Connecticut

Families Served Through Evidence-Based Home Visiting in 2019

Models implemented in Connecticut included Child First, Early Head Start Home-Based Option, Family Check-Up, Minding the Baby, Nurse-Family Partnership, and Parents as Teachers. Statewide, 91 local agencies operated at least one of these models.

69,822
home visits provided

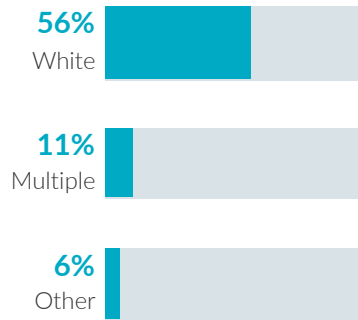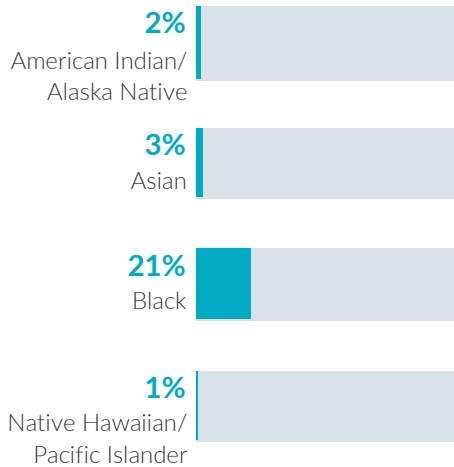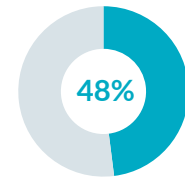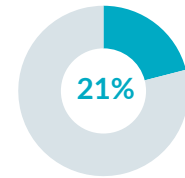**4,315**
families served

4,344
children served

Race

2% American Indian/ Alaska Native	**56%** White
3% Asian	**11%** Multiple
21% Black	**6%** Other
1% Native Hawaiian/ Pacific Islander	

Ethnicity

48%
Hispanic or Latino

Caregiver education

21%
No high school diploma

Child age

24%
< 1 year

38%
1-2 years

39%
3-5 years

Child insurance status

90%
Public

9%
Private

<1%
None

Primary language

81%
English

15%
Spanish

4%
Other
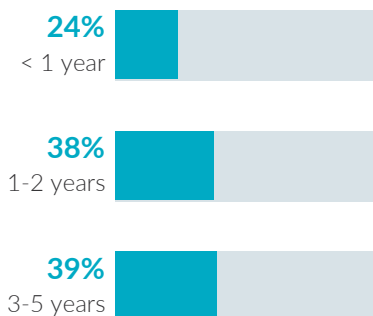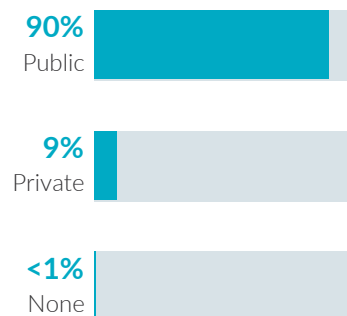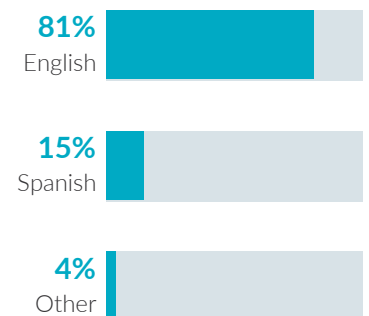
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Potential Beneficiaries in 2019

In Connecticut, there were 167,300 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 213,400 children.

213,400 children
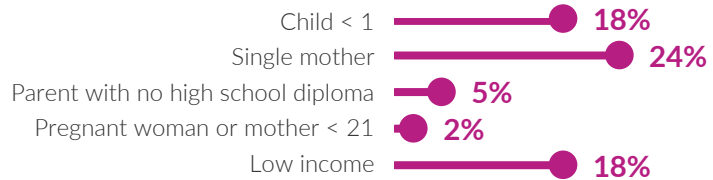
could benefit from home visiting

Of the 213,400 children who could benefit—

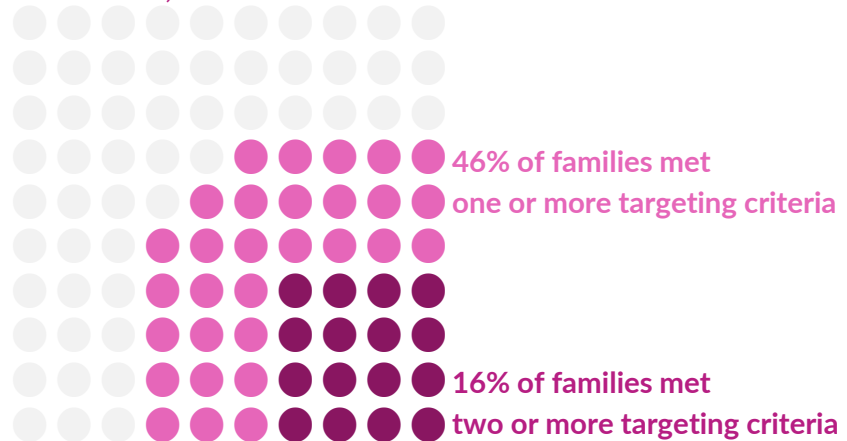| Infants < 1 year	Toddlers 1-2 years	Preschoolers 3-5 years
33,900	72,700	106,800
16%	34%	50%

167,300 families

could benefit from home visiting

Many home visiting services are geared toward particular subpopulations. The NHVRC estimated the percentage of families who could benefit in Connecticut who met the following targeting criteria:

Child < 1	**18%**
Single mother	**24%**
Parent with no high school diploma	**5%**
Pregnant woman or mother < 21	**2%**
Low income	**18%**

Of the 167,300 families who could benefit—

46% of families met one or more targeting criteria

16% of families met two or more targeting criteria

Notes • NHVRC State Profiles present data provided by evidence-based models, which include both MIECHV and non-MIECHV data. This State Profile includes participant data from the following evidence-based models: Child First, EHS, Minding the Baby, NFP, and PAT. • Missing and unknown data were not included in calculations. • Percentages may not add to 100 due to rounding. • Public insurance includes Medicaid, CHIP, and TRICARE. • Low income is defined as family income below the federal poverty threshold. • Single mothers include single, never married mothers or pregnant women. • EHS data may be underreported. Data include EHS programs that provided home-based services only. EHS race, ethnicity, and primary language data include children and pregnant caregivers. EHS did not report home visits or families served. The number of children served was included as a proxy for families served. • Minding the Baby did not report child insurance status or primary language data. • NFP reported primary language of caregivers. • PAT data for child insurance status and primary language were not included.

National Home Visiting Resource Center
www.nhvrc.org