

Evidence-Based Family Home Visiting

DEFINITION

Evidence-based family home visiting is the number of families enrolled in evidence-based home visiting programs funded/coordinated by the Rhode Island Department of Health.

SIGNIFICANCE

Parents are the most important individuals in a child's life, particularly during infancy and early childhood. Infants and toddlers who receive responsive, nurturing care and are provided with opportunities to learn have a strong foundation for success. When parents face obstacles that impact their ability to meet the needs of their babies, the child's health, development, and learning trajectory are threatened.^{1,2}

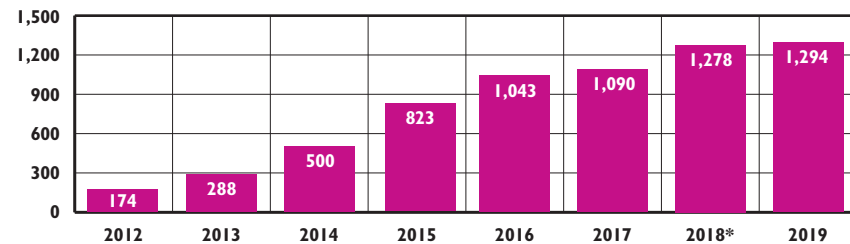
Home visiting programs are designed to reach young children and their families at home. Each program is different, but all provide parenting education to foster healthy, safe, and stimulating environments for young children. Children in vulnerable families who participate in high-quality home visiting programs have improved language, cognitive, and social-emotional development and are less likely to experience child abuse and neglect. Families who participate are more likely to provide an enriching home environment, use appropriate discipline strategies, and become more

economically secure through education and employment. Some home visiting programs can also improve maternal and child health, reducing long-term health care costs.^{3,4,5}

In 2010, federal legislation established the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program to expand and improve state-administered home visiting programs for vulnerable families with young children. This funding must be spent by states on approved models that meet rigorous evidentiary standards.⁶ In 2019, there were 21 home visiting models identified as effective, evidence-based programs for families during the prenatal period and early childhood years, with evidence showing they produce statistically significant improvements in outcomes for children and families.⁷ Rhode Island uses MIECHV funding to implement three of these evidence-based models: Healthy Families America, Nurse-Family Partnership, and Parents as Teachers, and the federal government directly funds the Early Head Start home-based option.⁸ In order to achieve improved outcomes for children, evidence-based programs must meet the needs of the community, follow national high-quality program standards, and focus on continuous program improvement.⁹



Families Enrolled in Evidence-Based Family Home Visiting Coordinated by the Rhode Island Department of Health, Rhode Island, 2012-2019



Source: Rhode Island Department of Health, Family Home Visiting, Family Visiting Database, October 2012-2019. *Beginning in 2018, enrolled families includes all families participating in Parents as Teachers programs, including those without MIECHV funding.

◆ As of October 2019, of the 1,294 parents/caregivers participating in evidence-based home visiting programs 12% were under age 20, 18% were ages 20 to 24, and 70% were age 25 or older at enrollment. Twenty-seven percent of the parents/caregivers had less education than a high school diploma or GED, 34% had a high school diploma or GED, 21% had some college or vocational training, 10% had a four-year college degree, and 8% had an unknown amount of education. At the time of enrollment, 42% of the parents/caregivers were single, 48% were married or had a domestic partner, 5% were divorced or separated, less than 1% were widowed, and 4% had an unknown marital status. Among the enrolled children, 8% were not born yet, 35% were under age one, 24% were age one, 15% were age two, 15% were age three, and 3% were age four.¹⁰

◆ Home-based Early Head Start is also recognized as an evidence-based home visiting program that improves child outcomes.¹¹ As of October 2019 in Rhode Island, there were 374 children enrolled in home-based Early Head Start.¹²

◆ Early Intervention (EI) programs serve infants and toddlers with developmental delays and disabilities in Rhode Island and deliver nearly all (98%) services through home visits. As of June 2019, there were 2,358 children enrolled in EI in Rhode Island.¹³

◆ Rhode Island also operates First Connections, a statewide, short-term home visiting program designed to help families get connected to needed resources.¹⁴ In 2019, 2,235 children received at least one First Connections home visit (49% lived in one of the four core cities and 51% in the remainder of the state).¹⁵

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Table 17.

Evidence Based Family Home Visiting, Rhode Island, 2019

CITY/TOWN	COMMUNITY CONTEXT, 2019			# RECEIVED FIRST CONNECTIONS VISIT IN 2019	# FAMILIES ENROLLED IN EVIDENCE-BASED HOME VISITING PROGRAMS, OCTOBER 1, 2019			
	TOTAL # OF BIRTHS	# OF BIRTHS WITH 1 OR MORE RISK FACTORS	# OF BIRTHS TO LOW-INCOME FAMILIES		HEALTHY FAMILIES AMERICA	NURSE-FAMILY PARTNERSHIP	PARENTS AS TEACHERS*	TOTAL
Barrington	107	38	14	8	0	0	0	0
Bristol	119	67	37	14	4	0	26	30
Burrillville	101	56	41	16	2	0	0	2
Central Falls	291	248	247	106	45	19	27	91
Charlestown	44	25	17	14	5	0	0	5
Coventry	295	146	83	65	11	1	7	19
Cranston	753	447	332	145	49	3	32	84
Cumberland	286	127	80	39	6	1	5	12
East Greenwich	123	33	16	10	3	0	3	6
East Providence	413	275	184	83	16	6	12	34
Exeter	49	23	16	14	1	0	1	2
Foster	40	20	12	7	1	1	0	2
Glocester	60	25	17	6	1	0	1	2
Hopkinton	58	32	19	12	2	0	0	2
Jamestown	26	13	1	1	0	0	0	0
Johnston	257	166	106	41	6	3	2	11
Lincoln	163	75	42	23	5	1	1	7
Little Compton	8	3	3	2	0	0	1	1
Middletown	145	75	46	31	3	1	7	11
Narragansett	45	19	15	13	2	0	0	2
New Shoreham	6	5	5	0	0	0	0	0
Newport	218	132	96	38	12	1	10	23
North Kingstown	219	92	56	60	5	2	11	18
North Providence	312	195	152	51	10	3	9	22
North Smithfield	69	32	11	13	1	1	1	3
Pawtucket	820	619	527	246	100	28	41	169
Portsmouth	103	40	22	25	5	0	5	10
Providence	2,292	1,800	1,712	644	270	89	93	452
Richmond	59	31	16	20	2	0	1	3
Scituate	90	40	17	6	1	0	0	1
Smithfield	127	62	28	13	0	0	0	0
South Kingstown	171	75	46	43	16	0	0	16
Tiverton	57	27	19	9	4	0	4	8
Warren	61	39	23	7	3	0	11	14
Warwick	678	376	206	144	29	2	24	55
West Greenwich	43	14	9	9	2	0	1	3
West Warwick	284	202	146	96	25	1	5	31
Westerly	130	77	51	58	11	0	40	51
Woonsocket	492	403	367	103	51	10	31	92
<i>Four Core Cities</i>	<i>3,895</i>	<i>3,070</i>	<i>2,853</i>	<i>1,099</i>	<i>466</i>	<i>146</i>	<i>192</i>	<i>804</i>
<i>Remainder of State</i>	<i>5,719</i>	<i>3,104</i>	<i>1,984</i>	<i>1,136</i>	<i>243</i>	<i>27</i>	<i>220</i>	<i>490</i>
<i>Rhode Island</i>	<i>9,614</i>	<i>6,174</i>	<i>4,837</i>	<i>2,235</i>	<i>709</i>	<i>173</i>	<i>412</i>	<i>1,294</i>

Source of Data for Table/Methodology

Home visiting data are from the Rhode Island Department of Health, Family Home Visiting, Family Visiting Database. Birth data are from Rhode Island Department of Health, Center for Health and Data Analysis, KIDSNET. Number of births with one or more risk factor is the "risk positive" definition from the Developmental Risk Assessment. Births to low-income families are births to families with public health insurance (Medicaid/RtceCare) or no insurance.

*Beginning in 2018, enrolled families includes all families participating in Parents as Teachers programs, including those without MIECHV funding.

Unknown: Specific city/town information is unavailable.

Core cities are Central Falls, Pawtucket, Providence, and Woonsocket

References

- ^{1,3} DiLauro, E. & Schreiber, L. (2012). *Reaching families where they live: Supporting parents and child development through home visiting*. Retrieved February 26, 2020, from www.zerotothree.org
- ^{2,5} *Early childhood home visiting: What legislators need to know*. (2019). Washington, DC: National Conference of State Legislators.
- ^{4,7,11} *Home visiting evidence of effectiveness review: Executive summary*. (2019). Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation.
- ⁶ *Home visiting primer*. (2018). Arlington, VA: National Home Visiting Resource Center.
- ^{8,10,15} Rhode Island Department of Health, 2019.
- ⁹ Home Visiting Evidence of Effectiveness. (n.d.). *Evidence-based models eligible to Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grantees*. Retrieved February 27, 2020, from <https://homvee.acf.hhs.gov>
- ¹² Rhode Island Early Head Start program reports to Rhode Island KIDS COUNT, October 2019.
- ¹³ Rhode Island Executive Office of Health and Human Services, Center for Child and Family Health, June 30, 2019.
- ¹⁴ Rhode Island Department of Health. (n.d.). *First Connections*. Retrieved March 1, 2020, from <http://health.ri.gov>