

Oregon

Families Served Through Evidence-Based Home Visiting in 2021

Models implemented in Oregon included Early Head Start Home-Based Option, Family Connects, Family Spirit, Healthy Families America, Nurse-Family Partnership, and Parents as Teachers. Statewide, 51 local agencies operated at least one of these models.



40,499

home visits provided
including 29,986 virtual visits



3,774

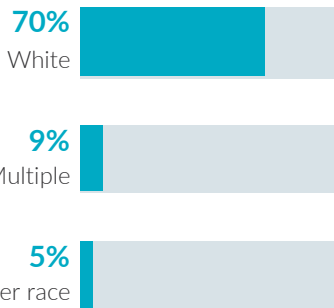
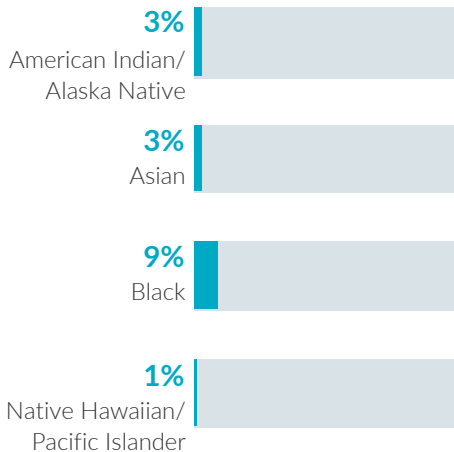
families served



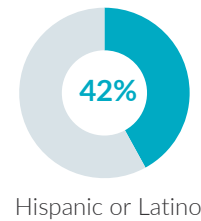
4,688

children served

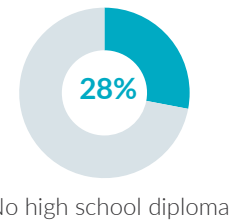
Race



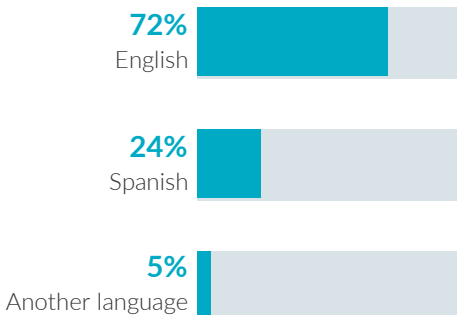
Ethnicity



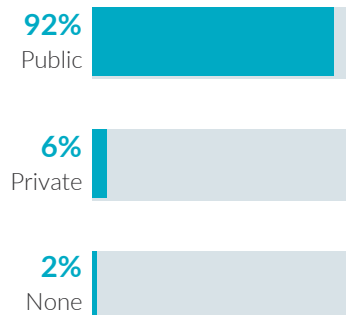
Caregiver education



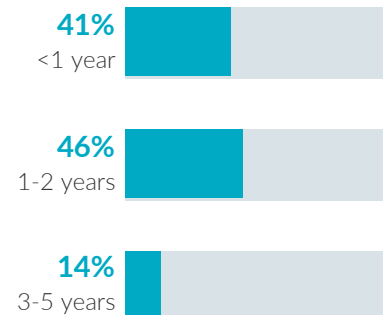
Primary language



Child insurance status



Child age



Oregon

Potential Beneficiaries in 2021

In Oregon, there were 210,500 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 267,400 children.

267,400
children

could benefit from home visiting

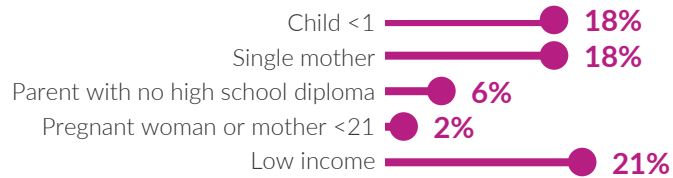
Of the 267,400 children who could benefit—

Infants <1 year	Toddlers 1-2 years	Preschoolers 3-5 years
39,200 15%	93,400 35%	134,800 50%

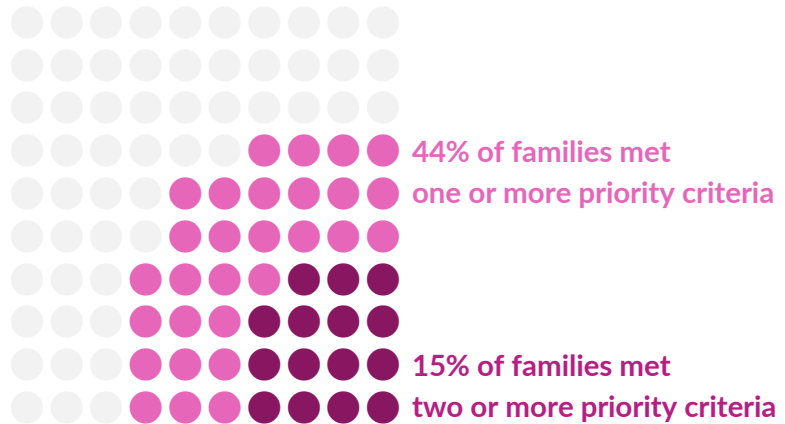
210,500
families

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 Oregon who met the following priority criteria:



Of the 210,500 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: EHS, Family Connects, Family Spirit, HFA, 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 and ethnicity data include children and pregnant caregivers. EHS did not report home visits. Data for child insurance status were not included. • Family Connects did not report children served. The number of families served was included as a proxy for children served. • Family Spirit reported children served, families served, total home visits, and virtual home visits only. • 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.

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National Home Visiting
Resource Center
www.nhvrc.org