

Arkansas

Families Served Through Evidence-Based Home Visiting in 2021

Models implemented in Arkansas included Early Head Start Home-Based Option, Family Connects, Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Nurse-Family Partnership, Parents as Teachers, and SafeCare Augmented. Statewide, 55 local agencies operated at least one of these models.



131,771

home visits provided
including 28,532 virtual visits



6,433

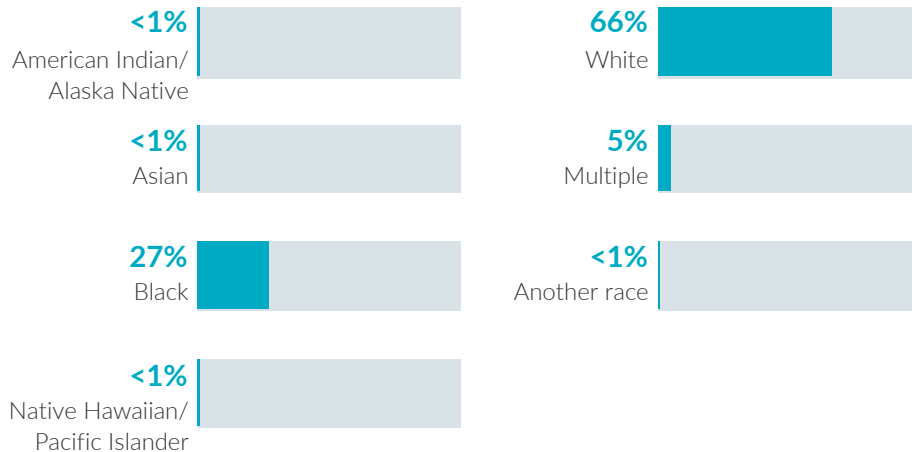
families served



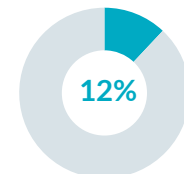
6,940

children served

Race

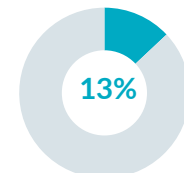


Ethnicity



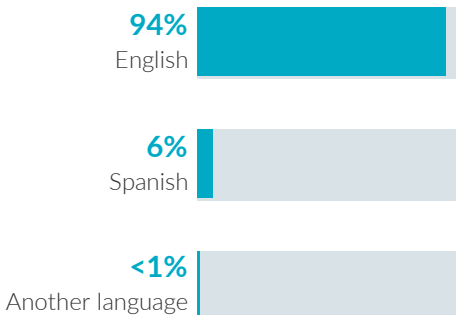
Hispanic or Latino

Caregiver education

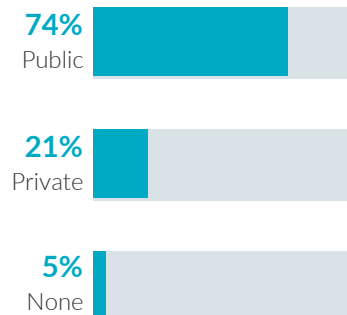


No high school diploma

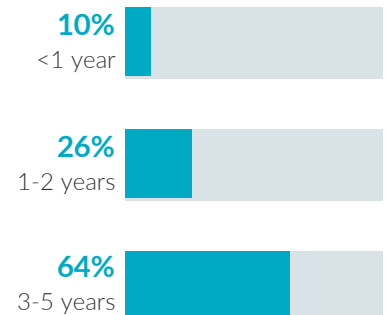
Primary language



Child insurance status



Child age



Arkansas

Potential Beneficiaries in 2021

In Arkansas, there were 178,700 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 221,400 children.

221,400
children

could benefit from home visiting

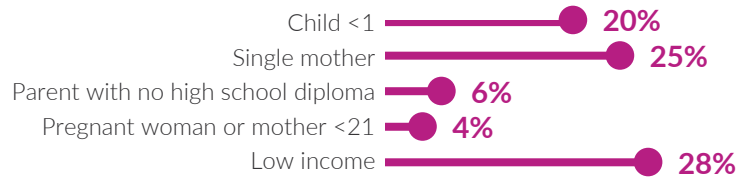
Of the 221,400 children who could benefit—

Infants <1 year	Toddlers 1-2 years	Preschoolers 3-5 years
34,200 15%	75,800 34%	111,300 50%

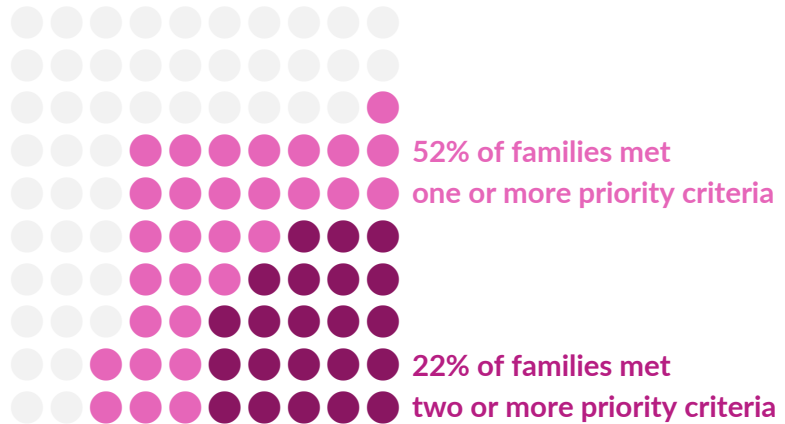
178,700
families

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 Arkansas who met the following priority criteria:



Of the 178,700 families who could benefit—



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: Family Connects, HFA, HIPPIY, NFP, PAT, and SafeCare Augmented. • 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. • Family Connects did not report children served. The number of families served was included as a proxy for children served. • HFA reported primary language of caregivers. Private insurance includes other forms of health insurance. • NFP reported primary language of caregivers. • PAT data for child insurance status and primary language were not included. • SafeCare Augmented reported language of service delivery, caregiver ethnicity and race, and families served only. The number of families served was included as a proxy for children served.

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National Home Visiting
Resource Center
www.nhvrc.org