

# Kansas

## Families Served Through Evidence-Based Home Visiting in 2023

Models implemented in Kansas included Attachment and Biobehavioral Catch-Up, Early Head Start Home-Based Option, Family Check-Up, Healthy Families America, Nurse-Family Partnership, Parents as Teachers, and Play and Learning Strategies. Statewide, 105 local agencies operated at least one of these models.



**68,824**

home visits provided  
*including 3,877 virtual visits*



**7,551**

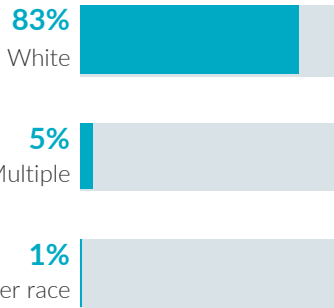
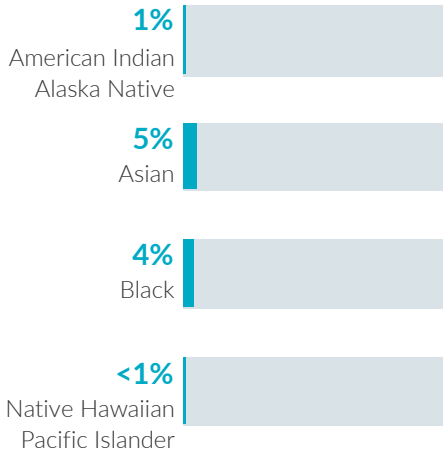
families served



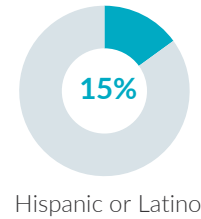
**9,664**

children served

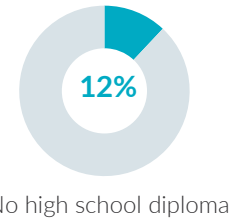
### Race



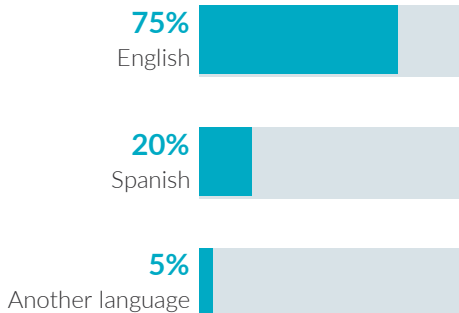
### Ethnicity



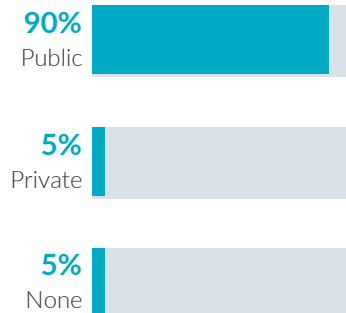
### Caregiver education



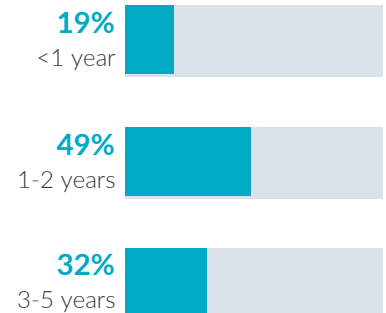
### Primary language



### Child insurance status



### Child age



# Kansas

## Potential Beneficiaries in 2023

In Kansas, there were 164,200 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 209,600 children.

**209,600**  
**children**

could benefit from home visiting

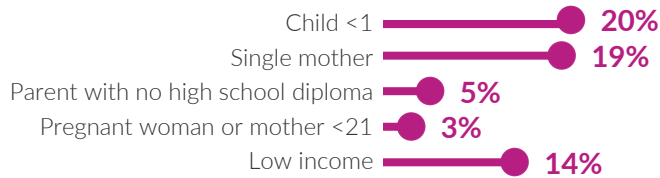
### Of the 209,600 children who could benefit—

Infants <1 year	Toddlers 1-2 years	Preschoolers 3-5 years
<b>33,000</b> <b>16%</b>	<b>70,000</b> <b>33%</b>	<b>106,600</b> <b>51%</b>

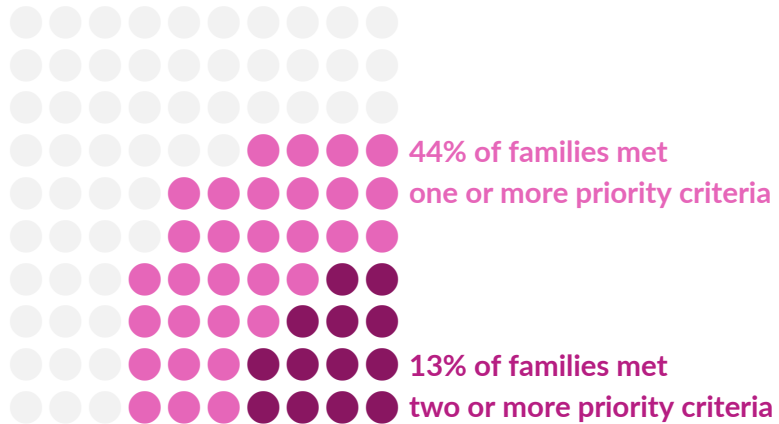
**164,200**  
**families**

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 Kansas who met the following priority criteria:



### Of the 164,200 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: ABC, EHS, HFA, NFP, PAT, and PALS. • 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. • ABC data for child insurance status were not included. Data are reported for the ABC-Infant program. • 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 include other forms of health insurance. • PAT data for child insurance status and primary language were not included. • PALS reported children served, families served, total home visits, and virtual home visits only. Data are reported for the PALS infant curriculum.

The NHVRC is a partnership of James Bell Associates and the Urban Institute. Support is provided by the Heising-Simons Foundation. The views expressed here do not necessarily reflect the views of the foundation. For a detailed methodology, see the 2024 Home Visiting Yearbook.



National Home Visiting  
**Resource Center**  
www.nhvrc.org