

Conversations in Home Visiting: Exploring How to Work with and Support LGBTQ+ Families

National Home Visiting Network

DECEMBER 2024

The National Home Visiting Network (“Network”) was formed in 2018 to create space for critical conversations that are needed across practice, policy, and research to continuously refine and advance the field of home visiting so that more families with young children can benefit from this evidence-based service.

In 2019, the Network Advisory Committee began exploring issues of equity and inclusion focusing first on the role racism plays in home visiting and the health and well-being of children and families. We issued “[A Call to Action to Advance Racial Equity in Home Visiting](#).” As part of that learning, we challenged one another to find meaningful ways to incorporate the voices and perspectives of families in our work. The Advisory Committee responded by extending the table to include parent leaders who contribute to and shape our work in meaningful ways. In fact, it was the parent leaders who called out the need for us to have a better understanding of the experiences of American Indian/Alaska Native people as another set of conversations to explore equity and inclusion. We acted on that and engaged in deep learning on-site with the Catawba Indian Nation, one of more than 400 federally recognized tribes. It was when we were in Catawba that several Advisory Committee members suggested that another area of learning should focus on gender and identity and implications for the home visiting field.

We formed a Gender and Identity Work Group in late 2023 to guide our learnings. Allison Parish of Education Development Center, Alison Gee of Parents as Teachers, and Melina Hernandez a parent leader joined the group. Activities thus far have included:

- Survey of Network Advisory Committee members to understand what efforts are underway across each center of activity with respect to gender and identity, and what more members would like to learn.
- Training opportunity in August 2024 for Network Advisory Committee members and plus ones by Trystan Reese, a transgender storyteller, facilitator, and parent. Trystan works with birthing professionals and organizational teams to help them increase their understanding of gender and identity and how to make organizations more diverse, equitable, and inclusive. His first book,

"How We Do Family: From Adoption to Trans Pregnancy, What We Learned about Love and LGBTQ Parenthood" was published in 2021, and in 2022 he co-authored a children's picture book "The Light of You" with his husband, Biff Chaplow.

- Debriefing opportunities both at the Network's in-person meeting in September 2024 as well as an informal "coffee hour" in October 2024 for those beyond the Network Advisory Committee that participated in the Trystan Reese training to discuss learnings and potential next steps for home visiting.

Starting Points for Understanding Gender and Identity

The survey of Network Advisory Committee members revealed that our starting points for learning on gender and identity vary, and importantly, that there is a desire to learn more so that the home visiting field can best understand how to fully engage and support LGBTQ+ families. A few highlights of work underway include:

- Why pronouns matter link on email (First 5)
- Equity in Home Visiting Programs: Supporting LGBTQ Families in Home Visiting (Education Development Center)
- How Can Early Childhood Programs Create Welcoming Environments for LGBTQ+ (ZERO TO THREE)
- Development of content for working with LGBTQ+ families (National Alliance of Home Visiting Models and Rapid Response Home Visiting)
- Sexual Orientation and Gender Identity Intern (Parents as Teachers)
- Implementing APA style guidelines on pronoun use in core curriculum and looking at inclusive language use across resources and data systems (Parents as Teachers)
- Gender Spectrum training for staff and field (Parents as Teachers)
- LGBTQ+ Employee Resource Group (Educational Development Center)
- Internal training and discussions for MIECHV TA staff on sexual orientation and gender identity (Education Development Center)
- Cultural Competence Pathway is now available and fully implemented across all programs (Nurse Family Partnership)

Network Advisory Committee members expressed interest in learning more. For example:

- "How prepared are home visiting programs to be inclusive of gender diverse families?"
- "How can we better support LGBTQ+ families and those with children who identify as queer or nonbinary or transgender?"
- "I do wonder in a field primarily built for women that is striving to be more inclusive of fathers, if there are different narratives for transwomen than cis women. Or differences in engaging fathers who are trans or cis?"

Training by Trystan Reese¹ on LGBTQ+ and Home Visiting

The training provided an introduction to LGBTQ+ parents and families including core understandings, unique challenges faced by gender diverse families, the Four Pillars of identity, and allyship and advocacy in cases where homophobia or transphobia may arise. Trystan also highlighted why a deeper understanding of these issues is particularly important to the field of home visiting.

To begin, Trystan shared three core understandings: (1) LGBTQ+ families are like all other families—“we can’t find child care, our kids fight, we want safe schools and clean water...all the same things other families want too;” (2) LGBTQ+ families are different because their route to becoming a family may be more complicated or circuitous; and (3) LGBTQ+ families are different from one another—there is no monolith so it does not mean that what works for one family will work for another.

Trystan provided level setting, sharing data to raise our awareness of the size and challenges of the LGBTQ+ community. For example, according to the Williams Institute, 20 percent of LGBTQ+ parents are raising approximately 5 million children under age 18. These families cross every socioeconomic status, though many live at or below the poverty level. About one in three transgender people have been refused health care, and 70% have experienced some form of discrimination. They may have fewer familial resources to lean on for support due to homophobia and/or transphobia in their extended family. And they have decreased support around topics like lactation, safe sleep practices, and healthy relationships in part because they are often not able to comfortably access traditional services that could provide this support, or because they have developed internalized beliefs that it is bad to ask for and receive support. This is all fueled by the reality in public policy that more than 400 anti-LGBTQ+ bills were introduced in state legislatures in 2023, and more than 500 had been introduced during the first half of 2024.

We then learned about the Four Pillars of Identity: (1) sex assigned at birth; (2) gender identity—internal knowing of who we are / who we know ourselves to be which shows up between 3 to 5 years of age; (3) gender expression—how we choose to show the world our gender (e.g., the clothes we wear, how we cut our hair); and (4) sexual orientation—who we are attracted to and want to have relationships with.

Trystan acknowledged that using new language or pronouns that we may not be accustomed to can be challenging for many and may take some time to learn. He suggested that the home visiting community retrain our brains through patience (“acknowledge that you are learning something new

¹ <https://www.trystanreese.com/>

and when you make a mistake, avoid shame”), practice (“enlist your family to help you practice gender-neutral pronouns”), and persistence (“don’t give up or go on an apology parade”).

Some specific language suggestions included:

- use “parents” instead of “mothers” and “fathers;”
- talk about pregnancy in a more inclusive way (e.g., pregnant and post-partum people);
- use “you” as a more inclusive term (e.g., You might experience morning sickness. You might consider joining this group.); and
- ask families what they would like to be called, or what they call each other and then adopt that in our communication with them.

Reflecting on the call with Trystan, several members talked about the lack of data about LGBTQ+ families and home visiting; others talked about the need for staff training to be able to talk about and appreciate differences; still others talked about how responses to gender identity is even more complex when staff are living in areas where their places of worship or government is limiting to the binary. One member suggested that we should not be trying to change anyone’s mind, but instead create an environment and mindset where home visitors can work with all types of families, show respect, and do their job.

Next Steps for the National Home Visiting Network

As the Network considers what it might do to continue to advance awareness about gender and identity within home visiting, the following represents a preliminary list of suggestions gleaned from Network conversations.

Practice

- Use Rapid Response to share information about gender diverse families with home visitors, supervisors, national home visiting models, and allied professionals in order to build common language and understanding.
- Encourage the development and use of tools and trainings to help home visitors have welcoming and respectful conversations with LGBTQ+ families. It is important to turn standard questions into genuine curiosities and avoid making assumptions about answers.
 - “How would you like to be referred to?”
 - “What do you call each other in your family?”
 - “I want to understand what is unique about your family.”
- Consider approaches to recruitment of families, extending beyond female centric spaces (e.g., birthing hospitals/centers) and reaching out to kinship care programs, foster care, and other spaces.
- Create a welcoming space in your office.

- Create promotional materials/website with visual imagery that reflects the diversity of families, including same sex families.
- Allow opportunities for practicing using they/them pronouns during role plays or using gender neutral language that doesn't make assumptions.
- Consider not just how practices might need to improve for providing an inclusive environment for LGBTQ+ families, but also for LGBTQ+ staff.
- Review data collection forms to ensure they don't make assumptions about gender identity or sexual orientation.
- Offer training to home visitors on how to collect data around gender identity, etc.
- Seek out and share trainings and resources from allied fields (e.g., Head Start Early Childhood Learning and Knowledge Center (ECLKC)) that cover mental health resources and related information for engaging in potentially heavy topics.
- Consider, from a trauma-informed perspective, the potential impact of legislation and homophobia/transphobia on LGBTQ+ participants and staff. Prepare staff to support families/co-workers when there is news that may re-traumatize or worry people.
- Review screening tools (e.g., depression, intimate partner violence) to see if the current ones being used would work for all participants – not just those who identify as female and heterosexual.

Research

- Gather data to better understand:
 - The proportion of home visiting staff and families served who are part of minoritized sexual and gender identity groups.
 - The perspectives and unique needs of home visiting staff and families who are part of minoritized sexual and gender identity groups.
 - Challenges for reaching and engaging this population effectively.
 - Unique challenges (political, sociocultural) facing programs that serve this population and how challenges vary by state and region of the US.
- Offer training for researchers and evaluators to enhance awareness and understanding of LGBTQ+ identities to promote more respectful, inclusive research and evaluation.

Policy

- What state or Federal policies impact LGBTQ+ families either positively or negatively? Consider policies in the areas of adoption, foster care, and child welfare, for example.
- Monitor legislation that is introduced and, where appropriate, offer informational testimony at hearings.