

MODEL PROFILE

Family Spirit

Family Spirit is an evidence-based, culturally tailored home visiting program of the Johns Hopkins Center for American Indian Health. The model promotes optimal health and well-being for parents and their children. It combines the use of paraprofessionals from the community as home visitors and a culturally focused, strengths-based curriculum as a core strategy to support young families. Parents gain knowledge and skills to promote healthy development and positive lifestyles for themselves and their children. See www.jhsph.edu/research/affiliated-programs/family-spirit for details.

What is the model's approach to providing home visiting services?

Home visits take place once per week until the child is 3 months old, every other week until the child is 6 months old, monthly until the child is 22 months old, and then every other month until the child is 3 years old. Services are provided for 39 months (prenatally until the child is 3 years old). Family Spirit recommends families initiate services prenatally, preferably at the 28th week of pregnancy or earlier.

Family Spirit's target population includes the following:

- ✓ Expectant mothers
- ✓ Young mothers under 24
- ✓ Families of American Indian heritage

Who is implementing the model?

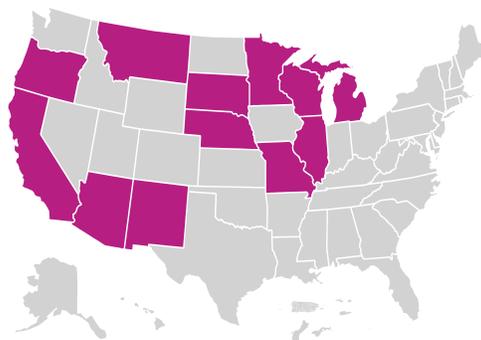
Home Visitors

Family Spirit employed 327 home visitors in 2016. The model recommends at least a high school diploma for home visitors. Family Spirit recommends a caseload of 20 to 25 families for each full-time health educator, depending on the stage of enrollment and distance for each participant.

Supervisors

Family Spirit employed 57 supervisors in 2016. The model recommends at least a college degree or equivalent work experience for supervisors. Family Spirit recommends 6-10 home visitors per supervisor, depending on program design and scope.

Where is the model implemented?



Family Spirit operated in 30 local agencies across 12 states in 2016.

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.nhvc.org

MODEL PROFILE — FAMILY SPIRIT

Families Served Through Evidence-Based Home Visiting in 2016



10,092

home visits provided



1,358

families served



1,094

children served

Mission

Family Spirit envisions a future where every community, regardless of socioeconomic status, will have access to an evidence-based, culturally competent strategy for promoting optimal health and well-being for parents and young children.

History

Family Spirit began in 1995 as the Share Our Strengths program at the Johns Hopkins Center for American Indian Health. Share Our Strengths was developed in partnership with the Navajo, White Mountain Apache, and San Carlos Apache tribal communities to support the tribes' mothers and young children. In 1998, the Johns Hopkins Center for American Indian Health began offering a fatherhood program in tandem with Share Our Strengths. These two programs merged to become the Family Strengthening program. Family Strengthening was rigorously evaluated by Johns Hopkins Center for American Indian Health in partnership with participating tribal communities in a series of randomized control trials. The developers then expanded the curriculum to address families' needs prenatally until their child's third birthday. Family Spirit, as it is implemented today, began in 2006 and evolved from these rigorous evaluations.

