

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

Program	Program Description	Program Goals	Target Population	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.
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.
Home Instruction for Parents of Preschool Youngsters (HIPPY)	Based around a developmentally appropriate curriculum, HIPPY supports parents in their role as their child's first and most important teacher. Role play is the principle method of teaching, and home visits are interspersed with group meetings.	Promote school readiness. Support parents' engagement in their child's learning. Strengthen children's cognitive skills, early literacy skills, social/emotional and physical development.	Serves children 3-5 years old.	Trained home visitors, hired from the community.
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.
The Parent-Child Home Program (PCHP)	Through a research-proven model, PCHP 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.