Florida

Families Served Through Evidence-Based Home Visiting in 2021

Models implemented in Florida included Child First, Early Head Start Home-Based Option, Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Nurse-Family Partnership, Parents as Teachers, and Play and Learning Strategies. Statewide, 99 local agencies operated at least one of these models.

225,207
home visits provided
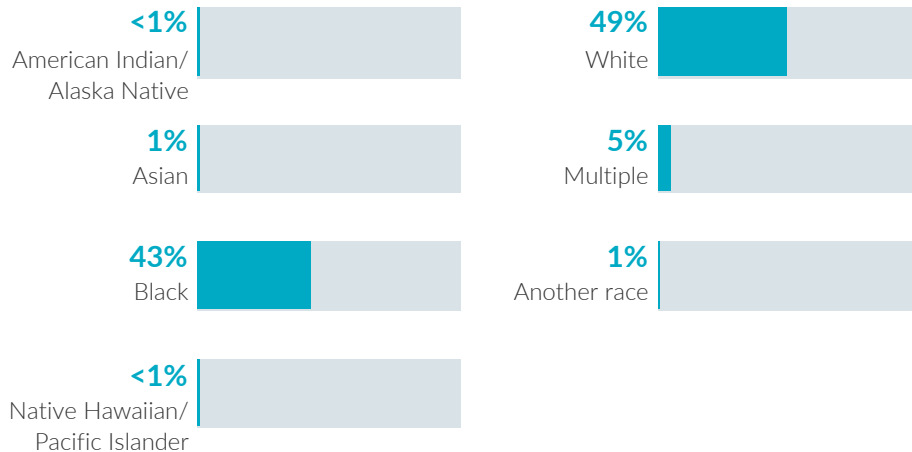*including 190,545 virtual visits*
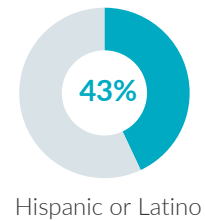
15,924
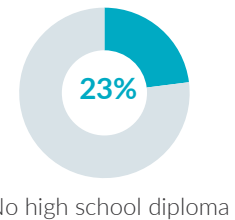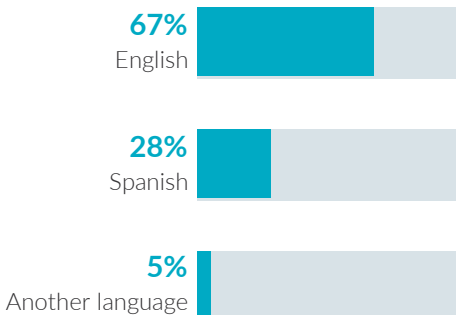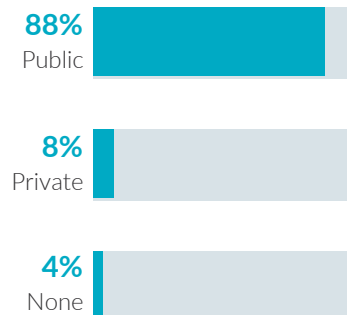families served

24,734
children served

Race

<1% American Indian/ Alaska Native	**49%** White
1% Asian	**5%** Multiple
43% Black	**1%** Another race
<1% Native Hawaiian/ Pacific Islander	

Ethnicity

43%
Hispanic or Latino

Caregiver education

23%
No high school diploma

Primary language

67% English

28% Spanish

5% Another language

Child insurance status

88% Public

8% Private

4% None

Child age

34% <1 year

37% 1-2 years

28% 3-5 years
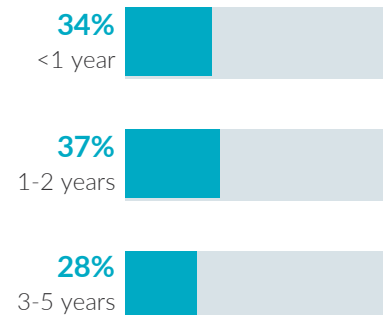
Florida

Potential Beneficiaries in 2021

In Florida, there were 982,100 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 1,310,200 children.

1,310,200 children
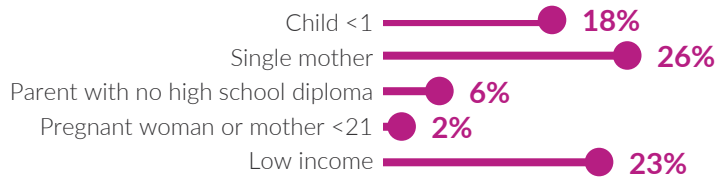
could benefit from home visiting

Of the 1,310,200 children who could benefit—

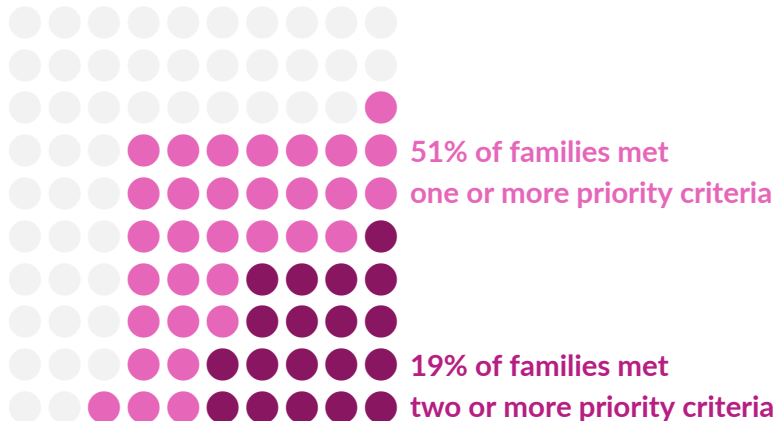| Infants <1 year	Toddlers 1-2 years	Preschoolers 3-5 years
210,300 16%	453,300 35%	646,600 49%

982,100 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 Florida who met the following priority criteria:

Child <1 — 18%
Single mother — 26%
Parent with no high school diploma — 6%
Pregnant woman or mother <21 — 2%
Low income — 23%

Of the 982,100 families who could benefit—

51% of families met one or more priority criteria

19% of families met two or more priority criteria

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, HFA, HIPPY, NFP, PAT, and PALS. • 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 and ethnicity data include children and pregnant caregivers. EHS did not report home visits. Data for child insurance status were not included. • 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. • PALS reported data reflecting the PALS I and PALS II programs. The PALS I program meets HomVEE criteria for evidence of effectiveness. PALS reported children served, families served, total home visits, and virtual home visits only.

National Home Visiting
Resource Center
www.nhvrc.org