

Sending the Right Message:

How Service Providers Can Use Family-Centered Communication to Support Engagement

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Amber became a social worker because she wanted to help people. This afternoon, she is calling new parents to offer them a home visiting program, which she believes provides great resources.

The phone rings but Tanya doesn't recognize the number. It might be her friend who just got a new phone. She answers and an unknown voice greets her:

"Hello! My name is Amber. I'm calling from the state-funded, "Happy Children, Healthy Families" program. How are you today?"

Tanya cautiously responds that she's fine and then asks why she was called.

"I see you recently welcomed a new baby — congratulations! I'm calling because we are offering new parents a home visiting program. Twice a week, a nurse would come help you with things like feeding and sleeping routines and maybe even address specific resource needs. Would you be interested?"

Immediately Tanya bristles. Does someone think she's a bad mom? Did she get reported somewhere? How did they get her phone number? She quickly responds "No," and hangs up. Slipping the phone into her pocket, Tanya heads into the bedroom to change her 5-week-old son and sighs. She needs help finding more diapers; she's running dangerously low.

Amber hangs up the phone, discouraged. So few people want to talk with her. Most people don't even answer the phone. Even when she works at the front desk, families don't seem interested in what her organization has to offer.

As a program manager, this fictional example may sound all too familiar. Families in your community may say they want resources — diapers, groceries, or mental health treatment — yet when your staff reaches out, families do not engage. With enough rejections, your staff may become convinced that outreach is a poor use of their time; families are just not interested.

Yet rather than being disinterested, many families may not engage because services do not meet their needs or are not presented in appealing ways. For example, families often share that offered services are not <u>culturally responsive</u>, are not during times or in locations that work for them, or focus too much on treatment- or skill-building services instead of basic needs supports. For other families, the tone of outreach and description of services may be off-putting or unclear.

These are fixable challenges. After more than a decade of helping governments improve engagement rates, the GPL has identified several **first-impression insights** that can help increase family engagement right from the start. This publication unpacks how managers can help their front-line staff prioritize family-centered communication across three categories:

1. Honor Families' Experience During Outreach

- 2. Seek and Act on Family Feedback
- 3. Make Family-Centered Communication the Norm

These insights, drawn from work across the United States, are broadly applicable whether staff are making a cold phone call, sending a warm text, or holding an in-person meeting.



1. Honor Families' Experience During Outreach

Front-line staff often reach out to families during difficult or stressful times. Individuals may be dealing with poverty, housing instability, substance use disorder, or the birth of a child. Because of this, front-life staff often tell us they feel stuck as they offer resources that can help families navigate these challenges. They want to communicate in a way that honors a family's strength and autonomy while also being transparent about who they are and what they can offer.

When staff offer resources using language that honors families' experience and perceptions, it can increase the likelihood that families engage with available supports. Below are several examples from the GPL's work with agencies across the country. While the principles are broadly applicable, details can be adjusted for individual jurisdictional needs.

Be clear about who you are and what you can provide

In Washington, when peers from a specialty legal clinic reached out to families, they were direct: "You've been reported to the CPS hotline for substance use. There is a high risk they will remove your baby when it is born. We provide legal services and can help advocate for you in that situation plus get you connected to resources along the way." Many families readily accepted this offer. Other providers in Washington were quick to explain they could offer diapers and baby clothes. The mothers-to-be accepted the clothes and were willing to continue the conversation, either by text or another phone call.

In New Hampshire, when home visiting providers contacted new parents, they were quick to say their state-funded program was voluntary and was not associated with Child Protective Services (CPS), nor would information about a family's participation in the program be shared with CPS.

Reassure parents they are not alone

For a New Hampshire home visiting program with broad eligibility, providers reminded parents: "All families can benefit from these supports and many families work with home visitors. I think you have lots to offer. It's just that it 'takes a village.' So many families are isolated these days and parents have so much to juggle, we want to help with that. Everyone could use help sometimes and that's what a home visitor offers!"

If your program has more limited eligibility, try inclusive language: "Many families find this support to be helpful," or "Lots of families can benefit from supports like these."

Demonstrate you respect families' time and autonomy

In Michigan, staff at a community-based organization first reach out to families referred to their program by text: *"Hello [CLIENT FIRST NAME], my name is [FIRST NAME] and I'm with [AGENCY NAME]. We are working to connect families with local resources like utility bill support, child care, and more. I would love to schedule a time to talk with you and give you more information. Feel free to call or text me at this number or email me at [EMAIL ADDRESS]." This approach allows the caregiver to consider the offer and pick a convenient, safe time to respond. If the caregiver shares any needs by text, staff can be better prepared for a return call, and can block time for longer conversations if needed.*

Staff at a criminal justice agency in Texas worried they were bothering parents by repeatedly offering services. Yet, families said they wanted to hear about services at different times and in different ways — calls, flyers, texts, or even shared by a different person. Reassured, staff patiently and persistently repeated their offers, including by sharing flyers early in the client relationship, and frequently returning to conversations about family well-being services during client check-ins.

The flyers told parents it was OK to change their mind about wanting services: "You may not yet know what your family may experience during this transition, but we are here for you now and later. Whenever you're ready, your advocate can get you more information or answer your questions." These adjustments helped contribute to a significant increase in the number of clients referred to family well-being services.



Avoid fear-inducing language

In one Texas county, staff worked to eliminate potentially stigma- and fear-inducing language. They adjusted their assessment questions away from asking about *concerns*, which is something a CPS investigator might say, to asking about *experiences*.

Instead of: "Do you have any concerns about your child's mental health and aggression?" they asked: "Does your kid ever have tantrums, or get really sad or scared, and you're not always sure how to calm them down?" And instead of: "Do you need help managing your child's behavior?" providers asked: "Do you want someone to help your child cope with recent life changes?"

Providers should be aware that some questions may embarrass families or make them nervous to answer for fear of consequences, like: *"Is your substance use impacting your ability to take care of your child?"* Additionally, using terms like "children and families" and "case manager," to describe voluntary services may still sound to families like the child welfare system.

Offer strength-based encouragement

In New Hampshire, parents shared that they wished providers would acknowledge their strengths, not just point out their weaknesses. Several mothers shared the sentiment: *"Please look at where I am now and how far I have come. Please value my role as a parent and understand that I am doing the best I can."*

In Texas, parents told staff that "fake positivity" from someone offering services was a huge turnoff to participation. Yet parents wanted to feel validated for their efforts. Following this input, staff adjusted outreach language to be more authentic: *"We know you love your kids, and whatever your family looks like, part of our job is to make sure you have the right supports in place — that includes supporting the people you love."*

In Washington D.C., family resource center staff sent follow-up text messages to families after their first visit to their local resource center. The messages included invitations to future events and concluded with the phrase, *"Will we see you there?"* Participants said this type of positive feedback encouraged them to engage with staff and stay connected to the center.



2. Seek and Act on Feedback from Families

Creating opportunities to seek and act on feedback from families is key to designing effective initial outreach and supporting long-term engagement. There are two main ways to solicit feedback:

1. **Review engagement data to analyze indirect family feedback:** The best way to know if your outreach to families is working is by observing how they respond. If a family hangs up the phone in the middle of an outreach call, that is feedback. If a family does not show up to

their first in-person meeting, that is feedback. On the other hand, when families engage and stay engaged with services, that is also feedback.

2. Ask families for direct feedback: Your engagement data is a great start. But it does not paint a full picture. Families can offer unique insights you may not get in any other way. This is where focus groups, surveys, and interviews are helpful. Ask families why they chose to engage with a program or how services could be improved.

The following examples show how the GPL worked with jurisdictions to seek and act on both types of feedback in order to better serve families.



Review engagement data to analyze indirect family feedback

Before sending out a survey or convening a focus group, review the rich collection of parental feedback you *already have* in existing engagement data. Review when most parents drop off. Try to compare family engagement levels when your staff used an old phone script versus a newer script. Analyzing this data can help you and your staff do more of what seems to resonate with families and identify areas where staff could adjust outreach efforts.

To gain the most actionable insights, make sure to <u>disaggregate the data</u>. This allows you and your staff to spot differences in engagement rates by age, geography, provider, or other relevant factors.

When leaders in Washington disaggregated their data by provider, they found that one provider had higher service engagement rates than others. Leaders spoke with that provider and learned they had been trying different outreach approaches, like texting, that seemed to be more effective at getting families to engage. Washington leaders asked other service providers to also try texting. Client response and service engagement rates improved broadly over time as providers continued to learn from each other.

In Rhode Island, leaders wanted new, detailed ways to see how many families were engaging with home visiting services. The GPL helped create new data dashboards that monitored a variety of engagement-focused factors. The new dashboards allowed leaders to easily compare the number of expected visits with actual visits completed. As a result of the data dashboard and other efforts, 22 percent more Rhode Island families facing adversity accepted referrals for home visiting services.

Ask families for direct feedback

When you have reached the limit of what you can learn from your data, you can gain valuable insights by talking with families through interviews, surveys, or focus groups. Ask families about specific outreach language, methods and timing of outreach, or the people doing the outreach. When seeking family feedback, make sure you can act on what families say. If families are asked to provide feedback for something that cannot be changed, they may feel their voices did not matter. This can reduce families' willingness to provide additional feedback or even engage with future services.

In Texas, agency leaders and the GPL convened a parent work group to suggest revisions to an outreach flyer, a needs assessment, a service provider script, and a parent interview guide. Parents suggested eliminating jargon, removing unnecessary questions, and adding framing language to explain why certain questions were being asked. Their feedback also helped the GPL adjust outreach coaching. During each subsequent work group meeting, parents saw how their previous suggestions had been incorporated. These parents said the experience was deeply impactful: *"Our voices were not only heard but they were put to use. It's perfect."*



In the early days of the COVID-19 pandemic, the GPL helped

child welfare leaders in New Hampshire develop a resource guide intended to help the community watch out for children and report signs of abuse or neglect. However, during an agency-led focus group, parents shared concerns that the wording sounded punitive. In response, the agency shifted the tone and added language to normalize that the pandemic was a difficult time and that everyone could use support.

In Texas, parents involved with the criminal justice system said during interviews that they wanted referrals to services from people who had already demonstrated their trustworthiness through previous interactions. This included probation officers or jail chaplains who had already shown their willingness to listen, answer questions, and to treat the parent with dignity and respect. One parent said accepting services, "depends [on] who it is and how they're engaging with me. If I feel that parent-to-parent connection, I'll be more likely to respond to you. I'm looking for empathetic language: 'That must be hard being away from [your kids] right now.' Something that shows they see my humanity."

Important Consideration

When seeking feedback, it is easier to talk with families who are already enrolled in programs or who have previously engaged with an organization. As a result, these families' perspectives, while important, can become overrepresented in feedback. Families who **do not** participate may have very different perspectives, yet may be more difficult to hear from. In Michigan, the GPL helped interview families who declined services in addition to those who accepted services. Families were re-contacted and offered a \$40 grocery store gift card for answering a few questions. Interviewers shared with families how their input could improve services for future participants.



3. Make Family-Centered Communication the Norm

For many managers, adjusting long-standing ways of doing things or bringing new attention to outreach practices may feel daunting or overwhelming. Staff may not want to leave behind old, familiar scripts, especially if they feel like they have honed their approach over years of working with families. Some staff may feel like outreach is a low priority compared to the rest of their job or goes beyond their scope of work. It is also possible staff have already tried to adjust outreach with limited success.

To address these concerns, leaders need to ensure they are making changes in ways that can be effective and lasting. The following examples from GPL project work show how leaders can embed family-centered communication into their agency's structure and practices.

Make new approaches the default practice

What resources do your team members use to guide their outreach to families? Consider creating new tools or adjusting existing language to reflect the family-centered communication strategies you want to adopt. This could include language in your:

- Scripts, talking points, or conversation guides for staff as they talk with families.
- Templates for letters, e-mails, or texts your staff sends to families.
- Other resources shared with families such as program flyers or website program descriptions.
- Initial forms or questionnaires that families complete.
- Training materials or program manuals that outline expectations for staff doing outreach.

Adjusting these everyday staff tools can help change the standard procedure, instead of relying on the energetic efforts of one leader to motivate individual staff members' behavior.

Frame family engagement as a key component of staff's job

In Michigan, nurse home visitors said they were uncomfortable making outreach calls to new moms because it felt like marketing, not nursing. They didn't like "chasing down" moms and became discouraged when moms turned down their offers.

The GPL helped program managers communicate that as nurses, they already had the skills to be nurturing and relational people. Practicing outreach conversations could help those encounters feel more comfortable and natural. Program managers also reassured nurses that outreach was a key step in meeting their existing goals of addressing maternal mortality and connecting with hard-toreach families. To help ease concerns, program managers held a meeting during which they asked the nurses to share a success they had seen during their outreach efforts, what has been hard about outreach, and something new they could try.

The co-learning process was helpful for the nurses to acknowledge both the difficulties and the possibilities. Michigan home visiting program managers continue to talk about the importance of outreach in ongoing meetings.

Important Consideration

Governments can increase their family-centered communication efforts by making outreach and engagement efforts an explicit part of their contracts with providers. This includes dedicating adequate resources (e.g., funding, staffing capacity) specifically for these components.

In New Hampshire, the GPL worked with government leaders on a request for proposals (RFP) for community-based voluntary services. The RFP asked providers to detail their engagement approach: *"How will your agency participate in pre-referral 'handoffs' from DCYF, process referrals, and initially engage families referred to your program? What strategies will your agency use to ensure families seamlessly transition and successfully engage in the service?"* Leaders also signaled the importance of outreach by including engagement measures in key contract performance metrics and tying small bonus payments to meeting the outlined goal.

Practice, practice, practice

In Florida, the GPL brought program staff together for a half day of training sessions, which included:

- Time to review engagement data that managers had been discussing in performance meetings.
- Sessions to develop mock flyers for the program using family-centered language.
- Role-play opportunities to strengthen engagement where staff practiced an initial outreach call to a client.

The practice helped staff learn from their peers and become more comfortable using family-centered language to explain the program.



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