New Mexico

Families Served Through Evidence-Based Home Visiting in 2021

Models implemented in New Mexico included Early Head Start Home-Based Option, Family Spirit, Nurse-Family Partnership, and Parents as Teachers. Statewide, 43 local agencies operated at least one of these models.

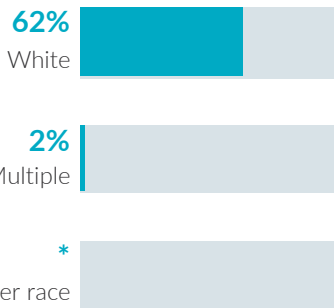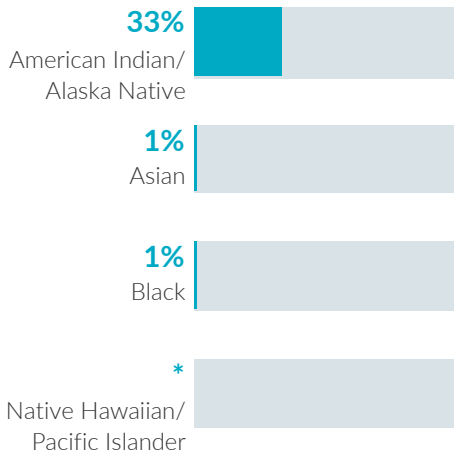**30,136**
home visits provided
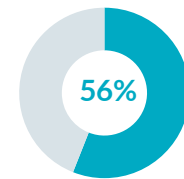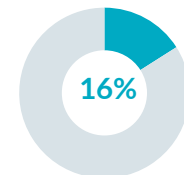*including 27,890 virtual visits*

2,483
families served

2,699
children served

Race

33% American Indian/ Alaska Native	**62%** White
1% Asian	**2%** Multiple
1% Black	* Another race
* Native Hawaiian/ Pacific Islander	

Ethnicity

56%
Hispanic or Latino

Caregiver education

16%
No high school diploma

Primary language

81%
English

11%
Spanish

8%
Another language

Child insurance status

87%
Public

9%
Private

4%
None

Child age

18%
<1 year

47%
1-2 years

34%
3-5 years
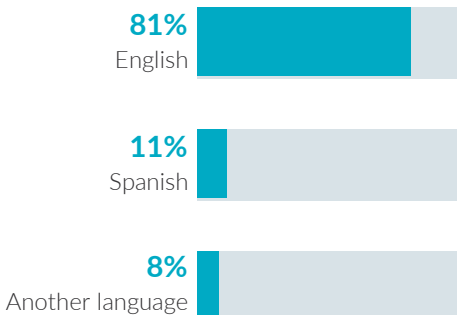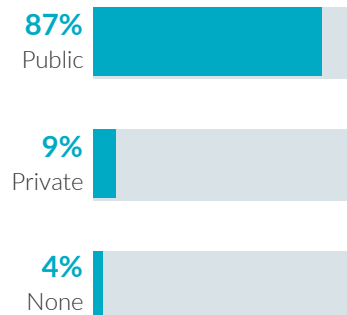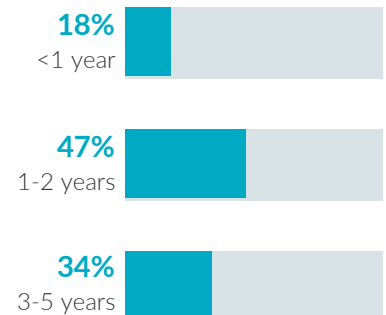
New Mexico

Potential Beneficiaries in 2021

In New Mexico, there were 110,600 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 144,500 children.

144,500 children
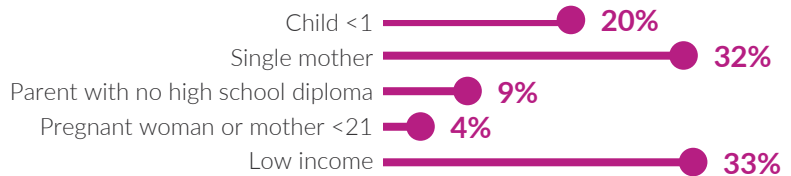
could benefit from home visiting

Of the 144,500 children who could benefit—

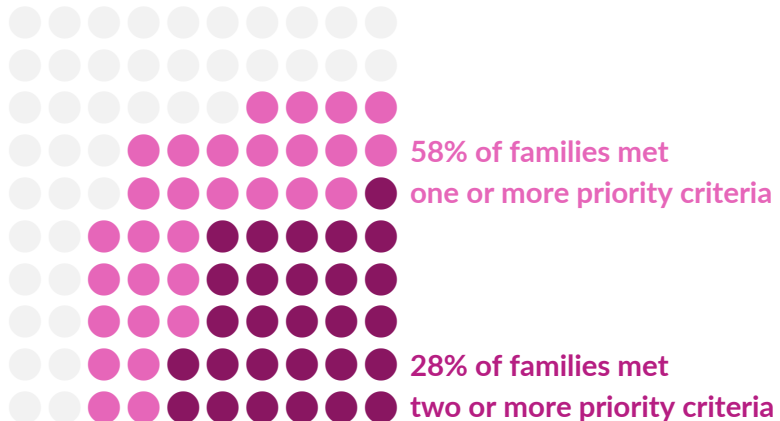| Infants <1 year	Toddlers 1-2 years	Preschoolers 3-5 years
22,300 15%	48,900 34%	73,300 51%

110,600 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 New Mexico who met the following priority criteria:

Child <1 — 20%
Single mother — 32%
Parent with no high school diploma — 9%
Pregnant woman or mother <21 — 4%
Low income — 33%

Of the 110,600 families who could benefit—

58% of families met one or more priority criteria

28% 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: EHS, Family Spirit, NFP, and PAT. • Missing and unknown data were not included in calculations. • Percentages may not add to 100 due to rounding. • To protect confidentiality, race and ethnicity categories with 10 or fewer participants were replaced with *. • 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. • Family Spirit reported children served, families served, total home visits, and virtual home visits only. • NFP reported primary language of caregivers. • PAT data for child insurance status and primary language were not included.

The NHVRC is a partnership of James Bell Associates and the Urban Institute. Support is provided by the Heising-Simons Foundation and previously was also provided by the Robert Wood Johnson Foundation. The views expressed here do not necessarily reflect the views of the foundations. For a detailed methodology, see the *2022 Home Visiting Yearbook*.

National Home Visiting
Resource Center
www.nhvrc.org