# Challenges Encountered Among Undocumented and Legal Immigrant Families Participating in the Florida Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program

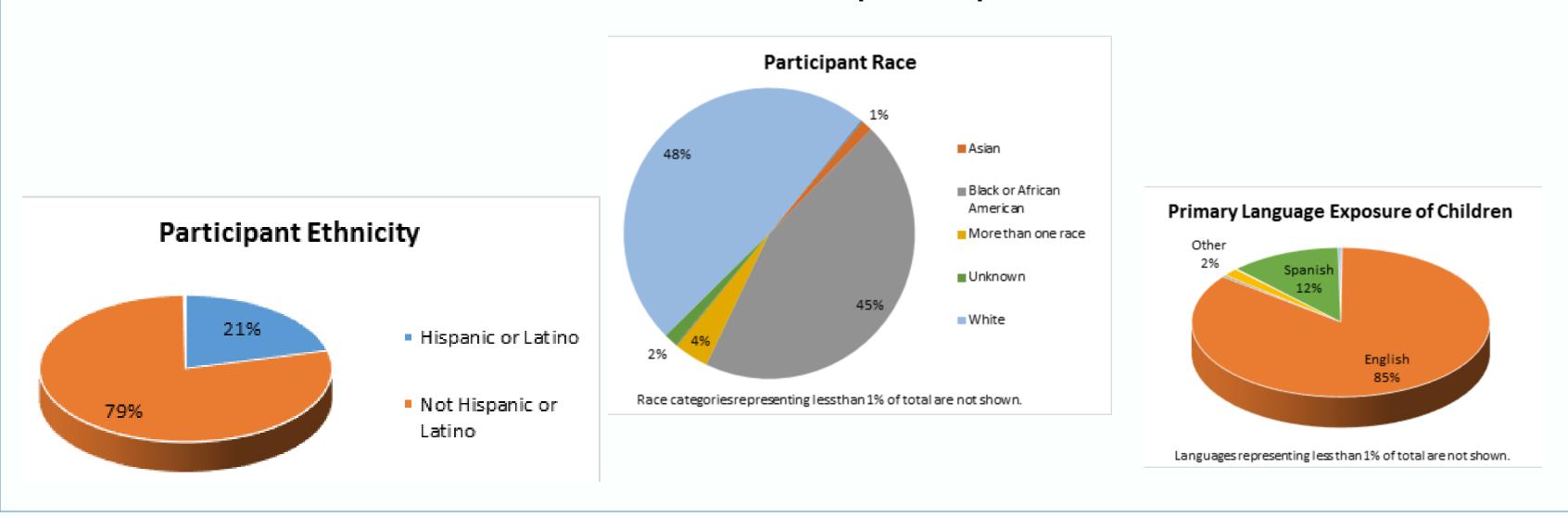
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# Background

In 2013, Florida received \$21.6 million in federal funding to establish and expand home visiting programs in high-need communities. Eleven programs in 14 of 29 eligible Florida communities were funded through a competitive process. The current evidence-based models utilized by the programs are Parents as Teachers, Healthy Families, and Nurse Family Partnership.

The USF Florida MIECHV evaluation is a multi-component mixed-methods evaluation to examine the impact of the federally-funded MIECHV program, including database linkages and analysis, social network analysis, qualitative research, continuous quality improvement; and cost-benefit analysis.

Although the MIECHV program does not collect specific data on immigrant status, the program serves a culturally diverse population, as seen below from data on characteristics of the first 817 total participants:



# Objectives

- 1. To evaluate the Florida MIECHV Program through interviews with program home visitors, administrators, and supervisors
- 2. To classify the needs and supports of undocumented and legal immigrant families participating in MIECHV
- 3. To assess the opportunities and challenges of serving undocumented and legal immigrant families in the program

## Methods

This exploratory qualitative study consisted of in-depth interviews and focus groups with program staff addressing topics that included:

- (1) the strengths of their program
- (2) the general demographics of the families they serve
- (3) what are the greatest needs of the families served
- (4) how the needs of the families affect retention in their program

A total of 32 interviews were conducted with 17 program administrators, 15 program supervisors, and 49 home visitors.

The interviews were digitally recorded and transcribed verbatim by a professional service. Transcriptions were further reviewed for accuracy by MIECHV Program evaluation team members.

A preliminary inductive content analysis approach utilizing open coding was used to identify the recurring themes among undocumented and immigrant families. Inter-rater reliability for coding and thematic analysis was established through comparison and consensus was reached.

### Results

Findings from the participant interviews and focus groups contributed richly to the statewide evaluation of the Florida MIECHV program.

It was notable that when asked about the general needs of the families and communities served, 7 of 11 programs representing 8 communities commented on undocumented and legal immigrant clients served in the MIECHV Program.

It appears that Hispanic and Haitian immigrants served in many MIECHV programs experience particular challenges due to language barriers, legal status, and as a result, limited access to resources and social isolation.

#### Access to Healthcare

"...so far my experience with my families, because some of them are undocumented, and some of them don't speak the language. I find that most of my families have difficulties getting a health care, like insurance or some type of assistance to be able to go to the prenatal visits. So I think that is one of the main things. It's not only through pregnancy, but once they have the baby they struggle again trying to get that for the baby, and because communication is the key and you're there calling for them, trying to get what they really can't do for themselves yet. To me, that's the big issue, big part, what they need."

Challenges
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#### **Social and Physical Isolation**

"I have a lot of moms that they don't have cellphones. They stay at home all day with no phone at all because the dad is working so he takes the cellphone with him. So I think that's the biggest issue."

#### Trust

"I mean the relationship is I think strong, I think once they develop especially the Hispanic, the migrants, once they develop a trust in the educator then they start opening up and start letting to educate or know what they need or what's going on in their lives. In the very beginning they're usually reluctant until they build that trust. I think as we go out to the visits, I know for me when I go out and I work with a lot of younger participants, once they know who they can trust and tell me things and it's confidential and that I can help them then that relationship becomes very strong relationship."

## Conclusion

MIECHV programs address the barriers of mistrust, fear, and primary language by: hiring staff that speak the language and relate to the client; hiring staff who are skilled case managers and are familiar with the resources available to immigrant families; and building strong trusting relationships with their clients.

Home visitors proactively act as ambassadors on the families behalf by making the phone calls for referral services and navigating them through the healthcare system. Program staff report that in many cases, retention and participation of these families is good because they tend to be attentive and appreciative of the support the home visitor is able to provide.

Through outreach and service delivery tailored to the unique needs of the undocumented and legal immigrants in these Florida communities, the MIECHV Program has a tremendous opportunity to contribute to its key goal of serving high risk families and improving maternal and child health.



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