

# Improving Outcomes for Families Experiencing Intimate Partner Violence Through Home Visiting

## Statement of Problem

Within the maternal and early childhood home visiting sector, families experiencing intimate partner violence (IPV) represent a critically important subgroup. Home visited families are primarily from under-resourced neighborhoods where IPV frequently occurs alongside other challenges rooted in social and structural inequities, such as housing instability, substance use and mental health conditions.

In the [national evaluation](#) of the Maternal Infant and Early Childhood Home Visiting (MIECHV) program, nearly one-quarter of women had a recent IPV experience. In combination with building parenting and community resources, the success of home visiting relies on strong home visitor-family relationships built through weekly or biweekly home visits. Home visitors are well-positioned to address IPV and receive training on standard practices, however, the dynamics of IPV contribute to barriers in client engagement which may inhibit the foundation for a trusted home visitor-client relationship and willingness to disclose IPV. Furthermore, the [evidence continuously points to IPV as a challenging area](#) for home visitors to meaningfully address even under circumstances where robust training and clear screening protocols have been established.

Strengthening connections between home visiting and IPV agencies for a partnered response is a promising approach to delivering comprehensive and sustainable IPV services for families, yet exploration of formalized partnerships has been limited. Our multidisciplinary team, the Intimate Partner Violence-Home Visiting Collaborative (“IPV-HV Collaborative”) is taking steps to advance the field toward a greater understanding of programmatic components and contextual factors to fully support families affected by IPV.

## Description

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These research findings will be used help develop an intervention to more clearly define, integrate and strengthen the role of home visiting agencies within the greater network of local supports for families experiencing IPV.

In 2020, with support from the Vanguard Strong Start for Kids initiative and the William Penn Foundation, our team of community-academic partners that make up the IPV-HV Collaborative (including PolicyLab, Maternity Care Coalition, ParentChild+, National Nurse-Led Care Coalition, Lutheran Settlement House, Courdea, and the City of Philadelphia's Office of Domestic Violence Strategies) came together for a research project.

This project sought to understand the existing local landscape of services for home visited families experiencing IPV and to pilot a training and consultative model between the home visiting and IPV agencies. The ultimate goals of this project are to improve outcomes for home visited families experiencing IPV by strengthening family engagement and retention, home visitor capacity to address IPV, and the referral network and interagency collaboration among the system of family-serving entities in Philadelphia.

To work towards these goals, we first used [social network analysis](#) to describe the existing service landscape for families with young children impacted by IPV and measure the connectedness that exists within this landscape. This method allowed us to understand where relationships already exist and identify opportunities for improving community connections. Survey findings from nearly 50 organizations in the Philadelphia area found great variability in the number, type and strength of existing interagency collaborations.?

Additionally, [qualitative findings from four focus groups](#) with IPV and home visiting service providers gave an in-depth look at the priority issues they experience in supporting clients impacted by IPV. These sessions also produced prioritized lists of potential innovations to overcome these issues, including stronger or alternative methods of interagency collaboration.?

Informed by our research findings and in response to the needs of our project partners, we co-developed and piloted a training- and capacity-building model ('Champion Model') wherein a group of home visitors complete an adapted version of the Pennsylvania Coalition Against Domestic Violence's 40-hour training and engage in small-group multidisciplinary meetings following the training.

To date, the first cohort of champions completed training and attended cohort meetings to discuss opportunities for integrating learnings within and across organizations and to continue building relationships across our collective of organizations. Survey and interview data collected from champions and training facilitators during the pilot year demonstrated the early impact of the champion training and highlighted a shared commitment to use this newly developed model to create a stronger system of services for families who are impacted by IPV.

## Next Steps

The IPV-HV Collaborative is now embarking on the next phase of work to fully define the Champion Model within a home visiting context and develop tools in preparation for model expansion. We collectively decided that the next training iteration will be a 25-hour training with deepened curricular components on topics most relevant for the home visiting workforce. We are excited to pilot and evaluate this revised training with a new Champion cohort in November 2024.

As we continue to build on the momentum of our cross-sector implementation efforts, we aim to:

- Train new home visitors in the champion model, convene the cross-agency cohort of champions, and collaborate to further training and technical assistance related to specific focal areas identified by the cohort

of champions

- Strengthen evaluation capacity to measure impact
- Convene home visiting agencies and other community and governmental stakeholders to share lessons learned from our work, identify opportunities to scale and expand, and develop a policy agenda

*This project page was last updated in October 2024.*

## Suggested Citation

Children's Hospital of Philadelphia, PolicyLab. *Improving Outcomes for Families Experiencing Intimate Partner Violence Through Precision Home Visiting* [Online]. Available at: <http://www.policylab.chop.edu>. [Accessed: plug in date accessed here].

## PolicyLab Leads

### **Meredith Matone** **DrPH, MHS**

#### **Director**

Dr. Matone's research interests include maternal and young child health, as well as family well-being. She focuses on building community and public agency research partnerships to support improvements in policies and programs that serve mothers and infants in under-resourced communities. She is experienced in large-scale program evaluation, mixed-methods research designs, and use of administrative data for observational study designs in areas of child and caregiver health.

Dr. Matone is a senior fellow at the University of Pennsylvania's Leonard Davis Institute of Health Economics, a faculty affiliate at The Field Center, and a board member of the Pennsylvania Association for the Education of Youth Children. Dr. Matone received her Doctor of Public Health, specializing in child and adolescent health and development, from Johns Hopkins Bloomberg School of Public Health. She is an alumnus of the Doris Duke Fellowship for the Promotion of Child Well-being program and a former Stoneleigh Foundation fellow.



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# Stephanie Garcia

## MPH

### Senior Research Manager

Stephanie Garcia (she/her) is a senior research manager at PolicyLab at Children's Hospital of Philadelphia. She oversees the day-to-day activities of several community-engaged, mixed-methods research and evaluation projects and supports strategic planning and team building for a team of maternal and child health (MCH) researchers. She has methodologic and content expertise in program evaluation, participatory research methods and public health systems. Her research interests include maternal and early childhood well-being; intimate partner violence and community violence; and understanding how organizations/systems can effectively work together to support families.

Prior to PolicyLab, she coordinated a Health Resources and Services Administration (HRSA)-funded technical assistance center at the Johns Hopkins Bloomberg School of Public Health that focused on supporting state agencies in adopting evidence-informed MCH programs/practices. She received her Master of Public Health in community health sciences, specializing in MCH, from the University of Illinois at Chicago.



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## Team

# Peter Cronholm

## MD, MSCE, CAQHPM, FAAFP

### Faculty Scholar

Peter Cronholm is a faculty scholar at PolicyLab at Children's Hospital of Philadelphia and an associate professor, director of Community Programs and associate program director in the Department of Family Medicine and Community Health at the Perelman School of Medicine at the University of Pennsylvania. His research interests have focused on health services regarding: 1) integration of trauma-informed care and primary prevention strategies into systems of primary care; and 2) developing novel mixed methodologies and patient-centered outcomes into research paradigms. He is an affiliate faculty member in the Graduate Program in Public Health Studies, a senior fellow in the Center for Public Health Initiatives, a senior scholar at the Leonard Davis Institute of Health Economics, an associate of the Firearm and Injury Center at Penn, an

associate of the Philadelphia Collaborative Violence Prevention Center, and an affiliate of the Evelyn Jacobs Ortner-Unity Program in Family Violence at the University of Pennsylvania School of Social Policy & Practice.

Dr. Cronholm is the co-director of the University of Pennsylvania's Mixed Methods Research Lab (a University of Pennsylvania Service Center that supports investigators in the development of conceptual and methodological approaches for community-based and clinical research questions) and has content expertise in program evaluation of health services using mixed methodologies and Community-Based Participatory Research techniques. He is actively involved in community programs addressing health disparities with a focus on preventing and reducing the impact of trauma throughout the lifespan having served as a member of the Board of Directors for the Academy on Violence and Abuse, Institute for Safe Families, the Men's Resource Center, Women Organized Against Rape, and Prevention Point Philadelphia. Dr. Cronholm is an active member of the Philadelphia Adverse Childhood Experiences (ACEs) Task Force's research committee as Lutheran Settlement House's Research Advisory Board. He has collaborated closely with PolicyLab in developing programming related to early home visitation, child injury and maltreatment and building qualitative and implementation science methodologies into research strategies.



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## **Katherine Kellom**

### **Administrative Manager**

Katherine Kellom (she/they) is an administrative manager at PolicyLab and the director of the Qualitative Research Core at Children's Hospital of Philadelphia. She has worked at nationally top-ranked institutions with teams comprised of experts in their fields conducting qualitative, mixed and multi-method research for more than ten years. Beginning as a research assistant at the University of Pennsylvania's Mixed Methods Research Lab, Katherine currently serves across a variety of project teams to provide conceptual and technical support for clinical and community-based research projects. She has extensive knowledge and valuable practical experience applying qualitative research methodologies with a focus on integrating key stakeholder perspectives and goals into research designs.

Katherine leads and advises project teams using qualitative methods to achieve research aims on projects ranging from small pilots to state-wide, mixed-methods evaluations. Katherine is an expert in facilitation techniques and in the use of the qualitative data analysis tool, NVivo; she provides training in both areas. As director of the Qualitative Research Core, Katherine manages and supports staff members and qualitative team members in the Core and at PolicyLab, ensuring skillset development and access to the resources needed to contribute high-quality work to various project teams.

Katherine received her Bachelor of Arts degree from Bryn Mawr College in 2009, majoring in psychology.



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## **Diya Nag MPH, CHES**

### **Clinical Research Coordinator**

Diya Nag (they/she) is a clinical research coordinator at PolicyLab and the Qualitative Research Core at Children's Hospital of Philadelphia. In this role, she supports research surrounding service coordination for home-visited families experiencing intimate partner violence as well as the integration of home visiting into clinical systems. Additionally, Diya works on school-based projects aimed at increasing student access to mental health services. She lends support through her expertise in qualitative research methods including conducting interviews, focus groups and qualitative coding analysis.

Previously, Diya worked as a sexual health educator in Philadelphia high schools. During their graduate studies, they completed research regarding barriers to accessing quality fertility, pregnancy, and birth care for transgender men and nonbinary people. Additionally, they were a part of the LGBTQ Health Projects Team at the NYC Department of Health.?

Diya received her bachelor's degrees in biology and in science, technology, and society from Vassar College and her Master of Public Health from Columbia University.



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## Funders of Project

Vanguard Strong Start for Kids & William Penn Foundation

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## Related Tools & Publications

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[A Mixed Methods Evaluation of Early Childhood Abuse Prevention Within Evidence-based Home Visiting Programs.](#)

[Article](#)

Jun 2018

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[Preventing IPV through Partnerships between Home Visiting Programs and IPV Agencies](#)

[Issue Briefs](#)

Jul 2023

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[A Social Network Analysis of a Multi-sector Service System for Intimate Partner Violence in a Large U.S. City](#)

[Article](#)

Mar 2024

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[Identifying Barriers and Interagency Solutions to Meeting the Needs of Families Experiencing Intimate Partner Violence: Home Visiting and IPV Agency Perspectives](#)

[Article](#)

Jun 2024

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[Intimate Partner Violence Rises Around Pregnancy. How Can We Elevate the Essential Needs of Pregnant and Parenting Survivors?](#)

[Blog Post](#)

Oct 28, 2024



[Breaking Down Silos: Developing Effective Coordination of Early Childhood Development Resources and Systems](#)

[Blog Post](#)

Nov 14, 2024

#### Related Projects

[Evaluating and Supporting Pennsylvania's Home Visiting Programs](#)  
[Family & Community Health](#)

[Strengthening the Home Visiting Workforce Through Individualized Coaching](#)  
[Family & Community Health](#)