Colorado

Families Served Through Evidence-Based Home Visiting in 2022

Models implemented in Colorado included Attachment and Biobehavioral Catch-Up, Child First, Early Head Start Home-Based Option, Family Connects, Family Spirit, Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Nurse-Family Partnership, Parents as Teachers, and SafeCare Augmented. Statewide, 96 local agencies operated at least one of these models.

82,693
home visits provided
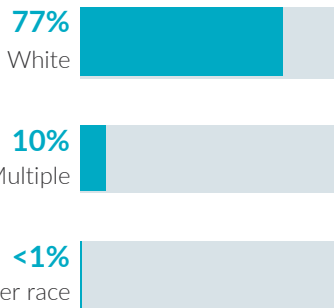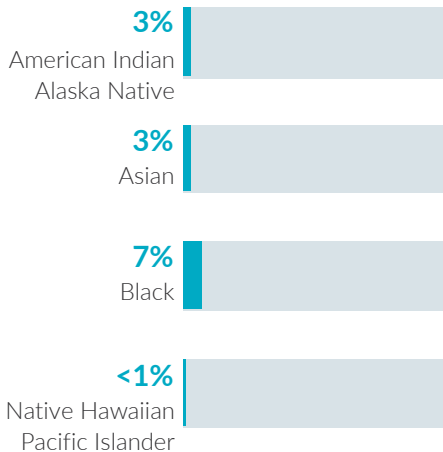*including 30,174 virtual visits*
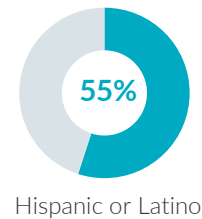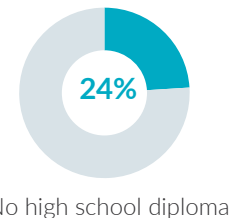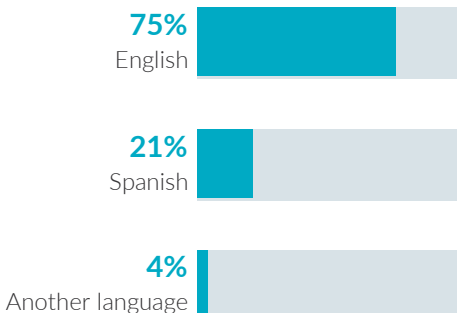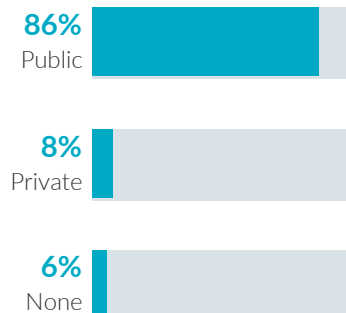
7,504
families served

6,878
children served

Race

3% American Indian Alaska Native	**77%** White
3% Asian	**10%** Multiple
7% Black	**<1%** Another race
<1% Native Hawaiian Pacific Islander	

Ethnicity

55%
Hispanic or Latino

Caregiver education

24%
No high school diploma

Primary language

75% English

21% Spanish

4% Another language

Child insurance status

86% Public

8% Private

6% None

Child age

30% <1 year

42% 1-2 years

28% 3-5 years
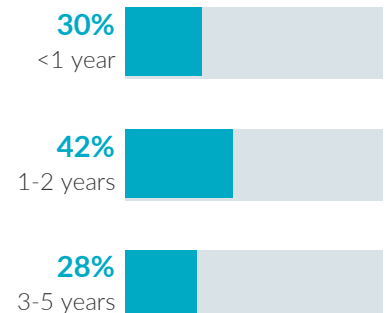
Colorado

Potential Beneficiaries in 2022

In Colorado, there were 296,400 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 378,400 children.
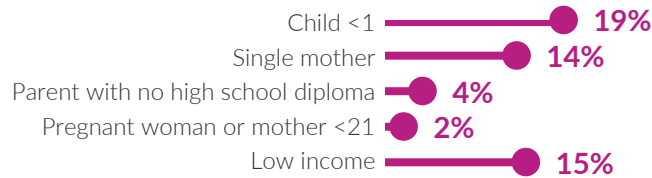
378,400 children
could benefit from home visiting

Of the 378,400 children who could benefit—

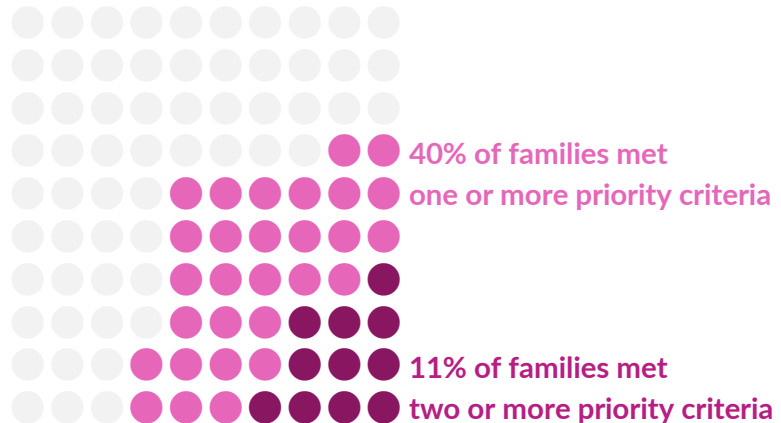| Infants <1 year	Toddlers 1-2 years	Preschoolers 3-5 years
57,300 15%	130,100 34%	191,000 50%

296,400 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 Colorado who met the following priority criteria:

Child <1	19%
Single mother	14%
Parent with no high school diploma	4%
Pregnant woman or mother <21	2%
Low income	15%

Of the 296,400 families who could benefit—

40% of families met one or more priority criteria

11% 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, Family Connects, HFA, HIPPY, NFP, PAT, and SafeCare Augmented. • 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 did not report home visits. Data for child insurance status were not included. • HFA data for private insurance includes other forms of health insurance. • PAT data for child insurance status and primary language were not included. • SafeCare Augmented reported primary language, ethnicity, race, and families served only. The number of families served was included as a proxy for children served.

National Home Visiting
Resource Center
www.nhvrc.org