

Alabama

Families Served Through Evidence-Based Home Visiting in 2018

Models implemented in Alabama included Early Head Start Home-Based Option, Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Nurse-Family Partnership, and Parents as Teachers. Statewide, 46 local agencies operated at least one of these models.



54,818

home visits provided



3,652

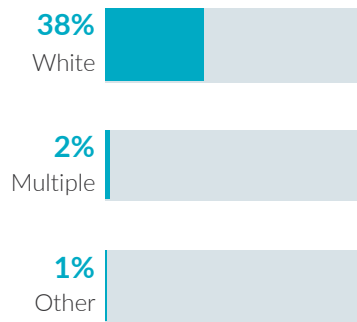
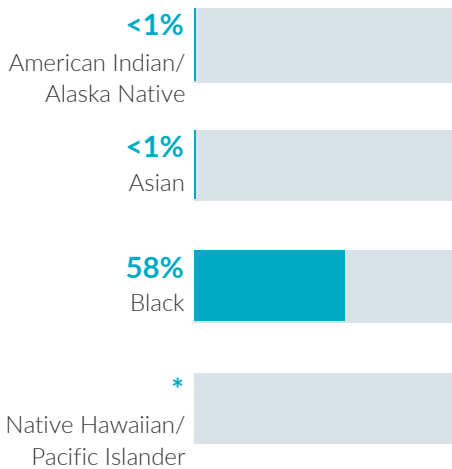
families served



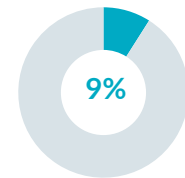
4,009

children served

Race

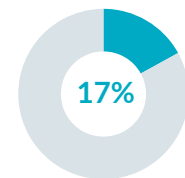


Ethnicity



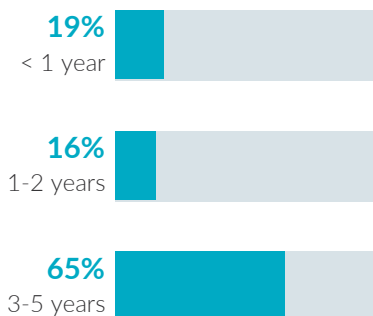
Hispanic or Latino

Caregiver education

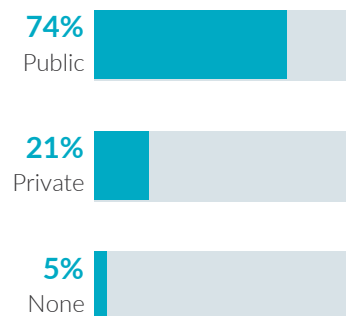


No high school diploma

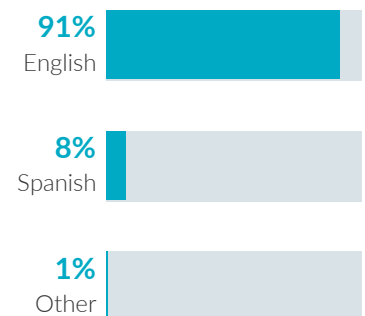
Child age



Child insurance status



Primary language



Alabama

Potential Beneficiaries in 2018

In Alabama, there were 267,000 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 342,600 children.

342,600
children

could benefit from home visiting

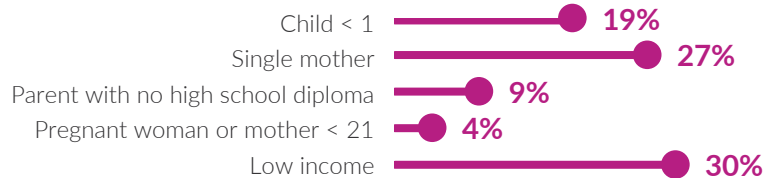
Of the 342,600 children who could benefit—

Infants < 1 year	Toddlers 1-2 years	Preschoolers 3-5 years
55,700 16%	115,100 34%	171,800 50%

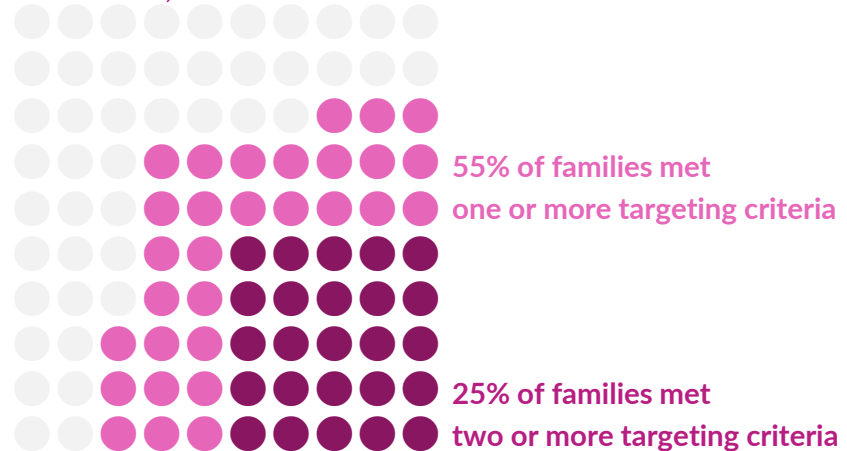
267,000
families

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 Alabama who met the following targeting criteria:



Of the 267,000 families who could benefit—



Notes • Percentages and total counts of children may not add 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. • EHS programs in AL include a combination of center-based and home-based services. EHS data are not included because home-based service data cannot be isolated from statewide data. • HFA reports primary language of caregivers. • 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.nhvrc.org