



**2016**

**NEEDS AND ASSETS REPORT**

 **FIRST THINGS FIRST**

Pima South

# **Pima South Regional Partnership Council**

**2016**

## **Needs and Assets Report**

Prepared by

Community Research, Evaluation & Development (CRED)  
The Frances McClelland Institute for Children, Youth, and Families  
John & Doris Norton School of Family and Consumer Sciences  
College of Agricultural and Life Sciences  
The University of Arizona

Funded by

First Things First Pima South Regional Partnership Council

Frances McClelland Institute for Children, Youth and Families  
John & Doris Norton School of Family and Consumer Sciences  
College of Agricultural and Life Sciences  
The University of Arizona  
PO Box 210078  
Tucson, AZ 85721-0462  
Phone: (520) 621-8739  
Fax: (520) 621-4979  
<http://ag.arizona.edu/fcs/>

---

## Pima South Regional Partnership Council

3610 North Prince Village Place, Suite 100, Tucson, Arizona 85719  
520.628.6650 | 877.803.7234 | azfff.gov

### Chair

Nyki Harrington

### Vice Chair

Connie Espinoza

### Members

Cyndi Barningham

Dr. David Dumon

Sagrario Dyer

Jennifer Hook

Dr. Virginia Juettner

Linda Kubiak

Catalina Laborin

Lynn O'Connor

Paul Ohm

### Regional Director

Jaymie Jacobs

November 9, 2016

### Message from the Chair:

The past two years have been rewarding for the First Things First Pima South Regional Partnership Council as we delivered on our mission to build better futures for young children and their families. During the past year, we have touched many lives of young children and their families.

The Pima South Regional Partnership Council is committed to supporting and providing opportunities as indicated throughout this report.

Our strategic direction has been guided by the Needs and Assets reports, specifically created for the Pima South Region in 2012, 2014 and the new 2016 report. The Needs and Assets reports are essential to our continued work in building a comprehensive, integrated early childhood system for our young children and our overall future. The Pima South Regional Partnership Council would like to thank our Needs and Assets vendor, Community Research, Evaluation & Development (CRED) of the Norton School of Family and Consumer Sciences at the University of Arizona, for their knowledge, expertise and analysis of the Pima South region. The new report will help drive our decisions as we continue to move forward for the young children and families of the Pima South region.

As we continue to advance our mission, the First Things First Pima South Regional Partnership Council is committed to meeting the needs of young children by providing essential services and advocating for social change.

Thanks to our dedicated staff, volunteers and community partners, First Things First is making a real difference in the lives of our youngest citizens and throughout Arizona.

Thank you for your continued support.

Sincerely,



Nyki Harrington, Chair  
Pima South Regional Partnership Council

## Introductory Summary and Acknowledgments

Ninety percent of a child's brain develops before kindergarten and the quality of a child's early experiences impact whether their brain will develop in positive ways that promote learning. Understanding the critical role the early years play in a child's future success is crucial to our ability to foster each child's optimal development and, in turn, impact all aspects of wellbeing of our communities and our state.

This Needs and Assets Report for the Pima South Region helps us in understanding the needs of young children, the resources available to meet those needs and gaps that may exist in those resources. An overview of this information is provided in the Executive Summary and documented in further detail in the full report.

The First Things First Pima South Regional Partnership Council recognizes the importance of investing in young children and ensuring that families and caregivers have options when it comes to supporting the healthy development of young children in their care. This report provides information that will aid the Council's funding decisions, as well as our work with community partners on building a comprehensive early childhood system that best meets the needs of young children in our community.

It is our sincere hope that this information will help guide community conversations about how we can best support school readiness for all children in the Pima South region. This information may also be useful to stakeholders in our area as they work to enhance the resources available to young children and their families and as they make decisions about how best to support children birth to 5 years old in our area.

### ***Acknowledgments:***

We want to thank the Arizona Department of Economic Security and the Arizona Child Care Resource and Referral, the Arizona Department of Health Services, the Arizona Department of Education, the Census Bureau, the Arizona Department of Administration- Employment and Population Statistics, and the Arizona Health Care Cost Containment System for their contributions of data for this report, and their ongoing support and partnership with First Things First on behalf of young children.

To the current and past members of the Pima South Regional Partnership Council, your vision, dedication, and passion have been instrumental in improving outcomes for young children and families within the region. Our current efforts will build upon those successes with the ultimate goal of building a comprehensive early childhood system for the betterment of young children within the region and the entire state.

## Table of Contents

Letter from the Chair .....	i
List of Tables .....	3
List of Figures .....	4
Executive Summary.....	6
The Pima South Region .....	11
Regional Description .....	11
Data Sources .....	13
Population Characteristics .....	15
Why it Matters .....	15
What the Data Tell Us.....	17
Population and Households.....	17
Living Arrangements for Young Children.....	19
Race, Ethnicity, and Language .....	21
Economic Circumstances .....	23
Why it Matters .....	23
What the Data Tell Us.....	25
Poverty and Income .....	26
Employment and Housing.....	27
Economic Supports .....	29
Educational Indicators .....	30
Why it Matters .....	30
What the Data Tell Us.....	31
Educational Attainment of the Adult Population .....	32
Graduation and Drop-out Rates .....	33
Third-grade Test Scores .....	33
Other Educational Indicators .....	34
Early Learning.....	36
Why it Matters .....	36
What the Data Tell Us.....	38
Early Care and Education .....	38
Families with Children Who Have Special Needs .....	40
Child Health.....	41
Why it Matters .....	41
What the Data Tell Us.....	42
Mothers Giving Birth.....	44
Infant Health .....	45
Health Insurance.....	47
Immunizations .....	48
Family Support and Literacy .....	49
Why it Matters .....	49
What the Data Tell Us.....	50

Communication, Public Information and Awareness .....	53
Why it Matters .....	53
What the Data Tell Us .....	53
Systems Coordination among Early Childhood Programs and Services .....	55
Why it Matters .....	55
What the Data Tell Us .....	55
Appendix 1: Map of Zip Codes of the Pima South Region .....	57
Appendix 2: Zip Codes of the Pima South Region.....	58
Appendix 3: Map of Elementary and Unified School Districts in the Pima South Region .....	59
Appendix 4: Data Sources .....	60

## List of Tables

Table 1. Population and households, 2010 .....	17
Table 2. Population of children by single year-of-age, 2010 .....	18
Table 3. State and county population projections, 2015 & 2020.....	18
Table 4. Children (ages 0-5) living with one or two foreign-born parents, 2009-2013 five-year estimate .....	20
Table 5. Children (ages 0-5) living in the household of a grandparent, 2010 .....	20
Table 6. Grandparents responsible for grandchildren (ages 0-17) living with them, 2009-2013 five-year estimate .....	20
Table 7. Race and ethnicity of the population of young children (ages 0-4), 2010.....	21
Table 8. Race and ethnicity of the adult population (ages 18 and older), 2010 .....	21
Table 9. Household use of languages other than English, 2009-2013 five-year estimate .....	22
Table 10. Federal poverty levels for families with young children (ages 0-4), 2009-2013 five-year estimate .....	26
Table 11. Parents of young children (ages 0-5) who are or are not in the labor force, 2009-2013 five-year estimate .....	28
Table 12. Vacant and occupied housing units, 2009-2013 five-year estimate.....	28
Table 13. Occupied housing units, costs relative to income, and foreclosures, 2009-2013 five-year estimate .....	28
Table 14. Children (ages 0-5) receiving Temporary Assistance to Needy Families (TANF), 2012-2014 .....	29
Table 15. Children (ages 0-5) in the Supplemental Nutrition Assistance Program (SNAP), 2012-2014 .....	29
Table 16. Students eligible for free or reduced-price lunch, 2012-2014.....	29
Table 17. Drop-out and graduation rates, 2012-2014.....	33
Table 18. Percent of students (Pre-K through 3rd grade) who were homeless, 2012-2014.....	34
Table 19. Attendance rates for first-, second-, and third-graders, 2014.....	35

Table 20. Child care providers: number of providers and total licensed capacity, 2014 .....	38
Table 21. Median daily charge for full-time child care, 2014 .....	39
Table 22. Cost of child care in a licensed center as a percentage of median family income, 2009-2013 five-year estimate .....	39
Table 23. Estimated number of children (ages 3 and 4) enrolled in nursery school, preschool, or kindergarten, 2009-2013 five-year estimate .....	39
Table 24. AzEIP referrals and children served, 2014 .....	40
Table 25. Division of Developmental Disabilities (DDD) services to children (ages 0-2), 2013-2014 .....	40
Table 26. Division of Developmental Disabilities (DDD) services to children (ages 3-5), 2013-2014 .....	40
Table 27. Selected characteristics of mothers giving birth, 2013.....	44
Table 28. Selected characteristics of babies born, 2013 .....	45
Table 29. Unintentional injuries to children (ages 0-5), 2012-2014.....	46
Table 30. Number of children (all ages) enrolled in KidsCare, 2005-2014 .....	48
Table 31. Immunizations for children in child care, school year 2014-2015.....	48
Table 32. Immunizations for children in kindergarten, school year 2014-2015 .....	48

## List of Figures

Figure 1. The Pima South Region .....	12
Figure 2. Living arrangements for children (ages 0-5), 2009-2013 five-year estimate .....	19
Figure 3. Heads of households in which young children (ages 0-5) live, 2010.....	19
Figure 4. Language spoken at home, by persons ages 5 and older, 2009-2013 five-year estimate .....	22
Figure 5. Percent of population in poverty, 2009-2013 five-year estimate .....	26
Figure 6. Median annual family incomes, 2009-2013 five-year estimate .....	27
Figure 7. Average annual unemployment rates, 2006-2014 .....	27
Figure 8. Level of education for the population ages 25 and older, 2009-2013 five-year estimate .....	32
Figure 9. Results of the 2014 third-grade AIMS Math Test .....	33
Figure 10. Results of the 2014 third-grade AIMS Reading test .....	34
Figure 11. Healthy People 2020 objectives for mothers, compared to 2013 region and state data .....	44
Figure 12. Healthy People 2020 objectives for babies, compared to 2013 region and state data .....	45
Figure 13. Regular visits at the same doctor's office (Family and Community Survey, 2012) .....	46
Figure 14. Regular visits with the same dental provider (Family and Community Survey, 2012) .....	47

Figure 15. Estimated percent of population without health insurance, 2009-2013 five-year estimate ..... 47

Figure 16. Reading stories to young children (Family and Community Survey, 2012)..... 51

Figure 17. Telling stories or singing songs to young children (Family and Community Survey, 2012) ..... 51

Figure 18. Drawing and scribbling with young children (Family and Community Survey, 2012). 52

Figure 19. Understanding of prenatal brain development (Family and Community Survey, 2012) ..... 52

Figure 20. Satisfaction with information and resources (Family and Community Survey, 2012) 54

Figure 21. Ease of locating needed services (Family and Community Survey, 2012) ..... 54

Figure 22. Satisfaction with coordination and communication (Family and Community Survey, 2012) ..... 56

## Executive Summary

### ***Region Description***

The First Things First Pima South Region is defined as the southern portion of Pima County, not including the lands belonging to the Pascua Yaqui Tribe and the Tohono O'odham Nation, plus a small part of Santa Cruz County around the Amado community. The border between the Pima North and Pima South regions is irregular, but it primarily follows Kinney Road, Ajo Way, and Irvington Road.

### ***Data Sources***

The data contained in this report come from a variety of sources. Some data were provided to First Things First by state agencies, such as the Arizona Department of Economic Security (DES), the Arizona Department of Education (ADE), and the Arizona Department of Health Services (ADHS). Other data were obtained from publically available sources, including the 2010 U.S. Census, the American Community Survey (ACS), the Arizona Department of Administration (ADOA), and the Arizona Health Care Cost Containment System (AHCCCS). In addition, regional data from the 2012 First Things First Family and Community Survey (FCS) are included.

### ***Population Characteristics***

According to the U.S. Census, the Pima South Region had a population of 269,210 in 2010, of whom 25,171 (9%) were children under the age of six. Nineteen percent of households in the region included a young child. According to the Arizona Department of Administration, the population of young children in Pima County was projected to increase from 2010 through 2015 into 2020 to 86,000, whereas the population of young children in Arizona was projected to decrease from 2010 to 2015, but then begin increasing again into 2020. The increase in the population of young children in Pima County (15%) is projected to be higher than the state of Arizona's projected increase (12%).

In the Pima South Region, over a quarter (28%) of children aged birth to 5 live with a foreign-born parent. The percentage of children living with a foreign-born parent in the region is the same as across the state as a whole (28%), and slightly higher than in Pima County (24%). Likewise, the percentage of young children in the Pima South Region living in a grandparent's household (15%) is very similar to the percentage statewide (14%).

Differences exist between the region, county, and state relating to race, ethnicity, and language. Two thirds (66%) of young children (ages 0-4) in the Pima South Region are Hispanic or Latino. This is a higher percentage of Latino children than elsewhere in Pima County (53%) and Arizona (45%). A smaller proportion of adults (those aged 18 and older) than children identify as Hispanic or Latino across all geographic levels. In the region, 44 percent of those aged 18 and older identify as Hispanic or Latino, compared to 29 percent in Pima County and 25 percent across the state. Household language use also reflects these demographic patterns; more households in the region (41%) report speaking a language other than English compared

to adults statewide (27%). Six percent of households in the region are limited-English-speaking households where Spanish is the primary language.

### ***Economic Circumstances***

The poverty rates among the total (all-age) population and the population of young children vary little by geographical level. For the total population, 19 percent of people in the Pima South Region live in poverty, similar to Pima County (19%) and the state as a whole (18%). Although young children are consistently more likely to live in poverty than members of the total population, a slightly higher percentage of children in Pima South are living in poverty than their peers in Pima County and Arizona (31%, 30% and 28%, respectively). In addition to the families whose incomes fall below the federal poverty level, a substantial proportion of households in the region and county are considered low income (i.e., near but not below the federal poverty level [FPL]). About half of families with children aged four and under are living below 185 percent of the federal poverty level in the region (51%), Pima County (51%), and across the state (48%). Based on the 2014 FPL guidelines, this means that family income is less than \$3,677 a month for a family of four.

In Pima County, unemployment topped out at approximately nine percent in 2010, and the county has consistently had slightly lower unemployment than elsewhere in the state. In both the county and the state, unemployment rates have fallen since 2010; by 2014, Pima County had a six percent unemployment rate. Patterns of parental employment are fairly similar across the geographical designations.

Over a third of Pima South residents are spending more than 30 percent of their income on housing. This is a similar but slightly lower percentage than elsewhere in the county and state. However, the foreclosure crisis hit the Pima South Region particularly hard. The foreclosure rate in the region (13.38 per 10,000 homes) was almost twice the rate elsewhere in the county and state.

The percentages of children aged 5 and under receiving Temporary Assistance for Needy Families (TANF) from 2012 to 2014 were low for the region, county, and state, although rates have been slightly lower in Pima South than elsewhere. Other safety net programs, such as SNAP and the school-based free or reduced-price lunch program, reached far more children. Over half of young children in the region, county, and state received SNAP benefits in the years 2012 through 2014, and over half of students were eligible for free or reduced-price lunch in the county and state during those years. For both TANF and SNAP, the percentage of young children receiving these benefits decreased between 2012 and 2014, although this may be due to funding and eligibility changes rather than reflecting decreased need.

### ***Educational Indicators***

Nearly one out of every five (18%) adults aged 25 and older in the Pima South Region did not complete high school. Adults in the region are also less likely to have attained a bachelor's or higher degree (21%) than adults elsewhere in Pima County (30%) and Arizona (27%). However, adults in the region, county, and state have similar rates of having had some college or

professional training (34-35%). High school drop-out rates were slightly higher in Pima County (5%) than in the state of Arizona (3%) in recent years. In addition, four and five year graduation rates in 2013 in Pima County (70% and 76% respectively) were slightly lower than in the state (75% and 79%), and had decreased from highs in 2011 of 74 and 79 percent, respectively.

Students “pass” Arizona’s Instrument to Measure Standards (AIMS) if they meet or exceed the standard. In Pima County, two-thirds (66%) of third grade students passed the AIMS Math test and over three-quarters (76%) passed the AIMS reading test. Eleven percent of third graders in the county scored “falls far below” in math, and 3 percent received this designation on the reading test. While the number of students falling far below the state standards on these tests is a cause for concern, students in the county were similar to students across the state.

### ***Early Learning***

In 2014 there were 252 licensed child care providers in the Pima South Region, licensed to serve 7,625 children. Most of these providers were classified as family child care providers (n=135), followed by child care centers (n=67) and group homes (n=48). The cost of care in Pima County varies by the type of care and the age of the child receiving care; the median cost in the county relative to the cost of like care across the state differs depending on the situation. For example, parents in Pima County tend to pay less for licensed child care centers (e.g., \$39 per day for infant care vs \$42) and more for approved family homes (e.g., \$25 per day for infant care vs \$22) compared to average rates in Arizona as whole.

According to data from the American Community Survey, less than one-third (29%) of children aged 3 and 4 were enrolled in nursery school, preschool, or kindergarten in the Pima South Region. This is a slightly lower percentage than in Pima County overall (37%) and in Arizona (35%).

In the Pima South Region, Pima County, and across Arizona, most referrals made to the Arizona Early Intervention Program (AzEIP) in FY 2014 were for children aged 25 to 35 months (region n=287). Similarly, the pattern of children being served by AzEIP in 2014 was similar for the region, county, and the state with more 25 to 35 month olds being served than 13 to 24 month olds and those under 1 year combined. From 2013 to 2014, the number of Division of Developmental Disabilities (DDD) service visits for children aged 0-2 decreased across the region, county, and the state, whereas for children aged 3-5, DDD service visits increased in the region and county, though not in the state.

### ***Child Health***

Most characteristics of mothers who gave birth in 2013 were similar for the Pima South Region, Pima County, and the state of Arizona. However, prenatal care in the region was less adequate than in the state overall. For example, eight percent of women giving birth in the Pima South Region and Pima County had had fewer than five prenatal visits, which was higher than the proportion across the state (5%). Similarly, 27 percent of women giving birth in the region and 26 percent in Pima County had no prenatal care in the first trimester compared to 19 percent

across the state as a whole; this means that the region is currently not meeting the Healthy People 2020 target of no more than 22.1 percent of women lacking first-trimester care.

Across the region, county, and state, infants born in 2013 were also very similar in terms of rates of low and high birth weight, premature birth, and the need for neonatal intensive care. Six percent of babies in Pima South had low birth weights (at or below 2.5 kilograms) and 9 percent were born premature (before 37 weeks gestation). The Pima South Region is meeting Healthy People 2020 targets for both these indicators.

Unintentional injuries for children under age six in the region, county, and state declined slightly between 2012 and 2014, in terms of both non-fatal inpatient hospitalizations and emergency department visits.

A key factor in health care is health insurance, and eight percent of young children in the Pima South Region were uninsured (8%); this was a slightly lower percentage than in the county (9%) and state (10%). Across the region, county, and state, young children were less likely to be uninsured than members of the total (all-age) population. In the region, members of the total population were twice as likely (16%) as young children to be uninsured.

Almost 100 percent of children in child care in the Pima South Region had been immunized against seven important diseases. The immunization rates in the region were slightly higher than rates elsewhere in the county and state. The Healthy People 2020 target for vaccination coverage for children ages 19-35 months for the DTAP, polio, and MMR vaccines is 90 percent, suggesting that the region is meeting this goal. However, given that state regulations require children enrolled in child care to be up to date on immunizations, it is possible that immunization rates for children in child care are higher than immunization rates for children not in child care. If that is the case, the rates for the entire population of children in these areas may be lower than the Healthy People 2020 goals. Children in kindergarten were vaccinated at similar rates to children in child care in the region. For both age levels, the Pima South Region had lower rates of religious and personal belief exemptions from immunizations than in the county or across the state.

### ***Family Support and Literacy***

The First Things First Family and Community Survey is a phone-based survey designed to measure many critical areas of parents' knowledge, skills, and behaviors related to their young children. In the South Pima Region,<sup>1</sup> 150 people responded to the 2012 First Things First Family and Community Survey. Among other topics, the 2012 First Things First Family and Community Survey collected data about parent and caregiver knowledge of children's early development and their involvement in a variety of behaviors known to contribute positively to healthy development. Parents in the South Pima Region were less likely to report reading to their children (50%), telling stories to their children (44%) and drawing with their child (41%) six or seven days a week compared to parents across the state (51%, 51% and 47% respectively).

---

<sup>1</sup> These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

Over three-quarters of parents (82%) in the South Pima Region showed an understanding that brain development can be impacted prenatally or right from birth, similar to respondents across the state as a whole.

***Communication, Public Information and Awareness***

In addition to measuring parent knowledge, skills, and behaviors related to their young children, the 2012 First Things First Family and Community Survey collected data on parents' perceptions regarding resources available to young children and their families across Arizona. Sixty-eight percent of responding parents in the South Pima Region reported overall satisfaction with "the community information and resources available to them about their children's development and health," and 22 percent reported some level of dissatisfaction. These values reflect slightly lower levels of satisfaction compared to parents across the state. Seventy-five percent of respondents in the region agreed that it was easy to locate needed or desired services, similar to the state rate.

***Systems Coordination among Early Childhood Programs and Services***

The 2012 First Things First Family and Community Survey also collected data on parents' perceptions regarding how well agencies that serve young children and their families coordinate and collaborate. One item from the 2012 Family and Community Survey addresses the issue of perceived early childhood system coordination. Respondents in the both the South Pima Region and the state were more likely to indicate satisfaction (55% in the region and 43% in the state) than dissatisfaction (27% in the region and 29% in the state) with how care providers and government agencies work together and communicate.

## The Pima South Region

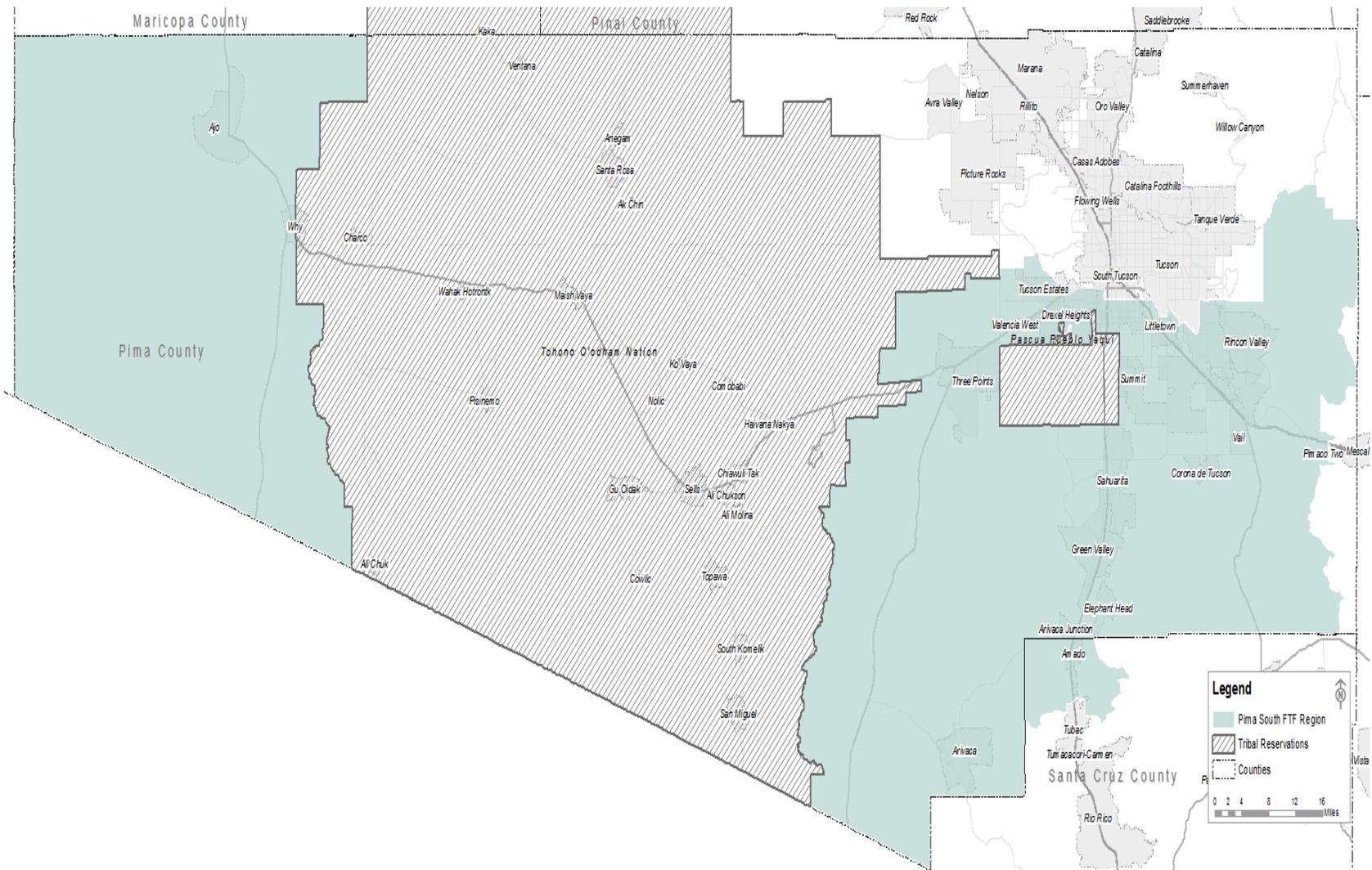
### Regional Description

The First Things First regional boundaries were initially established in 2007, creating 31 regions which were designed to (a) reflect the view of families in terms of where they access services, (b) coincide with existing boundaries or service areas of organizations providing early childhood services, (c) maximize the ability to collaborate with service systems and local governments, and facilitate the ability to convene a Regional Partnership Council, and (d) allow for the collection of demographic and indicator data. The regional boundaries are reviewed every two years. In fiscal year 2015, the boundaries were modified using census blocks, creating 28 regions. This report uses the 2015 definition of the regional boundaries.

The First Things First Pima South Region is defined as the southern portion of Pima County, not including the lands belonging to the Pascua Yaqui Tribe and the Tohono O’odham Nation, plus a small part of Santa Cruz County around the Amado community. The border between the Pima North and Pima South regions is irregular, but it primarily follows Kinney Road, Ajo Way, and Irvington Road.

Figure 1 shows the geographical area covered by the Pima South Region. Additional information available at the end of this report includes a map of the region by zip code in Appendix 1, a table listing zip codes for the region in Appendix 2, and a map of school districts in the region in Appendix 3.

**Figure 1. The Pima South Region**



Source: U.S. Census Bureau (2010). TIGER/Line Shapefiles: TabBlocks, Streets, Counties, American Indian/Alaska Native Homelands. Retrieved from <http://www.census.gov/geo/maps-data/data/tiger-line.html>

## Data Sources

The data contained in this report come from a variety of sources. Some data were provided to First Things First by state agencies, such as the Arizona Department of Economic Security (DES), the Arizona Department of Education (ADE), and the Arizona Department of Health Services (ADHS). Other data were obtained from publically available sources, including the 2010 U.S. Census, the American Community Survey (ACS), the Arizona Department of Administration (ADOA), and the Arizona Health Care Cost Containment System (AHCCCS). In addition, regional data from the 2012 First Things First Family and Community Survey (FCS) are included.

The U.S. Census<sup>2</sup> is an enumeration of the population of the United States. It is conducted every ten years, and includes information about housing, race, and ethnicity. The 2010 U.S. Census data are available by census block. There are about 115,000 inhabited blocks in Arizona, with an average population of 56 people each. The Census data for the Pima South Region presented in this report were calculated by identifying each block in the region, and aggregating the data over all of those blocks. (Note that the Census 2010 data in the current report may vary to a small degree from census data reported in previous Needs & Assets reports. The reason is that in the previous reports, the Census 2010 data were aggregated by zip code; the current report uses aggregation by census blocks.)

The American Community Survey<sup>3</sup> is a survey conducted by the U.S. Census Bureau each month by mail, telephone, and face-to-face interviews. It covers many different topics, including income, language, education, employment, and housing. The ACS data are available by census tract. Arizona is divided into about 1,500 census tracts, with an average of about 4,200 people in each. The ACS data for the Pima South Region were calculated by aggregating over the census tracts which are wholly or partially contained in the region. The data from partial census tracts were apportioned according to the percentage of the 2010 Census population in that tract living inside the Pima South Region. The most recent and most reliable ACS data are averaged over the past five years; those are the data included in this report. They are based on surveys conducted from 2009 to 2013. In general, the reliability of ACS estimates is greater for more populated areas. Statewide estimates, for example, are more reliable than county-level estimates.

To protect the confidentiality of program participants, the First Things First Data Dissemination and Suppression Guidelines preclude our reporting social service and early education programming data if the count is less than ten, and preclude our reporting data related to

---

<sup>2</sup> U.S. Census Bureau. (May, 2000). *Factfinder for the Nation*. Retrieved from <http://www.census.gov/history/pdf/cff4.pdf>

<sup>3</sup> U.S. Census Bureau. (April, 2013). *American Community Survey Information Guide*. Retrieved from [http://www.census.gov/content/dam/Census/programs-surveys/acs/about/ACS\\_Information\\_Guide.pdf](http://www.census.gov/content/dam/Census/programs-surveys/acs/about/ACS_Information_Guide.pdf)

health or developmental delay if the count is less than twenty-five. In addition, some data received from state agencies may be suppressed according to their own guidelines. The Arizona Department of Health Services, for example, does not report counts less than six. Throughout this report, information which is not available because of suppression guidelines will be indicated by entries of “N/A” in the data tables.

## Population Characteristics

### Why it Matters

The characteristics of families living within a region can influence the availability of resources and supports for those families.<sup>4</sup> Population characteristics and trends in family composition are often considered by policymakers when making decisions about the type and location of services to be provided within a region such as schools, health care facilities and services, and social services and programs. As a result of these decisions, families with young children may have very different experiences within and across regions regarding access to employment, food resources, schools, health care facilities and providers, and social services. It is important, therefore, that decision-makers understand who their constituents are so that they can prioritize policies that address the needs of diverse families with young children. Accurate and up-to-date information about population characteristics such as the number of children and families in a geographic region, their ethnic composition, whether their parents were born abroad, living arrangements and languages spoken can support the development or continuation of resources that are linguistically, culturally, and geographically most appropriate for a given locale.

In addition to being affected by community resources, the likelihood of a child reaching his or her optimal development can also be affected by the supports and resources available within the family.<sup>5,6</sup> The availability of family resources can be influenced by the characteristics of the family structure, such as who resides in a household and who is responsible for a child's care. Children living with and being cared for by relatives or caregivers other than parents, is increasingly common.<sup>7</sup> Those providing this type of care, such as friends, aunts, uncles, siblings and grandparents, may be in need of special support. Raising or supporting young children may pose a particular challenge for aging grandparents, as they often lack information on resources,

---

<sup>4</sup> U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. (2014). *Child Health USA 2014. Population Characteristics*. Retrieved from: <http://mchb.hrsa.gov/chusa14/population-characteristics.html>

<sup>5</sup> Center for American Progress. (2015). *Valuing All Our Families. Progressive Policies that Strengthen Family Commitments and Reduce Family Disparities*. Retrieved from: <https://cdn.americanprogress.org/wp-content/uploads/2015/01/FamilyStructure-report.pdf>

<sup>6</sup> Kidsdata.org. (n.d.). *Summary: Family Structure*. Retrieved from: <http://www.kidsdata.org/topic/8/family-structure/summary>

<sup>7</sup> U.S. Department of Health and Human Services. (2012). *ASPE Report. Children in Nonparental Care: A Review of the Literature and Analysis of Data Gaps*. Retrieved from <http://aspe.hhs.gov/basic-report/children-nonparental-care-review-literature-and-analysis-data-gaps>

support services, benefits and policies available to aid in their caregiving role.<sup>8</sup> Often, grandparents take on child-rearing responsibilities when parents are unable to provide care because of the parent's death, unemployment or underemployment, physical or mental illness, substance abuse, incarceration, or because of domestic violence or child neglect in the family.<sup>9</sup> Caring for children who have experienced family trauma can pose an even greater challenge to grandparents, who may be in need of specialized assistance and resources to support their grandchildren.

Understanding language use in the region can also contribute to being better able to serve the needs of families with young children. Language preservation and revitalization have been recognized by the U.S. Department of Health & Human Services as keys to strengthening culture in Native communities and to encouraging communities to move toward social unity and self-sufficiency.<sup>10</sup> Special consideration should be given to respecting and supporting the numerous Native languages spoken by families, particularly in tribal communities around the state. In addition, assuring that early childhood resources and services are available in Spanish is important in many areas of Arizona, given that five percent of the households in the state are limited English speaking households (that is, a household where none of the members speak English very well). Language barriers for these families can limit their access to health care and social services, and can provide challenges to communication between parents and their child's teachers, which can impact the quality of education children are able to receive.<sup>11</sup>

---

<sup>8</sup> American Association for Marriage and Family Therapy. (2015). *Grandparents Raising Grandchildren*. Retrieved from [http://www.aamft.org/imis15/AAMFT/Content/Consumer\\_Updates/Grandparents\\_Raising\\_Grandchildren.aspx](http://www.aamft.org/imis15/AAMFT/Content/Consumer_Updates/Grandparents_Raising_Grandchildren.aspx)

<sup>9</sup> Population Reference Bureau. (2012). *More U.S. Children Raised by Grandparents*. Retrieved from <http://www.prb.org/Publications/Articles/2012/US-children-grandparents.aspx>

<sup>10</sup> U.S. Department of Health & Human Services, Administration for Native Americans. (n.d.). *Native Languages*. <http://www.acf.hhs.gov/programs/ana/programs/native-language-preservation-maintenance>

<sup>11</sup> Shields, M. & Behrman, R. (2004). Children of immigrant families: Analysis and Recommendations. *The Future of Children*. 14(2). Retrieved from: [https://www.princeton.edu/futureofchildren/publications/docs/14\\_02\\_1.pdf](https://www.princeton.edu/futureofchildren/publications/docs/14_02_1.pdf)

## What the Data Tell Us

According to the U.S. Census, the Pima South Region had a population of 269,210 in 2010, of whom 25,171 (9%) were children under the age of six. Nineteen percent of households in the region included a young child (see Table 1). According to the Arizona Department of Administration, the population of young children in Pima County was projected to increase from 2010 through 2015 into 2020 to 86,000, whereas the population of young children in Arizona was projected to decrease from 2010 to 2015, but then begin increasing again into 2020 (see Table 3). The increase in the population of young children in Pima County (15%) is projected to be higher than the state of Arizona's projected increase (12%).

In the Pima South Region, over a quarter (28%) of children aged birth to 5 live with a foreign-born parent. The percentage of children living with a foreign-born parent in the region is the same as across the state as a whole (28%), and slightly higher than in Pima County (24%) (see Table 4). Likewise, the percentage of young children in the Pima South Region living in a grandparent's household (15%) is very similar to the percentage statewide (14%) (see Table 5).

Differences exist between the region, county, and state relating to race, ethnicity, and language. Two thirds (66%) of young children (ages 0-4) in the Pima South Region are Hispanic or Latino (see Table 7). This is a higher percentage of Latino children than elsewhere in Pima County (53%) and Arizona (45%). A smaller proportion of adults (those aged 18 and older) than children identify as Hispanic or Latino across all geographic levels. In the region, 44 percent of those aged 18 and older identify as Hispanic or Latino, compared to 29 percent in Pima County and 25 percent across the state (see Table 8). Household language use also reflects these demographic patterns; more households in the region (41%) report speaking a language other than English compared to adults statewide (27%) (see Table 9). Six percent of households in the region are limited-English-speaking households where Spanish is the primary language.

## Population and Households

**Table 1. Population and households, 2010**

	TOTAL POPULATION	POPULATION (AGES 0-5)	TOTAL NUMBER OF HOUSEHOLDS	HOUSEHOLDS WITH ONE OR MORE CHILDREN (AGES 0-5)	
Pima South Region	269,210	25,171	93,001	17,871	19%
Pima County	980,263	74,796	388,660	53,862	14%
Arizona	6,392,017	546,609	2,380,990	384,441	16%

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P1, P14, P20.  
Retrieved from: <http://factfinder.census.gov>

**Table 2. Population of children by single year-of-age, 2010**

	AGES 0-5	AGE 0	AGE 1	AGE 2	AGE 3	AGE 4	AGE 5
Pima South Region	25,171	3,971	4,105	4,367	4,262	4,260	4,206
Pima County	74,796	12,125	12,380	12,889	12,814	12,313	12,275
Arizona	546,609	87,557	89,746	93,216	93,880	91,316	90,894

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P14.

Retrieved from: <http://factfinder.census.gov>

Note: Children age 0 were born between April 2009 and March 2010; children age 5 were born between April 2004 and March 2005.

**Table 3. State and county population projections, 2015 & 2020**

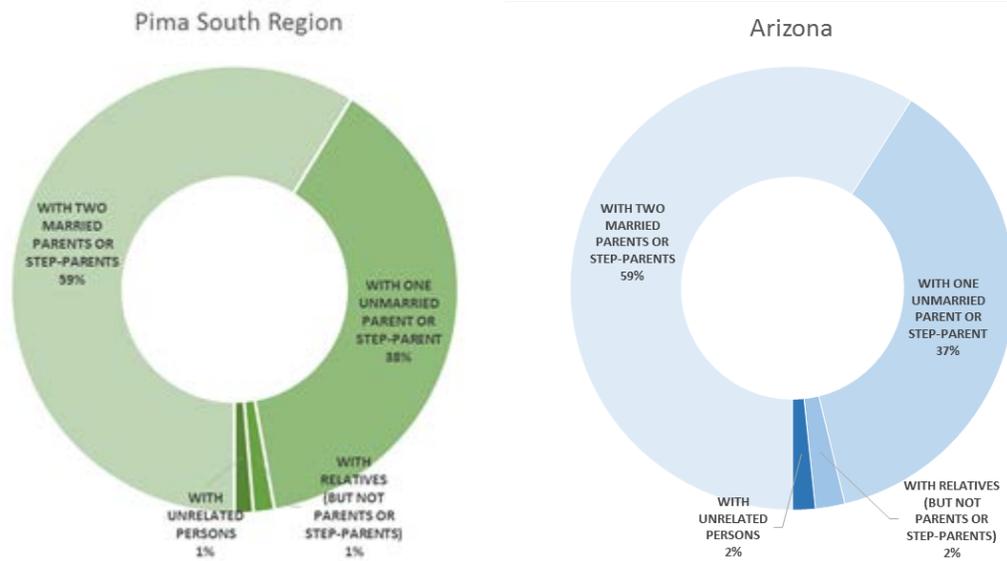
	POPULATION (AGES 0-5) IN 2010 CENSUS	PROJECTED POPULATION (AGES 0-5) IN 2015	PROJECTED POPULATION (AGES 0-5) IN 2020	PROJECTED CHANGE FROM 2010 TO 2020
Pima County	74,796	75,900	86,000	15%
Arizona	546,609	537,200	610,400	12%

Sources: Arizona Dept. of Administration, Employment and Population Statistics, "2012-2050 State and county population projections" & 2010 U.S. Census.

Note: Regional data were not available for this indicator.

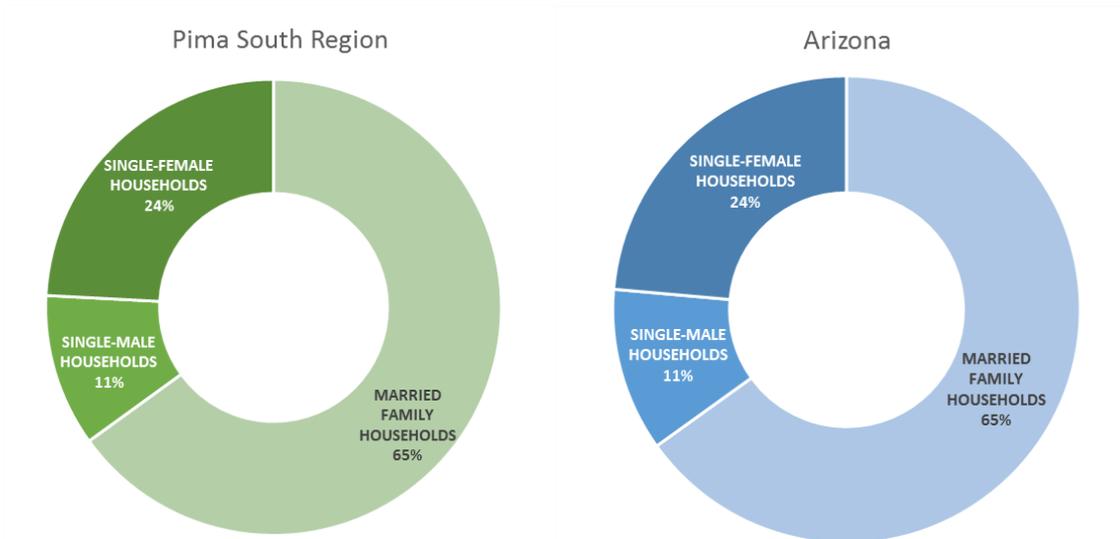
## Living Arrangements for Young Children

**Figure 2. Living arrangements for children (ages 0-5), 2009-2013 five-year estimate**



Source: American Community Survey, 5-year estimates (2009-2013), Tables B05009, B09001, and B17006

**Figure 3. Heads of households in which young children (ages 0-5) live, 2010**



Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P20, P32. Retrieved from: <http://factfinder.census.gov>

**Table 4. Children (ages 0-5) living with one or two foreign-born parents, 2009-2013 five-year estimate**

CHILDREN (0-5) LIVING WITH ONE OR TWO FOREIGN-BORN PARENTS	
Pima South Region	28%
Pima County	24%
Arizona	28%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B05009.  
Retrieved from: <http://factfinder.census.gov>

**Table 5. Children (ages 0-5) living in the household of a grandparent, 2010**

	POPULATION (AGES 0-5)	CHILDREN (0-5) LIVING IN A GRANDPARENT'S HOUSEHOLD	
Pima South Region	25,171	3,826	15%
Pima County	74,796	10,346	14%
Arizona	546,609	74,153	14%

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P41  
Retrieved from: <http://factfinder.census.gov>

**Table 6. Grandparents responsible for grandchildren (ages 0-17) living with them, 2009-2013 five-year estimate**

	GRANDCHILDREN (0-17) LIVING WITH GRANDPARENT HOUSEHOLDER	GRANDPARENT HOUSEHOLDER RESPONSIBLE FOR OWN GRANDCHILDREN (0-17)		GRANDPARENT HOUSEHOLDER RESPONSIBLE FOR OWN GRANDCHILDREN (0-17) WITH NO PARENT PRESENT	
Pima South Region	7,513	4,214	56%	862	11%
Pima County	20,528	11,327	55%	3,407	17%
Arizona	137,753	73,467	53%	20,102	15%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B10002.  
Retrieved from: <http://factfinder.census.gov>

## Race, Ethnicity, and Language

**Table 7. Race and ethnicity of the population of young children (ages 0-4), 2010**

	TOTAL POPULATION (AGES 0-4)	HISPANIC OR LATINO	WHITE, NOT HISPANIC	BLACK OR AFRICAN AMERICAN	AMERICAN INDIAN	ASIAN OR PACIFIC ISLANDER
Pima South Region	20,965	66%	26%	3%	3%	1%
Pima County	62,521	53%	35%	4%	5%	2%
Arizona	455,715	45%	40%	5%	6%	3%

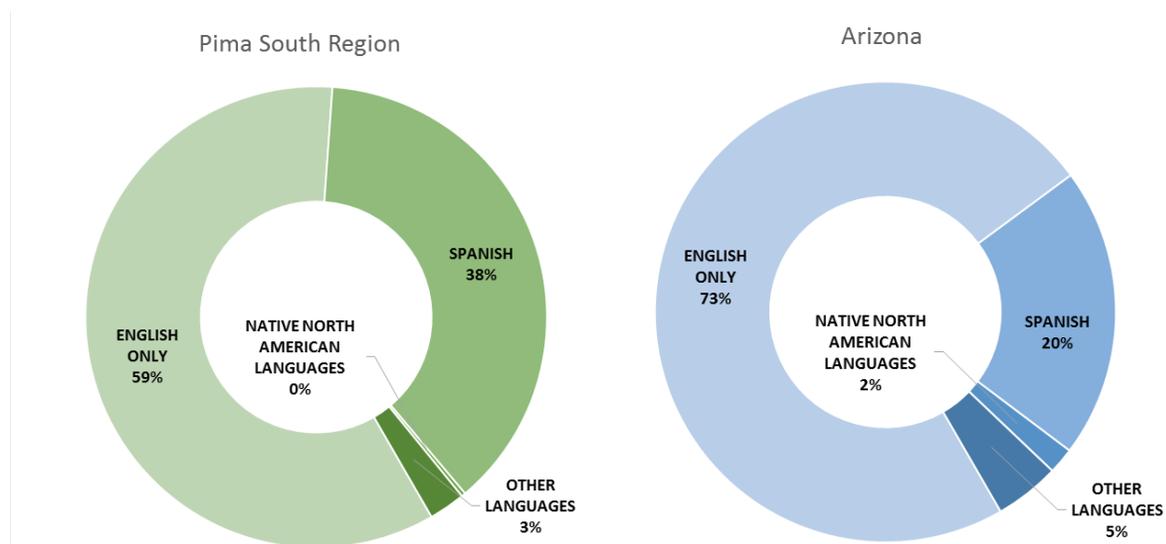
Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P12A-H.  
Retrieved from: <http://factfinder.census.gov>

**Table 8. Race and ethnicity of the adult population (ages 18 and older), 2010**

	TOTAL POPULATION (AGES 18+)	HISPANIC OR LATINO	NOT HISPANIC OR LATINO				
			WHITE	BLACK OR AFRICAN AMERICAN	AMERICAN INDIAN	ASIAN OR PACIFIC ISLANDER	OTHER
Pima South Region	194,016	44%	49%	3%	2%	2%	1%
Pima County	754,947	29%	61%	3%	2%	3%	1%
Arizona	4,763,003	25%	63%	4%	4%	3%	1%

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P11  
Retrieved from: <http://factfinder.census.gov>

**Figure 4. Language spoken at home, by persons ages 5 and older, 2009-2013 five-year estimate**



Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B16001. Retrieved from: <http://factfinder.census.gov>

**Table 9. Household use of languages other than English, 2009-2013 five-year estimate**

	NUMBER OF HOUSEHOLDS	HOUSEHOLDS IN WHICH A LANGUAGE OTHER THAN ENGLISH IS SPOKEN	LIMITED ENGLISH SPEAKING HOUSEHOLDS (TOTAL)	LIMITED ENGLISH SPEAKING HOUSEHOLDS (SPANISH)	LIMITED ENGLISH SPEAKING HOUSEHOLDS (NOT SPANISH)
Pima South Region	92,097	41%	6%	6%	0%
Pima County	384,041	30%	4%	3%	1%
Arizona	2,370,289	27%	5%	4%	1%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B16002. Retrieved from: <http://factfinder.census.gov>

## Economic Circumstances

### Why it Matters

Many economic factors contribute to a child's well-being, including family income, parent employment status, and the availability of safety-net programs such as housing and nutrition assistance.<sup>12,13</sup> Understanding the economic context in which families with young children live is crucial when designing programs and policies intended to assist them.

Employment rates and income are common indicators of economic well-being. Unemployment and job loss often results in families having fewer resources to meet their regular monthly expenses and support their children's development. Family dynamics can be negatively impacted by job loss as reflected in higher levels of parental stress, family conflict and more punitive parental behaviors.<sup>14</sup> Parental job loss can also impact children's school performance (shown by lower test scores, poorer attendance, higher risk of grade repetition, suspension or expulsion among children whose parents have lost their jobs.)<sup>15</sup> Unemployment rates, therefore, can be an indicator of family stress, and are also an important indicator of regional economic vitality.

Employment rates and job opportunities contribute to the income families have available. It is estimated that families need an income of about twice the federal poverty level (FPL)<sup>16</sup> to meet basic needs.<sup>17</sup> Families earning less may experience unstable access to basic resources like food and housing. Food insecurity – the lack of reliable access to affordable, nutritious food – negatively impacts the health and well-being of children, including a heightened risk for developmental delays.<sup>18</sup> High housing costs, relative to income, are associated with increased risk for homelessness, overcrowding, poor nutrition, frequent moving, lack of supervision while

---

<sup>12</sup> Annie E Casey Foundation. (2015). *Kids Count 2015 Data Book – State Trends in Child Well-being*. Retrieved from <http://www.aecf.org/m/databook/aecf-2015kidscountdatabook-2015-em.pdf>

<sup>13</sup> Kalil, A. (2013). Effects of the great recession on child development. *The Annals of the American Academy of Political and Social Science*, 650(1), 232-250. Retrieved from <http://ann.sagepub.com/content/650/1/232.full.pdf+html>

<sup>14</sup> Isaacs, J. (2013). *Unemployment from a child's perspective*. Retrieved from <http://www.urban.org/UploadedPDF/1001671-Unemployment-from-a-Childs-Perspective.pdf>

<sup>15</sup> Ibid

<sup>16</sup> The 2015 FPL for a family of four is \$24,250. Source: U.S. Department of Health and Human Services. (2015). *2015 Poverty Guidelines*. Retrieved from: <http://aspe.hhs.gov/2015-poverty-guidelines>

<sup>17</sup> National Center for Children in Poverty. (2015). *Arizona Demographics of Low-income Children*. Retrieved from [http://www.nccp.org/profiles/AZ\\_profile\\_6.html](http://www.nccp.org/profiles/AZ_profile_6.html)

<sup>18</sup> Rose-Jacobs, R., Black, M. M., Casey, P. H., Cook, J. T., Cutts, D. B., Chilton, M., Heeren, T., Levenson, S. M., Meyers, A. F., & Frank, D. A. (2008). Household food insecurity: Associations with at-risk infant and toddler development. *Pediatrics*, 121(1), 65-72. Retrieved from <http://pediatrics.aappublications.org/content/121/1/65.full.pdf>

parents are at work, and low cognitive achievement.<sup>19</sup> Poverty, especially among children, can have far reaching negative consequences, including an effect on brain development and later cognitive ability.<sup>20</sup>

Public assistance programs are one way of combating the effects of poverty and providing supports to children and families in need. Temporary Assistance for Needy Families<sup>21</sup> (TANF, which has replaced previous welfare programs) provides cash assistance and services to the very poor and can help offset some of the economic circumstances of families that may have a detrimental effect on young children. Another safety net program, the Supplemental Nutrition Assistance Program (SNAP, also referred to as “Nutrition Assistance” and “food stamps”) has been shown to help reduce hunger and improve access to healthier food.<sup>22</sup> SNAP benefits support working families whose incomes simply do not provide for all their needs. For low-income working families, the additional income from SNAP is substantial. For example, for a three-person family with one person whose wage is \$10 per hour, SNAP benefits boost take-home income by ten to 20 percent.<sup>23</sup> Similarly, the National School Lunch Program<sup>24</sup> provides free and reduced-price meals at school for students whose families meet income criteria. These income criteria are 130 percent of the federal poverty level (FPL) for free lunch, and 185 percent of the FPL for reduced price lunch.

---

<sup>19</sup> The Federal Interagency Forum on Child and Family Statistics. (2015). *America's Children: Key National Indicators of Well-Being, 2015*. Retrieved from [http://www.childstats.gov/pdf/ac2015/ac\\_15.pdf](http://www.childstats.gov/pdf/ac2015/ac_15.pdf)

<sup>20</sup> Noble, K.G., Houston, S.M., Brito, N.H., Bartsch, H. Kan E., et. al. (2015). Family income, parental education and brain structure in children and adolescents. *Nature Neuroscience*, 18, 773–778. Retrieved from <http://www.nature.com/neuro/journal/v18/n5/full/nn.3983.html#close>

<sup>21</sup> In Arizona, TANF eligibility is capped at \$335 per month, or \$4020 annually for a family of four, and has recently undergone significant changes. Beginning in 2016, Arizona will become the first and only state that limits a person’s lifetime benefit to 12 months. In addition, since 2009, a steadily decreasing percentage of Arizona TANF funds have been spent on three of the key assistance categories: cash assistance to meet basic needs, helping connect parents to employment opportunities, and child care; in 2013, Arizona ranked 51<sup>st</sup>, 47<sup>th</sup>, and 46<sup>th</sup> respectively in proportional spending in those categories across all states and the District of Columbia. Meanwhile, since 2009, an increasing percentage of Arizona TANF funds have been spent on other costs such as child protection, foster care, and adoption. Sources: Reilly, T., and Vitek, K. (2015). *TANF cuts: Is Arizona shortsighted in its dwindling support for poor families?* Retrieved from: [https://morrisoninstitute.asu.edu/sites/default/files/content/products/TANF.doc\\_0.pdf](https://morrisoninstitute.asu.edu/sites/default/files/content/products/TANF.doc_0.pdf); Floyd, I., Pavetti, L., and Schott, L. (2015). *How states use federal and state funds under the TANF block grant*. Retrieved from: <http://www.cbpp.org/research/family-income-support/how-states-use-federal-and-state-funds-under-the-tanf-block-grant>

<sup>22</sup> Food Research and Action Center. (2013). *SNAP and Public Health: The Role of the Supplemental Nutrition Assistance Program in Improving the Health and Well-Being of Americans*. Retrieved from [http://frac.org/pdf/snap\\_and\\_public\\_health\\_2013.pdf](http://frac.org/pdf/snap_and_public_health_2013.pdf)

<sup>23</sup> Ibid

<sup>24</sup> United States Department of Agriculture, Food and Nutrition Service. (2015). *National School Lunch Program (NSLP)*. Retrieved from <http://www.fns.usda.gov/nslp/national-school-lunch-program-nslp>

## What the Data Tell Us

The poverty rates among the total (all-age) population and the population of young children vary little by geographical level. For the total population, 19 percent of people in the Pima South Region live in poverty, similar to Pima County (19%) and the state as a whole (18%) (see Figure 5). Although young children are consistently more likely to live in poverty than members of the total population, a slightly higher percentage of children in Pima South are living in poverty than their peers in Pima County and Arizona (31%, 30% and 28%, respectively). In addition to the families whose incomes fall below the federal poverty level, a substantial proportion of households in the region and county are considered low income (i.e., near but not below the federal poverty level [FPL]). About half of families with children aged four and under are living below 185 percent of the federal poverty level in the region (51%), Pima County (51%), and across the state (48%) (see Table 10). Based on the 2014 FPL guidelines,<sup>25</sup> this means that family income is less than \$3,677 a month for a family of four.

In Pima County, unemployment topped out at approximately nine percent in 2010, and the county has consistently had slightly lower unemployment than elsewhere in the state (see Figure 7). In both the county and the state, unemployment rates have fallen since 2010; by 2014, Pima County had a six percent unemployment rate. Patterns of parental employment are fairly similar across the geographical designations (see Table 11).

Over a third of Pima South residents are spending more than 30 percent of their income on housing. This is a similar but slightly lower percentage than elsewhere in the county and state (see Table 13). However, the foreclosure crisis hit the Pima South Region particularly hard. The foreclosure rate in the region (13.38 per 10,000 homes) was almost twice the rate elsewhere in the county and state (see Table 13).

The percentages of children aged 5 and under receiving Temporary Assistance for Needy Families (TANF) from 2012 to 2014 were low for the region, county, and state, although rates have been slightly lower in Pima South than elsewhere (see Table 14). Other safety net programs, such as SNAP and the school-based free or reduced-price lunch program, reached far more children. Over half of young children in the region, county, and state received SNAP benefits in the years 2012 through 2014 (see Table 15), and over half of students were eligible for free or reduced-price lunch in the county and state during those years (see Table 16). For both TANF and SNAP, the percentage of young children receiving these benefits decreased

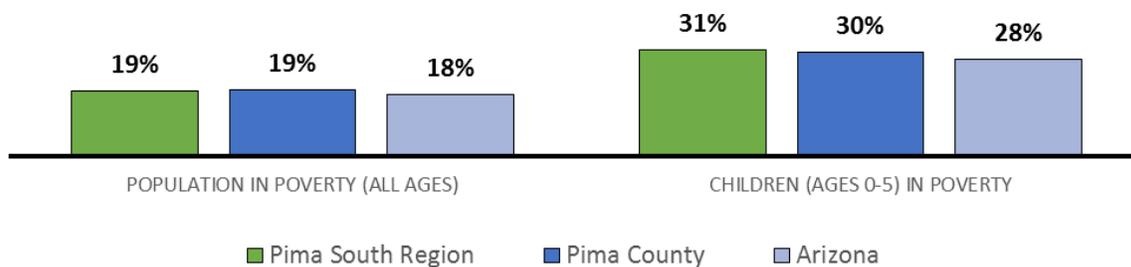
---

<sup>25</sup> For more information see <http://aspe.hhs.gov/2014-poverty-guidelines>

between 2012 and 2014, although this may be due to funding and eligibility changes rather than reflecting decreased need.

## Poverty and Income

**Figure 5. Percent of population in poverty, 2009-2013 five-year estimate**



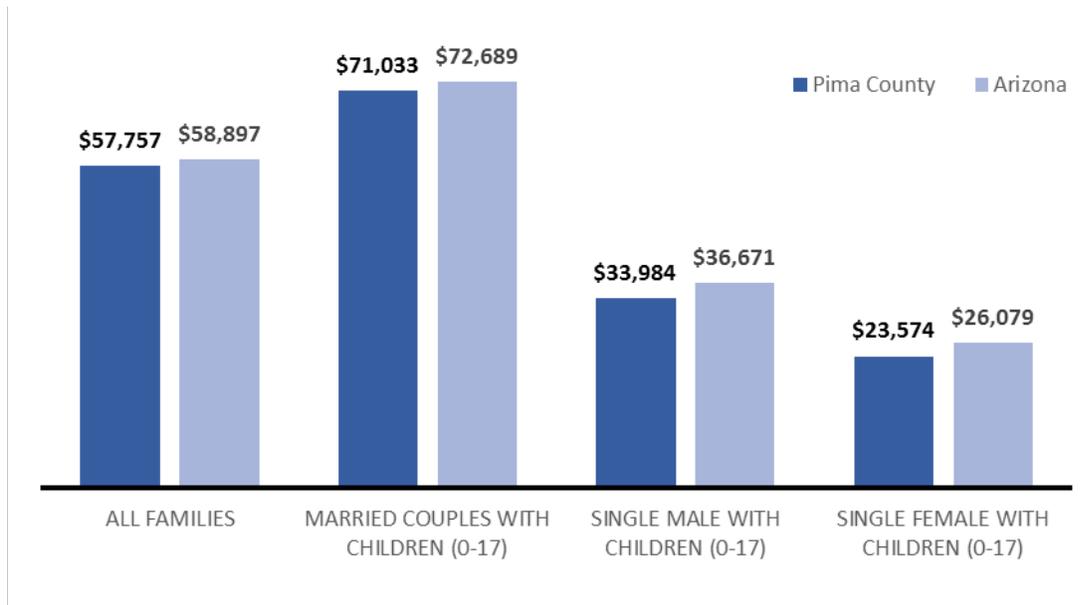
Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B17001.  
Retrieved from: <http://factfinder.census.gov>

**Table 10. Federal poverty levels for families with young children (ages 0-4), 2009-2013 five-year estimate**

	FAMILIES WITH CHILDREN 0-4	FAMILIES WITH CHILDREN 0-4			
		BELOW POVERTY	BELOW 130% POVERTY	BELOW 150% POVERTY	BELOW 185% POVERTY
Pima South Region	14,221	28%	36%	43%	51%
Pima County	41,863	28%	37%	43%	51%
Arizona	307,126	26%	35%	40%	48%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Tables 17010 and 17022.  
Retrieved from: <http://factfinder.census.gov>

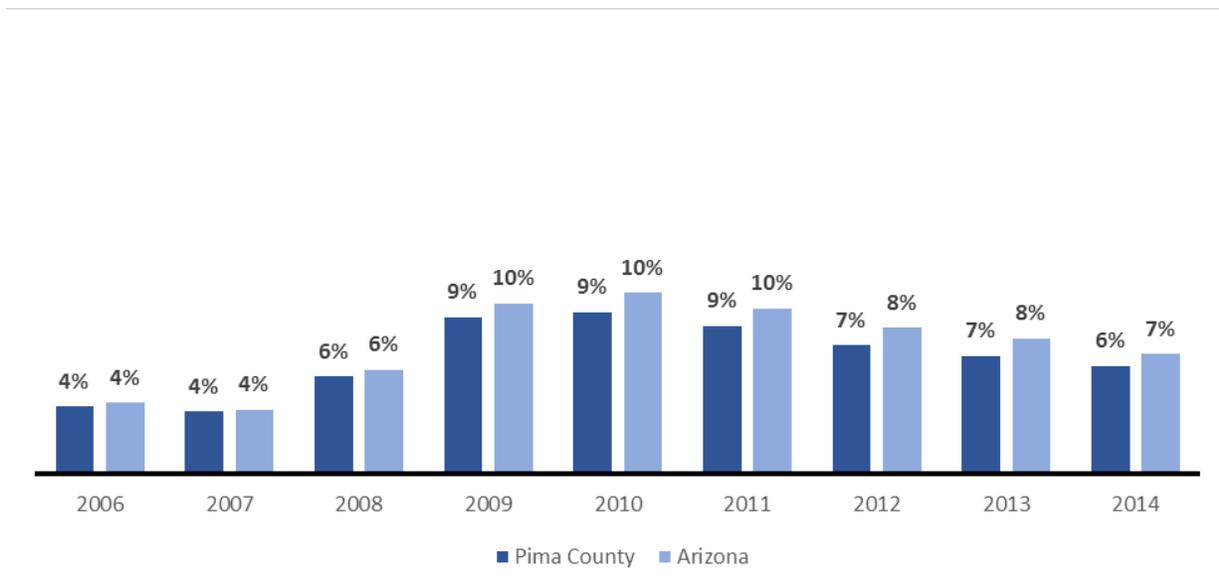
**Figure 6. Median annual family incomes, 2009-2013 five-year estimate**



Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B19126. Retrieved from: <http://factfinder.census.gov>

## Employment and Housing

**Figure 7. Average annual unemployment rates, 2006-2014**



Source: Arizona Labor Statistics (2015). Local Area Unemployment Statistics (LAUS). Retrieved from: <https://laborstats.az.gov/local-area-unemployment-statistics>

**Table 11. Parents of young children (ages 0-5) who are or are not in the labor force, 2009-2013 five-year estimate**

	ESTIMATED NUMBER OF CHILDREN (AGES 0-5) LIVING WITH ONE OR TWO PARENTS	CHILDREN (0-5) LIVING WITH TWO PARENTS			CHILDREN (0-5) LIVING WITH ONE PARENT	
		BOTH PARENTS IN LABOR FORCE	ONE PARENT IN LABOR FORCE	NEITHER PARENT IN LABOR FORCE	PARENT IN LABOR FORCE	PARENT NOT IN LABOR FORCE
Pima South Region	25,288	29%	30%	2%	29%	11%
Pima County	70,699	31%	27%	1%	32%	10%
Arizona	517,766	31%	29%	1%	29%	10%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B23008.

Retrieved from: <http://factfinder.census.gov>

Note: Persons who are unemployed but looking for work are considered to be "in the labor force."

**Table 12. Vacant and occupied housing units, 2009-2013 five-year estimate**

	TOTAL HOUSING UNITS	OCCUPIED HOUSING UNITS	VACANT HOUSING UNITS	
			(NON-SEASONAL)	(SEASONAL)
Pima South Region	108,632	85%	11%	5%
Pima County	442,960	87%	10%	4%
Arizona	2,859,768	83%	10%	7%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B25002, B25106.

Retrieved from: <http://factfinder.census.gov>

Note: Seasonal units are intended for use only in certain seasons or for weekends or other occasional use.

**Table 13. Occupied housing units, costs relative to income, and foreclosures, 2009-2013 five-year estimate**

	NUMBER OF OCCUPIED HOUSING UNITS	UNITS WHICH COST THE OWNER OR RENTER MORE THAN 30% OF THEIR INCOME		FORECLOSURE RATE (PER 10,000 HOUSING UNITS)
Pima South Region	92,097	31,352	34%	13.38
Pima County	384,041	140,206	37%	5.9
Arizona	2,370,289	847,315	36%	7.2

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B25002, B25106. RealtyTrac (2015). Real Estate Trend & Market Info. Retrieved from: <http://factfinder.census.gov>; <http://www.realtytrac.com/statsandtrends/az>

## Economic Supports

**Table 14. Children (ages 0-5) receiving Temporary Assistance to Needy Families (TANF), 2012-2014**

	CENSUS 2010 POPULATION (AGES 0-5)	CHILDREN (AGES 0-5) RECEIVING TANF			CHANGE FROM 2012 TO 2014
		2012	2013	2014	
Pima South Region	25,171	5%	4%	3%	-34%
Pima County	74,796	6%	5%	4%	-26%
Arizona	546,609	5%	5%	4%	-26%

Source: The Arizona Department of Economic Security (July 2015). [SNAP/TANF Dataset]. Unpublished data.

Note: The data reflect unduplicated counts of children served during each calendar year.

**Table 15. Children (ages 0-5) in the Supplemental Nutrition Assistance Program (SNAP), 2012-2014**

	CENSUS 2010 POPULATION (AGES 0-5)	CHILDREN (AGES 0-5) RECEIVING SNAP			CHANGE FROM 2012 TO 2014
		2012	2013	2014	
Pima South Region	25,171	57%	56%	53%	-6%
Pima County	74,796	56%	54%	52%	-7%
Arizona	546,609	54%	53%	51%	-7%

Source: The Arizona Department of Economic Security (July 2015). [SNAP/TANF Dataset]. Unpublished data.

Note: The data reflect unduplicated counts of children served during each calendar year.

**Table 16. Students eligible for free or reduced-price lunch, 2012-2014**

	STUDENTS ELIGIBLE FOR FREE OR REDUCED- PRICE LUNCH		
	2012	2013	2014
Pima County	58%	59%	60%
Arizona	57%	57%	58%

Source: The Arizona Department of Education (July 2015). [Education Dataset]. Unpublished data.

Note: Regional data were not available for this indicator.

## Educational Indicators

### Why it Matters

Characteristics of educational involvement and achievement in a region, such as school attendance, standardized tests scores, graduation rates, and the overall level of education of adults, all impact the developmental and economic resources available to young children and their families. Education, in and of itself, is an important factor in how able parents and caregivers are to provide for the children in their care. Parents who graduate from high school earn more and are less likely to rely on public assistance programs than those without high school degrees.<sup>26,27</sup> Higher levels of education are associated with better housing, neighborhood of residence, and working conditions, all of which are important for the health and well-being of children.<sup>28,29</sup>

Early school attendance and performance can set the stage for later achievement.

Absenteeism in kindergarten is already an indicator of the likelihood of higher rates of absences later in a student's school career, as well as lower achievement in reading and math.<sup>30</sup> By third grade, reading ability is strongly associated with high school completion. One in six third graders who do not read proficiently will not graduate from high school on time, and the rates are even higher (23%) for children who were both not reading proficiently in third grade and living in poverty for at least a year.<sup>31</sup> In recognition of the importance of assuring that children are reading by the third grade, legislators enacted the Arizona Revised Statute §15-701 (also known as the *Move on When Reading* law) which states that as of school year 2013-2014 a student shall not be promoted from the third grade if the student obtains a score on the statewide reading assessment "that demonstrates that the pupil's reading falls far below the

---

<sup>26</sup> Planty, M., Hussar, W., Snyder, T., Provasnik, S., Kena, G., Dinkes, R., KewalRamani, A., & Kemp, J. (2008). *The Condition of Education 2008* (NCES 2008-031). National Center for Education Statistics, Institute of Education Sciences, U.S. Department of Education, Washington, D.C. Retrieved from: <http://nces.ed.gov/pubs2008/2008031.pdf>

<sup>27</sup> Waldfogel, J., Garfinkel, I., & Kelly, B. (2007). Welfare and the costs of public assistance. In C.R. Belfield and H.M. Levin (Eds.). *The price we pay: Economic and social consequences for inadequate education*. Washington, DC: The Brookings Institution, 160-174.

<sup>28</sup> Annie E. Casey Foundation. (2013). *The First Eight Years. Giving kids a foundation for lifelong success*. Retrieved from <http://www.aecf.org/m/resourcedoc/AECF-TheFirstEightYearsKCpolicyreport-2013.pdf>

<sup>29</sup> Lynch, J., & Kaplan, G. (2000). Socioeconomic position (pp. 13-35). In *Social Epidemiology*. Berkman, L. F. & Kawachi, I. (Eds.). New York: Oxford University Press.

<sup>30</sup> Romero, M., & Lee, Y. (2007). *A National Portrait of Chronic Absenteeism in the Early Grades*. New York, NY: The National Center for Children in Poverty. Retrieved from [http://www.nccp.org/publications/pdf/text\\_771.pdf](http://www.nccp.org/publications/pdf/text_771.pdf)

<sup>31</sup> Hernandez, D. (2011). *Double jeopardy: How third-grade reading skills and poverty influence high school graduation*. The Annie E. Casey Foundation. Retrieved from <http://files.eric.ed.gov/fulltext/ED518818.pdf>.

third-grade level.” Exceptions exist for students identified with or being evaluated for learning disabilities, English language learners, and those with reading impairments.

From 2000-2014, the primary in-school performance of students in the public elementary schools in the state has been measured by Arizona’s Instrument to Measure Standards (AIMS).<sup>32</sup> AIMS scores were used to meet the requirement of *Move on When Reading*.

However, a new summative assessment system which reflects Arizona’s K-12 academic standards, Arizona’s Measurement of Educational Readiness to Inform Teaching (AzMERIT), was implemented in the 2014-2015 school year.<sup>33</sup> This assessment replaced the reading and mathematics portions of the AIMS test. Although it is not a graduation requirement, it will still be used to determine promotion from the third grade in accordance with Arizona Revised Statute §15-701.<sup>34</sup>

AIMS results are included in this report, but future reports will use AzMERIT scores as they become available.

In order for children to be prepared to succeed on tests such as the AIMS or AzMERIT, research shows that early reading experiences, opportunities to build vocabularies and literacy rich environments are the most effective ways to support the literacy development of young children.<sup>35</sup>

## What the Data Tell Us

Nearly one out of every five (18%) adults aged 25 and older in the Pima South Region did not complete high school (see Figure 8). Adults in the region are also less likely to have attained a bachelor’s or higher degree (21%) than adults elsewhere in Pima County (30%) and Arizona (27%). However, adults in the region, county, and state have similar rates of having had some college or professional training (34-35%). High school drop-out rates were slightly higher in Pima County (5%) than in the state of Arizona (3%) in recent years (see Table 17). In addition, four and five year graduation rates in 2013 in Pima County (70% and 76% respectively) were slightly lower than in the state (75% and 79%), and had decreased from highs in 2011 of 74 and 79 percent respectively.

---

<sup>32</sup> For more information on the AIMS test, see <http://arizonaindicators.org/education/aims>

<sup>33</sup> For more information on AzMERIT, see <http://www.azed.gov/assessment/azmerit/>

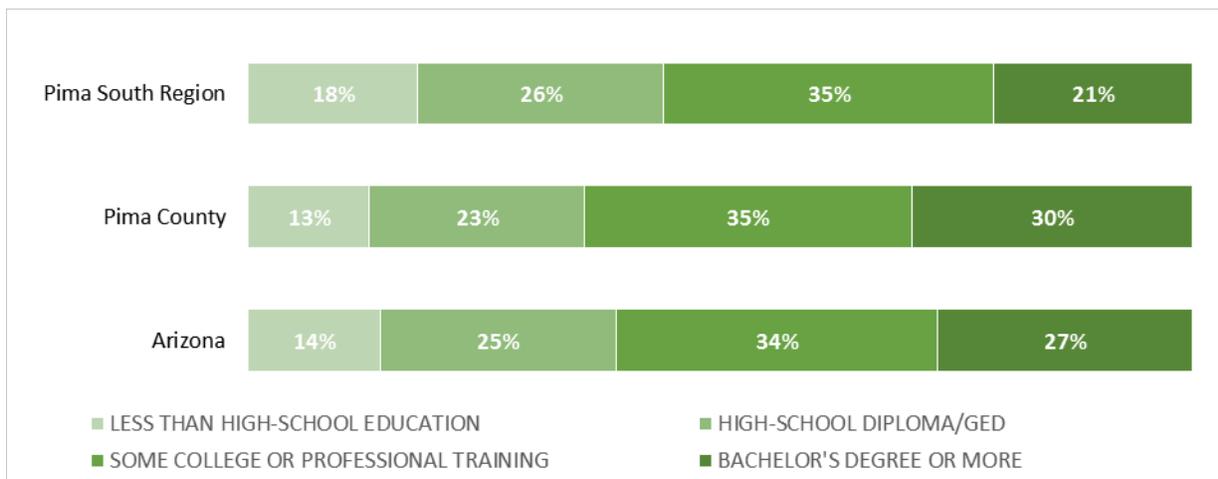
<sup>34</sup> For more information on Move on When Reading, see <http://www.azed.gov/mowr/>

<sup>35</sup> First Things First. (2012). *Read All About It: School Success Rooted in Early Language and Literacy*. Retrieved from [http://www.azftf.gov/WhoWeAre/Board/Documents/Policy\\_Brief\\_Q1-2012.pdf](http://www.azftf.gov/WhoWeAre/Board/Documents/Policy_Brief_Q1-2012.pdf)

Students “pass” Arizona’s Instrument to Measure Standards (AIMS) if they meet or exceed the standard. In Pima County, two-thirds (66%) of third grade students passed the AIMS Math test and over three-quarters (76%) passed the AIMS reading test. Eleven percent of third graders in the county scored “falls far below” in math, and 3 percent received this designation on the reading test. While the number of students falling far below the state standards on these tests is a cause for concern, students in the county were similar to students across the state (see Figure 9 and Figure 10).

### Educational Attainment of the Adult Population

**Figure 8. Level of education for the population ages 25 and older, 2009-2013 five-year estimate**



Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B15002

## Graduation and Drop-out Rates

**Table 17. Drop-out and graduation rates, 2012-2014**

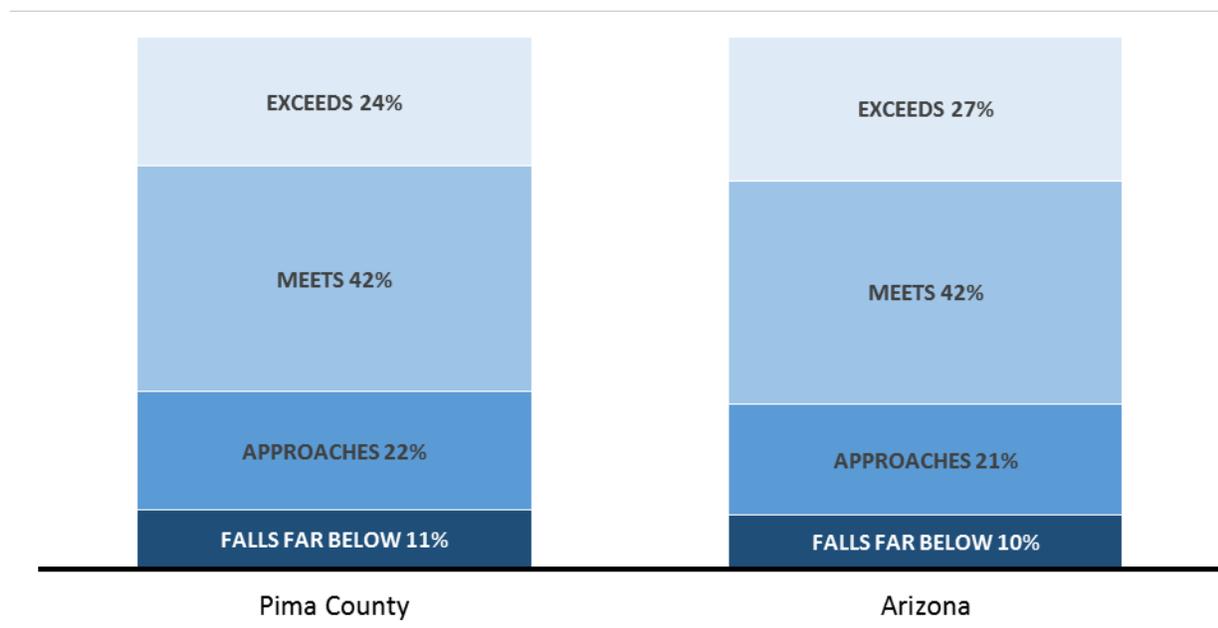
	DROPOUT RATE			FOUR-YEAR GRADUATION RATE			FIVE-YEAR GRADUATION RATE		
	FY 2012	FY 2013	FY 2014	2011 COHORT	2012 COHORT	2013 COHORT	2011 COHORT	2012 COHORT	2013 COHORT
Pima County	5%	4%	5%	74%	72%	70%	79%	76%	76%
Arizona	4%	4%	3%	78%	77%	75%	81%	80%	79%

Source: The Arizona Department of Education (July 2015)

Note: Regional data were not available for this indicator.

## Third-grade Test Scores

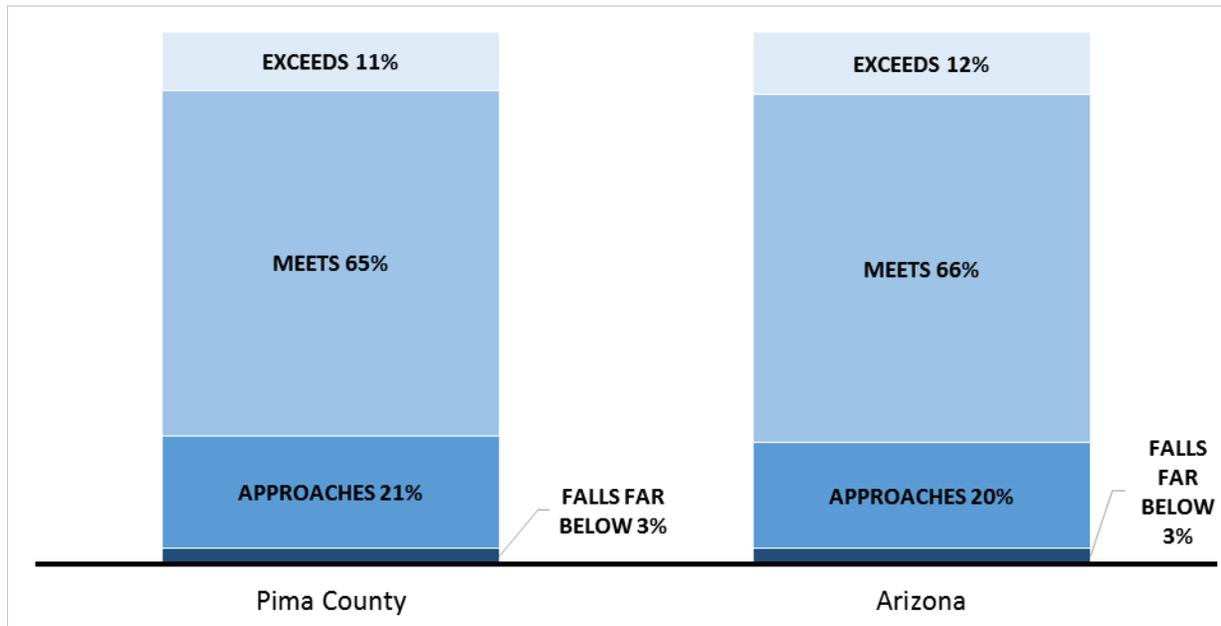
**Figure 9. Results of the 2014 third-grade AIMS Math Test**



Source: Arizona Department of Education, Research and Evaluation, "AIMS Assessment Results"

Retrieved from: [www.azed.gov/research-evaluation/aims-assessment-results](http://www.azed.gov/research-evaluation/aims-assessment-results)

**Figure 10. Results of the 2014 third-grade AIMS Reading test**



Source: Arizona Department of Education, Research and Evaluation, "AIMS Assessment Results"  
 Retrieved from: [www.azed.gov/research-evaluation/aims-assessment-results](http://www.azed.gov/research-evaluation/aims-assessment-results)

### Other Educational Indicators

**Table 18. Percent of students (Pre-K through 3rd grade) who were homeless, 2012-2014**

	PERCENT OF STUDENTS HOMELESS IN 2012	PERCENT OF STUDENTS HOMELESS IN 2013	PERCENT OF STUDENTS HOMELESS IN 2014
Pima County	2%	2%	2%
Arizona	2%	2%	2%

Source: The Arizona Department of Education (July 2015). [Education dataset]. Unpublished data.  
 Note: Regional data were not available for this indicator.

**Table 19. Attendance rates for first-, second-, and third-graders, 2014**

	FIRST-GRADE ENROLLMENT	FIRST-GRADE ATTENDANCE RATE	SECOND-GRADE ENROLLMENT	SECOND-GRADE ATTENDANCE RATE	THIRD-GRADE ENROLLMENT	THIRD-GRADE ATTENDANCE RATE
Pima County	10,654	95%	10,168	95%	9,909	95%
Arizona	79,826	95%	76,666	95%	75,029	96%

Source: The Arizona Department of Education (July 2015). [Education dataset]. Unpublished data.

Note: Regional data were not available for this indicator.

## Early Learning

### Why it Matters

Early childhood marks a time of peak plasticity in the brain, and early adversity can weaken the foundation upon which future learning will be built; in other words, positive developmental experiences in early life are crucial.<sup>36</sup> Research has shown that the experiences that children have from birth to five years of age influence future health and well-being, and that supporting children during this time has a great return on investment.<sup>37</sup> Investing in high-quality early childhood programs, particularly for disadvantaged children, provides substantial benefits to society through increased educational achievement and employment, reductions in crime, and better overall health of those children as they mature into adults.<sup>38,39</sup> Children whose education begins with high-quality preschool repeat grades less frequently, obtain higher scores on standardized tests, experience fewer behavior problems, and are more likely to graduate high school.<sup>40</sup>

The ability of families to access quality, affordable early care and education opportunities, however, can be limited. The annual cost of full-time center-based care for a young child in Arizona is only slightly less than a year of tuition and fees at a public college.<sup>41</sup> Although the Department of Health and Human Services recommends that parents spend no more than 10 percent of their family income on child care,<sup>42</sup> the cost of center-based care for a single infant, toddler, or 3-5 year old is an estimated 17, 15 and 11 percent, respectively, of an average Arizona family's income.<sup>43</sup>

---

<sup>36</sup> Center on the Developing Child at Harvard University (2010). *The Foundations of Lifelong Health Are Built in Early Childhood*. Retrieved from <http://developingchild.harvard.edu/wp-content/uploads/2015/05/Foundations-of-Lifelong-Health.pdf>

<sup>37</sup> Executive Office of the President of the United States. (2014). *The Economics of Early Childhood Investments*. Retrieved from [https://www.whitehouse.gov/sites/default/files/docs/early\\_childhood\\_report1.pdf](https://www.whitehouse.gov/sites/default/files/docs/early_childhood_report1.pdf)

<sup>38</sup> The Heckman Equation. (2013). *The Heckman Equation Brochure*. Retrieved from <http://heckmanequation.org/content/resource/heckman-equation-brochure-0>

<sup>39</sup> The Heckman Equation. (2013) *Research Summary: Abecedarian & Health*. Retrieved from <http://heckmanequation.org/content/resource/research-summary-abecedarian-health>

<sup>40</sup> Annie E. Casey Foundation. (2013). *The First Eight Years. Giving kids a foundation for lifelong success*. Retrieved from <http://www.aecf.org/m/resourcedoc/AECF-TheFirstEightYearsKCPolicyreport-2013.pdf>

<sup>41</sup> Child Care Aware® of America. (2014). *Parents and the High Cost of Child Care. 2014 Report*. Retrieved from [https://www.ncsl.org/documents/cyf/2014\\_Parents\\_and\\_the\\_High\\_Cost\\_of\\_Child\\_Care.pdf](https://www.ncsl.org/documents/cyf/2014_Parents_and_the_High_Cost_of_Child_Care.pdf)

<sup>42</sup> U.S. Department of Health and Human Services, Child Care Bureau (2008). *Child Care and Development Fund: Report of state and territory plans: FY 2008-2009*. Section 3.5.5 – Affordable co-payments, p. 89. Retrieved from <http://www.researchconnections.org/childcare/resources/14784/pdf>

<sup>43</sup> The cost of center-based care as a percentage of income is based on the Arizona median annual family income of \$58,900.

Child care subsidies can help families who otherwise would be unable to access early learning services.<sup>44</sup> However, the availability of this type of support is also limited. The number of children receiving Child Care and Development Fund (CCDF) subsidies in Arizona is low. In 2014, only 26,685 children aged birth to 5 (about 5% of Arizona's children in this age range) received CCDF vouchers. With half of young children in Arizona living below the federal poverty level, the number in need of these subsidies is likely much higher than those receiving them.

The availability of services for young children with special needs is an ongoing concern across the state, particularly in more geographically remote communities. The services available to families include early intervention screening and intervention services provided through the Arizona Department of Education AZ FIND (Child Find),<sup>45</sup> the Arizona Early Intervention Program (AzEIP)<sup>46</sup> and the Division of Developmental Disabilities (DDD).<sup>47</sup> These programs help identify and assist families with young children who may need additional support to meet their potential. Timely intervention can help young children with, or at risk for, developmental delays improve language, cognitive, and social/emotional development. It also reduces educational costs by decreasing the need for special education.<sup>48,49,50</sup>

---

<sup>44</sup> For more information on child care subsidies see <https://www.azdes.gov/child-care/>

<sup>45</sup> For more information on AZ FIND see <http://www.azed.gov/special-education/az-find/>

<sup>46</sup> For more information on AzEIP see <https://www.azdes.gov/azeip/>

<sup>47</sup> For more information on DDD see [https://www.azdes.gov/developmental\\_disabilities/](https://www.azdes.gov/developmental_disabilities/)

<sup>48</sup> The National Early Childhood Technical Assistance Center. (2011). *The Importance of Early Intervention for Infants and Toddlers with Disabilities and their Families*. Retrieved from <http://www.nectac.org/~pdfs/pubs/importanceofearlyintervention.pdf>

<sup>49</sup> Hebbeler, K, Spiker, D, Bailey, D, Scarborough, A, Mallik, S, Simeonsson, R, Singer, M & Nelson, L. (2007). *Early intervention for infants and toddlers with disabilities and their families: Participants, services and outcomes. Final Report of the National Early Intervention Longitudinal Study (NEILS)*. Retrieved from [http://www.sri.com/sites/default/files/publications/neils\\_finalreport\\_200702.pdf](http://www.sri.com/sites/default/files/publications/neils_finalreport_200702.pdf)

<sup>50</sup> NECTAC Clearinghouse on Early Intervention and Early Childhood Special Education. (2005). *The long term economic benefits of high quality early childhood intervention programs*. Retrieved from <http://ectacenter.org/~pdfs/pubs/econbene.pdf>

## What the Data Tell Us

In 2014 there were 252 licensed child care providers in the Pima South Region, licensed to serve 7,625 children (see Table 20). Most of these providers were classified as family child care providers (n=135), followed by child care centers (n=67) and group homes (n=48). The cost of care in Pima County varies by the type of care and the age of the child receiving care; the median cost in the county relative to the cost of like care across the state differs depending on the situation (see Table 21). For example, parents in Pima County tend to pay less for licensed child care centers (e.g., \$39 per day for infant care vs \$42) and more for approved family homes (e.g., \$25 per day for infant care vs \$22) compared to average rates in Arizona as whole.

According to data from the American Community Survey, less than one-third (29%) of children aged 3 and 4 were enrolled in nursery school, preschool, or kindergarten in the Pima South Region (see Table 23). This is a slightly lower percentage than in Pima County overall (37%) and in Arizona (35%).

In the Pima South Region, Pima County, and across Arizona, most referrals made to the Arizona Early Intervention Program (AzEIP) in FY 2014 were for children aged 25 to 35 months (region n=287) (see Table 24). Similarly, the pattern of children being *served* by AzEIP in 2014 was similar for the region, county, and the state with more 25 to 35 month olds being served than 13 to 24 month olds and those under 1 year combined. From 2013 to 2014, the number of Division of Developmental Disabilities (DDD) service visits for children aged 0-2 decreased across the region, county, and state, whereas for children aged 3-5, DDD service visits increased in the region and county, though not in the state (see Table 25 and Table 26).

## Early Care and Education

**Table 20. Child care providers: number of providers and total licensed capacity, 2014**

	CHILD CARE CENTERS		GROUP HOMES		FAMILY CHILD CARE		NANNY OR INDIVIDUAL		ALL TYPES OF CARE	
	NUM	LICENSED CAPACITY	NUM	LICENSED CAPACITY	NUM	LICENSED CAPACITY	NUM	LICENSED CAPACITY	NUM	LICENSED CAPACITY
Pima South Region	67	6604	48	480	135	533	2	8	252	7625
Pima County	358	37039	99	986	294	1161	5	17	756	39203
Arizona	2,020	219,482	272	2,683	833	3,312	54	211	3,179	225,688

Source: The Arizona Department of Economic Security (2015). [Child care dataset]. Unpublished data.

Note: "Licensed Capacity" refers to the number of children (of all ages) who may be served, according to the provider's license.

**Table 21. Median daily charge for full-time child care, 2014**

	MEDIAN DAILY CHARGE FOR FULL-TIME CHILD CARE IN LICENSED CHILD CARE CENTERS			MEDIAN DAILY CHARGE FOR FULL-TIME CHILD CARE IN APPROVED FAMILY HOMES			MEDIAN DAILY CHARGE FOR FULL-TIME CHILD CARE IN CERTIFIED GROUP HOMES		
	INFANT	1 OR 2 YEAR OLD	3 TO 5 YEAR OLD	INFANT	1 OR 2 YEAR OLD	3 TO 5 YEAR OLD	INFANT	1 OR 2 YEAR OLD	3 TO 5 YEAR OLD
Pima County	\$39	\$33.50	\$30	\$25	\$25	\$25	\$25	\$25	\$25
Arizona	\$42	\$38	\$33	\$22	\$20	\$20	\$27	\$25	\$25

Source: Arizona Department of Economic Security (2015). Child Care Market Rate Survey. Received by request.

Note: Regional data were not available for this indicator.

**Table 22. Cost of child care in a licensed center as a percentage of median family income, 2009-2013 five-year estimate**

	MEDIAN ANNUAL FAMILY INCOME	CHARGE FOR FULL-TIME CHILDCARE IN A LICENSED CHILDCARE CENTER AS A PERCENTAGE OF MEDIAN INCOME		
		INFANT	1 OR 2 YEAR OLD	3 TO 5 YEAR OLD
Pima County	\$57,800	16%	14%	12%
Arizona	\$58,900	17%	15%	11%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B19126. Retrieved from <http://factfinder.census.gov>; Arizona Department of Economic Security (2015). [Child care market rate survey data]. Data received from First Things First State Agency Data Request.

Note: Regional data were not available for this indicator.

**Table 23. Estimated number of children (ages 3 and 4) enrolled in nursery school, preschool, or kindergarten, 2009-2013 five-year estimate**

	ESTIMATED POPULATION (AGES 3-4)		ENROLLED IN SCHOOL (AGES 3-4)	
	Population	Enrollment	Population	Enrollment
Pima South Region	9,123	2,616	29%	
Pima County	24,905	9,163	37%	
Arizona	185,310	65,591	35%	

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B14003.

Retrieved from: <http://factfinder.census.gov>

## Families with Children Who Have Special Needs

**Table 24. AzEIP referrals and children served, 2014**

	NUMBER OF AZEIP REFERRALS DURING FISCAL YEAR 2014			NUMBER OF CHILDREN BEING SERVED BY AZEIP ON OCTOBER 1, 2014		
	LESS THAN 1 YEAR OLD	13 TO 24 MONTHS OLD	25 TO 35 MONTHS OLD	LESS THAN 1 YEAR OLD	13 TO 24 MONTHS OLD	25 TO 35 MONTHS OLD
Pima South Region	108	189	287	32	73	117
Pima County	345	556	848	100	199	369
Arizona	2,651	3,669	5,421	746	1,659	2,843

Source: Arizona Department of Economic Security (July 2015). [Special needs dataset]. Unpublished data.

**Table 25. Division of Developmental Disabilities (DDD) services to children (ages 0-2), 2013-2014**

	CHILDREN (AGES 0-2) REFERRED TO DDD		CHILDREN (AGES 0-2) SCREENED BY DDD		CHILDREN (AGES 0-2) SERVED BY DDD		NUMBER OF DDD SERVICE VISITS TO CHILDREN (AGES 0-2)	
	FY 2013	FY 2014	FY 2013	FY 2014	FY 2013	FY 2014	FY 2013	FY 2014
Pima South Region	104	115	N/A	N/A	122	112	7,009	4,259
Pima County	290	338	33	N/A	340	327	16,428	13,697
Arizona	2,186	2,479	314	216	2,693	2,341	158,496	130,486

Source: Arizona Department of Economic Security (July 2015). [Special needs dataset]. Unpublished data.

Note: Entries of "N/A" indicate numbers which cannot be reported because of data suppression or are otherwise not available.

**Table 26. Division of Developmental Disabilities (DDD) services to children (ages 3-5), 2013-2014**

	CHILDREN (AGES 3-5) REFERRED TO DDD		CHILDREN (AGES 3-5) SCREENED BY DDD		CHILDREN (AGES 3-5) SERVED BY DDD		NUMBER OF DDD SERVICE VISITS TO CHILDREN (AGES 3-5)	
	FY 2013	FY 2014	FY 2013	FY 2014	FY 2013	FY 2014	FY 2013	FY 2014
Pima South Region	64	92	28	27	88	96	9,340	12,063
Pima County	196	237	93	83	267	256	27,830	28,344
Arizona	1,401	1,804	731	727	2,600	2,533	374,440	367,590

Source: Arizona Department of Economic Security (July 2015). [Special needs dataset]. Unpublished data.

## Child Health

### Why it Matters

The Institute of Medicine defines children's health as the extent to which children are able or enabled to develop and realize their potential, satisfy their needs, and develop the capacities that allow them to successfully interact with their biological, physical, and social environments.<sup>51</sup> Health therefore encompasses not only physical health, but also mental, intellectual, social, and emotional well-being. Children's health can be influenced by their mother's health and the environment into which they are born and raised.<sup>52,53</sup> The health of a child in utero, at birth, and in early life can impact many aspects of a child's development and later life. Factors such as a mother's prenatal care, access to health care and health insurance, and receipt of preventive care such as immunizations and oral health care all influence not only a child's current health, but long-term development and success as well.<sup>54,55,56</sup> In addition, nonfatal unintentional injuries substantially impact the well-being of children,<sup>57</sup> and injuries are the leading cause of death in children in the United States.<sup>58</sup>

Healthy People is a science-based government initiative which provides 10-year national objectives for improving the health of Americans. Healthy People 2020 targets are developed with the use of current health data, baseline measures, and areas for specific

---

<sup>51</sup> National Research Council and Institute of Medicine. (2004). *Children's Health, the Nation's Wealth: Assessing and Improving Child Health*. Washington, DC: National Academies Press. Retrieved from <http://www.ncbi.nlm.nih.gov/books/NBK92198/#ch2.s3>

<sup>52</sup> The Future of Children. (2015). *Policies to Promote Child Health*, (25)1. Retrieved from <http://www.princeton.edu/futureofchildren/publications/docs/FOC-spring-2015.pdf>

<sup>53</sup> Center on the Developing Child at Harvard University (2010). *The Foundations of Lifelong Health Are Built in Early Childhood*. Retrieved from <http://developingchild.harvard.edu/wp-content/uploads/2015/05/Foundations-of-Lifelong-Health.pdf>

<sup>54</sup> Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services. *Prenatal services*. Retrieved from <http://mchb.hrsa.gov/programs/womeninfants/prenatal.html>

<sup>55</sup> Patrick, D. L., Lee, R. S., Nucci, M., Grembowski, D., Jolles, C. Z., & Milgrom, P. (2006). Reducing oral health disparities: A focus on social and cultural determinants. *BMC Oral Health*, 6(Suppl 1), S4. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2147600/>

<sup>56</sup> Council on Children With Disabilities, Section on Developmental Behavioral Pediatrics, Bright Futures Steering Committee, and Medical Home Initiatives for Children With Special Needs Project Advisory Committee. (2006). Identifying infants and young children with developmental disorders in the medical home: An algorithm for developmental surveillance and screening. *Pediatrics*, 118s(1), 405-420. Retrieved from <http://pediatrics.aappublications.org/content/118/1/405.full>

<sup>57</sup> Danesco, E.R., Miller, T.R., & Spicer, R. S. (2000). Incidence and costs of 1987-1994 childhood injuries: Demographic breakdowns. *Pediatrics*, 105(2) E27. Retrieved from <http://pediatrics.aappublications.org/content/105/2/e27.long>

<sup>58</sup> Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. (2013). *10 Leading Causes of Death by Age Group, United States-2013*. Retrieved from: [http://www.cdc.gov/injury/images/lc-charts/leading\\_causes\\_of\\_death\\_by\\_age\\_group\\_2013-a.gif](http://www.cdc.gov/injury/images/lc-charts/leading_causes_of_death_by_age_group_2013-a.gif)

improvement. Understanding where Arizona mothers and children fall in relation to these national benchmarks can help highlight areas of strength in relation to young children's health and those in need of improvement in the state. The Arizona Department of Health Services monitors state level progress towards a number of maternal, infant and child health objectives for which data are available at the regional level, including increasing the proportion of pregnant women who receive prenatal care in the first trimester; reducing low birth weight; reducing preterm births; and increasing abstinence from cigarette smoking among pregnant women.<sup>59</sup> Although not a target of a Healthy People 2020 objective, high-birth weight, or macrosomia, is also associated with health risks for both the mother and infant during birth. These children are also at increased risk for obesity and metabolic syndrome (which is linked to an increase risk of heart disease, stroke, and diabetes).<sup>60</sup>

The ability to obtain health care is critical for supporting the health of young children. In the early years of a child's life, well-baby and well-child visits allow clinicians to offer developmentally appropriate information and guidance to parents and provide a chance for health professionals to assess the child's development and administer preventative care measures like vaccines and developmental screenings. Without health insurance, each visit can be prohibitively expensive and may be skipped.<sup>61</sup>

## What the Data Tell Us

Most characteristics of mothers who gave birth in 2013 were similar for the Pima South Region, Pima County, and the state of Arizona (see Table 27). However, prenatal care in the region was less adequate than in the state overall. For example, eight percent of women giving birth in the Pima South Region and Pima County had had fewer than five prenatal visits, which was higher than the proportion across the state (5%). Similarly, 27 percent of women giving birth in the region and 26 percent in Pima County had no prenatal care in the first trimester compared to 19 percent across the state as a whole; this means that the region is currently not meeting the Healthy People 2020 target of no more than 22.1 percent of women lacking first-trimester care (see Figure 11).

---

<sup>59</sup> Arizona Department of Health Services. (2013). *Arizona Health Status and Vital Statistics 2013 Annual Report. Table 6A: Monitoring Progress Toward Arizona and Selected Healthy People 2020 Objectives: Statewide Trends* Retrieved from: [http://www.azdhs.gov/plan/report/ahs/ahs2013/pdf/6a1\\_10.pdf](http://www.azdhs.gov/plan/report/ahs/ahs2013/pdf/6a1_10.pdf)

<sup>60</sup> Mayo Clinic Staff. (2015). *Fetal macrosomia*. Retrieved from <http://www.mayoclinic.org/diseases-conditions/fetal-macrosomia/basics/complications/con-20035423>

<sup>61</sup> Yeung, LF, Coates, RJ, Seeff, L, Monroe, JA, Lu, MC, & Boyle, CA. (2014). Conclusions and future directions for periodic reporting on the use of selected clinical preventive services to improve the health of infants, children, and adolescents—United States. *Morbidity and Mortality Weekly Report, 2014, 63(Suppl-2)*, 99-107. Retrieved from <http://www.cdc.gov/mmwr/pdf/other/su6302.pdf>.

Across the region, county, and state, infants born in 2013 were also very similar in terms of rates of low and high birth weight, premature birth, and the need for neonatal intensive care (see Table 28). Six percent of babies in Pima South had low birth weights (at or below 2.5 kilograms) and 9 percent were born premature (before 37 weeks gestation). The Pima South Region is meeting Healthy People 2020 targets for both these indicators (see Figure 12).

Unintentional injuries for children under age six in the region, county, and state declined slightly between 2012 and 2014, in terms of both non-fatal inpatient hospitalizations and emergency department visits (see Table 29).

A key factor in health care is health insurance, and eight percent of young children in the Pima South Region were uninsured (8%); this was a slightly lower percentage than in the county (9%) and state (10%) (see Figure 15). Across the region, county, and state, young children were less likely to be uninsured than members of the total (all-age) population. In the region, members of the total population were twice as likely (16%) as young children to be uninsured.

Almost 100 percent of children in child care in the Pima South Region had been immunized against seven important diseases (see Table 31). The immunization rates in the region were slightly higher than rates elsewhere in the county and state. The Healthy People 2020 target for vaccination coverage for children ages 19-35 months for the DTAP, polio, and MMR vaccines is 90 percent,<sup>62</sup> suggesting that the region is meeting this goal. However, given that state regulations require children enrolled in child care to be up to date on immunizations, it is possible that immunization rates for children in child care are higher than immunization rates for children not in child care.<sup>63</sup> If that is the case, the rates for the entire population of children in these areas may be lower than the Healthy People 2020 goals. Children in kindergarten were vaccinated at similar rates to children in child care in the region (see Table 32). For both age levels, the Pima South Region had lower rates of religious and personal belief exemptions from immunizations than in the county or across the state.

---

<sup>62</sup> U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. (2015). *Immunization and Infectious Diseases*. Washington, DC. Retrieved from: <https://www.healthypeople.gov/2020/topics-objectives/topic/immunization-and-infectious-diseases/objectives>.

<sup>63</sup> For example, the National Immunization Survey (NIS) monitors vaccination coverage among U.S. children aged 19–35 months, and estimates the Arizona statewide rate for DTAP (Diphtheria, Tetanus, Pertussis, 4 or more doses) to be about 81 percent and the statewide rate for MMR (Measles, Mumps and Rubella, 1 or more doses) to be about 84 percent. Source: Hill, H., Elam-Evans, L., Yankey, D., Singleton, J., Kolasa, M. (2015). National, state, and selected local area vaccination coverage among children aged 19–35 months—United States. *Morbidity and Mortality Weekly*, 2014, 64(33), 889-896. Retrieved from <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6433a1.htm>

## Mothers Giving Birth

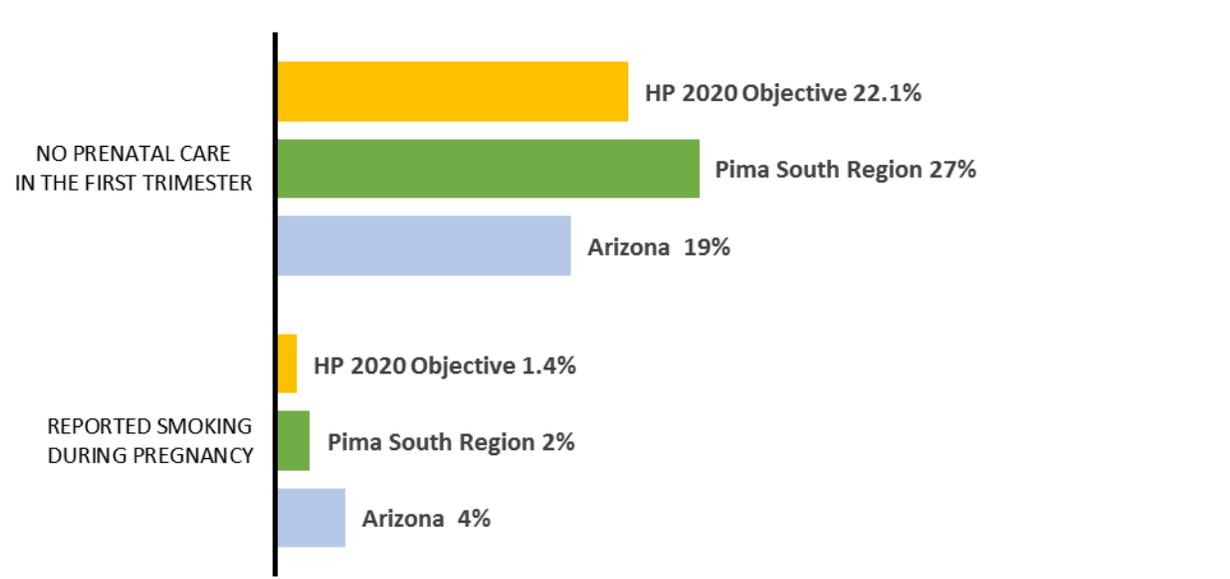
**Table 27. Selected characteristics of mothers giving birth, 2013**

	TOTAL NUMBER OF BIRTHS TO ARIZONA- RESIDENT MOTHERS IN 2013	HAD FEWER THAN 5 PRENATAL VISITS	HAD NO PRENATAL CARE IN FIRST TRIMESTER	MOTHER REPORTED SMOKING DURING PREG- NANCY	MOTHER REPORTED DRINKING DURING PREG- NANCY	MOTHER HAD LESS THAN A HIGH SCHOOL- EDU- CATION	MOTHERS YOUNGER THAN 20 YEARS OLD	MOTHERS YOUNGER THAN 18 YEARS OLD	BIRTH WAS PAID FOR BY AHCCCS OR IHS (PUBLIC PAYOR)
Pima South Region	3,825	8%	27%	2%	0%	18%	9%	N/A	56%
Pima County	11,965	8%	26%	4%	0%	16%	8%	2%	54%
Arizona	84,963	5%	19%	4%	0%	18%	9%	2%	55%

Source: Arizona Department of Health Services (July 2015). [Vital statistics dataset]. Unpublished data.

Note: Entries of "N/A" indicate percentages which cannot be reported because of data suppression, or are otherwise not available.

**Figure 11. Healthy People 2020 objectives for mothers, compared to 2013 region and state data**



Source: Arizona Department of Health Services (July 2015). [Vital statistics dataset]. Unpublished data.

Healthy People 2020 objectives from ADHS, "Arizona Health Status and Vital Statistics 2013 Annual Report," Table 6A.

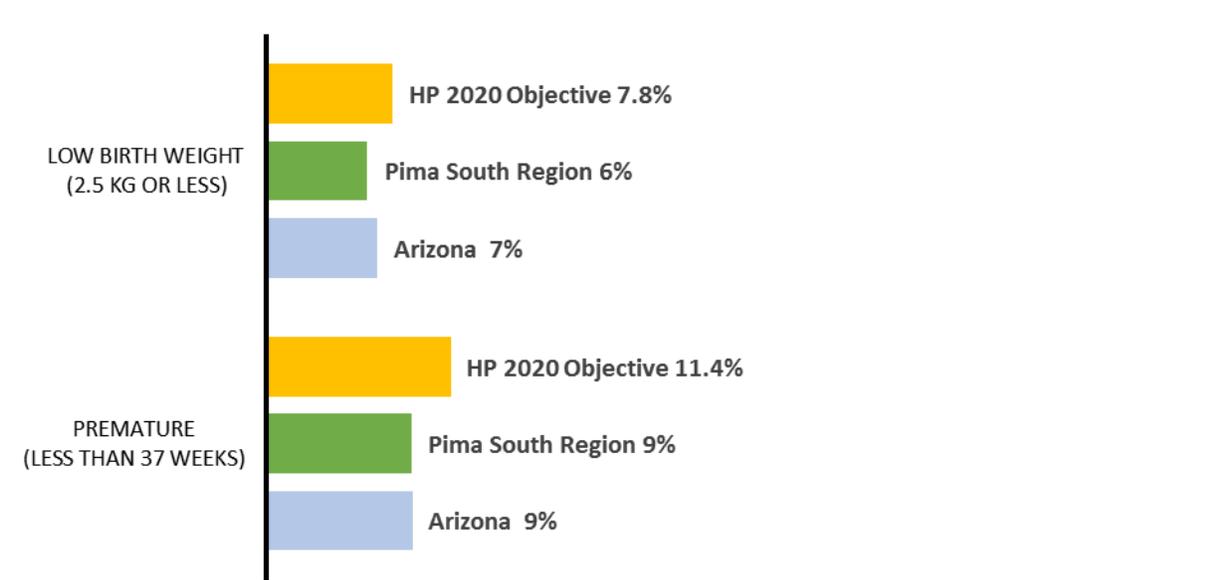
## Infant Health

**Table 28. Selected characteristics of babies born, 2013**

	TOTAL NUMBER OF BIRTHS TO ARIZONA-RESIDENT MOTHERS IN 2013	BABY HAD LOW BIRTH WEIGHT (2.5 kg OR LESS)	BABY HAD HIGH BIRTH WEIGHT (4 kg OR MORE)	BABY WAS PREMATURE (LESS THAN 37 WEEKS)	BABY WAS IN NEONATAL INTENSIVE CARE
Pima South Region	3,825	6%	7%	9%	5%
Pima County	11,965	7%	7%	9%	6%
Arizona	84,963	7%	8%	9%	5%

Source: Arizona Department of Health Services (July 2015). [Vital statistics dataset]. Unpublished data.

**Figure 12. Healthy People 2020 objectives for babies, compared to 2013 region and state data**



Source: Arizona Department of Health Services (July 2015). [Vital statistics dataset]. Unpublished data. Healthy People 2020 objectives from ADHS, "Arizona Health Status and Vital Statistics 2013 Annual Report," Table 6A.

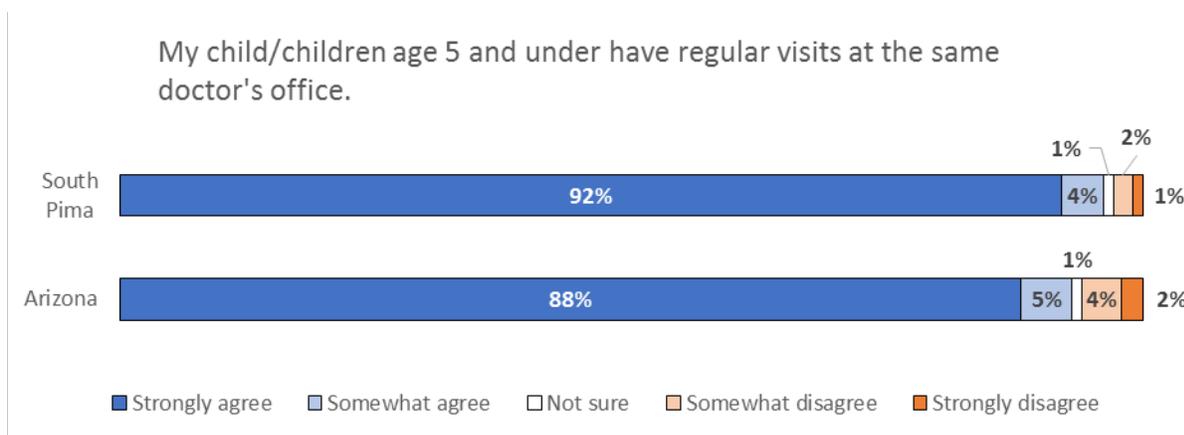
**Table 29. Unintentional injuries to children (ages 0-5), 2012-2014**

	NON-FATAL INPATIENT HOSPITALIZATIONS			NON-FATAL EMERGENCY DEPARTMENT VISITS		
	2012	2013	2014	2012	2013	2014
Pima County	174	149	134	6,474	6,275	6,155
Arizona	1,306	1,049	901	49,453	46,407	46,033

Source: Arizona Department of Health Services (June 2015). [Injury report]. Received by request.

Note: Regional data were not available for this indicator.

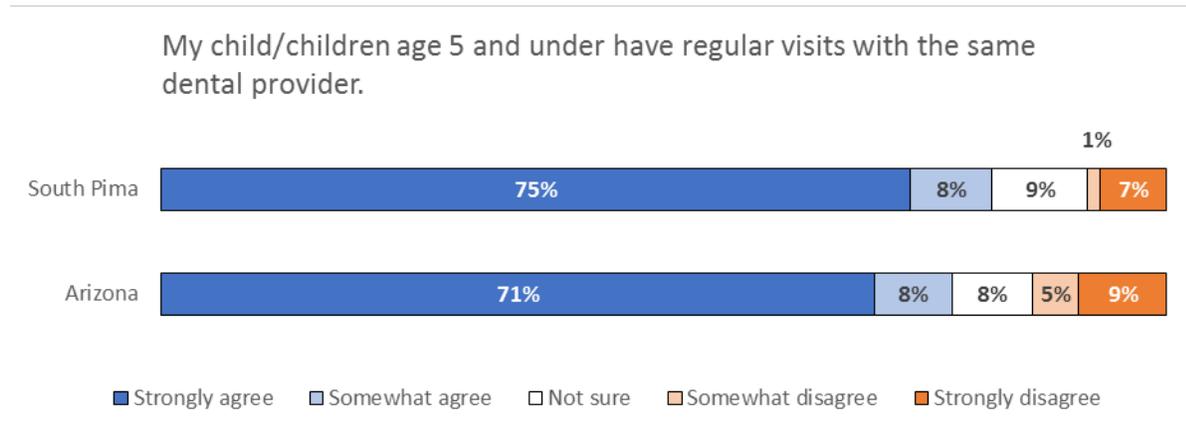
**Figure 13. Regular visits at the same doctor's office (Family and Community Survey, 2012)**



Source: First Things First (2014). [2012 Family and Community Survey data]. Unpublished data.

Note: These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report

**Figure 14. Regular visits with the same dental provider (Family and Community Survey, 2012)**

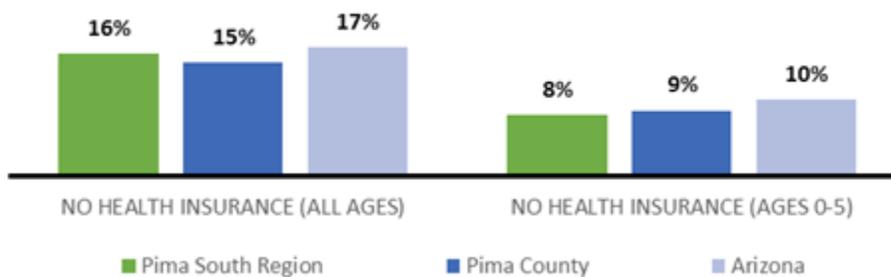


Source: First Things First (2014). [2012 Family and Community Survey data]. Unpublished data.

Note: These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

## Health Insurance

**Figure 15. Estimated percent of population without health insurance, 2009-2013 five-year estimate**



Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B27001.

Retrieved from: <http://factfinder.census.gov>

**Table 30. Number of children (all ages) enrolled in KidsCare, 2005-2014**

	JAN 2005	JAN 2006	JAN 2007	JAN 2008	JAN 2009	JAN 2010	JAN 2011	JAN 2012	JAN 2013	JAN 2014
Pima County	7,376	7,738	7,716	8,214	7,847	6,320	3,256	1,767	4,551	5,483
Arizona	48,075	55,996	58,612	63,527	61,198	45,809	22,943	12,837	34,127	42,686

Source: Arizona Health Care Cost Containment System (AHCCCS), "KidsCare Population Reports"

Note: Regional data were not available for this indicator.

## Immunizations

**Table 31. Immunizations for children in child care, school year 2014-2015**

	NUMBER OF STUDENTS	DTAP (DIPHTHERIA, TETANUS, PERTUSSIS), 4 OR MORE DOSES	POLIO, 3 OR MORE DOSES	MMR (MEASLES, MUMPS, RUBELLA), 1 OR MORE DOSES	RELIGIOUS BELIEF EXEMPTIONS	MEDICAL EXEMPTIONS
Pima South Region	2,151	98%	98%	99%	1.6%	0.2%
Pima County	13,295	97%	98%	98%	2.5%	0.3%
Arizona	84,778	93%	95%	96%	3.6%	0.5%

Sources: Arizona Department of Health Services (2015). [Regional immunization dataset]. Unpublished data. Arizona Department of Health Services (2015). Arizona childcare immunization coverage. Retrieved from: <http://azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage>

**Table 32. Immunizations for children in kindergarten, school year 2014-2015**

	NUMBER OF STUDENTS	DTAP (DIPHTHERIA, TETANUS, PERTUSSIS), 4 OR MORE DOSES	POLIO, 3 OR MORE DOSES	MMR (MEASLES, MUMPS, RUBELLA), 1 OR MORE DOSES	PERSONAL BELIEFS EXEMPTION	MEDICAL EXEMPTIONS
Pima South Region	3,953	97%	98%	98%	1.1%	0.2%
Pima County	11,704	96%	97%	97%	2.8%	0.4%
Arizona	84,651	94%	95%	94%	4.6%	0.3%

Sources: Arizona Department of Health Services (2015). [Regional immunization dataset]. Unpublished data. Arizona Department of Health Services (2015). Arizona kindergarten immunization coverage. Retrieved from: <http://azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage>

## Family Support and Literacy

### Why it Matters

Parents and families have a crucial role in providing nurturing and stable relationships for optimal brain development during their child's first years.<sup>64,65,66</sup> When children experience nurturing, responsive caregiving, they face better life prospects across a number of social, physical, academic and economic outcomes.<sup>67,68</sup> Consequently, healthy development depends on positive relationships between children and their caregivers from an early age.<sup>69</sup> For parents of young children, reading aloud, singings songs, practicing nursery rhymes, and engaging in conversation primes children to reach their full potential. Such interactions not only support literacy skills, but also offer exposure to a range of ideas, including recognizing and naming emotions, an important socio-emotional skill. Parents and family are children's first teachers; the most rapid expansion in vocabulary happens between ages one and three.<sup>70</sup> In fact, literacy promotion is so central to a child's development that the American Academy of Pediatrics has recently focused on it as a key issue in primary pediatric care, aiming to make parents more aware of their important role in literacy.<sup>71</sup>

Data on the amount and quality of the interaction parents typically have with their children can be useful to inform programs and policies to encourage positive engagement. Communities may employ many resources to support families in engaging with their children. Examples of these opportunities include: home visitation programs; "stay and play" programs featuring

---

<sup>64</sup> Evans, G. W., & Kim, P. (2013). Childhood poverty, chronic stress, self-regulation, and coping. *Child Development Perspectives*, 7(1), 43-48. Retrieved from <http://onlinelibrary.wiley.com/doi/10.1111/cdep.12013/abstract>

<sup>65</sup> Shonkoff, J. P., & Fisher, P. A. (2013). Rethinking evidence-based practice and two-generation programs to create the future of early childhood policy. *Development and Psychopathology*, 25, 1635- 1653. Retrieved from [http://journals.cambridge.org/download.php?file=%2FDPP%2FDPP25\\_4pt2%2FS0954579413000813a.pdf&code=aeb62de3e0ea8214329e7a33e0a9df0e](http://journals.cambridge.org/download.php?file=%2FDPP%2FDPP25_4pt2%2FS0954579413000813a.pdf&code=aeb62de3e0ea8214329e7a33e0a9df0e)

<sup>66</sup> Shonkoff, J. P. & Phillips, D. A. (2000). *From Neurons to Neighborhoods: The Science of Early Childhood Development*. Washington, D.C.: National Academy Press. Retrieved from <http://www.nap.edu/read/9824/chapter/1>

<sup>67</sup> Magnuson, K. & Duncan, G. (2013). Parents in poverty (95-121) In Bornstein, M. *Handbook of Parenting: Biology and Ecology of Parenting Vol. 4: Social Conditions and Applied Parenting*. New Jersey: Lawrence Erlbaum.

<sup>68</sup> Center on the Developing Child at Harvard University. (2010). *The Foundations of Lifelong Health Are Built in Early Childhood*. Retrieved from <http://www.developingchild.harvard.edu>

<sup>69</sup> National Scientific Council on the Developing Child. (n.d.). Category: Working Papers. Retrieved from <http://developingchild.harvard.edu/resourcecategory/working-papers/>

<sup>70</sup> Read On Arizona. (n.d.). *As a parent what can I do at home to support early literacy?* Retrieved from <http://readonarizona.org/about-us/faq/>

<sup>71</sup> American Academy of Pediatrics. (n.d.). *Pediatric Professional Resource: Evidence Supporting Early Literacy and Early Learning*. Retrieved from [https://www.aap.org/en-us/Documents/booksbuildconnections\\_evidencesupportingearlyliteracyandearlylearning.pdf](https://www.aap.org/en-us/Documents/booksbuildconnections_evidencesupportingearlyliteracyandearlylearning.pdf)

developmentally appropriate activities for children and their parents; Read On Arizona, a program that promotes early literacy; and the national “Reach Out & Read” program, in which nearly 200 clinics and pediatric practices across the state seeing children for a well-child visit provide them with a book to take home.<sup>72</sup>

### **What the Data Tell Us**

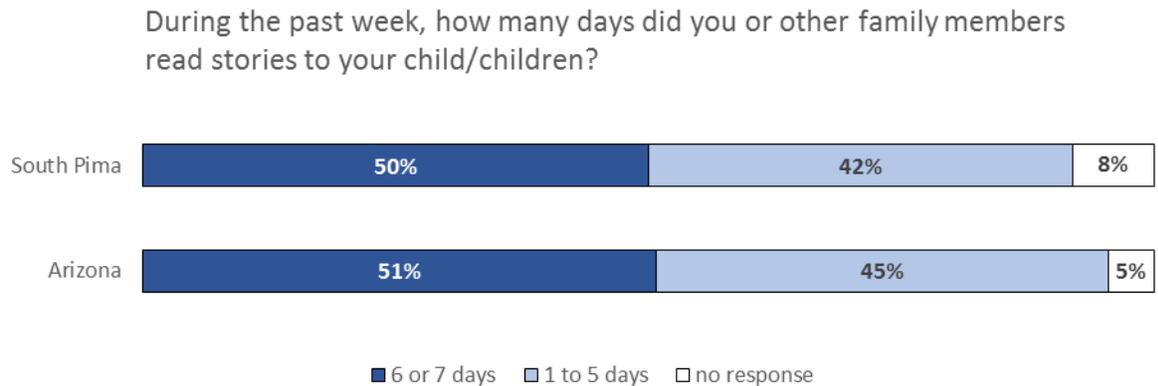
The First Things First Family and Community Survey is a phone-based survey designed to measure many critical areas of parents’ knowledge, skills, and behaviors related to their young children. In the South Pima Region,<sup>73</sup> 150 people responded to the 2012 First Things First Family and Community Survey. Among other topics, the 2012 First Things First Family and Community Survey collected data about parent and caregiver knowledge of children’s early development and their involvement in a variety of behaviors known to contribute positively to healthy development. Parents in the South Pima Region were less likely to report reading to their children (50%), telling stories to their children (44%) and drawing with their child (41%) six or seven days a week compared to parents across the state (51%, 51% and 47%, respectively) (see Figure 16, Figure 17, and Figure 18). Over three-quarters of parents (82%) in the South Pima Region showed an understanding that brain development can be impacted prenatally or right from birth, similar to respondents across the state as a whole (see Figure 19).

---

<sup>72</sup> Reach Out and Read. (n.d.). *Programs Near You*. Retrieved from <http://www.reachoutandread.org/resource-center/find-a-program/>

<sup>73</sup> These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

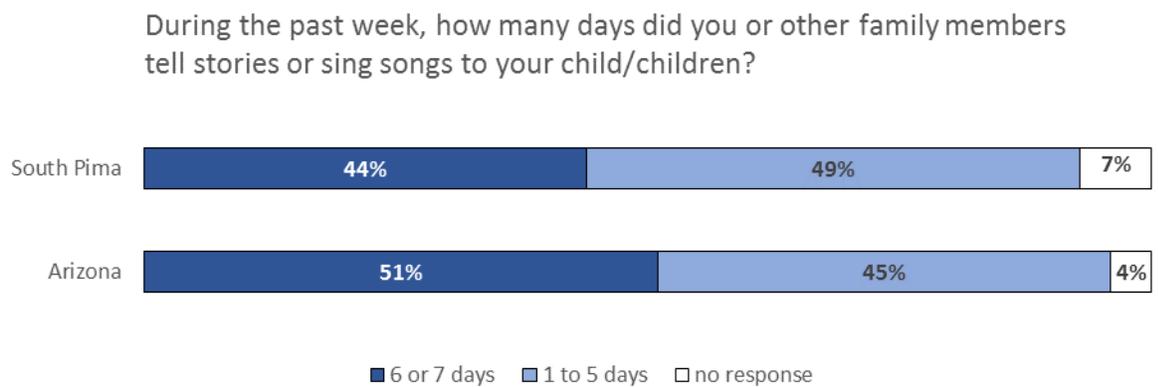
**Figure 16. Reading stories to young children (Family and Community Survey, 2012)**



Source: First Things First (2014). [2012 Family and Community Survey data]. Unpublished data.

Note: These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

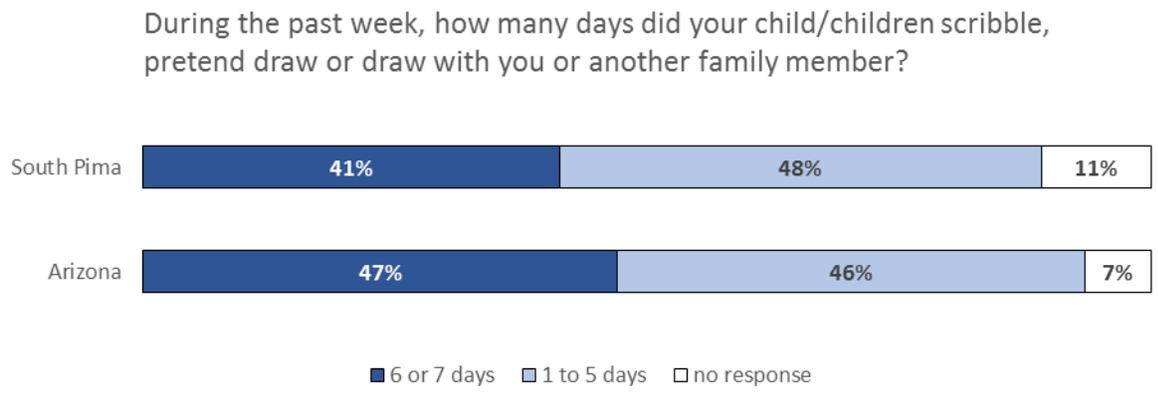
**Figure 17. Telling stories or singing songs to young children (Family and Community Survey, 2012)**



Source: First Things First (2014). [2012 Family and Community Survey data]. Unpublished data.

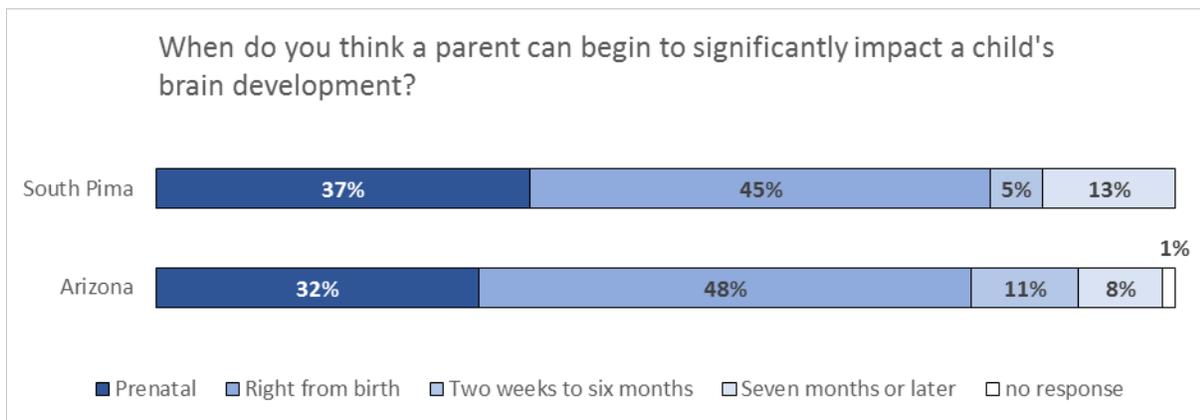
Note: These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

**Figure 18. Drawing and scribbling with young children (Family and Community Survey, 2012)**



Source: First Things First (2014). [2012 Family and Community Survey data]. Unpublished data.  
 Note: These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

**Figure 19. Understanding of prenatal brain development (Family and Community Survey, 2012)**



Source: First Things First (2014). [2012 Family and Community Survey data]. Unpublished data.  
 Note: These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

## Communication, Public Information and Awareness

### Why it Matters

To create a strong, comprehensive, and sustainable early childhood system, communities need an awareness of the importance of the first five years in a child's life, and a commitment to align priorities and resources to programs and policies affecting these first years. Supporting public awareness by providing accessible information and resources on early childhood development and health, and educating community members about the benefits of committing resources to early childhood, are key to supporting and growing this system. Assessing the reach of these educational and informational efforts in First Things First regions across the state can help early childhood leadership and stakeholders refine, expand or re-direct these efforts.

### What the Data Tell Us

In addition to measuring parent knowledge, skills, and behaviors related to their young children, the 2012 First Things First Family and Community Survey collected data on parents' perceptions regarding resources available to young children and their families across Arizona. Sixty-eight percent of responding parents in the South Pima Region<sup>74</sup> reported overall satisfaction with "the community information and resources available to them about their children's development and health," and 22 percent reported some level of dissatisfaction. These values reflect slightly lower levels of satisfaction compared to parents across the state (see Figure 20). Seventy-five percent of respondents in the region agreed that it was easy to locate needed or desired services, similar to the state rate (see Figure 21).

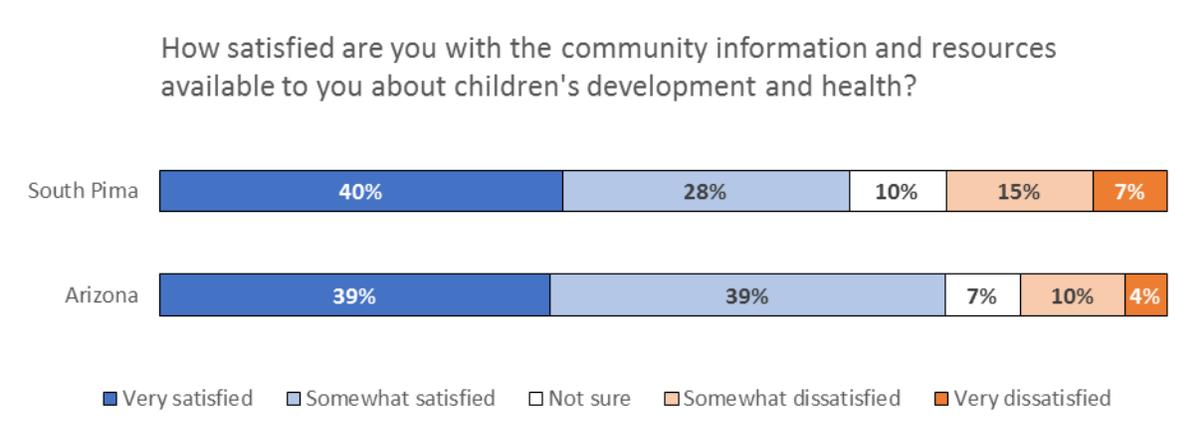
To support efforts to communicate the importance of early childhood development and health, all five regions in Pima County have engaged in a cross-regional communication plan that involves collaboration and coordination among the regions and their grant partners. The regions have pooled their resources to better leverage funding. For example, they have purchased TV, radio and online ads that are shown throughout the Pima regions and websites frequently accessed by the public. The pooled funding has allowed the five regions to hire two Parent Awareness and Community Outreach Coordinators to conduct community outreach to inform the greater community on the importance of early childhood education, health and development and the role First Things First plays in ensuring children are ready for kindergarten. The result is that all of the Regional Partnership Councils in Pima County have partners and community stakeholders who work together to create a coordinated message to

---

<sup>74</sup> These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

the community. This coordinated approach also provides for the purchase of educational items that focus on early childhood health and development and are provided to families of young children either directly or in collaboration with funded community agencies and partners.

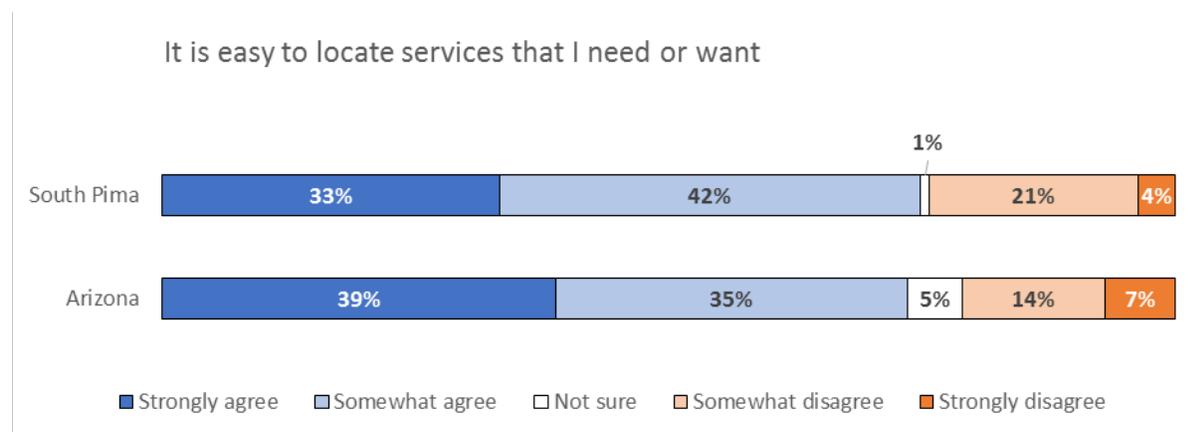
**Figure 20. Satisfaction with information and resources (Family and Community Survey, 2012)**



Source: First Things First (2014). [2012 Family and Community Survey data]. Unpublished data.

Note: These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

**Figure 21. Ease of locating needed services (Family and Community Survey, 2012)**



Source: First Things First (2014). [2012 Family and Community Survey data]. Unpublished data.

Note: These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

## Systems Coordination among Early Childhood Programs and Services

### Why it Matters

Through system-building, First Things First is focused on developing approaches to connect various components of the early childhood system. This is done in an effort to create a more holistic system that operates to promote shared results for children and families. Agencies that work together and achieve a high level of coordination and collaboration are often easier for families to access and the services provided are more responsive to the needs of the families. Coordination efforts may also result in an increased capacity to deliver services because of the work that organizations do to identify and address gaps in the service delivery continuum. By supporting a variety of coordination efforts, First Things First aims to create a high quality, interconnected, and comprehensive early childhood service delivery system that is timely, culturally responsive, family driven, community based, and directed toward enhancing children's overall development. Determining how these efforts are impacting regions and the families within them can help inform service, program and policy decisions that will benefit families and young children across the state.

### What the Data Tell Us

The 2012 First Things First Family and Community Survey also collected data on parents' perceptions regarding how well agencies that serve young children and their families coordinate and collaborate. One item from the 2012 Family and Community Survey addresses the issue of perceived early childhood system coordination. Respondents in both the South Pima Region<sup>75</sup> and the state were more likely to indicate satisfaction (55% in the region and 43% in the state) than dissatisfaction (27% in the region and 29% in the state) with how care providers and government agencies work together and communicate (see Figure 22).

Since 2008, much has been accomplished in building an early childhood system in the region as well as cross-regionally. Coordination among early childhood programs and services has been an area of focus for the Pima South Regional Partnership Council that has partially been addressed through the implementation of a service coordination strategy. The primary goals are to identify available resources, improve and streamline processes including applications for services, service delivery and follow-up for families with young children, and to reduce confusion and duplication for families and service providers. The implementation of this

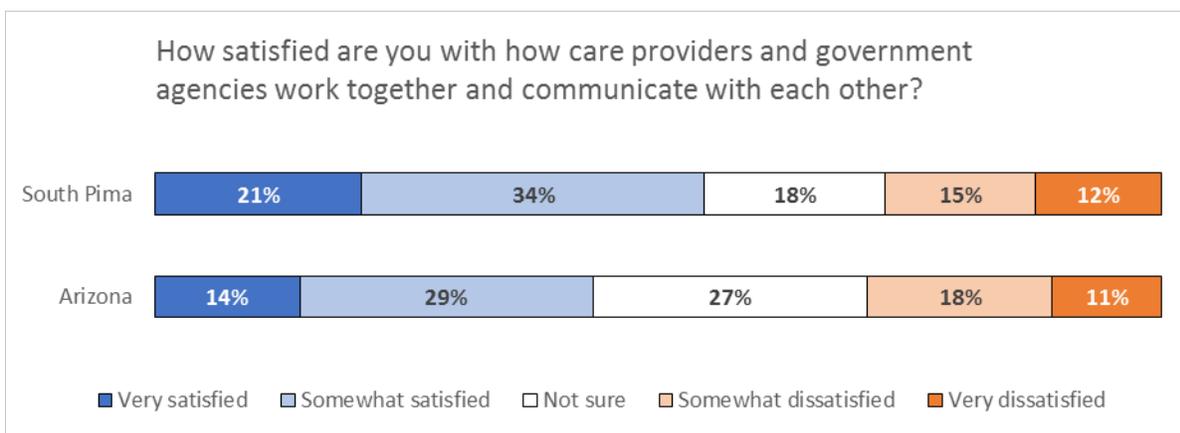
---

<sup>75</sup> These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

strategy has resulted thus far in the identification of both regional and community-specific needs as well as providing a mechanism for coordination of available resources.

In addition to this strategy specifically targeting service coordination, the Pima South Region has been intentional at seeking out opportunities to partner with other regional councils in Pima County, community organizations that serve families of young children and to participate in existing coalitions whose mission is to improve school readiness for young children. These efforts lead to better alignment of services, maximization of funding by leveraging funds and reduction of duplication.

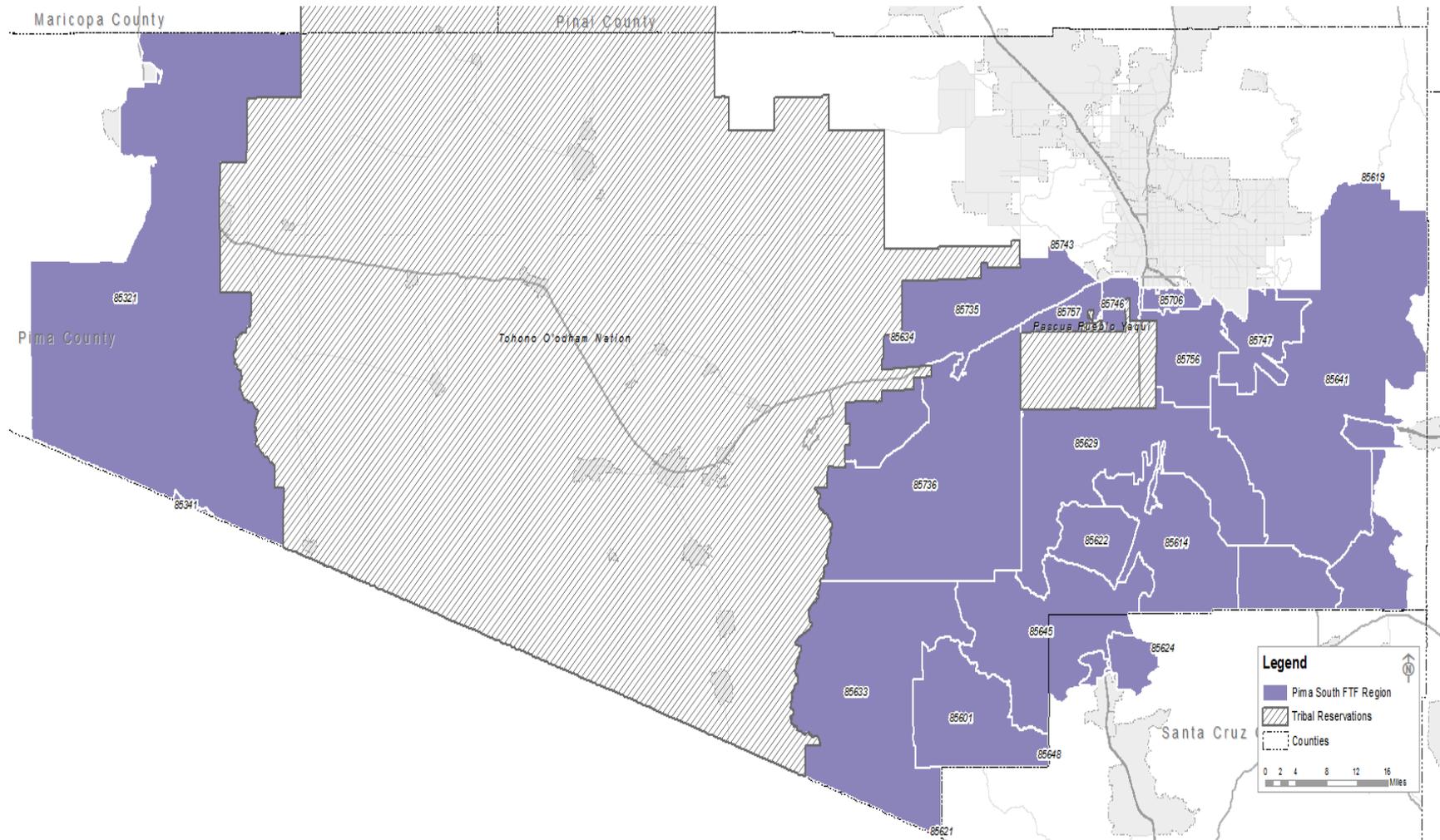
**Figure 22. Satisfaction with coordination and communication (Family and Community Survey, 2012)**



Source: First Things First (2014). [2012 Family and Community Survey data]. Unpublished data.

Note: These FCS data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

## Appendix 1: Map of Zip Codes of the Pima South Region



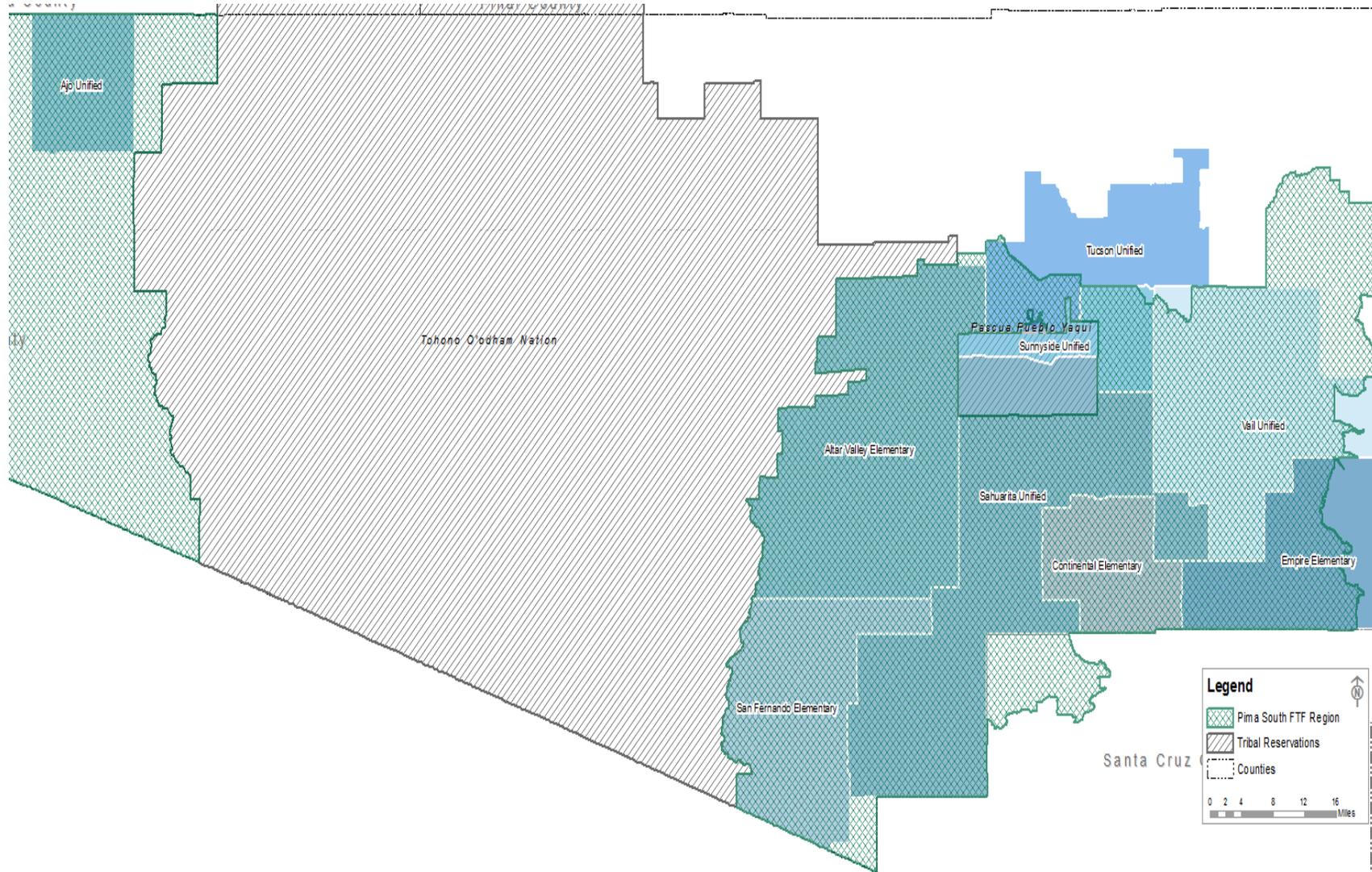
Source: U.S. Census Bureau (2010). TIGER/Line Shapefiles: ZCTAs, Counties, American Indian/Alaska Native Homelands. Retrieved from <http://www.census.gov/geo/maps-data/data/tiger-line.html>

## Appendix 2: Zip Codes of the Pima South Region

ZIP CODE TABULATION AREA (ZCTA)	TOTAL POPULATION	POPULATION (AGES 0-5)	TOTAL NUMBER OF HOUSEHOLDS	HOUSEHOLDS WITH ONE OR MORE CHILDREN (AGES 0-5)	PERCENT OF ZIP CODE'S TOTAL POPULATION LIVING IN THE PIMA SOUTH REGION	THIS ZIP CODE IS SHARED WITH
<b>Pima South Region</b>	<b>269,210</b>	<b>25,171</b>	<b>93,001</b>	<b>17,871</b>		
85321	3,484	217	1,614	146	79%	Tohono O'odham Nation
85341	39	2	15	2	100%	
85601	698	23	359	18	100%	
85602	2	0	1	0	0.02%	Cochise Region
85611	173	11	71	8	18%	Cochise & Santa Cruz regions
85614	21,895	593	12,114	429	100%	
85622	6,325	24	3,583	18	100%	
85629	23,568	2,787	7,895	1,943	100%	
85633	54	3	25	2	100%	
85637	214	5	92	4	17%	Santa Cruz Region
85641	21,751	1,915	7,622	1,350	100%	Cochise Region
85645	2,227	153	786	104	100%	Santa Cruz Region
85646	58	3	24	2	4%	Santa Cruz Region
85706	55,209	6,557	16,505	4,605	100%	
85713	2,633	348	826	252	5%	Pima North Region
85714	1,277	171	526	130	9%	Pima North Region
85730	12	2	5	1	0.03%	Pima North Region
85735	11,250	835	4,132	592	100%	
85736	4,975	346	1,814	239	100%	
85746	41,802	4,265	13,484	3,080	97%	Pima North & Tohono O'odham Nation regions
85747	23,055	2,227	7,925	1,610	100%	Pima North Region
85756	34,999	3,167	9,412	2,267	98%	Tohono O'odham Nation
85757	13,510	1,517	4,171	1,069	80%	Pascua Yaqui Tribe

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P1, P14, P20.

### Appendix 3: Map of Elementary and Unified School Districts in the Pima South Region



Source: U.S. Census Bureau (2015). TIGER/Line Shapefiles: Elementary School Districts, Unified School Districts. Retrieved from <http://www.census.gov/geo/maps-data/data/tiger-line.html>

## Appendix 4: Data Sources

- Arizona Department of Administration, Office of Employment and Population Statistics. (December 2012). "2012-2050 State and county population projections." Retrieved from <http://www.workforce.az.gov/population-projections.aspx>
- Arizona Department of Administration, Office of Employment and Population Statistics. (2014). Local area unemployment statistics (LAUS). Retrieved from <https://laborstats.az.gov/local-area-unemployment-statistics>
- Arizona Department of Economic Security. (2015). Child Care Market Rate Survey 2014. Data received from the First Things First State Agency Data Request
- Arizona Department of Economic Security. (2015). [Attendance data set]. Unpublished raw data received from the First Things First State Agency Data Request
- Arizona Department of Economic Security. (2015). [AzEIP Data]. Unpublished raw data received through the First Things First State Agency Data Request
- Arizona Department of Economic Security. (2015). [DDD Data]. Unpublished raw data received through the First Things First State Agency Data Request
- Arizona Department of Economic Security. (2015). [Drop-Out and Graduation data set]. Unpublished raw data received from the First Things First State Agency Data Request
- Arizona Department of Economic Security. (2015). [Homeless data set]. Unpublished raw data received from the First Things First State Agency Data Request
- Arizona Department of Economic Security. (2015). [SNAP data set]. Unpublished raw data received from the First Things First State Agency Data Request
- Arizona Department of Economic Security. (2015). [TANF data set]. Unpublished raw data received from the First Things First State Agency Data Request
- Arizona Department of Education. (2014). AIMS and AIMS A 2014. Retrieved from <http://www.azed.gov/research-evaluation/aims-assessment-results/>
- Arizona Department of Education. (2015). Percentage of children approved for free or reduced-price lunches, July 2015. Unpublished raw data received from the First Things First State Agency Data Request
- Arizona Department of Health Services. (2015). [Immunizations Dataset]. Unpublished raw data received from the First Things First State Agency Data Request

Arizona Department of Health Services, Bureau of Public Health Statistics. (2015). [Vital Statistics Dataset]. Unpublished raw data received from the First Things First State Agency Data Request

Arizona Department of Health Services, Office of Injury Prevention. (2015). [Injuries Dataset]. Data received from the First Things First State Agency Data Request

Arizona Health Care Cost Containment System. (2014). KidsCare Enrollment by County. Retrieved from <http://www.azahcccs.gov/reporting/Downloads/KidsCareEnrollment/2014/Feb/KidsCareEnrollmentbyCounty.pdf>

First Things First (2014). [2012 Family and Community Survey data]. Unpublished data received from First Things First

U.S. Census Bureau (2010). 2010 Decennial Census, Tables P1, P11, P12A, P12B, P12C, P12D, P12E, P12F, P12G, P12H, P14, P20, P32, P41. Retrieved from <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>

U.S. Census Bureau (2010). 2010 Tiger/Line Shapefiles prepared by the U.S. Census. Retrieved from <http://www.census.gov/geo/maps-data/data/tiger-line.html>

U.S. Census Bureau (2014). American Community Survey 5-Year Estimates, 2009-2013, Table B05009, Table B10002, B14003, B15002, B16001, B16002, B17001, B17002, B19126, B23008, B25002, B25106. Retrieved from <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>

U.S. Census Bureau (2015). 2015 Tiger/Line Shapefiles prepared by the U.S. Census. Retrieved from <http://www.census.gov/geo/maps-data/data/tiger-line.html>