

# North Carolina

## Families Served Through Evidence-Based Home Visiting in 2017

Models implemented in North Carolina included Attachment and Biobehavioral Catch-Up, Child First, Early Head Start Home-Based Option, Family Connects, Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Nurse-Family Partnership, Parents as Teachers, and SafeCare. Statewide, 111 local agencies operated at least one of these models.



**88,228**

home visits provided



**13,387**

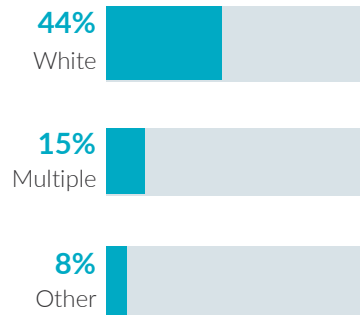
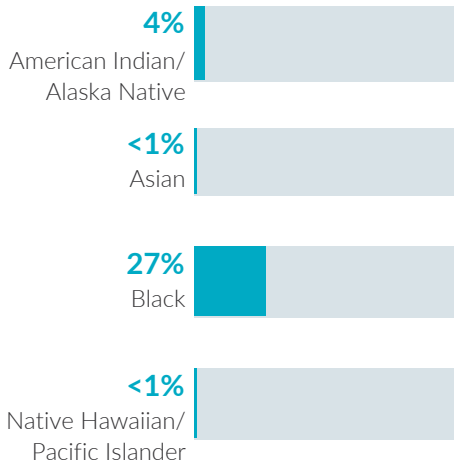
families served



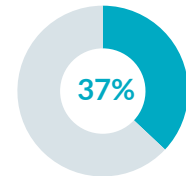
**14,567**

children served

### Race

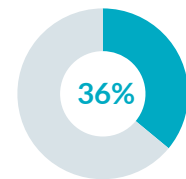


### Ethnicity



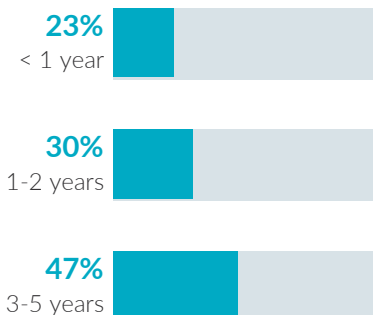
Hispanic or Latino

### Caregiver education

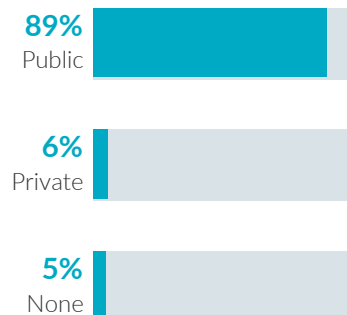


No high school diploma

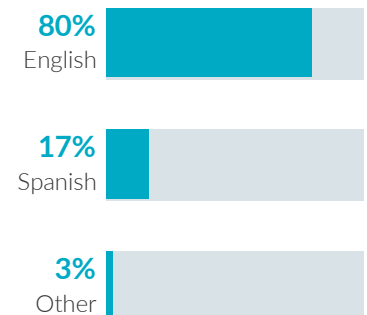
### Child age



### Child insurance status



### Primary language



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## Potential Beneficiaries in 2017

In North Carolina, there were 564,400 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 716,800 children.

# 716,800 children

could benefit from home visiting

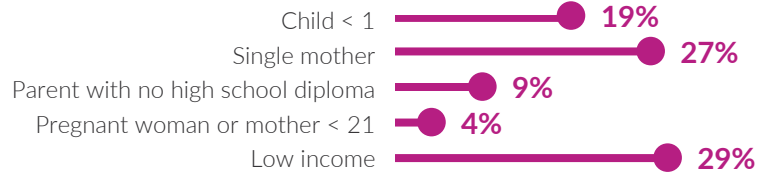
### Of the 716,800 children who could benefit—

Infants < 1 year	Toddlers 1-2 years	Preschoolers 3-5 years
<b>112,800</b> <b>16%</b>	<b>242,800</b> <b>34%</b>	<b>361,200</b> <b>50%</b>

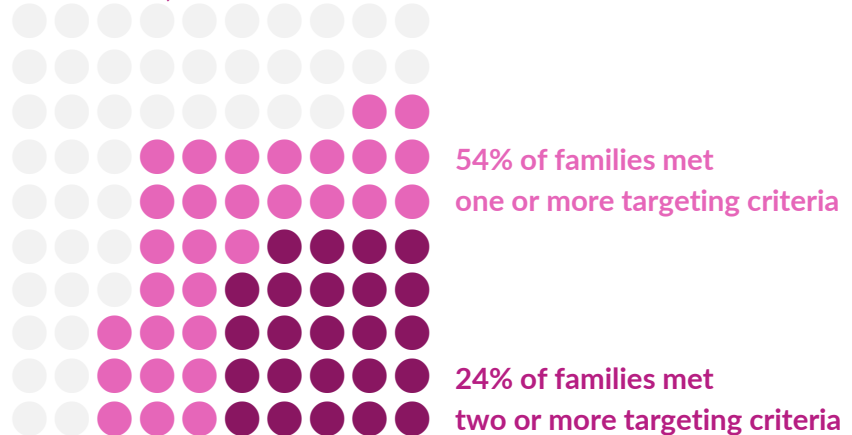
# 564,400 families

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 North Carolina who met the following targeting criteria:



### Of the 564,400 families who could benefit—



Notes • Percentages may not add up 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 are not available for NC. • Child First reports children served, families served, and home visits only. • EHS data may be underreported. Data include EHS programs providing home-based services only, not programs providing 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. • Family Connects reports families served only. The number of families served was included as a proxy for children served. • HFA reports primary language of caregivers. • HIPPA public insurance also includes Early and Periodic Screening, Diagnostic and Treatment. • 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 primary language data are not included. • SafeCare does not report the number of children served. The number of families served was included as a proxy for children served. SafeCare does not report caregiver education, child age, or child insurance status.

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