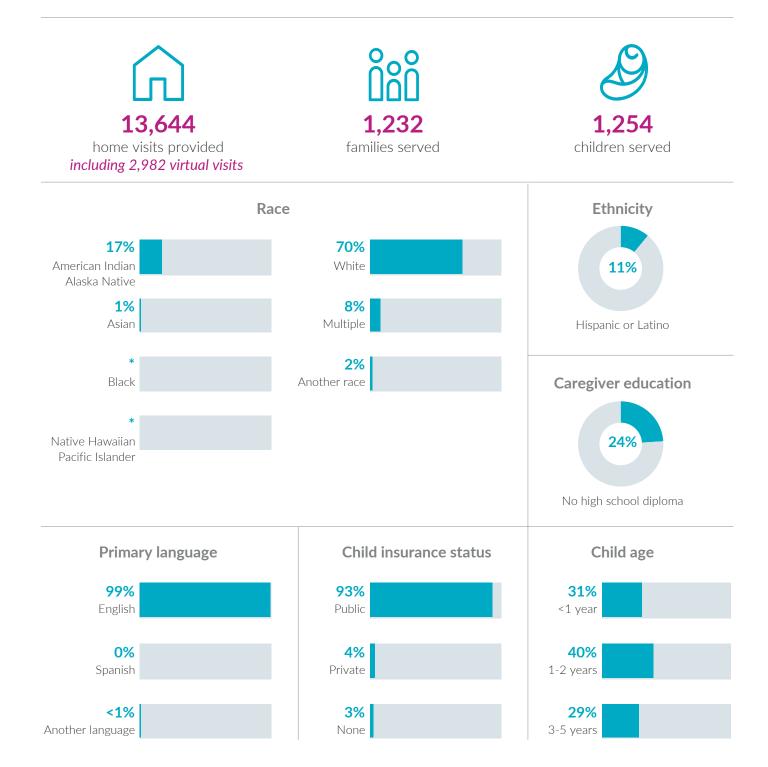
NHVRC STATE PROFILES

Montana

Families Served Through Evidence-Based Home Visiting in 2022

Models implemented in Montana included Early Head Start Home-Based Option, Family Spirit, Healthy Families America, Nurse-Family Partnership, Parents as Teachers, and SafeCare Augmented. Statewide, 38 local agencies operated at least one of these models.



NHVRC STATE PROFILES

Montana

Potential Beneficiaries in 2022

In Montana, there were 51,800 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 70,300 children.

70,300 children

could benefit from home visiting

51,800 families

could benefit from home visiting

Of the 70,300 children who could benefit-

10,700 15%	22,800 32%	36,900 52%
10 700	22.000	27,000
<1 year	1-2 years	3-5 years
Infants	Toddlers	Preschoolers

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



Of the 51,800 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 Spirit, 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. • 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. • Family Spirit reported children served, families served, total home visits, and virtual home visits only. • 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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