

MODEL PROFILE

Child First

Child First helps to heal and protect children and families from the effects of trauma and chronic stress by providing a psychotherapeutic intervention that promotes nurturing caregiver-child relationships; enhances adult capacity; and provides care coordination to connect families with services and supports. See www.childfirst.org for details.

What is the model's approach to providing home visiting services?

Home visits take place twice per week during a month-long assessment period and a minimum of once per week thereafter, based on a family's level of need. Services are provided prenatally through the age of 5, for a period of approximately 6 to 12 months, extending beyond 1 year of service depending on the family's level of need.

Child First's target population includes the following:

- ✓ Children with emotional or behavioral problems
- ✓ Caregivers with depression, PTSD, and other mental health problems
- ✓ Low-income families
- ✓ Caregivers experiencing domestic violence or trauma
- ✓ Children experiencing abuse, neglect, or other trauma
- ✓ Families with history of substance abuse or in need of treatment
- ✓ Families who are homeless
- ✓ Children with developmental delays or disabilities

Who is implementing the model?

Home Visitors

Child First employed 159 home visitors in 2016. The model requires care coordinators to have a bachelor's degree and mental health clinicians to have a master's degree in a mental health specialty with a license. Home visitors typically maintain a caseload of 12 to 16 families.

Supervisors

Child First employed 25 supervisors in 2016. The model requires a master's degree in a mental health specialty with a license for supervisors.

Where is the model implemented?



Child First operated in 23 local agencies across 3 states in 2016.

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 *Data Supplement to the 2017 Home Visiting Yearbook*.



National Home Visiting
Resource Center
www.nhvrc.org

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Families Served Through Evidence-Based Home Visiting in 2016



35,398

home visits provided



1,400

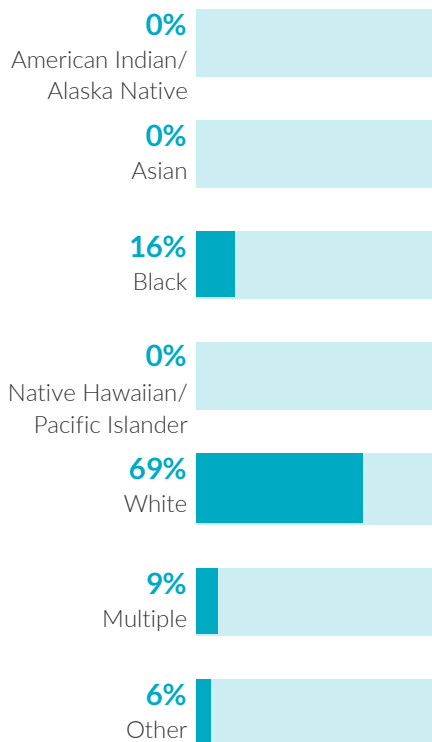
families served



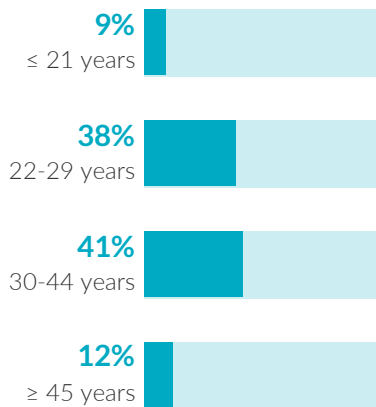
1,420

children served

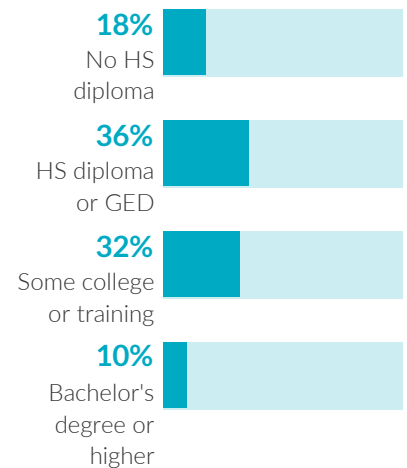
Race



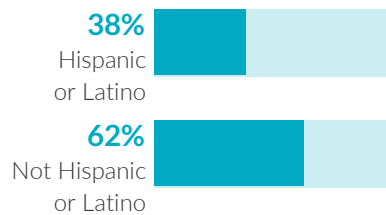
Caregiver age



Caregiver education



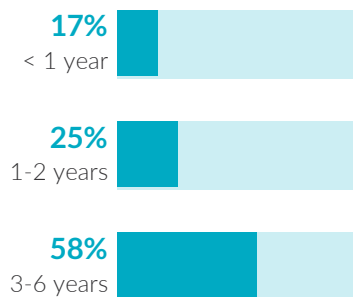
Ethnicity



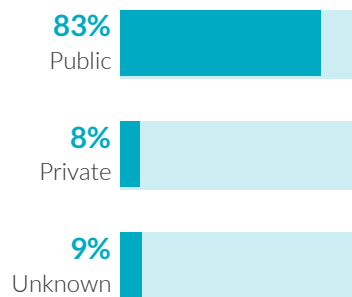
Household income



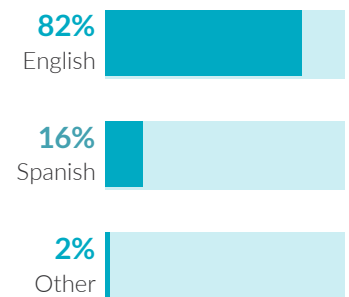
Child age



Child insurance status



Primary language



Notes • Data on caregiver education are based on a subset of families served by MIECHV. The status is unknown for 4 percent of recipients. • Data on low-income status are based on a subset of families served by MIECHV. Low income is defined as families meeting the eligibility requirements for Medicaid, or having a family income at or below 133 percent of the federal poverty guidelines.