

STATE PROFILE – FLORIDA

Families Served Through Evidence-Based Home Visiting in 2016

Models implemented in Florida included Child First, Early Head Start, Family Check-Up, Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Minding the Baby, Nurse-Family Partnership, and Parents as Teachers. Statewide, 102 local agencies operated at least one of these models.



154,515

home visits provided



15,580

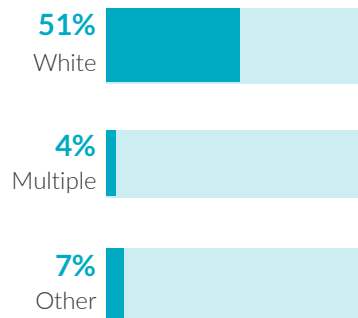
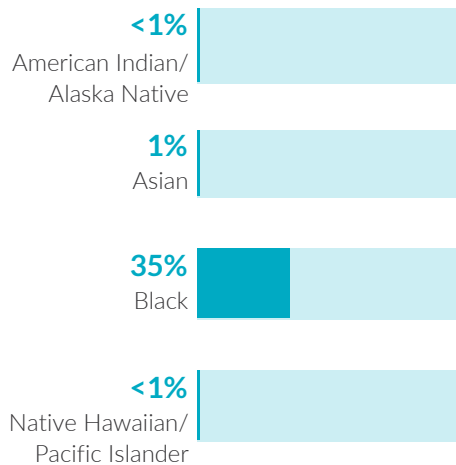
families served



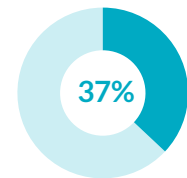
15,250

children served

Race

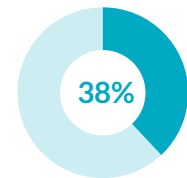


Ethnicity



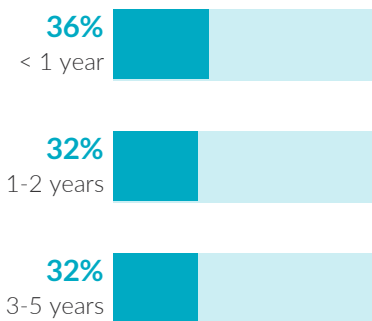
Hispanic or Latino

Caregiver education

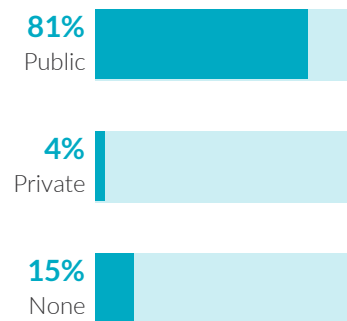


No high school diploma

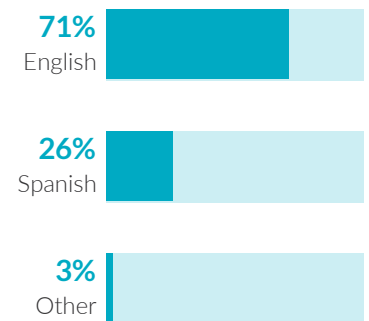
Child age



Child insurance status



Primary language



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Potential Beneficiaries in 2016

In Florida, there were 981,300 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 1,266,800 children.

1,266,800 children

could benefit from home visiting

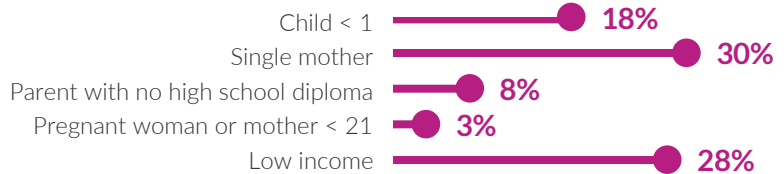
Of the 1,266,800 children who could benefit—

Infants < 1 year	Toddlers 1-2 years	Preschoolers 3-5 years
200,900 16%	427,800 34%	638,100 50%

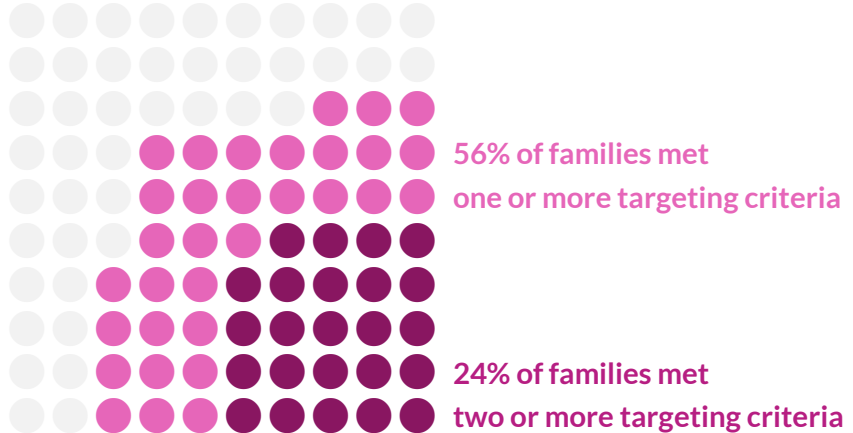
981,300 families

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 Florida who met the following targeting criteria:



Of the 981,300 families who could benefit—



Notes • Public insurance includes Medicaid, CHIP, and Tri-Care. • Low income is defined as family income below the federal poverty threshold. • Single mothers include single, never-married mothers or pregnant women. • Child First reports children served, families served, and home visits only. • EHS data may be underreported. These data include EHS programs providing home-based services only, but not programs that provide both home-based and center-based services. 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. • FCU reports children served only. The number of children served was included as a proxy for families served. • HFA reports primary language of caregivers. • HIPY public insurance also includes Early and Periodic Screening, Diagnostic and Treatment. • Minding the Baby does not report child insurance status or primary language. Caregiver race was not included. • NFP includes MIECHV and non-MIECHV data for children served, families served, and home visits. All other data reflect participants receiving NFP services through MIECHV funding only. • PAT reports race and ethnicity of children. PAT does not report child insurance status.

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 *Data Supplement to the 2017 Home Visiting Yearbook*.



National Home Visiting
Resource Center
www.nhvrc.org