

# Arkansas Home Visiting

Parents ask for help. Home visitors provide it.

Home visiting started in local communities that wanted a better way to help families. Along the way, home visiting efforts have attracted support from private donors and local, state and federal governments because the research shows home visiting helps parents and improves outcomes for children, especially for the most vulnerable families.



Arkansas  
Department  
of Health



## Partnership

Home Visiting Initiatives in Arkansas are a consolidated effort of three state agencies: the Arkansas Department of Health (ADH), the State Child Abuse and Neglect Prevention Board (Children's Trust Fund), and the Arkansas Division of Child Care and Early Childhood Education.

Since its inception, the public-private partnership between ADH and Arkansas Children's Hospital with funding from the federal Maternal, Infant and Early Childhood Home Visiting (MIECHV) program has enrolled **2,624 families** and made **32,471 home visits** in **1,222 rural areas**.

## Evidenced-Based Services

Five models serving different age and at-risk groups:

- Following Baby Back Home
- Healthy Families America
- Home Instruction for Parents of Preschool Youngsters
- Nurse-Family Partnership
- Parents as Teachers

This information was compiled and made possible through the efforts of the Association of State Home Visiting Initiatives. Learn more at [www.statehomevisiting.org](http://www.statehomevisiting.org)

## Investment

More than half of the counties served (46 of 75 counties) receive funding from the MIECHV program. Arkansas law requires that the state's investments must be at least 90 percent in evidence-based models and up to 10 percent in promising programs.

The initiative focuses on high-need areas, including all nine of at-risk counties identified by the 2010 Arkansas Department of Health needs assessment. It also is available in all ten of at-risk counties identified by the 2014 Division of Child Care and Early Childhood Education (a division of the Arkansas Department of Human Services) needs assessment.

An interdepartmental biannual report about the cost of services provided, scope of services provided, and achievement of program outcomes is part of the work. A report detailing the methods and data to be collected was submitted to the Legislative Council and governor in 2014. The first outcomes measurement report will be submitted in 2016.



## Evidence of Success

To date, findings from the evaluation show positive gains in the vast majority of the benchmarks. An analysis of the evaluation data shows significant gains in school readiness activities of parents enrolled in the HIPPI model (paper submitted to the Society for Research in Child Development).

Preliminary analysis of the evaluation data shows that ACEs experienced by the children in the state (across models serving those birth-to-5) are associated with positive developmental screenings for social-emotional problems.

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