

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

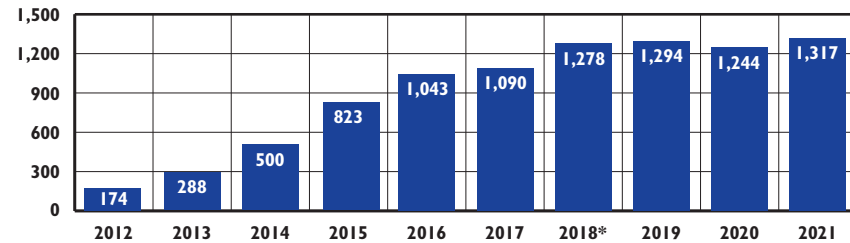
Parents are the most important individuals in a child's life, particularly during infancy and early childhood. Infants and toddlers who receive responsive, nurturing care and are provided with opportunities to learn have a strong foundation for success. When parents face obstacles that impact their ability 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 2021, there were 22 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.^{8,9} 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.¹⁰

Families Enrolled in Evidence-Based Family Home Visiting Coordinated by the Rhode Island Department of Health, Rhode Island, 2012-2021



Source: Rhode Island Department of Health, Family Home Visiting, Family Visiting Database, October 2012-2021. *Beginning in 2018, enrolled families includes all families participating in Parents as Teachers programs, including those without MIECHV funding.

- ◆ As of October 2021, of the 1,317 families participating in evidence-based home visiting programs 10% had mothers under age 20, 68% had mothers ages 20 to 24, and 22% had mothers ages 25 or older at enrollment. At the time of enrollment, 59% of mothers were single, 31% were married, 5% were divorced, separated, or widowed, and 4% had an unknown marital status. Among the enrolled children, 9% were not born yet, 84% were under age one, 4% were age one, 2% were age two, <1% were age three, and none were age four. Forty-five percent of enrolled children were white, 18% were Black, 6% were Multiracial, 2% were Asian, 1% were Native American, 1% were Native Hawaiian or other Pacific Islander, and 28% were of an unknown race or declined to answer. Within these race categories, 49% of enrolled children were Hispanic.¹¹
- ◆ Home-based Early Head Start is also recognized as an evidence-based home visiting program that improves child outcomes.¹² As of October 2021 in Rhode Island, there were 241 children and pregnant women enrolled in home-based Early Head Start.¹³
- ◆ Early Intervention (EI) programs serve infants and toddlers with developmental delays and disabilities in Rhode Island and deliver nearly all (>99%) services through home visits. As of June 2021, there were 2,102 children enrolled in EI in Rhode Island.^{14,15}
- ◆ Rhode Island also operates First Connections, a statewide, short-term home visiting program designed to help families get connected to needed resources.¹⁶ In 2021, 3,391 children received at least one First Connections home visit (55% lived in one of the four core cities and 45% in the remainder of the state).¹⁷

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Table 17.

Evidence Based Family Home Visiting, Rhode Island, 2021

CITY/TOWN	COMMUNITY CONTEXT, 2021			# RECEIVED FIRST CONNECTIONS VISIT IN 2021	# FAMILIES ENROLLED IN EVIDENCE-BASED HOME VISITING PROGRAMS, OCTOBER 1, 2021			
	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	123	39	14	13	2	0	1	3
Bristol	133	73	36	16	5	0	29	34
Burrillville	128	86	53	16	2	0	0	2
Central Falls	305	272	250	119	58	27	20	105
Charlestown	60	34	17	22	5	1	4	10
Coventry	285	151	73	81	15	0	5	20
Cranston	762	454	296	297	39	6	23	68
Cumberland	298	147	72	21	13	0	2	15
East Greenwich	128	45	10	22	2	1	1	4
East Providence	448	267	142	68	11	2	11	24
Exeter	40	20	14	10	2	0	2	4
Foster	44	19	8	1	2	0	0	2
Glocester	63	33	19	7	0	0	0	0
Hopkinton	74	40	21	15	2	0	5	7
Jamestown	28	11	7	6	0	0	1	1
Johnston	281	166	106	46	7	2	6	15
Lincoln	181	102	57	36	3	1	4	8
Little Compton	15	7	7	3	1	0	0	1
Middletown	141	65	34	30	6	0	7	13
Narragansett	53	30	19	21	2	0	3	5
New Shoreham	6	5	4	3	0	0	3	3
Newport	189	112	87	62	19	0	9	28
North Kingstown	225	107	48	72	4	3	15	22
North Providence	324	210	144	65	7	3	6	16
North Smithfield	88	38	19	7	0	0	1	1
Pawtucket	759	586	445	230	99	34	43	176
Portsmouth	119	57	21	28	8	0	6	14
Providence	2,276	1,774	1,567	1,404	254	61	137	452
Richmond	70	35	12	24	1	0	0	1
Scituate	94	53	18	10	1	0	0	1
Smithfield	143	72	30	17	0	0	2	2
South Kingstown	170	90	45	64	12	0	3	15
Tiverton	71	38	24	10	6	0	1	7
Warren	75	44	31	7	4	0	8	12
Warwick	730	423	204	211	29	3	17	49
West Greenwich	66	30	11	8	2	1	1	4
West Warwick	279	215	134	133	23	4	8	35
Westerly	151	88	59	63	8	0	37	45
Woonsocket	467	393	337	121	49	4	37	90
Unknown	0	0	0	2	3	0	0	3
Four Core Cities	3,807	3,025	2,599	1,874	460	126	237	823
Remainder of State	6,085	3,406	1,896	1,515	243	27	221	491
Rhode Island	9,892	6,431	4,495	3,391	706	153	458	1,317

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/RtIteCare) or no insurance. Birth data includes babies born in Rhode Island to Rhode Island residents.

*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

- ¹³ *Home visiting: Improving outcomes for children.* (2021). Washington, DC: National Conference of State Legislatures.
- ²⁵ *Early childhood home visiting: What legislators need to know.* (2019). Washington, DC: National Conference of State Legislatures.
- ^{47,12} *Early childhood home visiting models: Reviewing evidence of effectiveness.* (2021). Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation.
- ⁶ National Home Visiting Resource Center. (2018). *Home visiting primer.* Arlington, VA: James Bell Associates and the Urban Institute.
- ⁸ *Family visiting legislative report.* (2021). Providence, RI: Rhode Island Department of Health.
- ⁹ *Head Start program facts: Fiscal Year 2019.* (2021). Retrieved March 30, 2022, from eclkc.ohs.acf.hhs.gov
- ¹⁰ Home Visiting Evidence of Effectiveness. (2021). *Models eligible to Maternal, Infant, and Early Childhood Home Visiting (MIECHV) funding.* Retrieved March 30, 2022, from homvee.acf.hhs.gov

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