

Nevada

Families Served Through Evidence-Based Home Visiting in 2021

Models implemented in Nevada included Early Head Start Home-Based Option, Family Spirit, Home Instruction for Parents of Preschool Youngsters, Nurse-Family Partnership, and Parents as Teachers. Statewide, 11 local agencies operated at least one of these models.



6,756

home visits provided
including 1,141 virtual visits



605

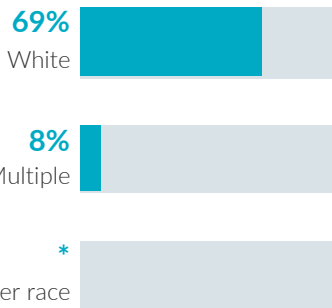
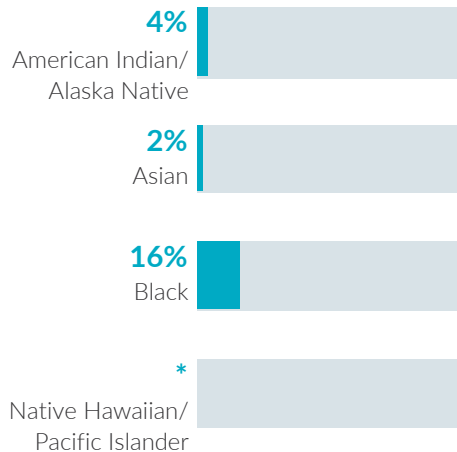
families served



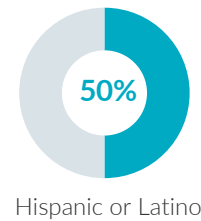
538

children served

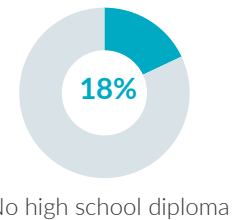
Race



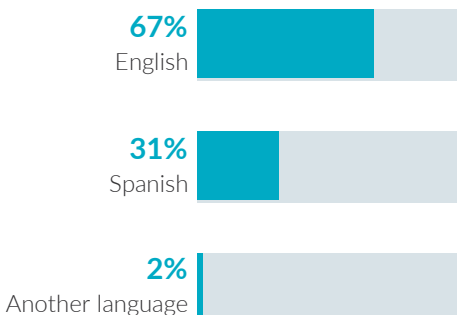
Ethnicity



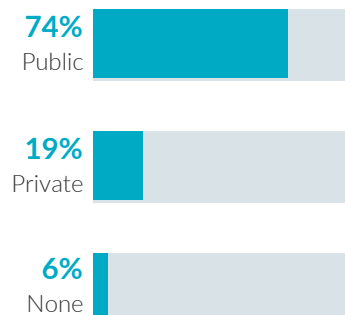
Caregiver education



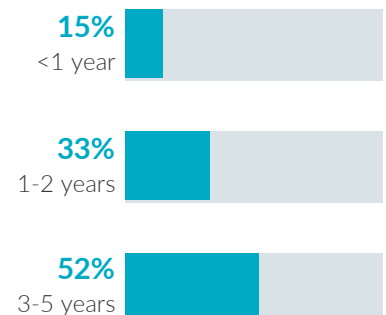
Primary language



Child insurance status



Child age



Nevada

Potential Beneficiaries in 2021

In Nevada, there were 162,700 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 214,300 children.

214,300
children

could benefit from home visiting

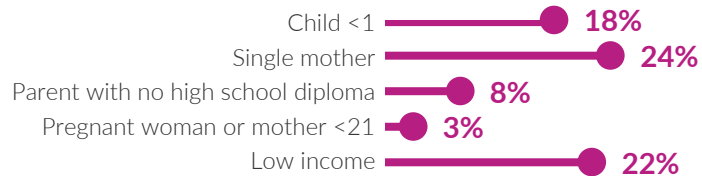
Of the 214,300 children who could benefit—

Infants <1 year	Toddlers 1-2 years	Preschoolers 3-5 years
31,900 15%	72,700 34%	109,700 51%

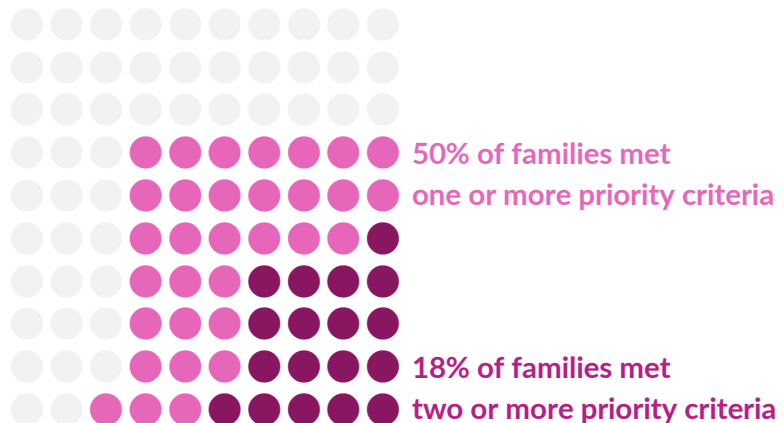
162,700
families

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 Nevada who met the following priority criteria:



Of the 162,700 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: HIPPI, 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. • 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.nhvc.org