home visitor's work, as well as how and how often home visitors engage with families.

Relatedly, home visitors can experience different pay structures, wages, and employer-sponsored benefits based on location, employer, training, experience, and program models. The low wages of the early childhood field, which includes home visitors, has been well-documented.<sup>iii</sup> Understanding home visitors' compensation, along with their utilization of public assistance, can determine the extent to which the home visiting workforce is receiving living wages and what further supports are needed. Further, it is important to understand home visitors' work schedules, responsibilities, and caseloads, including the number and characteristics of families served, which may relate to compensation and, ultimately, financial stability, personal health and well-being, job satisfaction, and work-life balance.



Understanding home visitors' compensation, along with their utilization of public assistance, can determine the extent to which the home visiting workforce is receiving living wages and what further supports are needed.





Families are at the heart of home visiting. Families may experience stressors, such as poverty, domestic violence, substance abuse, or health issues.<sup>iv</sup> On the part of the home visitor, the opportunity to work with these families may be a source of fulfillment or “compassion satisfaction,” but it may also be a source of stress or “compassion fatigue.”<sup>v</sup> Additionally, past research has shown that families were more engaged in home visiting when programs matched a greater proportion of home visitors to families in terms of sociodemographic characteristics (e.g., race or ethnicity).<sup>vi</sup> In sum, the characteristics of the families served, including life experiences and sociodemographic characteristics, provides greater insight into the experience of home visitors.



## Research Questions

The purpose of this research brief is to address the following questions based on a sample of home visitors and home visiting supervisors in Region X:

- ① What home visiting models are used?
- ② What are the compensation structures and work schedules?
- ③ What are the caseloads and job responsibilities?
- ④ What are the characteristics of families?

# Sample

The sample used for this research brief includes 468 home visitors who provide home visiting services directly to families, and 161 home visiting supervisors, 29% of whom have a caseload of families they serve. These home visitors and supervisors were drawn from 148 programs in Alaska, Idaho, Oregon, and Washington, collectively known as Region X. Within the sample, 202 (43.2%) home visitors and 76 (47.2%) home visiting supervisors work in home visiting programs that receive MIECHV funding. Thirty-eight percent of programs in the sample reported receiving MIECHV funding. For more information about the sample and the measures used for this study, please see *The Region X Home Visiting Workforce Study*.<sup>vii</sup>

## Results

### Research Question 1: What Home Visiting Models Are Used?

For the purposes of this study, state agency partners from Region X identified criteria for including programs in the study recruitment. In particular, they identified home visiting programs that are:

- Voluntary for families to join
- High-dosage/long-term
- Evidence-based or based on promising practices
- Serving prenatal/birth through early childhood populations
- Using a home visiting model or curriculum

In addition, Alaska included programs that provide home visiting services in the context of other specialized services, such as Part C early intervention.

Across the region, the study sample reported using a variety of home visiting models. Table 2.1 shows that home visitors and supervisors in the sample are using eighteen different home visiting models across the four states. The most frequently reported model in each state and for the region as a whole is highlighted. Home visitors and supervisors in Idaho and Washington identified Parents as Teachers most frequently, while the samples in Alaska and Oregon most frequently identified Infant Learning Programs and Healthy Families America, respectively. For the region as a whole, Parents as Teachers was the most frequently reported model (37.4%). Three models are used in all four states within Region X: Early Head Start, Nurse Family Partnership, and Parents as Teachers. Of the programs receiving MIECHV funding all models present in Table 2.1 are represented except for Infant Learning Programs.



**Table 2.1. HV Model Use by State**

Model	AK n = 6-37	ID n = 10-23	OR n = 9-97	WA n = 12-118	Region X n = 16-235
Babies First	--	--	8.4%	--	3.3%
CaCoon	--	--	6.4%	--	2.5%
Early Head Start: Home Visiting	23.1%	24.4%	22.5%	23.8%	23.2%
Growing Great Kids	--	--	9.2%	--	3.7%
Healthy Families America	--	--	39.0%	--	15.9%
Infant Learning Programs*	47.4%	--	--	--	7.2%
Nurse Family Partnership	9.0%	24.4%	11.2%	30.3%	19.7%
Parent-Child Home Program	--	--	4.8%	12.3%	7.3%
Parents as Teachers	28.2%	56.1%	28.9%	45.2%	37.4%
Play and Learning Strategies	7.7%	--	3.6%	4.6%	4.3%
Other Models**	7.7%	--	13.3%	7.3%	9.4%

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\*Infant Learning Programs (ILP) do not adhere to a home visiting model and provide services under Part C. In Alaska, ILPs provide the majority of home visiting services statewide.

\*\*Other Models represents models with fewer than 5 cases in each state. These include Child Parent Psychotherapy, Early Steps to School Success, Family Spirit, and Parent Child Home Program.

\*\*\*HV models are not mutually exclusive and column totals may exceed 100%.

While 75.1% of home visitors and supervisors reported using a single home visiting model in their practice, approximately one-quarter of the sample (24.9%) reported using two or more home visiting models (Table 2.2). Across the region, most respondents delivering more than one model reported using two models (18.8%), although a small percentage (6.2%) reported using three or more.

**Table 2.2. Percent of Home Visitors and Supervisors Delivering Multiple Models**

Number of HV Models Delivered	AK n = 74	ID n = 41	OR n = 235	WA n = 249	Region X n = 599
<b>1</b>	79.7%	95.1%	63.8%	81.1%	75.1%
<b>2 or more</b>	20.3%	4.9%	36.2%	18.9%	24.9%

In instances where home visitors and supervisors reported using multiple home visiting models in their work, the most common combinations of models included:

- Parents as Teachers, Early Head Start: Home Visiting
- Parents as Teachers, Healthy Families America

## Research Question 2: What Are Home Visitors' and Supervisors' Compensation Structures and Work Schedules?

In this section, we provide descriptive information on pay, benefits, employment status, and work hours of the sample of home visitors and home visiting supervisors in Region X.

### PAY

Figure 2.1 displays the average hourly pay for home visitors and supervisors, respectively; data are displayed for each state and for the region as a whole. There were significant differences found in the average hourly pay of the sample based on job role ( $t = -7.26, p < .001$ ), with home visiting supervisors earning approximately \$5.75 more per hour, on average, than home visitors. As a region, home visitors averaged \$22.65 per hour, while supervisors averaged \$28.40 hourly. Median wages were \$19.22 per hour and \$26.08 respectively.

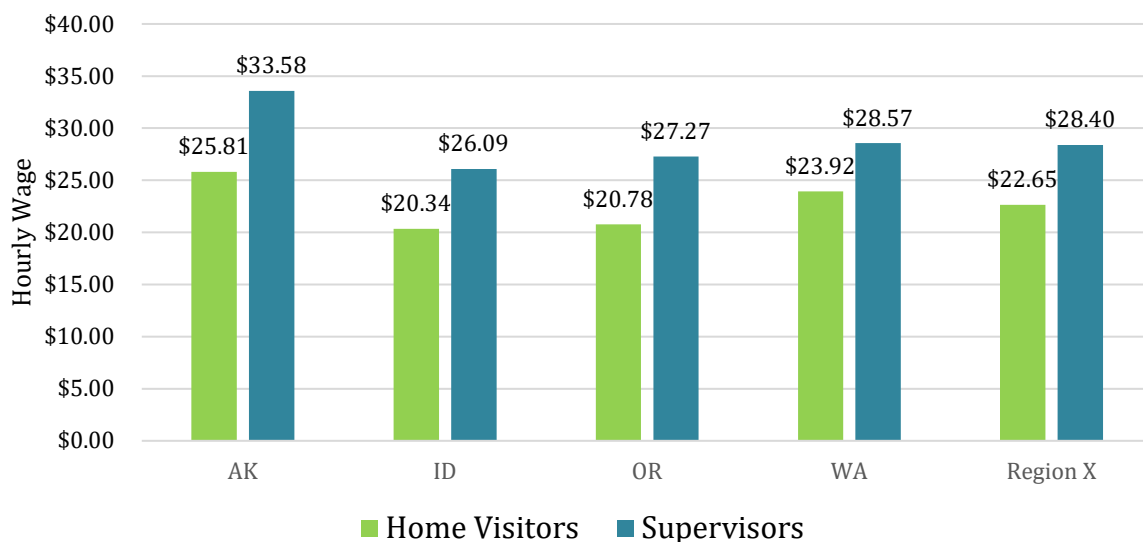


Figure 2.1. Average Hourly Pay

Most home visitors in the region (62.1%) earn between \$15.00 and \$25.00 per hour, although a small percentage (8.1%) earn less than \$15.00/hour and over a third (29.7%) earn more than \$25.00/hour. Salaries for supervisors trend higher, with 41.9% of supervisors reporting wages of \$30.00/hour or more. Table 2.3 shows the distribution of pay across wage categories, broken down by state and job role. On average, supervisors

earned between \$5.00 and \$8.00 per hour more. Differences in pay between home visitors and supervisors were significant in each state.<sup>1</sup> Across states in the region, differences in pay were statistically significant for home visitors ( $F(3, 450) = 9.00$ ,  $p < .001$ ) but not for supervisors ( $F(3, 140) = 2.31$ ,  $p < .08$ ). Home visitor salaries in Alaska were significantly higher than in Idaho and Oregon ( $p = 0.012$ , and  $p < 0.001$ ) and HV salaries in Washington were significantly higher than those in Oregon ( $p < 0.001$ ).<sup>2</sup>

**Table 2.3.** Home Visitors' Reported Hourly Wages

Hourly Wage	Alaska n = 57	Idaho n = 30	Oregon n = 184	Washington n = 183	Region X n = 454
<i>Home Visitors</i>					
Under \$15.00	--	20.0%	12.4%	4.8%	8.1%
\$15.00–\$19.99	34.5%	24.0%	55.6%	44.0%	46.3%
\$20.00–\$24.99	21.8%	36.0%	13.0%	13.7%	15.8%
\$25.00–\$29.99	16.4%	20.0%	5.3%	8.9%	9.1%
\$30.00–\$34.99	10.9%	--	4.7%	14.3%	9.1%
Over \$35.00	16.4%	--	8.9%	14.2%	11.5%
	Alaska n = 15	Idaho n = 11	Oregon n = 56	Washington n = 62	Region X n = 144
Under \$30.00	--	--	62.3%	59.4%	58.0%
\$30.00 and over	--	--	37.7%	40.7%	41.9%

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<sup>1</sup> AK:  $t(70) = 3.2$   $p = 0.002$ ; ID:  $t(39) = 3.2$   $p = 0.003$ ; OR:  $t(238) = 5.8$   $p < 0.001$ ; WA:  $t(243) = 3.5$   $p < 0.001$

<sup>2</sup> Based on results of Tukey post-hoc tests

## WAGE INCREASES

Within each state and across the region, over half of all home visitors and supervisors (58.7%) have received a wage increase within the past year. Table 2.4 shows that 28.2% of home visitors and supervisors regionally have not received a raise in more than a year, although this proportion varies by state. Across the region, some respondents (13.1%) also reported never having received a wage increase. Over three-quarters (79.0%) of those who have never received a wage increase have been in their jobs one year or less, indicating that approximately 17 home visitors / supervisors in Region X have worked longer than one year in their jobs without a wage increase.

**Table 2.4.** Time since Last Wage Increase

<b>Time Since Last Wage Increase</b>	<b>Alaska</b> n = 76	<b>Idaho</b> n = 41	<b>Oregon</b> n = 243	<b>Washington</b> n = 253	<b>Region X</b> n = 613
Less than one year	64.5	61.0	56.8	58.5	58.7
1+ years	28.9	17.1	30.0	28.1	28.2
No wage increase	6.6	22.0	13.2	13.4	13.1

\* This table combines home visitor and supervisor data, since some cell sizes were too small to display results broken out by job role.

## BENEFITS

Across Region X, home visitors and supervisors are offered an average of 9 benefit options from their employers (Tables 2.5 and 2.6). The most common benefits offered include health insurance, paid vacation and sick days, and dental insurance, with over 90% of home visitors and supervisors regionally reporting these benefits as available through their organizations. Other common benefits offered to home visitors and supervisors include mileage reimbursement, vision insurance, and employer-contribution retirement savings, with more than 75% of home visitors and supervisors reporting having these options available. Between 50–75% of home visitors and supervisors in the sample have access to employer-sponsored life insurance, paid professional development, and disability insurance. Less common benefit options for both home visitors and supervisors across the region include paid family leave, long-term care insurance, and tuition reimbursement. These options are offered to approximately 20–40% of home visitors and supervisors regionally. Notably, home visitors and supervisors in Alaska have relatively more access to tuition reimbursement (46.7% and 55.6% respectively) than home

“And then when I came to the new organization . . . they had some opportunities where they would be able to pay for some of my classes. . . I’d try to take as many classes as I could take that they were willing to pay for.”

—Supervisor

visitors and supervisors across the region as a whole (22.4% and 19.9%) respectively. Differences across states varied significantly for both home visitors ( $\chi^2(3, N = 468) = 28.50, p = <.001$ ) and supervisors ( $\chi^2(3, N = 161) = 18.02, p = <.001$ ).

**Table 2.5. Benefits Offered to Home Visitors**

<b>Benefits Offered</b>	<b>AK n = 60</b>	<b>ID n = 30</b>	<b>OR n = 186</b>	<b>WA n = 192</b>	<b>Region X n = 468</b>
<b>Home Visitors</b>					
<b>Mean # of Benefits Offered</b>	<b>9.5</b>	<b>8.7</b>	<b>9.3</b>	<b>9.1</b>	<b>9.2</b>
Health Insurance	91.7%	90.0%	95.7%	91.7%	93.2%
Paid Vacation Days	95.0%	96.7%	96.2%	86.5%	92.1%
Dental Insurance	91.7%	83.3%	93.0%	89.1%	90.6%
Paid Sick Days	75.0%	96.7%	94.1%	89.6%	90.0%
Mileage Reimbursement	93.3%	73.3%	85.5%	86.5%	86.1%
Vision Insurance	83.3%	83.3%	80.1%	83.3%	82.1%
Retirement Savings (Employer contributed)	81.7%	83.3%	78.5%	76.0%	78.2%
Life Insurance	73.3%	66.7%	74.7%	72.4%	73.1%
Paid Professional Development	78.3%	63.3%	61.3%	64.6%	65.0%
Disability Insurance	58.3%	43.3%	54.8%	49.0%	52.1%
Paid Family Leave	31.7%	40.0%	44.6%	40.6%	41.0%
Long-Term Care Insurance	35.0%	--	37.1%	26.0%	30.8%
Tuition Reimbursement	46.7%	--	22.0%	18.2%	22.4%

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**Table 2.6. Benefits Offered to Supervisors**

<b>Benefits Offered</b>	<b>AK n = 18</b>	<b>ID n = 11</b>	<b>OR n = 63</b>	<b>WA n = 69</b>	<b>Region X n = 161</b>
<b>Supervisors</b>					
<b>Mean # of Benefits Offered</b>	<b>10.2</b>	<b>9.4</b>	<b>9.0</b>	<b>9.0</b>	<b>9.1</b>
Paid Vacation Days	100.0%	100.0%	92.1%	94.2%	94.4%
Health Insurance	100.0%	100.0%	90.5%	94.2%	93.8%
Paid Sick Days	83.3%	100.0%	92.1%	95.7%	93.2%
Dental Insurance	100.0%	100.0%	88.9%	88.4%	90.7%
Mileage Reimbursement	100.0%	81.8%	87.3%	88.4%	88.8%
Vision Insurance	77.8%	100.0%	73.0%	81.2%	78.9%
Retirement Savings (Employer contributed)	83.3%	100.0%	77.8%	72.5%	77.6%
Life Insurance	88.9%	90.9%	69.8%	65.2%	71.4%
Paid Professional Development	88.9%	63.6%	60.3%	68.1%	67.1%
Disability Insurance	66.7%	45.5%	60.3%	52.2%	56.5%
Paid Family Leave	27.8%	--	27.0%	31.9%	29.8%
Long-Term Care Insurance	44.4%	--	27.0%	21.7%	26.1%
Tuition Reimbursement	55.6%	--	17.5%	15.9%	19.9%

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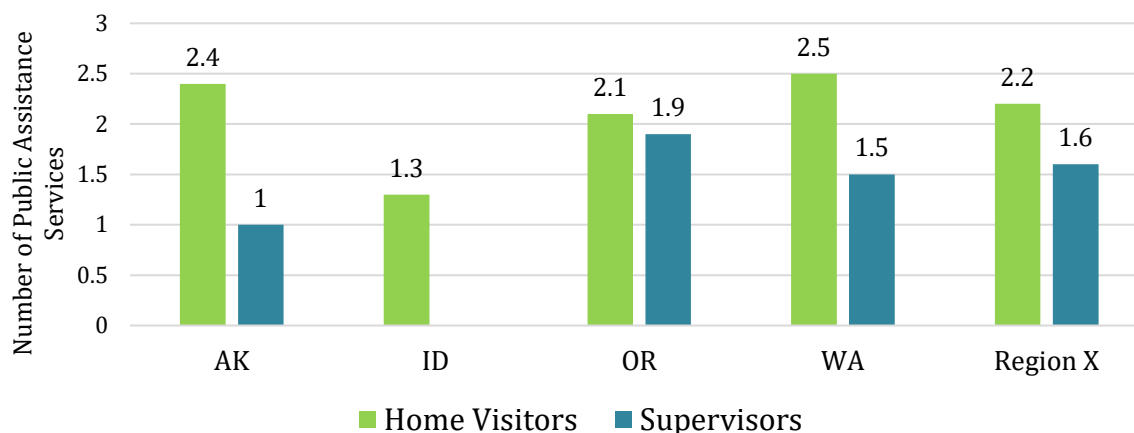
## PUBLIC ASSISTANCE

According to the Massachusetts Institute of Technology (MIT) Living Wage Calculator,<sup>viii</sup> an adult with one child needs to earn between approximately \$23–\$27 hourly in Region X to make a living wage (defined as a wage necessary to meet very basic living needs, such as food, housing, and child care). Table 2.7 shows the median income reported by home visitors and supervisors along with the estimated hourly living wages in the four states that make up Region X, based on different family configurations.

**Table 2.7.** Median Wage of Survey Respondents and MIT Living Wage Estimates

	Alaska	Idaho	Oregon	Washington
Median Wage of Home Visitors	<b>\$ 23.56</b>	<b>\$ 22.20</b>	<b>\$ 18.00</b>	<b>\$ 20.12</b>
Median Wage of Supervisors	<b>\$ 33.00</b>	<b>\$ 26.11</b>	<b>\$ 25.06</b>	<b>\$ 25.20</b>
<i>MIT Living Wage Estimates</i>				
<b>Single Adult</b>	\$ 12.48	\$ 10.64	\$ 12.48	\$ 12.28
<b>1 Adult 1 Child</b>	\$ 27.34	\$ 23.57	\$ 25.49	\$ 26.53
<b>1 Adult 2 Children</b>	\$ 32.39	\$ 28.03	\$ 30.92	\$ 30.87
<b>1 Adult 3 Children</b>	\$ 42.18	\$ 36.13	\$ 41.12	\$ 40.08
<b>2 Adults (1 Working)</b>	\$ 19.56	\$ 18.30	\$ 20.23	\$ 19.81
<b>2 Adults (1 Working) 1 Child</b>	\$ 23.64	\$ 21.99	\$ 23.53	\$ 23.59
<b>2 Adults (1 Working) 2 Children</b>	\$ 26.68	\$ 25.23	\$ 26.82	\$ 26.63
<b>2 Adults (1 Working) 3 Children</b>	\$ 30.82	\$ 28.23	\$ 30.93	\$ 30.91
<b>2 Adults (1 Working Part Time) 1 Child</b>	\$ 18.85	\$ 16.67	\$ 17.93	\$ 18.40
<b>2 Adults</b>	\$ 9.78	\$ 9.15	\$ 10.11	\$ 9.91
<b>2 Adults 1 Child</b>	\$ 14.62	\$ 12.80	\$ 13.77	\$ 14.21
<b>2 Adults 2 Children</b>	\$ 17.78	\$ 15.70	\$ 17.17	\$ 17.02
<b>2 Adults 3 Children</b>	\$ 21.49	\$ 18.49	\$ 20.99	\$ 20.44

Given the average hourly wage for home visitors (\$22.65) and supervisors (\$28.40) in the region, this study examined home visitors' and supervisors' use of public assistance programs to make ends meet. Some respondents indicated that they receive public assistance (23.4% of home visitors and 17.4% of supervisors). Of those who did indicate that they receive public assistance, results show that home visitors and supervisors use an average of 2.2 and 1.6 public assistance services, respectively (Figure 2.2). Receipt of public assistance varied, by state; however, these differences were not statistically significant.



**Figure 2.2.** Average Number of Public Assistance Supports Received Per Person

Across Region X, the public assistance services most commonly accessed by home visitors and supervisors were children’s Medicaid or other health subsidy (12.1%), free or reduced lunch (10.3%), and Medicare or Medicaid for the home visitor / supervisor (7.6%). The Medicaid and CHIP Payment and Access Commission (MACPAC) estimates that between 19% and 24% of the US population utilized Medicaid or children’s subsidized health insurance programs in 2016.

Table 2.8 shows the percentage of home visitors and supervisors accessing various public assistance services by state and regionally.

**Table 2.8.** Public Assistance

Public Assistance Received	AK	ID	OR	WA	Region X
<i>Home Visitors and Supervisors</i>	<i>n = 5-9</i>		<i>n = 10-31</i>	<i>n = 9-35</i>	<i>n = 9-76</i>
Children’s Medicaid or subsidized health insurance	10.3%	--	12.4%	13.4%	12.1%
Free or reduced lunches	11.5%	--	10.0%	10.3%	10.3%
Medicaid or Medicare (for HV/supervisor)	9.0%	--	6.4%	9.6%	7.6%
Food Stamps (SNAP)	--	--	6.0%	3.4%	4.3%
WIC (supplemental nutrition)	6.4%	--	4.0%	5.4%	4.6%
Other public assistance**	--	--	5.6%	3.4%	4.1%
Child care subsidies or vouchers	--	--	--	--	1.7%
Section 8 housing / public housing	--	--	--	--	1.4%

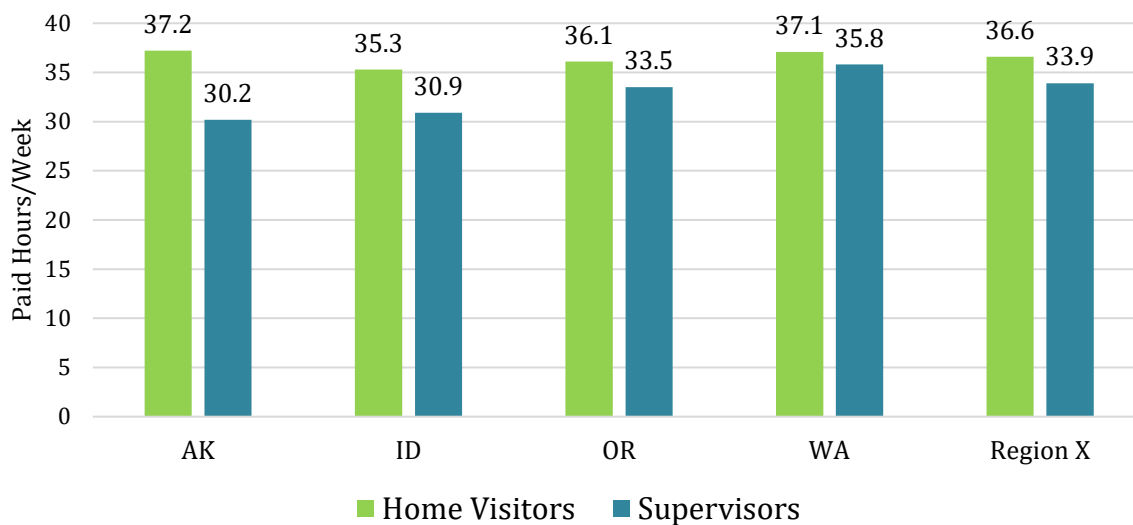
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\*\* Respondents reported that other public assistance includes energy assistance, food pantry support, and help with gifts around the holidays. Temporary Assistance for Needy Families (TANF) was also included in this category due to small cell sizes in all states.

## JOB STRUCTURE

Across Region X, home visitors and supervisors within the sample were almost universally employees rather than contractors (98.2% and 98.7% respectively). This was consistent within individual states as well as for the region as a whole. Similarly, 87.7% of home visitors and 80.6% of supervisors regionally reported that their jobs are full time (defined here as 30 hours or more per week). Some variations to this exist within the supervisor samples in Alaska and Idaho, where 66.7% and 72.7% of supervisors, respectively, reported working full time. These differences are not statistically significant.

On average, the sample of home visitors across the region are paid to work a 36.6 hour work week; supervisors' average paid work week is slightly lower at 33.9 hours per week. Figure 2.3 shows the average paid hours/week for home visitors and supervisors by state and for the region as a whole. Seventy-three percent of home visitors and 70% of supervisors reported a paid work week of 40 hours per week.



**Figure 2.3.** Average Paid Hours per Week

The sample of home visitors in Region X work approximately the same number of hours on average (36.2) as they are paid to work (36.6), while the sample of supervisors work 2.8 more hours on average (36.7) than they are paid to work (33.9). All differences between hours paid and hours actually worked are not statistically significant. Regionally, 32.0% of home visitors and 52.9% of supervisors report working longer hours than their paid hours suggest. Within Oregon and Washington, in particular, there was a statistically significant difference between the amount of overtime work supervisors experience, as compared to home visitors. When considering turnover and retention of the home visiting workforce, working long hours can be an important factor to consider.

**Table 2.9. Actual Hours Worked per Week**

	<b>AK</b> n = 58	<b>ID</b> n = 30	<b>OR</b> n = 174	<b>WA</b> n = 184	<b>Region X</b> n = 446
<b>Home Visitors</b>					
<b>Mean Actual Hours/Week</b>	<b>35.4</b>	<b>35.2</b>	<b>35.4</b>	<b>37.3</b>	<b>36.2</b>
Percent working over paid hours/week	34.5%	26.7%	28.9%	35.0%	32.0%
	<b>AK</b> n = 18	<b>ID</b> n = 11	<b>OR</b> n = 60	<b>WA</b> n = 64	<b>Region X</b> n = 153
<b>Supervisors</b>					
<b>Mean Actual Hours/Week</b>	<b>33.4</b>	<b>31.8</b>	<b>36.0</b>	<b>39.2</b>	<b>36.7</b>
Percent working over paid hours/week	44.4%	36.4%	48.3%	62.5%	52.9%

Table 2.10 shows that most home visitors and supervisors in the Region X sample (68.3% and 69.3%, respectively) work five days per week. Another 22.6% of home visitors work four days per week, while 6.8% work three or fewer days each week. A very small proportion of home visitors (2.3%) work more than five days per week, yet this figure is higher for supervisors in the sample, 9.2% of whom work more than five days a week. Of the supervisor sample in the region, 21.6% work four or fewer days per week. On average, home visitors in Region X work 4.7 days per week, compared to 5.0 days per week for the supervisor sample. Differences across states and by job role were not statistically significant.

**Table 2.10. Average Days Worked per Week**

	<b>AK</b> n = 54	<b>ID</b> n = 30	<b>OR</b> n = 174	<b>WA</b> n = 181	<b>Region X</b> n = 439
<b>Home Visitors</b>					
<b>Mean Days Worked/Week</b>	<b>4.9</b>	<b>4.6</b>	<b>4.7</b>	<b>4.7</b>	<b>4.7</b>
More than 5 days/week	--	--	--	--	2.3%
5 days/week	75.9%	63.3%	68.4%	66.9%	68.3%
4 days/week	14.8%	26.7%	21.3%	25.4%	22.6%
3 or fewer days/week	--	--	--	--	6.8%
<b>Supervisors</b>					
<b>Mean Days Worked/Week</b>	<b>5.2</b>	<b>4.6</b>	<b>5.1</b>	<b>4.8</b>	<b>5.0</b>
More than 5 days/week	--	--	7.9%	10.1%	9.2%
5 days/week	72.2%	72.7%	63.5%	65.2%	69.3%
4 days/week	--	--	12.7%	8.7%	10.5%
3 or fewer days/week	--	--	12.7%	8.7%	11.1%

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Figure 2.4 reflects the percentage of home visitors (and supervisors who have a home visiting caseload) who conduct home visits in the evenings (after 5:00 pm) and on the weekends. Evening home visits are common across the region (48.3%), although this varies somewhat by state. Differences by state are statistically significant

( $\chi^2(3, N = 497) = 9.71, p = .021$ ).<sup>3</sup> Weekend home visits are rarer. Only 5.0% of the Region X sample report delivering home visits on the weekends; this ranges from 2.1% in Oregon to 9.1% in Idaho.

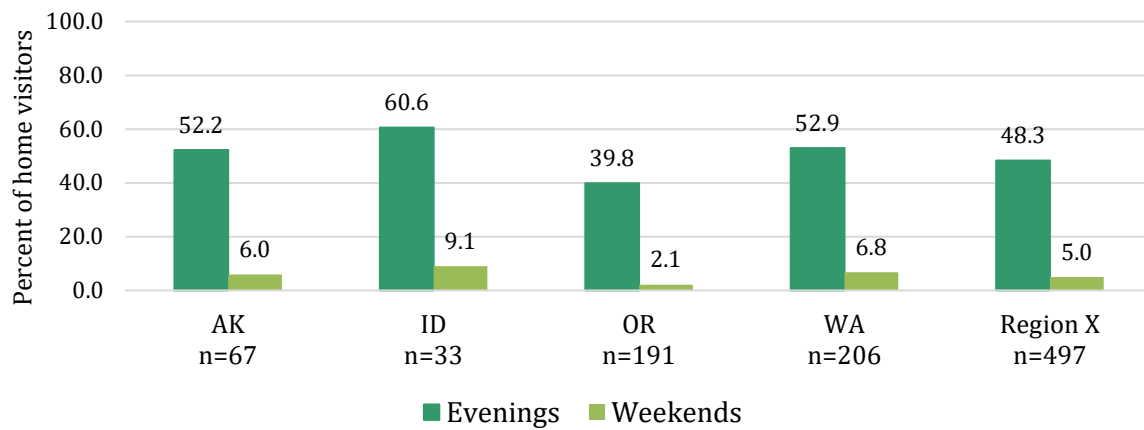


Figure 2.4. Evening and Weekend Home Visiting



<sup>3</sup> Chi-square adjusted residuals show the statistically significant difference is between Oregon and the other states.



## Research Question 3: What Are Home Visitors' and Supervisors' Caseloads and Job Responsibilities?

This section explores the workloads and job responsibilities of home visitors and home visiting supervisors in the sample.

### CASELOADS AND VISIT FREQUENCY

Across Region X, home visitors report an average caseload of 15.0 families and home visiting supervisors carry a caseload average of 10.5 families (Figure 2.5). Across the states, caseloads for home visitors were pretty similar, with caseloads ranging from 14.1 families in Washington to 15.9 families in Oregon. For supervisors, there was a larger range across states, from 6.1 families in Alaska to 17.0 families in Oregon. Differences between caseload sizes were not statistically significant. The home visitors reported visiting a little more than half of the families on their caseload each week, seeing an average of 8.9 families, while home visiting supervisors visit a little under half their caseload, seeing an average of 4.0 families weekly. The average number of visits per week ranged from 8.0 in Idaho to 10.5 in Alaska for home visitors and from 3.4 in Oregon to 4.6 in Washington for supervisors (Figure 2.6). Differences between states in the number of weekly visits were statistically significant for home visitors only ( $F(3, 438) = 6.69, p < .001$ ). Follow-up tests showed that these statistically significant differences existed between home visitors in Alaska and Idaho ( $p=0.006$ ), and between home visitors in Alaska and Oregon ( $p<0.001$ ), with Alaska home visitors meeting with more of their families each week.

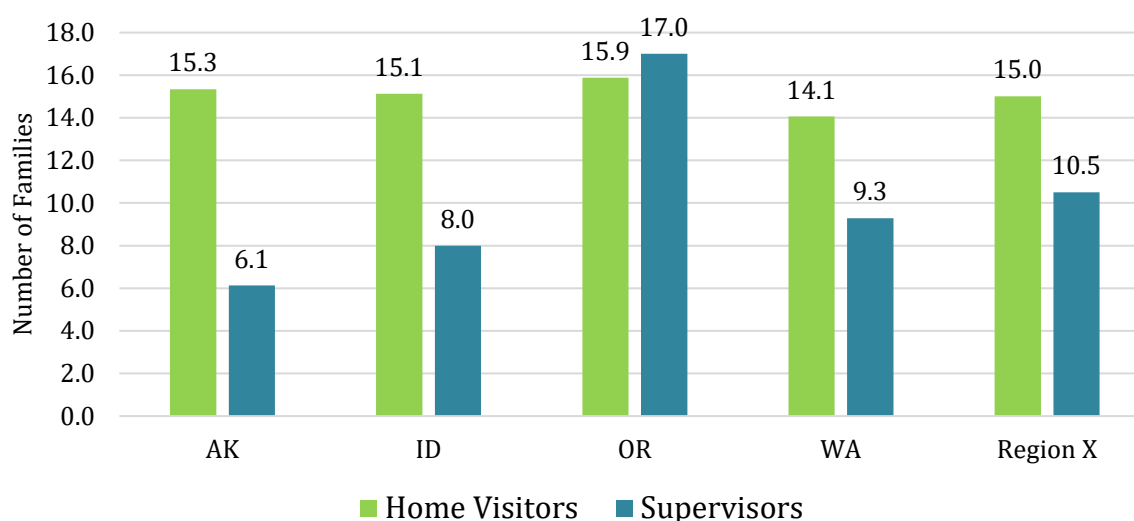
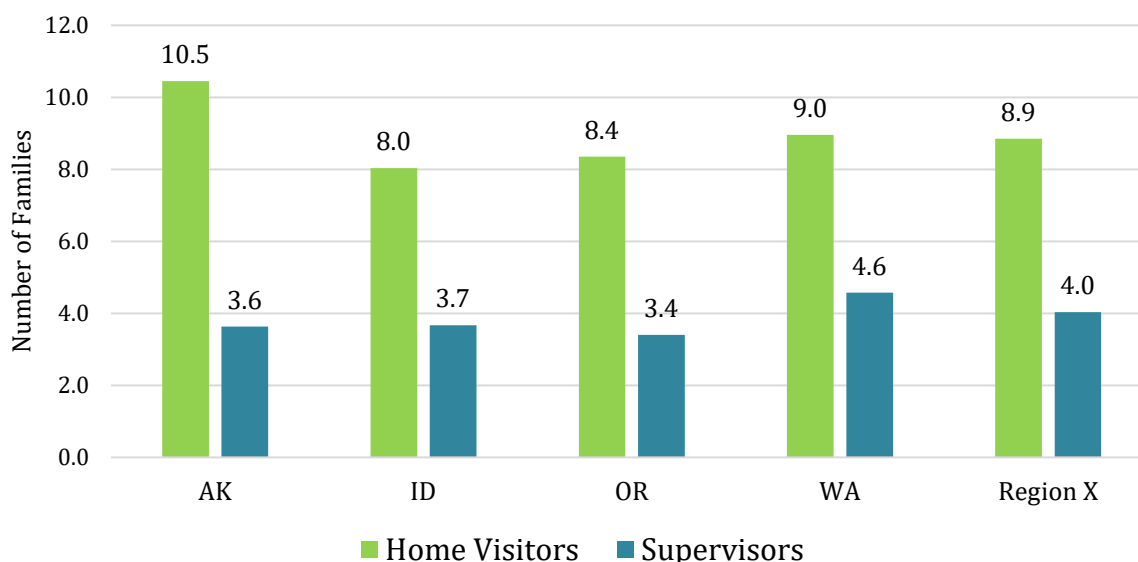


Figure 2.5. Average Caseloads



**Figure 2.6** Average Home Visits Each Week

Table 2.10 shows that the largest proportion of home visitors in the regional sample (47.7%) carry a caseload of 10–15 families. 20.4% have a caseload of under ten families, while 16.2% have caseloads of sixteen or more families. Over half of the regional sample (51.8%) visits fewer than ten of the families on their caseload each week (Table 2.11), and 49.6% of them spend between 60–74 minutes with families per visit (Table 2.12). More than three quarters of supervisors (76.9%) of supervisors carry a caseload of fewer than 10 families. Time spent with each family is similar to home visitors with 43.9% of supervisors spending 60-74 minutes with families per visit. Time spent in home visits is typically driven by requirements of specific home visiting models.

**Table 2.9.** Home Visiting Caseloads

Number of families in caseload	AK	ID	OR	WA	Region X
<i>Home Visitors</i>	<i>n = 59</i>	<i>n = 30</i>	<i>n = 176</i>	<i>n = 186</i>	<i>n = 451</i>
Under 10	11.9%	30.0%	21.0%	21.0%	20.4%
10-15	55.9%	16.7%	50.0%	47.8%	47.7%
16-20	16.9%	33.3%	10.8%	18.3%	16.2%
Over 20	15.3%	20.0%	18.2%	12.9%	15.7%
<i>Supervisors</i>	<i>n = 8</i>	<i>n = 3</i>	<i>n = 10</i>	<i>n = 18</i>	<i>n = 39</i>
Under 10	87.5%	--	70.0%	77.8%	76.9%
Over 10	--	--	--	--	23.1%

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**Table 2.10. Weekly Home Visits**

<b>Number of visits per week</b>	<b>AK</b>	<b>ID</b>	<b>OR</b>	<b>WA</b>	<b>Region X</b>
Home Visitors	n = 56	n = 29	n = 172	n = 185	n = 442
Under 10	35.7%	55.2%	58.1%	50.3%	51.8%
10 and over	64.3%	44.8%	41.9%	49.7%	48.2%
Supervisors	n = 8	n = 3	n = 10	n = 19	n = 40
Under 10	100.0%	--	100.0%	89.5%	99.6%
10 and over	--	--	--	--	--

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**Table 2.11. Home Visit Durations**

<b>Time per home visit</b>	<b>AK</b>	<b>ID</b>	<b>OR</b>	<b>WA</b>	<b>Region X</b>
Home Visitors	n = 60	n = 30	n = 177	n = 187	n = 454
Less than 60 minutes	28.3%	13.3%	14.2%	14.0%	15.8%
60–74 minutes	43.3%	33.3%	56.5%	47.6%	49.6%
75 or more minutes	28.3%	53.3%	28.3%	38.5%	34.1%
Supervisors	n = 8	n = 3	n = 11	n = 19	n = 41
Less than 60 minutes	--	--	--	42.2%	36.5%
60–74 minutes	--	--	54.5%	31.6%	43.9%
75 or more minutes	--	--	--	--	--

-- Missing, suppressed, or 0.0 value data.

## JOB RESPONSIBILITIES

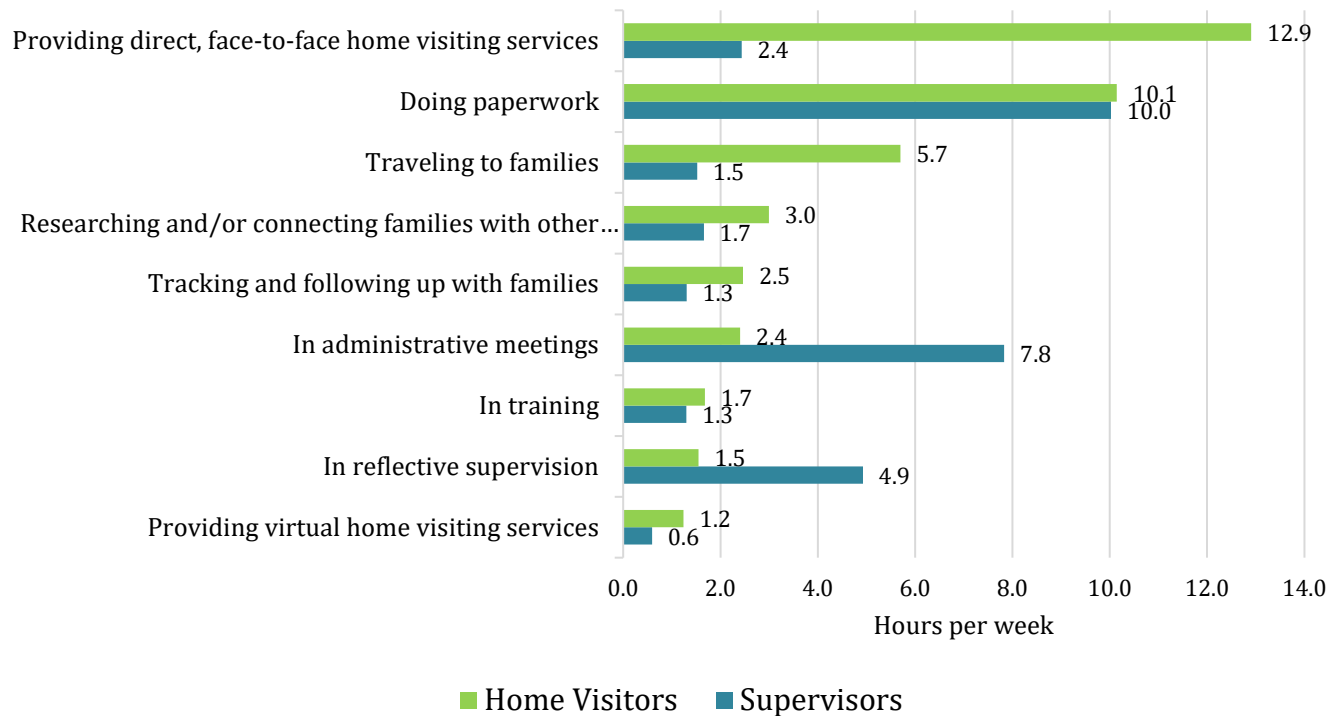
The work of a home visitor is complex. It involves not only the direct delivery of home visiting services, but also requires researching and providing families with referrals to other services, completing paperwork and tracking activities to document work done with families, and traveling, sometimes long distances. In addition, to keep skills up to date, home visitors also spend time in training and reflective supervision activities. Figure 2.7 shows that home visitors in the Region X study sample reported that the greatest amount of their time each week is dedicated to providing direct, face-to-face home visiting services, followed by completing paperwork (10.1 hours, on average).

Other job functions that make up home visitors' typical work weeks include traveling to visit families (5.7 hours), researching and making service referrals (3.0 hours), conducting family follow-ups (2.5 hours), and participating in administrative meetings (2.4 hours). Interestingly, home visitors and supervisors across the region report spending about the same amount of time completing paperwork, at about 10 hours for each group. Supervisors also reported spending their week in administrative meetings (7.8 hours), in reflective supervision (4.9 hours), and providing direct face-to-face home visiting services (2.4 hours).

“Paperwork. Too much. We now have a new rule for Medicaid, that all of our paperwork has to be done within three days. Not three business days; 72 hours. So if we do something on a Friday, it has to be done by Monday. None of us can follow this rule, because it’s impossible. I have 37 kids on my caseload. There’s no way.”

—Home Visitor





**Figure 2.6.** Time Distribution by Job Responsibility

**Table 2.12.** Average Time Spent by Job Responsibility (Hours per Week)

<b>Job Responsibility</b>	<b>AK</b>	<b>ID</b>	<b>OR</b>	<b>WA</b>	<b>Region X</b>
<b><i>Home Visitors</i></b>	<b>n = 59-60</b>	<b>n = 29-30</b>	<b>n = 172-176</b>	<b>n = 183-186</b>	<b>n = 154-157</b>
Providing direct, face-to-face home visiting services	12.6	13.3	11.9	13.8	12.9
Doing paperwork	8.3	19.1	9.4	10	10.1
Traveling to families	5.3	6.4	5.2	6.2	5.7
Researching and/or connecting families with other resources	3.1	3.1	3.2	2.7	3
Tracking and following up with families	2.4	2.7	2.7	2.2	2.5
In administrative meetings	1.8	6.3	1.9	2.4	2.4
In training	1.3	5.1	1.5	1.4	1.7
In reflective supervision	0.9	1.9	1.7	1.5	1.5
Providing virtual home visiting services	1.3	0.4	1.2	1.4	1.2
<b><i>Supervisors</i></b>	<b>n = 18</b>	<b>n = 11</b>	<b>n = 61</b>	<b>n = 64-67</b>	<b>n = 154-157</b>
Doing paperwork	8.3	9.2	10.0	10.6	10.0
In administrative meetings	9.8	4.9	8.6	7.1	7.8
In reflective supervision	3.1	4.5	5.6	4.9	4.9
Providing direct, face-to-face home visiting services	3.4	2.4	1.4	3.1	2.4
Researching and/or connecting families with other resources	2.1	1.3	1.5	1.7	1.7
Traveling to families	2.4	1.6	0.9	1.8	1.5
In training	0.7	1.1	1.8	1.1	1.3
Tracking and following up with families	1.4	1.1	1.1	1.5	1.3
Providing virtual home visiting services	1.6	0.2	0.6	0.4	0.6



## Research Question 4: What Are the Characteristics of Families Served by Home Visitors and Home Visiting Supervisors in Region X?

This section describes the characteristics of families served by the study's sample of home visitors. In particular, we examined the geographic breakdown of families in home visitors' caseloads, looking at the proportion of families who reside in urban, suburban, rural, and remote areas. These categories were defined as:

- Urban: Cities
- Suburban: Residential areas outside of cities
- Rural: In the country, but accessible by road
- Remote: Not accessible by road

Working with families experiencing stressful life circumstances can potentially add job stress to the home visiting workforce, so we also looked at the percent of families within the sample's caseload who are experiencing challenges such as substance use, domestic abuse or intimate partner violence, raising a child with special needs, low-income, or refugee status. Similarly, parenting and co-parenting arrangements of families within a caseload can also affect the nature of the work of the home visitor; as such, we asked study participants to estimate the number of families in their caseloads with various parenting situations. Finally, we were interested in the extent to which home visitors share race, ethnicity, culture, and language traits with the families they serve, since research indicates that families are more likely to engage in services when home visitors share and understand their own cultures and languages.<sup>ix</sup>

### FAMILY GEOGRAPHY

Table 2.14 shows that, within Region X, almost 60% of families on home visitors' caseloads live in urban or suburban areas. Home visitors in the sample indicate that approximately one in six families on their caseloads live in rural areas, and a very small proportion (1.4%) live in remote areas that can't easily be accessed by road. Alaska home visitors indicate a higher percentage of their caseloads live in remote areas (8.1%) reflecting the unique geography of the state.

**Table 2.13. Family Geography\***

Family Geographic Location	AK n = 67	ID n = 41	OR n = 233	WA n = 244	Region X n = 585
Urban	49.3%	26.7%	34.7%	39.0%	37.6%
Suburban	12.2%	34.8%	21.9%	22.1%	21.8%
Rural	10.3%	15.5%	16.6%	18.6%	16.6%
Remote	8.1%	1.3%	0.5%	0.4%	1.4%

\* Columns do not sum to 100% based on some instances of home visitor-reported geographic allocations of families on their caseloads that were less than their total reported caseloads.

## FAMILY CHARACTERISTICS

Some home visitors in the sample reported that the families on their caseloads are experiencing a variety of challenging circumstances within their family lives. In particular, across the region, 68.5% of the families in the sample's caseloads are low-income, although this ranges from a low of 48.8% in Alaska to a high of 76.0% of families in Washington. Approximately one-third (33.0%) of families served by the sample of home visitors in the region have a health or mental health challenge, while 20.7% have a child with special needs. There are more families with children with special needs in Alaska (38.7%), likely reflecting the fact that the primary home visiting model in that state (Infant Learning Program) is specifically geared toward children with special needs. Within Region X, the sample also reported serving families who are experiencing domestic violence (20.4%), substance abuse (14.7%), and child welfare involvement (10.9%). The average proportion of families within the regional sample's caseload that are refugees was 3.5%. Table 2.15 shows specific percentages by state.

"It's when you have a community that has a lot of at-risk factors with DHS, with just mental health issues, drug addictions, just different things—that can be hard on a home visitor, because you will have to tend to spend more time with this, a lot more problem-solving, a lot more kind of taming the fires, I guess you could say, so that the family can function for this child, and I think that can be hard on a home visitor."

—Supervisor

**Table 2.14.** Family Characteristics\*

Family Characteristic	AK n = 78–74	ID n = 41	OR n = 243–249	WA n = 255–261	Region X n = 616–629
Low income	48.8%	72.6%	66.2%	76.0%	68.5%
Family health / mental health challenge	27.0%	38.9%	32.2%	34.8%	33.0%
Child with special needs	38.7%	18.6%	17.8%	18.7%	20.7%
Domestic violence	21.1%	17.6%	19.9%	21.0%	20.4%
Substance abuse	18.4%	10.1%	14.8%	14.1%	14.7%
Child welfare involvement	19.7%	9.3%	10.3%	9.1%	10.9%
Refugee status	1.2%	2.4%	4.0%	3.8%	3.5%

\* Response options were not mutually exclusive, so columns do not sum to 100%.

## SHARED TRAITS

Research has shown that families were more engaged in home visiting when programs matched a greater proportion of home visitors to families in terms of sociodemographic characteristics, including race or ethnicity.<sup>x</sup> Across Region X, home visitors reported sharing a common language with approximately two-thirds (68.0%) of the families they serve, while they share common race, ethnicity, or cultural traits with less than half (46.7%) of the families on their caseloads. These figures are relatively consistent within individual states as well (Table 2.17).

“Recently, a complicated and difficult part of my job has been recognizing the systemic racism that’s built into healthcare and education programs, including mine, and trying to think of how I name that, work with that, try to work to undo it within myself and others.”

—Home Visitor

**Table 2.15.** Home Visitor Share Traits with Families\*

Home Visitor Shared Traits with Families	AK n = 73–78	ID n = 41	OR n = 243–246	WA n = 257–260	Region X n = 614–625
Common race, ethnicity, or culture	46.1%	50.3%	46.1%	46.9%	46.7%
Common language	74.3%	71.0%	62.7%	70.7%	68.0%

\* Common trait options are not mutually exclusive, so columns do not sum to 100%.

Home visitors in the region reported that English is the most common language spoken by families on their caseload (74.1%). For three states, the second most common language spoken by families on the sample’s caseload is Spanish (56.2%–62.1%); however, for Alaskan home visitors, Native American languages (42.3%) are more common within their caseloads than Spanish (33.3%).

Across the four states, there appears to be a wide diversity of languages spoken by the families served by home visitors, with 16.9% and 16.7% of families speaking Native American and Asian/Pacific Island languages, respectively. Similarly, nearly one-third (30.6%) of home visitors’ families in the region speak either a language other than those already noted or American Sign Language.

**Table 2.16.** Languages Spoken by Families in Home Visitors' Caseloads\*

<b>Languages Spoken by Families in Home Visitors' Caseloads</b>	<b>AK</b> n = 15–62	<b>ID</b> n = 9–33	<b>OR</b> n = 16–177	<b>WA</b> n = 21–194	<b>Region X</b> n = 40–466
English	79.5%	80.5%	71.1%	74.3%	74.1%
Spanish	33.3%	61.0%	56.2%	62.1%	56.1%
Native languages of the Americas	42.3%	22.0%	10.4%	14.6%	16.9%
Asian and Pacific Island language (e.g., Mandarin, Japanese, Korean)	26.9%	--	14.1%	17.2%	16.7%
American Sign Language	--	--	6.4%	8.0%	6.4%
All other languages**	19.2%	44.0%	20.9%	30.7%	26.2%

-- Missing or suppressed data

\* Language options are not mutually exclusive, so columns do not sum to 100%.

\*\* Other languages include, but are not limited to, Arabic, Hebrew, Hindu, Urdu, French, Russian, and Swahili.

## Policy Considerations

This research brief points to several important policy considerations to support the home visiting workforce in Region X.

### Increase Home Visitor Compensation

While the average pay for home visitors in Region X hovers near the living wage of \$23–\$27/hour for one adult and one child, as calculated by the MIT study,<sup>xi</sup> over half of home visitors in the region earn below this amount. Since home visitors make significantly less than supervisors, Region X states might consider ways to ensure that home visitors, in particular, are appropriately compensated for the important work they do. Considering that the living wage calculation is an estimate of very basic living requirements, without room for extras or emergencies, this suggests that many home visitors may not be able to financially sustain a long-term career in the field. Because some states in the region have significantly higher salaries for home visitors than others, particularly Alaska and Washington, these higher-paying states may serve as a model for how to raise pay for home visitors across the region. Some of these pay differences may reflect different costs of living within each state; however, they may also reflect differences in compensation models (for instance, hourly, annual, or per visit) or funding structures inherent in predominantly used home visiting models within the state.



## Reduce Paperwork

Home visitors in Region X report spending more time on paperwork than in conducting direct, face-to-face home visiting services. The average time spent on paperwork and in administrative meetings amounts to 1.5 work days per week. This is time that home visitors could spend serving families and/or improving their own skills through training, professional development, or reflective supervision. While paperwork and administrative functions are inevitable and necessary, states and home visiting organizations may want to explore ways to reduce the administrative burden of the job through efficiencies such as computerized/tablet-based reporting tools, centralizing administrative functions, and reducing redundant reporting requirements to free up home visitors to work more directly with families.

## Increase Access to Training and Professional Development

Home visiting is a highly skilled profession that requires specialized knowledge and skills on various topics. Ongoing training and professional development allow home visitors and supervisors to engage in a process of continuous learning and improvement, which not only benefits the individual staff member, but also the children and families served. It is especially important, then, to ensure training and professional development are financially accessible.

Across Region X, only about one in five staff receive tuition reimbursement. Although paid professional development time is more consistently provided, with 65% of home visitors across the region reporting this benefit, there are still approximately one in three home visitors who do not have paid professional development time. Without tuition reimbursement and paid professional development, the cost of training and coursework may deter interested staff from advancing their education.

Given the wide variation in educational attainment, from high school diplomas to graduate degrees (see Brief 1), it is important that staff who are interested in advancing their education can afford to do so. As the field constantly grows and new knowledge and practices emerge, it is important for staff, regardless of educational attainment, to access training and professional development. In Region X, Alaska is the exception, with approximately half of sampled staff receiving tuition reimbursement in the state. Perhaps this may explain why 40% of home visitors and 72% of supervisors in Alaska hold graduate degrees (compared to 15% of home visitors and 40% for the entire region; Brief 1.) Other states may be able to learn from Alaska's model to provide this benefit more ubiquitously across the region.



## Support Training to Serve Families Under Stress

The data presented in this brief indicate that many families served by Region X home visitors are experiencing high levels of stress, including poverty, health / mental health issues, and substance and domestic abuse. These are uniquely difficult family circumstances that home visitors face as a regular part of their work with families on their caseloads. Ongoing supports and training to support home visitors with this aspect of their work may help to increase retention of skilled workers in the field. Additionally, states in Region X may want to explore compensation structures that incentivize home visitors for working with families experiencing life circumstances that increase the challenge and stress of the home visiting job. This strategy could support both the need to increase home visiting compensation, while encouraging work with high-need families.

### Increase Access to Paid Family Leave

Paid family leave is an important benefit to consider, especially related to the realities of life outside of work and maintaining work-life balance. This benefit allows workers to care for very ill family members, recover from serious health problems, or bond with newborns. Across the region, only about two in five home visitors receive paid family leave. Fortunately, this number is likely to go up in future years as Washington will become the fifth state in the nation to offer paid family leave to all workers, which will take effect in 2020. To attract and retain a highly qualified home visiting workforce, policy makers in Region X might explore options for supporting paid family leave for home visitors and their supervisors.

“I love what I do. [laughs] I like the fact that I get to help families, I get to help the community, I get to help the children. I don’t ever feel like I’m burnt out. They’ve given me such great opportunities, so I was able to finish my education because of them. It’s just a great overall place and a great organization to work for, and I think it’s more of a passion than it is a career.”

—Supervisor

### Recruit and Retain a More Diverse Workforce

Data presented in this brief indicate that home visitors in the Region X sample share a common language with approximately two-thirds of the families on their caseloads and that they share common racial, ethnic, and cultural characteristics with a little less than half of their families. Since research indicates increased retention when families and home visitors share similar racial/ethnic identities,<sup>xii</sup> home visiting programs across

Region X may consider options for ensuring the workforce reflects the families they serve. This may take the form of recruitment and retention strategies aimed at attracting and keeping a workforce that matches the racial and ethnic diversity of the families served and/or caseload assignment strategies that maximize the extent to which home visitors serve families with common language, race, ethnic, and cultural traits. Efforts to recruit a diverse student body into educational majors that tend to feed into a home visiting profession are one place to start, as is considering opportunities to create apprenticeship programs that may give a more diverse population an alternative route into the field.



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