



The birth of a baby is an exciting time. It can also be overwhelming, especially for those without a positive parenting model or support network to guide them. The California Home Visiting Program (CHVP) is designed for overburdened families who are at risk for Adverse Childhood Experiences (ACEs), including child maltreatment, domestic violence, substance use disorder and mental health related issues. Home visiting gives parents the tools and know-how to

independently raise their children. It's a preventive intervention focused on promoting positive parenting and child development. Decades of research on home visiting shows that home visits by a trained professional during pregnancy and in the first few years of life improves the lives of children and families. Giving children a solid start in their first few years of life increases the opportunity for a brighter, more prosperous future.

Our Goal: To promote maternal health and well-being, improve infant and child health and development, strengthen family functioning and cultivate strong communities.

We Serve: Pregnant and newly parenting families who have one or more of the following risk factors: Domestic violence, inadequate income, unstable housing, education less than 12 years, substance use disorder, and depression and/or mental health related issues.

Service Delivery: Services are provided by a Public Health Nurse or paraprofessional in the family's home. Services begin prenatally or right after the birth of a baby, are offered voluntarily and usually continue until age 3. The number of visits is based on need.

Outcomes: Research has shown that evidence-based home visiting programs produce positive outcomes that save taxpayer dollars by reducing societal costs associated with intimate partner violence, child maltreatment, youth crime, substance use disorder and need for government assistance.

Funding: The Patient Protection and Affordable Care Act of 2010 established the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program, which provides funds for evidence-based home visiting in every state. In 2019, \$23 million in new State General Funds were provided to CDPH for evidence-based and innovative home visiting services.

Where We Are

CHVP sites are located in the following counties:

- Alameda
- Butte
- Contra Costa
- Fresno
- Humboldt
- Imperial
- Kern
- Kings
- Los Angeles
- Madera
- Merced
- Monterey
- Nevada
- Orange
- Riverside
- Sacramento
- San Bernardino
- San Diego
- San Francisco
- San Joaquin
- San Mateo
- Santa Clara
- Shasta
- Solano
- Sonoma
- Stanislaus
- Tehama
- Tulare
- Ventura
- Yolo

Program Services

Home visiting services are offered in the family's home where teachable moments naturally arise. Working one-on-one with a home visiting professional, families can ask questions, discuss concerns and gain valuable information. Home visitors build relationships as they provide services tailored to each family's needs, such as:

- ▶ Teaching parenting skills and modeling parenting techniques.
- ▶ Providing information and guidance on a range of topics, such as safe sleep position, injury prevention and nutrition.
- ▶ Providing referrals to address substance use disorder, family violence and maternal depression.



- ▶ Screening children for developmental delays and facilitating intervention.
- ▶ Promoting early learning in the home that emphasizes positive parenting and building a language-rich environment.

CHVP FUNDS THREE EVIDENCE-BASED HOME VISITING MODELS

CHVP local health jurisdictions serve clients using either the Healthy Families America, Nurse-Family Partnership or Parents as Teachers home visiting model, based on the specific needs of the region. All three models are strengths-based and focus on a participant's individual interests. The goals are also the same across the models: increase parent knowledge of early childhood development and improve parenting practices; provide early detection of developmental delays and health issues; prevent child abuse and neglect; and increase children's school readiness and success. Below are additional characteristics of each model:

Healthy Families America

- ▶ Serves low-income families who must be enrolled within the first three months after an infant's birth.

- ▶ A trained paraprofessional provides one-on-one home visits to parents and their babies usually through three years postpartum.

Nurse-Family Partnership

- ▶ Serves low-income, first-time moms who must be enrolled by the 28th week of pregnancy.
- ▶ A Public Health Nurse provides one-on-one home visits to parents and their babies through two years postpartum.

Parents as Teachers

- ▶ Serves families with children (between pregnancy and Kindergarten entry) experiencing one or more stressors in their lives.
- ▶ A Parent Educator conducts personal visits with parents and their children, as well as monthly group events.

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