

Overview of Select Evidence-Based and Evidence-Informed Home Visiting Programs

Program	Program Description	Program Goals	Population Served	Service Delivery
Early Head Start (EHS)	Service provided through center-based, home-based or mixed models, with visits by trained home visitors. Focus on: prenatal outcomes, health family functioning & school readiness.	Promote healthy prenatal outcomes for pregnant women. Enhance the development of very young children. Promote healthy family functioning.	Serves families from pregnancy until child turns 3.	By trained professionals.
Family Connects	The Family Connects model is an evidence-based program that connects parents of newborns to the community resources they need through postpartum nurse home visits. FC also conducts rigorous research and evaluation of the model, as well as innovative research on early childhood well-being and parent-child relationships.	Improve child and family health and well-being. Create access to a continuum of community-based care to support health and success. Values: Equity; collaboration; excellence; integrity. The nurse may recommend longer-term programs, such as Early Head Start.	Home visits begin 2 to 3 weeks after birth, offering one to three home visits in total. The child may be enrolled until they are 6 months of age.	By trained & registered nurses.
Healthy Families New York (HFNY)	Home-based services to expectant families and new parents. Trained home visitors provide support, child development & parenting information to reduce family stress. Participants screened to identify risk factors & stressors.	Identify overburdened families needing support. Promote positive parent-child interaction. Ensure optimal prenatal care. Promote healthy growth & development. Enhance family functioning. Prevent child abuse & neglect. Promote parental self-sufficiency.	Enrolls expectant parents and parents with an infant less than 3 months old; serves until age 5.	By specially-trained family support professionals.
Maternal and Infant Community Health Collaborative (MICHC)	Community Health Workers (CHWs) assess individuals and families of needs, provide education and assistance, and connect individuals/families to supports within their community.	Improve maternal and infant health outcomes, while reducing racial, ethnic and economic disparities. Assess needs and barriers to accessing services. Connect to community resources. Maintain healthy behaviors and reduce or eliminate risky behaviors.	Medicaid-eligible/low-income women across the lifespan (and their families).	By trained Community Health Workers
Nurse-Family Partnership (NFP)	Intensive home visiting provided by an RN who uses clinical assessment skills to deliver a comprehensive, nationally-proven prevention model. Focus on: family & environmental health, maternal-child attachment, nurturing child-caregiver interactions, maternal life course development, referrals to health & human services.	Help women improve pregnancy outcomes. Help parents improve child's health & development. Help parents become economically self-sufficient.	Enrolls low-income, first-time mothers in pregnancy (first two trimesters) and serves until child turns 2.	By registered nurses.
Parents as Teachers (PAT)	Certified parent educators work with families through visits, child screenings, group connections, and connecting families to resources. The evidence-based model focuses on: parent-child interaction, development-centered parenting & family well-being. Organizations can replicate the model, use the curriculum independently, or blend the PAT approach into existing programming.	Increase parents' knowledge of early childhood development & improve parenting practices. Provide early detection of developmental delays & health issues. Prevent child abuse & neglect. Increase children's school readiness & success.	Serves families from pregnancy to kindergarten entry.	By trained professionals and parent educators.

ParentChild+	Through a research-proven model, PC+ prepares children for school success by increasing language & literacy skills, enhancing social-emotional development, and strengthening parent-child relationships. Parents become children's teachers & advocates: reading, playing, talking & learning together.	Prepare children challenged by poverty for success in school. Stimulate parent-child verbal interaction. Enable children to gain critical language and literacy skills.	Two-year program serves families with 2- and 3-year-olds (can enter as young as 16 months and stay until age 4).	By specially-trained paraprofessionals.
Power of Two	Power of Two is a non-profit organization operating in NYC that is scaling Attachment and Biobehavioral Catch-Up (ABC), a proven parenting program, in New York City. ABC gives children a foundation for success in school and life by fostering a strong and healthy attachment between parent and child.	With ABC, pre-school age children showed higher levels of executive functioning than their peers, are more likely than their peers to develop secure attachments to their parents, and have normalized stress hormone levels after only 10 coaching sessions in the home.	Serves families from 6 month - 2 years of age.	By parent coaches trained in ABC.