

Georgia

Families Served Through Evidence-Based Home Visiting in 2022

Models implemented in Georgia included Early Head Start Home-Based Option, Healthy Families America, Nurse-Family Partnership, Parents as Teachers, and SafeCare Augmented. Statewide, 42 local agencies operated at least one of these models.



33,984

home visits provided
including 21,495 virtual visits



2,819

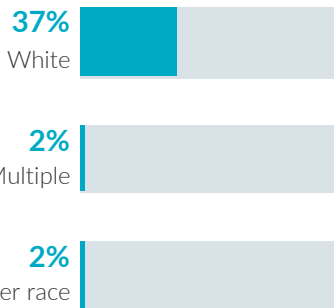
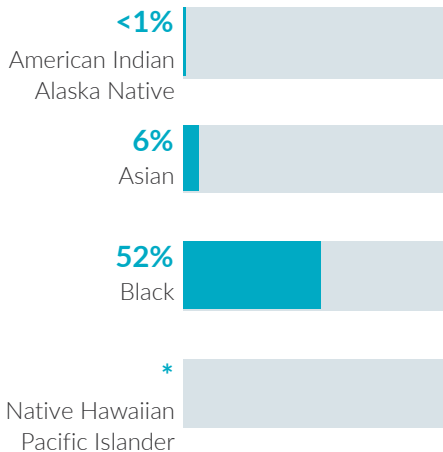
families served



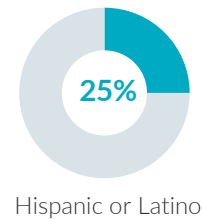
3,914

children served

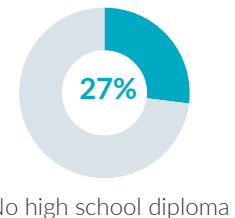
Race



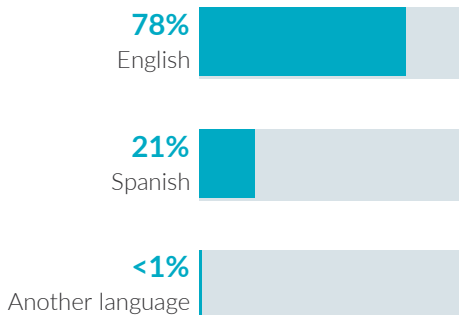
Ethnicity



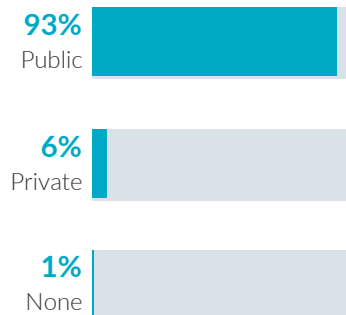
Caregiver education



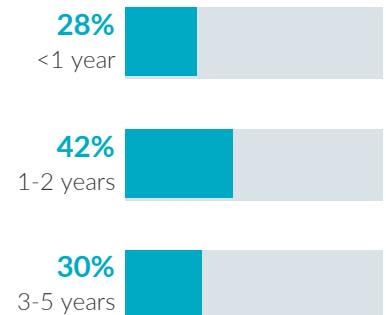
Primary language



Child insurance status



Child age



Georgia

Potential Beneficiaries in 2022

In Georgia, there were 578,200 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 754,700 children.

754,700
children

could benefit from
home visiting

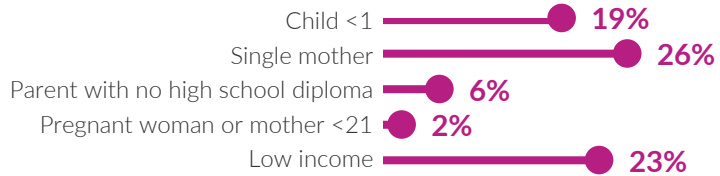
Of the 754,700 children who could benefit—

Infants <1 year	Toddlers 1-2 years	Preschoolers 3-5 years
113,900 15%	251,000 33%	389,900 52%

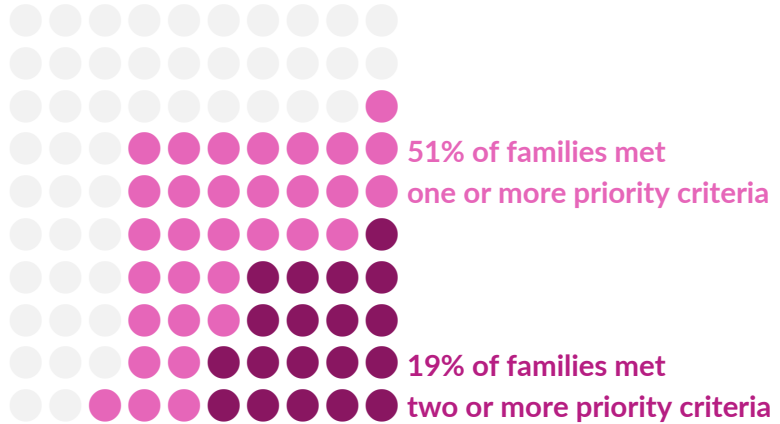
578,200
families

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 Georgia who met the following priority criteria:



Of the 578,200 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: HFA, NFP, PAT, and SafeCare Augmented. • 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. • 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.

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National Home Visiting
Resource Center
www.nhvrc.org