JACKIE WALORSKI CENTER
for Evidence-Based Case Management
SUPPORTING HOME VISITING

Virtual Mental Health Service Referrals in Home Visiting: Results from a National Survey

Referrals to community services are an important component of case management, but these services are not always available in communities when families need them. Virtual professional mental health services offer caregivers enrolled in home visiting a flexible way to access support, regardless of whether in-person options are available in their community. The Jackie Walorski Center for Evidence-Based Case Management surveyed home visiting staff with an active caseload from May—June 2026 to understand their experiences referring caregivers to virtual mental health services. The data below illustrates what we learned from the field.



SURVEY PARTICIPANTS

1,126 Home visiting staff*

35 Home visiting models

64% Work in rural communities

50 States plus D.C. and the U.S. Virgin Islands

17% Work in Native lands or sovereign territories

*All participants had an active caseload. Nearly all (94%) identified as home visitors; the other 6% identified as supervisors, program managers, or program directors.

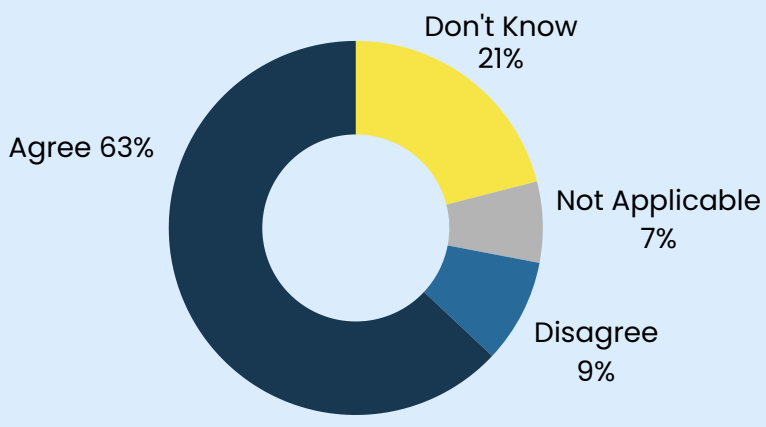
HOME VISITORS VALUE VIRTUAL MENTAL HEALTH SERVICES

91% Believe virtual mental health services can improve caregivers' mental health

84% Feel confident explaining virtual mental health services to caregivers

76% Are likely to suggest a virtual option if they think a caregiver would benefit from mental health services

Most agree that **caregivers are generally satisfied with virtual mental health services**, yet many reported not knowing whether caregivers are satisfied.



TOP REASONS FOR REFERRING TO VIRTUAL MENTAL HEALTH SERVICES

Half of participants (51%) referred caregivers to mental health services knowing that services would be provided virtually. The most common reason for referring was to overcome transportation challenges.

1. Overcoming transportation challenges **(78%)**
2. Greater scheduling flexibility **(60%)**
3. Faster access to services **(52%)**
4. Client interest in virtual mental health services **(51%)**
5. Limited availability of in-person mental health services in the community **(41%)***

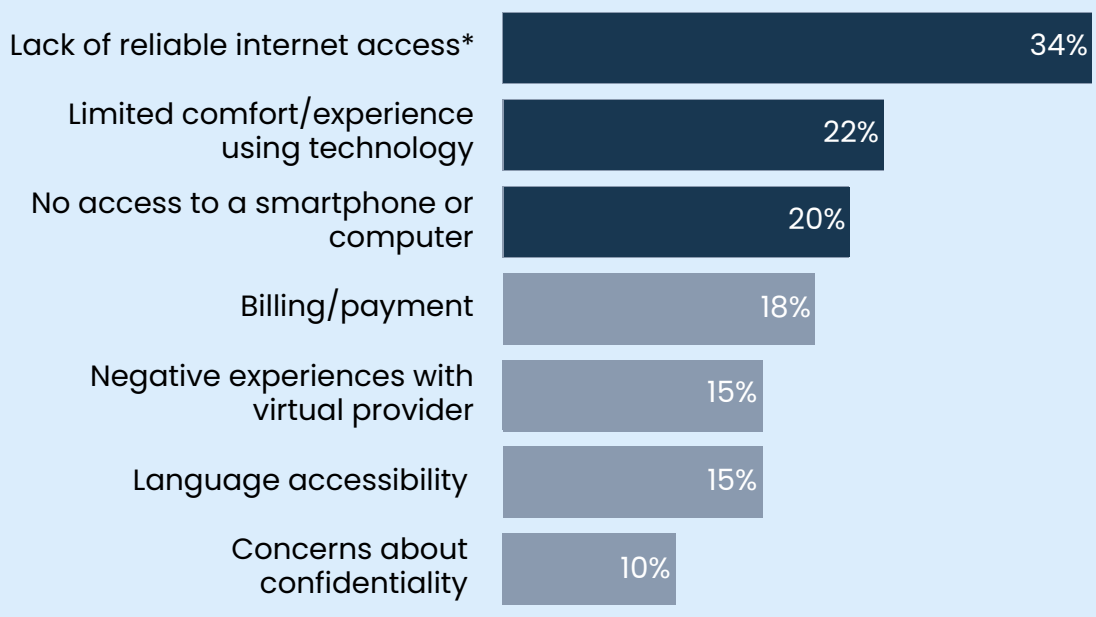
> "Virtual mental health services **can benefit** some of the families I work with. This is due to several having transportation issues, working around other commitments, childcare and insurance. Virtual helps to **break down these barriers**."

> "Telehealth is often **faster** and **more convenien**t for my families that struggle with transportation, time management, and rural locations."

*Home visitors in **rural communities** were more likely to report making referrals to virtual services because **in-person services are not available** in their community.

TECHNOLOGY ACCESS AND DIGITAL SKILLS ARE COMMON BARRIERS TO USING VIRTUAL MENTAL HEALTH SERVICES

Over 60% of home visitors reported that caregivers had shared challenges using virtual services.



*Home visitors in **rural communities** were more likely to report **unreliable internet** as a challenge.

> "Some caregivers need **extra support with technology**, such as downloading applications, navigating virtual platforms, or understanding how to join appointments. While virtual options can lower travel burden, the need for technical assistance sometimes **adds another layer of work**."

STRATEGIES WHEN MENTAL HEALTH SERVICES ARE NOT AVAILABLE

When neither virtual nor in-person professional mental health services are available, home visitors use several strategies to fill the service gap. Overwhelmingly, the most used strategy was **providing direct services and support to caregivers.** The most common strategies are summarized below.

1 Direct services

Provision of emotional support and psychoeducation, increased visit frequency, use of model-specific tools and curricula, and specialty trainings and curricula, such as the Mothers and Babies program.

> "I focus on building a layered support approach that combines **emotional support, practical coping tools, community connection,** and **safety monitoring**. The goal is not to replace professional care, but to **reduce isolation, stabilize stress, and help caregivers function** while identifying any need for urgent intervention."

2 Community supports

Connections to formal and informal support groups, social networks (family, friends, coworkers), and faith-based services and religious leaders.

3 Publicly available resources

Sharing of national organizations (e.g., Postpartum Support International), websites and online resources, apps (e.g., Canopie), and crisis numbers and hotlines.

4 Other medical professionals

Referrals to non-mental health medical professionals such as primary care providers, OB/GYNs, and emergency medical care.

Key takeaway: Many communities experience barriers to accessing in-person mental health care, with rural communities facing particular challenges. Referrals to virtual services are a promising strategy when in person services are not available or accessible in a community. While most home visitors feel confident explaining virtual services to caregivers, they may need additional time and resources to address caregivers' technology needs. When professional services are unavailable, home visitors often step in to fill the gap, underscoring the need for focused training and reflective supervision. More information is needed on families' experiences with virtual mental health care.

For up-to-date information and opportunities to engage with us, please visit our website: www.HVWorkforce.org
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