

Idaho

Families Served Through Evidence-Based Home Visiting in 2018

Models implemented in Idaho included Attachment and Biobehavioral Catch-Up, Early Head Start Home-Based Option, Nurse-Family Partnership, and Parents as Teachers. Statewide, 16 local agencies operated at least one of these models.



7,035

home visits provided



1,298

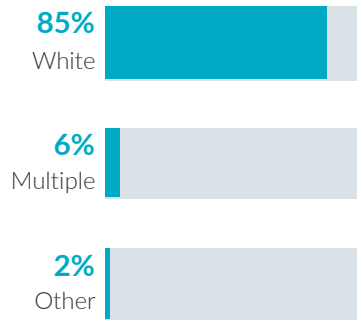
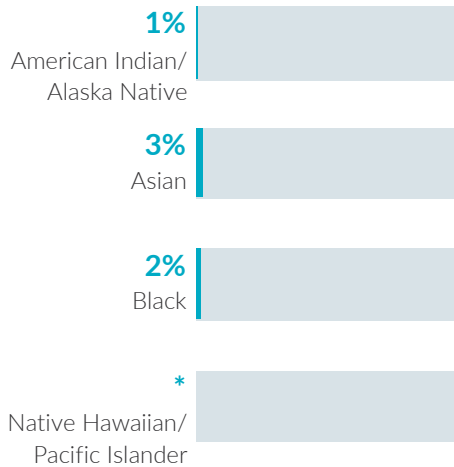
families served



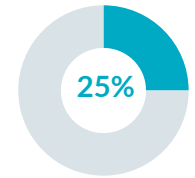
1,509

children served

Race

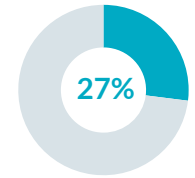


Ethnicity



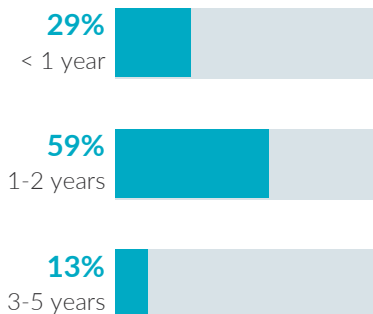
Hispanic or Latino

Caregiver education

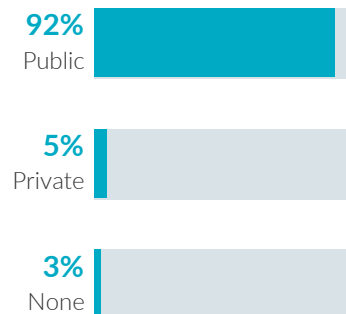


No high school diploma

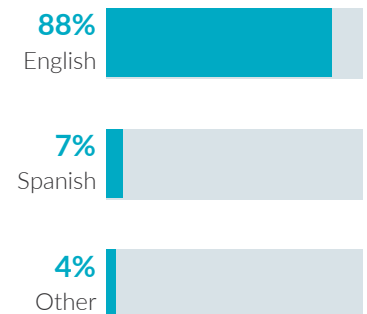
Child age



Child insurance status



Primary language



Idaho

Potential Beneficiaries in 2018

In Idaho, there were 98,600 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 133,800 children.

133,800
children

could benefit from
home visiting

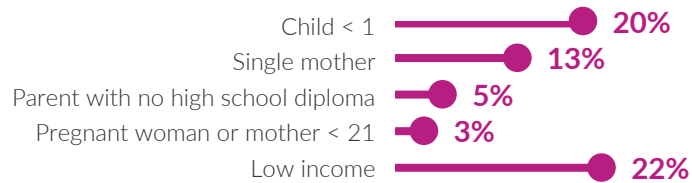
Of the 133,800 children who could benefit—

Infants < 1 year	Toddlers 1-2 years	Preschoolers 3-5 years
20,600 15%	44,300 33%	69,000 52%

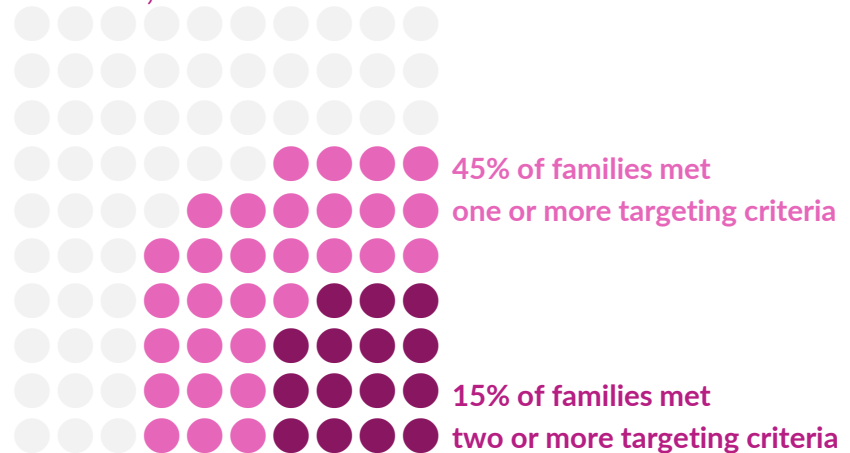
98,600
families

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 Idaho who met the following targeting criteria:



Of the 98,600 families who could benefit—



Notes • NHVRC State Profiles present data provided by evidence-based models, which include both MIECHV and non-MIECHV data. • Percentages may not add up 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. • ABC reports children served, families served, and home visits only. • EHS data may be underreported. Data include EHS programs providing home-based services only. EHS race, ethnicity, and primary language data include children and pregnant caregivers. EHS does not report home visits or families served. The number of children served was included as a proxy for families served. • PAT data for child insurance status and primary language are not included.

The NHVRC is led by James Bell Associates in partnership with the Urban Institute. Support is provided by the Heising-Simons Foundation and the Robert Wood Johnson Foundation. The views expressed here do not necessarily reflect the views of the foundations. For details about the methodology, see the *2019 Home Visiting Yearbook*.



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