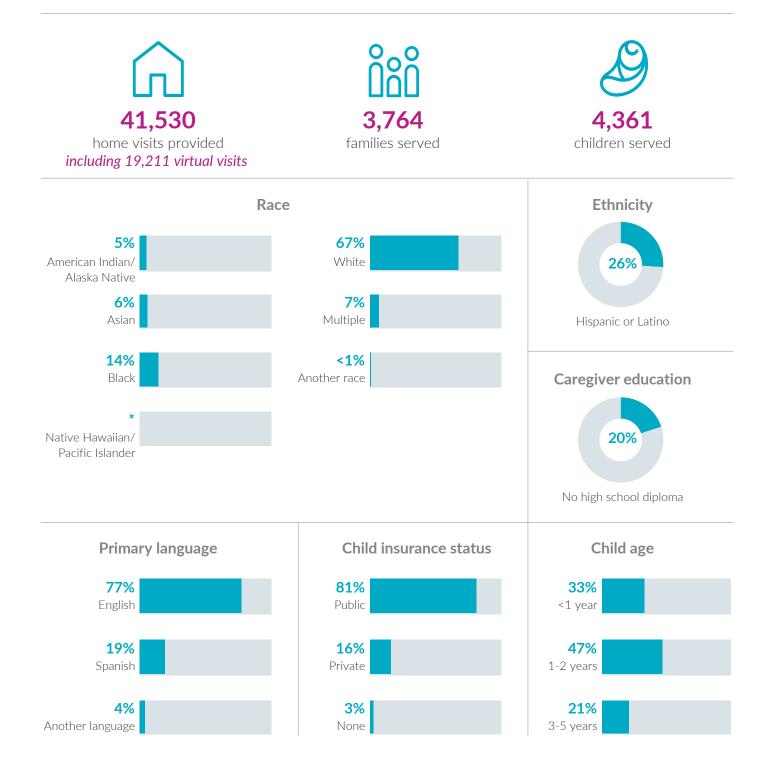
Wisconsin

Families Served Through Evidence-Based Home Visiting in 2021

Models implemented in Wisconsin included Early Head Start Home-Based Option, Family Connects, Family Spirit, Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Nurse-Family Partnership, and Parents as Teachers. Statewide, 61 local agencies operated at least one of these models.



NHVRC STATE PROFILES

Wisconsin

Potential Beneficiaries in 2021

In Wisconsin, there were 293,900 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 382,200 children.

382,200 children

could benefit from home visiting

293,900 families could benefit from home visiting

Of the 382,200 children who could benefit-

Infants	Toddlers	Preschoolers
<1 year	1-2 years	3-5 years
60,600	131,800	189,800
16%	34%	50%

Many home visiting services are geared toward particular subpopulations. The NHVRC estimated the percentage of families who could benefit in Wisconsin who met the following priority criteria:



Of the 293,900 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, HFA, HIPPY, 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 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.

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