

**Advisory Board Meeting Notes**  
October 28, 2014, 2-4:00 pm, UMBC South Campus

**In attendance:**

- Board Members: Sonya Satterlund, Sharon Rumber, Sandra Haskett, Colleen Wilburn,
  - On the phone: Loan Vo, Carolyn Finney
- UMBC MIECHV Staff: Carlo DiClemente, Lyn Dahlquist, June Sutherland, Charissa Cheah, Rebecca Schacht, Robin Barry, David Schultz, Elisabeth Groth

Dr. DiClemente called the meeting to order at approximately 2:10 p.m. He then made introductory remarks and asked the Advisory Board members and meeting participants to introduce themselves.

**Notes**

- Suggestions for additional Board Members:
  - All models represented would be ideal—add HIPPIY, PAT, EHS
  - Need for home visitors
- Purpose of competitive grant: to increase the use, availability, and impact of home visiting in communities
  - Desire to be sustainable in long-term, e.g. through affiliation with a community college
- Purpose of Home Visiting Training Certificate Program: interact with and support program specific trainings
  - Some training to be potentially rolled out in Spring, 2015
  - Potential for some trainings to be online
  - Training will be free for now but potentially there will be costs in future to sustain the program after grants end
  - Need to look into translating training into other languages
- Activities accomplished to date:
  - Conducting 4-5 focus groups to get a good idea of the HV experience, training, etc.
  - Reviewing literature and examining other similar programs to see what they do and how they interact with local programs to ensure we are using best practices
- Feedback on 6 training areas:
  - *Communication*
    - Goes hand in hand with cultural competence
    - Important for HVs developing a relationship with the family and staying engaged
    - Add recognizing non-verbal cues
    - Family planning as a challenging topic to talk about with families
    - Will probably be first training rolled out
  - *Parenting and child development*
    - Need to address cultural/family barriers; cultural competence is important here
    - Discipline practices: often a difficult area; behavior management might be better term to use

- *Healthy partner/family relationships*
  - Important to have section on broaching these topics and screening; could include bringing about difficult topics as a part of communication training
  - Challenge in getting families to recognize domestic violence
  - Challenge of involving fathers; only around 25% of cases have a male partner around and it is hard to get him involved and to keep him involved
- *Mental Health*
  - No one is working with Kay Connors
  - New home visitors don't necessarily recognize the signs of MH and when they do they aren't necessarily comfortable addressing them – they may feel as though the parent/child relationship is where the focus should be.
  - Disconnect between curriculums/trainings and how mental health affects parent/child development.
  - Home visitors often have to deal with immediate crises.
  - Home visitors need to be prepared to work with the parent/manage their behaviors.
  - Home visitors need different expectations for parents with MH issues. (i.e. having a short-term goal plan, focus on one topic instead of 50).
  - Current program access to mental health consultants:
    - Some agencies do have someone they can consult with but not someone who will go to the home.
  - Beyond giving a MH referral, making the connection is also a big challenge
- *Substance abuse*
  - Need for better ideas of how certain drugs affect people and what symptoms look like.
  - Smoking is the biggest challenge. Parents think it's not that bad compared to other harder drugs.
- *Cultural competence*
  - A cross cutting topic: not just ethnicity—life experience, shared values, experience, neighborhood, etc.
  - Need to consider gay families, too
  - HFA staff trained yearly on cultural competencies but view this topic area in a narrow way.
  - Think about how this affects other issues. It extends beyond a yearly training. It doesn't need to be something that says “cultural competency” but something that informs your work with the families you serve.
  - Recognizing how cultural differences impact relationship with the family: e.g. Hispanic families are very inviting, African American families may be more resistant, and sometimes the families that need the visits the most may be the hardest to reach.
  - Boundary setting: can be hard with warmer families and long-term relationships with family
- Potential barriers and challenges to training:
  - Home visitors' educational backgrounds vary a lot: some are hired through the program, some have high school, some bachelors

- Consider different levels of training down the road
  - Consider have a refresher training after time in the field.
- How to make trainings appealing:
  - Important to keep in mind: trainings can stress out workers who struggle to simultaneously complete trainings and stay on top of visits.
  - Need to ask home visitors what is practical from them to avoid causing them stress.
  - HVs need to be comfortable in trainings.
  - Would be helpful for UMBC to learn more about your curriculums.
- Conclusion/next steps:
  - Still looking for other members for Advisory Board.
  - Potentially another meeting in January to discuss the communication module and get feedback about how we want to launch it and how to best balance content and practice.