FIRST THINGS FIRST

Pima North

2018 NEEDS AND ASSETS REPORT

PIMA NORTH
REGIONAL PARTNERSHIP COUNCIL
2018
NEEDS AND ASSETS REPORT

Prepared by

Harder and Company Community Research

Funded by

First Things First Pima North Regional Partnership Council

harder + co | community research

FIRST THINGS FIRST

LETTER FROM THE CHAIR

July 31, 2017

Message from the Chair:

Since the inception of First Things First, the Pima North Regional Partnership Council has taken great pride in supporting evidence-based and evidence-informed early childhood programs that are improving outcomes for young children. Through both programmatic and other systems-building approaches, the early childhood programs and services supported by the regional council have strengthened families, improved the quality of early learning, and enhanced the health and well-being of children birth to 5 years old in our community.

This impact would not have been possible without data to guide our discussions and decisions. One of the primary sources of that data is our regional Needs and Assets report, which provides us with information about the status of families and young children in our community, identifies the needs of young children, and details the supports available to meet those needs. Along with feedback from families and early childhood stakeholders, the report helps us to prioritize the needs of young children in our area and determine how to leverage First Things First resources to improve outcomes for young children in our communities.

The Pima North Regional Council would like to thank our Needs and Assets vendor, Harder+Company Community Research, for their knowledge, expertise and analysis of the Pima North region. Their partnership has been crucial to our development of this report and to our understanding of the extensive information contained within these pages.

As we move forward, the First Things First Pima North Regional Partnership Council remains committed to helping more children in our community arrive at kindergarten prepared to be successful by funding high-quality early childhood services, collaborating with system partners to maximize resources, and continuing to build awareness across all sectors on the importance of the early years to the success of our children, our communities and our state.

Thanks to our dedicated staff, volunteers and community partners, First Things First has made significant progress toward our vision that all children in Arizona arrive at kindergarten healthy and ready to succeed.

Thank you for your continued support.

Sincerely,

Marcia Klipsch, Chair

PIMA NORTH REGIONAL PARTNERSHIP COUNCIL

3610 North Prince Village Place, Suite 100
Tucson, Arizona 85719
Phone: 520.628.6650
Fax: 520.747.1029

Marcia Klipsch, Chair

Annabel Ratley, Vice Chair

Dr. Linda Arzoumanian

Jil Feldhausen

Marguerite (Peg) Harmon

Scott Ingram

Dr. Dorothy Johnson

Amber Jones

Dr. Wade McLean

Dr. Susan Shinn

Kirk Grugel Short

Report Prepared by:

harder + co | community research
San Diego, CA

INTRODUCTORY SUMMARY AND ACKNOWLEDGMENTS

90 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 North 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 North 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 North 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, the Arizona Health Care Cost Containment System, the United Way of Tucson and Southern Arizona Great Expectations for Teachers, Children, Families and Communities and Child Parent Centers 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 North 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.

Contents

Executive Summary 2
Overview of the FTF Pima North Region 2
Key Findings 3
Introduction 11
About this Report 11
1. Population Characteristics 14
Why it Matters 15
What the Data Tell Us 15
2. Economic Circumstances 25
Why it Matters 26
What the Data Tell Us 27
3. Educational Indicators 38
Why it Matters 39
What the Data Tell Us 39
4. Early Learning 44
Why it Matters 45
What the Data Tell Us 46
5. Child Health 56
Why it Matters 57
What the Data Tell Us 58
6. Family Support and Literacy 72
Why it Matters 73
What the Data Tell Us 73
7. Communication, Public Information, and Awareness 96
Why It Matters 97
What the Data Tell Us 97
8. System Coordination Among Early Childhood Programs and Services 101
Why it Matters 102
What the Data Tell Us 105
Conclusion 118
Appendix A 122
Appendix B 186

Executive Summary

First Things First (FTF) is the only state agency in Arizona dedicated exclusively to investing in and enhancing the early childhood system. FTF works through regional partnership councils that partner with local communities to create a family-centered, comprehensive, collaborative, and high-quality early childhood system that supports the development, health, and early education of all Arizona children, from birth through age five.

Every two years, each regional partnership council develops a report detailing the needs and assets of the region's youngest children and their families. The intent of the report is to inform the council and the local community about the overall status of children zero to five years of age in the region, in order to support data-driven decision making around future funding and programming. Data for this report were gathered from federal and local sources, as well as provided directly to FTF by state agencies.

Overview of the FTF Pima North Region

The FTF Pima North Region occupies the northeastern corner of Pima County and is located in the southeastern portion of Arizona. [1] The Pima North Region is made up of a diverse mix of urban and rural communities in the central and northern portions of Pima County, including most of metropolitan Tucson, South Tucson, Oro Valley, and Marana.[2] The largest city in the region is Tucson and with a population of over 500,000 people is the second largest city in the state. The Pima North Region is also the home of the University of Arizona, Tucson.

The FTF Pima North Regional Partnership Council (Council) makes strategic investments to support the healthy development and learning of the young children in the Pima North Region. The Council's priority areas for examination in this report include the following:

- Kindergarten readiness
- Third grade reading and math performance
- Grandparents caring for grandchildren
- Professional development of early childhood education providers
- Prenatal care
- Immunizations

The following section provides a summary of the key findings for each of the eight domains of the 2018 Regional Needs and Assets report, highlighting the major data findings, needs and assets for the FTF Pima North Region, and potential considerations and opportunities for further exploration.

---

[1] *In State Fiscal Year 2015, First Things First consolidated the former North Pima and Central Pima Regions into the current Pima North Region. This consolidation also included zip codes 85757 and 85746 shifting to Pima South and 85730 and 85748 shifting to Pima North.*
[2] *http://www.firstthingsfirst.org/regions/Publications/FTF%20Snapshot%20-%20Pima%20North.pdf*

Key Findings

Population Characteristics

The FTF Pima North Region has a total population of 697,919 residents and 48,054 children under the age of six. Though the total number of births has decreased in recent years, the population of zero to five year olds is projected to increase over the next several decades. The race and ethnicity breakdown of the population is similar to that of the rest of the state with 66 percent of the adult population identifying as White and three quarters of the adult population identifying English as their primary language. However, almost half of the population ages zero to five (47%) and 39 percent of mothers identify as Hispanic or Latino, indicating that the demographics of the region will likely change in future years and more linguistically and culturally responsive services may be needed as the Hispanic/Latino population continues to grow.

The majority of households with children under six are married-couple households, with about 28 percent of households led by single females, which is higher than the state (24%) and 11 percent led by single males, which is similar to the state. Additionally, about 12 percent of children in the region live in the same household as a grandparent; of those children, about 54 percent are primarily cared for by a grandparent, which is similar to the state. The high percentage of children growing up in dual parent households is an asset for the region, as is the experience of children living in a multigenerational household, since this means the children likely have more permanent connections with adult role models. However, over a third of children are living in single family households, which can cause additional stressors and less time spent with parents that are the sole breadwinners for their family. Additionally, though having grandparents as primary caregivers can be an asset, it may also indicate that the child's parents are emotionally or financially unable to care for their child on their own. The high percentage of grandparents raising grandchildren in the region may indicate a higher need for resources and parenting education for grandparents who are taking on the task of raising a second generation.

Population characteristic considerations:

- Support culturally appropriate services for families.
- Discuss tactics for planning ahead for the projected slow, but steady, growth of the under six population and the needs that accompany that growth.
- Promote supports and resources that can help subsidize child care and other expenses for single parents.

Economic Circumstances

The average unemployment rates for both the state and region have decreased since 2010. The number of people in the labor force and the number of people employed have been fairly constant over the past six years. Ninety percent of parents with children under six are employed or their household partner is employed. The median annual income for all families in Pima County is $58,113, which is $975 less than the statewide median. However, there is a wide range: husband-wife families in the region have a median income of $75,313 while single females have a median income of $24,567. With the self-sufficiency standard for an adult with a young child being around $34,000, single females in the region are likely in need of additional financial support to help their child's growth and development.

About 27 percent of children in the FTF Pima North Region live below the poverty level, similar to the state (29%). The Flowing Wells Unified District and Tucson Unified District have the highest percentages of children living in poverty. Black or African American, Hispanic/Latino, and American Indian or Alaskan Native ethnicities are more likely to live below the poverty level. The data on poverty by school districts and ethnicities may help identify geographic areas and populations to target for further intervention or support focused around increasing financial resources. Similarly, the school districts and populations with lower poverty rates may be able to identify strategies or assets within their areas that can be applied throughout the region.

More than a third of residents in the FTF Pima North Region (37%) do not have affordable housing and Pima County has a higher foreclosure rate than the state (1 in every 1,136 versus 1 in every 1,721). Additionally, 15 percent of the overall population and 25 percent of children under age 18 are food insecure in Pima County, meaning they have limited or uncertain access to adequate food. This may be partly due to the 24 percent of residents in the county with low access to grocery stores and the low rate of Supplemental Nutritional Assistance Program (SNAP)-authorized stores in the county. Though local programs providing fresh and healthy food options exist in the region, more outreach and information is needed to inform families of the resources available. Unstable housing and limited access to nutritional food can have detrimental effects on children's health and learning and is an area in need of support for the FTF Pima North Region.

Economic circumstances considerations:

- Continue to promote community awareness of nutrition programs available to young children and their families.
- Identify ways to support young children and connect families to other existing resources through FTF programming, such as preschool.
- Further investigate food insecurity rates in the region to have a better understanding of how FTF can support young children who are food insecure.

Educational Indicators

About two in five children (44%) between ages three to four are enrolled in nursery school, preschool, or kindergarten in the Pima North Region. A similar percentage of third grade students scored proficient or highly proficient on the AzMERIT English Language Arts and Math assessments (44% and 43%, respectively). The AzMERIT, which replaced AIMS in the 2014-2015 school year, is designed to assess students' critical thinking skills and their mastery of the Arizona College and Career Ready Standards established in 2010. Students who receive a proficient or highly proficient score are considered adequately prepared for success in the next grade. Though the AzMERIT test is a new assessment and comparative results are not available, the indication that less than half of the state and region's third graders are proficient in math and English Language Arts is concerning and suggests the need for further intervention in this area.

The percentage of first, second, and third graders missing ten or more days of school slightly increased between 2014 to 2015 in the FTF Pima North Region and the state. In addition, the percentage of first, second, and third graders missing ten or more days of school t decreased as grade level increased. The FTF Pima North Region's high school graduation rate has decreased from 75 percent to 71 percent since

2011 and the high school dropout rate has remained at 4 percent since 2012. The majority of adults age twenty-five and older in the region (89%) have completed high school/received a GED or pursued further education past high school. A similar percentage of mothers in the region (84%) have completed high school or received their GED, which is 4 percent more than at the state level. In general, residents in the Pima North Region have completed high school or more, which contributes to the ability to get better jobs and the ability to provide for their children's needs.

Educational indicators considerations:

- Promote the benefits of completing a high school diploma.
- Consider additional research to understand the factors that are causing missed school days.
- Increase awareness of early education programs to support learning and school readiness from an early age.

Early Learning

Only 44 percent of preschool-aged children in the Pima North Region are enrolled in early childhood education programs. Workforce development is also a need in the region; early childhood professionals in the state are not well compensated, most earning minimum wage, and almost half leave the profession within five years.

Head Start and Early Head Start programs are assets in the region as children attending these programs tend to score higher in cognitive and social-emotional development than those who do not. About 3,250 children in the FTF Pima North Region and four neighboring counties are enrolled in Head Start or Early Head Start. Additionally, approximately 2,600 children in the region are enrolled in Quality First centers and homes rated between three to five stars. Given that there is only one Head Start program, serving 43 sites, an Early Head Start program, and an Early Head Start Child Care Partnership program funded by Child-Parent Centers, Inc.; shared by five counties in southern Arizona, the region may want to consider working with the federal government to bring more Head Start resources and programs into the FTF Pima North region. This is even more important when considering the high costs of child care in the region, especially relative to the area's median family income. Overall, although children in the region are eligible, only a few children are receiving subsidies and many children remain on the waitlist. This indicates that there is a need for child care subsidies in the FTF Pima North Region that is not being met.

The number of children receiving AzEIP referrals and services has increased in the region, indicating both increased need and capacity to meet the need. Additionally, the percentage of children who participate in special education while in preschool but transition out before entering kindergarten has been increasing for the region while decreasing for the state (8% versus 12% in 2014). This may be an indication that early delays are being addressed before kids reach elementary school. The most common types of disabilities for preschool children were developmental delays and speech and language impairments.

Early Learning Considerations:

- Increase parent awareness of the availability of preschool centers and homes that are part of the Quality First program.
- Voice support for the importance of subsidies in providing low income children access to early care and education.
- Consider providing incentives for quality early childhood professionals to retain their skills in the early childhood field and reduce staff turnover. Also consider monitoring the impact of the min wage increase in AZ and how this will affect the early childhood workforce.
- Consider advocating for the expansion of child care scholarships for more families in the region. Consider prioritizing Quality First scholarships for single parent households.

Child Health

Pima County has a lower ratio of population to primary healthcare providers than the state average, although the majority of residents have health insurance (86%). However, this ratio varies in different areas across Pima County. For example, the ratio of population to primary caregivers is more than double in some areas, such as Flowing Wells, Picture Rocks, Drexel Heights, and Valencia West, compared to the state and to Pima County as a whole. In the FTF Pima North Region, the percentage of mothers who received prenatal care during their first trimester increased from 2009-2012, then decreased slightly in 2013. In 2013, less than 2 percent of pregnant women did not receive prenatal care.

Only 31 percent of parents believe they can impact their child's brain during the prenatal period, indicating a lack of knowledge around the impact of prenatal care on a child's growth and development. Another risk indicator is the percentage of adults with obesity and diabetes in Pima County, which has been rising since 2004. In 2015, over half of mothers participating in WIC in the county were overweight or obese prior to pregnancy. This may be partly due to a limited access to nutritional food, as previously discussed, or the lack of recreational or fitness facilities. Additionally, only 10 percent of mothers reported drinking or smoking during pregnancy, indicating an understanding that substance use is not recommended during pregnancy. However, the percentage of births with medical risk factors (e.g. eclampsia, hypertension) and with complication in labor and delivery was on the rise between 2009 and 2013.

Families in the Pima North Region have been successful in implementing the healthy preventive practices of breastfeeding and vaccinating their children. The percentage of mothers who are participating in Women, Infants, and Children (WIC) who breastfeed their infant at least once a day has increased to 79 percent in 2015 and only three percent of children in childcare are exempt from immunizations.

Seventy-five percent of parents in the Pima North Region who responded to the Healthy Smiles Healthy Bodies Oral Health survey report regularly taking their children to dental visits. More than half (55%) of respondents in the region reported that their child had tooth decay and one third (33%) reported that their child had untreated tooth decay. This indicates a need for increased oral health education and services in the Pima North Region.

Child health considerations:

- Continue to promote healthy preventive behaviors like receiving immunizations.
- Continue to provide outreach and education regarding prenatal care, especially targeting first-time and teen mothers.
- Promote good oral health through other FTF programs, such as home visitation, and consider partnering with pediatricians to encourage oral health practices during well-child visits.
- Advocate for fluoridation in water in the communities within the FTF Pima North Region. Currently, Tucson Water does not add fluoride to the drinking water supply.

Family Support and Literacy

In 2012, 153 parents and caregivers in the FTF North Pima Region and 200 parents in the FTF Central Pima Region completed a survey administered by FTF to better understand parents' knowledge of parenting practices and child development. Though changes in parent knowledge have likely occurred since 2012, the data available showed as follows:

- 40 percent of parents in both regions understood that an infant takes in and reacts to the world right from birth;
- 52 percent of parents in the FTF North Pima Region and 53 percent in the FTF Central Pima Region understood that a baby can sense and be affected by his parents' mood;
- 81 percent of respondents in the FTF North Pima Region and 77 percent in the FTF Central Pima Region understood the first year of life impacts school performance;
- 97 percent of parents in both region understood the impact of emotional closeness on a child's intellectual development; and
- 80 percent of parents in the FTF North Pima Region and 56 percent of parents in the FTF Central Pima Region understood that children receive a greater benefit from talking to a person in the same room compared to hearing someone talk on the TV.

Compared to statewide respondents, slightly fewer respondents in both regions understood their impact on their child in the prenatal stage and that the first year of life has a major impact on school performance.

The majority of respondents in both regions correctly identified age-appropriate expectations of behavior and engaged with their child in activities such as reading, drawing, and singing six or seven days a week. These findings indicate that, though more education around the prenatal and infant stages is needed, most parents in the region are aware of their impact on their child's development and engage in behaviors to enhance their learning.

Between October 1, 2014 and September 30, 2015, Pima County had 971 substantiated cases of child abuse and neglect and 2,323 children in out-of-home placements. There is one domestic violence shelter funded by the Arizona Department of Economic Security (DES) in the county that served 367 adults and 308 children in 2015. Additionally, the number of children and female caregivers receiving behavioral health services in the region has remained fairly stable over the past few years while juvenile arrests and substance use have decreased in the county.

Family support and literacy considerations:

- Continue to educate parents on the importance of play and engaging in developmentally stimulating activities with their children daily.
- Continue to educate parents on parents' impact on their child's development, especially starting at the prenatal stage.
- Continue to offer and promote a variety of home visitation programs to families in the region. Also discuss providing a transition from home visitation programs that serve 0-3 year olds to PreK programs that service 4-5 year olds.
- Support programs that help young families or children that have been exposed to violence.
- Expand messaging and parent education on the importance of parent engagement and involvement starting prenatally.

Communication, Public Information and Awareness

Public awareness of the importance of early childhood development and health is a crucial component of efforts to build a comprehensive and effective early childhood system in Arizona. Building public awareness and support for early childhood is a foundational step that can impact individual behavior as well as the broader objectives of system building.

There is no one single communications strategy that will achieve the goal of making early childhood an issue that more Arizonans value and prioritize. Therefore, integrated strategies that complement and build on each other are key to any successful strategic communications effort. Employing a range of communications strategies to share information – from traditional broad-based tactics such as earned media to grassroots, community-based tactics such as community outreach – ensures that diverse audiences are reached more effectively wherever they are at across multiple mediums. Other communications strategies include: strategic consistent messaging, brand awareness, community awareness tactics such as distribution of collateral and sponsorship of community events, social media, and paid media which includes both traditional and digital advertising.

Since state fiscal year 2011, First Things First has led a collaborative, concerted effort to build public awareness and support across Arizona employing the integrated communications strategies. Results of these statewide efforts from SFY2011 through SFY2016 include:

- More than 2,000 formal presentations to community groups which shared information about the importance of early childhood;
- Nearly 230 tours of early childhood programs to show community members and community leaders in-person how these programs impact young children and their families;
- Training of almost 8,700 individuals in using tested, impactful early childhood messaging and how to best share that message with others;
- The placement of more than 2,400 stories about early childhood in media outlets statewide;
- Increased digital engagement through online platforms for early childhood information, with particular success in the growth of First Things First Facebook Page Likes, which grew from just 3,000 in 2012 to 124,000 in 2016.
- Statewide paid media campaigns about the importance of early childhood from FY10 through FY15 included traditional advertising such as television, radio and billboards as well as digital

marketing. These broad-based campaigns generated millions of media impressions over that time frame; for example in FY15 alone, the media campaign yielded over 40 million media impressions.

In addition, First Things First began a community engagement effort in SFY2014 to recruit, motivate and support community members to take action on behalf of young children. In the Pima Regions, 1,415 friends, 170 supporters and 72 champions were involved in the engagement program.

Communication, Public Information and Awareness Considerations:

- Continue to utilize integrated strategies to highlight the importance of early childhood development and health.
- Continue to engage community members through the community engagement program.

System Coordination Among Early Childhood Programs and Services

To gain a better understanding of the coordination and collaboration occurring among early childhood system partners within FTF regions, First Things First administered the Coordination and Collaboration Survey to system partners in October of 2016. Sixty-four respondents from Pima County participated in the survey. The majority of respondents were from family support or social service agencies (34%) or early care and education organizations (30%) and considered themselves to be participants or partners in the early childhood system in the FTF Pima North Region.

Overall, 39 percent of respondents perceived the early childhood system in the region to be well-coordinated and 53 percent considered it to be partially coordinated. Respondents felt the three areas of the system (Family Support and Literacy, Children's Health, and Professional Development) to be equally and highly (82-89%) effective in addressing the needs of young children and their families. Approximately three-quarters of respondents (74%) felt the Early Learning system effectively addresses the needs of young children and their families.

Family Support and Literacy was considered to have the highest level of collaboration (48%), followed by Professional Development (47%). Early Learning was considered to have a moderate level of collaboration (27%) while Children's Health was considered to have the lowest level of collaboration (13%).

System Coordination Considerations:

- Identify more system leaders that can guide system partners and participants towards a more coordinated and collective network that will even more efficiently serve children and families.
- Provide more cross-threading between Early Childhood areas to strengthen collaboration and coordination across the system.
- Identify successes from the Family Support and Professional Development collaboration efforts that can be applied to the other areas. Consider learning from other FTF regions that have strong collaborations to identify how they developed their system and apply them to Pima North as appropriate.

Opportunities for Further Exploration

Most of the findings provided in this report are based on secondary data sources. As the Council continues to make increasingly difficult decisions with diminishing funds, the following suggestions for further data collection and analysis may help inform those decisions in a data driven way. The Council may want to consider collecting additional information regarding the following:

- **Grandparents caring for grandchildren** to have a better understanding of whether the living situations are due to parents taking care of their elderly parents or due to parents who are unable to independently care for themselves and their children. Also gather information regarding the resources and education grandparents need to care for their young grandchildren, such as respite or parenting refreshers.

- School districts with **high third grade proficiency scores** versus those with lower scores and the factors that contribute to those results that can inform policy and practice changes within the lower-performing districts. In addition, looking at scores in relation to socioeconomic status to identify best practices.

- Children with **developmental delays and special needs** to understand the resources and human capital needed to identify, screen, and address mild to moderate delays early, before they become more severe.

- Barriers to receiving **immunizations**.

- **Professional development** strengths and areas for improvement for early childhood providers to continue to expand and improve upon professional development opportunities.

- The declining percentage of women receiving **early prenatal care** and the resulting outcomes to better understand the needs of women and families prior to, and during, pregnancy.

- Barriers to **system coordination** and potential innovative solutions.

Introduction

Family well-being is an important indicator for child success.[3] Healthy families and healthy communities create a context in which young children can thrive, developing the cognitive, emotional, motor, and social skills they will need to succeed in school and life.[4] Early childhood interventions help promote strong families and children.[5]

FTF is one of the critical partners creating a family-centered, comprehensive, collaborative, and high-quality early childhood system that supports the development, health, and early education of all Arizona children from birth through age five. FTF is intent on bolstering current child-focused systems within Arizona as a strategic way to maximize current and future resources. The Council makes strategic investments to support the healthy development and learning of the young children in the region. The council's priority areas for examination in this report include the following:

- Kindergarten readiness
- 3rd grade reading and math performance
- Grandparents caring for grandchildren
- Professional development of early childhood education providers
- Prenatal care
- Immunizations

About this Report

This is the sixth Needs and Assets report conducted on behalf of the Council. It fulfills the requirement of ARS Title 8, Chapter 13, Section 1161, to submit a biennial report to the Arizona Early Childhood Health and Development Board detailing the assets, coordination opportunities, and unmet needs of children birth through age five and their families in the region. This report is designed to provide updated information to the Council about the needs and assets in their region to help them make important programmatic and funding decisions. This report describes the current circumstances of young children and their families as it relates to unmet needs and assets for the FTF Pima North Region. The FTF Pima North Region occupies the northeastern corner of Pima County and is located in the southeastern portion of Arizona. The Pima North Region is made up of a diverse mix of urban, sub-urban, and rural communities in the central and northern portions of Pima County, including most of metropolitan Tucson, South Tucson, Oro Valley, and Marana.[6]

This report is organized by topic area followed by sub-topics and indicators. When available, data are presented for the state, county, region, and sub regional breakdowns as appropriate. Key data indicators are represented in this report in eight unique domains:

---

[3] *Martinez, J., Mehesy, C., & Seely, K. (2003). What Counts : Measuring Indicators of Family Well-Being Executive Summary Report (Vol. 8466). Denver, CO.*
[4] *Knitzer, Jane. (2000). Early childhood mental services: a policy and systems development perspective. In J. Shonkoff & S. Meisels (Eds.), Handbook of early childhood intervention) (pp. 416-438). New York, NY: Cambridge University Press.*
[5] *Shonkoff, J., & Meisels, S. (2000). Early Childhood Intervention: The Evolution of a Concept. New York, NY: Cambridge University Press.*
[6] *http://www.firstthingsfirst.org/regions/Publications/FTF%20Snapshot%20-%20Pima%20North.pdf*

- Population characteristics
- Economic circumstances
- Educational indicators
- Early learning
- Child health
- Family support and literacy
- Communication, public information and awareness
- System coordination among early childhood programs and services
- Limitations and Conclusions
- Appendices

Methods

A systematic review designed to reveal the needs and assets of the Pima North Region was used to collect and summarize data for this report. Quantitative data components included a review and analysis of current and relevant secondary data describing the FTF Pima North region, Pima County, and State of Arizona. Wherever possible, data throughout the report are provided specifically for the FTF Pima North Region, and are often presented alongside data for Pima County and the State of Arizona for comparative purposes.

Secondary data was gathered to better understand demographic trends for the FTF Pima North Region. The assessment was conducted using data from state and local agencies and organizations that provide public data or that have an existing data sharing agreement with the FTF. A special request for data was made to the following state agencies by the FTF on behalf of Harder+Company Community Research: Arizona Department of Education (ADE), Arizona DES, Arizona Department of Health Services (ADHS), and the FTF itself.

Further secondary data were gathered directly from the public database. For example, demographic data included in this report were primarily gathered from the US Census and the American Survey data. Likewise, early education data were gathered from the US Children's Bureau and Office of the Administration for Children & Families. Understanding the true needs and assets of the region required extracting data from multiple data sets that often do not have similar reporting standards, definitions, or means for aggregating data. This suggests that for some indicators data were only available at the county level, small towns, or certain zip codes. Whereas for other indicators data were available at all levels. Whenever possible this report presents all data available. However, in some cases not enough data are available to make meaningful conclusions about a particular indicator within a region, city, or county. Furthermore, many agencies are collecting data independent of other public entities, which can result in duplication of data efforts, gaps in the collection of critical indicators, or differences in method of collection, unit of analysis, or geographic level. Many indicators that are of critical importance to understanding the well-being of children ages zero to five and their families are not currently collected in this region. The analysis presented in this report aims to integrate relevant data indicators from a variety of credible sources, including regional and sub-regional, and/or community-level analyses for a subset of data indicators. This report represents the most up to date representation of the needs and assets of young children and their families in the region and the interpretation of the identified strengths of the community (i.e. the assets available in the region).

In addition to systematically reviewing secondary data, key findings and data trends were synthesized and presented to the FTF Pima North Regional Council, FTF Evaluation Teams, and FTF Regional Directors, which allowed for a deeper discussion on the interpretation of the findings. Whenever possible, the rich context provided by the multiple FTF teams is incorporated throughout the report to help contextualize the findings. To further expand the meaningfulness of data trends, a brief literature review was conducted to ensure the inclusion of other relevant research studies that help explain the needs and assets of the region.

Per FTF guidelines, data related to social service and early education programming, with counts of fewer than ten, excluding counts of zero (i.e., all counts of one through nine) are suppressed. For data related to health or developmental delay, all counts of fewer than twenty-five, excluding counts of zero (i.e., all counts of one through twenty-four) are suppressed.

Limitations

This report relied primarily on secondary data. Most of the data were extracted by teams other than the evaluation team conducting the needs and assets assessment; therefore, conducting quality assurance on some data that were provided for this report was not possible.

Additionally, up to date information was not available for all indicators. For example, some of the demographic and economic indicators from the US Census are from 2010, eight years before this report is released. For other indicators, the most recent data available for the region was released in 2014, thus trends may have changed within those four years.

Another limitation impacting the findings and interpretations of findings is the targeted population included in each of the different data sources. For many domains reported, data were often only available at the county level rather than the region and data for children often included children ages zero to seventeen rather than children under six. ACS estimates are less reliable for small geographic areas or areas with smaller populations. Similarly, rural areas and non-white populations tend to be undercounted. Federal data also have similar limitations. For example, Head Start and WIC data only include a sample of the young children and families served.

There are also variations in the definitions and criteria used by each data source, making it difficult to make confident comparisons between data sources or indicators. Given these limitations, it is important to interpret key findings alongside contextual factors within the region.

1. Population Characteristics

Why it Matters

The profile of residents in a particular community informs the needs of the community and the types of services offered in the community. It is vitally important for policy and decision makers to understand the demographic profile of the communities they serve in order to make effective decisions that will positively impact the community's well-being. Timely information about the demographics of a region, such as the number of children and families, number of households, racial and ethnic composition, languages spoken, and living arrangements, can help policy makers to understand the needs of the region they serve and the services and resources that would be most culturally and geographically appropriate.

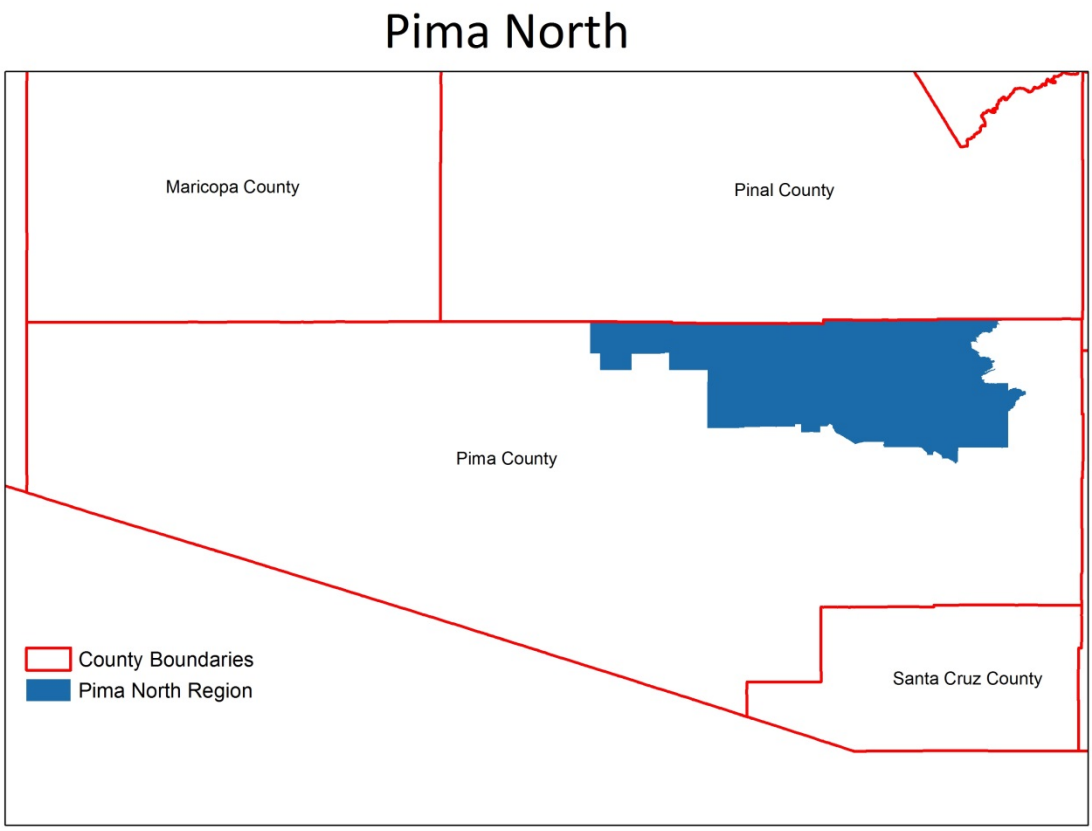
A thorough and comprehensive demographic profile allows policy makers to understand the residents of a region, the strengths they bring, and the needs and barriers they face by providing an overview of the geographic region's population dynamics, projected growth, ethnic and racial composition, languages spoken, immigration trends, and household characteristics (e.g., living arrangements for children). Understanding how the population is changing and where areas of growth will occur can allow decision makers to provide more resources in advance of that community confronting a shortage of resources and supports. Knowing where non-English speakers live and their primary languages allows for translation and interpretation services to be provided so that language barriers do not prevent these families from accessing health care and other social services they may need.

What the Data Tell Us

The FTF Pima North Region occupies the northeastern corner of Pima County, and is located in the southeastern portion of Arizona. The Pima North Region is made up of a diverse mix of urban, sub-urban, and rural communities in the central and northern portions of Pima County, including most of metropolitan Tucson, South Tucson, Oro Valley and Marana.[7] The largest city in the region is Tucson, which is the second largest city in the state with a population of over 500,000 residents. The Pima North Region is also the home of the University of Arizona, Tucson.

[7] *http://www.firstthingsfirst.org/regions/Publications/FTF%20Snapshot%20-%20Pima%20North.pdf*

Exhibit 1.1. Map of the FTF Pima North Region and Pima County



Population Characteristics

According to the 2010 Census, the FTF Pima North Region has a total population of 697,919 residents. There are nearly 50,000 children under six years old in the region, accounting for seven percent of the total population in the region and nine percent of children ages zero to five statewide (see Exhibit 1.2). Children ages zero to five make up a slightly lower proportion in the FTF Pima North Region than in the State of Arizona and Pima County. Further age breakdowns are available in Appendix 1.1.

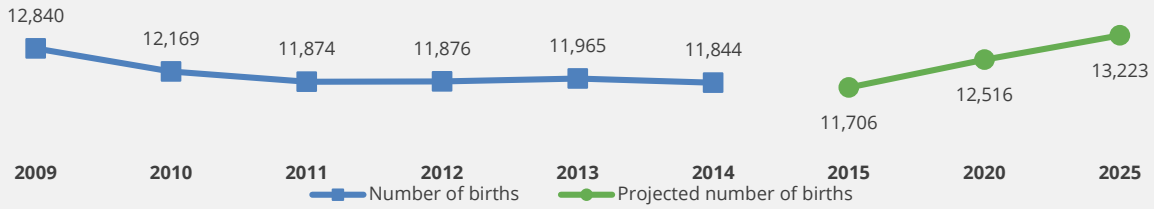
Exhibit 1.2. 2010 Population of Arizona, Pima County, and the FTF Pima North Region

	Arizona	Pima County	FTF Pima North Region
Total Population	6,392,017	980,263	697,919
Population of children 0-5	546,609	74,796	48,064
Percent of children 0-5 out of total population	8.6%	7.6%	6.9%

U.S. Census Bureau; 2010 Census Summary File 1; Tables P11 & P14; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>

The number of births in the FTF Pima North Region declined from 8,340 in 2009 to 7,762 in 2014 (data not shown), a seven percent decrease[8]. This compares to a six percent decrease for Arizona. Although the actual number of births has decreased in recent years, the number of births and the population of children ages zero to five in Pima County are expected to increase over the next several decades. The number of births in Pima County is projected to increase to 13,223 by 2025 (see Exhibit 1.3). Similarly, the number of children ages zero to five in the county is projected to increase over the next decade; reaching nearly eighty thousand by 2025 (see Exhibit 1.4). This indicates a growing need for early education and health services for this population in the coming years and emphasizes the importance of removing barriers and supporting family engagement and development to ensure the youngest children in the region will thrive.

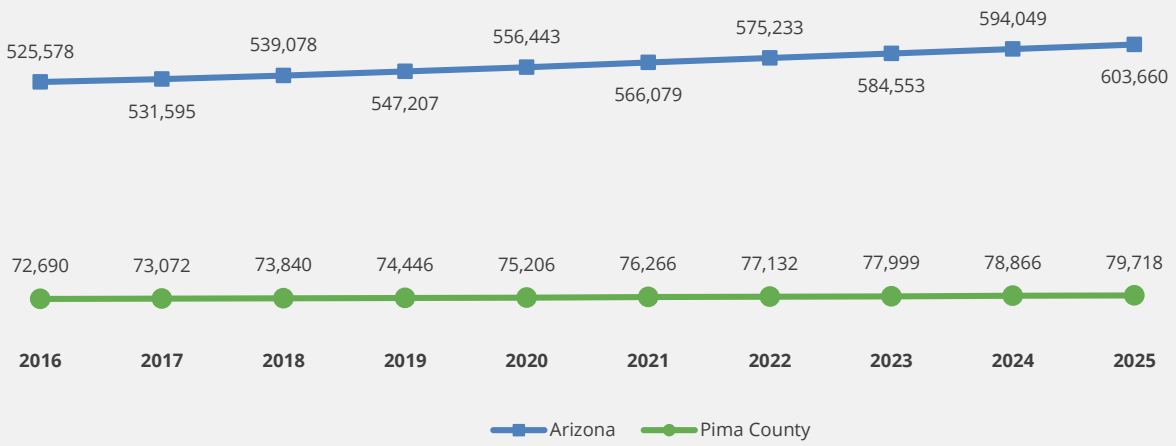
Exhibit 1.3. Number of births from 2009 to 2014 and projected number of births from 2016 to 2025 in Pima County



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
Arizona Department of Administration, Office of Employment & Population Statistics (2015). Arizona Population Projections: 2015 to 2050, Medium Series

[8] *Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.*

Exhibit 1.4. Projected population of children 0-5 in Arizona and Pima County



Arizona Department of Administration, Office of Employment & Population Statistics (2015). Arizona Population Projections: 2015 to 2050, Medium Series

Demographics

In the FTF Pima North Region, one-fourth of adults ages eighteen and over (25%) identify as Hispanic or Latino. This is lower than the 47 percent of children ages zero to four and 40 percent of mothers who identify as Hispanic or Latino (see Exhibit 1.5 and Exhibit 1.6). The large difference between the race/ethnicity of adults ages 18 and over and children ages zero to four indicates that the Hispanic/Latino population of the FTF Pima North Region will increase while the White population decreases, as families with young children are more likely to be Hispanic or Latino than the general population in the region.

Exhibit 1.5. Distribution of race/ethnicity in FTF Pima North Region

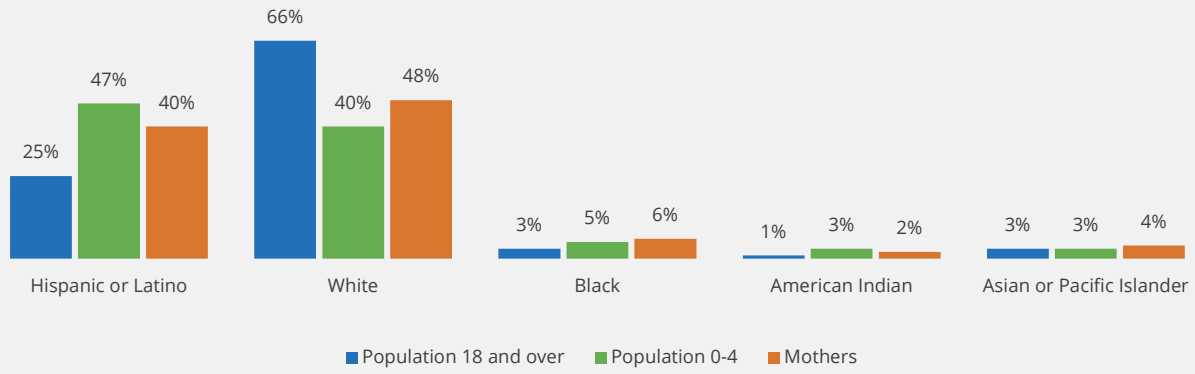
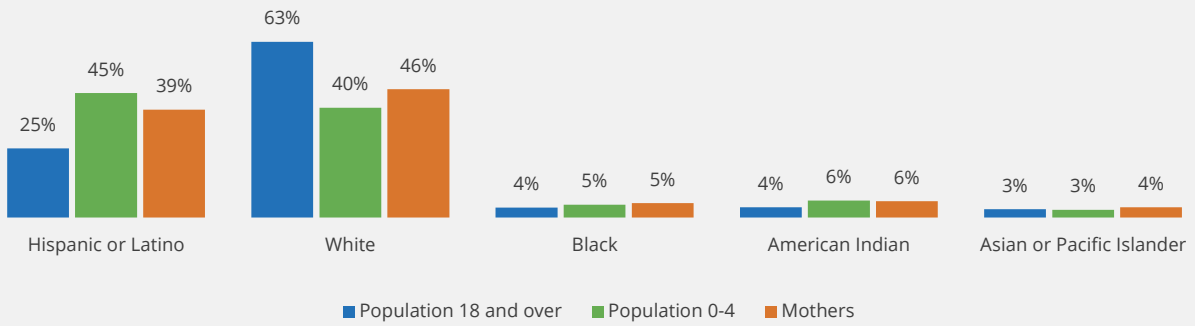


Exhibit 1.6. Distribution of race/ethnicity in Arizona

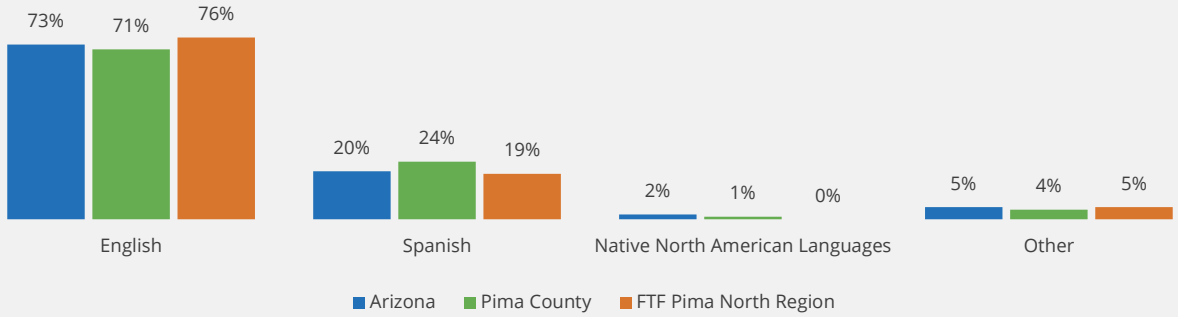


U.S. Census Bureau; 2010 Census Summary File 1; Table P11; generated by AZ FTF using American FactFinder; http://factfinder2.census.gov
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I; generated by AZ FTF using American FactFinder; http://factfinder2.census.gov

Approximately three out of four people in the region (76%) speak English as their primary language, while 19 percent primarily speak Spanish and an additional five percent speak a language other than English, Spanish, or a Native North American language (see Exhibit 1.7). In addition to the 24 percent of the population that primarily speak a language other than English at home, seven percent speak English less than "very well" and four percent of households are limited English speaking households (see Exhibit 1.8).[9] As the Hispanic/Latino population continues to grow, the cultural diversity of the region may change as well, indicating a need for more culturally responsive services.

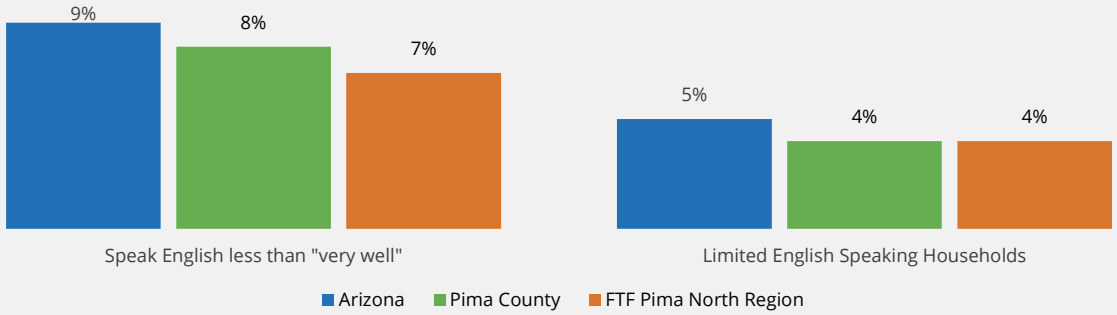
[9] *The United States Census Bureau defines limited English speaking households as a "household in which no one 14 and over speaks English only or speaks a language other than English at home and speaks English very well."*

Exhibit 1.7. Primary language spoken at home for population ages 5 and over



U.S. Census Bureau; 2014 American Community Survey 5-Year Estimates, Table B16001; generated by AZ FTF using American FactFinder; <http://factfinder2.census.gov>

Exhibit 1.8. Percentage of population that speaks English less than "very well" and percentage of linguistically isolated households



U.S. Census Bureau; 2014 American Community Survey 5-Year Estimates, Tables B16001 & B16002; generated by AZ FTF using American FactFinder; <http://factfinder2.census.gov>

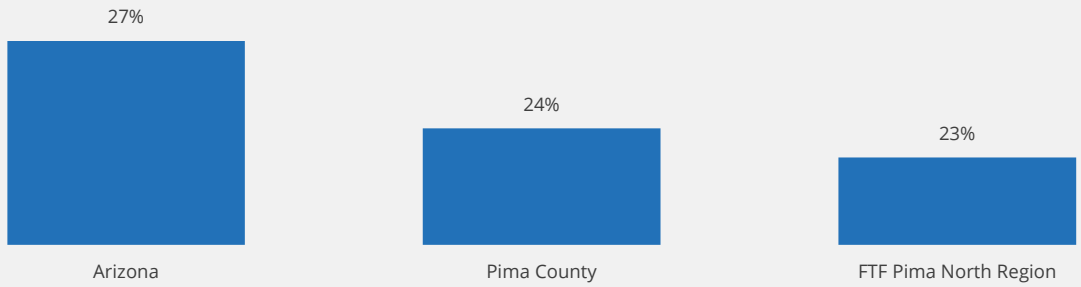
In the FTF Pima North Region six percent of the population are not US citizens compared to eight percent in Arizona.[10] Children ages zero to five in the FTF Pima North Region are also less likely to be living with foreign-born parents than children ages zero to five in Arizona (see Exhibit 1.9). In Pima County there were an estimated 1,076 migrant farmworkers and 569 seasonal farmworkers in 2008 (see Exhibit 1.10). Statewide data regarding refugee arrivals is available in Appendix 1.2.

[10] U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B05001; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>

6 Percent of the population in the **FTF Pima North Region** are not U.S. Citizens

8 Percent of the population in **Arizona** are not U.S. Citizens

Exhibit 1.9. Percentage of children 0-5 living with foreign-born parents



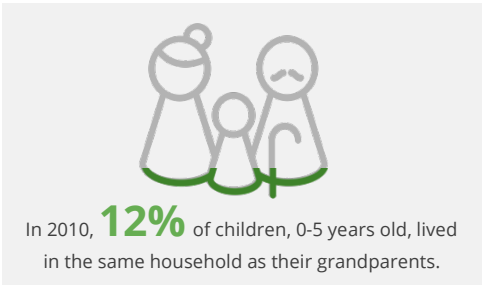
U.S. Census Bureau; 2014 American Community Survey 5-Year Estimates, Table B05009; generated by AZ FTF using American FactFinder; <http://factfinder2.census.gov>

Exhibit 1.10. 2008 estimated number of migrant and seasonal farm workers

	Arizona	Pima County
Number of migrant farm workers	39,913	1,076
Number of seasonal farm workers	27,791	569

Larson (2008). Migrant and Seasonal Farmworker Enumeration Profiles Study, Arizona. Retrieved from ***http://aachc.org/wp-content/uploads/2014/01/PDF14-Arizona.pdf***

Household Characteristics and Living Arrangements



There are almost 300,000 households in the FTF Pima North Region and 35,000 (12%) include children ages zero to five years old (see Exhibit 1.11). Although the majority of children ages zero to five live in married-couple households, nearly 40 percent of households with children ages zero to five are single-parent households and four percent of children ages zero to five in the FTF Pima North Region do not live with their parents (see Exhibit 1.12). Children that live and grow up in households with two parents have higher levels of well-being and access to more economic, social, and psychological resources than children that grow up in single-parent households.[11] Given the barriers that children from single-parent households face, it is important that those parents and children have services that meet their needs. Additionally, 12 percent of children ages zero to five in the region live in the same household as their grandparents. Of children ages zero to seventeen that live in the same household as a grandparent, 54 percent are primarily cared for by a grandparent, which is similar to Arizona at 53 percent.[12] There are several advantages to living in a mutigenerational household, including an increase in emotional well-being and grandparents serving as role models in the socialization of children. However, this also indicates that young families may not have the resources to live on their own and may be living with their elderly parents. Grandparents raising their grandchildren may also require additional support due to the nontraditional family structure, the changes in parenting practices since grandparents were raising children, and the fact that many older adults live on fixed incomes and may struggle with caring for dependents. There may also be cultural components that lead to grandparents living in the same household as their grandchildren and being the primary caregiver.

Exhibit 1.11. Number of households and household characteristics

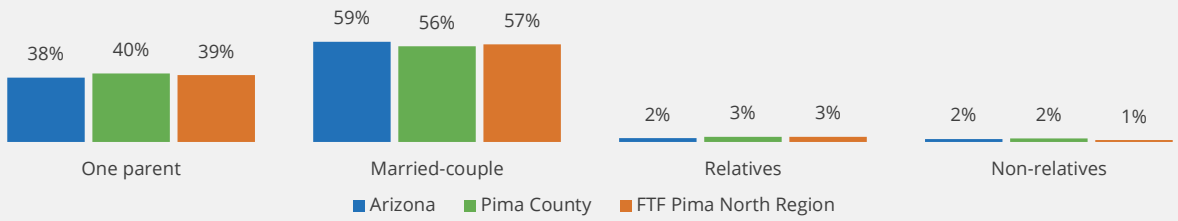
	Arizona % (n)	Pima County % (n)	FTF Pima North Region % (n)
Total number of households	2,380,990	388,660	292,121
Households with children 0-5	16.1% (384,441)	13.9% (53,862)	12.0% (35,013)
Married-couple households with children 0-5	65.1% (250,217)	61.7% (33,220)	60.8% (21,301)
Single-male households with children 0-5	11.3% (43,485)	11.4% (6,119)	11.5% (4,020)
Single-female households with children 0-5	23.6% (90,739)	27.0% (14,523)	27.7% (9,692)

U.S. Census Bureau; 2010 Census Summary File 1; Table P20; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>

[11] *Foster, E. M., & Kalil, A. (2007). Living arrangements and Children's development in Low-Income white, black, and latino families. Child development, 78(6), 1657-1674.*

[12] *U.S. Census Bureau; American Community Survey. 2014 American Community Survey 5-Year Estimates, Tables B05009 & B17006; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>*

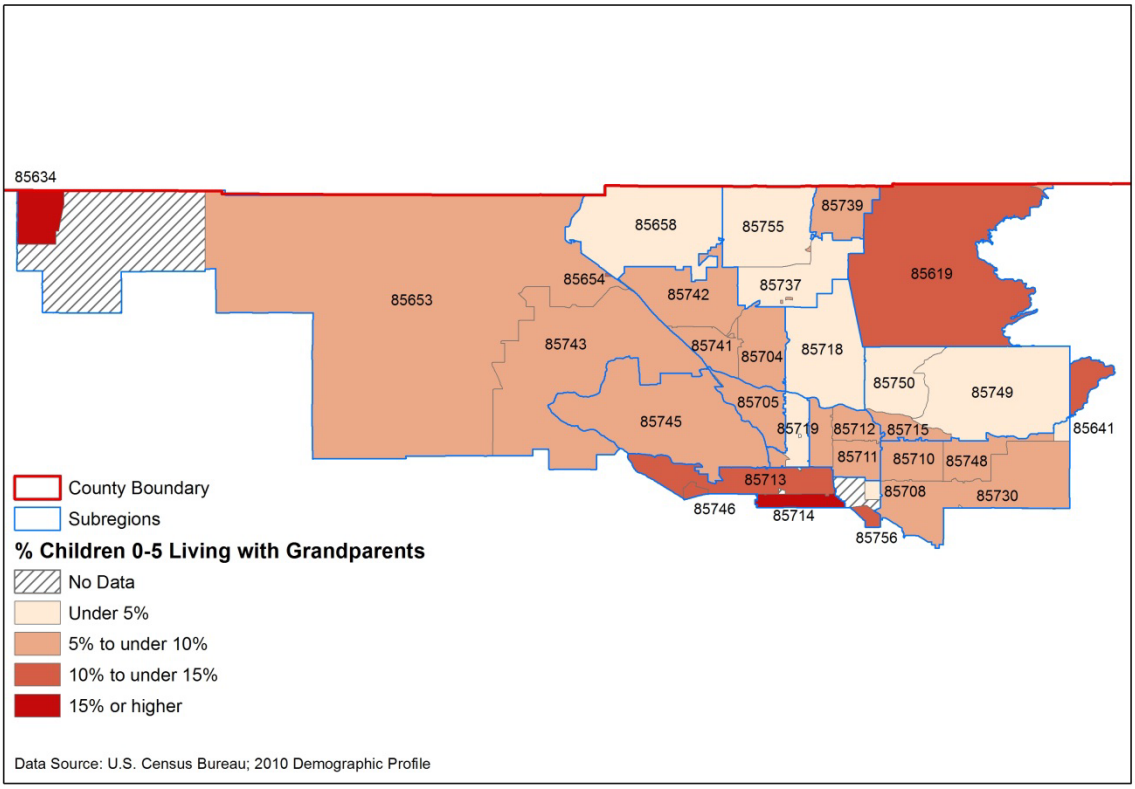
Exhibit 1.12. Living arrangements of children 0-5



U.S. Census Bureau; 2014 American Community Survey 5-Year Estimates, Tables B05009, B09001, & B17006; generated by AZ FTF using American FactFinder; <http://factfinder2.census.gov>

Exhibit 1.13 displays the percentage of children living with grandparents by zip code. In two zip codes, 85634 and 85714, more than 15 percent of children are living with grandparents. An additional three zip codes, 85619, 85713, and 85641 have 10-15 percent of children living with grandparents. This information highlights some key areas within the FTF Pima North Region to provide additional support for these families.

Exhibit 1.13 Percentage of children 0-5 living with grandparents by zip code



DEMOGRAPHIC HIGHLIGHTS

The FTF Pima North Region is a mix of urban, sub-urban, and rural communities situated in northern Pima County and accounts for nearly 10 percent of the children under 6 years old in the state of Arizona. The demographic profile of the region is similar to the state of Arizona with one quarter of the population identifying as Hispanic or Latino and two-thirds as White. Over 75 percent of residents speak English as their primary language and less than 10 percent speak English less than "very well." The majority of children ages zero to five live in a household with two parents, but 27.7 percent live in single-female households. Understanding these characteristics is important because economic, educational, health, and legal disparities occur across many population characteristics. The demographic profile of a community can be a key element used to inform decisions made by policy makers on the specific needs of young children and their families in the region.

Below are key findings that highlight the demographic needs, assets, and data-driven considerations for the FTF Pima North Region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
The percentage of children under age six identifying as Hispanic or Latino in the FTF Pima North Region is greater than the percentage of the total population 18 and over that identifies as Hispanic or Latino, both in the region and State. Furthermore, this population is expected to increase over the next several decades.	Support culturally appropriate services for families.
The population of children under the age of six is projected to grow at a modest and steady rate, allowing the region to foresee and prepare for the growing demands of their youngest residents.	Discuss tactics for planning ahead for the projected slow, but steady, growth of the under six population and the needs that accompany that growth.

Needs	Considerations
About 40 percent of children 0-5 live in single-parent households. Compared to two parent households, these living arrangements present additional barriers and difficulties for the parties involved..	Promote supports and resources that can help subsidize child care and other expenses for single parents.

2. Economic Circumstances

Why it Matters

The economic situation of children and their families has a large impact on their ability to live successful, independent lives as adults. Outcomes such as school achievement, physical health, and emotional well-being are all impacted by a child's economic situation as they are growing and developing.[13] Additionally, being unemployed or living below the federal poverty level means that families have fewer resources to be able to meet their basic needs and support their child's growth and development, such as having a stable, quality home and being able to provide adequate and nutritious food.

It is critical to support young children and families by maintaining a household where children can thrive, including safe and stable housing and access to nutritious foods. Recent research has shown that housing quality, including the physical housing quality and neighborhood environment, as well as housing stability play an important role in children's development and well-being.[14,15] [16] Poor housing conditions are a strong predictor of emotional and behavioral problems and poor health outcomes.[17] [18] Housing instability, which includes frequent moves, difficulty paying rent, being evicted, or being homeless, is also associated with poor health, academic, and social outcomes. [19] Children that experience housing instability demonstrate higher grade retention, higher high school dropout rates, and lower educational attainment as adults.[20] Thus, housing is an important component to consider when evaluating the conditions that affect a child's development and well-being during their first five years of life. Lack of access to healthy food and general food insecurity can also lead to numerous issues for children and mothers, including birth complications, delayed development, learning difficulties, and chronic health conditions.[21] [22]

---

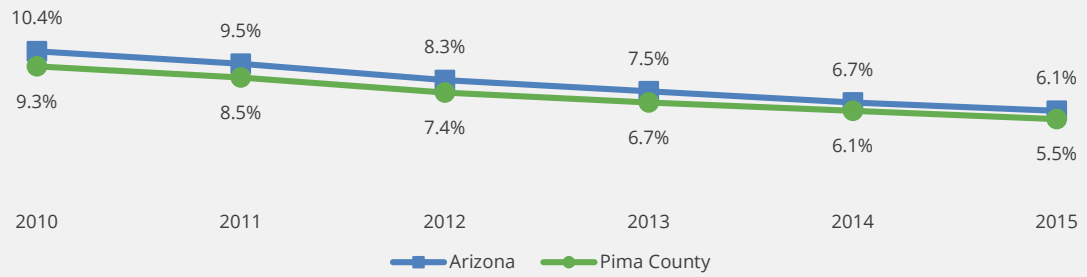
[13] *Brooks-Gunn, J., & Duncan, G. J. (1997). The effects of poverty on children. The future of children, 55-71.*
[14] *U.S. Department of Housing and Urban Development (2014). Housing's and Neighborhoods' Role in Shaping Children's Future. Retrieved from https://www.huduser.gov/portal/periodicals/em/fall14/highlight1.html*
[15] *Roy, J., Maynard, M., & Weiss, E. (2009). The Hidden Costs of the Housing Crisis: The Long-Term Impact of Housing and Affordability and Quality on Young Children's Odds of Success. Partnership for America's Economic Success. Retrieved from http://www.pewtrusts.org/~/media/legacy/uploadedfiles/wwwpewtrustsorg/reports/partnership_for_americas_economic_success/paeshousingreportfinal1pdf.pdf*
[16] *Sandstrom, H. & Huerta, S. (September 2013). The Negative Effects of Instability on Child Development: A Research Synthesis. Urban Institute. Retrieved from http://www.urban.org/research/publication/negative-effects-instability-child-development-research-synthesis/view/full_report*
[17] *U.S. Department of Housing and Urban Development (2014). Housing's and Neighborhoods' Role in Shaping Children's Future. Retrieved from https://www.huduser.gov/portal/periodicals/em/fall14/highlight1.html*
[18] *Bashir, S. (2002). Home Is Where the Harm Is: Inadequate Housing as a Public Health Crisis. American Journal of Public Health, 92(5), 733-738.*
[19] *Sandstrom, H. & Huerta, S. (September 2013). The Negative Effects of Instability on Child Development: A Research Synthesis. Urban Institute. Retrieved from http://www.urban.org/research/publication/negative-effects-instability-child-development-research-synthesis/view/full_report*
[20] *Kushel, M., Gupta, R., Gee, L., & Haas, J. (2005). Housing Instability and Food Insecurity as Barriers to Health Care Among Low-Income Americans. Journal of General Internal Medicine, 21(1), 71-77.*
[21] *Feeding America (2016). Child Development. Retrieved from http://www.feedingamerica.org/hunger-in-america/impact-of-hunger/child-hunger/child-development.html*
[22] *Ke, Janice, and Elizabeth Lee Ford-Jones. "Food Insecurity and Hunger: A Review of the Effects on Children's Health and Behaviour." Paediatrics & Child Health 20.2 (2015): 89–91. Print.*

What the Data Tell Us

Employment Indicators

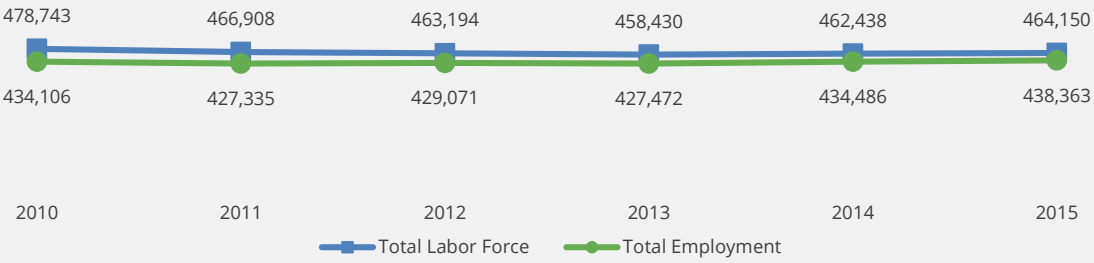
The unemployment rate in Pima County has been declining since 2010 and was under six percent in 2015. The unemployment rate in Pima County has also been consistently lower than the unemployment rate in Arizona (see Exhibit 2.1). The number of people in the labor force and the number of people employed have been fairly constant over the past six years (see Exhibit 2.2).

Exhibit 2.1. Average unemployment rates for Arizona and Pima County



U.S. Department of Labor, Bureau of Labor Statistics (2016). Local Area Unemployment Statistics (LAUS), Arizona Office of Employment.

Exhibit 2.2. Number of people in the labor force and employed in Pima County



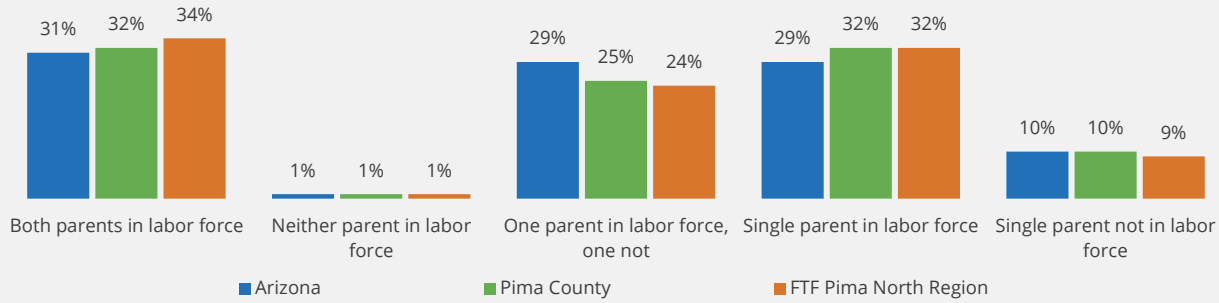
U.S. Department of Labor, Bureau of Labor Statistics (2016). Local Area Unemployment Statistics (LAUS), Arizona Office of Employment.

In the FTF Pima North Region approximately 90 percent of children ages zero to five live in a household where at least one adult is in the labor force (see Exhibit 2.3), which is similar to the percentage for Arizona. About two-thirds (66%) of children ages zero to five have either both parents in the labor force or a single parent in the labor force, indicating they have some need for child care. In the FTF Pima North Region the three top employers are Raytheon Missile Systems, University of Arizona, and Davis-Monthan Air Force Base, each of which employ more than 10,000 people.[23] See

[23] *City of Tucson Department of Finance (2013). Comprehensive Annual Financial Report. Retrieved from https://www.tucsonaz.gov/files/finance/CAFR13.pdf*

Chapter 4 for more details about child care in the FTF Pima North Region.

Exhibit 2.3. Employment status of parents with children 0-5

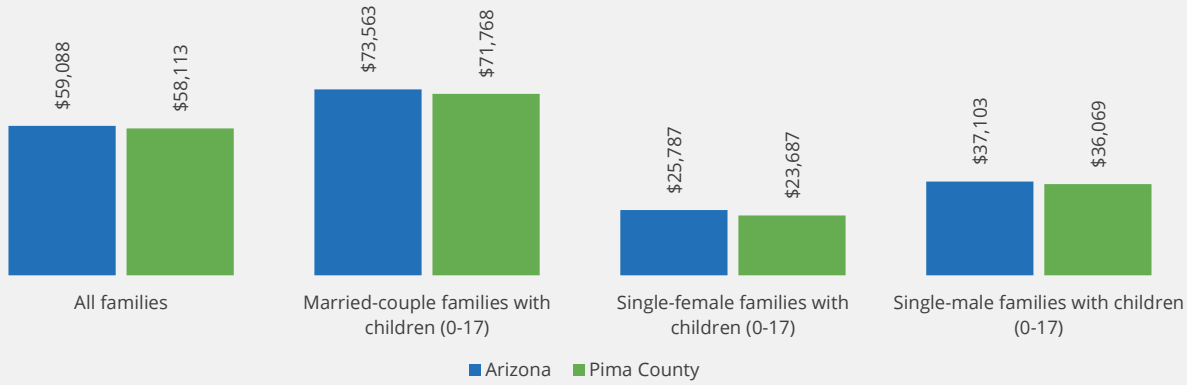


U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>.

Median Income and Poverty

The median income of all families in Pima County is $58,113. Single-parent families with children ages zero to seventeen, which comprise over 30 percent of households with children ages zero to five, make significantly less, on average, than married-couple families. Exhibit 2.4 shows the difference in median income for married-couple families, single-female families, and single-male families.

Exhibit 2.4. Median income by type of family



U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B19126; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>.

According to a 2012 report published by the Center for Women's Welfare, the annual income needed to be self-sufficient in Pima County for an adult living with an infant is $34,758 and for an adult living with preschooler is $38,688 (see Exhibit 2.5). The self-sufficiency standard income is nearly $10,000 more than the median income for single-female families with children ages birth to 17. Families who are

living with fewer financial resources than needed to afford basic needs are likely to encounter several challenges that may prevent them from living a healthy life. [24, 25] Securing affordable housing, child care, and nutritious food are likely significant barriers for these families. Living below the self-sufficiency standard negatively impacts health and well-being, including placing children ages zero to five at risk for developmental delays and low academic achievement.[26]

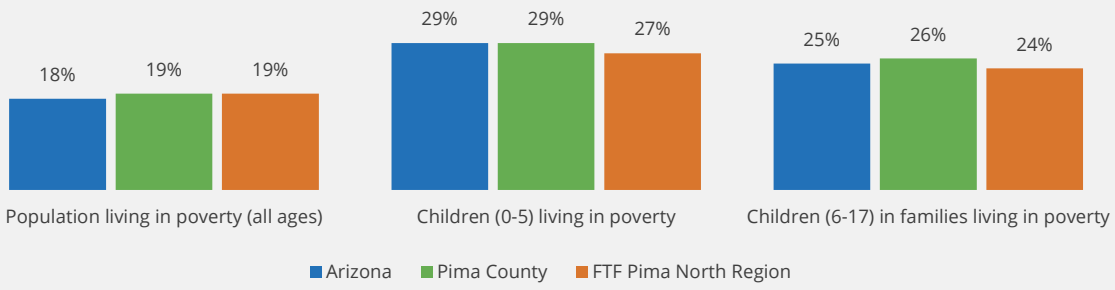
Exhibit 2.5. Self-sufficiency standard for Pima County

Wage	Adult	Adult + infant	Adult + preschooler	Adult + school-age	Adult + teenager
Hourly	$9.41	$16.46	$18.32	$15.94	$12.44
Monthly	$1,657	$2,897	$3,224	$2,806	$2,189
Annual	$19,878	$34,758	$38,688	$33,670	$26,272

Center for Women's Welfare (2012). The Self-Sufficiency Standard for Arizona. Retrieved from http://selfsufficiencystandard.org/arizona

The large number of single-parent families combined with their low median income contributes to a sizable portion of the population in the FTF Pima North Region living in poverty. In the FTF region 19 percent of the population and 27 percent of children ages zero to five are living in poverty (see Exhibit 2.6).

Exhibit 2.6. Percentage of the population living in poverty

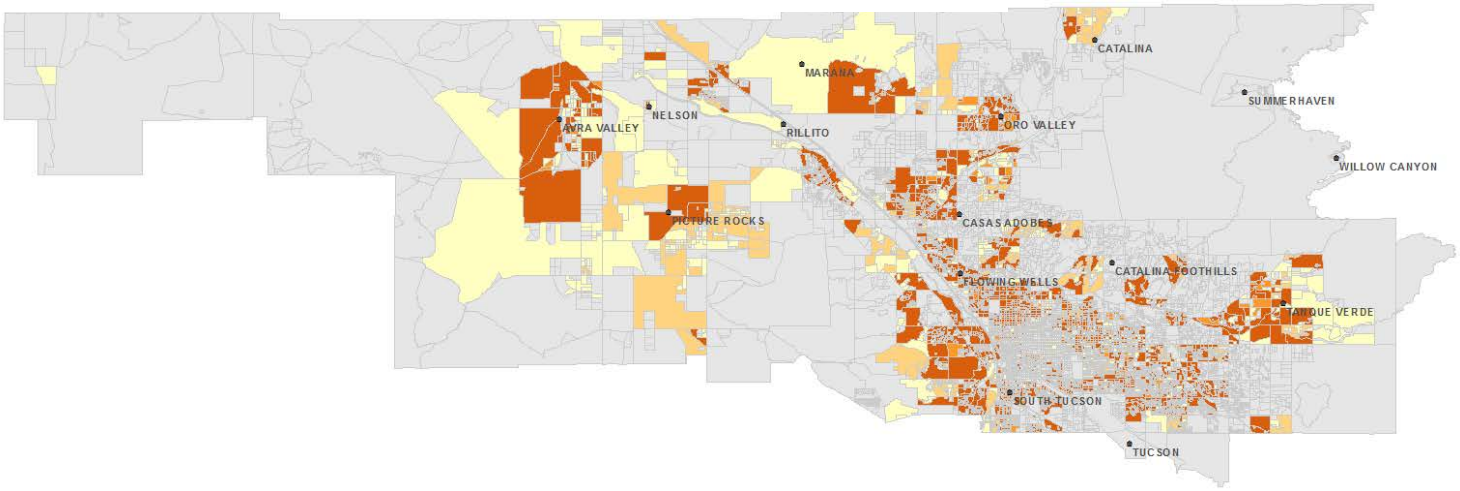


U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>.

[24] *Brooks-Gunn, J., & Duncan, G. J. (1997). The effects of poverty on children. The future of children, 55-71.*
[25] *McLoyd, V. C. (1998). Socioeconomic disadvantage and child development. American psychologist, 53(2), 185.*
[26] *Brooks-Gunn, J., & Duncan, G. J. (1997). The effects of poverty on children. The future of children, 55-71.*

Exhibit 2.7 shows population and poverty rates for the entire FTF Pima North Region. Regions around Avra Valley, Picture Rocks, Oro Valley, and Tanque Verde have high poverty and high population rates.

Exhibit 2.7 Map of FTF Pima North Region Population and Poverty



Legend	# of Census Blocks	Poverty 0-5	Population 0-5	% Poverty
High Poverty-High Population	2,129	10,415	31,314	33%
High Poverty-Low Population	475	687	1,421	48%
Low Poverty-High Population	655	315	4,857	6%
Low Poverty-Low Population	1,949	647	3,579	18%
No Poverty	6,199	0	6,893	0%
Total	**11,407**	**12,065**	**48,064**	**25%**

Exhibit 2.8 displays population and poverty rates for areas (sub-regions) within the Pima North region. Several sub-regions have high populations and high poverty rates which may indicate a need for additional support and services in these areas including West Gate Pass (85745), Flowing Wells (85705), South Tucson (85726, 85713, and 85714), Central East (85716, 85712, and 85711), and Southeast (85710, 85748, and 85730).

Exhibit 2.8 Map of Population and Poverty for FTF Pima North Sub-Regions

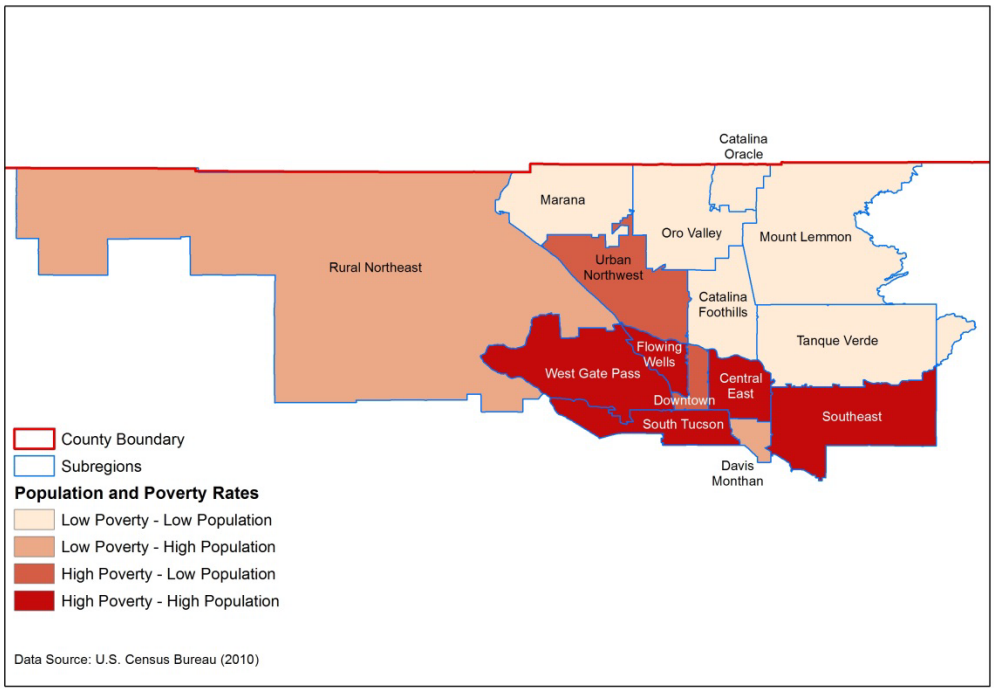
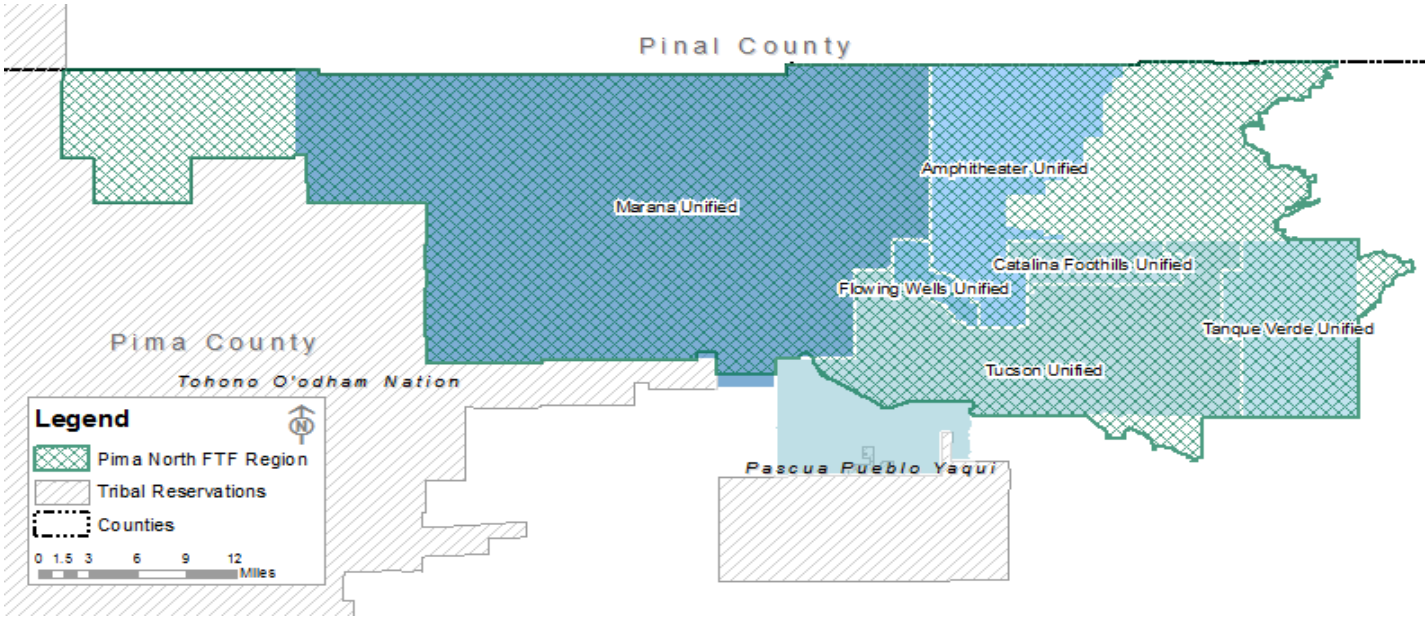


Exhibit 2.9 shows a map of the school districts within the FTF Pima North Region and Exhibit 2.10 shows the percentage of children ages five to seventeen living in poverty by school district in Pima County. Flowing Wells Unified District and Tucson Unified District have the highest percentages of children in poverty (33.4% and 28.0%, respectively).

Exhibit 2.9. Map of FTF Pima Region School Districts



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

Exhibit 2.10 Children 5 to 17 living in poverty by school district

School district (number of children 5-17)	Estimated percentage of children 5 to 17 living in families in poverty
Amphitheater Unified District (n=19,047)	20.9%
Catalina Foothills Unified District (n=4,653)	8.1%
Flowing Wells Unified District (n=5,168)	33.4%
Marana Unified District (n=15,510)	13.1%
Tanque Verde Unified District (n=1,921)	8.2%
Tucson Unified District (n=73,065)	28.0%

U.S. Census Bureau; 2014 Small Area Income and Poverty Estimates; generated by Harder+Company Community Research; using American FactFinder; <http://factfinder2.census.gov>.

In the region, individuals who identify as White and individuals who identify as Asian are the only racial and ethnic groups that have a poverty rate below 20 percent. Individuals who identify as American Indian or Alaskan Native are most likely to be living in poverty (see Exhibit 2.11). Poverty rates for each racial and ethnic group in the FTF Pima North Region are similar to the State. However, American Indian or Alaskan Natives in FTF Pima North Region are less likely to be living in poverty than American Indian or Alaskan Natives in Pima County as a whole.

Exhibit 2.11. Percentage of the population below the federal poverty level by race/ethnicity

	Arizona n=	Pima County n=	FTF Pima North Region n=
Black or African-American	24.7%	24.7%	**26.8%**
American Indian or Alaskan Native	38.5%	42.4%	**32.9%**
Asian	13.7%	18.0%	**19.8%**
Native Hawaiian and Other Pacific Islander	27.5%	18.4%	**21.7%**
Other Race	29.3%	29.9%	**28.8%**
Two or More Races	19.9%	21.1%	**23.4%**
White, not Hispanic	11.3%	12.7%	**13.5%**
Hispanic or Latino	28.1%	26.5%	**26.5%**

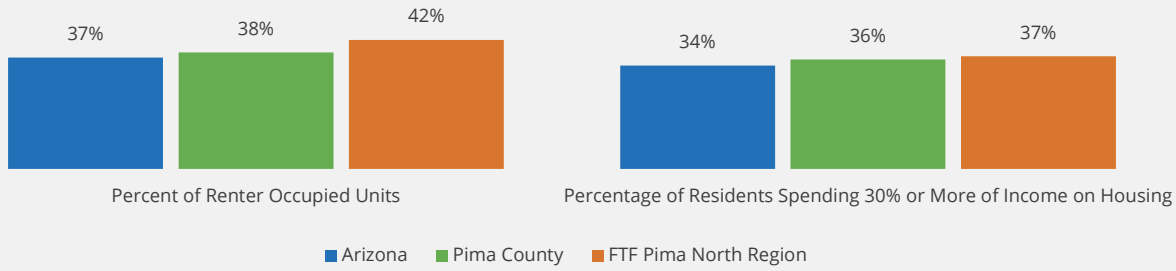
U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001B, Table B17001C, Table B17001D, Table B17001E, Table B17001F, Table B17001H, Table B17001I; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>.

Housing and Food Insecurity

In the FTF Pima North Region, 42 percent of occupied housing units are rented and 37 percent of residents do not have affordable housing, based on the common definition of spending less than 30 percent of one's income on housing (see Exhibit 2.12). Additionally, Town of Marana has a higher foreclosure rate than Arizona and Pima County (see Exhibit 2.13). With more than one in three residents in the region living without affordable housing and a higher foreclosure rate than the state, residents are at high risk for housing instability.[27]

[27] *Roy, J., Maynard, M., & Weiss, E. (2008). The Hidden Costs of the Housing Crisis. The Partnership for America's Economic Success.*

Exhibit 2.12. Percentage of rented housing units and residents spending 30 percent or more of income on housing



U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B25106; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>.

Exhibit 2.13. Residential foreclosure and pre-foreclosure rates

Location	Foreclosure and pre-foreclosure rates
Arizona	1 in every 1,721
Pima County	1 in every 1,136
- Marana City	1 in every 515
- Tucson City	1 in every 1,236

RealtyTrac (July 2016). Arizona Real Estate and Market Info. Retrieved from http://www.realtytrac.com/statsandtrends/foreclosuretrends/az

In Pima County 24 percent of the population has low access to grocery stores, compared to 19 percent in Arizona. Pima County has a similar number of grocery stores, fast food restaurants, SNAP-authorized stores, and WIC-authorized stores per capita in the county when compared to the state (see Exhibit 2.14). These environmental factors, combined with the poverty rate discussed above, contribute to 15 percent of the population in Pima County being food insecure, which is defined as having limited or uncertain access to adequate food. In addition, almost one quarter (25%) of children under

In 2010, **24%** of the Pima County population had limited access to grocery stores.

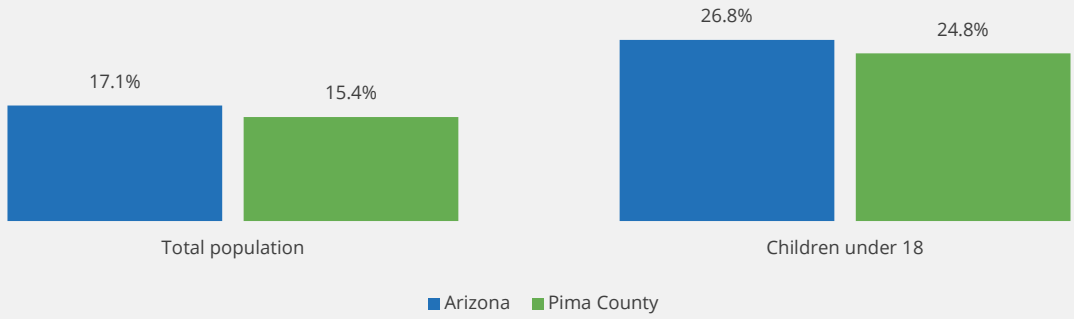
eighteen are food insecure, which is a slightly lower rate than Arizona (see Exhibit 2.15). Not having access to adequate or nutritious food can have serious detrimental effects upon young children including learning difficulties, delayed development, and chronic health conditions.[28] [29]

Exhibit 2.14. Food accessibility indicators

	Year	Arizona	Pima County
Percent of population with low access to grocery stores	2010	19.0%	23.7%
Grocery stores per 1,000 people	2012	0.1259	0.1219
Fast food restaurants per 1,000 people	2012	0.6467	0.6318
SNAP-authorized stores per 1,000 people	2012	0.5596	0.5911
WIC-authorized stores per 1,000 people	2012	0.1106	0.0877

United States Department of Agriculture and Economic Research Service (2012). Food Environment Atlas. Retrieved from http://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas.aspx

Exhibit 2.15. Food insecurity rates



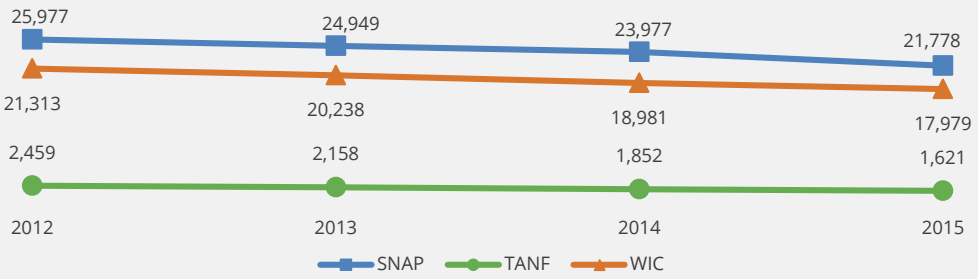
Gundersen, C., A. Dewey, A. Crumbaugh, M. Kato & E. Engelhard. Map the Meal Gap 2016: Food Insecurity and Child Food Insecurity Estimates at the County Level. Feeding America, 2016.

There are several federal and local programs and services aimed at providing families with the food they need, including the SNAP, Temporary Assistance for Needy Families (TANF), WIC, Child and Adult Food Care Program (CACFP), Summer Food Program (SFP), and free and reduced priced lunch programs for children in schools. Information on the percentage of students eligible for free and reduced lunch programs by school can be found in Appendix 2.1.

[28] *http://www.feedingamerica.org/hunger-in-america/impact-of-hunger/child-hunger/child-development.html*
[29] *Ke, Janice, and Elizabeth Lee Ford-Jones. "Food Insecurity and Hunger: A Review of the Effects on Children's Health and Behaviour." Paediatrics & Child Health 20.2 (2015): 89–91. Print.*

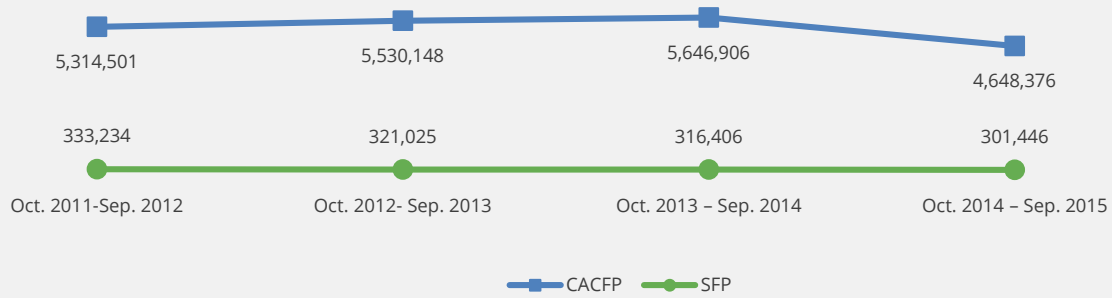
Despite the prevalence of these programs, in recent years the number of children and families receiving assistance has decreased in the region (see Exhibits 2.16 and 2.17). Federal programs such as SNAP and TANF have decreased in recent years due to the expiration of benefit increases instituted during the recession.[30] These decreases come even as the number of families living in poverty has increased nationally.[31]

Exhibit 2.16. Number of children served by SNAP, TANF, and WIC in the FTF Pima North Region



Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.1Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP). 1Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

Exhibit 2.17. Number of meals served by CACFP* and SFP in Pima County



**CACFP data include meals provided to adult care centers and emergency shelters*
Arizona Department of Education (2015). Child and Adult Food Care Program. Provided by AZ FTF.
Arizona Department of Education (2015). Summer Food Program. Provided by AZ FTF.

[30] *Rosenbaum, D. & Keith-Jennings, B. (2016). Snap Costs and Caseloads Declining. Center on Budget and Policy Priorities. Retrieved from http://www.cbpp.org/research/food-assistance/snap-costs-and-caseloads-declining*
[31] *Spalding, A. (2012). Decline of TANF Caseloads Not the Result of Decreasing Poverty. Kentucky Center for Economic Policy. Retrieved from http://kypolicy.org/decline-tanf-caseloads-result-decreasing-poverty/*

ECONOMIC HIGHLIGHTS

The unemployment rate in Pima County has been consistently lower than the state and declining over the past several years. The median income of all families in the Pima county is $58,113, and is slightly higher than the median income statewide, which is $59,088. Single-parent families with children ages zero to seventeen, which comprise over 30 percent of households with children ages zero to five, make significantly less, on average, than married-couple families. This contributes to the high poverty rate in the region; 27 percent of children ages zero to five in the region live in poverty. Additionally, 37 percent of households spend more than 30 percent of their income on rent and 24.8 percent of children under age eighteen in Pima County experience food insecurity. To address these needs the region has assets that serve families that may otherwise have difficulty purchasing items to meet their basic needs such as the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Women, Infants, and Children (WIC), Child and Adult Food Care Program (CACFP), and Summer Food Program (SFP).

Below are key findings that highlight the economic needs, assets, and data-driven considerations for the FTF Pima North Region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
The FTF Pima North Region has several programs, such as SNAP and WIC, aimed to support the availability of nutritious foods for children under six and their families.	Continue to promote community awareness of nutrition programs available to young children and their families.

Needs	Considerations
About 40 percent of children under six live in single-parent households, which earn substantially less money than dual parent households, and more than 25% of children 0-5 live in poverty.	Identify ways to support young children and connect families to other existing resources through FTF programming, such as preschool.
Over a quarter of children under eighteen in the county (25%) are food insecure and 27% live under the poverty level.	Further investigate food insecurity rates in the region to have a better understanding of how FTF can support young children who are food insecure.

3. Educational Indicators

Why it Matters

Children who participate in early care and education programs are more likely to perform better on future educational indicators (e.g., language and math proficiency). Moreover, numerous researchers in the field of early care and education have identified the first five years of life as a critical time for neurodevelopment.[32] Specifically, studies have shown that exposure to early literacy skills, informal math knowledge, and certain components of socioemotional development are precursors to academic success.[33] Other educational indicators that affect positive student outcomes include, but are not limited to, school attendance, proficiency exams, grades, graduation and dropout rates, and educational attainment. Research has also demonstrated an association between high school dropout rates and poor attendance as early as kindergarten; for example, on average dropouts have missed 124 days of school by the time they reach eighth grade.[34] Additionally, irregular attendance has a negative effect on school budgets and could potentially lead to fewer funds for essential classroom needs.[35] Higher education in Arizona experienced the nation's highest decrease (47%) in state spending per student from 2008 to 2015.[36] Research has also shown that students dropping out high school have an increased likelihood of earning less than high school graduates, being unemployed, and receiving public assistance, and a higher chance of being incarcerated and therefore likely to confront more barriers while raising a family.[37]

What the Data Tell Us

Student Attendance

Between 2014 and 2015, the percentage of students missing 10 or more days of school increased by between 2-3 percent across Arizona, Pima County, and the FTF Pima North Region (see Exhibit 3.1). Compared to the state, the rate of absences in Pima County and the FTF Pima North Region are slightly higher for children in grades one to three. It can also be observed that the higher the grade level, the fewer the students that are missing ten or more days of school. A list of school districts and schools included in this section can be found in Appendices 3.1 and 3.3.

---

[32] *Cohen, A. K., & Syme, S. L. (2013). Education: A Missed Opportunity for Public Health Intervention. American Journal Of Public Health, 103(6), 997-1001*

[33] *Lonigan, C. J., Phillips, B. M., Clancy, J. L., Landry, S. H., Swank, P. R., Assel, M., & ... School Readiness, C. (2015). Impacts of a Comprehensive School Readiness Curriculum for Preschool Children at Risk for Educational Difficulties. Child Development, 86(6), 1773-1793.*

[34] *Why attendance matters. (2016, June 9). Retrieved from http://www.greatschools.org/gk/articles/school-attendance-issues/*

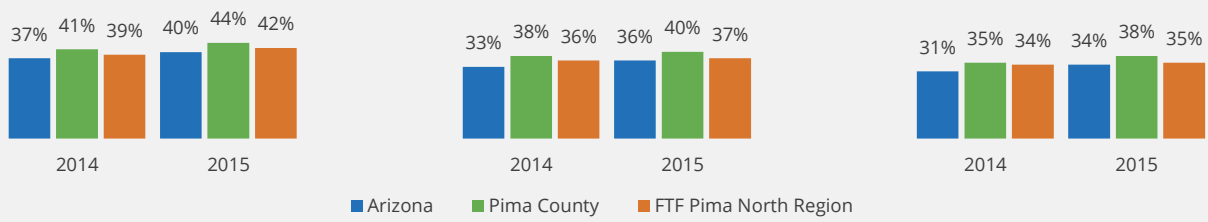
[35] *Every school day counts: The forum guide to collecting and using attendance data. (2009, February). Retrieved December 06, 2016, from https://nces.ed.gov/pubs2009/attendancedata/chapter1a.asp*

[36] *Mitchell, M., & Leachman, M. (2015, May 2015). Years of cuts threaten to put college out of reach for more students. Retrieved December 05, 2016, from http://www.cbpp.org/research/state-budget-and-tax/years-of-cuts-threaten-to-put-college-out-of-reach-for-more-students*

[37] *Christle, C. A., Jolivette, K., Nelson, M. C. (2007). School characteristics related to high school dropout rates. Journal of Remedial and Special Education, 28, 15. www.eric.ed.gov/ERICWebPortal/recordDetail?accno=EJ785964*

1st Graders 2nd Graders 3rd Graders

Exhibit 3.1. Students absent 10 or more days of school

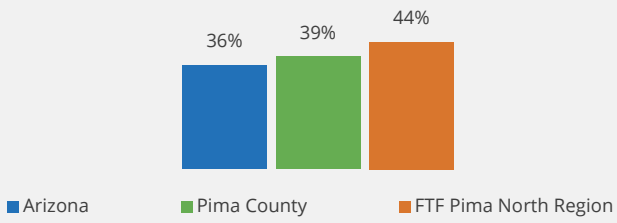


Arizona Department of Education (2015). Chronic Absences. Provided by AZ FTF.

Early Achievement

As council meeting members discussed, prior research indicates that pre-kindergarten enrollment can affect English Language Arts and math scores.[38] About four in ten children in the FTF Pima North Region (44%) who are between three to four years old are enrolled in nursery school, preschool, or kindergarten, which is slightly higher than Arizona (36%) and Pima County (39%; see Exhibit 3.2).

Exhibit 3.2. 2014 Children ages 3-4 enrolled in nursery school, preschool, or kindergarten



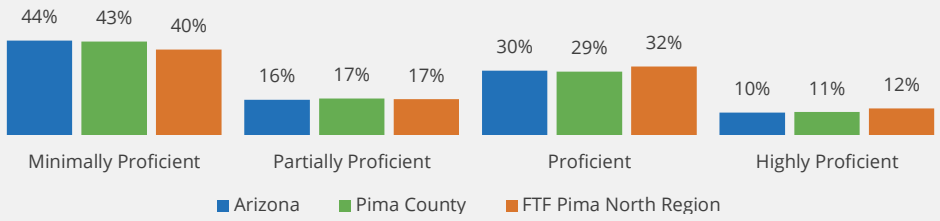
U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003; generated by AZ FTF; using American Fact Finder; <http://factfinder2.census.gov>.

The AzMERIT, which replaced AIMS in the 2014-2015 school year, is designed to assess students' critical thinking skills and their mastery of the Arizona College and Career Ready Standards established in 2010. Students who receive a proficient or highly proficient score are considered adequately prepared for success in the next grade. The English Language Arts (ELA) assessment results of the AzMERIT demonstrated that about 44 percent of all third graders in the FTF Pima North Region scored "proficient" or "highly proficient", which is about four percent higher than Arizona (see Exhibit 3.3). On

[38] *Andrews, R. J., Jargowsky, P., & Kuhne, K. (2012). The effects of Texas's targeted pre-kindergarten program on academic performance (No. w18598). National Bureau of Economic Research.*

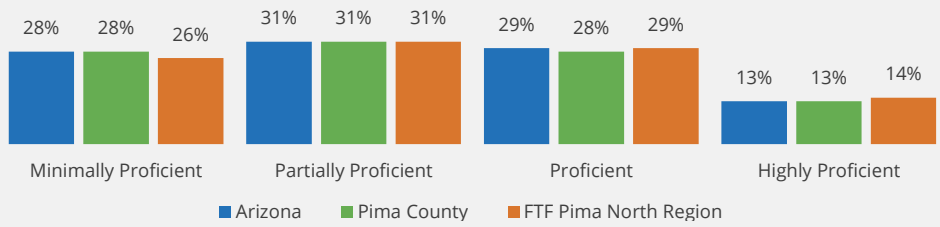
the Math assessment test about 43 percent of third graders, scored "proficient" or "highly proficient", 31 percent scored "partially proficient," and 26 percent scored "minimally proficient" across the FTF Pima North Region and Arizona (see Exhibit 3.4). Although ELA assessment results are slightly higher than the math assessment results, overall more than half of all third graders in both the State and the region are not meeting the standard proficiency for either subject.

Exhibit 3.3. 2015 AZMerit English Language Arts Assessment results for 3rd grade



Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

Exhibit 3.4. 2015 AZMerit Math Assessment results for 3rd grade students

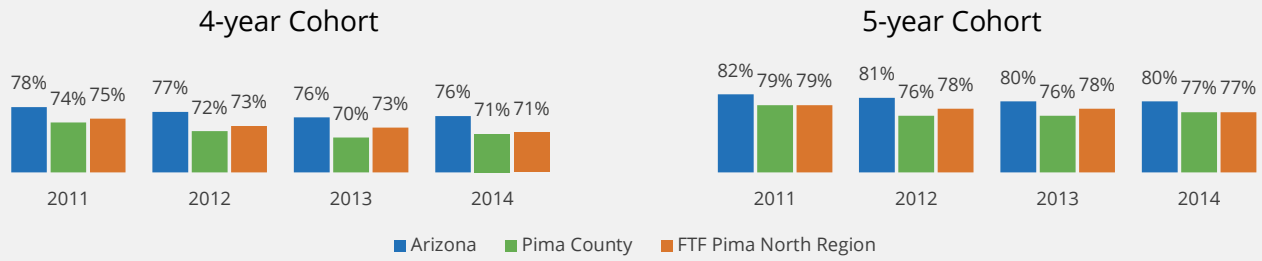


Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

High School Graduation & Dropout Rates

Between 2011 and 2014, the 4-year high school graduation rate decreased by four percent for the FTF Pima North Region, three percent for Pima County, and two percent for Arizona (see Exhibit 3.5). In 2014, the four-year graduation rates for the FTF Pima North Region were the same as Pima County (71%) but lower than the state. During that same time period, the FTF Pima North Region, Pima County, and Arizona also saw a decrease in the five-year graduation rate.

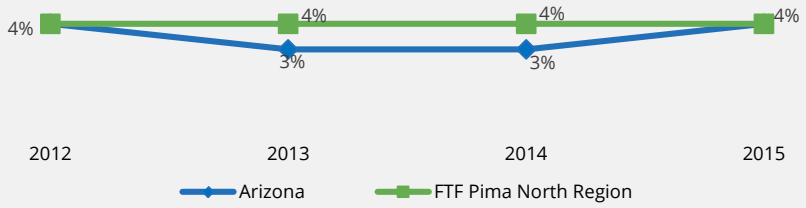
Exhibit 3.5. 2011-2014 High school graduation rates



Arizona Department of Education (2014). Graduation Rate 2018 Cycle. Provided by AZ FTF.
***The four-year graduation rate counts a student who graduates with a regular high school diploma in four years or less as a high school araduate in his or her oriainal cohort*

From 2012-2015, the percentage of students dropping out of high school in Arizona fluctuated between 3-4 percent while the percentage of students dropping out in the FTF Pima North Region remained at a four percent dropout rate (see Exhibit 3.6).

Exhibit 3.6. 2012-2015 High school dropout rates

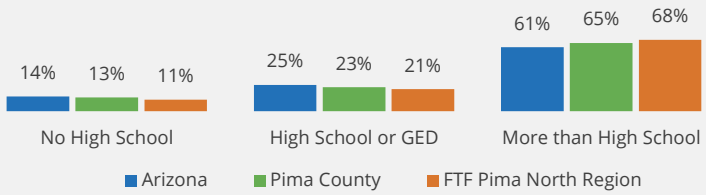


Arizona Department of Education (2014). Graduation Rate 2018 Cycle. Provided by AZ FTF.

Educational Attainment

The percentage of adults ages twenty-five and older who have completed more than high school is higher in the FTF Pima North Region (68%) than the state (61%) and county (65%; see Exhibit 3.7). Approximately 11 percent of adults ages twenty-five and older in the FTF Pima North Region do not have a high school education.

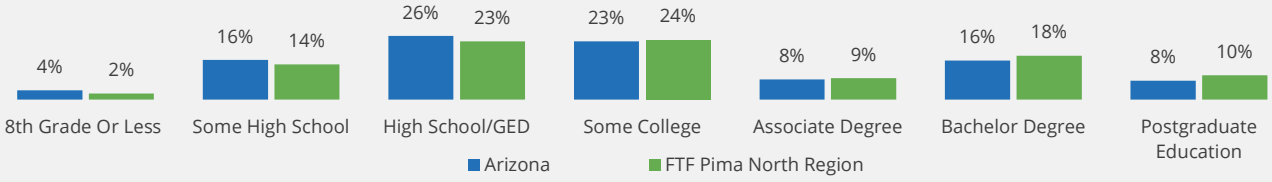
Exhibit 3.7. 2014 Educational attainment of adults 25 and older



U.S. Census Bureau; American Community Survey, 2014 American Community Survey; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>.

The majority of mothers in the FTF Pima North Region (61%) have completed more than high school, which is 6 percent higher than the State (55%; see Exhibit 3.8). Approximately 16 percent of mothers do not have a high school education in the FTF Pima North Region, which is 4 percent less than the statewide rate. For more information about race or ethnicity of children by school, school report-card letter grade, and/or school enrollment (by school and district), refer to Appendices 3.1-3.3

Exhibit 3.8. 2014 Percentage of live births by mother's educational attainment**



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
*** Sum rounded to nearest tens unit due to non-zero addend less than 6*

EDUCATION HIGHLIGHTS

Based on the review of education indicator data, student absences are increasing across Arizona, Pima County, and the FTF Pima North Region. A higher percentage of students in the FTF Pima North Region scored "proficient" or "highly proficient" on the on the English Language Arts (ELA) proficiency assessment (42%) and Math proficiency assessment (43%) of the AzMERIT than the state (40% and 42%, respectively). In addition, the four and five year graduation rates dropped while the rate of dropouts remained the same. It is important to address the decrease in graduation rate given that students who miss ten or more days of school have an increased probability of dropping out of school.[15]

Below are key findings that highlight the education needs, assets, and data-driven considerations for the FTF Pima North Region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
The majority of adults in the region have completed high school, received a GED or pursued further education (89%).	Promote the benefits of completing a high school diploma.

Needs	Considerations
The percentage of students in first, second or third grade missing less than ten days of school increased from 2014 to 2015.	Consider additional research to understand the factors that are causing missed school days.
Less than half of third graders are meeting proficiency requirements for English Language Arts and Math (43-44%) and less than half of preschool-aged children in the FTF Pima North Region are enrolled in early care and education (44%).	Increase awareness of early education programs to support learning and school readiness from an early age.

4. Early Learning

Why it Matters

Early Care and Education (ECE) programs encompass educational programs and strategies designed to improve future school performance for children under the age of eight. [39] Research suggests that the first five years of life are considered to be the most crucial stage in children's development, as they undergo the most rapid phase of growth during that period.[40] Research also shows that children's participation in high-quality early care and education environments leads to higher educational achievement later in life. Children who participate in ECE programs are better prepared for kindergarten, have greater success in elementary school, and are more likely to graduate from high school and prosper well into adulthood.[41, 42] The quality and type of care provided to children also significantly influences the development of social and behavioral skills.[43]

The adult to child ratio for licensed child care centers is set by the Arizona Department of Health Services (DHS) Bureau of Child Care Licensing (BCCL) and should not be exceeded. Research suggests that a smaller adult to child ratio in child care settings leads to a higher quality of interaction between a child and their caregiver, which in turn leads to better outcomes for young children.[44] On average, services that are delivered in the home have an adult to child ratio between 1:5 and 1:6.[45] However, the adult to child ratio changes for DHS Licensed Child Care Centers. State licensing requires specific adult to child ratios depending on the child's age. These requirements impact the ability of child care centers to care for children and limit the opportunities for families to access child care services. The requirements also make it difficult to track the number of vacancies and the total number of children enrolled because data can only be collected at a specific point in time to demonstrate enrollment compliance. Although it is difficult to track, understanding the number of children enrolled in early learning can help provide an estimate of the number of children who may be in need child of quality early care and education.

Key indicators of early learning that help identify the needs of children include, but are not limited to, the availability of early care and education centers and homes, enrollment in ECE programs, the availability of ECE professionals, the costs of child care, the availability of child care subsidies or scholarships, and the capacity to serve special needs children. Research shows that investments in early childhood programs yield long-term benefits and can reduce crime rates, increase earnings, and encourage ongoing education.[46] In addition, the research also shows that investments in ECE have

---

[39] *Early Childhood Education. (2016, September 06). Retrieved from http://k6educators.about.com/od/educationglossary/g/earlychildhoode.htm*

[40] *Early Childhood Education. (n.d.). Retrieved from https://teach.com/where/levels-of-schooling/early-childhood-education/*

[41] *Reynolds, A. J., Temple, J. A., Ou, S. R., Robertson, D. L., Mersky, J. P., Topitzes, J. W., & Niles, M. D. (2007). Effects of a school-based, early childhood intervention on adult health and well-being: A 19-year follow-up of low-income families. Archives of Pediatrics & Adolescent Medicine, 161(8), 730-739.*

[42] *Weiland, C., & Yoshikawa, H. (2013). Impacts of a prekindergarten program on children's mathematics, language, literacy, executive function, and emotional skills. Child Development, 84(6), 2112-2130.*

[43] *Stein, R. (2010, May 14). Study finds that effects of low-quality child care last into adolescence. Retrieved from http://www.washingtonpost.com/wp-dyn/content/story/2010/05/14/ST2010051401954.html?sid=ST2010051401954*

[44] *De Schipper, E. J., Marianne Riksen-Walraven, J., & Geurts, S. A. (2006). Effects of child–caregiver ratio on the interactions between caregivers and children in child-care centers: An experimental study. Child Development, 77(4), 861-874.*

[45] *Child Care Resource and Referral (CCR&R). Meeting Arizona's Childcare Needs: Quality Indications. Retrieved from http://www.arizonachildcare.org/childcare-indicators.html?lang=en.*

[46] *Campbell, F., Conti, G., Heckman, J. J., Moon, S. H., Pinto, R., Pungello, E., & Pan, Y. (2014). Early childhood investments substantially boost*

long-term health effects and help prevent disease and promote health.

What the Data Tell Us

Early Care and Education Programs

There are 496 ECE centers and homes with a capacity of 31,505 children in the FTF Pima North Region.[47] Although the total capacity may be high, the actual facilities may not always serve the amount of children they are licensed to serve. The number of children served mainly depends on a center's ability to meet the adult to child ratio, which varies by the child's age, in order to be in compliance with licensing requirements.

As previously mentioned, 44 percent of children between the ages of three and four are enrolled in certified Early Childhood Education in the FTF Pima North Region (see Exhibit 3.2). This is lower than the percentage assumed to need child care (66%) based on household employment data (see Exhibit 2.3). Parents who do not have access to stable child care may find themselves missing work to care for their children. In addition, research has consistently demonstrated that lack of access to child care has negative effects on families and decreases parents' chances of sustaining employment.[48]

Early childhood professionals are tasked with the early care and education of young children. The responsibilities of ECE professionals include guiding children (often through play and activities) and acting as their partner in the learning process. In addition, they are responsible for shaping the intellectual and social development of young children, which can have an effect on a child's future academic performance.[49] However, an ECE professional's ability to provide quality early care and education can depend on many factors including internal capacity (e.g., adequate training) and external influences (e.g., staff turnover). As previously mentioned, Arizona pays its ECE professionals one of the lowest annual salaries. This may help explain why almost half of teachers (45%) maintain their employment for less than five years. The exception is the 71 percent of Head Start teachers who stay five or more years, which is likely explained by the fact that Head Start teachers are paid the highest of all ECE providers.[50] For additional data on ECE professionals, see Appendices 4.1-4.5.

Head Start and Early Head Start

Head Start and Early Head Start are federally funded programs that promote the school readiness of children ages five and under from low income families. These programs provide comprehensive services to support child development, including early learning, health services, and family well-being and engagement. The Office of Head Start funds agencies in local communities to implement Head Start and Early Head Start programs.[51] Research shows that Head Start children tend to score higher on all domains of cognitive and social-emotional development in comparison to children not enrolled

---

adult health. Science, 343(6178), 1478-1485.

[47] *Arizona Department of Economic Security (2015). Childcare Providers and Capacity. Provided by AZ FTF.*

[48] *Greenberg, M. (2007). Next steps for federal child care policy. The Next Generation of Antipoverty Policies, 17, 2. http://www.futureofchildren.org/publications/journals/article/index.xml?journalid=33&articleid=67&sectionid=353*

[49] *Bano, N., Ansari, M., & Gangai, M. Y. (2016). A study of personality characteristics and values of secondary school teachers in relation to their classroom performance and students' likings. Anchor Academic Publishing.*

[50] *First Things First – Arizona's Education Issue (2013). Early Learning Workforce Trends. Provided by AZ FTF.*

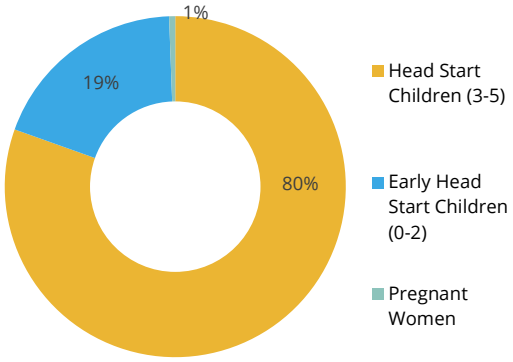
[51] *Head Start Programs. (2016, August 15). Retrieved from http://www.acf.hhs.gov/ohs/about/head-start*

in Head Start.[52] In addition, Head Start children are also more likely to improve their social skills, impulse control, and approaches to learning while concurrently decreasing their problem behaviors – becoming less aggressive and hyperactive over the course of a year.[53]

As of 2016, there is one Head Start program, an Early Head Start program, and an Early Head Start Child Care Partnership programfunded by Child-Parent Centers, Inc., the Head Start grantee for five southern Arizona counties: Cochise, Pima, Graham, Greenlee and Santa Cruz Counties. There are 43 sites across all five counties and 26 sites across the Greater Tucson area. The data presented in this section are aggregated for all five of these counties.

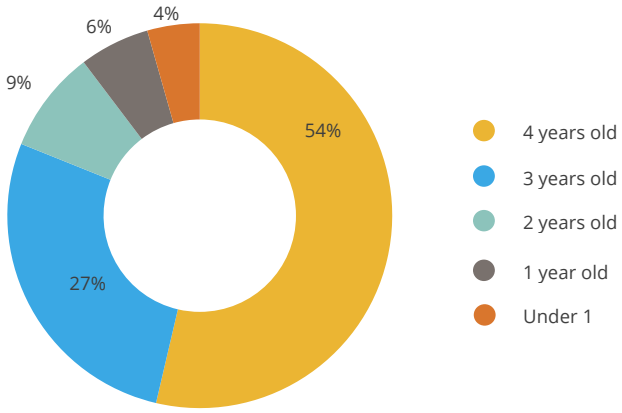
In 2016, a cumulative total of 3,249 children enrolled in Head Start and Early Head Start in the southern Arizona counties. Of those enrolled, about 80 percent were enrolled in Head Start and 19 percent were enrolled in Early Head Start (see Exhibit 4.1.). In addition, over half of children enrolled in Head Start (54%) were four year olds (see Exhibit 4.2). The lower enrollment rates of younger children are due to limited availability of Early Head Start services; the Early Head Start program was introduced much later than Head Start nationwide and also requires a higher level of funding due to costs associated with providing high quality infant and toddler care.

Exhibit 4.1. 2016 Cumulative enrollment in Head Start and Early Head Start programs in southern Arizona



Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/

Exhibit 4.2. 2016 Cumulative enrollment of children in Head Start and Early Head Start by age in southern Arizona*



Office of Head Start (2016). Head Start Data. Retrieved from https://hses.ohs.acf.hhs.gov/pir/

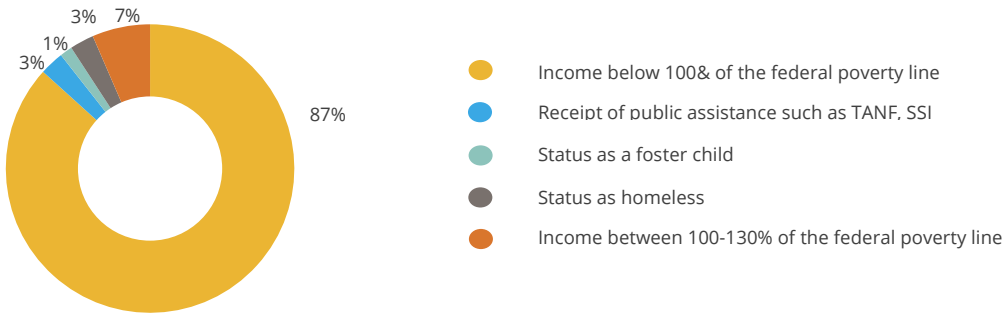
**5 years and older omitted due to suppression guidelines*

Eighty seven percent of children and pregnant women who were eligible for Head Start qualified because their income was below 100 percent of the federal poverty level (see Exhibit 4.3). In addition, seven percent of children and pregnant women were eligible because their income did not exceed 130

[52] *Head Start impact study: Final report. (2010, January). Retrieved from http://www.acf.hhs.gov/sites/default/files/opre/executive_summary_final.pdf*
[53] *Aikens, N., Kopack Klein, A., Tarullo, L. & W est, J. (2013). Getting ready for kindergarten: Children's progress during Head Start. FACES 2009 report. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.*

percent of the federal poverty level, three percent because of their status as homeless, three percent because they are recipient of public assistance, and one percent because of their status as a foster child. Those whose income exceeded 130 percent of the federal poverty line were not eligible to receive services. Although low-income families benefit from their qualification for free early education services through Head Start, there are many families that lie just outside of the qualifying income brackets yet cannot afford other quality early education programs.

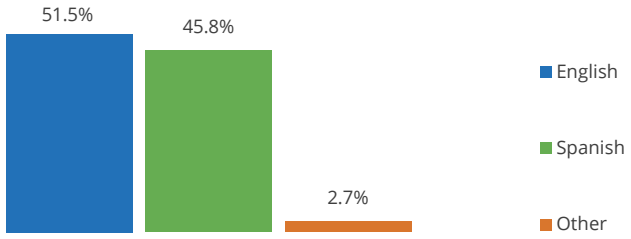
Exhibit 4.3. 2015 Head Start: Type of Eligibility



Office of Head Start (2016). Head Start Data. Retrieved from https://hses.ohs.acf.hhs.gov/pir/

Of the children and families that were enrolled in Head Start, 52 percent reported speaking English and 46 percent reported speaking Spanish (see Exhibit 4.4). The high percentage of Spanish speakers may indicate a need for more early education services available in Spanish. For additional Head Start data for the Southern Arizona regions, such as enrollment by race/ethnicity and funded enrollment information, see Appendices 4.6 – 4.8.

Exhibit 4.4. 2016 Primary language for children/pregnant women enrolled in Head Start in Southern Arizona



Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/

Quality of Early Care and Education Programs

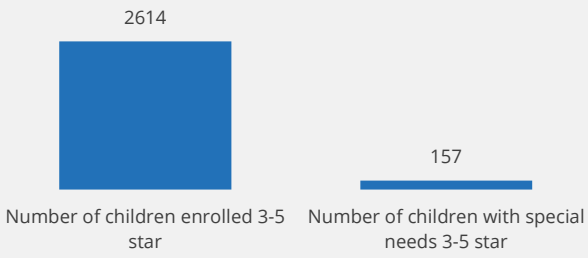
Quality First is a signature program of FTF that is designed to improve the quality of early learning for children birth to age 5. Quality First partners with early care and education providers across Arizona to

provide coaching and funding to improve the quality of their services. Quality First implemented a statewide standard of quality for ECE programs along with associated star ratings. These star ratings make it easier for parents to understand the rating system when deciding on care providers. The star rating ranges from one to five, attainment of quality standards begins at three stars. [54] Quality First is about continuous quality improvement. The standards are high, and reaching the quality levels is often a long-term process.

Arizona First Things First (October 2016). Quality First.

In the FTF Pima North Region, 2,614 children are enrolled in three to five star centers and 157 children with special needs are enrolled in three to five star centers, resulting in a total of 2,771 children who are enrolled in Quality First centers (see Exhibit 4.5). Based on the total population of children ages zero to five (see Exhibit 1.2) children enrolled in Quality First three to five star centers comprise about 6 percent of the FTF Pima North Region population and children with special needs comprise less than 1 percent of the FTF Pima North population. In sum, close to 6 percent of children are enrolled in services that meet or exceed quality standards. It is unknown whether the remainder of children have access to high quality care, or care in general. For additional data on star ratings for centers and providers, see Appendix 4.9.

Exhibit 4.5. Quality First Enrollment by Quality First Star Ratings July 2015



Arizona First Things First (July 2015). Quality First.

[54] *Arizona First Things First (October 2016). Quality First.*

Costs of Child Care & Access

In addition to supporting improvements in the quality of child care, FTF provides scholarships for low income children to attend quality ECE programs.

Previous research has shown that low-income mothers receiving child care subsidies, a form of financial assistance, are more likely than other low-income mothers to work, sustain employment, and work longer hours.[48] Further, the negative effects of not accessing child care include the possibility of incurring financial debt, choosing child care that is lower quality and less stable, and losing time from work. Across the state and Pima County, licensed centers have the highest cost per day and certified group homes have the second highest cost per day (see exhibit 4.6). The median cost per day of licensed centers and certified group homes in Pima County are equal to or slightly lower than the state while approved family homes in Pima County have a higher cost per day in comparison to the state. High child care prices likely place a financial strain on families who already report barely making ends meet and having difficulty affording housing and food.

Exhibit 4.6. 2014 Median cost per day of Early Childhood Care

	Arizona	District 2**
Cost for one infant Licensed Centers	$42.00	$39.00
Cost for one infant Approved Family Homes	$22.00	$25.00
Cost for one infant Certified Group Homes	$27.00	$25.00
Cost for one child (1-2) Licensed Centers	$38.00	$33.50
Cost for one child (1-2) Approved Family Homes	$20.00	$25.00
Cost for one child (1-2) Certified Group Homes	$25.00	$25.00
Cost for one child (3-5) Licensed Centers	$33.00	$30.00
Cost for one child (3-5) Approved Family Homes	$20.00	$25.00
Cost for one child (3-5) Certified Group	$25.00	$25.00

Arizona Department of Economic Security (2014). Child Care Market Rate Survey. Provided by AZ FTF.
***District 2 represents Pima County*

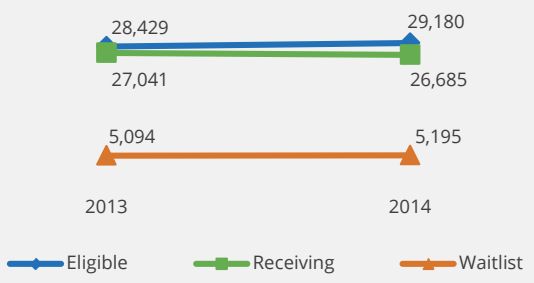
Based on the median cost per day and assuming someone works 260 days per year, the median cost of child care per year for one infant in Pima County totals to approximately $10,140 a year for licensed centers and approximately $6,500 a year for approved family homes and certified group homes. Compared to the median income of husband-wife families in Pima County with children ages zero to seventeen (see Exhibit 2.4.), licensed centers comprise approximately 14 percent and approved family homes and certified group homes comprise nearly 9 percent of the regional median income.

The median cost per year of child care comprises an even higher amount of the median income for single-parent families with children ages zero to seventeen in Pima County and is considerably less for

single-female families compared to single-male families. Based on the median income of single-female families (see Exhibit 2.4), licensed centers make up nearly 43 percent of the median income and approved family homes and certified group homes make up almost 27 percent of the median income. High costs can be a barrier in affording quality child care, especially for single-female families.

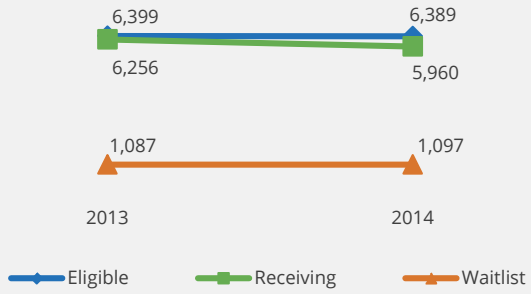
Arizona and the FTF Pima North Region both experienced an increase in the number of children eligible for child care subsidies between 2013 and 2014 while Pima County experienced a slight decrease during the same timeframe (see Exhibits 4.7-4.9). Overall, although more children are eligible, fewer children are receiving subsidies and more children are remaining on the waitlist. This indicates that there is a need for child care subsidies in the FTF Pima North Region that is not being met

Exhibit 4.7. 2013-2014 Children eligible, receiving, and on waitlist for child care subsidies in Arizona



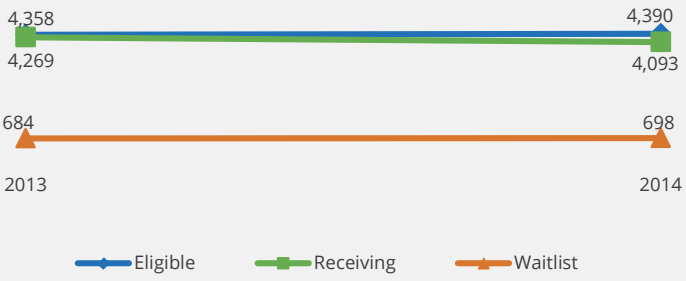
Arizona Department of Economic Security (2015). Child Care (CCA) Subsidies. Provided by AZ FTF. Provided by AZ FTF.

Exhibit 4.8. 2013-2014 Children eligible, receiving, and on waitlist for child care subsidies in Pima County



Arizona Department of Economic Security (2015). Child Care (CCA) Subsidies. Provided by AZ FTF. Provided by AZ FTF.

Exhibit 4.9. 2013-2014 Children eligible, receiving, and on waitlist for child care subsidies in FTF Pima North Region



Arizona Department of Economic Security (2015). Child Care (CCA) Subsidies. Provided by AZ FTF. Provided by AZ FTF.

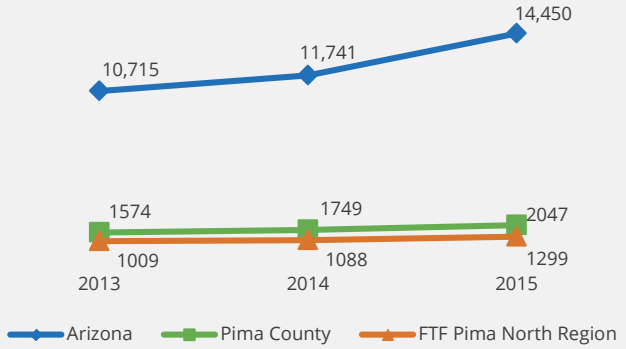
Developmental Delays and Special Needs

Issues in teaching young children with special needs reflect significant changes in public policy and professional philosophy across the nation. Diverse perspectives on how to effectively teach young children with developmental delays and special needs are held.[56] The Individuals with Disabilities Education Act (IDEA) is a law ensuring services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education, and related services to more than 6.5 million eligible infants, toddlers, children, and youth with disabilities. Infants and toddlers with disabilities (birth to age 2) and their families receive early intervention services under IDEA Part C. Children and youth (ages three to twenty-one) receive special education and related services under IDEA Part B.[57]

The Arizona Early Intervention Program (AzEIP) is a statewide program that offers services and assistance to families and their children with disabilities or delays under the age of 3. The purpose of the program is to intervene at an early stage to help children develop to their highest potential.[58] Research shows that children and youth with mild intellectual disabilities are behind in academic skills compared to their peers.[59] Without proper intervention, this can lead to delays in learning to read and perform basic math and to further difficulties in other academic areas that require use of those skills. A child is eligible for AzEIP if he/she is between birth and thirty-six months of age and is developmentally delayed or has an established condition which has a high probability of resulting in a developmental delay, as defined by the State.[60]

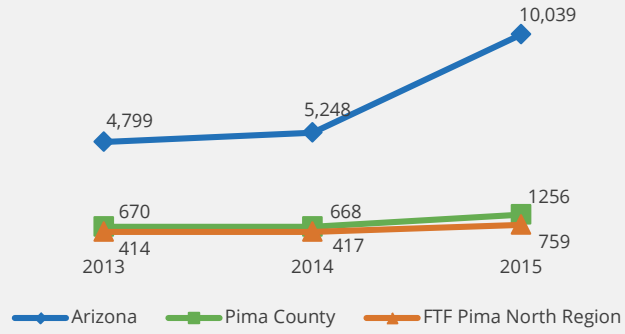
In the FTF Pima North Region, of those who received referrals to AzEIP, less than 45 percent received services in 2015 (see Exhibit 4.10. and Exhibit 4.11). However, the number receiving services increased by more than double between 2013 and 2015 for Arizona, Pima County, and the FTF Pima North Region.

Exhibit 4.10. 2013-2015 Children receiving AzEIP referrals



Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

Exhibit 4.11. 2013-2015 Children receiving AzEIP services

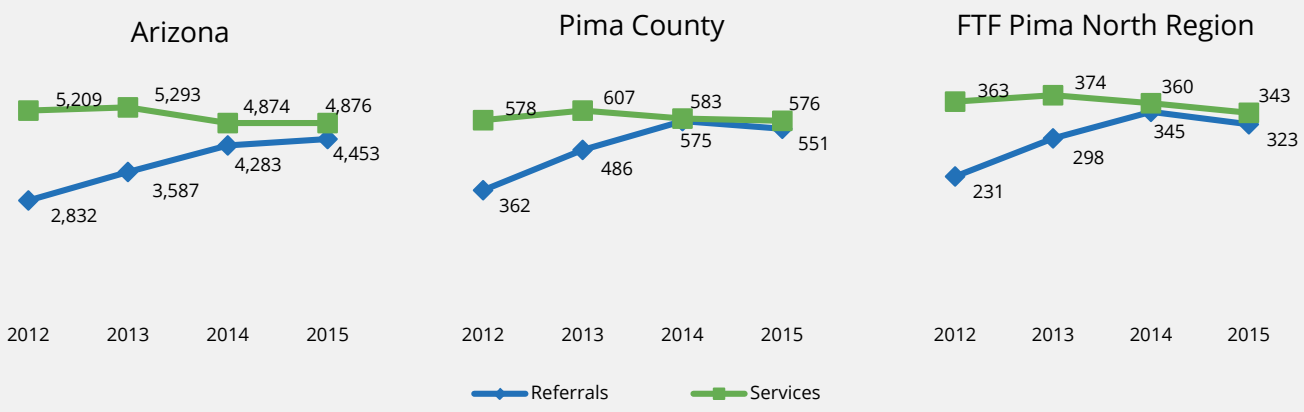


Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

[56] *Dyson, A. (2001). Special needs education as the way to equity: an alternative approach? Suport for Learning, 16, 3.*
[57] *US Department of Education: Office of Special Education and Rehabilitative Services. https://www2.ed.gov/about/offices/list/osers/osep/osep-idea.html*
[58] ADES, 2016 :*https://des.az.gov/services/disabilities/early-intervention/about-arizona-early-intervention-program-azeip*
[59] *Rosenberg, 2013 - http://www.education.com/reference/article/characteristics-intellectual-disabilities/*
[60]ADES, 2016: *https://des.az.gov/services/disabilities/early-intervention/arizona-early-intervention-program-azeip-eligibility*

To qualify for Division of Developmental Disabilities (DDD) services an individual must have a cognitive disability, cerebral palsy, autism, epilepsy, or be at risk for a developmental disability. Children under the age of six are eligible if they show significant delays in one or more of these areas of development: physical, cognitive, communication, social emotional, or self-help. Between 2012 to 2014, the number of referrals increased in Arizona, Pima County, and the FTF Pima North Region (see Exhibit 4.12). Between 2014 and 2015, the number of referrals decreased slightly for Pima County and the FTF Pima North Region. Between 2012-2015, the number of DDD services decreased slightly for Arizona, Pima County, and the FTF Pima North Region.

Exhibit 4.12. 2012-2015 Number of children receiving referrals and services from the Division of Developmental Disabilities in Arizona, Pima County, and the FTF Pima North Region



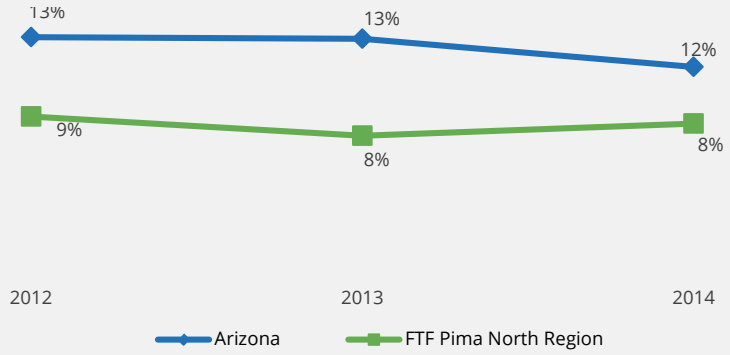
Arizona Department of Economic Security (2015). Division of Developmental Disabilities. Provided by AZ FTF.

Although the number of referrals has increased over time, the number of services is decreasing. Appendices 4.10 and 4.11. shows a breakdown and unduplicated count of children ages zero to two and children ages three to five receiving services and visits.

ADE Special Education

The Arizona Department of Education collects information on special education pre-k children who entered kindergarten without the need for an individualized education plan (IEP). The percentage of students who participated in preschool special education but no longer required special education in kindergarten decreased for both the state and FTF Pima North Region between 2012 and 2014 (see Exhibit 4.13).

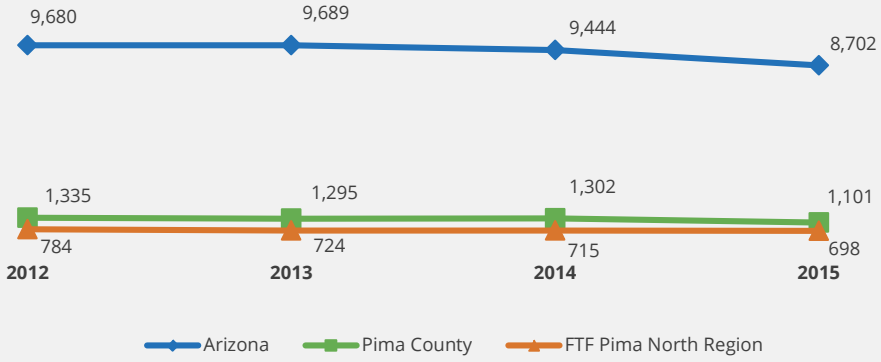
Exhibit 4.13. Percentage of students transitioning out of special education between preschool and kindergarten



Arizona Department of Education (2015). Special Education. Provided by AZ FTF.

Between 2012 to 2014, the total number of preschool children identified with developmental disabilities decreased for Arizona, Pima County, and the FTF Pima North Region (see Exhibit 4.14). The most common types of disabilities for preschool children were developmental delays and speech/language impairments. For further information on types of disabilities, see Appendices 4.12 – 4.15.

Exhibit 4.14. Total number of preschool children with disabilities*



1Arizona Department of Education (2015). Special Education. Provided by AZ FTF.
Note: The data presented in this table are unduplicated (i.e., children diagnosed with multiple disabilities are counted only one time in the Federal Primary Need [FPN] category).

EARLY LEARNING HIGHLIGHTS

About 44 percent of preschool-aged children are enrolled in ECE programs, which is less than the 66 percent assumed to need child care based on their parents' employment status. A contributing factor may be the high cost of child care. Compared to the median income of husband-wife families in Pima County with children 0-17, licensed centers comprise approximately 14 percent and approved family homes and certified group homes comprise nearly 9 percent of the Pima County median income. With respect to child care subsidies, more children are eligible but less are receiving subsidies and more are remaining on the waitlist. Based on the median income of single-female families in Pima County, licensed centers make up nearly 43 percent of the median income and approved family homes and certified group homes make up almost 27 percent of the median income.

The Arizona Early Intervention Program (AzEIP) is a statewide program that offers services and assistance to families and their children with disabilities or delays under the age of 3. A child is eligible for AzEIP if he/she is between birth and thirty-six months of age and is developmentally delayed or has an established condition which has a high probability of resulting in a developmental delay, as defined by the State. AzEIP referrals and services are increasing for the region.

To qualify for Division of Developmental Disabilities (DDD) services an individual must have a cognitive disability, cerebral palsy, autism, epilepsy, or be at risk for a developmental disability. Between 2012 to 2014, the number of DDD referrals increased in Arizona, Pima County, and the FTF Pima North Region. Between 2014 and 2015, the number of referrals decreased slightly for Pima County and the FTF Pima North Region. Between 2012-2015, the number of DDD services decreased slightly for Arizona, Pima County, and the FTF Pima North Region.

In addition, data from the Arizona Department of Education shows that the percentage of students who transitioned from special education while in preschool to mainstream kindergarten decreased slightly between 2012 and 2014. The number of preschoolers identified with disabilities is slightly decreasing in the region and the most common disabilities are developmental delays and speech/language impairments.

Below are key findings that highlight the early learning needs and assets in the community, and data-driven considerations for the FTF Pima North Region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
Quality First has been increasing the quality of child care programs in the region.	Increase parent awareness of the availability of preschool centers and homes that are part of the Quality First program.

Needs	Considerations
Between 2013 and 2014, the number of child care subsidies provided in the region decreased from 4,269 to 4,093.	Voice support for the importance of subsidies in providing low income children access to early care and education.
Less than half of Early Childhood Education professionals in the state remain in their position for over five years.	Consider providing incentives for quality early childhood professionals to retain their skills in the early childhood field and reduce staff turnover. Also consider monitoring the impact of the min wage increase in AZ and how this will affect the early childhood workforce.
Childcare costs make up 9-13% of family incomes and between 26 -41% of single female family incomes.	Consider advocating for the expansion of child care scholarships for more families in the region. Consider prioritizing Quality First scholarships for single parent households.

5. Child Health

Why it Matters

Ensuring healthy development through early identification and treatment of children's health issues helps prepare children for school.[61] In addition, helping families understand healthy developmental pathways and proactive prevention ensures that children are healthy, which in turn supports children's school readiness. There are many health factors that impact the well-being of children ages zero to five and their families. The availability of resources and services for families is one key factor that contributes to their overall health. For example, during prenatal care visits, expecting mothers are provided with information and resources to promote a healthy pregnancy and increase the healthy development of their child. These visits also assist in the identification and early intervention of any potential problems. At a routine prenatal visit, physicians often remind expectant mothers of the importance of abstaining from substance use, maintaining a healthy diet, and the benefits of breastfeeding. Discussing risky health behaviors can be very important since they may influence a baby's development. For example, being overweight during pregnancy has been associated with many negative health consequences such as miscarriages, pre-term birth, low-birth weight, birth defects, lower IQ, hypertension, diabetes, and developmental delays.[62]

Engaging in healthy preventive practices, such as breastfeeding and vaccinating children during early childhood, may help protect children from negative health outcomes and developmental delays. Breastfeeding provides children with the nutrition and protection against infections they need early in life.[63] Children who have not been vaccinated are at a higher risk of contracting diseases and tend to have more health issues later in life. Research has found that it is important for children to receive their immunizations early on in life because children under the age of five are at the highest risk of contracting severe illnesses since their bodies have not yet built a strong immune system. [64] Another factor that may impact health outcomes that may be deemed less important by parents is early oral health. According to the Center for Disease Control and Prevention (CDC), tooth decay is one of the most chronic diseases in children.[65] Tooth decay can cause infections that can spread to multiple teeth and may affect a child's growth. Fortunately, tooth decay is also one of the most preventable diseases in children.

Healthy People 2020 (HP 2020) set ten-year national objectives for improving the health of all Americans. Healthy People established these benchmarks to encourage collaborations across communities and sectors, empower individuals toward making informed health decisions and to measure the impact of prevention activities.[66] When appropriate, these benchmarks will be presented throughout this chapter as comparison points for certain indicators.

---

[61] *Schools & Health (2016). Impact of Health on Education. Retrieved from http://www.schoolsandhealth.org/pages/Anthropometricstatusgrowth.aspx*
[62] *The State of Obesity, N.D). Prenatal and Maternal Health. Retrieved from http://stateofobesity.org/prenatal-maternal-health/*
[63] *Office on Women's Health (2014). Why breastfeeding is important. Retrieved from https://www.womenshealth.gov/breastfeeding/breastfeeding-benefits.html*
[64] *Centers for Disease Control and Prevention (2016). Infant Immunizations. Retrieved from http://www.cdc.gov/vaccines/parents/parent-questions.html*
[65] *Center for Disease Control and Prevention Division of Oral Health (n.d) Oral Health Care. Retrieved from http://www.cdc.gov/oralhealth/children_adults/child.htm*
[66] *Healthy People 2020. About Health People Retrieved from https://www.healthypeople.gov/2020/About-Healthy-People*

What the Data Tell Us

Access to Health Services

Lack of access to affordable health care is a major impediment to receiving proper care and a problem that disproportionately affects women living in poverty, placing their children at risk for health issues even before they are born, and perpetuating health disparities.[67] Consequently, lack of medical attention negatively impacts a child's ability to grow and thrive. As the FTF Pima North Region contains both an urban and rural areas, some residents may have limited transportation and be geographically isolated from a health service provider. Additionally, lack of affordable health coverage poses an additional challenge for community members to overcome. Such barriers are exacerbated by the lack of financial resources that are needed to travel from remote areas to places where providers are located.[68]

Overall, Pima County has a lower ratio of population to providers compared to the state. However, this ratio varies in different areas across Pima County. The ratio of population to primary caregivers in areas such as Flowing Wells, Picture Rocks, Drexel Heights, and Valencia West is more than double that of the state and Pima County as a whole (see Exhibit 5.1). Additionally, in 2014, nine percent of children ages zero to five in the FTF Pima North Region reported not having any health insurance (see Exhibit 5.2). Though lower than the state rate and other age groups, this could potentially place children at risk for long term health complications if they fall ill but their parents do not have the sufficient funds to seek care. The HP 2020 target is for 100 percent of Americans to have medical insurance by 2020.[69]

Exhibit 5.1. 2015 Ratio of Population (All Ages) to Primary-Care Providers, by PCA

Location	Ratio-Population:Provider
Statewide	449:1
Pima County	395:1
Primary Care Area (Number)	
Tucson South-111	941:1
Oro Valley-100	305:1
Picture Rocks-103	1,340:1

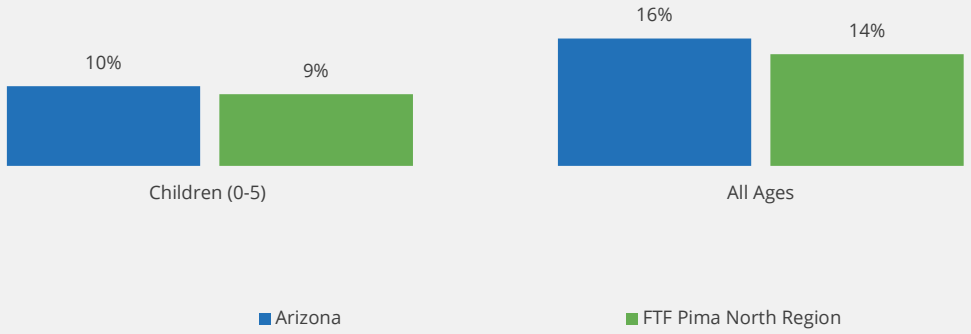
[67] *LaVeist, Gaskin and Richard (2009). The Economic Burden of Health Inequalities in the United States. Joint Center for Political and Economic Studies.*
[68] *Rural Health Information Hub (n.d.). Healthcare Access in Rural Communities Introduction. Retrieved from https://www.ruralhealthinfo.org/topics/healthcare-access*
[69] *Healthy People 2020. About Health People Retrieved from https://www.healthypeople.gov/2020/About-Healthy-People*

Exhibit 5.1. 2015 Ratio of Population (All Ages) to Primary-Care Providers, by PCA

Location	Ratio-Population:Provider
Vail-104	706:1
Casas Adobes-105	239:1
Sahuarita-119	661:1
Green Valley-118	745:1
Drexel Heights-114	2,688:1
Flowing Wells-112	4,442:1
Tucson South-111	941:1
San Xavier-116	175:1
Tucson West-106	296:1
Tucson Central-107	257:1
Tucson Foothills-108	197:1
Tucson South East-109	469:1
Tucson East-110	638:1
Valencia West-115	2,128:1
Ajo-102	900:1
Tucson Estates-113	1,651:1
Marana-101	527:1
Tanque Verde-98	288:1
Catalina Foothills-99	294:1

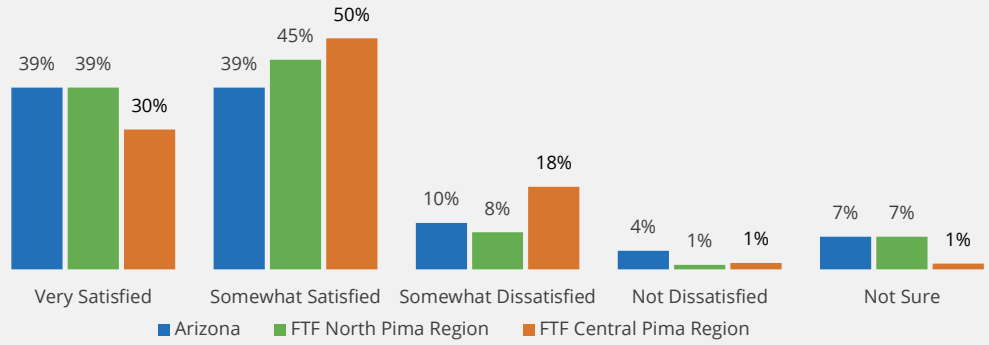
Arizona Department of Health Services (2015). Primary Care Area Statistical Profiles. Retrieved from http://www.azdhs.gov/prevention/health-systems-development/data-reports-maps/index.php#statistical-profiles-pca

Exhibit 5.2. Estimated percentage without health insurance in Arizona and the FTF Pima North Region



U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001; generated by

Exhibit 5.3. Parents satisfied with the community information and resources available about children's development and health



Arizona First Things First (2012). Family and Community Survey.

Despite challenges such as traveling long distances to receive health care, most families in the FTF North Pima Region (87 %) and the FTF Central Pima Region (84%) take their children to regular doctor visits.[70] To better understand parents' and families' perceptions and knowledge of the services available to them and their children in their community, the FTF conducted a survey in 2012 asking parents about their satisfaction with and perception of these programs. When asked about the perception of services available in the region, the majority of parents in the FTF North Pima Region (84%) and the FTF Central Pima Region (80%) reported being very or somewhat satisfied with the resources available to help their child's healthy development (see Exhibit 5.3). Overall, although the physician to resident ratio is not great, people overcome challenges to get regular care they are happy with.

[70] *Arizona First Things First (2012). Family and Community Survey.*

Prenatal Care

Research suggests that the lack of prenatal care is associated with many negative health issues for both the mother and the child.[71] Research also shows that children of mothers who did not obtain prenatal care were three times more likely to have a low birth weight and five times more likely to experience fatal outcomes than those born to mothers who did receive prenatal care.[72] In addition, studies show that women who are at the highest risk of not receiving prenatal care are mothers younger than 19 years old.[73] Educational attainment has also been associated with mothers receiving prenatal care, such that the higher a mother's educational attainment, the more likely they are to seek prenatal care.[74] It is important that mothers seek and receive prenatal care at an early stage in their pregnancy so physicians can treat and prevent any health issues that may occur.[75]

Exhibit 5.4. Percentage of women who began prenatal care in first trimester

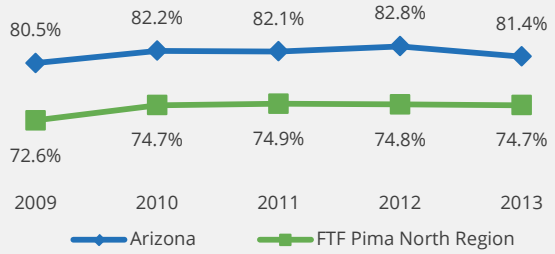
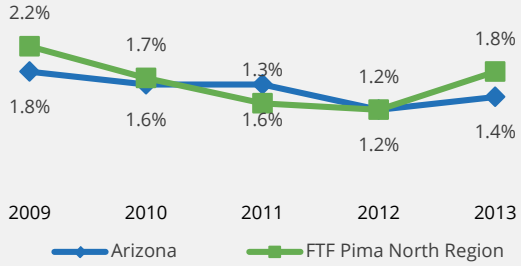


Exhibit 5.5. Percentage of women who did not receive any prenatal care



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

HP 2020 aims to bring the proportion of pregnant women receiving prenatal care in the first trimester to 77.9 percent.[76] In the FTF Pima North Region, the percentage of mothers who received prenatal care during their first trimester increased from 2009-2012, then decreased slightly in 2013 (see Exhibit 5.4). In 2013, 1.8 percent of women did not receive prenatal care (see Exhibit 5.5). In addition, only 31 percent of parents in the North Pima Region and 35 percent of parents in the Central Pima Region reported that

31% of parents believed they could impact their child's brain during the prenatal period.

[71] *Prenatal Care Effects Felt Long After Birth. (n.d.). Retrieved from http://toosmall.org/blog/prenatal-care-effects-felt-long-after-birth*
[72] *Womens Health (n.d.). Prenatal care fact sheet. Retrieved from https://www.womenshealth.gov/publications/our-publications/fact-sheet/prenatal-care.html#b*
[73] *Center for Disease Control and Prevention (n.d). Vital Statistics Online. Retrieved from http://www.cdc.gov/nchs/data_access/vitalstatsonline.htm*
[74] *National Center for Health Statistics (1994). Vital and Health Statistics: Data from the National Vital Statistics System. Retrieved from https://books.google.com/books?id=zlFPAQAAIAAJ&pg=RA2-PA19&lpg=RA2PA19&dq=lack+of+prenatal+care+linked+with+mothers+educational+attainment&source=bl&ots=ilqp_JVnA&sig=SQBGbmtlhOG9JNrgFLEjMOVkt90&hl=en&sa=X&ved=0ahUKEwjM6vH_6vfPAhWCjlQKHWRjCwkQ6AEIVDAH#v=onepage&q&f=false*
[75] *Womens Health (n.d.). Prenatal care fact sheet. Retrieved from https://www.womenshealth.gov/publications/our-publications/fact-sheet/prenatal-care.html#b*
[76] *Healthy People 2020. About Health People Retrieved from https://www.healthypeople.gov/2020/About-Healthy-People*

they believed they could impact their child's brain during the prenatal period.[77] This may indicate a lack of knowledge of the influence of health care, the quality of health care, and the effect of early parental engagement on a child's growth and development. There is also a need for continued outreach and education about the importance of prenatal care to reach the 30 percent of women who did not start prenatal care in the first trimester. Additional information regarding health access is provided in Appendices 5.1-5.10.

In 2014, a new version of the birth certificate introduced major changes in the way prenatal care by trimester is assessed. The month when prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward.

Despite the lower rate of prenatal care in 2013, over 90 percent of mothers in the FTF Pima North region reported not drinking or smoking during their pregnancy.[78] However, from 2010 to 2014, the number of babies born with drug withdrawal syndrome doubled in Pima County.[79]

In 2013 over **90%** of mothers reported not drinking or smoking during pregnancy

In 2014, **110 babies** were born with drug withdrawal syndrome in Pima County

In the FTF Pima North Region, the percentage of births with medical risks and births with complications of labor and delivery steadily increased from 2009-2013 (see Exhibit 5.6 and Exhibit 5.7, respectively). Additionally, the percentage of newborns who were admitted to the Intensive Care Unit slightly increased from 2012-2014 (see Exhibit 5.8). By contrast, the percentage of babies born with abnormal conditions decreased from 2010-2012 (see Exhibit 5.9). In 2014 in the FTF Pima North Region, the percentage of births with medical risks (18.2%), percentage of births with complications (26.4%), and the percentage of babies born with abnormal conditions (5.4%) decreased significantly compared to 2013.[80] This drop is likely due to changes in data collection and definitions as a result of a new birth certificate beginning in 2014, as the 2014 definition of medical risks did not include cardiac disease, lung disease, and other medical conditions that were previously included; similar changes were made to the definitions related to births with complications and abnormal conditions.

[77] *Arizona First Things First (2012). Family and Community Survey.*
[78] *Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.*
[79] *Arizona Department of Health Services (2014). Drug withdrawal syndrome in infants of dependent mothers by race/ethnicity and county of residence. Retrieved from http://azdhs.gov/plan/hip/index.php?pg=drugs*
[80] *Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF*

Exhibit 5.6. Percentage of births with medical risk factors

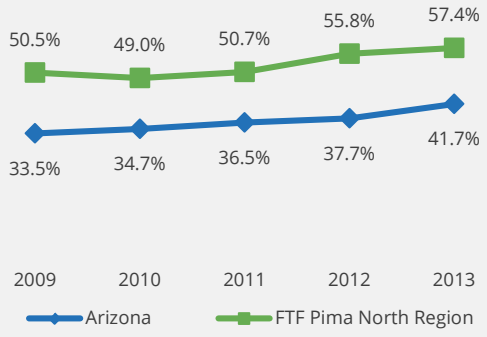
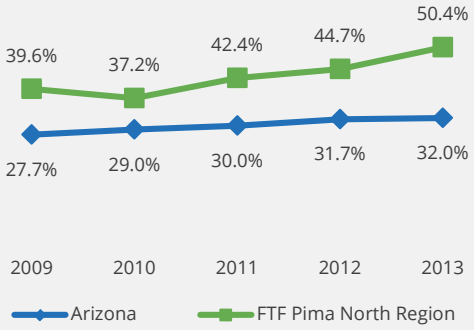
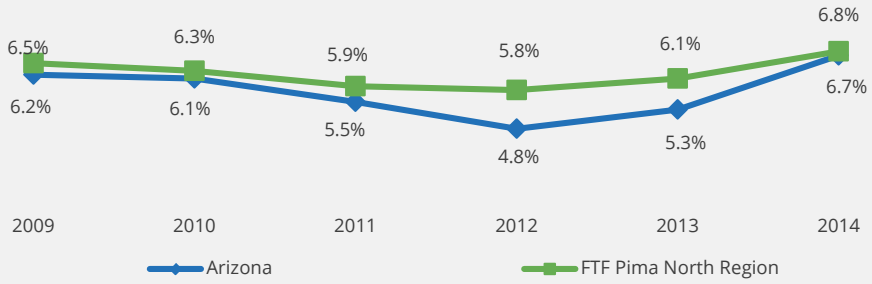


Exhibit 5.7 Percentage of births with complications in labor and delivery



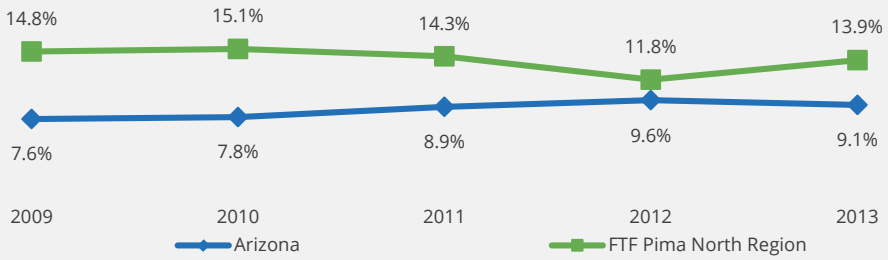
Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

Exhibit 5.8. Percentage of newborn babies who were admitted to the Intensive Care Unit



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

Exhibit 5.9. Percentage of babies with abnormal conditions

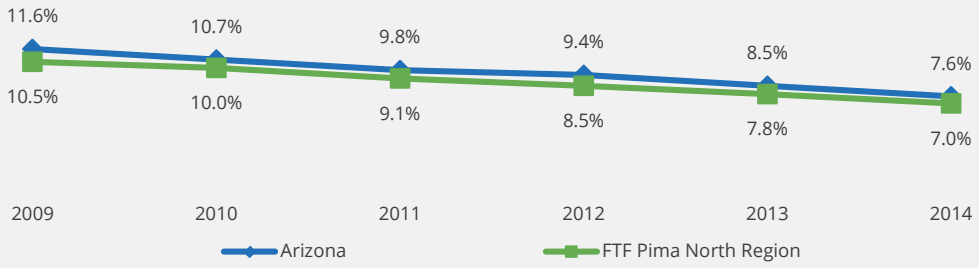


Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

Additional factors that place mothers at-risk of not receiving prenatal care, such as teen pregnancies, unwed mothers and mothers with low education levels, have decreased. In the FTF Pima North Region, the percentage of teen mothers decreased from 2009-2014 and is lower than the state (see Exhibit 5.10). As previously reported in 2014, 40 percent of mothers in the region had a high school education

or less (see Exhibit 3.7). However, the percentage of mothers who are not married remained stable from 2009 to 2014, but was slightly higher than the state in 2014.[81] (Additional information regarding prenatal care is provided in Appendices 5.11- 5.14).

Exhibit 5.10. Percentage of mothers who are 19 years old or younger



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

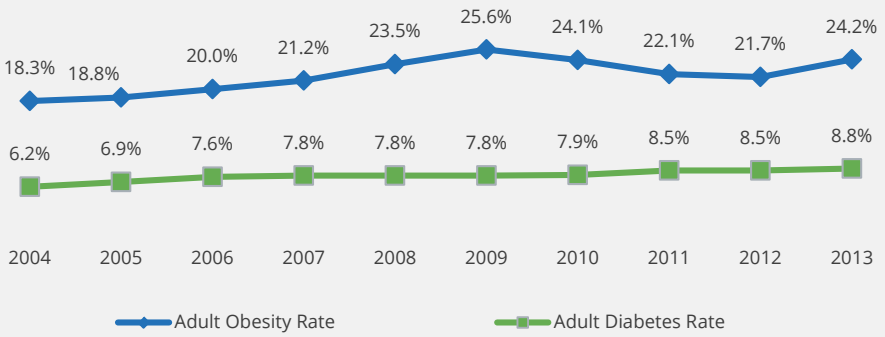
Obesity

Obesity has been a concern in the U.S. due to associated health outcomes, such as higher risk for diabetes, cancer, and heart disease.[82] Diabetes has also been associated with many negative health complications such as blindness, kidney failure, and amputation of limbs.[83]

According to the College of Obstetricians and Gynecologists (ACOG), mothers who are obese during pregnancy are at risk of developing gestational diabetes, preeclampsia, and sleep apnea.[84] According to the CDC, diabetes and obesity can be prevented by increasing physical activity and maintaining a healthy diet.[85] HP 2020 aims to reduce the percentage of adults and children/adolescents who are obese to 30.5 percent and 14.5 percent, respectively.[86] In Pima County, the percentage of obese adults has increased from 18 percent to 24 percent between the years 2004–2013 (see Exhibit 5.11). Within the same timeframe, the percentage of adults with diabetes increased from 6 percent to 9 percent (see Exhibit 5.11).

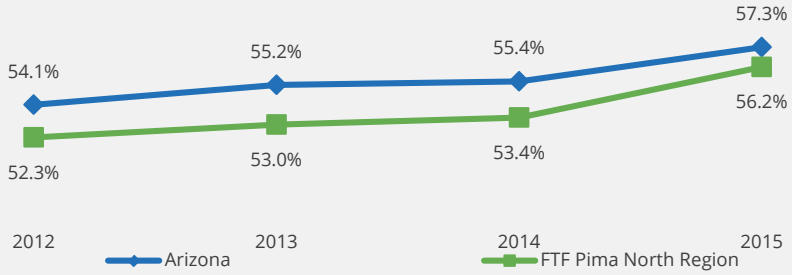
[81] *Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.*
[82] *Center for Disease Control and Prevention. (n.d.). Adult Obesity Facts. Retrieved from https://www.cdc.gov/obesity/data/adult.html*
[83] *Chronic Disease Prevention and Health Promotion. (n.d.). Diabetes At A Glance Reports. Retrieved from http://www.cdc.gov/chronicdisease/resources/publications/aag/diabetes.htm*
[84] *ACOG (2016). Obesity and Pregnancy. Retrieved from http://www.acog.org/Patients/FAQs/Obesity-and-Pregnancy*
[85] *Chronic Disease Prevention and Health Promotion. (n.d.). Diabetes At A Glance Reports. Retrieved from http://www.cdc.gov/chronicdisease/resources/publications/aag/diabetes.htm*
[86] *Healthy People 2020. About Health People Retrieved from https://www.healthypeople.gov/2020/About-Healthy-People*

Exhibit 5.11. Percentage of adults with obesity and diabetes in Pima County



Centers for Disease Control and Prevention (2013). Diagnosed Diabetes.
Centers for Disease Control and Prevention (2013). Obesity.

Exhibit 5.12. Percentage of mother's participating in WIC overweight and obese pre-pregnancy



Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

In the FTF Pima North Region and the state as a whole, over 50 percent of mothers participating in WIC reported being overweight or obese pre-pregnancy (see Exhibit 5.12). As previously described in chapter one, almost 24 percent of the population in the Pima County has low access to grocery stores (see Exhibit 1.24). Furthermore, there are very few recreation and fitness facilities, parks, and outdoor use facilities where residents of Pima County can stay active.[87] The combination of having few grocery stores and places where residents can engage in physical activity may contribute to the increasing rate of obesity and diabetes in Pima County. With a high percentage of obese adults and mothers participating in WIC, it is important to continue to focus efforts on obesity prevention and ensuring adults and children in the region have access to healthy food and places to be active. Additional information regarding obesity is provided in Appendices 5.15-5.17.

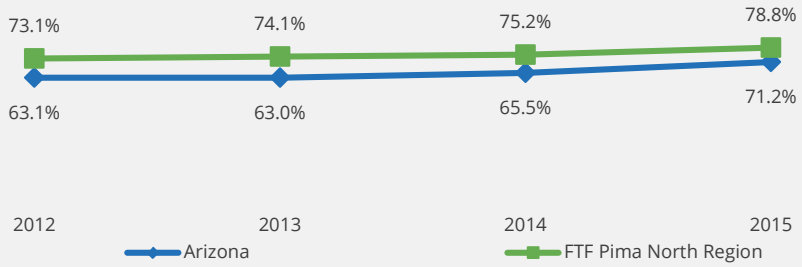
Engaging in Healthy Behaviors

The American Academy of Pediatrics recommends that mothers breastfeed for the first six months after giving birth. Breast milk has antibodies that prevent babies from getting ill and has been shown to

[87] *United States Department of Agriculture and Economic Research Service (2012). Food Environment Atlas.*

decrease the likelihood of babies becoming obese.[88]

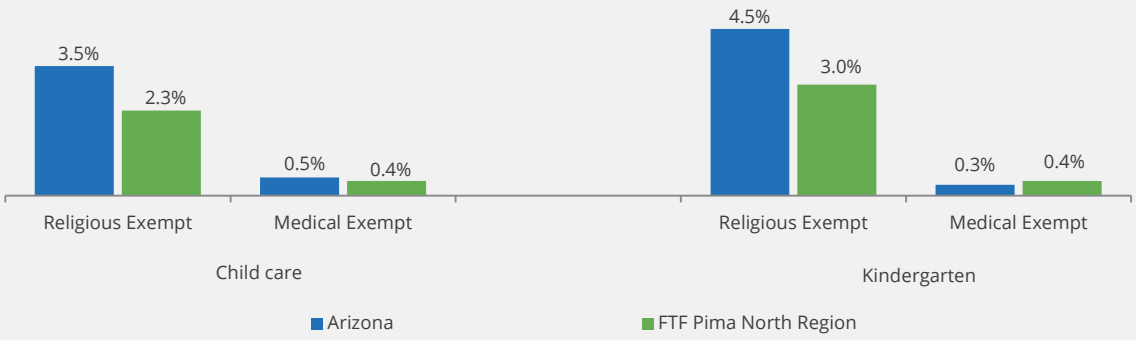
Exhibit 5.13. Percentage of mothers participating in WIC who breastfeed their infant on average at least once a day



Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF

HP 2020 aims to increase the proportion of infants who are breastfed at six months to 60.6 percent.[89] In the FTF Pima North Region, the percentage of mothers participating in WIC who breastfed their infant on average at least once per day has increased from 2012-2015. In 2015, this percentage was 7 percent higher than the state (see Exhibit 5.13).

Exhibit 5.14. Percentage of children in child care and kingergarten that have been exempt from receiving immunizations



Immunization Data Reports (2015). Provided by AZ FTF.

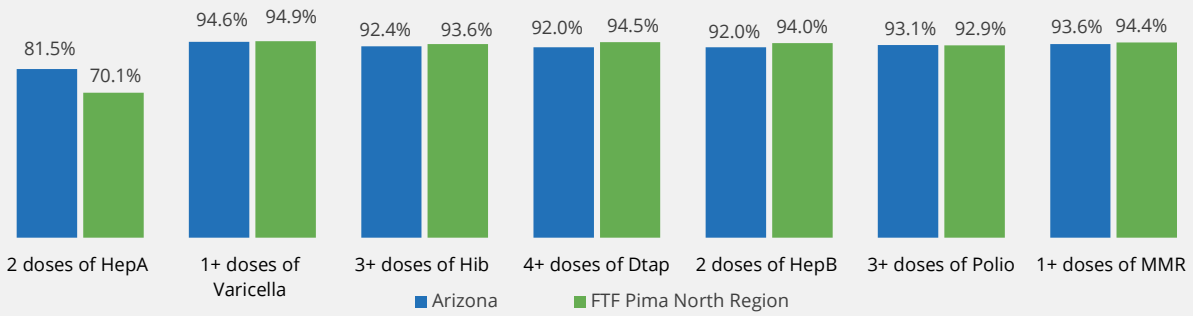
Vaccinations can protect children from measles, mumps, and whooping cough, which are all severe illnesses and potentially fatal to young children[90]. Being vaccinated is not only a protective factor to oneself, but to the community's immunity. [91]

---

[88] *Office on Women's Health (2014). Why breastfeeding is important. Retrieved from https://www.womenshealth.gov/breastfeeding/breastfeeding-benefits.html*
[89] *Healthy People 2020. About Health People Retrieved from https://www.healthypeople.gov/2020/About-Healthy-People*
[90] *Basic Vaccines (2016). Importance of Vaccines. Retrieved from http://www.vaccineinformation.org/vaccines-save-lives/*
[91] *U.S Department of Health and Human Services (2016). Community Immunity. Retrieved from*

In the FTF Pima North Region, the percentage of children in childcare or kindergarten who are exempt from immunizations for religious or medical reasons was lower than the state (see Exhibit 5.14). Compared to the state, the FTF Pima North Region has a slightly higher percentage of children in childcare who received Hib, DTaP, MMR, Hep B, and varicella vaccines (see Exhibit 5.15). This may be due to the provision of immunizations at local schools, which allows easy access to the vaccinations without requiring lengthy travel or health insurance. Additional information regarding engaging in healthy behaviors is provided in Appendix 5.18.

Exhibit 5.15. Percentage of children in childcare who have received immunizations by type of immunization



Immunization Data Reports (2015). Provided by AZ FTF.

http://www.health.ny.gov/prevention/immunization/vaccine_safety/

Oral Health

Severe forms of tooth decay can have negative effects on a child's speech and jaw development, may cause malnourishment and anemia, and may lead to life-threatening infections.[92,93] Fortunately, tooth decay has also been found to be one of the most preventable diseases. It can be prevented by using fluoridated water, brushing and flossing teeth, taking a child to see a dentist regularly starting by the age of one, and getting mothers to practice good oral health care during pregnancy.

Of the parents who have AHCCCS insurance in Arizona, **22%** reported that their child(ren) do not have dental insurance.

75% of parents indicated their child(ren) regularly visited the same dental provider

The *Healthy Smiles Healthy Bodies Survey* was designed to obtain information on the prevalence and severity of tooth decay among Arizona's kindergarten children.[94] In addition, the survey collected information on behavioral and demographic characteristics associated with this condition. *Healthy Smiles Healthy Bodies* included the following primary components – (1) a dental screening and (2) an optional parent/caregiver questionnaire. During the 2014-2015 school year, *Healthy Smiles Healthy Bodies* collected information from children at eighty-four non-reservation district and charter schools throughout Arizona.[95] A total of 3,630 kindergarten children in Arizona received a dental screening. In the FTF Pima North region, 289 children received a dental screening.

Sampling

Healthy Smiles Healthy Bodies sampled children in kindergarten and third grade. District and charter elementary schools with at least 20 children in kindergarten were included in the sampling frame. The following were excluded from the sampling frame: (1) alternative, detention, and state schools for the deaf and the blind plus (2) schools located in tribal communities (based on the Arizona Department of Health Services list of tribal communities). To ensure a representative sample from every county and FTF region, the sampling frame was initially stratified by county. Where a county included more than one FTF region (Maricopa and Pima), the sampling frame was further stratified by FTF region. This resulted in 21 sampling strata; 13 county-level strata, two FTF strata within Pima County, and six FTF strata within Maricopa County. Within each stratum, schools were ordered by their National School Lunch Program (NSLP) participation rate. A systematic probability proportional to size sampling scheme was used to select a sample of five schools per stratum.[96] Three counties (Apache, Greenlee,

---

[92] *National Children's Oral Health Foundation (2015). Facts About Tooth Decay. Retrieved from http://www.ncohf.org/resources/tooth-decay-facts/*

[93] *Raising Children Network. (n.d.). Tooth decay. Retrieved from http://raisingchildren.net.au/articles/tooth_decay.html*

[94] *Using another funding source, ADHS expanded data collection to include 3rd grade children but that information is not included in this report.*

[95] *The sampling frame for the survey included all non-reservation public and charter schools with 20 or more children in kindergarten and/or 3rd grade. The following were excluded from the sampling frame; (1) special schools such as alternative, detention and special education schools plus (2) schools located in tribal communities (based on ADHS list of tribal communities) as additional approvals needed to be in place prior to participation.*

[96] *Probability proportional to size sampling: a sampling technique where the probability that a particular school will be chosen in the sample is proportional (corresponds) to the enrollment size (# of children) of the school*

and La Paz) had fewer than five schools in the sampling frame. For these counties, all schools in the sampling frame were asked to participate. If a selected school did not have kindergarten or third grade, the appropriate feeder school was added to the sample. A systematic sampling scheme was used to select ninety-nine schools. Of these, five did not have kindergarten or third grade so five feeder schools were added to the sample resulting in 104 schools representing ninety-nine sampling intervals, of which eighty-four agreed to participate.

Survey Limitations

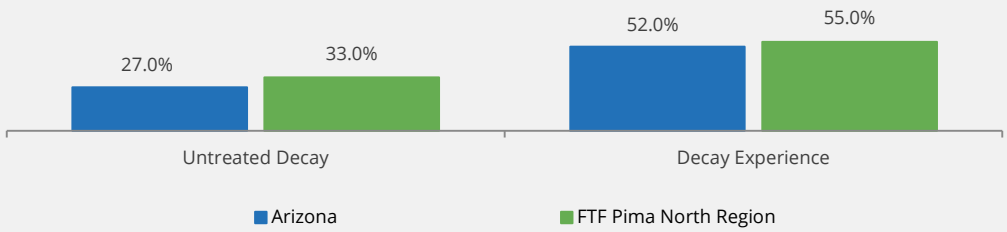
Although the original sample was representative of the state, not all schools participated, which may bias the results. The percentage of children eligible for the NSLP was 58 percent for schools in the sampling frame but was 72 percent for schools that participated, suggesting that lower income schools were more likely to participate. Given that lower income children have more disease; this survey may overestimate the prevalence of disease in the non-tribal communities in the state. Another limitation was the exclusion of tribal communities resulting in small sample sizes for the American Indian/Alaska Native population.

The parent/caregiver questionnaire was optional and was returned for only 44 percent (N=1,583) of the children screened. Because of this, information obtained from the questionnaire may not be representative of the state. In addition, the information was self-reported and may be affected by both recall and social desirability bias. Because of small sample sizes, caution should be taken when interpreting results at the regional and county level.

In the FTF Pima North Region, many residents have AHCCCS insurance which includes dental coverage (82%), which is higher than the state (76%).[97] Three in four respondents to the *Healthy Smiles Healthy Bodies* survey in the FTF Pima North region (75%) reported that they regularly take their children to dental visits.[98] However, more than 50 percent of children screened through the *Healthy Smiles Healthy Bodies* survey in the FTF Pima North Region suffer from tooth decay (see Exhibit 5.16) and, in 2014, about half of the residents living in Arizona did not have access to public water systems that were fluoridated[99]. This indicates there continues to be a need for oral health services for children in the FTF Pima North Region. Additional information regarding oral health is provided in Appendix 5.19.

[97] *Arizona First Things First (2016). Oral Health Report.*
[98] *Arizona First Things First (2012). Family and Community Survey.*
[99] *Fluoride Action Network (2014). State Fluoride Database. Retrieved from http://fluoridealert.org/researchers/states/arizona/*

Exhibit 5.16. Percentage of kindergarten children screened through the *Healthy Smiles Healthy Bodies* Survey who have experienced tooth decay in Arizona and the FTF Pima North Region



Arizona First Things First (2016). Oral Health Report.

HEALTH INDICATOR HIGHLIGHTS

In the FTF Pima North Region, there are efforts to improve certain health indicators (e.g., teen pregnancy), yet there are multiple needs for several health factors (e.g., access to prenatal care). Providing outreach and education to families regarding health services in the FTF Pima North Region is a viable start. Families need to learn about the importance of prenatal care and the danger of substance abuse during pregnancy. The community in the FTF Pima North Region needs help maintaining a healthy lifestyle to mitigate the increasing rates of obesity and diabetes. Increasing the amount of grocery stores and fitness or recreation areas may encourage the community to make healthier decisions. Lastly, although many residents reported taking their children to see a doctor regularly, there is a lack of primary care providers in the county. This may cause a hardship for residents who do not have reliable transportation to access health services, thus decreasing the number of people who go to visit a physician. Seventy-five percent of parents who responded to the Healthy Smiles Healthy Bodies survey in the FTF Pima North Region reported that they regularly take their children to dental visits. However, more than 50 percent of respondents indicated that their child suffers from tooth decay and 33 percent had untreated decay.

Below are key data trends that highlight the health needs and assets and data-driven considerations for the FTF Pima North Region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
Approximately 90% of children in the region are receiving immunizations.	Continue to promote healthy preventive behaviors like receiving immunizations.

Needs	Considerations
Almost three fourths of parents (69%) are unaware of the impact they have on their child's development during the prenatal stage.	Continue to provide outreach and education regarding prenatal care, especially targeting first-time and teen mothers.
More than half of children (55%) were reported to have experienced tooth decay and 33% of children had untreated tooth decay.	Promote good oral health through other FTF programs, such as home visitation, and consider partnering with pediatricians to encourage oral health practices during well-child visits.
More than 50 percent of children screened through the *Healthy Smiles Healthy Bodies* survey in the FTF Pima North Region suffer from tooth decay.	Advocate for fluoridation in water in the communities within the FTF Pima North Region. Currently, Tucson Water does not add fluoride to the drinking water supply.

6. Family Support and Literacy

Why it Matters

The first five years of life have a significant impact on children's intellectual, social, and emotional development and research shows that parents have a profound impact on their child's development during this time period.[100] Support for young families is an essential piece of the holistic efforts around kindergarten readiness and long term success for children. FTF supports families through Evidence-based home visitation and parenting education programs and through parent outreach and awareness programs. Parenting education and support to improve parenting practices can reduce stressors and lead to enriched child development and reduction of removals of children from their homes.

Given the importance of the first years of life on children's development and the role that parents can play, it is crucial that parents understand their child's needs and use effective parenting techniques while raising their child. Gaining more knowledge about parenting and child development allows parents to improve their parenting practices and provide their children with the experiences they need to succeed in kindergarten and beyond.[101]

Furthermore, the adverse effects of the trauma of children being removed from their parents and placed in foster care are well-documented. Early abuse and neglect have been shown to affect neurodevelopment and psychosocial development and potentially impact long term mental, medical, and social outcomes.[102] Children exposed to domestic violence or who are the victims of abuse or neglect are also at increased risk to experience depression and anxiety and are more disposed to physical aggression and behavior problems.[103] Understanding the impact of trauma has led to identifying opportunities to both prevent and mitigate the adverse effects through family support services like home visitation and parent education, as well as prioritizing out-of-home placements with family members or foster families before congregate care. Given the negative outcomes associated with children who enter the system or are exposed to trauma or violence at a young age, it is important to understand the prevalence of these experiences in the FTF Pima North region to provide the necessary support to children and their families.

What the Data Tell Us

Family Caregiver Survey 2012 Survey Methodology

The Family and Community Survey was designed to measure many critical areas of parent knowledge, skills, and behaviors related to their young children. The survey contained over sixty questions, some of which were drawn from the national survey, *What Grown-Ups Understand About Child Development*.[104] Survey items explored multiple facets of parenting. The FTF Family and Community Survey had six major areas of inquiry:

---

[100] *Center for the Study of Social Policy (2013). Knowledge of Parenting and Child Development. Retrieved from http://www.cssp.org/reform/strengthening-families/2013/SF_Knowledge-of-Parenting-and-Child-Development.pdf*
[101] *Center for the Study of Social Policy (2013). Knowledge of Parenting and Child Development. Retrieved from http://www.cssp.org/reform/strengthening-families/2013/SF_Knowledge-of-Parenting-and-Child-Development.pdf*
[102] *Putnam, F. (2006). The impact of trauma on child development. Juvenile and Family Court Journal. 57 (1) 1-11.*
[103] *Evans, S. E., Davies, C., & DiLillo, D. (2008). Exposure to domestic violence: A meta-analysis of child and adolescent outcomes. Aggression and violent behavior, 13(2), 131-140.*
[104] *CIVITAS Initiative, ZERO TO THREE, and BRIO Corporation, Researched by DYG, Inc. 2000. What Grown-ups Understand About* Child

A total of 3,708 parents with children under six (FTF's target population) responded to the 2012 survey. The majority of respondents (83%) were the child's parent. The remaining respondents were grandparents (13%) or other relatives (4%). In the FTF North Pima Region, 153 parents participated in the survey. In the FTF Central Pima Region, 200 parents participated in the survey. In State Fiscal Year 2015, First Things First consolidated the former North Pima and Central Pima Regions into the current Pima North Region. This consolidation also included zip codes 85757 and 85746 shifting to Pima South and 85730 and 85748 shifting to Pima North.

The sample data were weighted so that the sample would match the population of the state on four characteristics: Family income, Educational attainment, Sex, and Race-ethnicity. Data was weighted at both the statewide level to arrive at the Arizona results and at the regional level to arrive at the regional results. Please note that regional estimates are necessarily less precise than the state estimates; i.e. small differences observed might easily be due to sampling variability.

As discussed in the Health section, 31 percent of parents in the FTF North Pima Region and 35 percent of parents in the FTF Central Pima Region understand they can significantly impact their child's brain development prenatally, compared to 32 percent of parents statewide. Similarly, survey results also show that 40 percent of parents in both regions understand that an infant can take in and react to the world around them right from birth, compared to 35 percent in Arizona. In addition, 52 percent of parents in the FTF North Pima Region and 53 percent of parents in the FTF Central Pima Region understand that a baby can sense whether or not his parent is depressed or angry, and can be affected by his parents' mood from birth to one month. In contrast, 81 percent of parents in the FTF North Pima Region and 77 percent of parents in the FTF Central Pima Region understand that the first year of life has a major impact on school performance, which is lower than statewide.[105] This indicates that, while most parents may understand the importance of child development, survey results indicate that not all parents are aware of the stages of development and the impact they have on their child, beginning prenatally.

Development: A *National Benchmark Survey. Online*, INTERNET, 06/20/02. *http://www.civitasinitiative.com/html/read/surveypdf/survey_public.htm*

[105] *Arizona First Things First (2012). Family and Community Survey.*

31% of parents in the FTF North Pima Region and 35% of parents in the FTF Central Pima Region understand that they can significantly impact their child's brain development in the prenatal stage.

40% of parents in the FTF North Pima Region and the FTF Central Pima Region understand that an infant or young child can really take in and react to the world around them right from birth, which is 5% higher than Arizona

52% of parents in the FTF North Pima Region and 53% of parents in the FTF Central Pima Region understand that a baby can sense whether or not his parent is depressed or angry, and can be affected by his parents' mood from birth to one month, both of which are slightly higher than Arizona

81% of parents in the FTF North Pima Region and 77% of parents in the FTF Central Pima Region understand that the first year of life has a major impact on school performance, both of which are lower than Arizona

Over three-quarters of parents in the state of Arizona (77%) and the FTF North Pima Region (85%) understand that a child's capacity for learning is not set from birth and can be increased or decreased by parental interaction, compared to 62 percent in the FTF Central Pima Region. Survey results also show that 80 percent of parents in the FTF North Pima Region and 56 percent in the FTF Central Pima Region understand that children receive a greater benefit from talking to a person in the same room compared to hearing someone talk on the TV. Additionally, 97 percent of parents in both regions understand emotional closeness can strongly influence a child's intellectual development, which is one percent higher than the state.[106]

[106] *Arizona First Things First (2012). Family and Community Survey.*

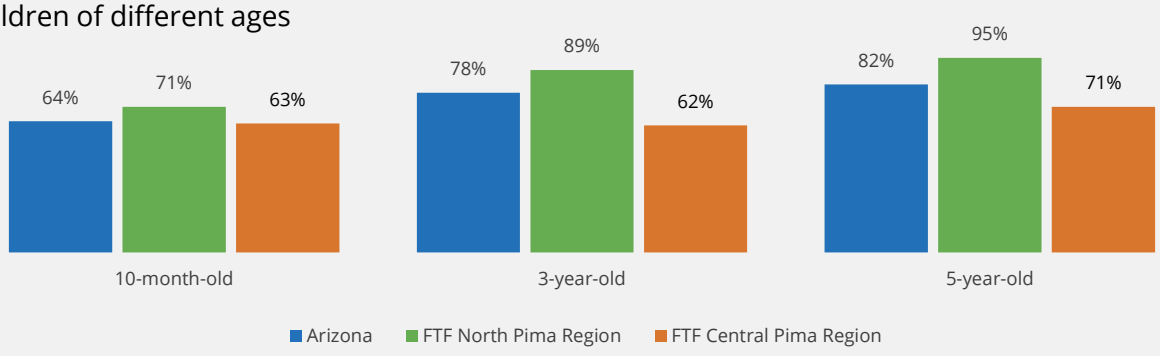
85% *of parents in the FTF North Pima Region and* **62%** *of parents in the Central Pima Region understand that a child's capacity for learning is not set from birth and can be increased or decreased by parental interaction, both of which are higher than Arizona*

80% *of parents in the FTF North Pima Region and* **56%** *of parents in the Central Pima Region understand that children receive a greater benefit from talking to a person in the same room compared to hearing someone talk on the TV.*

97% *of parents in the FTF North Pima Region and FTF Central Pima Region understand that emotional closeness can strongly influence a child's intellectual development, which is* **1%** *higher than Arizona.*

In the FTF North Pima and Central Pima Regions parents also understand the importance of play for young children of all ages. In the North Pima Region, over two-thirds of parents (71%) recognize the crucial importance of play for children 10 months old, more than 85 percent understand that play is important for 3-year-olds, and 95 percent understand that play is important for 5-year-olds. All of these are higher in the FTF North Pima Region than the state (see Exhibit 6.1). In contrast, fewer parents in the FTF Central Pima Region recognized the crucial importance of play for 10-month-olds (63%), for 3-year-olds (62%), and for 5-year-olds (71%).

Exhibit 6.1. Percentage of parents that understand the crucial importance of play for children of different ages



Arizona First Things First (2012). Family and Community Survey.

The FTF Family and Community Survey also asked respondents about their understanding of age appropriate behaviors and expectations for children. A series of questions asked about a scenario

where a child walks up to the TV and begins to turn the TV on and off repeatedly. More than 80 percent of parents in both regions correctly identified that this behavior likely means that the child wants to get his or her parents' attention or enjoys learning about what happens when buttons are pressed. Additionally, in the FTF North Pima Region 76 percent correctly responded that it is not at all likely that the child is angry at her parents, compared to 54 percent in the Central Pima Region (see Exhibit 6.2).

Exhibit 6.2. Parent understanding of child behaviors in the FTF Pima North Region

If a child walks up to the TV and begins to turn the TV on and off repeatedly, how likely is it that...	Very likely		Somewhat likely		Not at all likely		Not sure	
	North Pima	Central Pima	North Pima	Central Pima	North Pima	Central Pima	North Pima	Central Pima
The child wants to get her parents' attention	50%	54%	41%	29%	7%	16%	2%	1%
The child enjoys learning about what happens when buttons are pressed	74%	74%	21%	21%	4%	5%	0%	0%
The child is angry at her parents for some reason or she is trying to get back at them	3%	24%	19%	21%	76%	54%	2%	0%

Arizona First Things First (2012). Family and Community Survey.

The FTF Family and Community Survey assessed parent or caregiver perceptions around spoiling their child. More than half of survey respondents in the FTF North Pima Region (56%) and the FTF Central Pima Region (57%) correctly responded that a fifteen-month-old baby should not be expected to share her toys with other children and nearly 70 percent in both regions correctly responded that a 3-year-old child should not be expected to sit quietly for an hour or so. Although more than half of respondents correctly responded about appropriate behaviors for children, less than half (39-40%) in both regions, correctly responded that a six-month-old is too young to spoil. About half of respondents correctly identified that picking up a three-month-old every time she cries and letting a two-year-old get down from the dinner table to play before the rest of the family was appropriate behavior. More than 80 percent (84%) in the FTF North Pima Region and 70 percent in the FTF Central Pima Region also identified that letting a five-year-old choose what to wear to school every day is appropriate.

56% of parents in the FTF North Pima Region and 57% in the FTF Central Pima said a 15-month-old baby should not be expected to share her toys with other children

68% of parents in the FTF North Pima Region and 69% in the FTF Central Pima said a 3-year-old child should not be expected to sit quietly for an hour or so

39% of parents in the FTF North Pima Region and 40% in the FTF Central Pima said a 6-month-old is too young to spoil

Exhibit 6.3 Parent Ratings of Child Behavior

Parents who rated the following behavior as appropriate:	North Pima	Central Pima
Picking up a three-month-old every time she cries	57%	70%
Letting a two-year-old get down from the dinner table to play before the rest of the family	47%	36%
Letting a five-year-old choose what to wear to school every day	84%	70%

Arizona First Things First (2012). Family and Community Survey.

More than half of parents or other family members in the FTF North Pima Region reported either reading, drawing, or telling stories/singing songs to their children six or seven days a week.[107]

[107] *Arizona First Things First (2012). Family and Community Survey.*

Read stories to your child/ children 6 or 7 days a week

Central Pima 55%

North Pima 59%

Scribble, pretend draw or draw 6 or 7 days a week

Central Pima 46%

North Pima 54%

Tell stories or sing songs 6 or 7 days a week

Central Pima 54%

North Pima 54%

Over 60 percent of parents in the FTF North Pima Region and 49 percent of parents in the FTF Central Pima Region indicated that they have more than 100 books in their home. However, only half (47%) of parents in the FTF North Pima Region and 19% in the FTF Central Pima Region reported having 100 or more children's books in their home.[108]

64% of parents in the FTF North Pima Region and 49% in the Central Pima Region reported having 100 or more books in their home

**Books include library books and e-books*

47% of parents in the FTF North Pima Region and 19% in the Central Pima Region reported having 100 or more children's books in their home, compared to 30% in Arizona

Child Abuse and Domestic Violence

Maltreatment of children during early childhood has been shown to negatively affect child development, including cognitive development, attachment, and academic achievement.[109] Research shows that family support services, like home visiting, can improve parenting skills and home environments, which are likely associated with improved child well-being and decreases in maltreatment over time.[110]

From October 2014 to September 2015 there were 9,504 reports of maltreatment of children under age 18 in Pima County.[111] Of those, 9,433 reports were investigated, 6,080 cases were unsubstantiated, and

[108] *Arizona First Things First (2012). Family and Community Survey.*
[109] *Child Welfare Information Gateway. Retrieved from https://www.childwelfare.gov/topics/can/impact/development/*
[110] *Howard, K.& Brooks-Gunn, J. (2009). The Role of Home-Visiting Programs in Preventing Child Abuse and Neglect. The Future of Children 19 (2) 119-146.*
[111] *Arizona Department of Child Services (2015). Child Welfare Reporting Requirements Semi-Annual Report. Retrieved from https://dcs.az.gov/sites/default/files/SEMIANNUAL-CHILD-WELFARE-REPORTING-REQUIREMENTS-4-15-9-15_FINAL-Revised.pdf*

971 cases of child abuse and neglect were substantiated, i.e. determined to be true, by the Department of Child Services, with the majority of them being neglect cases (see Exhibits 6.4-6.8). In addition, between October 1, 2014 and September 30, 2015, approximately 13 percent of reports of maltreatment that were assigned for investigation resulted in a child being removed (see Exhibit 6.9).

Exhibit 6.4 Number of reports of child abuse and neglect by maltreatment for children under 18 between October 2014 to September 2015

	Arizona	Pima County
Total	51,963	9,504
Neglect	37,614	7,059
Physical abuse	12,340	2,131
Sexual abuse	1,741	255
Emotional abuse	268	59

Arizona Department of Child Services (2015). Child Welfare Reporting Requirements Semi-Annual Report. Retrieved from https://dcs.az.gov/sites/default/files/SEMIANNUAL-CHILD-WELFARE-REPORTING-REQUIREMENTS-4-15-9-15_FINAL-Revised.pdf

Exhibit 6.5 Number of reports of child abuse and neglect assigned for investigation by maltreatment for children under 18 between October 2014 to September 2015

	Arizona	Pima County
Total	51,204	9,433
Neglect	37,006	7,044
Physical abuse	12,212	2,118
Sexual abuse	1,719	252
Emotional abuse	267	59

Arizona Department of Child Services (2015). Child Welfare Reporting Requirements Semi-Annual Report. Retrieved from https://dcs.az.gov/sites/default/files/SEMIANNUAL-CHILD-WELFARE-REPORTING-REQUIREMENTS-4-15-9-15_FINAL-Revised.pdf

Exhibit 6.6 Unsubstantiated cases of child abuse and neglect by maltreatment for children under 18 between October 2014 to September 2015

	Arizona	Pima County
Total	26,606	6,080
Neglect	18,709	2,814
Physical abuse	6,941	1,507
Sexual abuse	794	130
Emotional abuse	162	45

Arizona Department of Child Services (2015). Child Welfare Reporting Requirements Semi-Annual Report. Retrieved from https://dcs.az.gov/sites/default/files/SEMIANNUAL-CHILD-WELFARE-REPORTING-REQUIREMENTS-4-15-9-15_FINAL-Revised.pdf

Exhibit 6.7 Substantiated cases of child abuse and neglect by maltreatment for children under 18 between October 2014 to September 2015

	Arizona	Pima County
Total	5,461	971
Neglect	4,619	836
Physical abuse	712	118
Sexual abuse	125	16
Emotional abuse	5	1

Arizona Department of Child Services (2015). Child Welfare Reporting Requirements Semi-Annual Report. Retrieved from https://dcs.az.gov/sites/default/files/SEMIANNUAL-CHILD-WELFARE-REPORTING-REQUIREMENTS-4-15-9-15_FINAL-Revised.pdf

Exhibit 6.8 Number and percent of reports of child abuse and neglect assigned for investigation where a removal occurred for children under 18

	April 1, 2015-September 30, 2015			October 1, 2014- March 31, 2015		
	Number of Reports Assigned	Number of Reports Assigned with a Removal	% of Reports where a child was removed	Number of Reports Assigned	Number of Reports Assigned with a Removal	% of Reports where a child was removed
Arizona	26,022	3,280	12.6%	25,182	2,905	11.5%
Pima County	4,772	627	13.1%	4,661	589	12.6%

Arizona Department of Child Services (2015). Child Welfare Reporting Requirements Semi-Annual Report. Retrieved from https://dcs.az.gov/sites/default/files/SEMIANNUAL-CHILD-WELFARE-REPORTING-REQUIREMENTS-4-15-9-15_FINAL-Revised.pdf

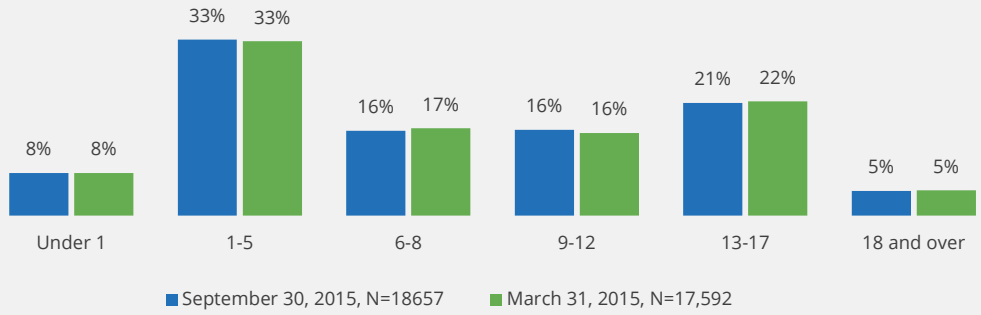
During the same period there were 18,657 children under 18 in foster placements in Arizona as of September 30, 2015 and 12,754 children under 18 who entered out-of-home care such as foster care, kinship care, or residential and group care between October 2014 to September 2015, 2,323 in Pima County (see Exhibit 6.9). In Arizona, 41% of children in out-of-home care were ages five and under (see Exhibit 6.10).

Exhibit 6.9 Children under 18 in foster placements on September 30, 2015 and number who entered out-of-home care between Oct 2014 and Sept 2015

	Arizona	Pima County
Children under 18 in foster placements	18,657	**
Children under 18 entering out-of-home care	12,754	2,323

***Data not available at County level*
Arizona Department of Child Services (2015). Child Welfare Reporting Requirements Semi-Annual Report. Retrieved from https://dcs.az.gov/sites/default/files/SEMIANNUAL-CHILD-WELFARE-REPORTING-REQUIREMENTS-4-15-9-15_FINAL-Revised.pdf

Exhibit 6.10 The Number of Children in Out-of-Home Care by Age in Arizona



Arizona Department of Child Services (2015). Child Welfare Reporting Requirements Semi-Annual Report. Retrieved from https://dcs.az.gov/sites/default/files/SEMIANNUAL-CHILD-WELFARE-REPORTING-REQUIREMENTS-4-15-9-15_FINAL-Revised.pdf

In Pima County there is one domestic violence shelter funded by the Department of Economic Security and in 2015 it served a total of 675 people and provided over 9,000 hours of support services (see Exhibit 6.11).

Exhibit 6.11 Domestic violence shelters, people served, and hours of support services provided

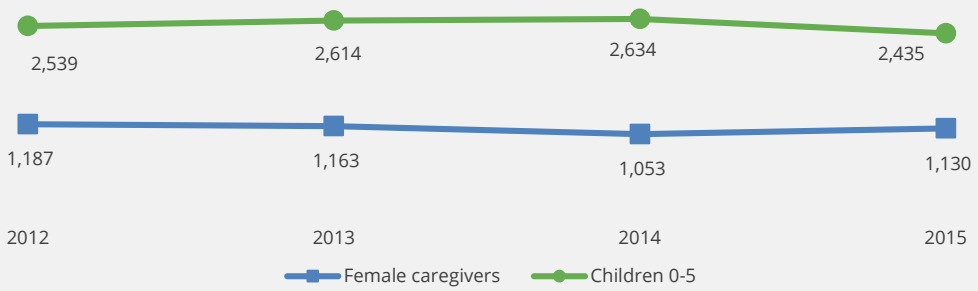
	Arizona	Pima County
Number of domestic violence shelters	31	1
Number of adults served	3,862	367
Number of children served	3,705	308
Hours of support services provided	144,025	9,012
Average length of stays/days	39	29

Arizona Department of Economic Security (2015). Domestic Violence Shelter Fund Report. Retrieved from https://des.az.gov/services/basic-needs/domestic-violence-program

Behavioral Health Services

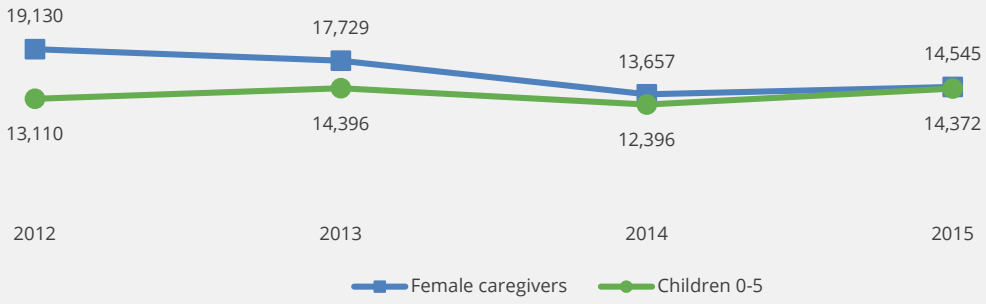
Behavioral health focuses on the promotion of family well-being through the prevention or intervention of mental health issues, such as depression or addiction. Children of parents with mental health issues often grow up in inconsistent and unpredictable family environments and are at risk for developing social, emotional, and/or behavioral problems.[112] The behavioral health services discussed in this section include behavioral health day programs, crisis intervention services, inpatient services, medical services, rehabilitation services, support services, and treatment services . In the FTF Pima North Region over 1,000 female caregivers and nearly 2,500 children ages zero to five received behavioral health services from the Arizona Department of Health Services in 2015. Exhibit 6.12 and Exhibit 6.13 show how the number of female caregivers and children served has varied over the years in the region and statewide.

Exhibit 6.12 Number of female caregivers and children receiving behavioral health services in the FTF Pima North Region



Arizona Department of Health Services (2014). Behavioral Health. Provided by AZ FTF.

Exhibit 6.13 Number of female caregivers and children receiving behavioral health services in Arizona



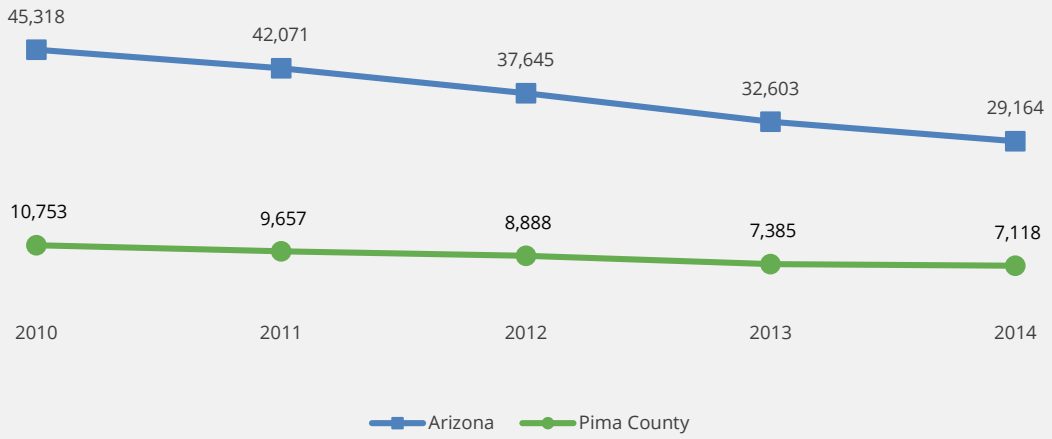
Arizona Department of Health Services (2014). Behavioral Health. Provided by AZ FTF.

[112] *Mental Health America. Retrieved from http://www.mentalhealthamerica.net/parenting*

Juvenile Arrests and Substance Use

The number of juvenile arrests for children ages eight to seventeen in Pima County decreased drastically from 2010 to 2014, falling by 35 percent (see Exhibit 6.14). See appendices 6.1-6.2 for additional information on the type of arrests and number of arrests for Arizona.

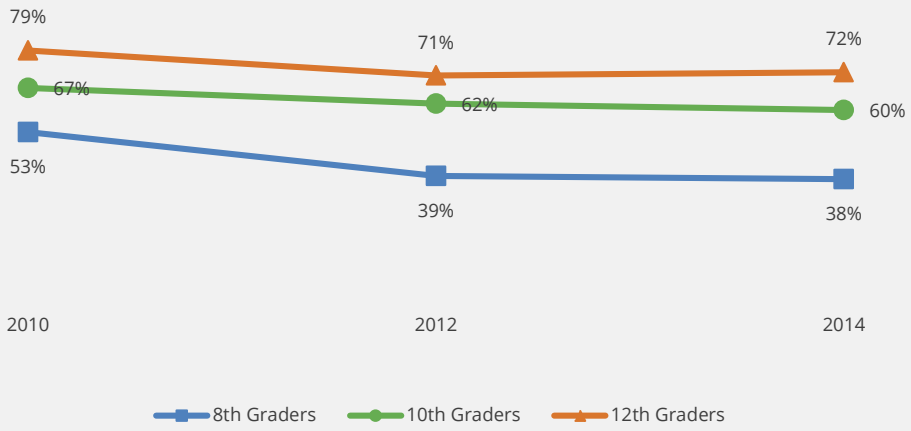
Exhibit 6.14. Arrests of children ages 8 to 17



Kids Count Data Center (2014). Juvenile Arrests. Retrieved from http://datacenter.kidscount.org/

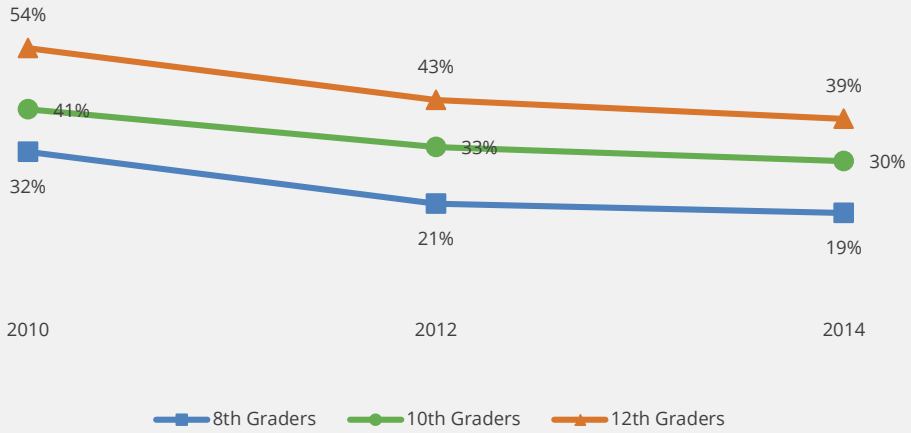
In Pima County use of alcohol and cigarettes among adolescents has shown a steady decline from 2010 to 2014 as reported by the Arizona Youth Survey. In 2014, 72 percent of 12th graders reported using alcohol compared to 79 percent in 2010. In 2014, 39 percent of 12th graders reported using cigarettes compared to 54 percent in 2010 (see Exhibit 6.15 and Exhibit 6.16). While use of alcohol and cigarettes among adolescents has shown a consistent decline in recent years, marijuana usage rates have not shown a consistent trend. In 2014, nearly half of 12th graders (48%) reported using marijuana (see Exhibit 6.17).

Exhibit 6.15. Alcohol use by adolescents in Pima County



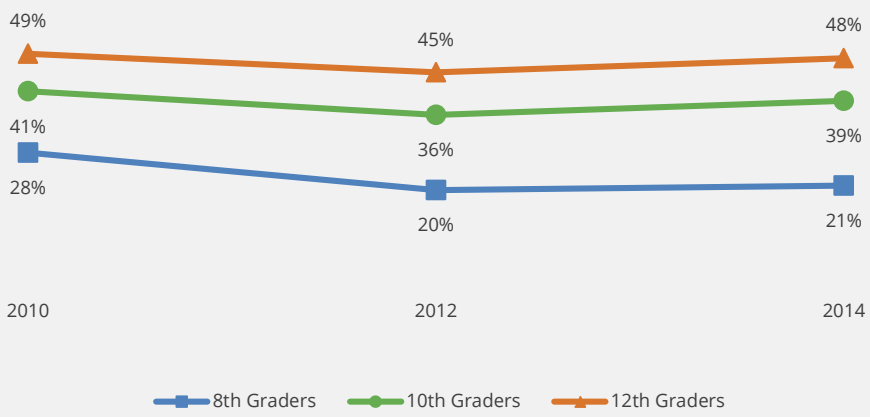
Arizona Criminal Justice Commission (2014) Arizona Youth Survey State Report. Retrieved from http://www.azcjc.gov/acjc.web/sac/ays.aspx

Exhibit 6.16. Cigarrette use by adolescents in Pima County



Arizona Criminal Justice Commission (2014) Arizona Youth Survey State Report. Retrieved from http://www.azcjc.gov/acjc.web/sac/ays.aspx

Exhibit 6.17. Marijuana use by adolescents in Pima County



Arizona Criminal Justice Commission (2014) Arizona Youth Survey State Report. Retrieved from http://www.azcjc.gov/acjc.web/sac/ays.aspx

Home Visitation Landscape Scan

The intent of the evidence-based Home Visitation strategy is to provide personalized support for families with young children during pregnancy and through the children's first years of life, particularly as part of a comprehensive and coordinated system. Expected outcomes that are common to home visitation programs include: improved child health and development, increase in children's school readiness, enhancement of families' abilities to support their children's development, decreased incidence of child maltreatment, and improved family economic self-sufficiency and stability.[113]

Decades of research and evidence demonstrate that home visitation can be an effective method of delivering family support and child development services.[114] A variety of evidence-based models exist to address the spectrum of universal, targeted, or specialized needs of particular populations such as first time caregivers, teen parents, families at-risk for abuse or neglect, or low-income families. The experience and credentials of the home visitor, the duration and intensity of the visits, and the end goal or focus of the intervention are critical to implementation and achieving the intended impacts. Comprehensive, evidence-based home visitation programs provide participating families of infants and toddlers with information, education, and support on parenting, child development. and health topics, while simultaneously assisting with connections to other resources or programs as needed. Having a portfolio of high-quality home visiting programs is beneficial for serving the diverse needs of Arizona's children and families.

Home visiting is defined as a voluntary enrollment program in which early childhood and health professionals, such as nurses, social workers, or trained and supervised paraprofessionals repeatedly visit the homes of pregnant women or families with children prenatal through age 5 (not yet in kindergarten) who are at higher risk of exposure to familial and environmental factors that have the potential to impact their healthy development.

With a broad base of evidence supporting the impact of home visitation programs, the FTF Pima North Regional Partnership Council contracted with Harder+Company Community Research to conduct a landscape scan of the home visitation programs being implemented across the region to assess the current network of home visiting services in the FTF Pima North Region and identify the strengths and resources available, as well as the gaps and overlaps of services.

---

[113] *US Department of Health Resources and Services Administration (HRSA) Maternal & Child Health; https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting-overview*

[114] *Mathematica*, 2014

The following data sources were incorporated in the landscape scan:

- Existing documents including the FTF standards of practice and previous Home Visitation reports
- Discussion with the FTF Pima North Regional Director and Home Visitation Referral Coordinator
- Stakeholder interviews with program directors and home visitation staff
- Facilitated discussion with members of the Family Support Alliance

Summary of Home Visitation Programs in the FTF Pima North Region

Exhibit 6.18 highlights key details for each of the Home Visitation models offered in the FTF Pima North Region as described by interviewees. The table describes each of the models provided in the region, the organizations implementing the models, the funding sources, the eligibility criteria and the strengths of the model. Most programs target Pima County in general. Each program has specific eligibility criteria for families and many of them serve low-income families, teens, refugee families, and families with special needs.

Exhibit 6.18: Summary of Home Visitation Programs in the FTF Pima North Region

Home Visitation Model	Agency Implementing the Model	How many families are being served?	Funding Source	Funding Amount	How long have you been receiving funding? When will it expire?	Eligibility Requirements
Nurse Family Partnership (NFP)	Casa de los Niños	220	First Things First	$1,100,000	Funding expires 6/30/2018	• Must enroll during your first pregnancy and must be less than 28 weeks pregnant. • Visits based on family's needs, typically biweekly. • Serve families through child's second birthday.
		110	MIECHV	$922,227	Funding expires 9/30/2017	
	Easter Seals Blake Foundation	Target = 110 70 currently enrolled 108 served this FY thus far	First Things First	$495,086	Funded since 2010 Funding expires June 2018	
		Target = 75 65 currently enrolled 97 served this FY thus far	MIECHV	$ 359,095	Funded since 2012 Funding expires in September 2017	
	Pima County Health Department	Unknown	Unknown	Unknown	Unknown	
Parents As Teachers (PAT) Collaborative	Marana Unified School District	54	First Things First	$82,940.00	Funded since July of 2009 Funding expires June 2018	• Serves pregnant women and children up to the age of 5 throughout Pima County. • Typically monthly or bi-weekly visits in the home. • No income eligibility, model is open to all • Grant gives more strict population (0-3),
			School District	$21,095.00		
	Casa de los Niños	164 contracted to serve annually	First Things First	$497,533.00	Funded for 5 years 9 months Funding expires 6/30/2018	

Exhibit 6.18: Summary of Home Visitation Programs in the FTF Pima North Region

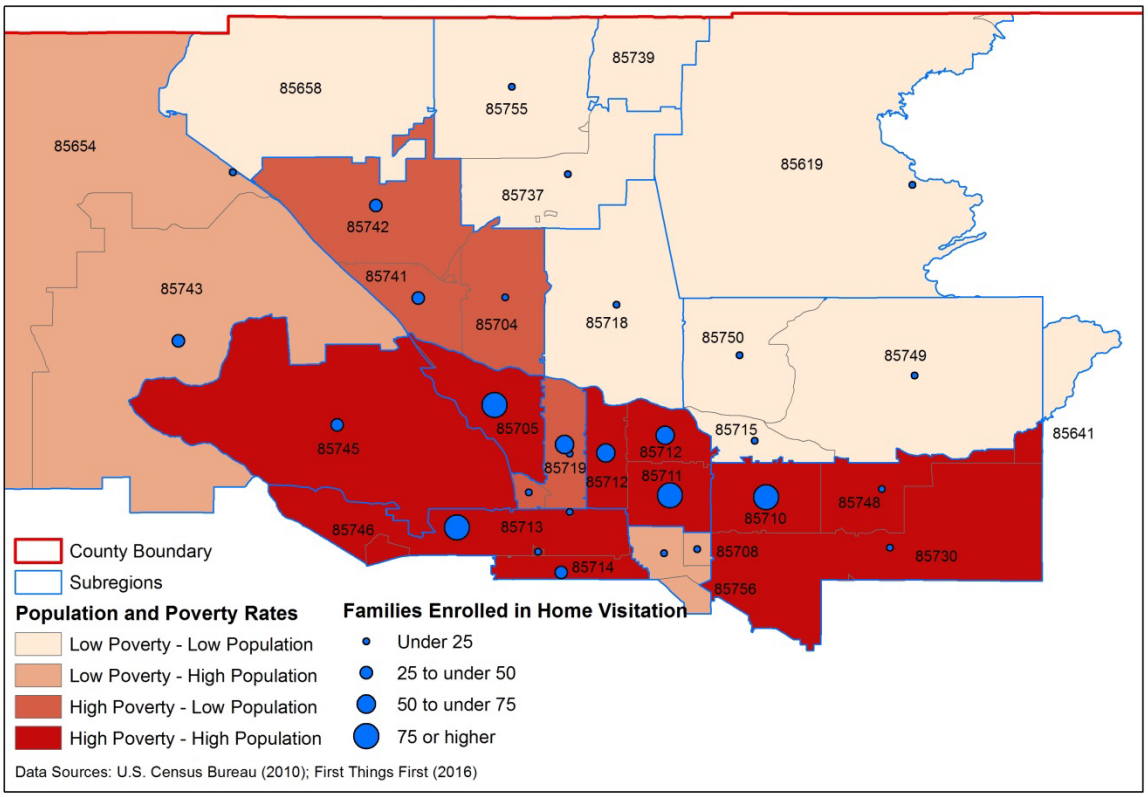
Home Visitation Model	Agency Implementing the Model	How many families are being served?	Funding Source	Funding Amount	How long have you been receiving funding? When will it expire?	Eligibility Requirements
	Easter Seals Blake Foundation	Target= 61 75 served this FY so far	First Things First	FY 2016-2017 $518,880 for both Pima North and South	Funded since 2012 Funding expires FY 17-18	gap of 4-5 year olds being served (4-5 not funded
	Sunnyside School District	Unknown	Unknown	Unknown	Unknown	
	Amphitheater Public School District	35 (current number served)	State and Federal Programs / Title I	$127,000.00	Funded for 14 years Funding is determined on a fiscal year basis	
		65	First Things First	$136,828.02	Funded for 8 years Funding expires June 30, 2018	
Healthy Families America (HFA)	Child and Family Resources	1,256 (total number served in the past year	First Things First	$771,661.00	Funded for 8yrs Funding expires 6/30/18	• Serves families who are pregnant or must enroll before the child is 3 months old. • Families eligible until the child is 5. • Typically weekly visits in the home.
			DCS	$821,552	Funded for 25yrs Funding expires 12/31/17	
			MIECHV	$428,227	6yrs/9/30/18	
SafeCare	Parent Aide	Contracted: FTF South: 27 FTF North: 50	FTF	$188,893.40	Funded for 8 years, Funding expires this year	• Serves families with children birth to 12 throughout Pima County. • Typically weekly visits in the home
		12-20	City of Tucson	$30,000.00	Funded for 11 years, Will need to reapply in FY 2018-19	
Health Start	Pima County Health Department	Unknown	Unknown	Unknown	Unknown	• Services can start during pregnancy. • Serve families through child's second birthday. • Typical visits are as needed. • Moms with a medical and social risk factor.
Head Start	Child Parent Centers	180 (60 on the north side)	Federal	Unknown	Apply for funding every May	• Children 3-5 • Weekly home visits • Homeless, foster, FSI or TANF, child with IEP, 10% over income, 100% FPL • Biweekly socialization

Early Head Start	Child Parent Centers	168	Federal	Unknown	Apply for funding every May	• Pregnant women and Families with children 0-3.
						• Weekly home visits
						  • Homeless, foster, FSI or TANF, child with IEP, 10% over income, 100% FPL
						  • Biweekly socialization

	Easter Seals Blake Foundation	50				

Exhibit 6.19 displays the total number of families enrolled in home visitation by poverty and population rates. Sub-regions with high populations and high poverty rates generally had 75 or more families enrolled in home visitation while regions with low poverty and low populations had fewer than 25 families enrolled in home visitation.

Exhibit 6.19 Population, Poverty and Home Visits



Referrals

The home visitation system in Pima North is unique in that it has a centralized referral system to help connect families to the most appropriate home visitation program for their needs. Partners within the system often send referrals to the centralized referral system (e.g. if a family does not fit their program requirements) in order to connect the family to the appropriate program. However, several stakeholders indicated that they rarely receive referrals directly from the centralized referral system.

Interviewees indicated that many of the agencies conduct their own outreach to enroll families in the program, whether through events, doctor's offices, or media campaigns. Others indicated that families come to them via word-of-mouth or self-referrals. There are also referrals that come from other organizations such as WIC, Primeros Pasos, or the Department of Child Services (DCS).

Barriers/Challenges to Participation

Stakeholders indicated there were several barriers that families experience that might make them less likely to enroll or maintain home visitation services.

- **Scheduling/time constraints**: Although home visitors are very accommodating to families' schedules, oftentimes it can be challenging for some families to find the time to participate, especially if the parent is going back to school or work.
- **Discomfort with welcoming someone into their home:** Working with higher risk families, there are often times trust issues and families are not always comfortable welcoming a stranger into their home. Sometimes, parents may associate home visitation with the Arizona DCS and are reluctant to participate because of this perceived association.
- **Meeting language needs of families:** It can be challenging to find and retain bilingual home visitors that can support families who speak many different languages and who are also trained in social services.
- **Mobility of families:** Families tend to move a lot both out of the area and within the area, which makes it challenging to keep them engaged.
- **Staff turnover:** Turnover in staff at home visiting agencies makes it challenging to keep families engaged, especially when they become comfortable with a specific home visitor.
- **Transportation for Additional Activiti**es: Although a huge asset to home visitation programs is the fact that home visitors travel to families' homes, there are often activities available to program participants such as moms groups or story time. Not all families have easy access to transportation and therefore they cannot always participate in these additional activities.

Key Strengths of Individual Home Visitation Programs in the FTF Pima North Region

Programs within the FTF Pima North Home Visitation system have individual strengths that contribute to the overall strengths of the Home Visitation system as a whole. Some of the strengths highlighted by interviewees are included in Table 1. They include evidence-based models, improving parent confidence, preventing child maltreatment, varying time commitments for each program, and supporting children's learning.

Most of the home visitation programs utilized in the region are evidence-based models which require a certain amount of implementation fidelity to ensure maximum impact on families. Programs have different requirements for staff that must be met in order to keep the fidelity of the model. The majority of the programs are flexible, with services being provided to families when they are available and at their home. The programs are also family-centered and focus on what the family needs to thrive. Although there are many strengths of the individual programs, each also struggles with staff retention and meeting the requirements of different funders.

Key Strengths of the Home Visitation System in the FTF Pima North Region

The FTF Pima North Home Visitation System offers a variety of models to support families with young children. This diverse array of programs is a key strength of the system as a whole because different programs may better suit specific families. Several interviewees and meeting participants highlighted the importance of the Family Support Alliance (FSA), which provides a venue for key partners in home visitation and parent education programs to come together to discuss resources and questions and to strategize about improving the overall systems in the region. Strengths of the FSA include:

- Allowing for communication between agencies providing home visitation throughout the region;
- Having one centralized resource for community members with questions regarding home visitation (one coordinator). For example, if someone is interested in learning more about home visitation in the region, the FSA coordinator has a strong understanding of all of the programs and can easily connect people to the appropriate resources;
- Providing professional development opportunities for home visitation staff such as conferences and trainings;
- Building trust between individual agencies and programs;
- Bringing home visitors and home visitation program staff together to discuss strengths, challenges and strategies on a monthly basis;
- Focusing on a continuum of services that ensures families are connected to the appropriate programs and referred on to additional services if needed;
- Providing networking and learning opportunities, like the Annual Conference.

The centralized referral system also provides an element of coordination between programs within the system. However, one interviewee indicated that it was underutilized and it does not do a lot for individual programs. There was also concern that, since funding has changed, the new referral system may prioritize some Pima County Health Department programs over others.

Impact on Families

Not only does the Home Visitation system provide important services to families in the region, it also helps connect them to other programs the family might benefit from. The system provides a continuity of services so that the family can transition out of home visitation into another early childhood program, if needed. In addition, home visitation helps prepare children for school by teaching important skills to both the parents and children.

Gaps/Overlaps in Services

Interviewees and FSA participants indicated there were a few gaps in services that could be addressed to improve the overall system.

- **Additional language services:** With growing immigrant and refugee populations in the region, there is a continued need to provide bilingual/bicultural staff and translation services.
- **Need to further engage rural families:** It continues to be a challenge to reach rural families. Some respondents felt that this is because rural families tend to move to rural

locations to be more secluded and are more hesitant to participate in home visitation.

- **Strengthen link to Airforce base:** One respondent stated that it is hard to get into the airforce base because their services are very insulated and they are not always embracing of outside services.
- **Expand programs to include more home visitation services for 4-5 year olds:** Many of the programs target zero to three-year-olds leaving a gap of services for four to five-year-olds. Participants at the FSA meeting mentioned that they feel it is important to continue these services for four to five-year-olds, especially as they approach kindergarten. It may also be beneficial to provide home visitors with the tools to help families transition their four to five-year-olds to a preschool program.

Additionally, there is a constant need to adapt outreach strategies to reach the eligible families within the community and to continue to educate providers in the region about the available home visitation programs for families with young children. Though not prevalent and stopped once discovered, there is some overlap of multiple home visitation programs serving the same families, suggesting need for further coordination, especially in the outreach and enrollment process. Additionally, there is a certain level of competition between programs since many of them target the same families (low-income, prenatal, etc.). It may benefit the Pima North Home Visitation System to further explore whether these issues can be resolved through more intentional targeting and coordination of families eligible for home visitation in the region.

Recommendations

Interviewees were asked to provide recommendations on how to improve the overall Home Visitation System. Recommendations include:

- **Improve communication through FSA:** Respondents recommended the FSA continue to facilitate conversations and meetings while also improving overall communication about resources, overlaps and gaps in services, and opportunities for professional development.
- **Improve coordinated referral system:** Interviewees and FSA participants recommended that the group take clear look at the coordinated referrals system's strengths and weaknesses and where it can be improved to ensure that it is effectively serving the Pima North Home Visitation System.
- **Improve coordinated outreach for FTF funded programs**: Since there are several FTF funded home visitation programs, interviewees recommended that there be more communication and coordination between those programs, to ensure there are no overlaps or gaps in services.
- **Improve coordinated outreach to pediatrician offices:** Interviewees recommended more coordinated outreach to pediatrician offices since they are an important resource for referrals to home visitation programs. Coordinated outreach would ensure that pediatricians in the region are being given the same message and know about all of the potential programs for families of young children.

FAMILY SUPPORT AND LITERACY HIGHLIGHTS

In Pima County there were 971 substantiated cases of abuse or neglect from October 2014 to September 2015 and more than 2,000 children under 18 entered out-of-home care. In the county there is only one domestic violence shelter funded by the Department of Economic Security and in 2015 it served 367 adults and 308 children, providing more than 9,000 hours of support services. In recent years the number of arrests for juveniles ages eight to seventeen has decreased, with 7,118 children arrested in 2014 down from 10,753 in 2010. Only 31 percent of respondents to the FTF Family and Community Survey in the FTF Pima North Region and 35 percent in the FTF Central Pima Region understood that parents can significantly impact their child's brain development prenatally. Forty percent of parents from both regions understood that infants can take in and react to the world around them right from birth. Additionally, about half of respondents correctly identified appropriate behaviors and behaviors that will likely spoil the child. Fifty –five percent of respondents in the FTF Central Pima Region and 59 percent of respondents in the FTF North Pima Region reported that they or a family member reads, draws or pretend draws, or tells stories and sings song with their children 6 or more days a week.

Below are some data trends that highlight the needs, assets, and data-driven considerations for the FTF Pima North Region based on the data highlighted above. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
The majority of parents understand the importance of play and engage in activities with their child almost every day.	Continue to educate parents on the importance of play and engaging in developmentally stimulating activities with their children daily.
Parents in the region scored higher on child development questions than in the state.	Continue to educate parents on parents' impact on their child's development, especially starting at the prenatal stage.
There are a variety of home visitation programs offered in the region.	Continue to offer and promote a variety of home visitation programs to families in the region. Also discuss providing a transition from home visitation programs that serve 0-3 year olds to PreK programs that service 4-5 year olds.

Needs	Considerations
In Pima County there were more than 356 substantiated cases of abuse or neglect in FY 2014-2015 and there is only one domestic violence shelter.	Support programs that help young families or children that have been exposed to violence.
Only 31% of parents in the FTF Pima North Region understand that they can significantly impact their child's brain development in the prenatal stage and 40% of parents. understand that an infant or young child can really take in and react to the world around them right from birth understand that an infant or young child can really take in and react to the world around them right from birth	Expand messaging and parent education on the importance of parent engagement and involvement starting prenatally.

7. Communication, Public Information, and Awareness

Why It Matters

Public awareness of the importance of early childhood development and health is a crucial component of efforts to build a comprehensive and effective early childhood system in Arizona. Building public awareness and support for early childhood is a foundational step that can impact individual behavior as well as the broader objectives of system building. For the general public, information and awareness is the first step in taking positive action in support of children from birth to five years old, whether that is influencing others by sharing the information they have learned within their networks or taking some higher-level action such as elevating the public discourse on early childhood by encouraging increased support for programs and services that impact young children. For parents and other caregivers, awareness is the first step toward engaging in programs or behaviors that will better support their child's health and development.

Unlike marketing or advocacy campaigns which focus on getting a narrowly-defined audience to take short-term action, communications efforts to raise awareness of the importance of early childhood development and health focus on changing what diverse people across Arizona value and providing them multiple opportunities over an extended time to act on that commitment.

There is no one single communications strategy that will achieve the goal of making early childhood an issue that more Arizonans value and prioritize. Therefore, integrated strategies that complement and build on each other are key to any successful strategic communications effort. Employing a range of communications strategies to share information – from traditional broad-based tactics such as earned media to grassroots, community-based tactics such as community outreach – ensures that diverse audiences are reached more effectively wherever they are at across multiple mediums. Other communications strategies include: strategic consistent messaging, brand awareness, community awareness tactics such as distribution of collateral and sponsorship of community events, social media, and paid media which includes both traditional and digital advertising. Each of these alone cannot achieve the desired outcome of a more informed community, so a thoughtful and disciplined combination of all of these multiple information delivery vehicles is required. The depth and breadth of all elements are designed to ensure multiple touch-points and message saturation for diverse audiences that include families, civic organizations, faith communities, businesses, policymakers and more.

What the Data Tell Us

Since state fiscal year 2011, First Things First has led a collaborative, concerted effort to build public awareness and support across Arizona employing the integrated communications strategies listed above.

Results of these statewide efforts from SFY2011 through SFY2016 include:

- More than 2,000 formal presentations to community groups which shared information about the importance of early childhood;
- Nearly 230 tours of early childhood programs to show community members and community leaders in-person how these programs impact young children and their families;

- Training of almost 8,700 individuals in using tested, impactful early childhood messaging and how to best share that message with others;
- The placement of more than 2,400 stories about early childhood in media outlets statewide;
- Increased digital engagement through online platforms for early childhood information, with particular success in the growth of First Things First Facebook Page Likes, which grew from just 3,000 in 2012 to 124,000 in 2016.
- Statewide paid media campaigns about the importance of early childhood from FY10 through FY15 included traditional advertising such as television, radio and billboards as well as digital marketing. These broad-based campaigns generated millions of media impressions over that time frame; for example in FY15 alone, the media campaign yielded over 40 million media impressions.

In addition, First Things First began a community engagement effort in SFY2014 to recruit, motivate and support community members to take action on behalf of young children. The community engagement program is led by community outreach staff in regions which fund the First Things First Community Outreach strategy. This effort focuses on engaging individuals across sectors – including business, faith, K-12 educators, and early childhood providers – in the work of spreading the word about the importance of early childhood since they are trusted, credible messengers in their communities. FTF characterizes these individuals, depending on their level of involvement, as Friends, Supporters, and Champions. Friends are stakeholders who have a general awareness of early childhood development and health and agree to receive more information and stay connected through regular email newsletters. Supporters have been trained in early childhood messaging and are willing to share that information with their personal and professional networks. Champions are those who have been trained and are taking the most active role in spreading the word about early childhood.

Supporters and Champions in the engagement program reported a total of 1,088 positive actions taken on behalf of young children throughout Arizona as of the end SFY16. These actions range from sharing early childhood information at community events, writing letters to the editor to connecting parents to early childhood resources and more. The table below shows total recruitment of individuals in the tiered engagement program through SFY2016.

Exhibit 7.1: First Things First Engagement of Early Childhood supporters, SFY2014 through SFY2016.

FTF	Friends	Supporters	Champions
Pima Regions	1,415	170	72
Arizona	21,369	3,102	908

Pima North and Pima South regions have a shared model of Community Outreach coverage.
In addition to these strategic communications efforts, First Things First has also led a concerted effort of policymaker awareness-building throughout the state. This includes meetings with all members of the legislature to build their awareness of the importance of early childhood. FTF sends emails to all policymakers providing information on the impact of early childhood investments (such as the FTF annual report) and also has instituted a quarterly email newsletter for policymakers and their staff with the latest news regarding early childhood.

Furthermore, the Arizona Early Childhood Alliance – comprised of early childhood system leaders like FTF, the United Ways, Southwest Human Development, Children's Action Alliance, Read On Arizona, Stand for Children, Expect More Arizona, and the Helios Foundation – represent the united voice of the early childhood community in advocating for early childhood programs and services.

Finally, FTF recently launched enhanced online information for parents of young children, including the more intentional and strategic placement of early childhood content and resources in the digital platforms that today's parents frequent. Future plans for this parenting site include a searchable database of early childhood programs funded in all the regions, as well as continuously growing the amount of high-quality parenting content available on the site and being "pushed out" through digital sources.

COMMUNICATION, PUBLIC INFORMATION AND AWARENESS HIGHLIGHTS

Public awareness of the importance of early childhood development and health is a crucial component of efforts to build a comprehensive and effective early childhood system in Arizona. Building public awareness and support for early childhood is a foundational step that can impact individual behavior as well as the broader objectives of system building.

There is no one single communications strategy that will achieve the goal of making early childhood an issue that more Arizonans value and prioritize. Therefore, integrated strategies that complement and build on each other are key to any successful strategic communications effort. Employing a range of communications strategies to share information – from traditional broad-based tactics such as earned media to grassroots, community-based tactics such as community outreach – ensures that diverse audiences are reached more effectively wherever they are at across multiple mediums. Other communications strategies include: strategic consistent messaging, brand awareness, community awareness tactics such as distribution of collateral and sponsorship of community events, social media, and paid media which includes both traditional and digital advertising.

In addition, FTF began a community engagement effort in SFY2014 to recruit, motivate and support community members to take action on behalf of young children. In the Pima Regions, 1,415 friends, 170 supporters and 72 champions were involved in the engagement program. Given the results of the survey below are some data trends that highlight the needs, assets, and data-driven recommendations for the FTF Pima North Region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
FTF utilizes integrated strategies to communicate the importance of making early childhood an issue Arizonans value.	Continue to utilize integrated strategies to highlight the importance of early childhood development and health.
FTF engages community members to take action on behalf of young children.	Continue to engage community members through the community engagement program.

8. System Coordination Among Early Childhood Programs and Services

Why it Matters

The partners in Arizona's early childhood system – encompassing a diverse array of public and private entities dedicated to improving overall well-being and school readiness for children ages zero to five statewide – work to promote and establish a seamless, coordinated, and comprehensive array of services that can meet the multiple and changing needs of young children and families.

In January 2010, the Arizona Early Childhood Task Force was convened by FTF to establish a common vision for young children in Arizona and to identify priorities and roles to build an early childhood system that will lead to this vision. System coordination was identified as one of the priority areas by Arizona's early childhood system partners. The Task Force identified six system outcomes including that the early childhood system be "coordinated, integrated, and comprehensive." First Things First's role to realize this outcome is to foster cross-system collaboration between local, state, federal, and tribal organizations to improve the coordination and integration of Arizona programs, services, and resources for young children and their families.

Through strategic planning and system-building efforts that are both FTF-funded and non-FTF-funded, FTF is focused on developing approaches to connect various areas of the early childhood system. When the system operates holistically, the expectation is a more seamless system of coordinated services that families can easily access and navigate in order to meet their needs. Agencies that work together and achieve a high level of coordination and collaboration help to establish and support a coordinated, integrated, and comprehensive system. At the same time, agencies also increase their own capacity to deliver services as they work collectively to identify and address gaps in the service delivery continuum.

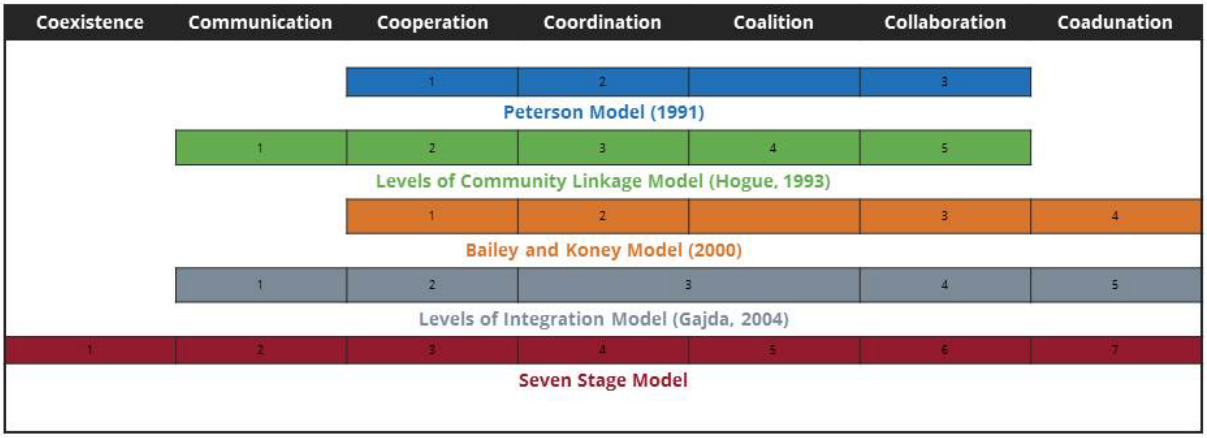
Service coordination and collaboration approaches work to advance the early childhood system in the following ways:

- Build stronger collaborative relationships amongst providers
- Increase availability and access of services for families and children
- Reduce duplication
- Maximize resources
- Long term sustainability
- Leverage existing assets
- Improve communication
- Reduce fragmentation
- Foster leadership capacity among providers
- Improve quality
- Share expertise and training resources
- Influence policy and program changes

Several authors have examined coordination and collaboration efforts in terms of stages or levels of collaboration among organizations (see Exhibit 8.1). Frey et al. noted that stage theories describe levels of collaboration, with the lowest level being little or no collaboration and the highest level being full

collaboration or some form of coadunation or unification.[115] These models may differ on the number of stages, the range of levels included, and the definitions of various stages, but they have much in common. The figure below depicts numerous stage models in the research literature along a continuum of collaboration.

Exhibit 8.1. Levels of Collaboration



Grounded in the work of stage theorists, First Things First adopted a 5 stage level of collaboration model based levels of a continuum of collaboration.

- No Interaction: No interactions occurring at all.
- Networking: Activities that result in bringing individuals or organizations together for relationship building and information sharing. Networking results in an increased understanding of the current system of services. There is no effort directed at changing the existing system. There is no risk associated with networking.
- Cooperation: Characterized by short-term, informal relationships that exist without a clearly defined mission, structure, or planning effort. Cooperative partners share information only about the subject at hand. Each organization retains authority and keeps resources separate. There is very little risk associated with cooperation.
- Coordination: Involves more formal relationships in response to an established mission. Coordination involves some planning and division of roles and opens communication channels between organizations. Authority rests with individual organizations, however, risk increases. Resources are made available to respondents and rewards are shared.
- Collaboration: Collaboration is characterized by a more durable and pervasive relationship. Respondents bring separate organizations into a new structure, often with a formal commitment to a common mission. The collaborative structure determines authority and

[115] *Frey, B.B., Lohmeier, J.H, Lee, S.W., & Tollefson, N. (2006) Measuring collaboration among grant partners. American Journal of Evaluation, 27, 383.*

leadership roles. Risk is greater. Partners pool or jointly secure resources, and share the results and rewards.

Coordination and Collaboration Survey

System partners in 18 First Things First county-based regions were asked by First Things First to participate in the Coordination and Collaboration Survey in an effort to learn more about how system partners view their role in the region's early childhood system and to what extent they collaborate and coordinate with other system partners. Ten regions elected to conduct region-specific surveys, including Cochise, Coconino, Gila, Graham/Greenlee, La Paz Mohave, Navajo Apache, Pinal, Santa Cruz, Yavapai, and Yuma. Additionally, the six FTF regions in Maricopa County (Phoenix North, Phoenix South, East Maricopa, Northwest Maricopa, Southeast Maricopa, and Southwest Maricopa) and the two FTF regions in Pima County (Pima North and Pima South) elected to conduct combined county-wide surveys. Partners located on tribal lands will be surveyed at a later date after tribal approvals are requested and received.

FTF regional staff identified potential respondents of the survey. Each region was asked to determine who (across the categories listed below) the early childhood system stakeholders were in their communities that would be able to speak to their experience in the system. If there were no stakeholders representing a category, it was acceptable to not have representation from that category. As mentioned above, surveys on tribal lands were not conducted because tribal approvals for this survey have not yet been requested. Thus, the list of possible respondents was not a systematic or exhaustive list of potential respondents, and the pool of system partners who were invited to participate was not necessarily comparable across different regions.

Possible stakeholder areas:

- Potential Categories
- Higher Education
- K-12 Education
- Community Family Support Programs
- Public/Community Health Programs
- Child Care/Early Learning/Head Start Programs
- Professional Development
- State/City/County Governments
- Public Library
- Philanthropy/Foundations
- Faith Based Organizations
- Military
- Coalition/Networking Groups (including Read On)
- Community Service Groups
- FTF Grant Partner
- Other

Prospective participants received an email invitation to participate from the First Things First Regional Directors in October of 2016 and given three weeks to respond. Potential respondents were also contacted by email and/or telephone to remind them about the participation.

Responses were collected via SurveyMonkey. Data were then cleaned and compiled by region by the First Things First Evaluation team.

What the Data Tell Us

The results are based on the responses from 64 respondents that participated in the survey from Pima County out of 99 individuals that were contacted to participate (a 65% survey response rate). The respondents represent both the Pima North and Pima South regions. The majority of the respondents work for Family Support/Social Service agencies (34%), Early Care and Education organizations (30%), and K-12 education (11%), while businesses were not invited to participate in this survey (see Exhibit 8.2).

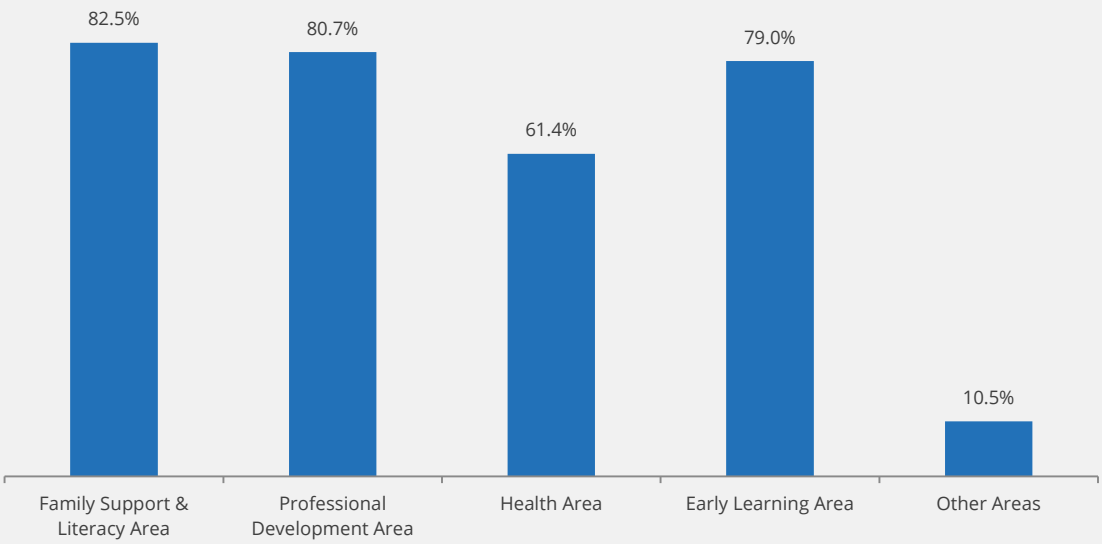
Exhibit 8.2. Sectors with which organizations work (n=64)

Sector	Percentage
Family Support/Social Service	34.4%
Early Care and Education	29.7%
K-12 Education	10.9%
Other Type of Organization	9.4%
Health Care or Medical Organization	6.3%
Higher Education Organization	4.7%
State Agency	1.6%
Local/Public Entity	1.6%

System Partners' View of Their Role in the Early Childhood System

The majority of respondents (95%) consider themselves to be a part of the early childhood system in Pima County (data not shown). Furthermore, survey respondents reported that they engaged with all four areas of the early childhood system: Family Support and Literacy, Early Learning, Child's Health, and Professional Development. Not surprisingly, given the large percentage of respondents from the education sector (see Exhibit 8.2), the area within the early childhood system that the majority of respondents engaged with was Family Support and Literacy (83%; see Exhibit 8.3).

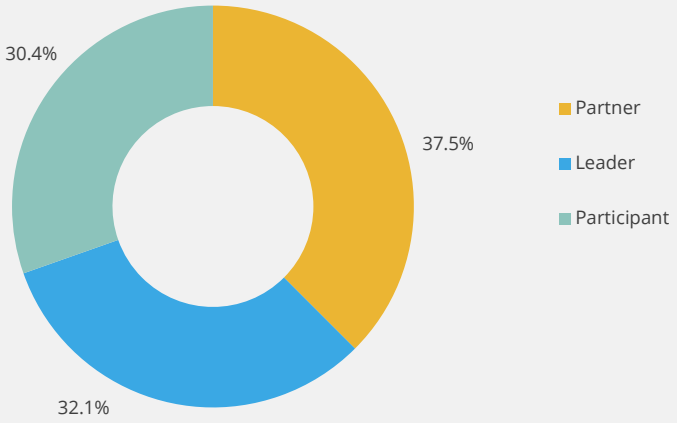
Exhibit 8.3. Area(s) of the early childhood system that organizations engage with (n=64)



Role of an Organization in the Early Childhood System

An organization may take on different roles in an early childhood system. An organization may be a participant, partner, or leader. In the role of a participant, the organization is one of many community members involved in a community-based initiative. As a partner, the organization is part of a group responsible for co-convening and/or facilitation and is one of many community members involved in a community-based initiative. Finally, as a leader, the organization is responsible for convening and facilitating a group of community members (i.e., taking a lead role to bring community members together to implement an initiative).

Exhibit 8.4. Role of organization in the development and advancement of the Early Childhood System in Pima County (n=56)



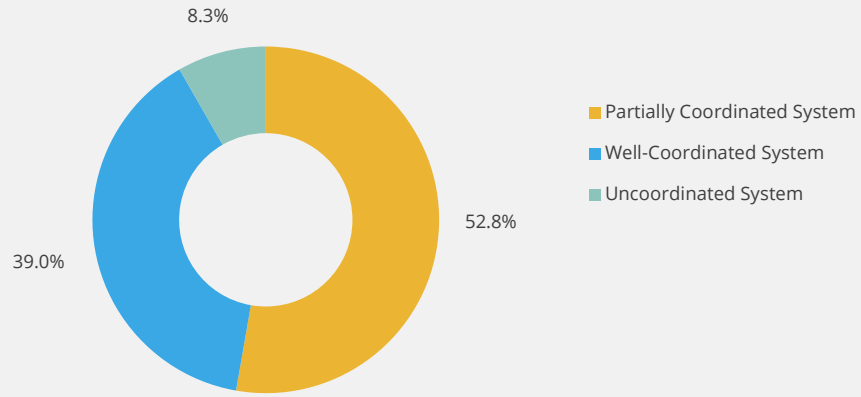
When asked about their organizations' role in the development and advancement of the early childhood system in Pima County, the majority of respondents viewed their organization's role as a partner (38%), one of many community organizations involved in supporting the early childhood system. This was followed by leader (32%) and then participant (30%; see Exhibit 8.4).

In their role as participant, partner, or a leader, survey respondents noted several successful partnerships. Respondents reported that their organizations work collaboratively with many social services agencies and medical providers and partner in several coalitions such as the Family Support Alliance and First Focus on Kids. They also take part in the leadership teams, such as on the Cradle 2 Career initiative. These connections to coalitions and larger system building help ensure that organizations maintain a system of services related to early childhood. One respondent commented on the impact these partnerships have had, noting that their organization's fifteen year partnership with a local hospital that provides free space for family classes has been instrumental in the promotion of their program and has allowed them to reach hundreds of families. Other key areas of success included partnerships with Pima County Libraries in Pima North, which provide Stay and Play opportunities for families residing in the Northwest community, as well as with TOPS Dad Programming, which promotes and provides services to fathers. Additional partnerships mentioned were with Parents as Teachers, the Greater Oro Valley Chamber of Commerce, Easter Seals Blake Foundation and Nurse Family Partnership, Pima County Parenting Coalition, Children's Clinics, WIC, Strong Start Tucson, and Read On Tucson.

System Partners' Perspective on Systems Building

Respondents were also asked to provide their perspective on the early childhood system and systems building. Early childhood system building is the ongoing process of developing approaches and connections that make all the components of an early childhood system operate as a whole to promote shared results for children and families. In Arizona, early childhood system partners work to promote and establish a seamless, coordinated, and comprehensive array of services that can meet the multiple and changing needs of young children and families to help ensure that kids arrive at school healthy and ready to succeed.

Exhibit 8.5. Describe the Early Childhood System in Pima County (n=46)



Overall, a majority of survey respondents describe the early childhood system in Pima County as a partially coordinated system (53%), with over one-third of respondents (39%) describing the system as a well-coordinated system, and eight percent viewing the early childhood system as a group of separate, uncoordinated system partners working in isolation (see Exhibit 8.5). As highlighted above, there are many organizations and coalitions involved in the early childhood system in Pima County. Many of these coalitions serve individual purposes and do not always have a connection to each other.

The majority of respondents across all areas agreed that the early childhood system in Pima County effectively addresses the needs of young children (see Exhibit 8.6). The percentage of agreement was highest in the Children's Health area (89%), followed by the Family Support and Literacy (86%), Professional Development (83%), and Early Learning (74%) areas. Early Learning may have the lowest percentage of respondents agreeing that the system effectively addresses the needs of young children because there are still many families in the region who do not have access to childcare. In addition, in Pima North there is a large waitlist for programs to enter the Quality First system which may also give the perception that the system is lacking in that area.

Exhibit 8.6. Extent to which the Early Childhood System in Pima County effectively addresses the needs of young children and their families across Early Childhood Development System (n=34)

	Family Support and Literacy	Children's Health	Early Learning	Professional Development+
Agree*	85.3%	88.6%	74.3%	82.9%
Disagree**	14.7%	11.4%	25.7%	17.1%

* *The percentage of respondents that responded 'agree' or 'strongly agree' have been aggregated and represent as the number shown.*
** *The percentage of respondents that responded 'disagree' or 'strongly disagree' have been aggregated and represented as the number shown.*

Continuum of Collaboration in the Early Childhood System Areas

FTF has adopted a five level continuum of collaboration model grounded in the work of stage theorists based on the following levels of collaboration: (1)no Interaction; (2) networking; (3) cooperation; (4) coordination; and (5) collaboration.[116] These five levels were defined (see Exhibit 8.1) and utilized to gain a better understanding of system partners' perspectives on the level of collaboration that is occurring among partners in Pima County within each area of the early childhood system.

---

[116] *Frey, B.B., Lohmeier, J.H, Lee, S.W., & Tollefson, N. (2006) Measuring collaboration among grant partners. American Journal of Evaluation, 27, 383.*

Exhibit 8.7. The five levels of the Continuum of Collaboration

Respondents were asked to refer to the Continuum of Collaboration (see Exhibit 8.7) and indicate the level of collaboration that is occurring among partners in Pima County for each area of the early childhood system. The results indicate moderately high levels of support for the highest and most intense level of system partners working together along the Continuum of Collaboration. Within the area of Family Support and Literacy, 48 percent of respondents indicated that Collaboration was occurring among partners in Pima County. This was followed by the areas of Professional Development (47%), Early Learning (27%), and Children's Health (13%; see Exhibit 8.8).

Exhibit 8.8. Collaboration in the Early Childhood System Areas

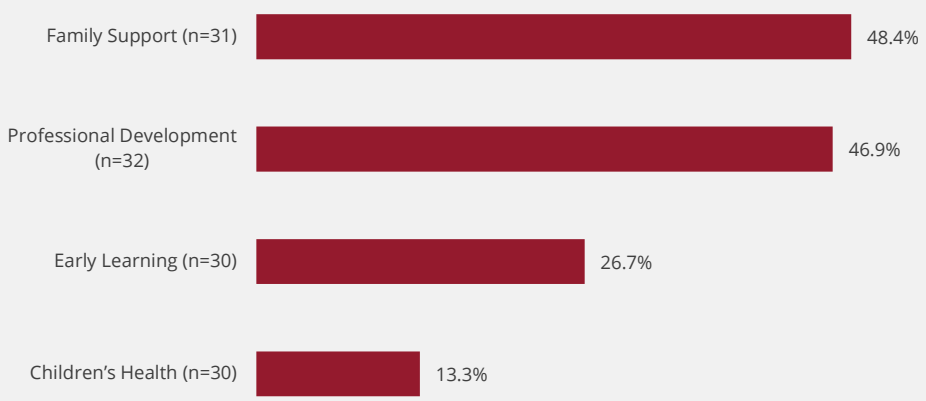
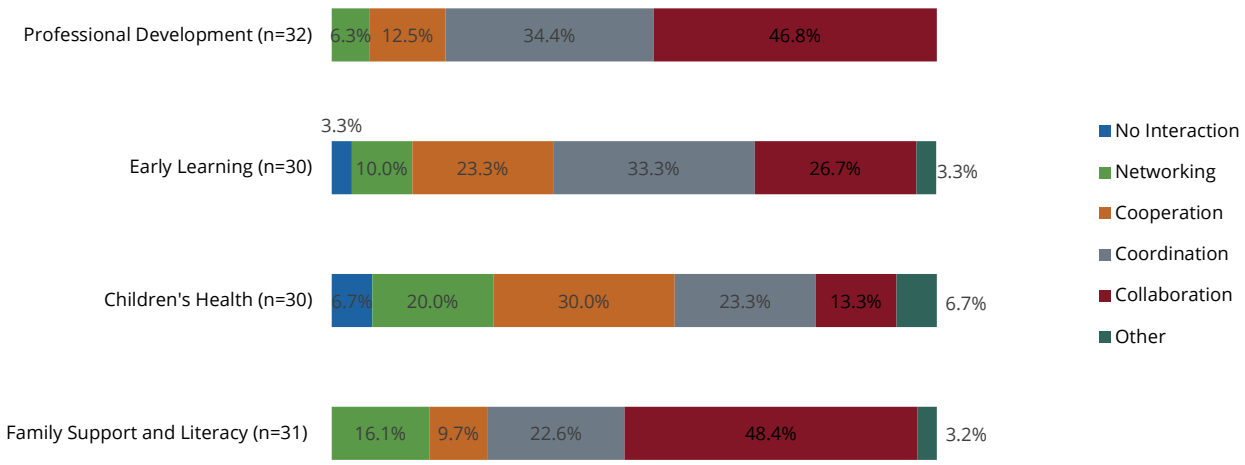


Exhibit 8.9. Continuum of Collaboration in the Early Childhood System Areas



In the area of Family Support and Literacy and in the area of Professional Development a majority of the respondents noted that there was Collaboration among system partners (48% and 47% respectively; see Exhibit 8.9). In the area of Early Learning, a majority of respondents selected Coordination (33%). Coordination, a relationship of relatively high intensity, involves more formal planning and division of roles and opens communication channels between organizations. This is somewhat different from the Children's Health area, where respondents indicated Cooperation (30%) as the most prevalent mode of relationships between system partners (see Exhibit 8.9). The higher levels of Collaboration for Professional Development and Family Support may be due to the Family Support Alliance (FSA) and Great Expectations for Teachers, Children and Families Communit of Practice (CoP), which both receive funding and help with collaboration efforts in the region.

Sectors involved in the Early Childhood Building

Respondents were also asked to indicate which sectors are involved in systems building within each of the four areas of the early childhood system. Not surprisingly, respondents noted that the sectors engaged in the system building work within the Family Support and Literacy area are largely Family Support/ Social Service Agencies (84%). This was followed by the Early Care and Education (68%, see Exhibit 8.10).

In the area of Children's Health, respondents indicated that the Health Care/ Medical Sector (72%), followed by State Agencies (68%) were the most engaged in systems buildings.

In Early Learning, Early Care and Education (85%) played the largest role, followed by the State Agencies (81%) and K-12 Education (65%). Finally, in the area of Professional Development, respondents indicated that Early Care and Education (75%) were mostly involved, followed by the Family Support/Social Services (71%) and State Agencies (68%).

Exhibit 8.10. The sectors involved in/engaged in system building work in Pima County.

	N	State Agency	Early Care & Edu	Family Support/ Social Service Agency	Philan-thropy	K-12 Edu	Higher Edu	Advocacy	Local/ Public Entity	Business	Health Care/ Medical	Other
Family Support and Literacy	25	52.0%	68.0%	84.0%	32.0%	40.0%	28.0%	52.0%	52.0%	28.0%	44.0%	12.0%
Children's Health	25	68.0%	36.0%	48.0%	16.0%	32.0%	12.0%	48.0%	48.0%	8.0%	72.0%	8.0%
Early Learning	26	80.8%	84.6%	53.9%	34.6%	65.4%	34.6%	53.9%	53.9%	26.9%	26.9%	7.7%
Professional Development	28	67.9%	75.0%	71.4%	28.6%	46.4%	57.1%	39.3%	42.9%	14.3%	21.4%	7.1%

While earlier items asked system partners about the level of collaboration occurring among system partners, when a survey item asking respondents about how frequently key activities were occurring that are known indicators of collaborative work, many respondents indicated they did not know how often activities related to system building work were occurring in Pima County. Several other respondents opted not to answer this survey item (n=29). Those that did respond (n=40) noted that system partners within Family Support and Literacy share facility space in some way, have some knowledge of other program's intake requirements and referral processes, and have some coordination of outreach and referrals. Participation in standing inter-agency committees is another key activity that system partners identified doing together. When thinking about activities along the continuum of collaboration, the types of activities that respondents indicated are occurring represent networking, cooperation, and coordination type activities within the continuum. Areas where a high number of respondents indicated that the activity was not happening at all was in the use of shared forms (e.g. common referral and intake forms), and shared record keeping and management of data information systems, which are key activities that align to a high level of collaboration between system partners and represent areas of continued growth for system partners (see Exhibit 8.11).

Exhibit 8.11. System Building Activities in the Family Support Area of the Early Childhood System (n=30)

Activity	Not At All	A little/Somewhat	A Lot	Don't Know
Leveraging resources/funding across partners	3.3%	33.3%	53.3%	10.0%
Sharing facility space	0.0%	42.9%	35.7%	21.4%
Shared development of program materials	3.7%	29.6%	29.6%	37.0%
Coordination of outreach and referrals	3.5%	55.2%	24.1%	17.2%
Knowledge of other programs' intake requirements/referral process	7.4%	40.74%	18.5%	33.3%
Shared record keeping and management of data information systems	11.1%	48.2%	3.7%	37.0%
Co-location of programs or services	0.0%	56.0%	12.0%	32.0%
Partner in program evaluation and/or assessment	7.4%	48.2%	14.8%	29.6%
Jointly conducting staff training	3.9%	26.9%	34.6%	34.6%
Shared approach to informing the public of available services	7.7%	34.6%	34.6%	23.1%
Jointly implement policy changes	11.5%	30.8%	11.5%	46.2%
Common forms (e.g., intake and/or referral forms)	7.7%	53.9%	3.9%	34.6%
Child/Family service plan development OR PD plan for ECE professionals	0.0%	26.9%	19.2%	53.9%
Participation in standing inter-agency committees	3.9%	23.1%	42.3%	30.8%
Informal agreements	4.0%	32.0%	16.0%	48.0%
Formal written agreements (e.g., MOUs)	3.9%	34.6%	23.1%	38.5%
Environmental scan of other organizations in the community that provide services to young families	7.7%	42.3%	11.5%	38.5%
Other (please describe below)	0.0%	0.0%	0.0%	100.0%

Activities varied in the Children's Health area with the majority of respondents indicating that activities occurred a little/somewhat (see Exhibit 8.12). More than half of respondents felt that leveraging resources/funding across partners, sharing facility space, shared development of program materials, coordination of outreach and referrals, and knowledge of other programs' intake requirements/referral process occurred a lot or a little/somewhat. For many of the activities, respondents indicated they did not know whether or not activities were occurring.

Exhibit 8.12. System Building Activities in the Children's Health Area of the Early Childhood System (n=30)

Activity	Not At All	A little/ Somewhat	A Lot	Don't Know
Leveraging resources/funding across partners	3.3%	33.3%	26.7%	36.7%
Sharing facility space	7.1%	42.9%	10.7%	39.3%
Shared development of program materials	3.4%	37.9%	17.2%	41.4%
Coordination of outreach and referrals	0%	46.7%	20.0%	33.3%
Knowledge of other programs' intake requirements/referral process	3.6%	46.4%	3.6%	46.4%
Shared record keeping and management of data information systems	14.3%	21.4%	3.6%	60.7%
Co-location of programs or services	7.7%	38.5%	3.8%	50.0%
Partner in program evaluation and/or assessment	7.1%	32.1%	10.7%	50.0%
Jointly conducting staff training	3.7%	29.6%	11.1%	55.6%
Shared approach to informing the public of available services	7.7%	26.9%	23.1%	42.3%
Jointly implement policy changes	11.1%	22.2%	7.4%	59.3%
Common forms (e.g., intake and/or referral forms)	11.1%	18.5%	11.1%	59.3%
Child/Family service plan development OR PD plan for ECE professionals	0%	19.2%	11.5%	69.2%
Participation in standing inter-agency committees	7.4%	18.5%	22.2%	51.9%
Informal agreements	3.8%	19.2%	11.5%	65.4%
Formal written agreements (e.g., MOUs)	3.7%	25.9%	18.5%	51.9%
Environmental scan of other organizations in the community that provide services to young families	7.4%	29.6%	7.4%	55.6%
Other (please describe below)	0%	0%	0%	100%

Similarly for Early Learning respondents indicated that most activities occurred a little/somewhat (Exhibit 8.13). More than 25 percent of respondents indicated that leveraging resources/funding across partners, sharing facility space, coordination of outreach and referrals and participation in standing inter-agency committees were happening a lot.

Exhibit 8.13. System Building Activities in the Early Learning Area of the Early Childhood System (n=29)

Activity	Not At All	A little/ Somewhat	A Lot	Don't Know
Leveraging resources/funding across partners	3.4%	37.9%	41.4%	17.2%
Sharing facility space	3.7%	48.1%	29.6%	18.5%
Shared development of program materials	3.7%	37.0%	22.2%	37.0%
Coordination of outreach and referrals	7.1%	39.3%	25.0%	28.6%
Knowledge of other programs' intake requirements/referral process	3.7%	48.1%	11.1%	37.0%
Shared record keeping and management of data information systems	3.7%	29.6%	7.4%	59.3%
Co-location of programs or services	4.0%	44.0%	8.0%	44.0%
Partner in program evaluation and/or assessment	3.7%	40.7%	14.8%	40.7%
Jointly conducting staff training	3.8%	42.3%	15.4%	38.5%
Shared approach to informing the public of available services	3.8%	38.5%	23.1%	34.6%
Jointly implement policy changes	3.8%	26.9%	19.2%	50.0%
Common forms (e.g., intake and/or referral forms)	11.5%	19.2%	15.4%	53.8%
Child/Family service plan development OR PD plan for ECE professionals	0%	26.9%	11.5%	61.5%
Participation in standing inter-agency committees	7.7%	15.4%	30.8%	46.2%
Informal agreements	4.0%	16.0%	16.0%	64.0%
Formal written agreements (e.g., MOUs)	3.9%	26.9%	23.1%	46.2%
Environmental scan of other organizations in the community that provide services to young families	11.5%	38.5%	7.7%	42.3%
Other (please describe below)	0%	0%	0%	0%

For Professional Development, more than 30 percent of respondents indicated that leveraging resources/funding across partners, sharing facility space, coordination of outreach efforts and referrals, jointly conducting staff training, shared approach to informing the public of available services and participation in standing inter-agency committees were happening a lot (see Exhibit 8.14).

Exhibit 8.14. System Building Activities in the Professional Development Area of the Early Childhood System (n=30)

Activity	Not At All	A little /Somewhat	A Lot	Don't Know
Leveraging resources/funding across partners	3.3%	36.7%	50.0%	10.0%
Sharing facility space	0%	41.4%	44.8%	13.8%
Shared development of program materials	0%	51.9%	18.5%	29.6%
Coordination of outreach and referrals	7.1%	39.3%	32.1%	21.4%
Knowledge of other programs' intake requirements/referral process	3.7%	40.7%	14.8%	40.7%
Shared record keeping and management of data information systems	7.4%	29.6%	14.8%	48.2%
Co-location of programs or services	4.0%	44.0%	16.0%	36.0%
Partner in program evaluation and/or assessment	7.4%	37.0%	22.2%	33.3%
Jointly conducting staff training	3.9%	34.6%	38.5%	23.1%
Shared approach to informing the public of available services	0%	42.3%	34.6%	23.1%
Jointly implement policy changes	11.5%	34.6%	19.2%	34.6%
Common forms (e.g., intake and/or referral forms)	3.9%	34.6%	15.4%	46.2%
Child/Family service plan development OR PD plan for ECE professionals	0%	26.9%	30.8%	42.3%
Participation in standing inter-agency committees	7.7%	11.5%	42.3%	38.5%
Informal agreements	12.0%	24.0%	16.0%	48.0%
Formal written agreements (e.g., MOUs)	7.7%	30.8%	26.9%	34.6%
Environmental scan of other organizations in the community that provide services to young families	7.7%	38.5%	11.5%	42.3%
Other (please describe below)	0%	0%	0%	0%

Barriers and Future Directions

Respondents were also asked to reflect on barriers in moving the system forward with other early childhood system partners. The biggest barriers identified were a lack of knowledge among families of the services available and a lack of coordination between providers. Respondents commented that many people do not know about Parent Education and Home Visitation or Early Intervention programs offered within the county and highlighted the need for the network of services to be very visible to families. They identified the lack of coordination of different providers, as well as the ability to locate services that are appropriate, available, cost-effective, and geographically convenient as significant barriers. Additionally, the lack of communication between organizations, preschool directors, and agencies due to lack of time to meet on a regular basis was identified as a barrier.

Finally, respondents were asked to reflect on the role of the FTF Partnership Council in supporting Early Childhood System Building and collaboration efforts in Pima County.

In order to better support Early Childhood System Building and partner collaboration efforts in Pima North, respondents felt the Council could continue making the process of information sharing more transparent and accessible. This includes continuing to provide new ways to share and gain information, such as web-based and rural-based meetings, as well as making it easier for those who provide direct services to communicate with the Council directly. As one respondent shared, “attending a several hour council meeting where you may get two minutes to speak is not realistic for many people who are providing direct service.” They recommended having a way to either email Council members directly, being able to schedule a more in depth information sharing session with the Council independent of a meeting, or having more time allotted during council sessions. Respondents also felt the FTF Partnership Council could help local agencies network with the Pima County Health Department to promote parent education classes and referrals for all programs, as well as to continue to connect with non-FTF entities to leverage funds and support children, families, and ECE professionals. Requiring collaboration efforts in the development of programs was also seen as important by respondents , who felt that without collaboration, organizations are competing against each other to obtain funding from FTF rather than finding a way to work together to serve families.

SYSTEM COORDINATION HIGHLIGHTS

In Pima County, 64 system partners responded to the FTF Coordination and Collaboration Survey providing insight on the system building efforts, level of collaboration, and the Council's role in their county. Overall the findings from the survey suggest that partners consider the region to have a partially-coordinated early childhood system of care and the majority feel that all four areas (Family Support and Literacy, Children's Health, Early Learning, and Professional Development) are effective in addressing the needs of children and their families in the region. Respondents felt that Family Support and Literacy and Professional Development were the most collaborative, followed by Early Learning and Children's Health.

Below are key data trends that highlight the system coordination related needs, assets, and data-driven considerations for the FTF Pima North Region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including the FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Recommendations
About half of respondents (52.8%) feel the region's early childhood system is partially-coordinated.	Identify more system leaders that can guide system partners and participants towards a more coordinated and collective network that will even more efficiently serve children and families.
Strong efforts to facilitate collaboration among partners in the region through regular meetings and communication.	Provide more cross-threading between Early Childhood areas to strengthen collaboration and coordination across the system.

Needs	Recommendations
Children's Health was considered to be the least collaborative area, followed by Early Learning.	Identify successes from the Family Support and Professional Development collaboration efforts that can be applied to the other areas. Consider learning from other FTF regions that have strong collaborations to identify how they developed their system and apply them to Pima North as appropriate.

Conclusion

The FTF Pima North Region occupies the northeastern corner of Pima County and is located in the southeastern portion of Arizona. The Pima North Region is made up of a diverse mix of urban and rural communities in the central and northern portions of Pima County. The region has a strong collaborative system of providers that are dedicated to the well-being of the region's youngest children and their families, yet it is difficult to overcome barriers like high poverty and limited access to food, transportation, early care and education, and healthcare services. First Things First is a great asset in the region as they play a large role in funding and supporting the area's early childhood system.

The following tables combine the assets, needs, and considerations from the eight domains presented in this report. These key findings are intended to provide information to the FTF Pima North Regional Partnership Council and the community as a whole around the needs and assets of the region's zero to five population and their families.

Assets

Assets	Considerations
Population Characteristics	
The percentage of children under age six identifying as Hispanic or Latino in the FTF Pima North Region is greater than the percentage of the total population 18 and over that identifies as Hispanic or Latino, both in the region and State. Furthermore, this population is expected to increase over the next several decades.	Support culturally appropriate services for families.
The population of children under the age of six is projected to grow at a modest and steady rate, allowing the region to foresee and prepare for the growing demands of their youngest residents.	Discuss tactics for planning ahead for the projected slow, but steady, growth of the under six population and the needs that accompany that growth.
Economic Circumstances	
The FTF Pima North Region has several programs, such as SNAP and WIC, aimed to support the availability of nutritious foods for children under six and their families.	Continue to promote community awareness of nutrition programs available to young children and their families.
Education	
The majority of adults in the region have completed high school, received a GED or pursued further education (89%).	Promote the benefits of completing a high school diploma.

Early Learning	
Quality First has been increasing the quality of child care programs in the region.	Increase parent awareness of the availability of preschool centers and homes that are part of the Quality First program.
Child Health	
Approximately 90% of children in the region are receiving immunizations.	Continue to promote healthy preventive behaviors like receiving immunizations.
Family Support and Literacy	
The majority of parents understand the importance of play and engage in activities with their child almost every day.	Continue to educate parents on the importance of play and engaging in developmentally stimulating activities with their children daily.
Parents in the region scored higher on child development questions than in the state.	Continue to educate parents on parents' impact on their child's development, especially starting at the prenatal stage.
There are a variety of home visitation programs offered in the region.	Continue to offer and promote a variety of home visitation programs to families in the region. Also discuss providing a transition from home visitation programs that serve 0-3 year olds to PreK programs that service 4-5 year olds.
Communication, Public Information and Awareness	
FTF utilizes integrated strategies to communicate the importance of making early childhood an issue Arizonans value.	Continue to utilize integrated strategies to highlight the importance of early childhood development and health.
FTF engages community members to take action on behalf of young children.	Continue to engage community members through the community engagement program.
System Coordination	
About half of respondents (52.8%) feel the region's early childhood system is partially-coordinated.	Identify more system leaders that can guide system partners and participants towards a more coordinated and collective network that will even more efficiently serve children and families.
Strong efforts to facilitate collaboration among partners in the region through regular meetings and communication.	Provide more cross-threading between Early Childhood areas to strengthen collaboration and coordination across the system.

Needs

Needs	Considerations
Population Characteristics	
About 40 percent of children 0-5 live in single-parent households. Compared to two parent households, these living arrangements present additional barriers and difficulties for the parties involved..	Promote supports and resources that can help subsidize child care and other expenses for single parents.
Economic Circumstances	
About 40 percent of children under six live in single-parent households, which earn substantially less money than dual parent households, and more than 25% of children 0-5 live in poverty.	Identify ways to support young children and connect families to other existing resources through FTF programming, such as preschool.
Over a quarter of children under eighteen in the county (25%) are food insecure and 27% live under the poverty level.	Further investigate food insecurity rates in the region to have a better understanding of how FTF can support young children who are food insecure.
Education	
The percentage of students in first, second or third grade missing less than ten days of school increased from 2014 to 2015.	Consider additional research to understand the factors that are causing missed school days.
Less than half of third graders are meeting proficiency requirements for English Language Arts and Math (43-44%) and less than half of preschool-aged children in the FTF Pima North Region are enrolled in early care and education (44%).	Increase awareness of early education programs to support learning and school readiness from an early age.
Early Learning	
Between 2013 and 2014, the number of child care subsidies provided in the region decreased from 4,269 to 4,093.	Voice support for the importance of subsidies in providing low income children access to early care and education.
Less than half of Early Childhood Education professionals in the state remain in their position for over five years.	Consider providing incentives for quality early childhood professionals to retain their skills in the early childhood field and reduce staff turnover. Also consider monitoring the impact of the min wage increase in AZ and how this will affect the early childhood workforce.
Childcare costs make up 9-13% of family	Consider advocating for the expansion of

incomes and between 26 -41% of single female family incomes.	child care scholarships for more families in the region. Consider prioritizing Quality First scholarships for single parent households.
Child Health	
Almost three fourths of parents (69%) are unaware of the impact they have on their child's development during the prenatal stage.	Continue to provide outreach and education regarding prenatal care, especially targeting first-time and teen mothers.
More than half of children (55%) were reported to have experienced tooth decay and 33% of children had untreated tooth decay.	Promote good oral health through other FTF programs, such as home visitation, and consider partnering with pediatricians to encourage oral health practices during well-child visits.
More than 50 percent of children screened through the Healthy Smiles Healthy Bodies survey in the FTF Pima North Region suffer from tooth decay.	Advocate for fluoridation in water in the communities within the FTF Pima North Region. Currently, Tucson Water does not add fluoride to the drinking water supply.
Family Support and Literacy	
In Pima County there were more than 356 substantiated cases of abuse or neglect in FY 2014-2015 and there is only one domestic violence shelter.	Support programs that help young families or children that have been exposed to violence.
Only 31% of parents in the FTF Pima North Region understand that they can significantly impact their child's brain development in the prenatal stage and 40% of parents. understand that an infant or young child can really take in and react to the world around them right from birth understand that an infant or young child can really take in and react to the world around them right from birth	Expand messaging and parent education on the importance of parent engagement and involvement starting prenatally.
System Coordination	
Children's Health was considered to be the least collaborative area, followed by Early Learning.	Identify successes from the Family Support and Professional Development collaboration efforts that can be applied to the other areas. Consider learning from other FTF regions that have strong collaborations to identify how they developed their system and apply them to Pima North as appropriate.

Appendix A

Chapter 1

Appendix 1.1. Detailed age breakdown for children 0-5

	Arizona	Pima County	Pima North Region
0 years old	87,557	12,125	7,891
1 year old	89,746	12,380	8,015
2 years old	93,216	12,889	8,268
3 years old	93,880	12,814	8,304
4 years old	91,316	12,313	7,761
5 years old	90,894	12,275	7,825

U.S. Census Bureau; 2010 Census Summary File 1; Tables P11 & P14; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>

Appendix 1.2. Number of refugee arrivals to Arizona

Year	Arizona
1981	744
1982	1,011
1983	1,083
1984	928
1985	1,191
1986	1,149
1987	872
1988	762
1989	1,130
1990	1,715
1991	1,904
1992	1,966
1993	1,318
1994	1,561
1995	1,889
1996	1,927
1997	2,318
1998	2,861
1999	3,144
2000	2,546
2001	2,597
2002	1,134
2003	1,187
2004	2,446
2005	2,169

Appendix 1.2. Number of refugee arrivals to Arizona

Year	Arizona
2006	2,024
2007	2,414
2008	3,408
2009	4,740
2010	3,888
2011	2,552
2012	2,845
2013	3,600
2014	3,882
2015	4,138

Arizona Department of Economic Security (2016). About Refugee Resettlement. Retrieved from https://des.az.gov/sites/default/files/REFREPT_May2017.pdf

Appendix 2.1. Top 25 schools in the FTF Pima North Region with the highest percentage of students eligible for free and reduced price lunch

School	Percent of students eligible for free and reduced price lunch
Tucson Collegiate Prep	100.0%
John B Wright Elementary School	99.3%
Southside Community School	99.2%
PPEP TEC - Celestino Fernandez Learning Center	99.0%
Cavett Elementary School	98.7%
Teenage Parent Program - TAPP	98.6%
Allsport Academy-Closed	98.1%
Helen Keeling Elementary School	97.9%
Richey Charter School	97.7%
Mission View Elementary School	97.4%
E C Nash School	97.1%
Academy Adventures Primary School	97.0%
Academy Adventures Midtown	96.1%
Roberts Naylor	95.9%
L M Prince School	95.8%
Ochoa Elementary School	95.6%
Van Buskirk Elementary School	95.4%
Hollinger K-8 School	94.4%
Nosotros Academy	94.3%
Pueblo Gardens Elementary	93.9%
Myers-Ganoung Elementary School	93.9%
Mary Meredith K-12 School	93.2%
Amphitheater Middle School	92.5%

Appendix 2.1. Top 25 schools in the FTF Pima North Region with the highest percentage of students eligible for free and reduced price lunch

School	Percent of students eligible for free and reduced price lunch
C E Rose Elementary School	92.5%
Davidson Elementary School	92.3%

Arizona Department of Education (2014). Students Eligible for Free and Reduced-price Lunch. Provided by AZ FTF.

Appendix 3.1. Race or ethnicity of children by school

School	American Indian/ Alaska Native	Asian	Black /African American	Hispanic / Latino	Native Hawaiian/ Other Pacific	White	Multi-racial
A. C. E.	0	0	2	2	0	8	1
Academy Adventures Midtown	10	0	5	36	0	24	3
Academy Adventures Primary School	2	0	4	40	0	16	3
Academy Del Sol	3	0	6	71	0	29	0
Academy of Math and Science	14	13	18	271	1	94	20
Academy of Tucson Elementary School	1	7	6	72	3	192	13
Academy of Tucson High School	1	2	8	30	2	104	7
Academy of Tucson Middle School	2	6	15	65	3	157	16
Accelerated Learning Laboratory	1	5	9	108	2	79	3
Adventure School	2	2	8	43	0	48	7
Agua Caliente School	8	7	0	83	0	384	10
Alice Vail Middle School	12	14	27	333	5	204	35
Alternative Computerized Education (ACE) Charter High School	3	0	6	114	0	9	1
AmeriSchools Academy - Country Club	6	0	19	124	2	68	2
Amphi Academy at El Hogar	0	2	4	11	2	15	0
Amphitheater High School	40	53	123	799	5	212	15
Amphitheater Middle School	34	23	85	382	5	106	12
Anna Henry Elementary School	4	3	13	138	3	168	32
Annie Kellond Elementary School	9	7	24	235	1	214	51
Arizona College Prep Academy	1	4	5	67	0	46	3
BASIS Oro Valley	4	93	8	68	3	379	8
BASIS Oro Valley Primary	3	137	17	123	2	431	33
BASIS Tucson North	5	173	27	137	1	630	11
BASIS Tucson Primary	10	154	37	155	5	496	31

Appendix 3.1. Race or ethnicity of children by school

School	American Indian/ Alaska Native	Asian	Black /African American	Hispanic / Latino	Native Hawaiian/ Other Pacific	White	Multi-racial
Blenman Elementary School	17	14	41	202	17	86	28
Bloom Elementary	5	7	33	123	3	125	32
Bonillas Elementary Basic Curriculum Magnet School	16	6	17	321	1	55	9
Booth-Fickett Math/Science Magnet School	14	25	132	663	2	286	82
Borman Elementary School	1	12	27	105	6	256	68
Borton Primary Magnet School	7	7	26	283	0	93	20
Butterfield Elementary School	5	8	8	245	0	222	23
C E Rose Elementary School	8	0	1	813	0	6	5
Canyon Del Oro High School	29	50	48	538	6	935	21
Canyon Rose Academy	5	0	24	167	0	86	14
Canyon View Elementary School	2	27	8	72	3	242	28
Carden of Tucson	2	0	3	27	0	85	4
Carrillo Intermediate Magnet School	10	0	9	239	1	26	0
Catalina Foothills High School	4	119	30	467	4	995	74
Catalina Foothills Valley View Early Learning Center	1	19	2	23	0	92	13
Catalina High Magnet School	25	38	103	372	17	179	40
Cavett Elementary School	7	0	20	258	1	14	2
Centennial Elementary School	11	8	11	308	0	146	0
Changemaker High School	7	0	4	57	0	13	1
Children Reaching for the Sky Preparatory	1	4	16	151	0	31	8
Cholla High Magnet School	128	7	83	1469	4	143	20
City High School	4	0	2	74	0	90	4
Collier Elementary School	3	1	10	53	2	138	14
Compass High School	10	1	35	155	7	178	4
Copper Creek Elementary School	2	17	13	149	3	337	25

Appendix 3.1. Race or ethnicity of children by school

School	American Indian/ Alaska Native	Asian	Black /African American	Hispanic / Latino	Native Hawaiian/ Other Pacific	White	Multi-racial
Copper Point High School	3	0	4	30	0	120	5
Coronado K-8 School	7	10	11	396	5	505	7
Coyote Trail Elementary School	8	28	9	200	0	260	23
Cragin Elementary School	12	5	36	194	0	118	31
Davidson Elementary School	10	9	19	181	7	81	26
Davis Bilingual Magnet School	6	2	9	269	0	44	4
Degrazia Elementary School	7	11	14	170	1	288	16
Desert Rose Academy Charter School	6	6	14	104	0	42	5
Desert Sky Community School	2	1	1	20	1	34	7
Desert Springs Academy	1	0	4	39	0	33	6
Desert Winds Elementary School	8	0	2	116	0	209	12
Dietz K-8 School	2	7	43	276	5	140	41
Doolen Middle School	18	23	70	322	10	193	39
Drachman Primary Magnet School	11	1	23	248	0	27	13
Dunham Elementary School	0	4	9	87	0	105	18
E C Nash School	23	8	14	336	6	57	12
Eastpointe High School	1	0	14	43	2	62	9
Edge High School - Himmel Park	3	2	9	108	0	51	5
EDGE High School - Northwest	0	0	1	20	0	40	1
Emily Gray Junior High School	6	4	6	77	0	277	10
Emily Meschter Early Learning Center	2	2	2	45	0	79	1
Esperero Canyon Middle School	0	38	10	134	1	382	21
Flowing Wells High School	37	29	57	1070	3	552	4
Flowing Wells Junior High School	12	11	20	489	0	231	3
Ford Elementary	5	10	22	147	1	133	33

Appendix 3.1. Race or ethnicity of children by school

School	American Indian/ Alaska Native	Asian	Black /African American	Hispanic / Latino	Native Hawaiian/ Other Pacific	White	Multi-racial
Frances Owen Holaway Elementary School	14	4	31	209	1	79	22
Fruchthendler Elementary School	5	1	9	95	4	222	24
Future Investment Middle School	1	1	5	66	0	3	1
Gale Elementary School	0	10	9	152	3	216	40
Gridley Middle School	5	18	38	270	4	339	47
Ha:san Preparatory & Leadership School	94	0	0	0	0	0	4
Harold Steele Elementary School	2	7	36	154	2	114	19
Helen Keeling Elementary School	14	7	51	312	1	52	6
Henry Hank Oyama	24	1	11	320	1	23	4
Hermosa Montessori Charter	1	4	4	39	0	155	18
Highland Free School	1	1	4	17	0	22	2
Holladay Intermediate Magnet School	13	0	42	189	0	18	10
Hollinger K-8 School	20	1	7	459	0	11	5
Homer Davis Elementary School	6	6	0	337	1	133	13
Howell Peter Elementary	19	7	30	197	2	78	19
Hudlow Elementary School	10	3	23	146	5	84	13
Ida Flood Dodge Traditional Middle Magnet School	6	7	16	268	2	98	23
Irene Erickson Elementary School	11	5	56	263	1	121	47
Ironwood Elementary School	3	2	14	224	1	427	14
Ironwood Ridge High School	11	62	47	452	4	1223	23
J Robert Hendricks Elementary School	2	9	16	227	3	237	12
John B Wright Elementary School	13	17	93	228	22	82	22
Khalsa School	2	11	2	52	2	197	23
L M Prince School	26	22	125	350	3	95	24
La Cima Middle School	16	14	21	282	1	106	4

Appendix 3.1. Race or ethnicity of children by school

School	American Indian/ Alaska Native	Asian	Black /African American	Hispanic / Latino	Native Hawaiian/ Other Pacific	White	Multi-racial
La Paloma Academy	4	6	69	419	4	220	37
La Paloma Academy (Lakeside)	3	17	100	380	5	296	49
Laguna Elementary School	6	1	5	267	0	117	0
Las Puertas Community School	28	0	0	28	0	7	0
Lawrence W Cross Middle School	9	24	17	197	0	400	8
Legacy Traditional School - Northwest Tucson	10	66	23	376	1	720	35
Lifelong Learning Academy	0	3	2	7	0	11	0
Lineweaver Elementary School	2	6	17	294	0	215	36
Lulu Walker School	8	24	10	268	2	170	15
Magee Middle School	10	7	37	221	7	297	38
Mansfeld Middle School	29	8	50	577	1	90	24
Manzanita School	0	47	4	124	2	401	31
Manzo Elementary School	14	7	3	275	0	12	5
Marana Distance Learning	2	0	2	13	0	36	1
Marana High School	36	40	45	693	8	1219	55
Marana Middle School	17	22	28	360	6	601	41
Marion Donaldson Elementary School	9	10	7	115	3	154	7
Marjorie W Estes Elementary School	14	8	22	405	3	519	28
Marshall Elementary School	10	5	12	123	0	126	13
Mary Meredith K-12 School	3	0	8	16	1	20	4
MCAT High School	3	0	4	28	0	45	0
Mesa Verde Elementary School	1	5	5	126	2	231	8
Mexicayotl Academy	1	1	1	61	0	22	0
Miles-Exploratory Learning Center	6	5	7	181	0	96	19
Mission View Elementary School	19	0	3	202	0	1	0

Appendix 3.1. Race or ethnicity of children by school

School	American Indian/ Alaska Native	Asian	Black /African American	Hispanic / Latino	Native Hawaiian/ Other Pacific	White	Multi-racial
Montessori Schoolhouse	2	5	1	29	1	43	9
Morgan Maxwell School	30	1	27	378	1	39	14
Mountain Rose Academy	2	3	6	112	0	117	4
Mountain View High School	21	31	68	704	3	1025	65
Myers-Ganoung Elementary School	7	2	72	285	7	62	15
Nosotros Academy	8	0	2	196	0	17	1
Ochoa Elementary School	21	2	1	186	0	5	2
Open Doors Community School	4	1	2	67	0	49	10
Orange Grove Middle School	2	51	9	145	1	381	29
Painted Sky Elementary School	0	11	9	81	3	354	27
Palo Verde High Magnet School	21	24	153	601	8	306	82
Paulo Freire Freedom School	2	2	1	19	1	49	0
Paulo Freire Freedom School - Downtown	4	0	0	26	0	38	2
Pepe Barron Academy	0	0	1	70	0	2	0
Pepe Barron Middle School	0	0	0	48	0	0	0
Picture Rocks Intermediate School	4	1	1	71	0	176	11
Pima Partnership Academy	11	0	7	63	1	13	4
Pima Partnership School, The	28	0	16	172	0	21	6
Pima Vocational High School	11	0	5	83	0	16	3
PPEP TEC - Celestino Fernandez Learning Center	15	0	5	199	0	13	2
PPEP TEC - Victor Soltero Learning Center	1	0	4	29	0	20	4
Presidio School	6	16	25	205	1	159	16
Project More High School	4	0	7	59	0	7	2
Pueblo Gardens Elementary	7	8	18	340	0	15	7
Pueblo High Magnet School	67	4	32	1422	2	52	11

Appendix 3.1. Race or ethnicity of children by school

School	American Indian/ Alaska Native	Asian	Black /African American	Hispanic / Latino	Native Hawaiian/ Other Pacific	White	Multi-racial
Quail Run Elementary School	9	10	12	241	1	261	23
Rattlesnake Ridge Elementary	4	15	12	183	2	306	27
Richard B Wilson Jr School	12	42	37	271	6	892	27
Rillito Center	5	2	5	31	3	37	1
Rincon High School	15	53	168	614	5	240	53
Rio Vista Elementary School	15	5	21	343	9	84	12
Roadrunner Elementary School	8	0	16	146	2	245	9
Robert Richardson Elementary School	2	5	2	206	0	183	0
Roberts Naylor	13	24	142	345	6	66	22
Robins Elementary School	6	11	14	419	1	109	14
Robison Elementary School	2	4	25	259	0	40	2
Roskruge Bilingual Magnet Middle School	62	2	19	570	0	54	10
Sabino High School	6	17	25	295	5	552	56
SACA Online	0	0	0	3	0	11	0
Safford Engineering/Technology Magnet Middle School	66	2	40	618	0	38	19
Sahuaro High School	19	39	100	717	5	765	100
Sam Hughes Elementary	1	18	15	165	0	145	28
Santa Rita High School	8	10	53	217	5	202	31
Satori Charter School	6	1	5	40	1	96	23
Secrist Middle School	4	6	45	250	3	184	36
Sentinel Peak High School	5	0	1	71	0	27	1
Sky Islands	0	0	4	10	0	34	5
Skyview High School	2	0	18	88	0	29	0
Soleng Tom Elementary School	4	11	17	154	1	201	40
Sonoran Science Academy - Broadway	1	32	24	111	1	126	21

Appendix 3.1. Race or ethnicity of children by school

School	American Indian/ Alaska Native	Asian	Black /African American	Hispanic / Latino	Native Hawaiian/ Other Pacific	White	Multi-racial
Sonoran Science Academy - Davis Monthan	1	8	18	84	2	87	17
Sonoran Science Academy - Tucson	7	87	43	217	1	343	23
Southern Arizona Community High School	4	2	21	66	1	50	9
Southside Community School	0	0	1	203	0	0	0
Sunrise Drive Elementary School	6	48	11	123	1	340	31
Tanque Verde Elementary School	15	7	6	154	1	436	27
Tanque Verde High School	2	9	6	103	3	426	18
Teenage Parent Program - TAPP	9	0	2	45	0	4	4
Thornydale Elementary School	0	4	5	165	0	180	7
TIA East	3	0	13	58	1	31	6
TIA West	8	0	5	123	2	15	0
Tolson Elementary School	8	0	11	265	0	17	7
Tortolita Middle School	10	15	28	309	0	439	31
Tucson Collegiate Prep	6	0	3	20	0	14	0
Tucson Country Day School	11	30	37	52	0	580	4
Tucson International Academy	2	1	7	95	0	9	0
Tucson Magnet High School	121	39	121	2410	0	405	87
Tucson Preparatory School	9	0	11	94	1	19	2
Tully Elementary Accelerated Magnet School	19	4	47	259	2	26	14
TUSD - Distance Learning Program	2	0	7	69	0	25	3
Twin Peaks Elementary School	3	18	9	177	0	331	21
University High School	4	98	17	357	2	508	70
Utterback Middle School	23	1	32	441	0	21	14

Arizona Department of Education (2015). Enrollment. Provided by AZ FTF.

Appendix 3.2. 2014 School Report-Card Letter Grade for Districts

School District	Growth Points	Composite Points	Total Points	Final Letter Grade
Lifelong Learning Research Institute, Inc.	-	-	-	P
Allsport Academy	-	-	-	P
Montessori Schoolhouse of Tucson, Inc.	84	101	185	A
BASIS School, Inc.	-	-	168	A
BASIS School, Inc.	67	99	166	A
BASIS School, Inc.	-	-	164	A
Presidio School	-	-	164	A
Hermosa Montessori Charter School	65	96	161	A
Khalsa Family Services	64	95	159	A
Catalina Foothills Unified District	57	98	155	A
Daisy Education Corporation dba Sonoran Science Academy	-	-	154	A
El Pueblo Integral - Teaching & Learning Collaborative	67	87	154	A
Legacy Traditional School - Northwest Tucson	58	95	153	A
Academy of Mathematics and Science, Inc.	60	92	152	A
Accelerated Elementary and Secondary Schools	-	-	152	A
Mexicayotl Academy, Inc.	68	84	152	A
Tanque Verde Unified District	54	95	149	A
Open Doors Community School, Inc.	68	79	147	A
Sonoran Science Academy - Broadway	60	87	147	A
Academy of Tucson, Inc.	57	89	146	A
Blue Adobe Project	-	-	143	B
Satori, Inc.	54	88	142	A
Carden of Tucson, Inc.	56	84	140	A
Institute for Transformative Education, Inc.	-	-	137	B
Sonoran Science Academy - Davis Monthan	-	-	136	B
Amphitheater Unified District	52	83	135	B

Appendix 3.2. 2014 School Report-Card Letter Grade for Districts

School District	Growth Points	Composite Points	Total Points	Final Letter Grade
Highland Free School	58	77	135	B
Tucson Small School Project	-	-	133	B
Flowing Wells Unified District	52	80	132	B
Marana Unified District	47	84	131	B
Collaborative Pathways, Inc.	-	-	127	B
Tucson International Academy, Inc.	61	65	126	B
Tucson Country Day School, Inc.	43	81	124	B
Ed Ahead	72	46	118	C
Educational Impact, Inc.	53	65	118	C
Tucson Unified District	50	68	118	C
Arizona Community Development Corporation	49	66	115	C
Desert Springs Academy	43	70	113	C
Aprender Tucson	50	61	111	C
Eastpointe High School, Inc.	-	-	107	C
Griffin Foundation, Inc. The	46	61	107	C
Luz Academy of Tucson, Inc	-	-	103	C
Tucson Collegiate Prep, Inc.	51	51	102	C
Academy Del Sol, Inc.	36	64	100	C
Ha:san Educational Services	-	-	89	D
Desert Sky Community School, Inc.	39	47	86	D
El Centro for the Study of Primary and Secondary Education, Inc.	28	43	71	D
Compass High School, Inc.	-	-	67	D
Edge School, Inc., The	-	-	-	P
Tucson Youth Development/ACE Charter High School	-	-	-	B

Arizona Department of Education (2014). Letter Grades for All Schools. Retrieved from http://www.azed.gov/accountability/state-accountability/

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
Academy Del Sol, Inc.	109
Academy Del Sol	109
Academy of Mathematics and Science, Inc.	431
Academy of Math and Science	431
Academy of Tucson, Inc.	712
Academy of Tucson Elementary School	294
Academy of Tucson High School	154
Academy of Tucson Middle School	264
Accelerated Elementary and Secondary Schools	207
Accelerated Learning Laboratory	207
Altar Valley Elementary District	254
Flowing Wells High School	164
Marana High School	72
Morgan Maxwell School	1
Sentinel Peak High School	17
Amphitheater Unified District	13841
Amphi Academy at El Hogar	34
Amphitheater High School	1247
Amphitheater Middle School	647
Canyon Del Oro High School	1569
Copper Creek Elementary School	546
Coronado K-8 School	941
E C Nash School	456
Frances Owen Holaway Elementary School	360
Helen Keeling Elementary School	443
Ironwood Ridge High School	1812
John B Wright Elementary School	1

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
L M Prince School	645
La Cima Middle School	444
Lawrence W Cross Middle School	655
Lulu Walker School	497
Marion Donaldson Elementary School	305
Mesa Verde Elementary School	378
Painted Sky Elementary School	485
Richard B Wilson Jr School	1287
Rillito Center	76
Rio Vista Elementary School	489
Winifred Harelson Elementary School	524
Aprender Tucson	**204**
Southside Community School	204
Arizona Community Development Corporation	**1609**
La Paloma Academy	759
La Paloma Academy (Lakeside)	850
BASIS Schools, Inc.	**3181**
BASIS Oro Valley	563
BASIS Oro Valley Primary	746
BASIS Tucson North	984
BASIS Tucson Primary	888
Blue Adobe Project	**53**
Sky Islands	53
Canyon Rose Academy, Inc.	**296**
Canyon Rose Academy	296
Carden of Tucson, Inc.	**121**
Carden of Tucson	121

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
Catalina Foothills Unified District	5050
Canyon View Elementary School	382
Catalina Foothills High School	1693
Catalina Foothills Valley View Early Learning Center	150
Esperero Canyon Middle School	586
Manzanita School	609
Orange Grove Middle School	618
Rillito Center	<25
Sunrise Drive Elementary School	560
Ventana Vista Elementary School	450
CITY Center for Collaborative Learning	174
City High School	174
Collaborative Pathways, Inc.	126
Arizona College Prep Academy	126
Compass High School, Inc.	390
Compass High School	390
Continental Elementary District	<25
Rillito Center	<25
Daisy Education Corporation dba Sonoran Science Academy	721
Sonoran Science Academy - Tucson	721
Daisy Education Corporation dba. Sonoran Science Academy Davis Monthan	217
Sonoran Science Academy - Davis Monthan	217
Desert Rose Academy,Inc.	177
Desert Rose Academy Charter School	177
Desert Sky Community School, Inc.	66
Desert Sky Community School	66
Desert Springs Academy	83

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
Desert Springs Academy	83
Eastpointe High School, Inc.	**131**
Eastpointe High School	131
Ed Ahead	**78**
Academy Adventures Midtown	78
Edge School, Inc., The	**240**
Edge High School - Himmel Park	178
EDGE High School - Northwest	62
Educational Impact, Inc.	**175**
Academy Adventures Primary School	65
Adventure School	110
El Centro for the Study of Primary and Secondary Education	**48**
Pepe Barron Middle School	48
El Pueblo Integral - Teaching & Learning Collaborative	**144**
Paulo Freire Freedom School	74
Paulo Freire Freedom School - Downtown	70
Flowing Wells Unified District	**5454**
Centennial Elementary School	484
Emily Meschter Early Learning Center	131
Flowing Wells High School	1588
Flowing Wells Junior High School	766
Homer Davis Elementary School	496
J Robert Hendricks Elementary School	506
Laguna Elementary School	396
Rillito Center	1
Robert Richardson Elementary School	398
Sentinel Peak High School	88

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
Walter Douglas Elementary School	600
Griffin Foundation, Inc. The	**288**
Children Reaching for the Sky Preparatory	211
Future Investment Middle School	77
Ha:san Educational Services	**98**
Ha:san Preparatory & Leadership School	98
Hermosa Montessori Charter School	**221**
Hermosa Montessori Charter	221
Highland Free School	**47**
Highland Free School	47
Innovative Humanities Education Corporation	**162**
Copper Point High School	162
Institute for Transformative Education, Inc.	**82**
Changemaker High School	82
Kaizen Education Foundation dba Skyview High School	**137**
Skyview High School	137
Khalsa Family Services	**289**
Khalsa School	289
Legacy Traditional School - Northwest Tucson	**1231**
Legacy Traditional School - Northwest Tucson	1231
Lifelong Learning Research Institute, Inc.	23
Lifelong Learning Academy	23
Luz Academy of Tucson, Inc	**73**
Pepe Barron Academy	73
Marana Unified District	**12291**
A. C. E.	13
Butterfield Elementary School	511

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
Coyote Trail Elementary School	528
Degrazia Elementary School	507
Desert Winds Elementary School	347
Ironwood Elementary School	685
Marana Distance Learning	54
Marana High School	2024
Marana Middle School	1075
Marjorie W Estes Elementary School	999
MCAT High School	80
Mountain View High School	1917
Picture Rocks Intermediate School	264
Quail Run Elementary School	557
Rattlesnake Ridge Elementary	549
Rillito Center	2
Roadrunner Elementary School	426
Thornydale Elementary School	361
Tortolita Middle School	832
Tully Elementary Accelerated Magnet School	<25
Twin Peaks Elementary School	559
Mexicayotl Academy, Inc.	**86**
Mexicayotl Academy	86
Montessori Schoolhouse of Tucson, Inc.	**90**
Montessori Schoolhouse	90
Mountain Rose Academy, Inc.	**244**
Mountain Rose Academy	244
Nosotros, Inc	**224**
Nosotros Academy	224

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
Open Doors Community School, Inc.	**133**
Open Doors Community School	133
Oracle Elementary District	**68**
Canyon Del Oro High School	58
Ironwood Ridge High School	10
Pima County	**118**
Pima Vocational High School	118
Pima Prevention Partnership dba Pima Partnership Academy	**99**
Pima Partnership Academy	99
Pima Prevention Partnership dba Pima Partnership School, The	**243**
Pima Partnership School, The	243
Portable Practical Educational Preparation, Inc. (PPEP, Inc.)	**292**
PPEP TEC - Celestino Fernandez Learning Center	234
PPEP TEC - Victor Soltero Learning Center	58
Presidio School	**428**
Presidio School	428
Satori, Inc.	**172**
Satori Charter School	172
Sonoran Science Academy - Broadway	**316**
Sonoran Science Academy - Broadway	316
Southern Arizona Community Academy, Inc.	**167**
SACA Online	14
Southern Arizona Community High School	153
StrengthBuilding Partners	**63**
Las Puertas Community School	63
Sunnyside Unified District	**13**
Borton Primary Magnet School	1

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
Catalina High Magnet School	1
Cavett Elementary School	2
Gale Elementary School	1
Henry Hank Oyama	2
Howell Peter Elementary	1
John B Wright Elementary School	1
Mission View Elementary School	2
Pueblo Gardens Elementary	1
Van Buskirk Elementary School	1
Tanque Verde Unified District	**2086**
Agua Caliente School	492
Emily Gray Junior High School	380
Rillito Center	1
Tanque Verde Elementary School	646
Tanque Verde High School	567
The Charter Foundation, Inc.	**221**
AmeriSchools Academy - Country Club	221
Tucson Collegiate Prep, Inc.	**43**
Tucson Collegiate Prep	43
Tucson Country Day School, Inc.	**714**
Tucson Country Day School	714
Tucson International Academy, Inc.	**379**
TIA East	112
TIA West	153
Tucson International Academy	114
Tucson Preparatory School	**136**
Tucson Preparatory School	136

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
Tucson Unified District	40595
Alice Vail Middle School	630
Anna Henry Elementary School	361
Annie Kellond Elementary School	540
Blenman Elementary School	405
Bloom Elementary	328
Bonillas Elementary Basic Curriculum Magnet School	425
Booth-Fickett Math/Science Magnet School	1204
Borman Elementary School	475
Borton Primary Magnet School	435
C E Rose Elementary School	833
Carrillo Intermediate Magnet School	285
Catalina High Magnet School	773
Cavett Elementary School	300
Cholla High Magnet School	1854
Collier Elementary School	221
Cragin Elementary School	396
Davidson Elementary School	333
Davis Bilingual Magnet School	334
Dietz K-8 School	514
Doolen Middle School	675
Drachman Primary Magnet School	323
Dunham Elementary School	223
Ford Elementary	351
Fruchthendler Elementary School	360
Gale Elementary School	428
Gridley Middle School	721

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
Harold Steele Elementary School	334
Henry Hank Oyama	382
Holladay Intermediate Magnet School	272
Hollinger K-8 School	503
Howell Peter Elementary	351
Hudlow Elementary School	285
Ida Flood Dodge Traditional Middle Magnet School	420
Irene Erickson Elementary School	504
John B Wright Elementary School	475
Lineweaver Elementary School	570
Magee Middle School	617
Mansfeld Middle School	779
Manzo Elementary School	316
Marshall Elementary School	289
Mary Meredith K-12 School	52
Miles-Exploratory Learning Center	314
Mission View Elementary School	223
Morgan Maxwell School	489
Myers-Ganoung Elementary School	450
Ochoa Elementary School	217
Palo Verde High Magnet School	1195
Project More High School	79
Pueblo Gardens Elementary	394
Pueblo High Magnet School	1590
Rincon High School	1148
Roberts Naylor	618
Robins Elementary School	574

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment
Robison Elementary School	332
Roskruge Bilingual Magnet Middle School	717
Sabino High School	956
Safford Engineering/Technology Magnet Middle School	783
Sahuaro High School	1745
Sam Hughes Elementary	372
Santa Rita High School	526
Secrist Middle School	528
Soleng Tom Elementary School	428
Teenage Parent Program - TAPP	64
Tolson Elementary School	308
Tucson Magnet High School	3183
Tully Elementary Accelerated Magnet School	370
TUSD - Distance Learning Program	106
University High School	1056
Utterback Middle School	532
Van Buskirk Elementary School	367
W Arthur Sewel Elementary School	299
W V Whitmore Elementary School	327
Wheeler Elementary School	429
Tucson Youth Development/ACE Charter High School	184
Alternative Computerized Education (ACE) Charter High School	133
Youth Works Charter High School	51
Vail Unified District	2
Annie Kellond Elementary School	1
Gale Elementary School	1
Grand Total	96352

Appendix 3.3. 2015 Enrollment by district and school

District & School	Sum of Total Enrollment

Arizona Department of Education (2015). Enrollment. Provided by AZ FTF.

Chapter 4

Appendix 4.1. 2012 ECE Professional Development Programs

	Early Care and Education Centers
Reimbursed employees for college tuition	53%
Paid for workshop registration fees	81%
Paid for staff development days	78%

First Things First – Arizona's Unknown Education Issue (2013). Early Learning Workforce Trends. Provided by AZ FTF.

Appendix 4.2. 2007 and 2012 Compensation of ECE Professionals: Median Salary

Year, Number of Responses, and sample size	For Profit <4 Sites	For Profit 4+ Sites	Head Start	Public Schools	Other Nonprofit	All Types
Assistant Teachers						
2007 Median	$7.75	$8.00	$10.25	$10.00	$8.50	$9.00
Number of Responses	325	212	23	160	355	1,075
Number Assistant Teachers	1,528	1,119	730	2,088	2,041	7,506
2012 Median	$8.50	$8.75	$10.53	$10.00	$9.00	$9.66
Number of Responses	298	160	28	174	318	978
Number Assistant Teachers	1,153	699	864	1,629	1,834	6,179
Teachers						
2007 Median	$8.50	$9.00	$15.00	$13.50	$11.00	$9.75
Number of Responses	409	261	24	183	394	1,271
Number Teachers	3,034	3,305	705	1,654	2,372	11,070
2012 Median	$9.00	$9.80	$16.00	$14.50	$11.50	$10.00
Number of Responses	431	251	29	176	381	1,268
Number Teachers	2,825	2,936	868	1,206	2,410	10,245
Teacher Directors						
2007 Median	$11.56	$11.50	$15.00	$14.31	$14.50	$13.50
Number of Responses	245	137	11	87	227	707
Number Teacher Directors	321	189	70	284	307	1,171
2012 Median	$11.00	$12.00	$20.00	$14.00	$14.50	$13.50
Number of Responses	302	136	15	101	236	790
Number Teacher Directors	428	192	119	337	428	1,504
Administrative Directors						
2007 Median	$14.50	$14.00	$20.00	$21.47	$16.75	$16.82
Number of Responses	225	198	24	121	246	814
Number Administrative Directors	305	321	168	188	311	1,293

Appendix 4.2. 2007 and 2012 Compensation of ECE Professionals: Median Salary

Year, Number of Responses, and sample size	For Profit <4 Sites	For Profit 4+ Sites	Head Start	Public Schools	Other Nonprofit	All Types
2012 Median	$14.00	$16.00	$21.16	$22.00	$17.00	$16.80
Number of Responses	286	218	25	92	253	874
Number Administrative Directors	371	317	119	143	337	1,287

First Things First – Arizona's Unknown Education Issue (2013). Early Learning Workforce Trends. Provided by AZ FTF.

Appendix 4.3. 2007 and 2012 Compensation of ECE Professionals: Lowest Starting Salary

Year, Number of Responses, and sample size	For Profit <4 Sites	For Profit 4+ Sites	Head Start	Public Schools	Other Nonprofit	All Types
Assistant Teachers						
2007 Median	$7.00	$7.25	$9.22	$8.75	$7.50	$8.00
Number of Responses	328	212	24	162	359	1,085
Number Assistant Teachers	1,548	1,119	743	2,109	2,063	7,582
2012 Median	$7.98	$8.00	$9.71	$8.77	$8.25	$8.50
Number of Responses	298	160	28	174	318	978
Number Assistant Teachers	1,153	699	864	1,629	1,834	6,179
Teachers						
2007 Median	$7.50	$8.00	$11.75	$11.71	$9.50	$8.25
Number of Responses	412	262	25	187	399	1,285
Number Teachers	3,063	3,313	711	1,725	2,436	11,248
2012 Median	$8.00	$8.00	$14.83	$13.46	$9.89	$8.99
Number of Responses	430	251	29	176	380	1,266
Number Teachers	2,822	2,936	868	1,206	2,387	10,219
Teacher Directors						
2007 Median	$10.00	$10.00	$16.38	$13.00	$12.19	$11.90
Number of Responses	242	136	11	86	219	694
Number Teacher Directors	318	189	70	293	298	1,168
2012 Median	$10.00	$11.00	$16.25	$13.80	$12.13	$12.00
Number of Responses	301	136	15	101	236	789
Number Teacher Directors	427	192	119	337	428	1,503
Administrative Directors						
2007 Median	$12.00	$12.00	$15.92	$18.00	$14.40	$13.69
Number of Responses	215	195	24	113	233	780
Number Administrative Directors	293	322	168	179	297	1,259

Appendix 4.3. 2007 and 2012 Compensation of ECE Professionals: Lowest Starting Salary

Year, Number of Responses, and sample size	For Profit <4 Sites	For Profit 4+ Sites	Head Start	Public Schools	Other Nonprofit	All Types
2012 Median	$12.00	$14.40	$15.32	$19.00	$15.86	$15.00
Number of Responses	286	218	24	92	253	873
Number Administrative Directors	371	317	118	143	337	1,286

First Things First – Arizona's Unknown Education Issue (2013). Early Learning Workforce Trends. Provided by AZ FTF.

Appendix 4.4. 2007 and 2012 Compensation of ECE Professionals: Highest Starting Salary

Year, Number of Responses, and sample size	For Profit <4 Sites	For Profit 4+ Sites	Head Start	Public Schools	Other Nonprofit	All Types
Assistant Teachers						
2007 Median	$8.25	$8.50	$12.77	$12.00	$9.50	$10.00
Number of Responses	328	212	23	162	359	1,084
Number Assistant Teachers	1,548	1,119	730	2,109	2,063	7,569
2012 Median	$9.00	$9.50	$13.35	$11.77	$10.00	$10.50
Number of Responses	293	160	28	174	318	978
Number Assistant Teachers	1,153	699	864	1,629	1,834	6,179
Teachers						
2007 Median	$10.00	$11.00	$18.33	$17.00	$13.39	$12.00
Number of Responses	412	261	25	191	397	1,286
Number Teachers	3,060	3,305	711	1,730	2,407	11,213
2012 Median	$10.75	$11.50	$21.12	$16.80	$13.50	$12.50
Number of Responses	431	250	29	176	381	1,267
Number Teachers	2,825	2,921	868	1,206	2,410	10,230
Teacher Directors						
2007 Median	$13.00	$12.60	$18.25	$15.76	$15.00	$14.50
Number of Responses	246	138	11	88	227	710
Number Teacher Directors	322	191	70	295	307	1,185
2012 Median	$11.52	$13.00	$23.75	$15.38	$15.00	$14.28
Number of Responses	302	136	15	101	236	790
Number Teacher Directors	428	192	119	337	428	1,504
Administrative Directors						
2007 Median	$15.00	$16.00	$23.44	$28.93	$17.30	$18.00
Number of Responses	225	200	24	121	246	816
Number Administrative Directors	305	325	168	188	311	1,297

Appendix 4.4. 2007 and 2012 Compensation of ECE Professionals: Highest Starting Salary

Year, Number of Responses, and sample size	For Profit <4 Sites	For Profit 4+ Sites	Head Start	Public Schools	Other Nonprofit	All Types
2012 Median	$15.00	$17.30	$24.35	$24.00	$18.70	$17.78
Number of Responses	286	218	25	92	253	874
Number Administrative Directors	371	317	119	143	337	1,287

First Things First – Arizona's Unknown Education Issue (2013). Early Learning Workforce Trends. Provided by AZ FTF.

Appendix 4.5. 2013 Average Length of Employment for ECE Professionals by Provider Type

Average Length of Employment	For Profit <4 Sites	For Profit 4+ Sites	Head Start	Public Schools	Other Nonprofit	All Types
Assistant Teachers						
6 months or less	7%	8%	-	2%	3%	4%
7-11 months	8%	7%	-	1%	2%	3%
One Year	31%	22%	12%	10%	12%	16%
Two Years	19%	14%	2%	18%	18%	15%
Three Years	9%	16%	28%	38%	24%	24%
Four Years	6%	9%	30%	7%	7%	10%
5 years or More	21%	24%	28%	24%	34%	27%
Don't Know/Refused	0%	0%	-	0%	0%	0%
Teachers						
6 months or less	3%	2%	-	2%	2%	2%
7-11 months	4%	1%	-	2%	2%	2%
One Year	13%	9%	11%	13%	5%	10%
Two Years	20%	18%	2%	8%	13%	15%
Three Years	17%	23%	14%	13%	15%	18%
Four Years	9%	10%	1%	6%	7%	8%
5 years or More	33%	37%	71%	56%	55%	45%
Don't Know/Refused	0%	1%	-	-	0%	1%
Teacher Directors						
6 months or less	4%	6%	3%	2%	4%	4%
7-11 months	5%	1%	-	1%	1%	2%
One Year	8%	10%	19%	5%	3%	7%
Two Years	9%	7%	17%	4%	10%	8%
Three Years	11%	13%	29%	10%	17%	14%
Four Years	10%	12%	-	29%	15%	15%

Appendix 4.5. 2013 Average Length of Employment for ECE Professionals by Provider Type

Average Length of Employment	For Profit <4 Sites	For Profit 4+ Sites	Head Start	Public Schools	Other Nonprofit	All Types
5 years or More	52%	49%	31%	48%	50%	49%
Don't Know/Refused	1%	1%	-	1%	0%	1%
Administrative Directors						
6 months or less	4%	3%	1%	1%	3%	3%
7-11 months	3%	3%	1%	1%	2%	2%
One Year	8%	6%	5%	4%	4%	6%
Two Years	7%	8%	3%	8%	7%	7%
Three Years	10%	11%	-	7%	6%	8%
Four Years	7%	10%	2%	5%	6%	7%
5 years or More	60%	56%	89%	74%	71%	66%
Don't Know/Refused	2%	2%	-	1%	2%	2%

First Things First – Arizona's Unknown Education Issue (2013). Early Learning Workforce Trends. Provided by AZ FTF.

Appendix 4.6. 2016 Race and ethnicity for children/pregnant women enrolled in Head Start Child-Parent Centers*

Race/Ethnicity	# of children/Pregnant women (Hispanic or Latino Origin)	# of children/pregnant women (Non-Hispanic or Non-Latino origin)
American Indian or Alaska Native	25	42
Asian	<25	31
Black or African American	31	101
Native Hawaiian or other pacific Islander	<25	<25
White	2,273	412
Biracial/Multi-racial	36	33
Other	186	28
Unspecified	58	0

Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/
**Child-Parent Centers is a Head Start grantee for five southern Arizona counties: Cochise, Pima, Graham, Greenlee and Santa Cruz Counties. Data presented are aggregated for all five counties*

Appendix 4.7. 2016 Primary language of family at home for children/pregnant women enrolled in Head Start Child-Parent Centers*

Primary Language of family at home	# of children/Pregnant women
English	1,675
Spanish	1,490
Native Central American, South American, and Mexican Languages	0
Caribbean Languages	0
Middle Eastern & South Asian Languages	63
East Asian Languages	<25
Native North American/Alaska Native Languages	0
Pacific Island languages	0
European & Slavic Languages	<25
African Languages	<25
Other	0
Unspecified	<25

Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/
**Child-Parent Centers is a Head Start grantee for five southern Arizona counties: Cochise, Pima, Graham, Greenlee and Santa Cruz Counties. Data presented are aggregated for all five counties*

Appendix 4.8. 2016 Funded Enrollment by Program Option for Head Start Child-Parent Centers*

Funded enrollment by program option -children	# of children
Center-based program- 5 days per week	
Full day enrollment	96
Of these, the number available as full-working-day	96
Of these, the number available for full-calendar-year	96
Part-day enrollment	0
Of these, the number in double sessions	0
Center-based program- 4 days per week	
Full-day enrollment	0
Part-day enrollment	2,076
Of these, the number in double sessions	0
Home-based program	578
Combination option program	<25
Family child care program	77
Of these, the number available as full-working-day enrollment	77
Of these, the number available for full-calendar-year	77
Locally designed option	0

Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/
**Child-Parent Centers is a Head Start grantee for five southern Arizona counties: Cochise, Pima, Graham, Greenlee and Santa Cruz Counties. Data presented are aggregated for all five counties*

Appendix 4.9. Quality First Enrollment by Quality First Star Ratings for Centers and Providers

Center Data	FTF Pima North Region**
Total Quality First licensed participants	117
Total Licensed Capacity 3-5 Star	3,565
Number of sites 3-5 Star	58
Number of Non-Quality First licensed centers	219
Total Non-Quality First licensed providers	529

Arizona First Things First (July 2015). Quality First.

Appendix 4.10. 2012-2015 Service visit received by children (unduplicated count) DDD

Year	Arizona	Pima County	FTF Pima North Region
Total number of visits for children ages 0-2			
2012	168,992	13,141	8,057
2013	158,496	16,428	8,896
2014	130,486	13,697	9,237
2015	120,519	13,969	8,512
Total number of visits for children ages 3-5			
2012	363,468	29,504	17,327
2013	374,440	27,830	18,391
2014	367,590	28,344	16,161
2015	358,322	28,294	15,707

Arizona Department of Economic Security (2015). Division of Developmental Disabilities. Provided by AZ FTF.

Appendix 4.11. 2012-2015 Number of children receiving services from the Division of Developmental Disabilities

Year	Arizona	Pima County	FTF Pima North Region
Total number of children (ages 0-2) receiving services			
2012	2,646	310	196
2013	2,693	340	197
2014	2,341	327	202
2015	2,336	311	184
Total number of children (ages 3-5) receiving services			
2012	2,536	268	167
2013	2,600	267	177
2014	2,533	256	158
2015	2,540	265	159

Arizona Department of Economic Security (2015). Division of Developmental Disabilities. Provided by AZ FTF.

Appendix 4.12. Preschool primary disabilities for Head Start Child-Parent Centers* and migrant programs

Diagnosed primary disability	# of children determined to have this disability	# of children receiving special services
Health impairment (i.e. meeting IDEA definition of other health impairments'	0	0
Emotional disturbance	0	0
Speech or language	213	213
Intellectual disabilities	<25	<25
Hearing impairment, including deafness	<25	<25
Orthopedic impairment	0	0
Visual impairment, including blindness	0	0
Specific learning disability	<25	<25
Autism	<25	0
Traumatic brain injury	0	0
Non-categorical/developmental delay	58	58
Multiple disabilities (excluding deaf-blind)	<25	<25
Multiple disabilities (including deaf-blind)	0	0

Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/
**Child-Parent Centers is a Head Start grantee for five southern Arizona counties: Cochise, Pima, Graham, Greenlee and Santa Cruz Counties. Data presented are aggregated for all five counties*

Appendix 4.13. Types of Disabilities of Preschool Children

Type of Disability	Arizona	Pima County	FTF Pima North Region
2012			
Deaf-Blind	<25	<25	-
Developmental Delay	3,672	473	319
Hearing impaired	160	<25	26
PSD	2,164	365	174
Speech/Language Impairment	3,560	441	256
Visual Impairment	111	28	<25
Total	9,680	1335	784
2013			
Deaf-Blind	<25	<25	-
Developmental Delay	3,774	473	307
Hearing impaired	157	<25	29
PSD	2,187	357	161
Speech/Language Impairment	3,437	374	216
Visual Impairment	118	60	<25
Total	9,689	1,295	724
2014			
Deaf-Blind	<25	<25	<25
Developmental Delay	3,747	496	314
Hearing impaired	154	<25	<25
PSD	1,921	272	109
Speech/Language Impairment	3,503	454	255
Visual Impairment	105	51	<25
Total	9,444	1,302	715
2015			
Deaf-Blind	3,571	467	314
Developmental Delay	63	<25	<25

Appendix 4.13. Types of Disabilities of Preschool Children

Type of Disability	Arizona	Pima County	FTF Pima North Region
Hearing impaired	1,859	269	109
PSD	3,155	341	255
Speech/Language Impairment	54	<25	<25
Visual Impairment	-	-	-
Total	8,702	1,101	698

Arizona Department of Education (2015). Special Education. Provided by AZ FTF.
**Note: The data presented in this table are unduplicated (i.e., children diagnosed with multiple disabilities are counted only one time in the Federal Primary Need [FPN] category).*

Appendix 4.14. Types of Speech, Language, and Hearing Service Providers

Types of Service Provider	Pima County
Number of Speech Language Pathologists	370
Number of Hearing Aid Dispensers	91
Number of Dispensing Audiologists	74
Number of Speech Language Assistants	51
Number of Speech Language Pathologists (Limited Licensed)	39
Number of Temporary Speech Language Pathologists	20
Number of Temporary Hearing Aid Dispensers	10
Number of Audiologists	3
Number of Special Licensing Pathologists	0

Arizona Department of Health Services (2016). Speech, Language and Hearing Providers. Retrieved from http://azdhs.gov/licensing/special/index.php#databases

Appendix 4.15. Infants and toddlers with an Individual Family Service Plan (IFSP) who received an evaluation assessment and IFSP within 45 days of referral[1*]

Indicators	Federal Fiscal Year 2012	Federal Fiscal Year 2013
Infants and toddlers with IFSPs who receive timely services**	87%	82%
Infants and toddlers who had initial IFSP within 45 days ***	94%	76%
Infants and toddlers who primarily receive services in NE ****	95%	95%

Data were gathered from AzEIP's SPP/APR which are submitted in federal reports can be found on https://www.azdes.gov/reports.
***Monitoring data; cannot report in the requested format for the requested years*
****Cannot provide child level data at this time with addresses and zip codes*
*****Cannot provide child level data with addresses and zip codes for the requested years*

Appendix 5.1. 2009-2014 Number of births that were covered by ACHCCCS or Indian Health*

Year	Statewide	FTF Region
2009	49,376	**4,428**
2010	46,284	**4,105**
2011	44,857	**3,925**
2012	45,453	**3,957**
2013	45,792	**4,070**
2014	46,064	**3,909**

Vital Statistics Birth (2014). Provided by AZ FTF.

Appendix 5.2. 2000-2008 Rate of children who have health insurance*

Year	Statewide	County
2000	23.20%	24.90%
2002	27.70%	30.20%
2003	40.00%	43.50%
2005	35.00%	38.40%
2008	33.30%	38.40%

Kids Count Data Center (2008). Children enrolled in AHCCCS or KidsCare. Retrieved from http://datacenter.kidscount.org/

Appendix 5.3. Enrollment Health Insurance Information from Head Start Child-Parent Centers*

	# of children at enrollment	# of children at end of enrollment year
Number of Children with Health Insurance	3,107	3,111
Number of Enrollment Medicaid and/or CHIP	2,771	2,766
Number of enrollment in State-Only Funded Insurance (for example, medically indigent insurance)	41	40
Number with private health insurance (for example, parent's insurance)	214	216
Number with Health Insurance other than listed above, for example, Military Health (Tri-Care or CHAMPUS)	81	89
Number of Children with no health insurance	142	138
Number of Children with an ongoing source of continuous accessible health care	3,124	3,146
Number of children receiving medical services through the Health service	28	27

Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/
**Child-Parent Centers is a Head Start grantee for five southern Arizona counties: Cochise, Pima, Graham, Greenlee and Santa Cruz Counties. Data presented are aggregated for all five counties*

Appendix 5.4. 2012-2015 Reportable Illnesses for all Ages*

Year	Statewide	County
2012	20,690	2,666
2013	13,913	2,092
2014	13,211	2,059
2015	15,966	2,568

Arizona Department of Health Services (2015). Communicable Disease Summary. Retrieved from http://www.azdhs.gov/preparedness/epidemiology-disease-control/index.php#data-stats-archive

Appendix 5.5. 2012-2014 Total Number of Asthma Related Visits to ER

Year	Statewide	County	FTF Region
2012	5,450	614	404
2013	4,890	475	323
2014	4,560	440	295

Asthma ER Visits (2014). Provided by AZ FTF.

Appendix 5.6. 2012-2014 Non-fatal Emergency Department Visit injuries: Gender and Injury Type

	Arizona	FTF Region
2012		
Male (Overall Injuries)	28,298	2,562
Female (Overall injuries)	21,419	1,866
Cut/Pierce	2,070	160
Drowning	135	6
Fall	22,308	2037
Fire/Hot Object	1,269	101
MVC	902	78
Pedal-Cycle	482	31
Natural/Environment	4,265	369
Poisoning	1,668	122
Stuck By/Against	7,669	659
2013		
Male (Overall injuries)	26,390	2,428
Female (Overall injuries)	20,273	1,866
Cut/Pierce	1,917	154
Drowning	112	10
Fall	21,110	1,953
Fire/Hot Object	1,146	82
MVC	844	73
Pedal-cycle	402	40
Natural/Environment	4,047	359
Poisoning	1,582	156
Struck By/Against	6,806	629

Appendix 5.6. 2012-2014 Non-fatal Emergency Department Visit injuries: Gender and Injury Type

	Arizona	FTF Region
2014		
Male (Overall injuries)	25,987	2,361
Female (Overall injuries)	20,280	1,839
Cut/Pierce	1,688	128
Drowning	161	13
Fall	21,145	1,942
Fire/Hot object	1,198	104
MVC	883	71
Pedal-Cycle	358	28
Natural/Environment	4,512	390
Poisoning	1,608	141
Struck By/Against	6,367	620

Arizona Department of Health Services (March2016). Unintentional Injuries in Children 0-5, Arizona 2012-2014. Provided AZFTF
**Cells with counts <6 have been suppressed*

Appendix 5.7. 2009-2014 Child Fatality Rates for Children under 18*

Year	Statewide	County
2009	947	14%
2010	862	15%
2011	837	13%
2012	854	11%
2013	810	13%
2014	834	13%

Arizona Department of Health Services (2015). Arizona Child Fatality Review. Retrieved from http://www/azdhs.gov/documents/preventiwon/women-children-health/reports-fact-sheets/child-fatality-review-annual-reports/cfr-annual-report-2015.pdf

Appendix 5.8. 2009-2014 Manner of Death for Children Under 18*

Manner of Death	Statewide
2009	
Natural	68%
Accident	17%
Undetermined	7%
Homicide	5%
Suicide	3%
2010	
Natural	66%
Accident	19%
Undetermined	9%
Homicide	4%
Suicide	3%
2011	
Natural	64%
Accident	20%
Undetermined	6%
Homicide	5%
Suicide	5%
2012	
Natural	63%
Accident	22%
Undetermined	5%
Homicide	5%
Suicide	4%
2013	

Appendix 5.8. 2009-2014 Manner of Death for Children Under 18*

Manner of Death	Statewide
Natural	63%
Accident	23%
Undetermined	5%
Homicide	6%
Suicide	3%
2014	
Natural	66%
Accident	22%
Undetermined	4%
Homicide	4%
Suicide	5%

Arizona Department of Health Services (2015). Arizona Child Fatality Review. Retrieved from http://www/azdhs.gov/documents/preventiwon/women-children-health/reports-fact-sheets/child-fatality-review- annual-reports/cfr-annual-report-2015.pdf
**Does not include deaths of pending manner*

Appendix 5.9. 2014 Manner of Death for Children 1-5 Years of Age*

Manner of Death	Statewide
2014	
Natural Accident	5%
Accident	4.6%
Undetermined	0.6%
Homicide	1.7%
Suicide	0%

Arizona Department of Health Services (2015). Arizona Child Fatality Review. Retrieved from http://www/azdhs.gov/documents/preventiwon/women-children-health/reports-fact-sheets/child-fatality-review-annual-reports/cfr-annual-report-2015.pdf
**Does not include deaths of pending manner*

Appendix 5.10. Statewide 2014 Injury-Related Outcomes for Children Ages 0-5*

	Infants less than 1 year		Children Ages 1-5	
	Hospital Discharges	ED visits	Hospital Discharges	Ed Visits
Unintentional Injuries	212	5082	695	40,961
Assault/Abuse	69	22	39	119
Undetermined/ Other Intent	<25	61	<25	123
Total Injury-Related Cases	290	5,165	747	41,350

Arizona Special Emphasis Report (2014). Infant and Early Childhood Injury.

Appendix 5.11. 2009-2014 Women Who Received Prenatal Care*

Percent of Prenatal Care Visits	Year	Statewide	County	FTF Region
Received fewer than five prenatal care visits				
	2009	3.4%	*	**4.2%**
	2010	3.3%	*	**3.9%**
	2011	3.4%	*	**4.1%**
	2012	3.6%	*	**5.2%**
	2013	3.8%	5.8%	**5.4%**
	2014	4.4%	6.6%	**6.3%**
	2009	15.6%	*	**18.1%**
	2010	14.4%	*	**18.1%**
	2011	14.0%	*	**17.7%**
	2012	13.7%	*	**17.7%**
	2013	13.5%	17.9%	**17.1%**
	2014	14.7%	18.6%	**17.1%**
9-12 prenatal visits				
	2009	49.1%	*	**48.8%**
	2010	49.0%	*	**46.5%**
	2011	47.0%	*	**48.1%**
	2012	46.8%	*	**45.5%**
	2013	46.4%	44.3%	**44.1%**
	2014	47.6%	42.6%	**43.1%**
13 or more prenatal visits				
	2009	30.1%	*	**26.7%**
	2010	31.7%	*	**29.8%**
	2011	34.0%	*	**28.8%**
	2012	34.7%	*	**30.3%**

Appendix 5.11. 2009-2014 Women Who Received Prenatal Care*

Percent of Prenatal Care Visits	Year	Statewide	County	FTF Region
	2013	34.9%	29.9%	31.6%
	2014	31.1%	27.8%	29.8%

Vital Statistics Birth (2014). Provided by AZ FTF.

Appendix 5.12. Tobacco and Alcohol Use During Pregnancy 2009-2014*

Year	Mother's Substance use	Statewide	County	FTF Region
2009				
	Drinker, Nonsmoker	0.3%	0.5%	**0.4%**
	Smoker, Nondrinker	4.6%	5.5%	**6.2%**
	Smoker and Drinker	0.2%	0.4%	**0.4%**
	Nonsmoker and Nondrinker	94.9%	*	**93.0%**
2010				
	Drinker, Nonsmoker	0.3%	0.3%	**0.3%**
	Smoker, Nondrinker	4.4%	4.3%	**5.0%**
	Smoker and Drinker	0.2%	0.3%	**0.3%**
	Nonsmoker and Nondrinker	95.1%	*	**94.4%**
2011				
	Drinker, Nonsmoker	0.4%	0.2%	**0.2%**
	Smoker, Nondrinker	4.1%	3.6%	**4.3%**
	Smoker and Drinker	0.2%	0.1%	**0.1%**
	Nonsmoker and Nondrinker	95.4%	*	**95.4%**
2012				
	Drinker, Nonsmoker	0.3%	0.2%	**0.2%**
	Smoker, Nondrinker	4.0%	3.5%	**4.2%**
	Smoker and Drinker	0.2%	0.2%	**0.2%**
	Nonsmoker and Nondrinker	95.5%	*	**95.4%**
2013				
	Drinker, Nonsmoker	0.2%	0.2%	**0.2%**
	Smoker, Nondrinker	4.3%	3.5%	**4.2%**
	Smoker and Drinker	0.2%	0.1%	**0.2%**
	Nonsmoker and Nondrinker	95.3%	96.2%	**95.5%**

Appendix 5.12. Tobacco and Alcohol Use During Pregnancy 2009-2014*

Year	Mother's Substance use	Statewide	County	FTF Region
2014				
	Nonsmoker	96.0%	96.4%	**95.9%**
	Light Smoker	2.7%	2.2%	**2.7%**
	Heavy Smoker	1.3%	1.1%	**1.4%**
	Unknown	0.7%	0.2%	**0.2%**

Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
** Sum rounded to nearest tens unit due to non-zero addend less than 6*
***Alcohol consumption was not reported for 2014; as such data on smoking had additional categories*

Appendix 5.13. 2009-2014 Infant Mortality and At-Risk Births*

	Year	Statewide**	County	FTF Region
Baby had low birthweight (5.5 lbs or less)				
	2009	7.1%	7.0%	**7.1%**
	2010	7.1%	7.0%	**7.2%**
	2011	7.0%	7.1%	**7.1%**
	2012	6.9%	7.1%	**7.1%**
	2013	6.9%	7.1%	**7.6%**
	2014	7.0%	7.3%	**7.1%**
Number Premature births (under 37 weeks)				
	2009	10.0%	9.5%	**9.6%**
	2010	9.6%	9.0%	**9.0%**
	2011	9.3%	8.9%	**8.8%**
	2012	9.2%	9.0%	**8.9%**
	2013	9.0%	8.9%	**8.9%**
	2014	9.0%	8.9%	**8.6%**
Infant Mortality Rate				
	2009	0.6%	0.6%	**0.7%**
	2010	0.6%	0.6%	**0.6%**
	2011	0.6%	0.5%	**0.4%**
	2012	0.6%	0.5%	**0.5%**
	2013	0.5%	0.5%	**0.3%**
	2014	0.6%	0.5%	**0.4%**
Births with congenital anomalies				
	2009	0.7%	*	**0.9%**
	2010	0.6%	*	**0.8%**
	2011	0.6%	*	**0.9%**

Appendix 5.13. 2009-2014 Infant Mortality and At-Risk Births*

	Year	Statewide**	County	FTF Region
	2012	0.6%	*	**0.8%**
	2013	0.7%	0.9%	**0.8%**
	2014	0.5%	0.4%	**0.3%**

Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF

Appendix 5.14. 2009-2014 Mothers who were not married*

	Year	Statewide	FTF Region
Mother was not married			
	2009	44.9%	**43.7%**
	2010	44.4%	**43.7%**
	2011	44.4%	**43.8%**
	2012	45.5%	**44.3%**
	2013	45.7%	**45.3%**
	2014	45.5%	**45.6%**

Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF

Appendix 5.15. 2012-2015 Pre-Pregnancy Overweight and Obesity Rates*

Indicators	Statewide	County	FTF Region
2012			
Total	52,600	7,018	4,482
Percent Pre-Pregnancy under weight	4.8%	4.8%	5.6%
Percent Pre-Pregnancy normal weight	41.2%	40.8%	42.1%
Percent Pre-Pregnancy overweight	26.7%	25.9%	24.9%
Percent Pre-Pregnancy obese	27.4%	28.5%	27.4%
2013			
Total	51,894	6,884	4,471
Percent Pre-Pregnancy under weight	4.7%	4.7%	5.3%
Percent Pre-Pregnancy normal weight	40.1%	39.9%	41.7%
Percent Pre-Pregnancy overweight	26.8%	25.6%	24.7%
Percent Pre-Pregnancy obese	28.4%	29.8%	28.3%
2014			
Total	53,717	7,068	4,638
Percent Pre-Pregnancy under weight	4.6%	4.4%	4.6%
Percent Pre-Pregnancy normal weight	40.0%	40.4%	42%
Percent Pre-Pregnancy overweight	26.4%	25.3%	24.1%
Percent Pre-Pregnancy obese	29.0%	30.0%	29.3%
2015			

Appendix 5.15. 2012-2015 Pre-Pregnancy Overweight and Obesity Rates*

Indicators	Statewide	County	FTF Region
Total	58,495	7,655	4,918
Percent Pre-Pregnancy under weight	4.1%	3.7%	4.1%
Percent Pre-Pregnancy normal weight	38.6%	39.0%	39.8%
Percent Pre-Pregnancy overweight	26.8%	26.0%	25.5%
Percent Pre-Pregnancy obese	30.5%	31.4%	30.7%

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

Appendix 5.16. 2015 Reported Medical Issues in Head Start Child-Parent Centers*

Chronic Conditions	# of children
Anemia	11
Asthma	232
Hearing Difficulties	6
Vision Problems	50
High Lead Levels	1
Diabetes	4

Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/
**Child-Parent Centers is a Head Start grantee for five southern Arizona counties: Cochise, Pima, Graham, Greenlee and Santa Cruz Counties. Data presented are aggregated for all five counties*

Appendix 5.17. Number of all Children Body Mass Index from Head Start Child-Parent Centers*

	# of children at enrollment
Underweight (BMI less than 5th percentile for child's age and sex)	97
Healthy weight (at or above 5th percentile and below 85th percentile for child's age and sex)	1,628
Overweight (BMI at or above 85th percentile and below 95th percentile for child's age and sex)	391
Obese (BMI at or above 95th percentile for child's age and sex)	483

Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/
**Child-Parent Centers is a Head Start grantee for five southern Arizona counties: Cochise, Pima, Graham, Greenlee and Santa Cruz Counties. Data presented are aggregated for all five counties*

Appendix 5.18. 2015 Immunization Received from Head Start Child-Parent Centers*

	# of children at enrollment	# of children at the end of enrollment year
Number of children who have been determined by a health care professional to be up-to-date on all immunizations appropriate for their age	3,099	3,174
Number of children who have been determined by a health care professional to have received all immunizations possible at this time, but who have not received all immunizations appropriate for their age	37	22
Number of children who meet their state's guidelines for an exemption from immunizations	32	30
Number of all children who are up-to-date on a schedule of age-appropriate preventive and primary health care, according to the relevant state's EPSDT schedule for well child care	1,319	2,947

Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/
Child-Parent Centers is a Head Start grantee for five southern Arizona counties: Cochise, Pima, Graham, Greenlee and Santa Cruz Counties. Data presented are aggregated for all five counties

Appendix 5.19. 2015 Oral Health Information from Head Start Child-Parent Centers*

	# of children at enrollment
Number of Children with Continuous Accessible Dental Care provided by a dentist	3,059
Number of Children who received preventive care since last year's PIR was reported	2,525
Number of all children, including those enrolled in Medicaid or CHIP, who have completed a professional dental examination since last year's PIR was reported	2,424
Of these, the number of children diagnosed as needing treatment since last year's PIR was reported	722
Of these, the number of children who have received or are receiving treatment	630

Office of Head Start (2016). Head Start Data. Retrieved from: https://hses.ohs.acf.hhs.gov/pir/
**Child-Parent Centers is a Head Start grantee for five southern Arizona counties: Cochise, Pima, Graham, Greenlee and Santa Cruz Counties. Data presented are aggregated for all five counties*

Chapter 6

Appendix 6.1. Juvenile arrests of children ages 8-17 for violent crimes

	Arizona	Pima County
2004	1,569	250
2005	1,576	301
2006	1,647	274
2007	1,604	223
2008	1,630	213
2009	1,355	236
2010	1,245	190
2011	1,082	159
2012	1,048	178
2013	961	109
2014	827	111

Kids Count Data Center (2014). Juvenile Arrests. Retrieved from http://datacenter.kidscount.org/

Appendix 6.2. Juvenile arrests of children ages 8-17 for drug crimes

	Arizona	Pima County
2004	5,587	1,960
2005	5,396	1,997
2006	5,225	1,775
2007	5,456	1,778
2008	5,440	1,767
2009	5,507	1,744
2010	5,417	1,621
2011	5,109	1,500
2012	4,550	1,270
2013	3,939	941

Kids Count Data Center (2014). Juvenile Arrests. Retrieved from http://datacenter.kidscount.org/

Appendix B

Subregional Fact Boxes

The following pages include the subregional fact boxes for eight subregions of the FTF Pima North Region. The subregions are grouped by zip code as follows:

1. Rural Northwest: 85653, 85654, 85743
2. Marana: 85658
3. Urban Northwest: 85704, 85741, 85742
4. Catalina Foothills: 85718
5. Catalina/Oracle Junction: 85739
6. Central East: 85711, 85712, 85716
7. Davis Monthan: 85707, 85708
8. Downtown UofA: 85701, 85719, 85724
9. Mount Lemmon: 85619
10. Oro Valley: 85737, 85755
11. South Tucson: 85713, 85714, 85726
12. Southeast: 85710, 85730, 85748
13. Flowing Wells: 85705
14. Tanque Verde-Sabino Canyon: 85715, 85749, 85750
15. West Gates Pass: 85745

Rural Northwest

	%	N
85743	65.8%	29,144
85653	34.0%	15,083
85654	0.2%	97

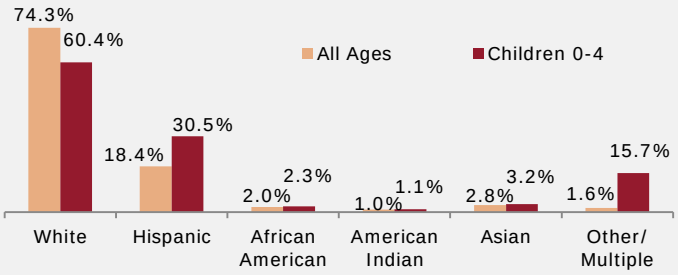
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	44,324	
Population below Poverty*		4,162** (9.8%)
Children 0-5	3,762	
Children 0-5 below Poverty*		363 (10.5%)**
Population Change Children 0-4 for 2010-2014 ***	-2.2%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



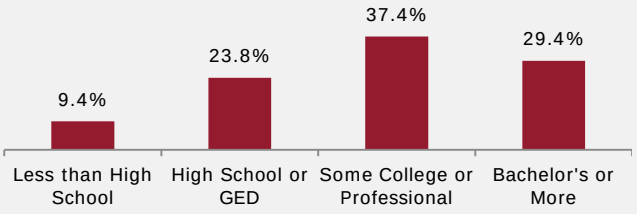
U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

Families	YEAR
Total Number of Families	16,265
Families with Children 0-5	2,674 (16.4%)
Single Parent Families with Children 0-5	654 (24.5%)
Single Parent Families with Children 0-5 (Mother only)	430 (16.1%)

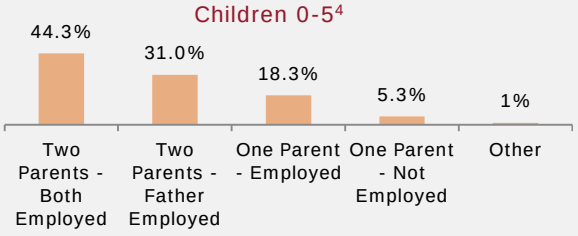
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	440	11.7%
Children 3-4 Enrolled in Pre-K[2]	733	46.9%
Children 0-5 without Health Insurance[3]	154	4.3%

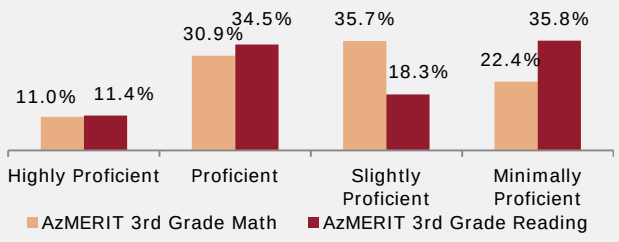
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	19	18	18	1,200
ADHS Certified Group Homes	2	2	2	20
DES Certified Homes	5	8	8	37
Listed Homes (Unregulated)	5	2	0	0
Total	31	30	28	1,257
Subsets: Head Start	2	2	2	100
Accredited	1	1	1	10
Quality First	-	-	5	184
DES Child Care Subsidy Eligibility-Children 0-5	-	-	241	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	216	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	91.6%
3+ doses Polio	91.8%
2+ doses MMR	91.6%
3+ doses Hepatitis B	93.5%
2+ doses Varicella	85.9%
1 dose Varicella+ History	9.5%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening	19
# Children Served	20

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	117
# Children Served	61

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	64
TANF Children 0-5 Recipients	77
Food Stamp Recipients – Families with Children 0-5	778
Food Stamp Recipients – Children 0-5	1,050

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

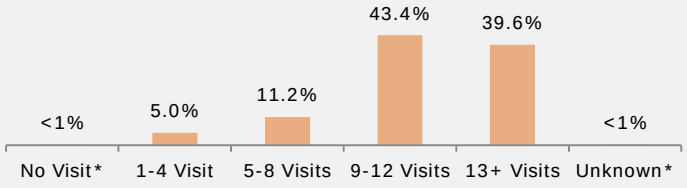
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	418	402	365	332
WIC Enrolled/Participants Children 0-4	794	753	680	621

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

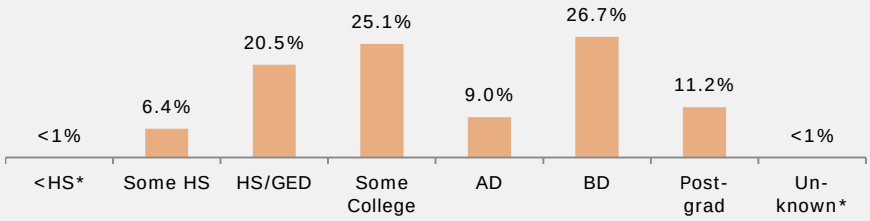
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers	16	3.2%
Low Birth Weight	26	5.2%
High School Dropout Rate		2.4%

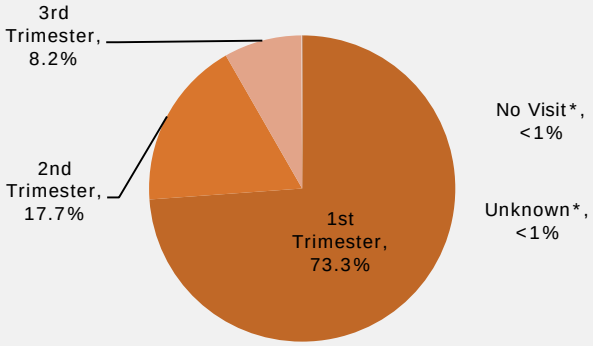
Prenatal Visits



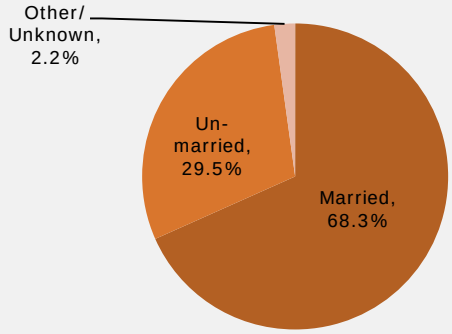
Mother's Education



Prenatal Care**

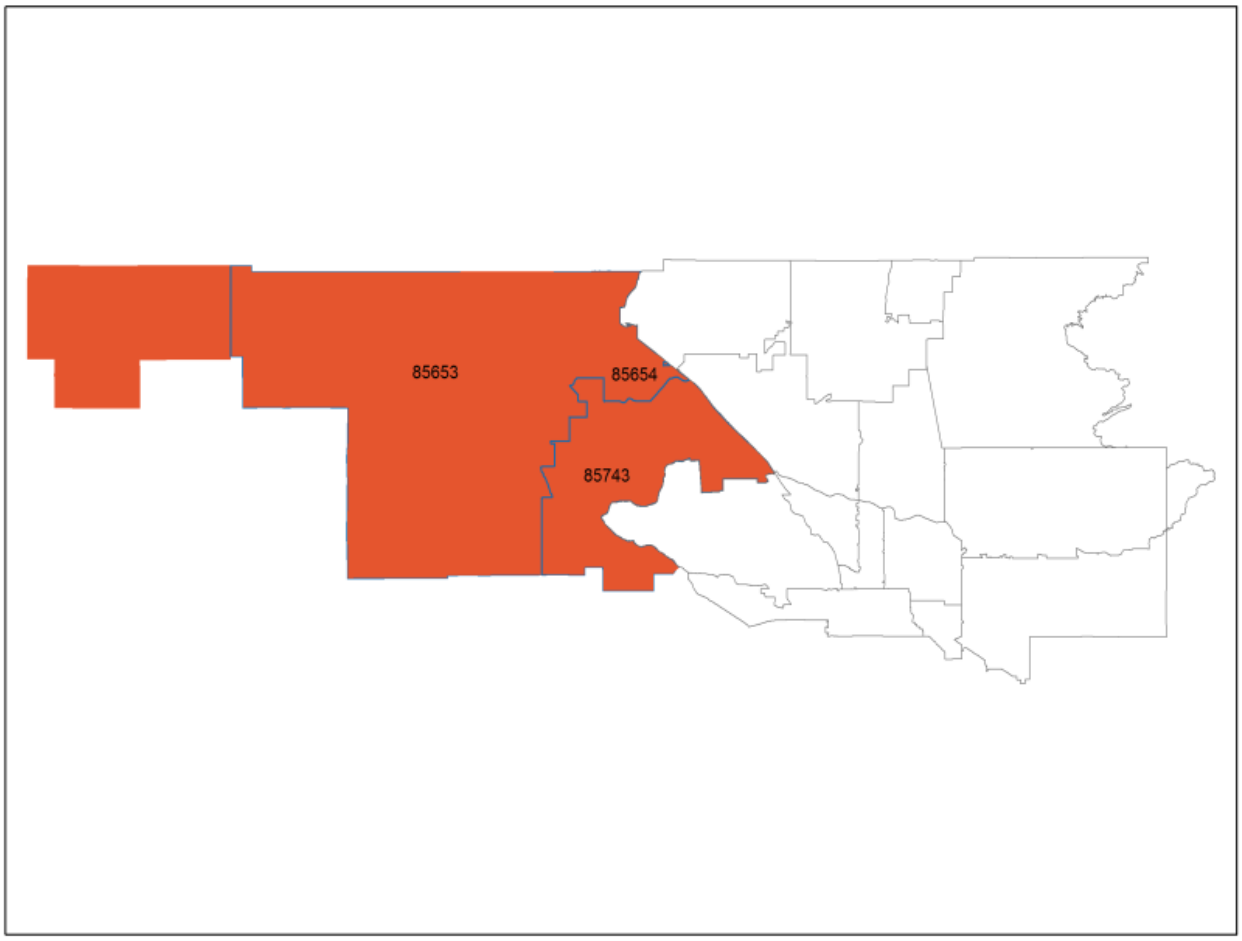


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Rural Northwest Map



Marana

	%	N
85658	100%	7,790

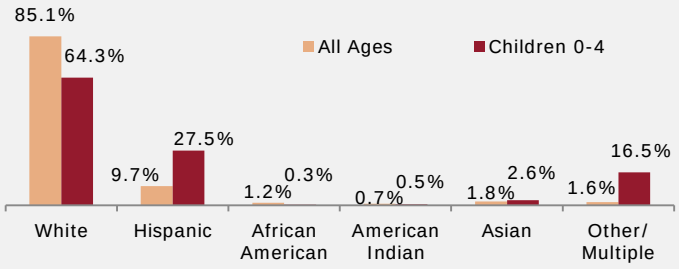
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	7,790	
Population below Poverty*		222** (2.3%)
Children 0-5	467	
Children 0-5 below Poverty*		20 (3.1%)**
Population Change Children 0-4 for 2010-2014***	26.2%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

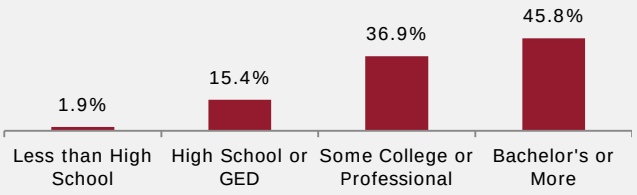
Families

Families	YEAR
Total Number of Families	3,382
Families with Children 0-5	325 (9.6%)
Single Parent Families with Children 0-5	47 (14.5%)
Single Parent Families with Children 0-5 (Mother only)	30 (9.2%)

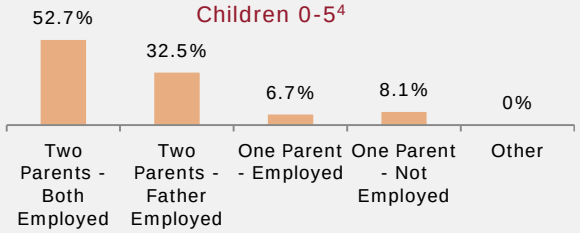
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	26	5.6%
Children 3-4 Enrolled in Pre-K[2]	127	62.0%
Children 0-5 without Health Insurance[3]	23	3.6%

Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency

No Data Available

1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	0	0	0	0
ADHS Certified Group Homes	0	0	0	0
DES Certified Homes	0	0	0	0
Listed Homes (Unregulated)	0	0	0	0
Total	0	0	0	0
Subsets: Head Start	0	0	0	0
Accredited	0	0	0	0
Quality First	0	0	0	0
DES Child Care Subsidy Eligibility-Children 0-5	-	-	19	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	18	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
No Data Present	

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening	<10
# Children Served	<10

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.
*Data supressed; Number of clients between 1 and 9

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	<19
# Children Served	<19

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.
*Data Supressed: To get the total count of children referred and served, we had to sum up totals for children ages 0-24 months and children ages 25-35 months. For one or both age groups, the data were supressed because the number of children is between 1 and 9.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5*	<10
TANF Children 0-5 Recipients*	<10
Food Stamp Recipients – Families with Children 0-5*	<10
Food Stamp Recipients – Children 0-5	44

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).
*Data supressed; Number of clients between 1 and 9

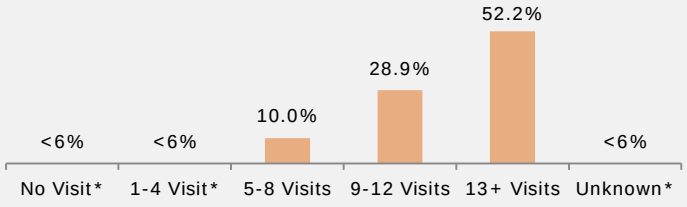
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	20	20	23	18
WIC Enrolled/Participants Children 0-4	30	31	28	29

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

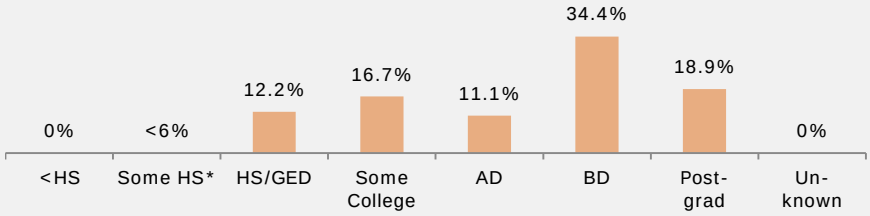
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers*	<6	<6.0%
Low Birth Weight*	<6	<6.0%
High School Dropout Rate	-	-

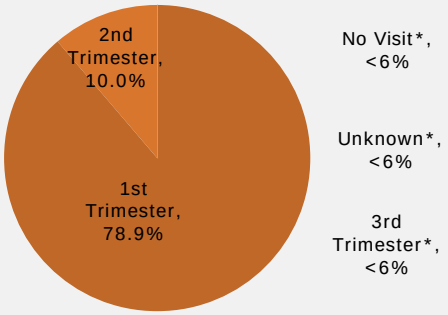
Prenatal Visits



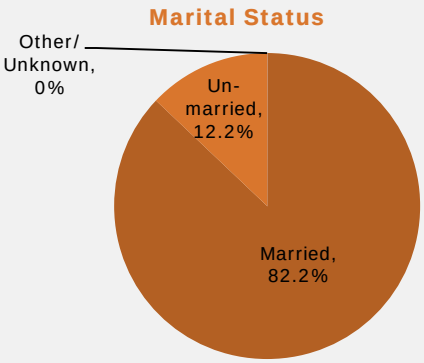
Mother's Education



Prenatal Care**

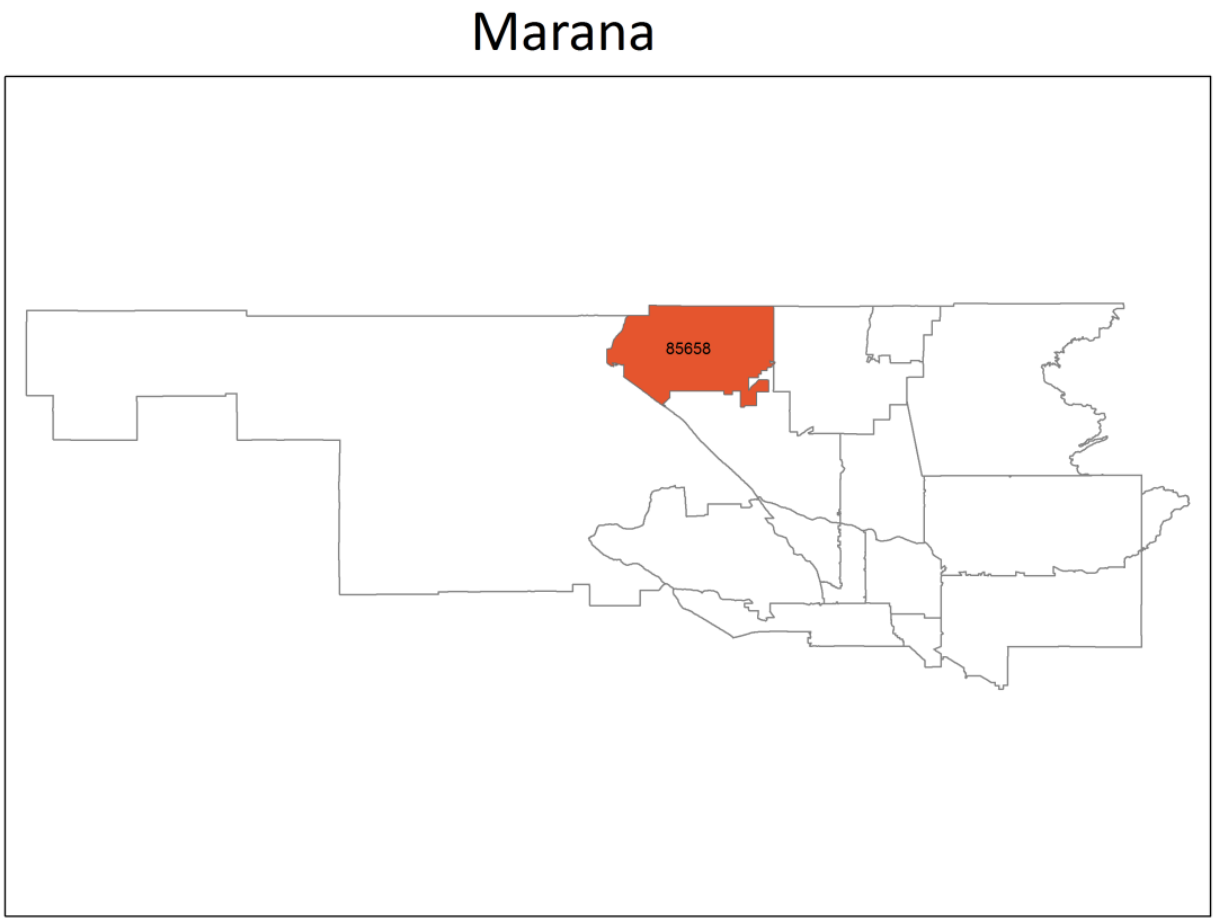


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Marana Map



Urban Northwest

	%	N
85704	34.7%	30,929
85741	37.0%	32,998
85742	28.3%	25,212

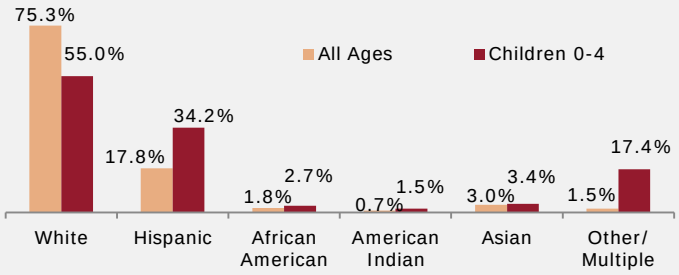
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	89,139	
Population below Poverty*		8,714** (9.7%)
Children 0-5	5,902	
Children 0-5 below Poverty*		1,024 (16.3%)**
Population Change Children 0-4 for 2010-2014***	2.2%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

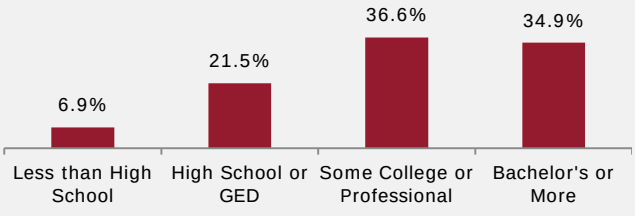
Families

Families	YEAR
Total Number of Families	36,944
Families with Children 0-5	4,372 (11.8%)
Single Parent Families with Children 0-5	1,358 (31.1%)
Single Parent Families with Children 0-5 (Mother only)	940 (21.5%)

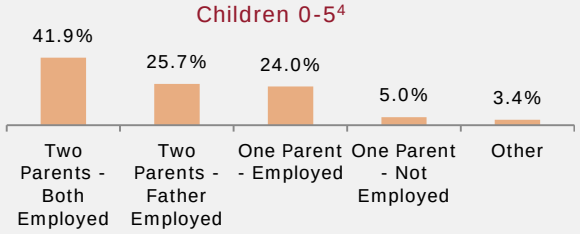
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	628	10.6%
Children 3-4 Enrolled in Pre-K[2]	897	40.6%
Children 0-5 without Health Insurance[3]	527	8.2%

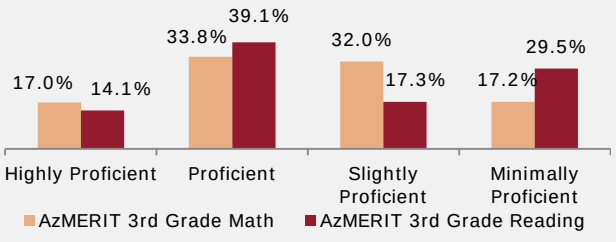
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	39	38	39	5,835
ADHS Certified Group Homes	5	6	6	57
DES Certified Homes	10	9	8	32
Listed Homes (Unregulated)	2	4	1	4
Total	56	57	54	5,928
Subsets: Head Start	1	0	0	0
Accredited	7	7	7	1,058
Quality First	-	-	13	1,863
DES Child Care Subsidy Eligibility-Children 0-5	-	-	542	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	494	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	89.6%
3+ doses Polio	89.9%
2+ doses MMR	89.3%
3+ doses Hepatitis B	89.2%
2+ doses Varicella	85.7%
1 dose Varicella+ History	5.3%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening	59
# Children Served	61

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	151
# Children Served	105

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	84
TANF Children 0-5 Recipients	98
Food Stamp Recipients – Families with Children 0-5	1,400
Food Stamp Recipients – Children 0-5	1,852

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

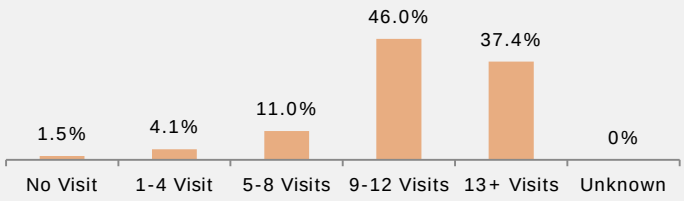
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	808	775	728	624
WIC Enrolled/Participants Children 0-4	1,081	1,070	968	887

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

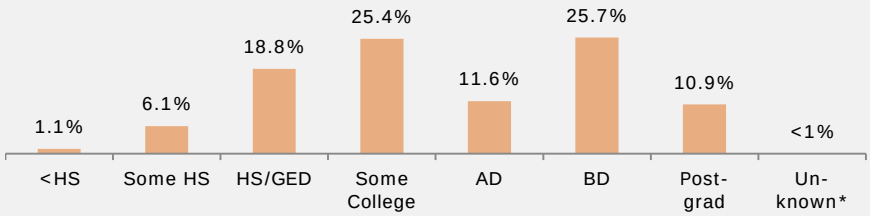
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers	49	4.8%
Low Birth Weight	80	7.8%
High School Dropout Rate		2.4%

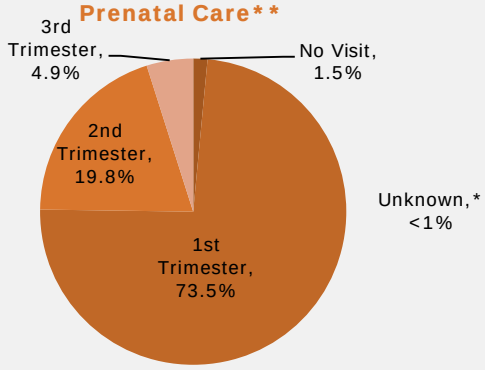
Prenatal Visits



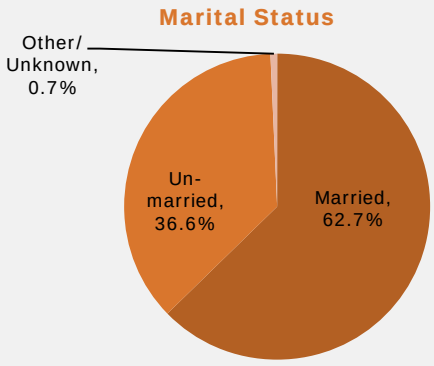
Mother's Education



Prenatal Care**

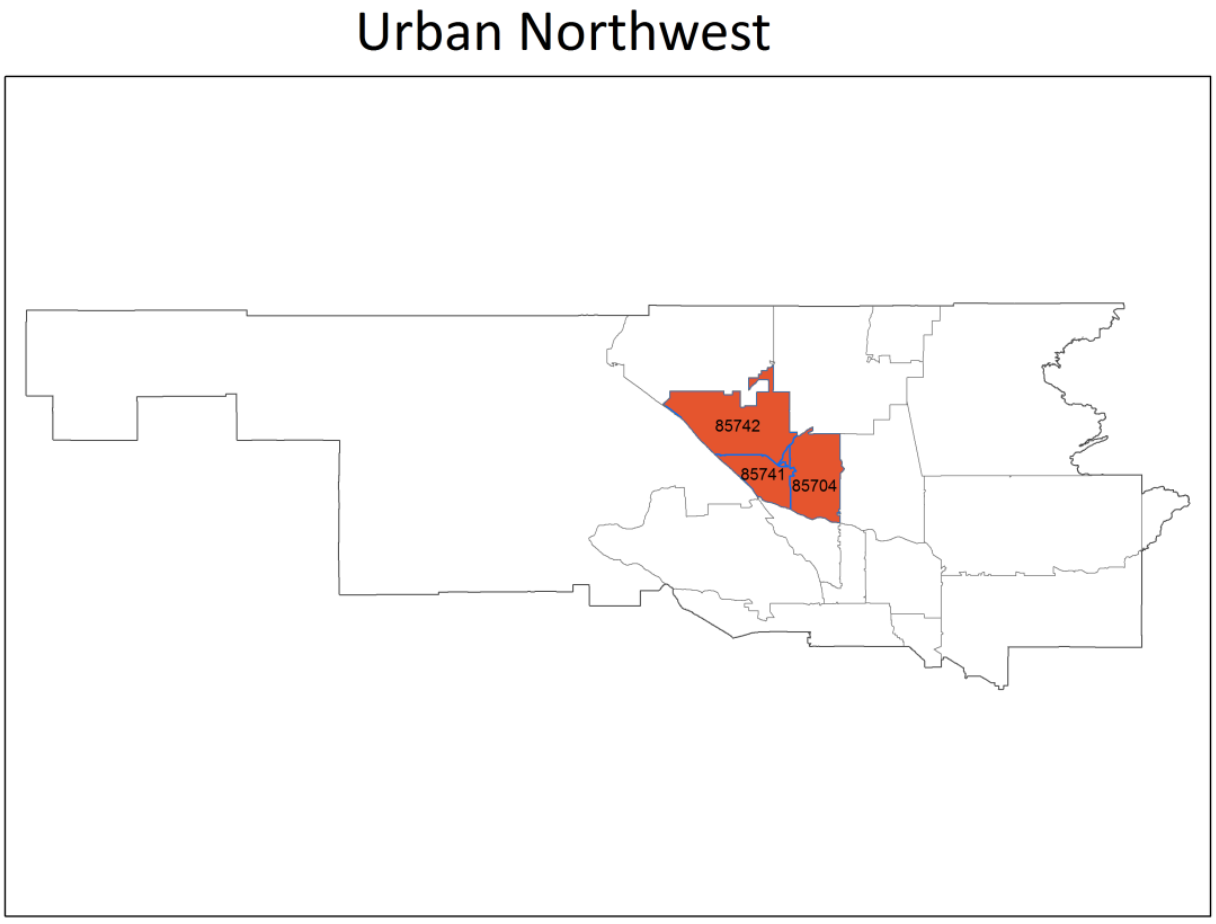


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Urban Northwest Map



Catalina Foothills

	%	N
85718	100%	27,367

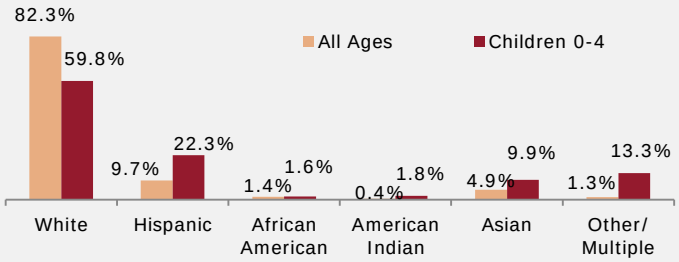
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	27,367	
Population below Poverty*		2,017** (7.5%)
Children 0-5	1,079	
Children 0-5 below Poverty*		112 (9.3%)**
Population Change Children 0-4 for 2010-2014***	-1.3%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

Families

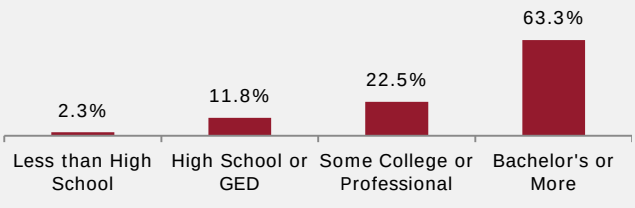
Families	YEAR
Total Number of Families	13,018
Families with Children 0-5	818 (6.3%)
Single Parent Families with Children 0-5	173 (21.1%)
Single Parent Families with Children 0-5 (Mother only)	121 (14.8%)

U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

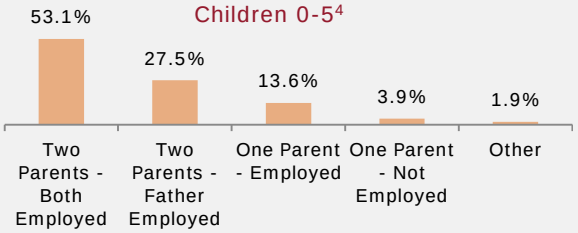
Additional FTF Data

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	48	4.4%
Children 3-4 Enrolled in Pre-K[2]	220	70.5%
Children 0-5 without Health Insurance[3]	61	5.0%

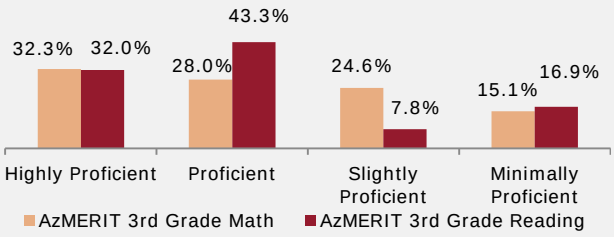
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	11	12	11	1,903
ADHS Certified Group Homes	0	0	0	0
DES Certified Homes	0	0	0	0
Listed Homes (Unregulated)	0	0	0	0
Total	11	12	11	1,903
Subsets: Head Start	0	0	0	0
Accredited	0	0	1	185
Quality First	-	-	3	700
DES Child Care Subsidy Eligibility-Children 0-5	-	-	24	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	19	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	68.8%
3+ doses Polio	68.4%
2+ doses MMR	68.8%
3+ doses Hepatitis B	66.7%
2+ doses Varicella	62.5%
1 dose Varicella+ History	7.6%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening*	<10
# Children Served	10

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.
*Data supressed; Number of clients between 1 and 9

Arizona Early Intervention Program Data	2015
# Children Referred for Screening*	<27
# Children Served*	<19

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.
*Data Supressed: To get the total count of children referred and served, we had to sum up totals for children ages 0-24 months and children ages 25-35 months. For one or both age groups, the data were supressed because the number of children is between 1 and 9.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5*	<10
TANF Children 0-5 Recipients*	<10
Food Stamp Recipients – Families with Children 0-5	105
Food Stamp Recipients – Children 0-5	125

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).
*Data supressed; Number of clients between 1 and 9

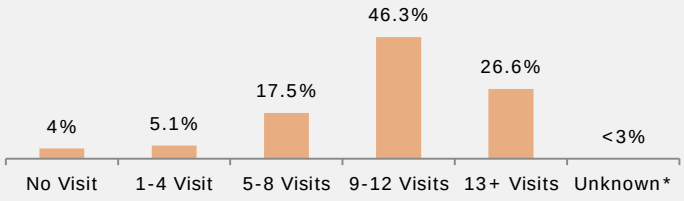
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	57	65	51	47
WIC Enrolled/Participants Children 0-4	86	64	67	56

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

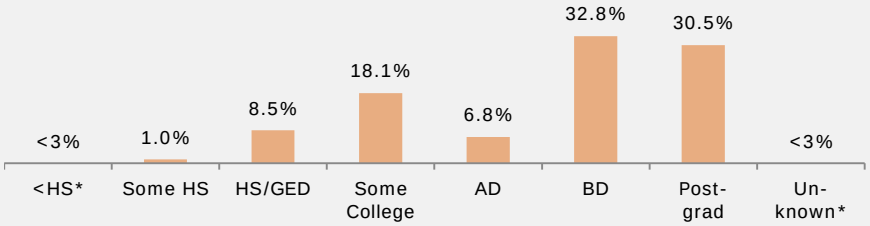
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers*	<6	<3.0%
Low Birth Weight	14	7.9%
High School Dropout Rate		0.4%

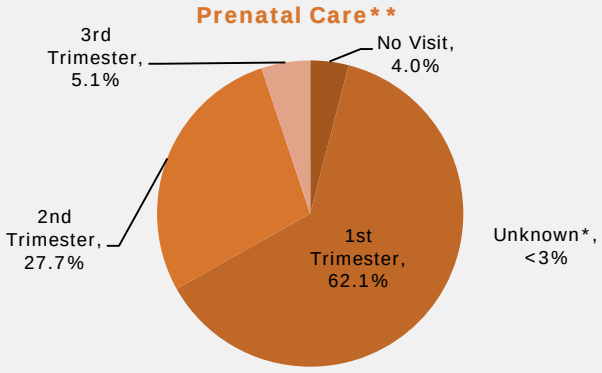
Prenatal Visits



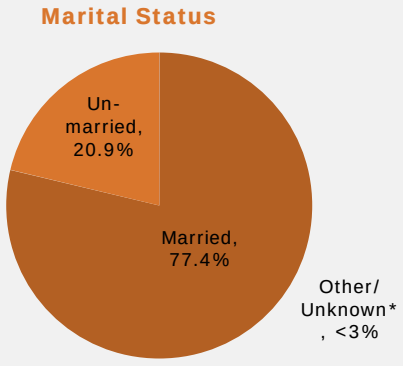
Mother's Education



Prenatal Care**

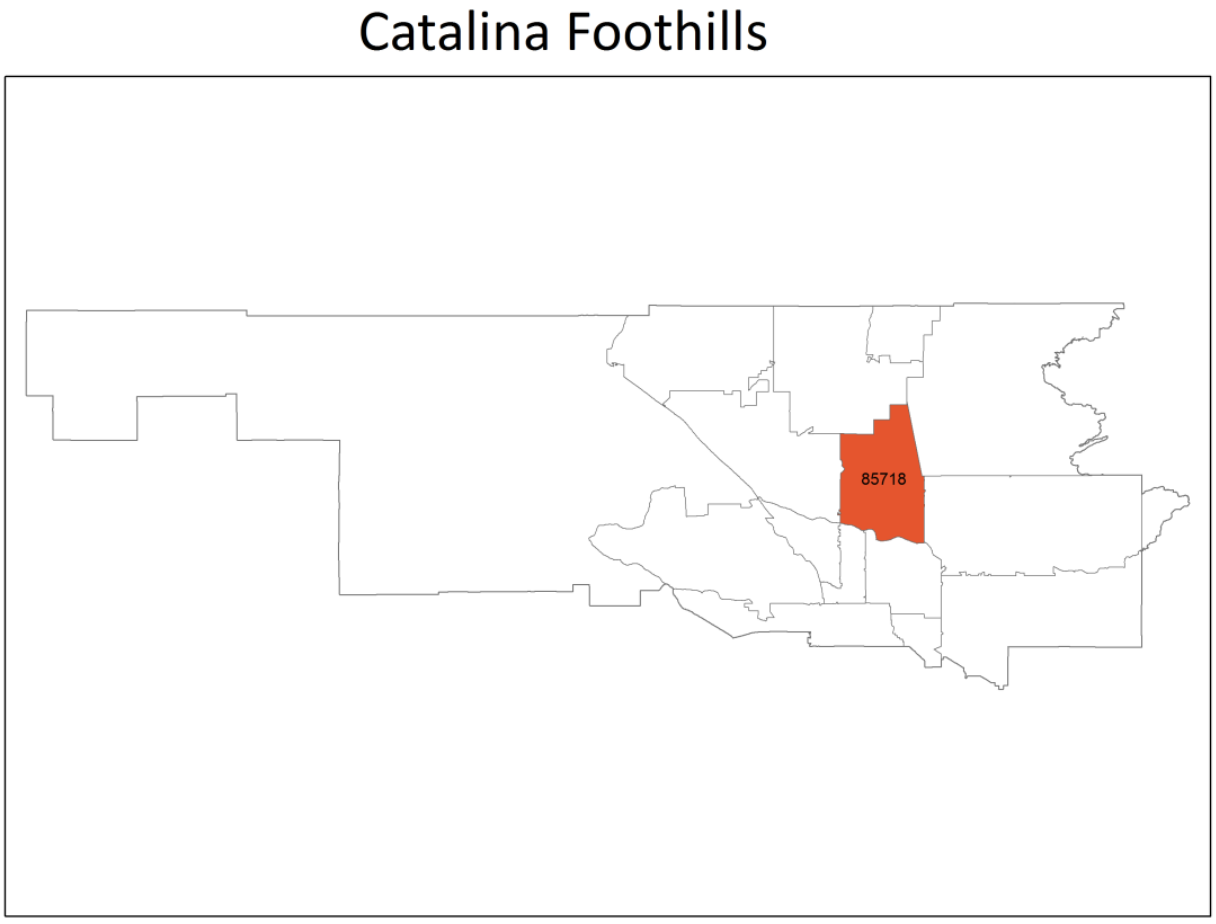


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Catalina Foothills Map



Catalina Oracle Junction

	%	N
85739	100%	17,848

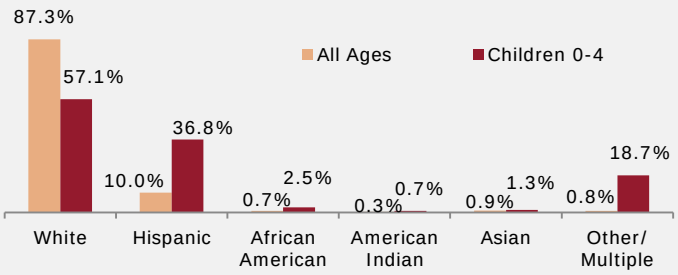
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	17,848	
Population below Poverty*		1,289** (7.5%)
Children 0-5	661	
Children 0-5 below Poverty*		99 (15.5%)**
Population Change Children 0-4 for 2010-2014***	-3.5%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



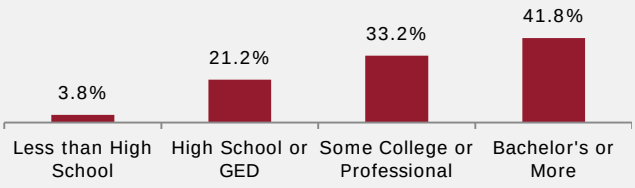
U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

Families	YEAR
Total Number of Families	8,210
Families with Children 0-5	486 (5.9%)
Single Parent Families with Children 0-5	122 (25.1%)
Single Parent Families with Children 0-5 (Mother only)	86 (17.7%)

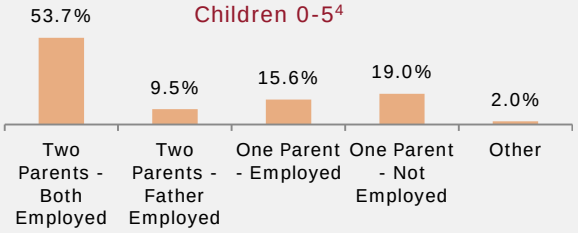
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	108	16.3%
Children 3-4 Enrolled in Pre-K[2]	187	62.8%
Children 0-5 without Health Insurance[3]	225	32.6%

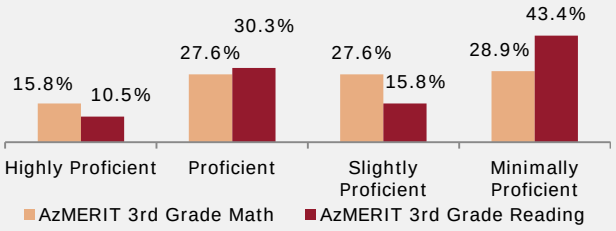
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	3	3	3	165
ADHS Certified Group Homes	1	0	0	0
DES Certified Homes	1	1	1	4
Listed Homes (Unregulated)	0	0	0	0
Total	5	4	4	169
Subsets: Head Start	1	1	1	59
Accredited	0	0	0	0
Quality First	-	-	2	106
DES Child Care Subsidy Eligibility-Children 0-5	-	-	55	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	42	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	100%
3+ doses Polio	100%
2+ doses MMR	100%
3+ doses Hepatitis B	100%
2+ doses Varicella	100%
1 dose Varicella+ History	0%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening*	<10
# Children Served*	<10

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.
*Data supressed; Number of clients between 1 and 9

Arizona Early Intervention Program Data	2015
# Children Referred for Screening*	<19
# Children Served*	<19

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.
*Data Supressed: To get the total count of children referred and served, we had to sum up totals for children ages 0-24 months and children ages 25-35 months. For one or both age groups, the data were supressed because the number of children is between 1 and 9.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	15
TANF Children 0-5 Recipients	16
Food Stamp Recipients – Families with Children 0-5	136
Food Stamp Recipients – Children 0-5	176

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

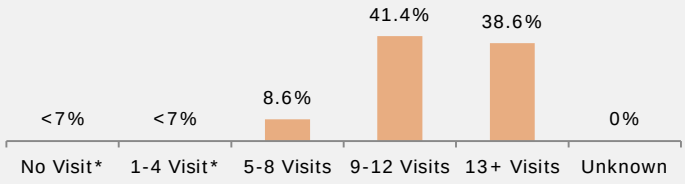
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	51	56	63	60
WIC Enrolled/Participants Children 0-4	121	100	98	93

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

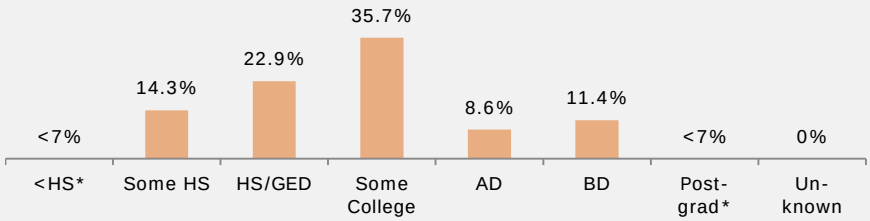
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers*	<6	<7.0%
Low Birth Weight*	<6	<7.0%
High School Dropout Rate		0.9%

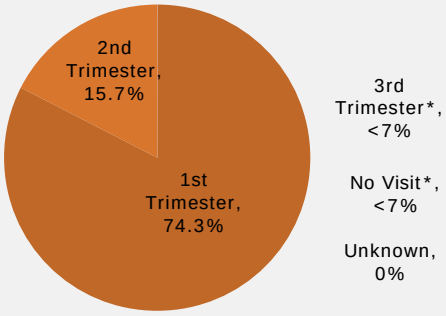
Prenatal Visits



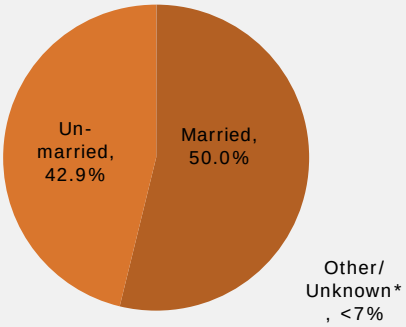
Mother's Education



Prenatal Care**

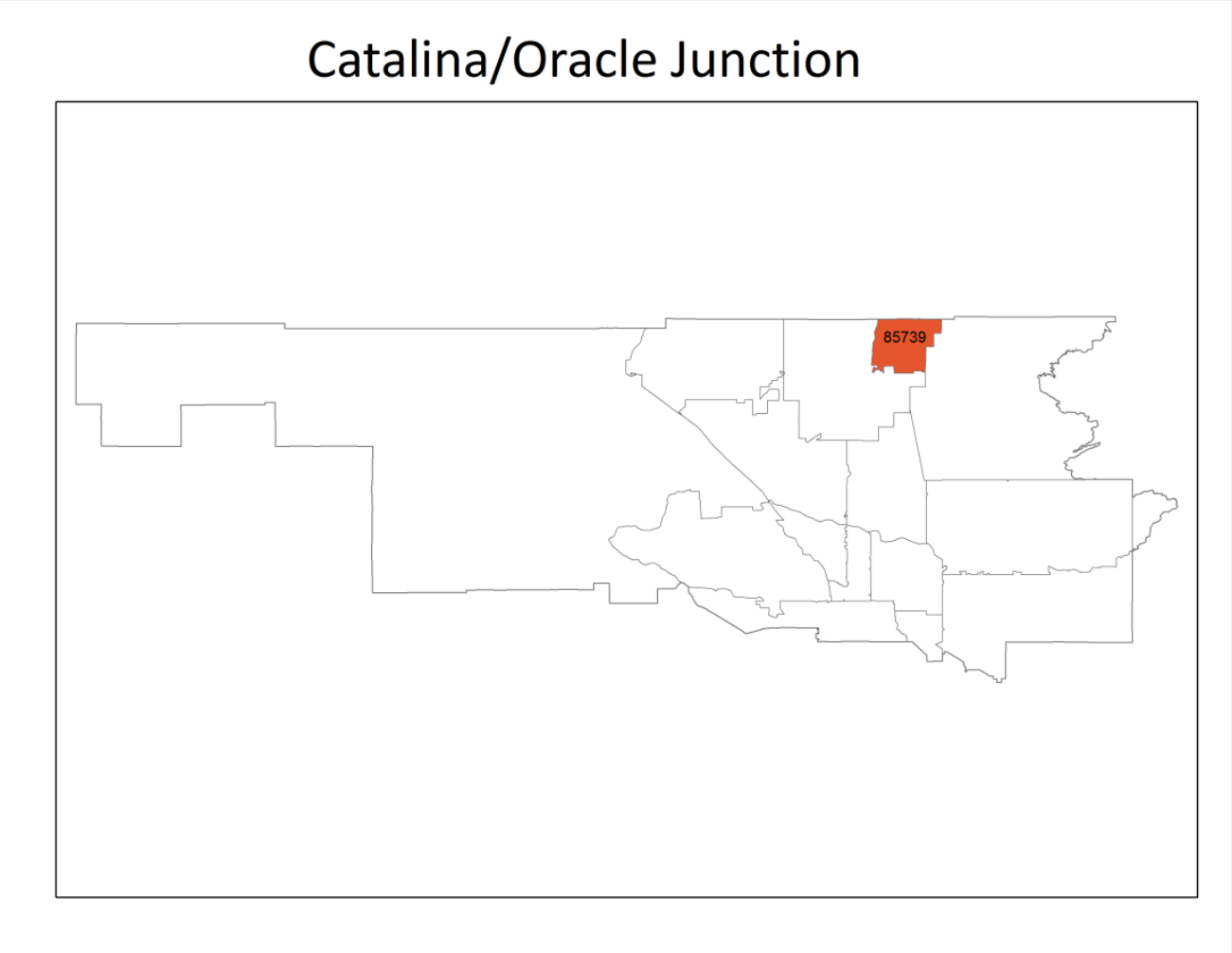


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
*Data supressed:Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Catalina / Oracle Junction Map



Central East

	%	N
85716	30.8%	32,853
85712	30.6%	32,666
85711	38.6%	41,251

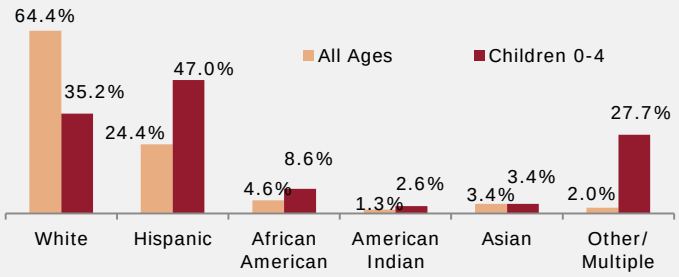
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	106,770	
Population below Poverty*		28,671** (27.3%)
Children 0-5	8,166	
Children 0-5 below Poverty*		3,234 (42.3%)**
Population Change Children 0-4 for 2010-2014***	0.0%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

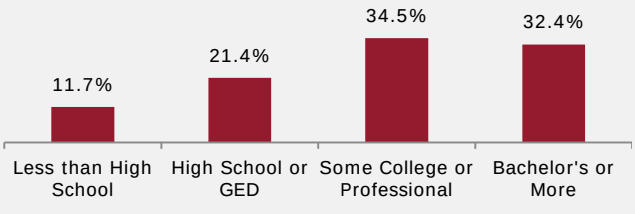
Families

Families	YEAR
Total Number of Families	49,205
Families with Children 0-5	5,988 (12.2%)
Single Parent Families with Children 0-5	2,868 (47.9%)
Single Parent Families with Children 0-5 (Mother only)	2,065 (34.5%)

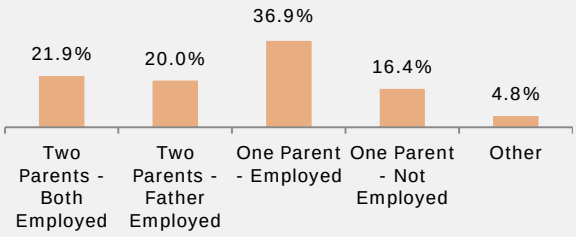
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	757	9.3%
Children 3-4 Enrolled in Pre-K[2]	1,042	38.3%
Children 0-5 without Health Insurance[3]	684	8.8%

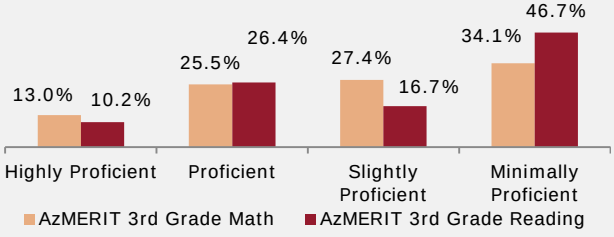
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	58	57	59	5,504
ADHS Certified Group Homes	8	10	10	100
DES Certified Homes	15	13	17	65
Listed Homes (Unregulated)	2	2	3	12
Total	83	82	89	5,681
Subsets: Head Start	2	2	2	158
Accredited	9	9	8	532
Quality First	-	-	22	1,585
DES Child Care Subsidy Eligibility-Children 0-5	-	-	1,457	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	1,292	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	90.9%
3+ doses Polio	89.6%
2+ doses MMR	90.7%
3+ doses Hepatitis B	91.5%
2+ doses Varicella	85.2%
1 dose Varicella+ History	7.3%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening	51
# Children Served	50

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	204
# Children Served	116

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	319
TANF Children 0-5 Recipients	404
Food Stamp Recipients – Families with Children 0-5	3,599
Food Stamp Recipients – Children 0-5	4,761

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

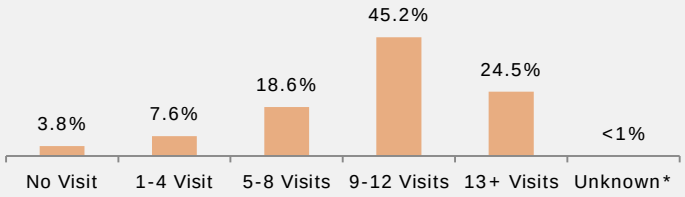
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	1,551	1,578	1,525	1,492
WIC Enrolled/Participants Children 0-4	2,469	2,308	2,098	2,072

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

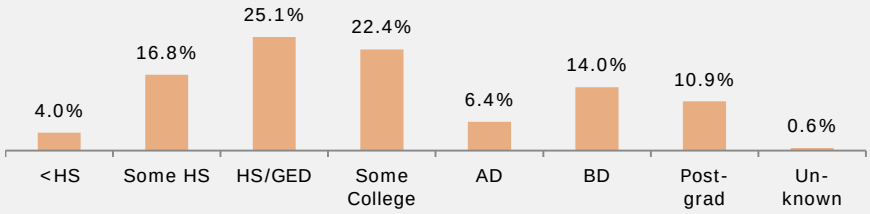
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers	99	7.3%
Low Birth Weight	92	6.8%
High School Dropout Rate		5.1%

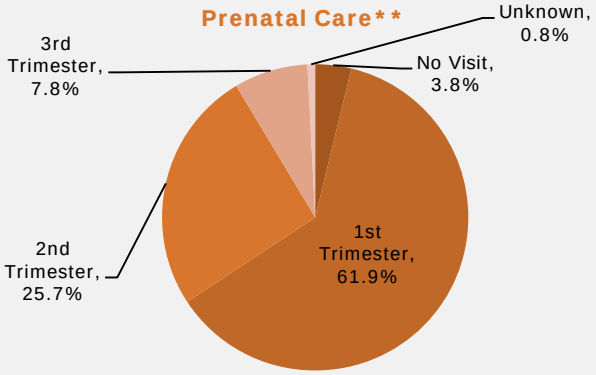
Prenatal Visits



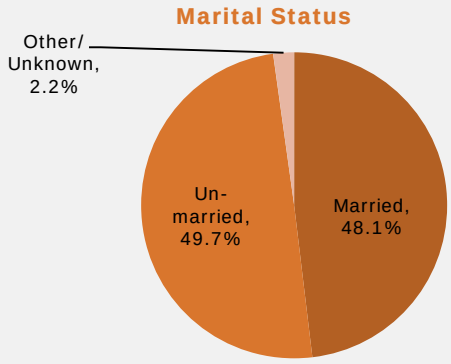
Mother's Education



Prenatal Care**

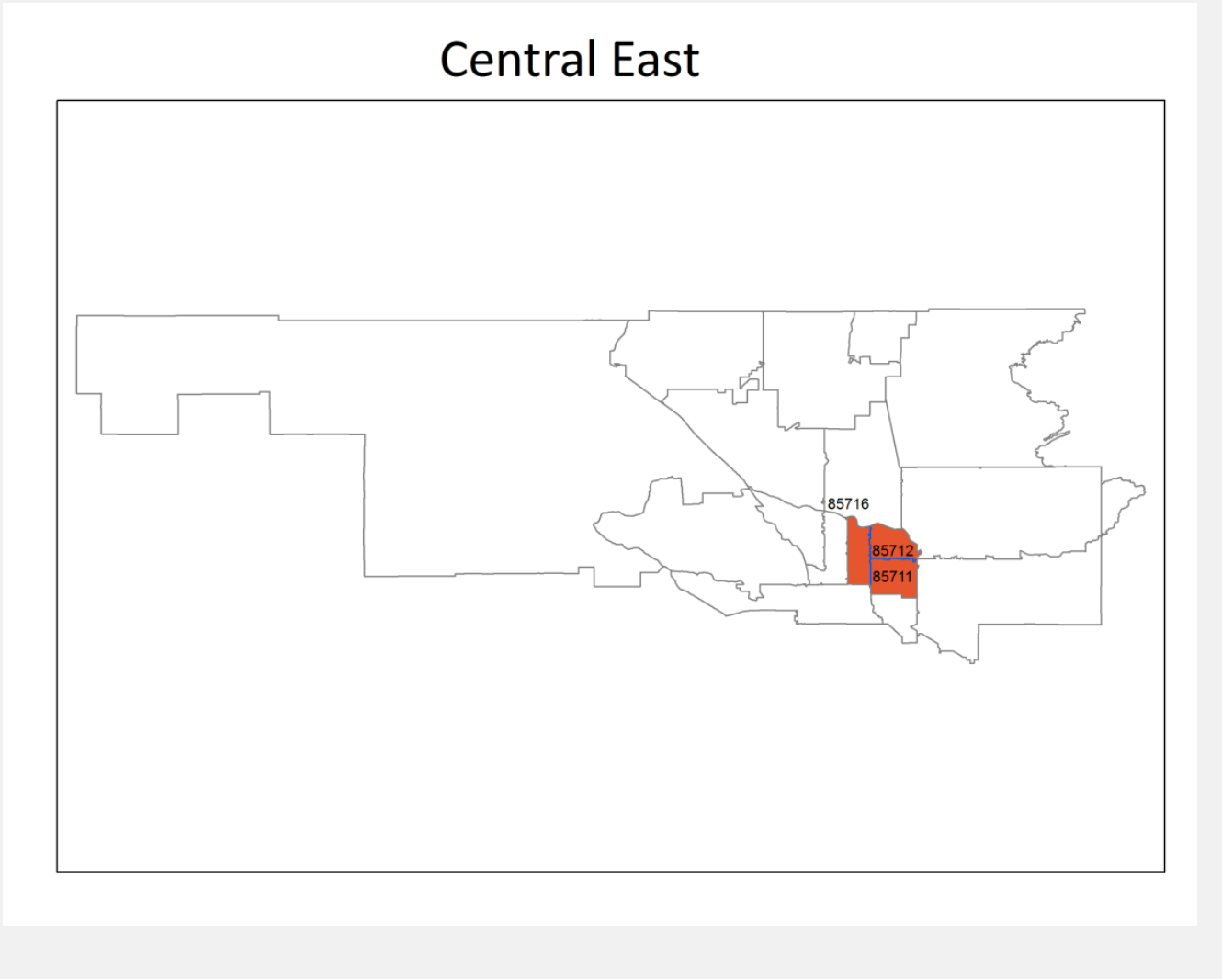


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Central East Map



Davis Monthan

	%	N
85707	18.1%	658
85708	81.9%	2,980

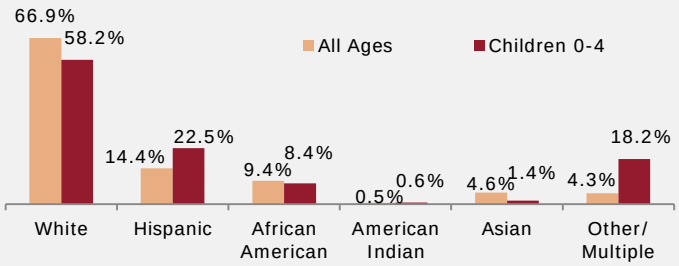
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	3,638	
Population below Poverty*		219** (5.2%)
Children 0-5	720	
Children 0-5 below Poverty*		44 (4.4%)**
Population Change Children 0-4 for 2010-2014***	27.3%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



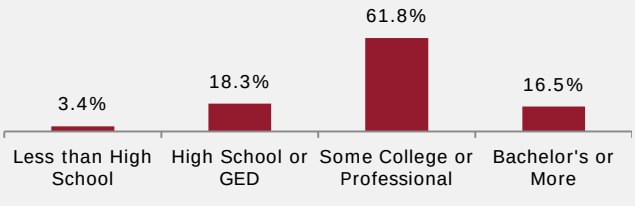
U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

Families	YEAR
Total Number of Families	897
Families with Children 0-5	492 (54.8%)
Single Parent Families with Children 0-5	83 (16.9%)
Single Parent Families with Children 0-5 (Mother only)	67 (13.6%)

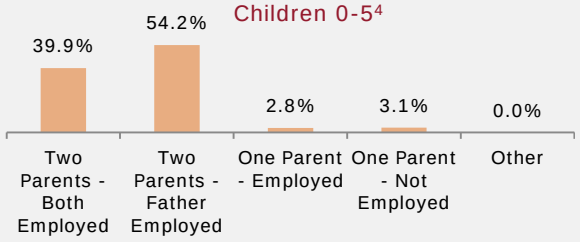
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	2	0.3%
Children 3-4 Enrolled in Pre-K[2]	192	75.3%
Children 0-5 without Health Insurance[3]	0	0.0%

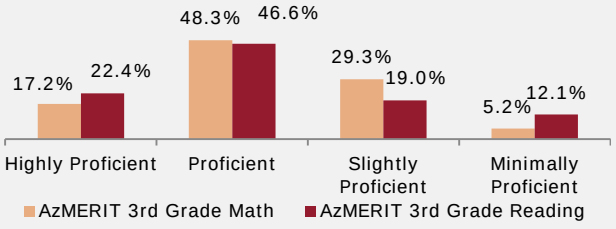
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	1	1	1	18
ADHS Certified Group Homes	0	0	0	0
DES Certified Homes	0	0	0	0
Listed Homes (Unregulated)	0	0	0	0
Total	1	1	1	18
Subsets: Head Start	0	0	0	0
Accredited	1	1	1	144
Quality First	-	-	1	18
DES Child Care Subsidy Eligibility-Children 0-5	-	-	14	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	13	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	99.0%
3+ doses Polio	99.0%
2+ doses MMR	99.0%
3+ doses Hepatitis B	99.0%
2+ doses Varicella	68.6%
1 dose Varicella+ History	31.4%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening*	<10
# Children Served*	<10

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.
*Data supressed; Number of clients between 1 and 9

Arizona Early Intervention Program Data	2015
# Children Referred for Screening*	<37
# Children Served*	<24

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.
*Data Supressed: To get the total count of children referred and served, we had to sum up totals for children ages 0-24 months and children ages 25-35 months. For one or both age groups, the data were supressed because the number of children is between 1 and 9.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5*	<10
TANF Children 0-5 Recipients*	<10
Food Stamp Recipients – Families with Children 0-5*	<10
Food Stamp Recipients – Children 0-5	10

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).
*Data supressed; Number of clients between 1 and 9

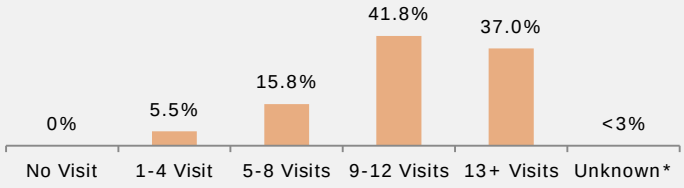
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	189	176	142	116
WIC Enrolled/Participants Children 0-4	303	254	240	192

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

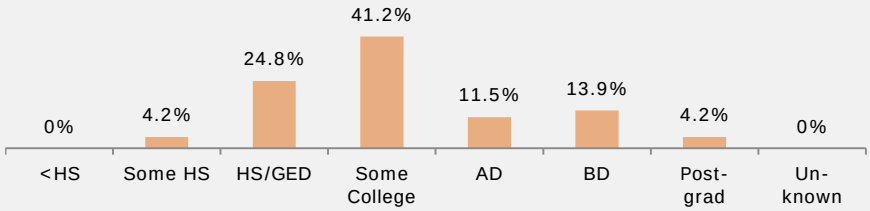
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers*	<6	<3.0%
Low Birth Weight	7	4.2%
High School Dropout Rate		0.0%

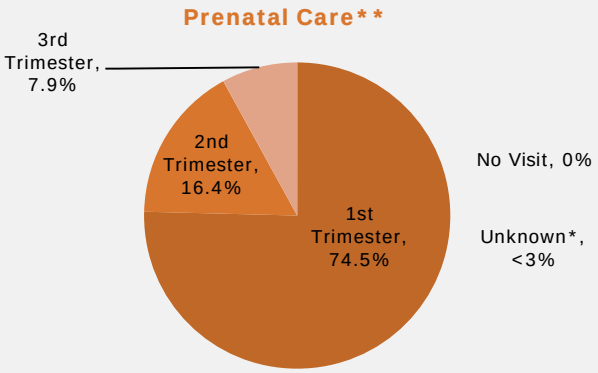
Prenatal Visits



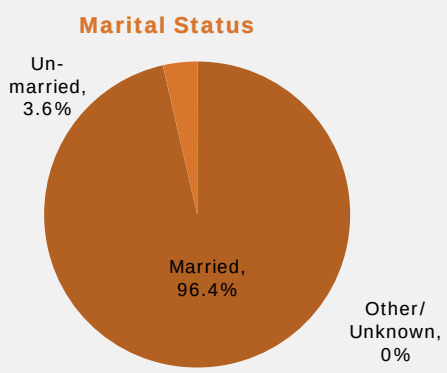
Mother's Education



Prenatal Care**

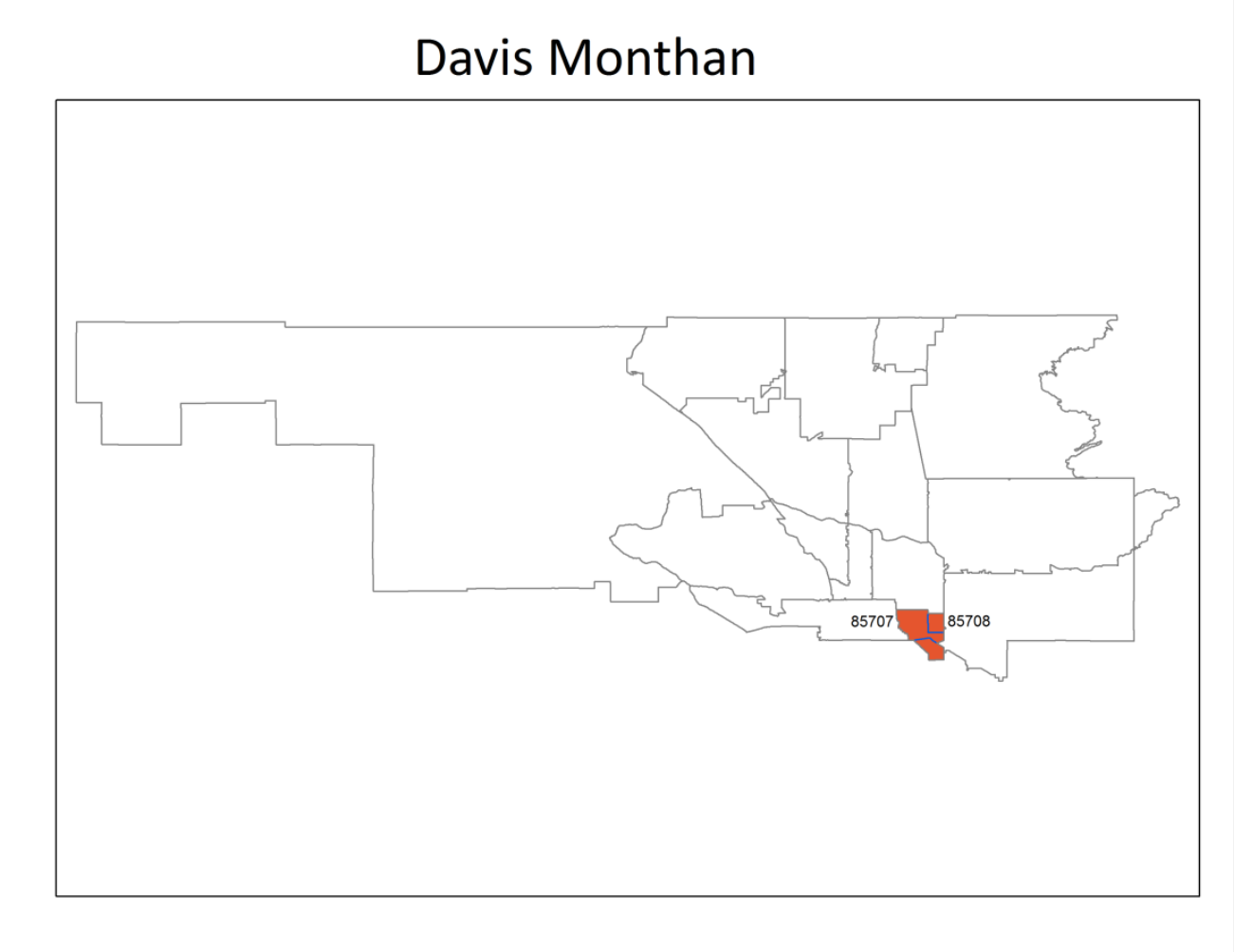


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Davis Monthan Map



Downtown University of Arizona

	%	N
85701	10.2%	4,983
85724	0.0%	0
85719	89.8%	43,989

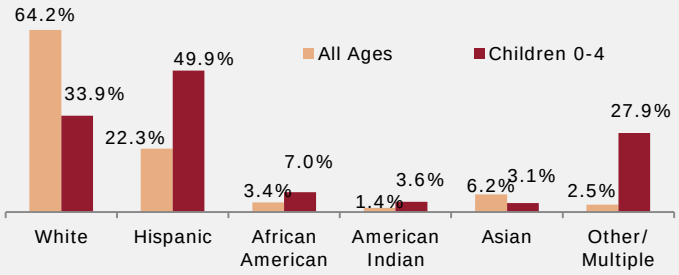
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	48,972	
Population below Poverty*		15,062** (36.7%)
Children 0-5	2,406	
Children 0-5 below Poverty*		508 (32.4%)**
Population Change Children 0-4 for 2010-2014***	0.4%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

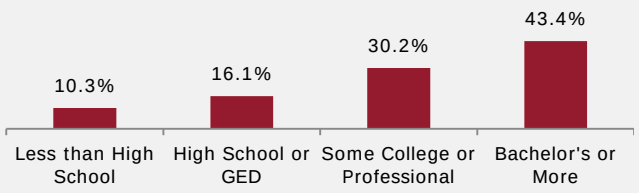
Families

Families	YEAR
Total Number of Families	20,425
Families with Children 0-5	1,808 (8.9%)
Single Parent Families with Children 0-5	896 (49.6%)
Single Parent Families with Children 0-5 (Mother only)	657 (36.3%)

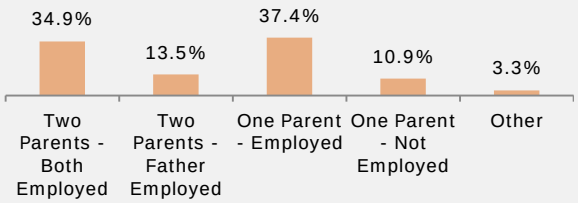
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	233	9.7%
Children 3-4 Enrolled in Pre-K[2]	255	47.2%
Children 0-5 without Health Insurance[3]	205	13.0%

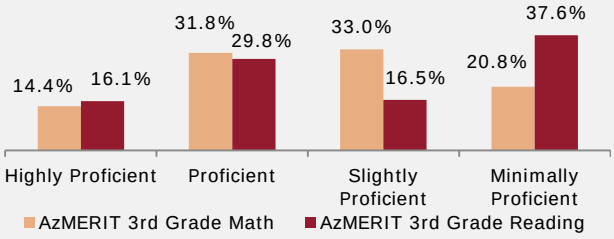
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	28	28	29	2,491
ADHS Certified Group Homes	0	1	1	10
DES Certified Homes	3	2	4	15
Listed Homes (Unregulated)	1	3	2	8
Total	32	34	36	2,524
Subsets: Head Start	1	1	1	90
Accredited	5	5	5	453
Quality First	-	-	10	1,174
DES Child Care Subsidy Eligibility-Children 0-5	-	-	416	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	371	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	88.0%
3+ doses Polio	88.0%
2+ doses MMR	88.5%
3+ doses Hepatitis B	87.5%
2+ doses Varicella	83.9%
1 dose Varicella+ History	4.7%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening	15
# Children Served	16

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	64
# Children Served*	<32

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

*Data Supressed: To get the total count of children referred and served, we had to sum up totals for children ages 0-24 months and children ages 25-35 months. For one or both age groups, the data were supressed because the number of children is between 1 and 9.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	76
TANF Children 0-5 Recipients	96
Food Stamp Recipients – Families with Children 0-5	945
Food Stamp Recipients – Children 0-5	1,236

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

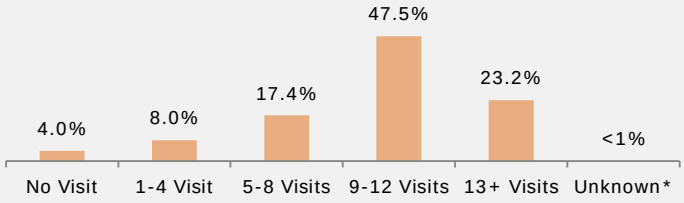
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	463	429	410	414
WIC Enrolled/Participants Children 0-4	711	651	587	552

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

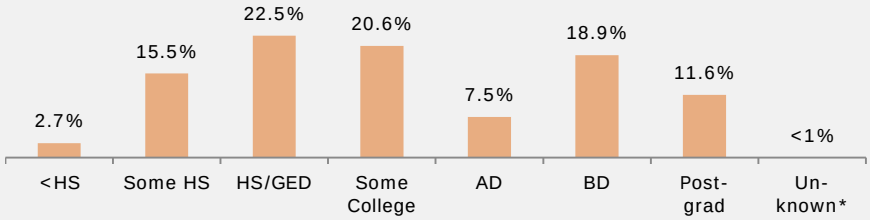
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers	36	8.7%
Low Birth Weight	29	7.0%
High School Dropout Rate		4.9%

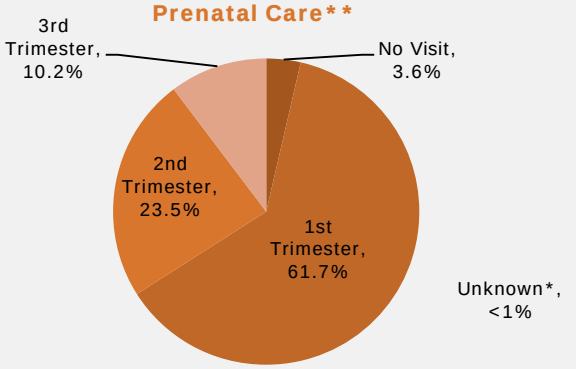
Prenatal Visits



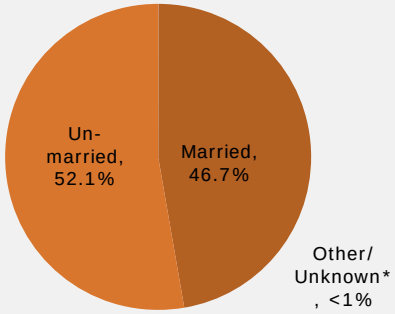
Mother's Education



Prenatal Care**

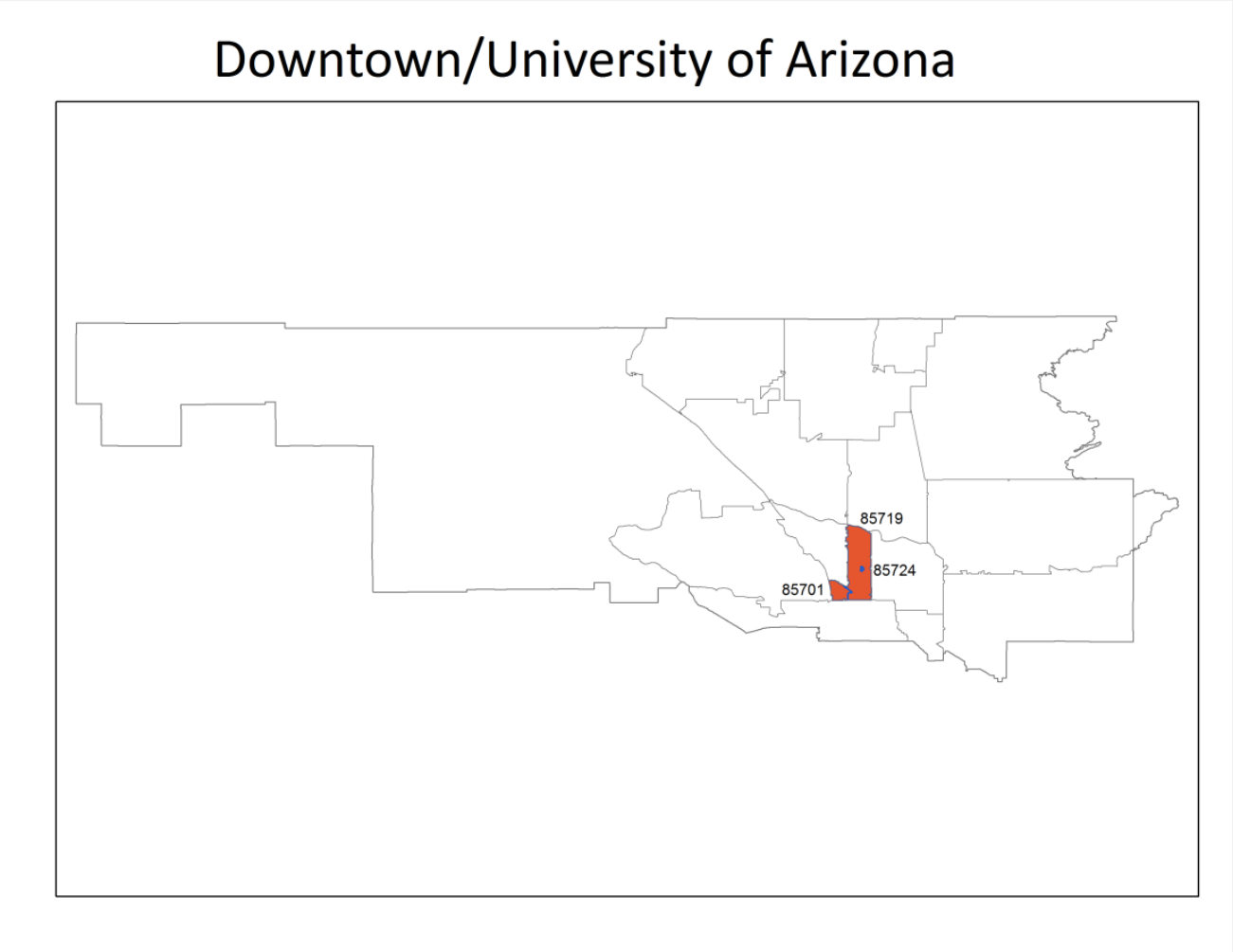


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Downtown / University of Arizona Map



Mount Lemmon

	%	N
85619	100%	50

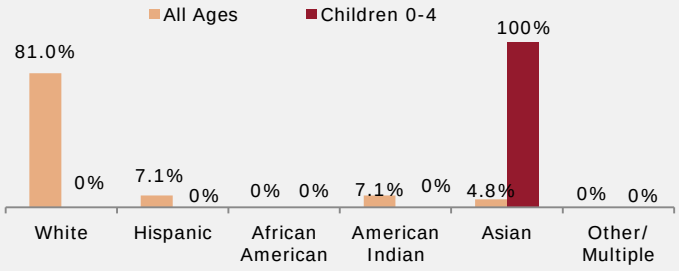
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	50	
Population below Poverty*		0** (0.0%)
Children 0-5	3	
Children 0-5 below Poverty*		0 (0.0%)**
Population Change Children 0-4 for 2010-2014***	182.0%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

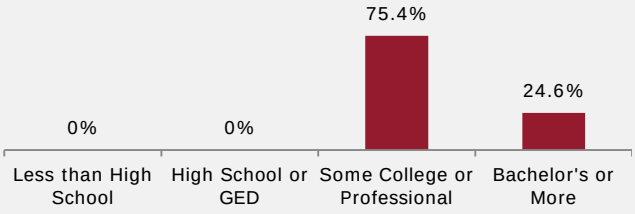
Families

Families	YEAR
Total Number of Families	27
Families with Children 0-5	2 (7.4%)
Single Parent Families with Children 0-5	0 (0.0%)
Single Parent Families with Children 0-5 (Mother only)	0 (0.0%)

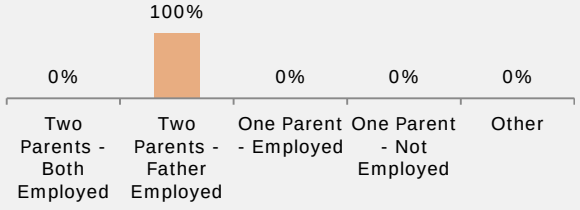
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	-	-
Children 3-4 Enrolled in Pre-K[2]	-	-
Children 0-5 without Health Insurance[3]	-	-

Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency

No Data Present

1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	0	0	0	0
ADHS Certified Group Homes	0	0	0	0
DES Certified Homes	0	0	0	0
Listed Homes (Unregulated)	0	0	0	0
Total	0	0	0	0
Subsets: Head Start	0	0	0	0
Accredited	0	0	0	0
Quality First	0	0	0	0
DES Child Care Subsidy Eligibility-Children 0-5	-	-	0	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	0	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	-
3+ doses Polio	-
2+ doses MMR	-
3+ doses Hepatitis B	-
2+ doses Varicella	-
1 dose Varicella+ History	-

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening	0
# Children Served	0

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	0
# Children Served	0

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	0
TANF Children 0-5 Recipients	0
Food Stamp Recipients – Families with Children 0-5	0
Food Stamp Recipients – Children 0-5	0

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	-	-	-	-
WIC Enrolled/Participants Children 0-4	-	-	-	-

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

MATERNAL HEALTH 2014

Maternal Health	Number	Percent	Prenatal Visits
Teen Mothers	-	-	No Data Available
Low Birth Weight	-	-	
High School Dropout Rate	-	-	

Mother's Education

No Data Available

Prenatal Care

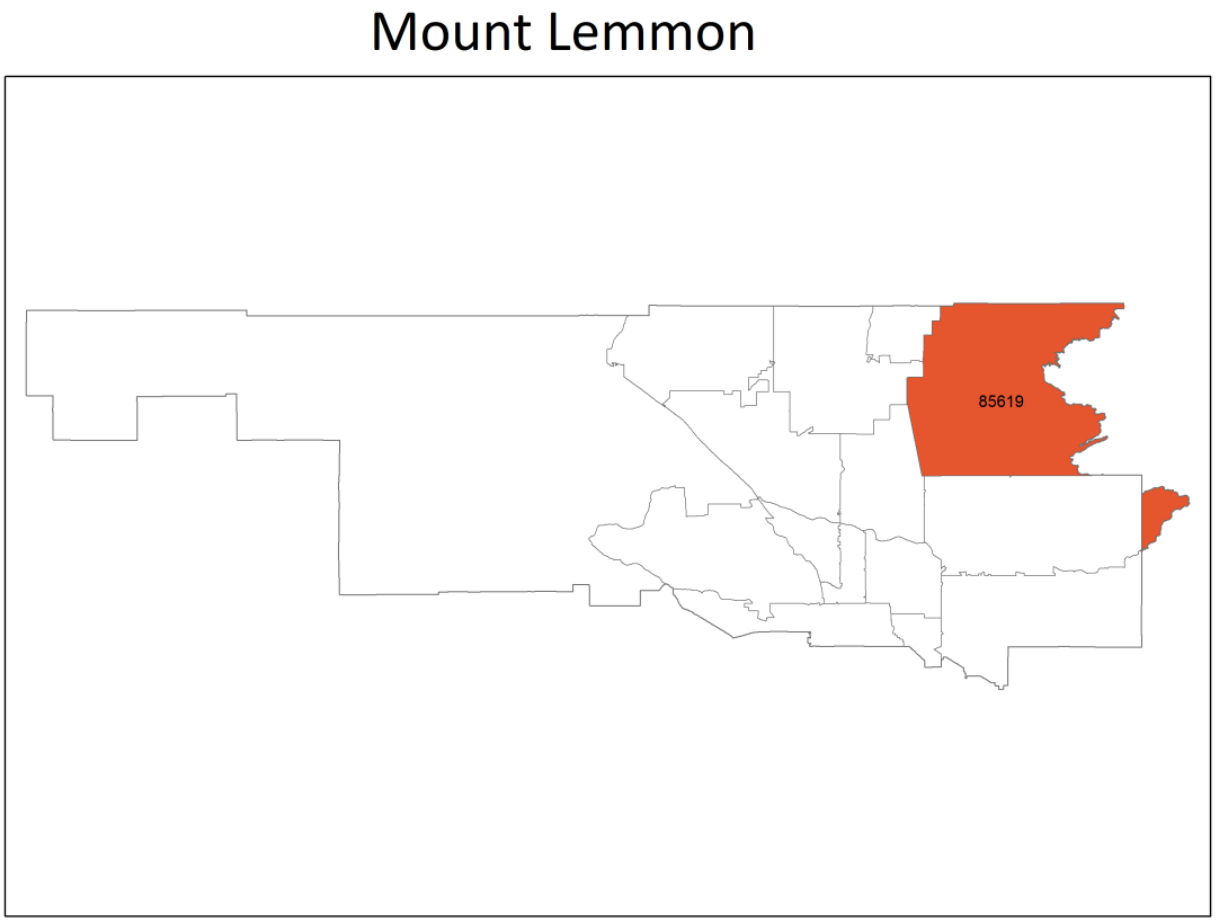
No Data Available

Marital Status

No Data Available

Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

Mount Lemmon Map



Oro Valley

	%	N
85755	42.2%	15,107
85737	57.8%	20,727

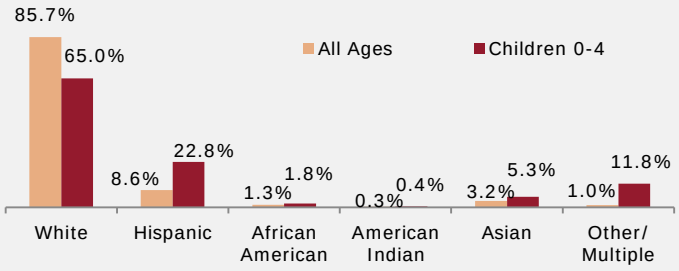
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	35,834	
Population below Poverty*		1,788** (4.8%)
Children 0-5	1,665	
Children 0-5 below Poverty*		205 (10.2%)**
Population Change Children 0-4 for 2010-2014***	4.4%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



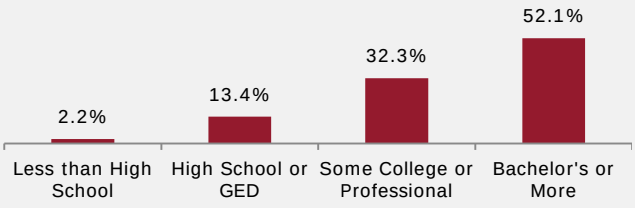
U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

Families	YEAR
Total Number of Families	15,224
Families with Children 0-5	1,200 (7.9%)
Single Parent Families with Children 0-5	177 (14.8%)
Single Parent Families with Children 0-5 (Mother only)	131 (10.9%)

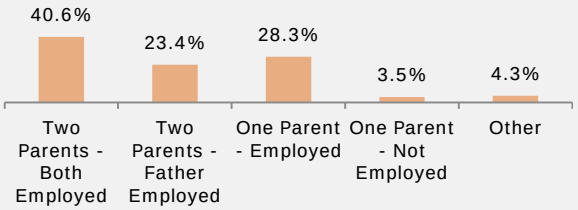
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	133	8.0%
Children 3-4 Enrolled in Pre-K[2]	393	49.5%
Children 0-5 without Health Insurance[3]	24	1.2%

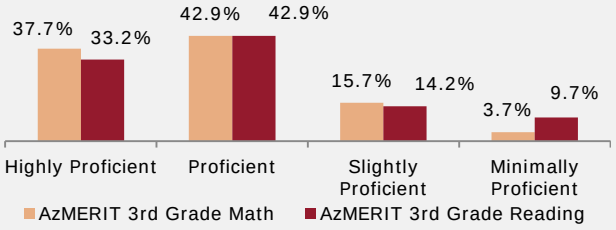
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	6	7	7	733
ADHS Certified Group Homes	0	0	0	0
DES Certified Homes	1	1	1	4
Listed Homes (Unregulated)	0	0	0	0
Total	7	8	8	737
Subsets: Head Start	0	0	0	0
Accredited	2	2	2	204
Quality First	-	-	2	214
DES Child Care Subsidy Eligibility-Children 0-5	-	-	63	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	57	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	90.0%
3+ doses Polio	89.7%
2+ doses MMR	90.0%
3+ doses Hepatitis B	90.0%
2+ doses Varicella	86.9%
1 dose Varicella+ History	3.8%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening*	<10
# Children Served*	<10

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.
*Data supressed; Number of clients between 1 and 9

Arizona Early Intervention Program Data	2015
# Children Referred for Screening*	<44
# Children Served	26

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.
*Data Supressed: To get the total count of children referred and served, we had to sum up totals for children ages 0-24 months and children ages 25-35 months. For one or both age groups, the data were supressed because the number of children is between 1 and 9.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5*	<10
TANF Children 0-5 Recipients	10
Food Stamp Recipients – Families with Children 0-5	120
Food Stamp Recipients – Children 0-5	160

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).
*Data supressed; Number of clients between 1 and 9

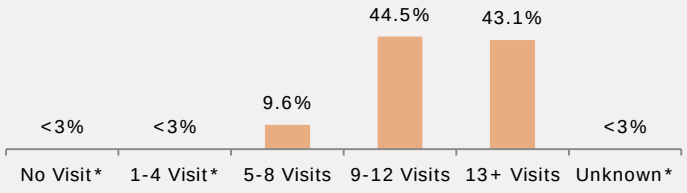
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	56	43	52	54
WIC Enrolled/Participants Children 0-4	88	83	81	63

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

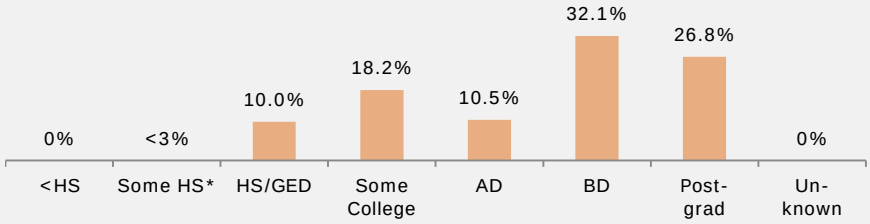
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers	6	2.9%
Low Birth Weight	11	5.3%
High School Dropout Rate		0.0%

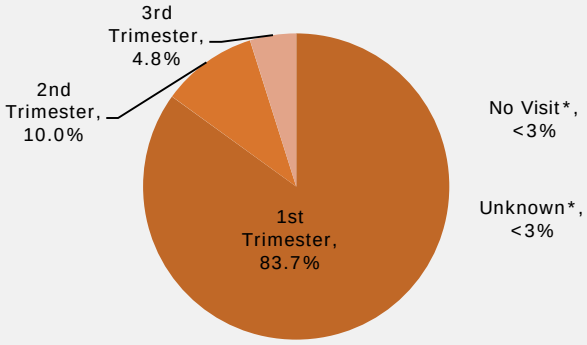
Prenatal Visits



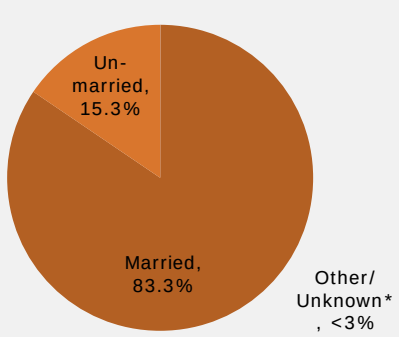
Mother's Education



Prenatal Care**

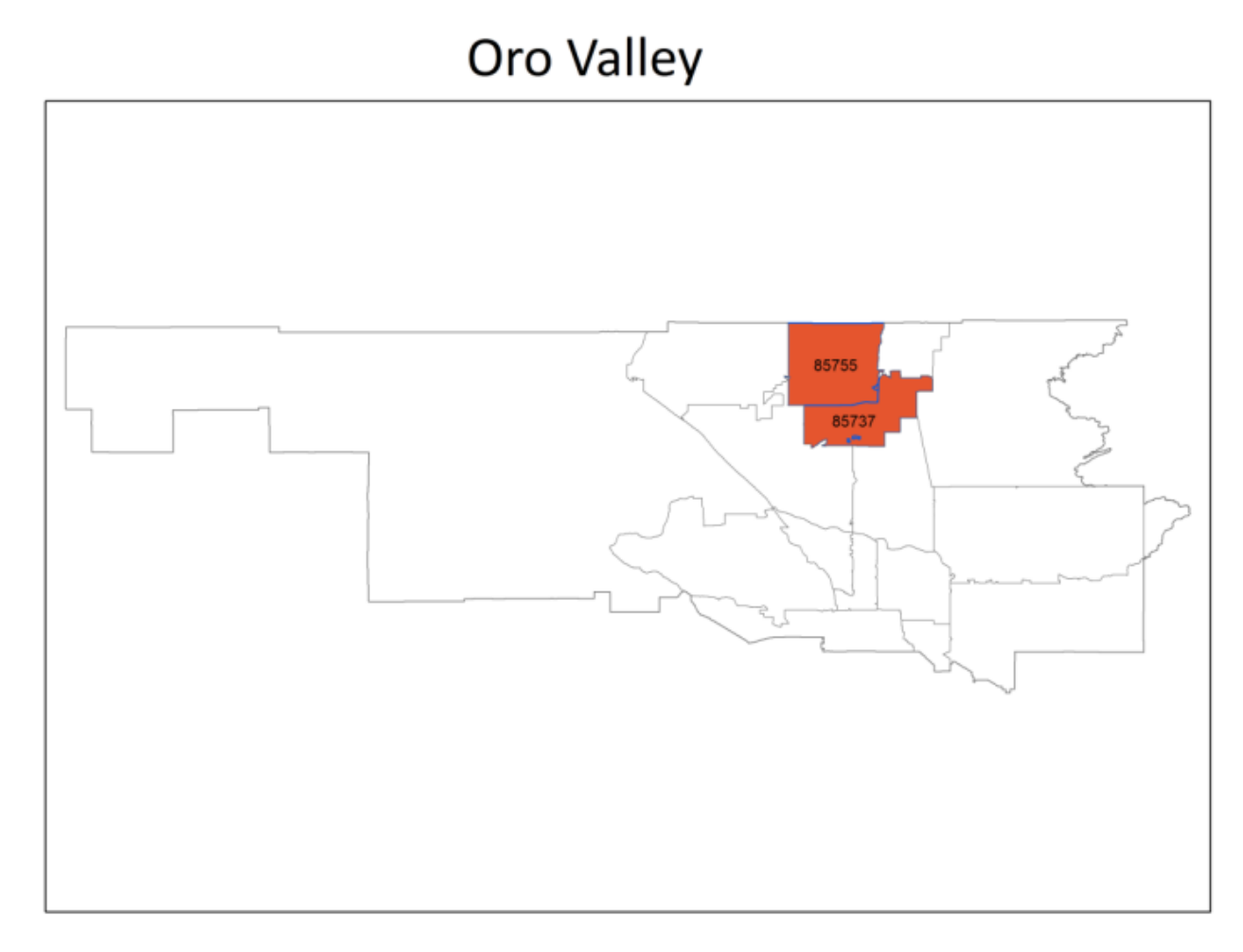


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Oro Valley Map



South Tucson

	%	N
85726	0.0%	0
85713	77.0%	50,151
85714	23.0%	15,009

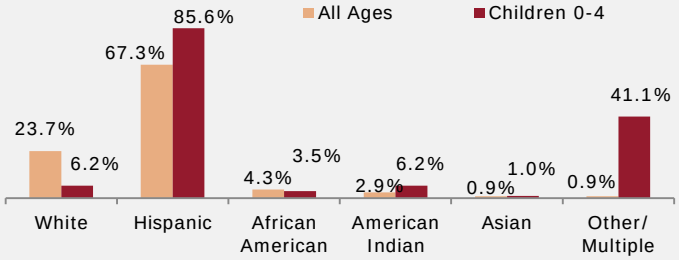
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	65,160	
Population below Poverty*		18,076** (30.0%)
Children 0-5	6,102	
Children 0-5 below Poverty*		2,217 (43.7%)**
Population Change Children 0-4 for 2010-2014***	-3.4%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



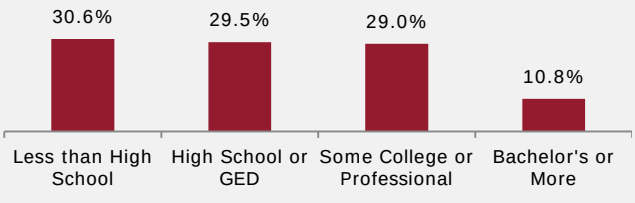
U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

Families	YEAR
Total Number of Families	21,518
Families with Children 0-5	4,283 (19.9%)
Single Parent Families with Children 0-5	2,124 (49.6%)
Single Parent Families with Children 0-5 (Mother only)	1,552 (36.2%)

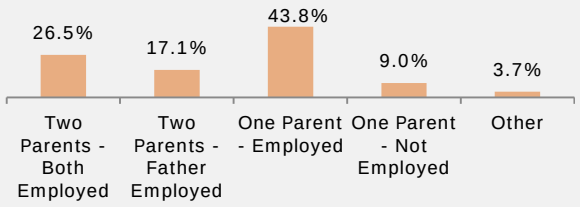
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	1,376	22.5%
Children 3-4 Enrolled in Pre-K[2]	551	31.6%
Children 0-5 without Health Insurance[3]	698	13.7%

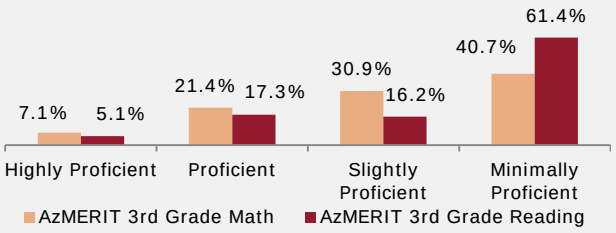
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	26	26	27	1,718
ADHS Certified Group Homes	14	15	12	120
DES Certified Homes	48	48	44	169
Listed Homes (Unregulated)	1	5	1	4
Total	89	94	84	2,011
Subsets: Head Start	3	3	3	192
Accredited	8	7	7	56
Quality First	-	-	15	668
DES Child Care Subsidy Eligibility-Children 0-5	-	-	943	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	854	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	98.1%
3+ doses Polio	98.3%
2+ doses MMR	98.5%
3+ doses Hepatitis B	98.3%
2+ doses Varicella	88.0%
1 dose Varicella+ History	10.6%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening	25
# Children Served	27

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	152
# Children Served	83

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	187
TANF Children 0-5 Recipients	231
Food Stamp Recipients – Families with Children 0-5	2,747
Food Stamp Recipients – Children 0-5	3,712

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

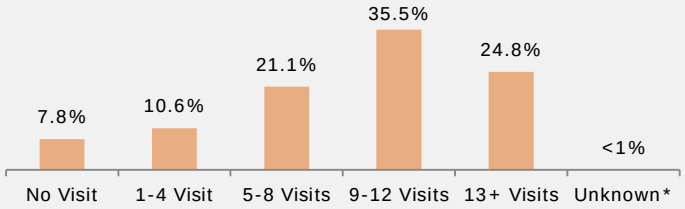
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	1,307	1,263	1,229	1,196
WIC Enrolled/Participants Children 0-4	2,413	2,182	1,947	1,794

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

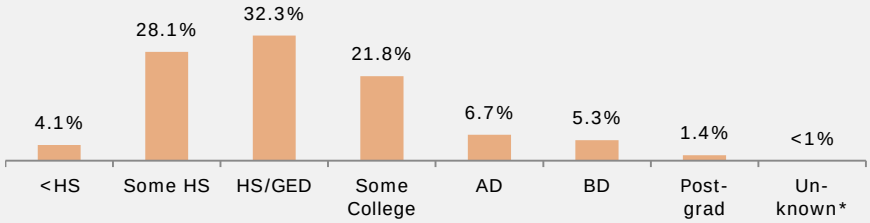
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers	122	13.9%
Low Birth Weight	60	6.8%
High School Dropout Rate		8.1%

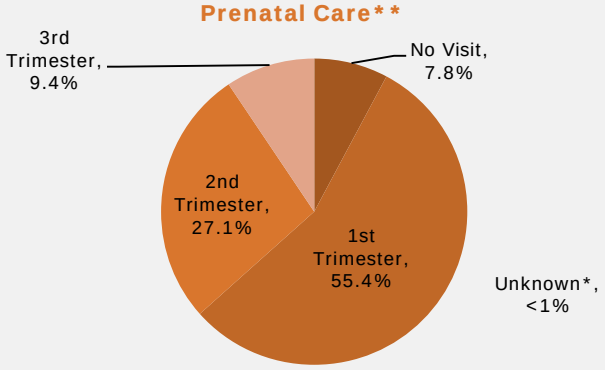
Prenatal Visits



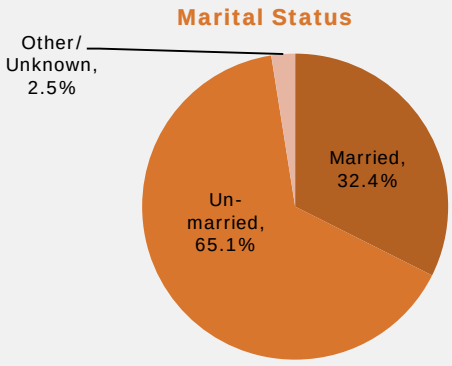
Mother's Education



Prenatal Care**

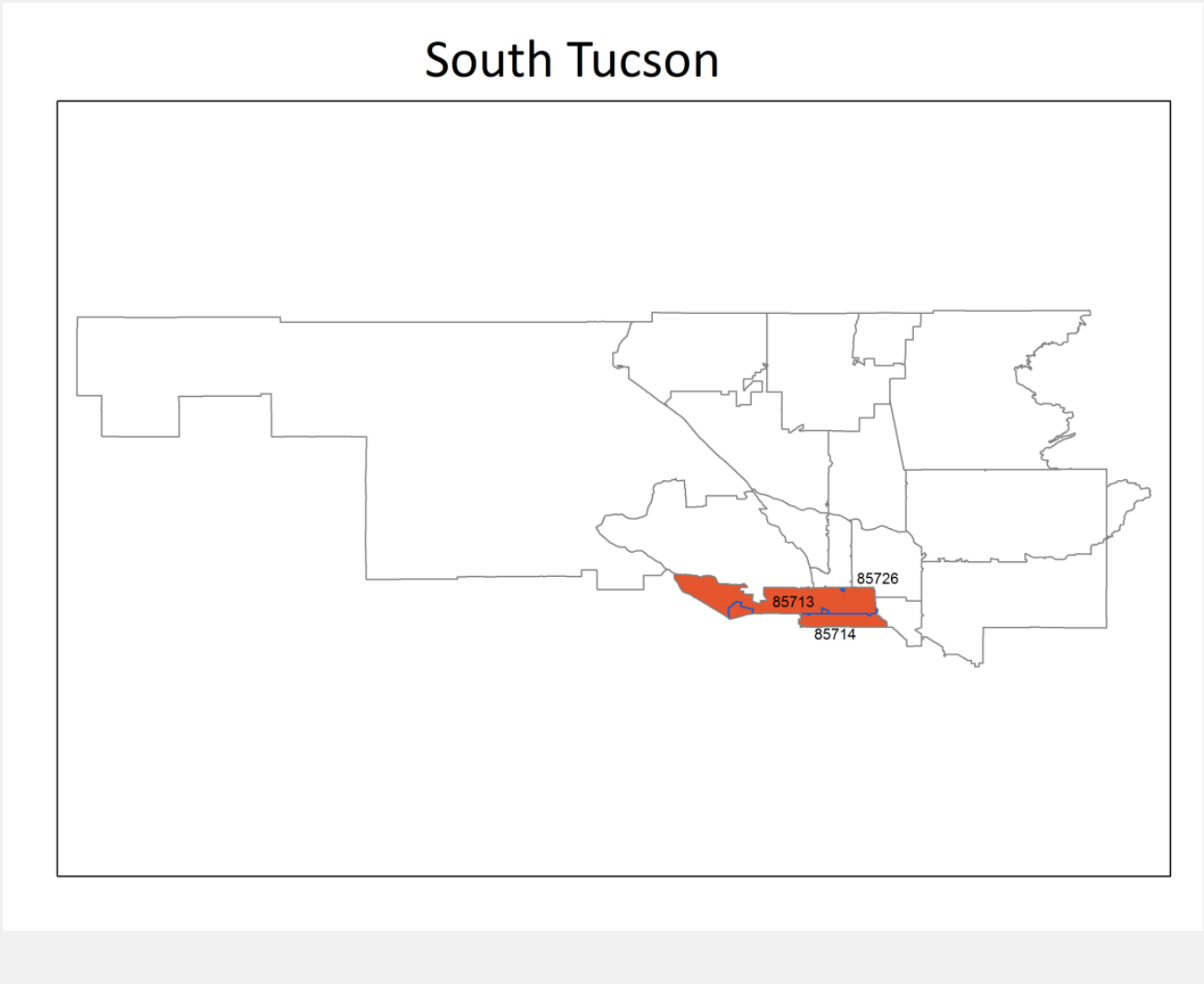


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

South Tucson Map



Southeast

	%	N
85710	49.1%	54,439
85748	16.3%	18,087
85730	34.6%	38,323

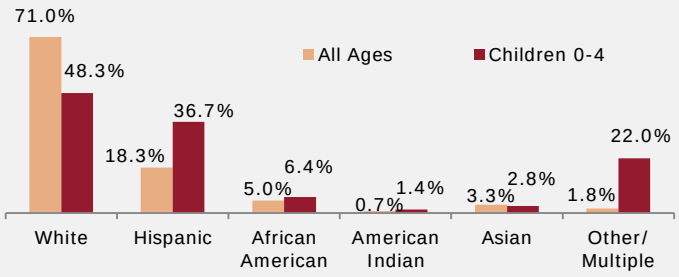
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	110,849	
Population below Poverty*		16,812** (15.0%)
Children 0-5	7,736	
Children 0-5 below Poverty*		1,735 (24.3%)**
Population Change Children 0-4 for 2010-2014***	1.9%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



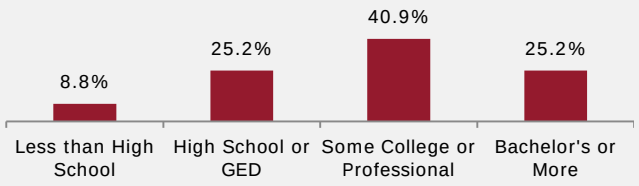
U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

Families	YEAR
Total Number of Families	47,518
Families with Children 0-5	5,743 (12.1%)
Single Parent Families with Children 0-5	2,279 (39.7%)
Single Parent Families with Children 0-5 (Mother only)	1,594 (27.8%)

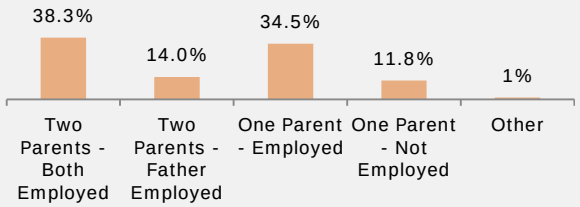
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	960	12.4%
Children 3-4 Enrolled in Pre-K[2]	652	31.0%
Children 0-5 without Health Insurance[3]	754	10.5%

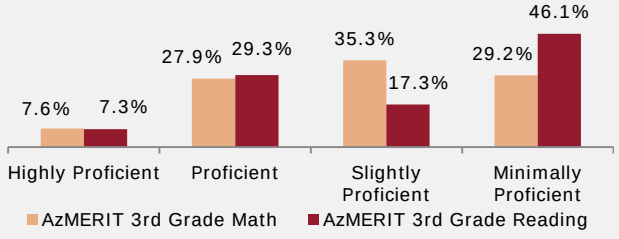
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	37	37	36	4,324
ADHS Certified Group Homes	8	6	7	70
DES Certified Homes	16	18	20	77
Listed Homes (Unregulated)	7	7	3	12
Total	68	68	66	4,483
Subsets: Head Start	1	1	1	60
Accredited	6	6	6	228
Quality First	-	-	14	1,385
DES Child Care Subsidy Eligibility-Children 0-5	-	-	1,306	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	1,212	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	90.1%
3+ doses Polio	90.2%
2+ doses MMR	90.5%
3+ doses Hepatitis B	90.5%
2+ doses Varicella	84.0%
1 dose Varicella+ History	7.6%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening	56
# Children Served	68

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	235
# Children Served	131

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	199
TANF Children 0-5 Recipients	262
Food Stamp Recipients – Families with Children 0-5	2,651
Food Stamp Recipients – Children 0-5	3,534

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

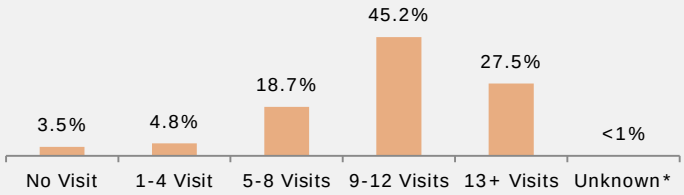
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	1,279	1,283	1,202	1,104
WIC Enrolled/Participants Children 0-4	1,919	1,787	1,689	1,585

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

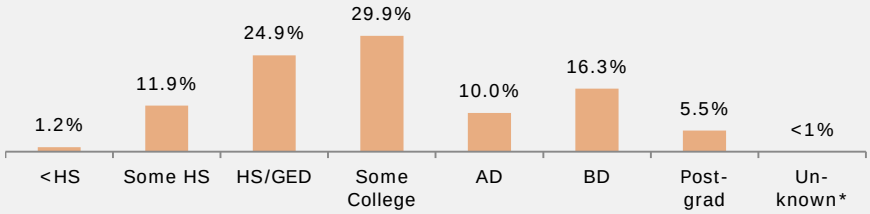
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers	91	7.1%
Low Birth Weight	105	8.2%
High School Dropout Rate		4.8%

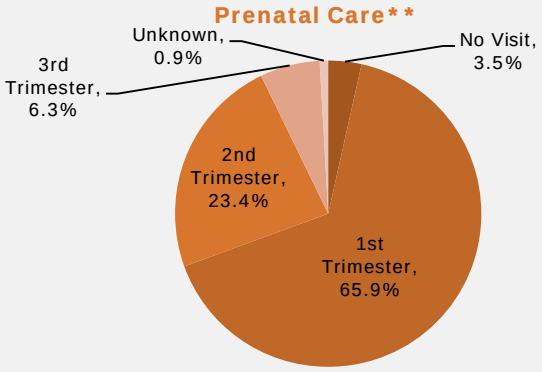
Prenatal Visits



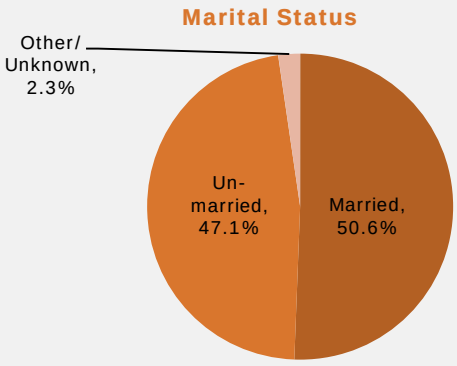
Mother's Education



Prenatal Care**

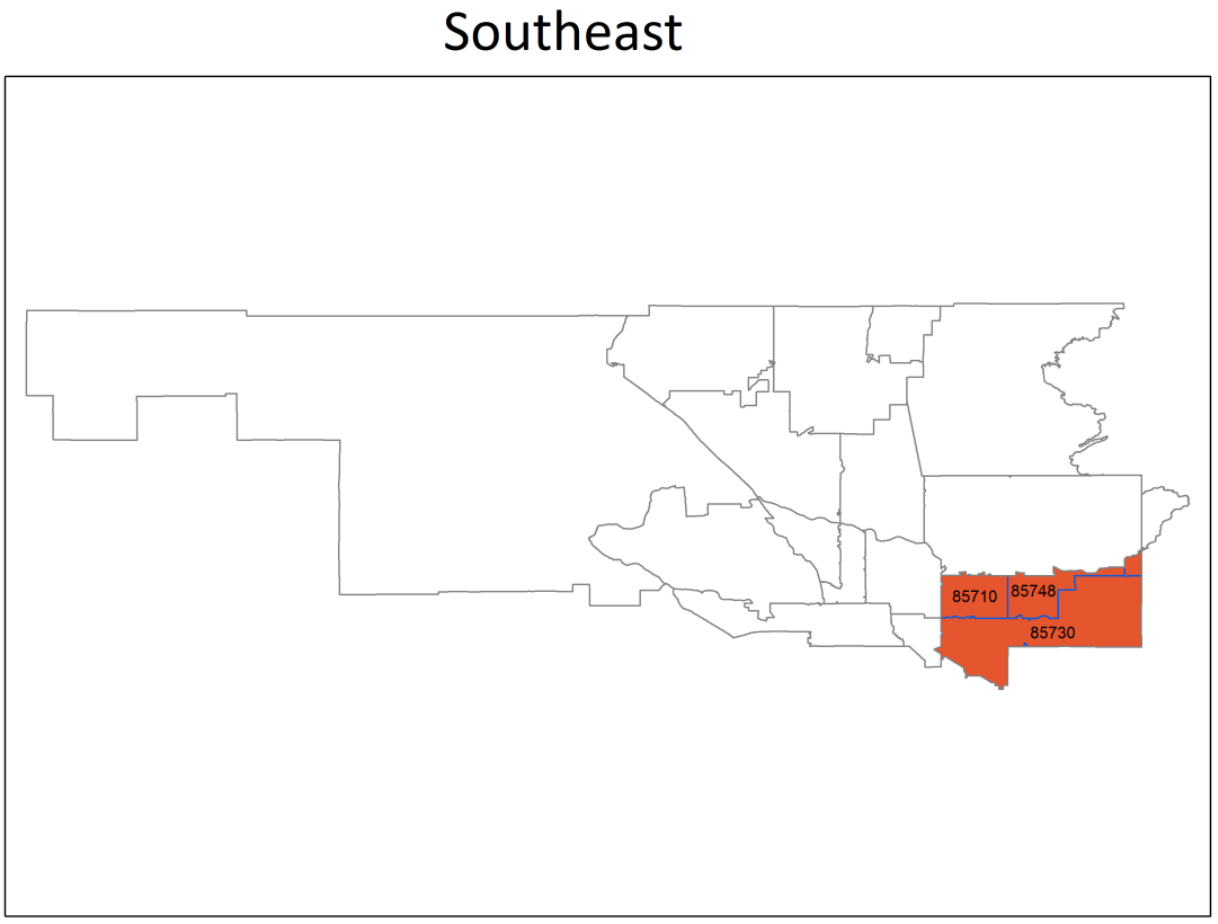


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Southeast Map



Flowing Wells

	%	N
85705	100%	57,521

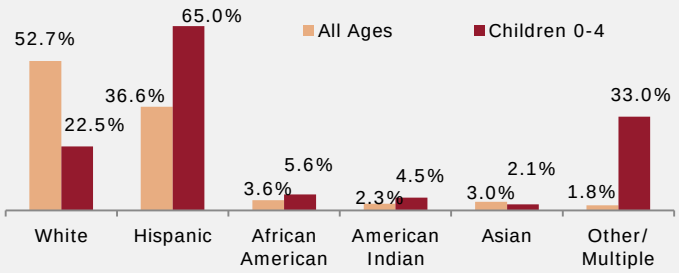
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	57,521	
Population below Poverty*		19,512** (35.9%)
Children 0-5	4,904	
Children 0-5 below Poverty*		1,658 (45.0%)**
Population Change Children 0-4 for 2010-2014***	-4.7%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



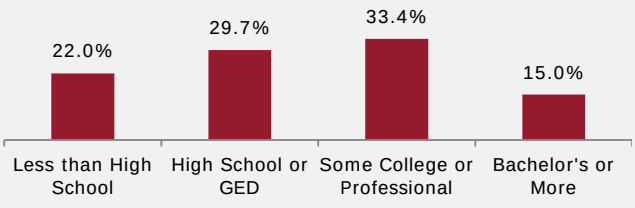
U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

Families	YEAR
Total Number of Families	24,346
Families with Children 0-5	3,493 (14.3%)
Single Parent Families with Children 0-5	1,779 (50.9%)
Single Parent Families with Children 0-5 (Mother only)	1,238 (35.4%)

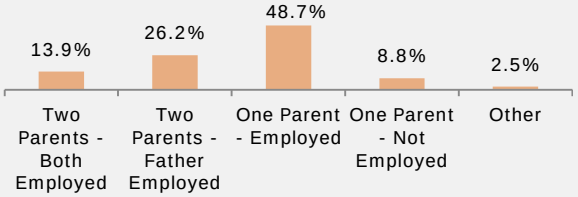
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	620	12.6%
Children 3-4 Enrolled in Pre-K[2]	615	53.5%
Children 0-5 without Health Insurance[3]	565	15.3%

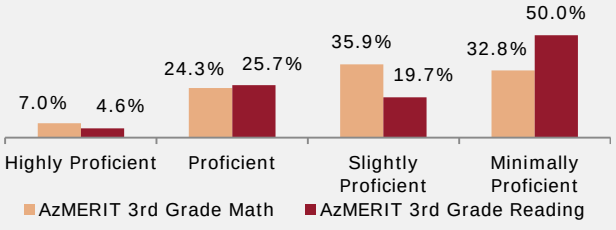
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	30	30	31	2,527
ADHS Certified Group Homes	3	2	2	20
DES Certified Homes	14	15	16	63
Listed Homes (Unregulated)	3	2	3	12
Total	50	49	52	2,622
Subsets: Head Start	8	8	8	375
Accredited	4	3	3	344
Quality First	-	-	9	702
DES Child Care Subsidy Eligibility-Children 0-5	-	-	898	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	808	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	93.2%
3+ doses Polio	92.9%
2+ doses MMR	93.0%
3+ doses Hepatitis B	93.6%
2+ doses Varicella	90.0%
1 dose Varicella+ History	3.6%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening	40
# Children Served	38

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	154
# Children Served	84

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	207
TANF Children 0-5 Recipients	277
Food Stamp Recipients – Families with Children 0-5	2,611
Food Stamp Recipients – Children 0-5	3,519

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

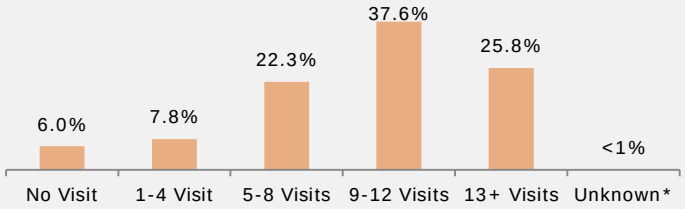
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	1,278	1,170	1,134	1,098
WIC Enrolled/Participants Children 0-4	2,205	1,951	1,763	1,665

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

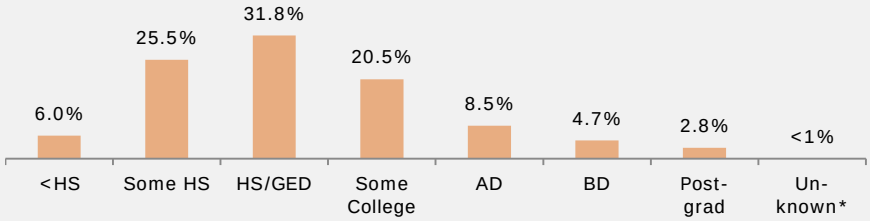
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers	77	9.8%
Low Birth Weight	67	8.5%
High School Dropout Rate		5.1%

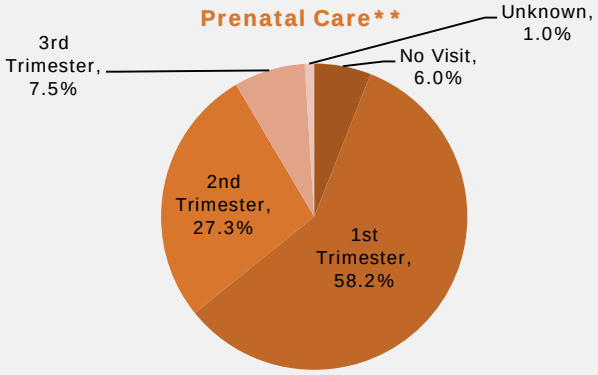
Prenatal Visits



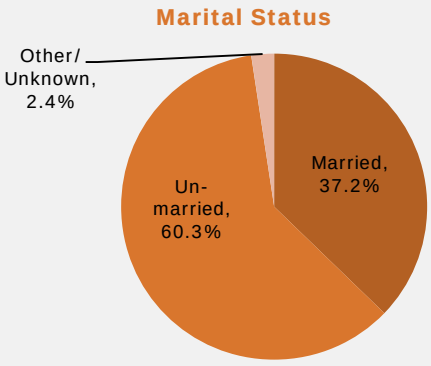
Mother's Education



Prenatal Care**

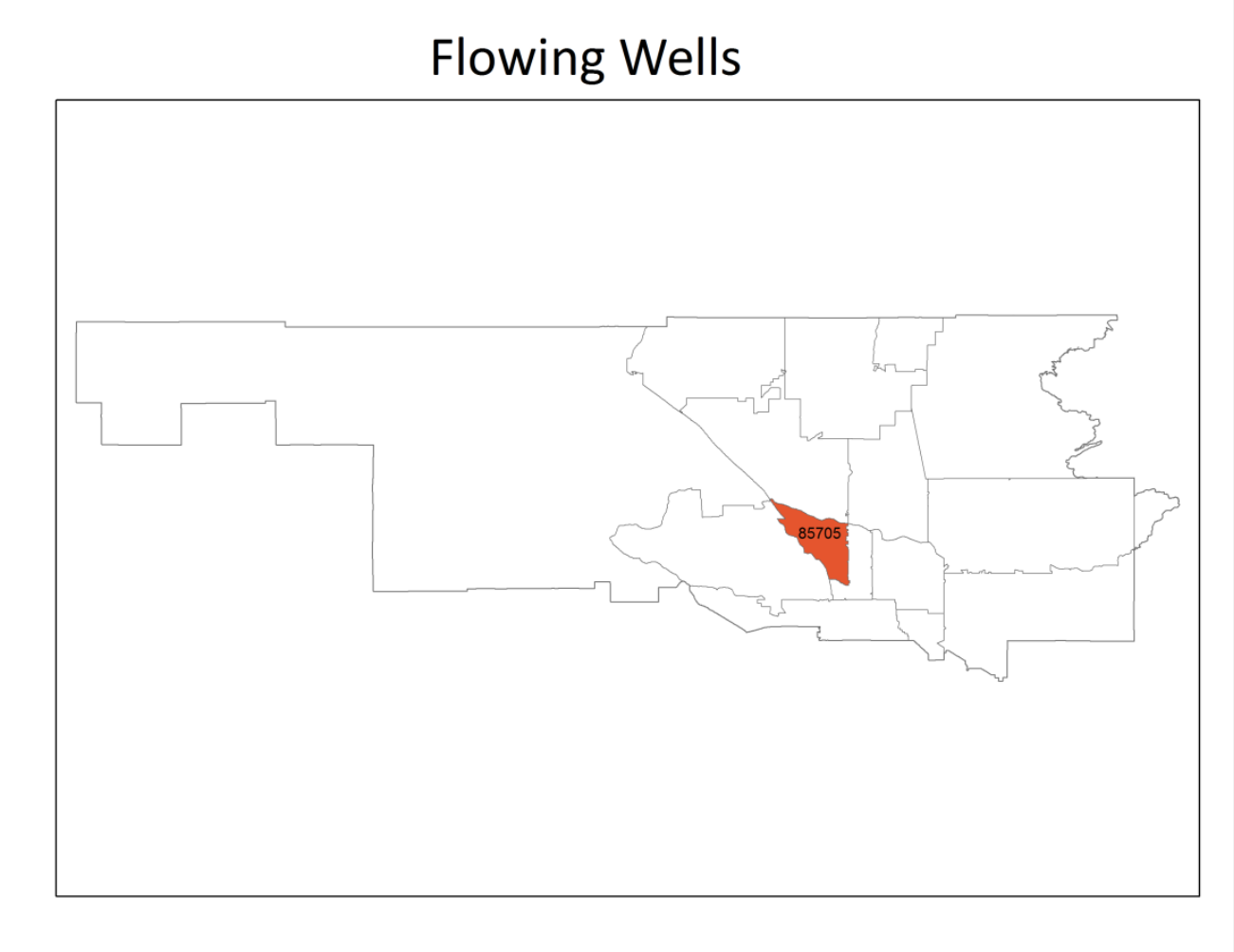


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Flowing Wells Map



Tanque Verde / Sabino Canyon

	%	N
85749	31.3%	19,032
85750	39.7%	24,161
85715	29.1%	17,702

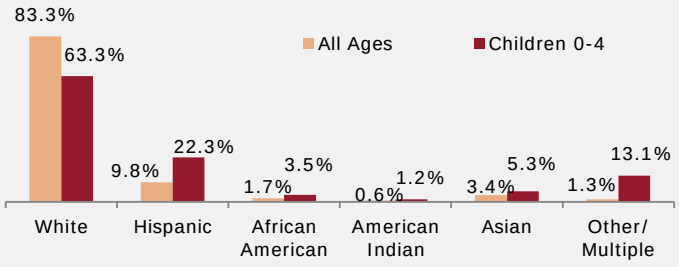
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	60,895	
Population below Poverty*		4,555** (7.4%)
Children 0-5	2,716	
Children 0-5 below Poverty*		472 (18.2%)**
Population Change Children 0-4 for 2010-2014***	0.8%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

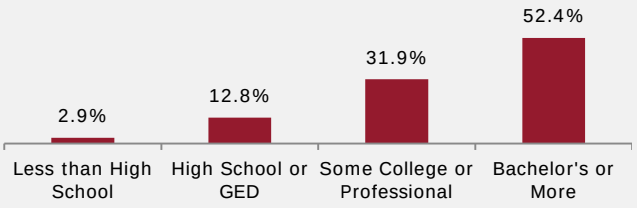
Families

Families	YEAR
Total Number of Families	27,108
Families with Children 0-5	2,045 (7.5%)
Single Parent Families with Children 0-5	485 (23.7%)
Single Parent Families with Children 0-5 (Mother only)	349 (17.1%)

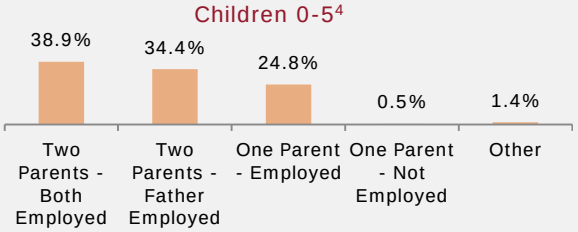
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	211	7.8%
Children 3-4 Enrolled in Pre-K[2]	621	65.0%
Children 0-5 without Health Insurance[3]	138	5.3%

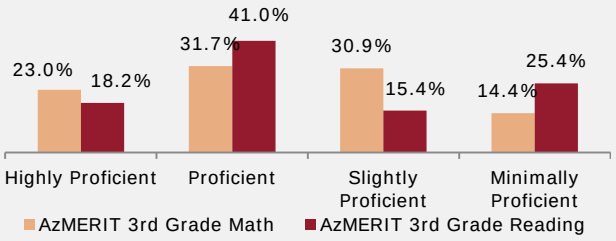
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	17	17	17	1,678
ADHS Certified Group Homes	1	2	2	20
DES Certified Homes	3	2	2	8
Listed Homes (Unregulated)	2	1	0	0
Total	23	22	21	1,706
Subsets: Head Start	0	0	0	0
Accredited	1	2	2	253
Quality First	-	-	5	564
DES Child Care Subsidy Eligibility-Children 0-5	-	-	183	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	166	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	91.9%
3+ doses Polio	92.6%
2+ doses MMR	91.1%
3+ doses Hepatitis B	91.8%
2+ doses Varicella	86.3%
1 dose Varicella+ History	6.9%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening*	<10
# Children Served	11

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.
*Data supressed; Number of clients between 1 and 9

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	53
# Children Served	33

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	35
TANF Children 0-5 Recipients	46
Food Stamp Recipients – Families with Children 0-5	340
Food Stamp Recipients – Children 0-5	421

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

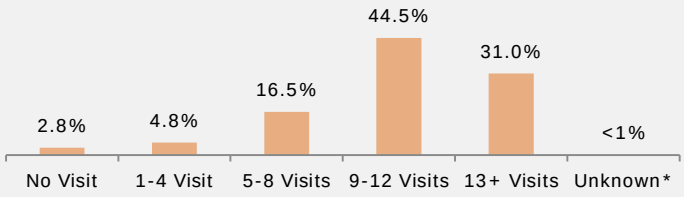
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	175	185	177	148
WIC Enrolled/Participants Children 0-4	251	202	210	209

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

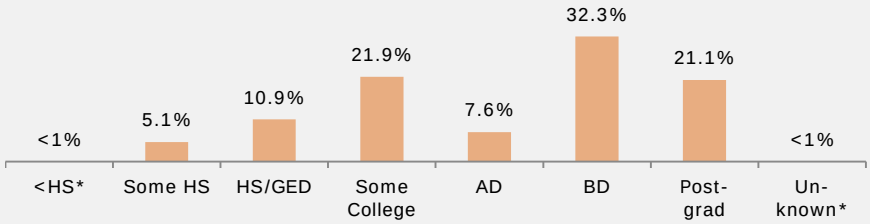
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers	6	1.5%
Low Birth Weight	20	5.1%
High School Dropout Rate		1.2%

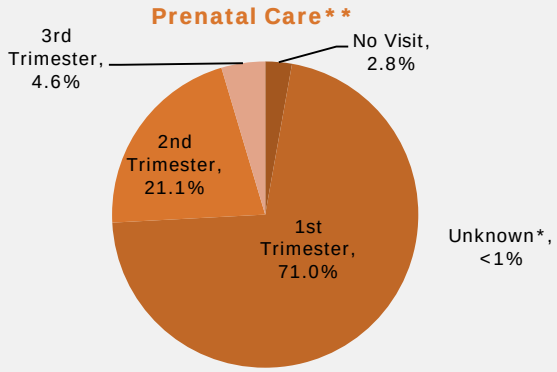
Prenatal Visits



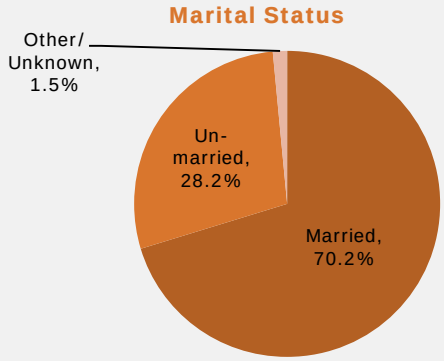
Mother's Education



Prenatal Care**

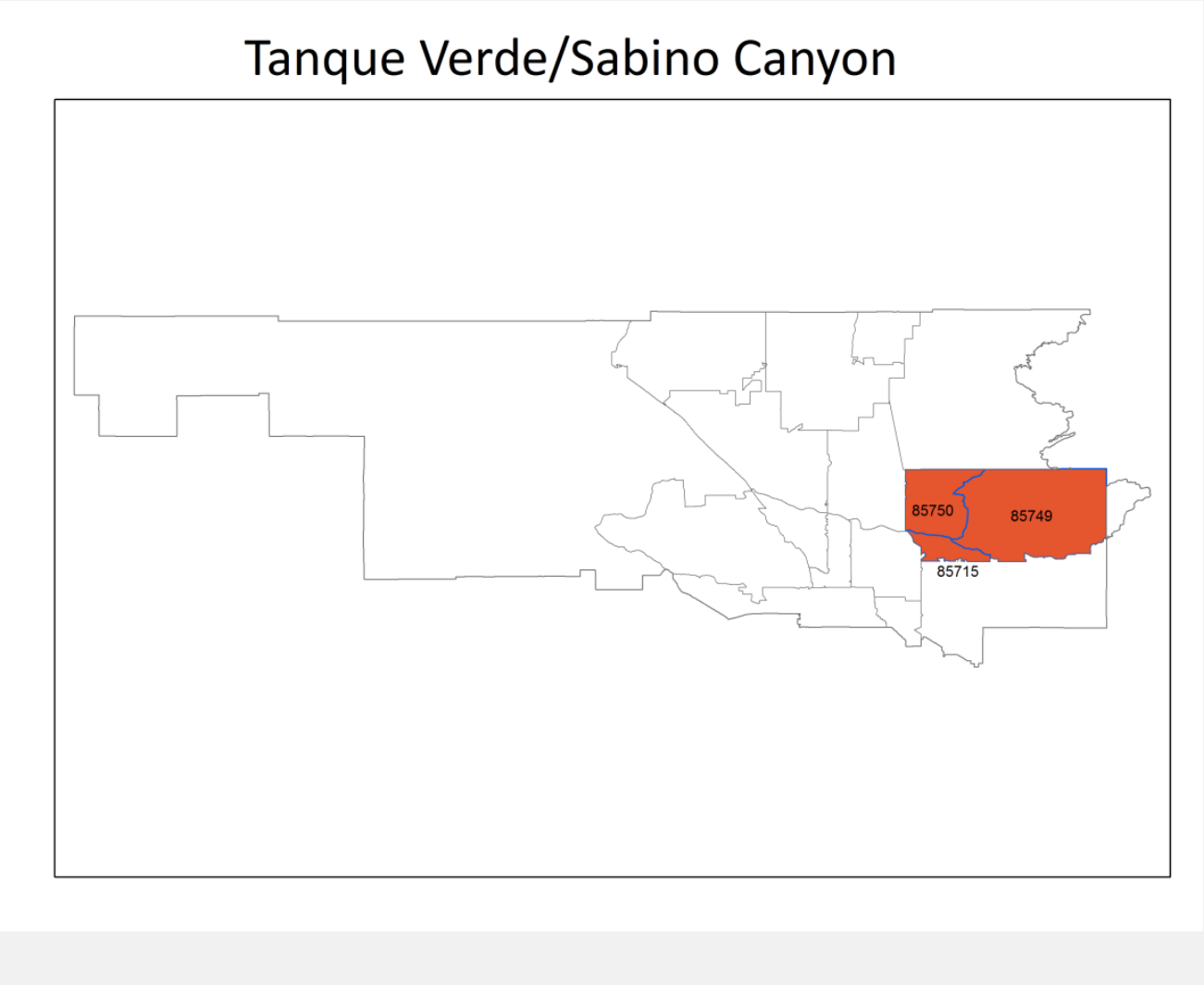


Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

Tanque Verde / Sabino Canyon Map



West-Gates Pass

	%	N
85745	100%	37,006

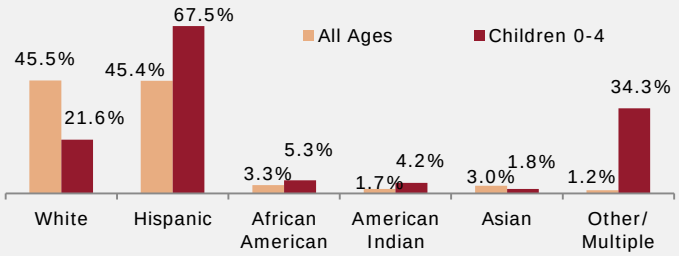
U.S. Census Bureau; 2010 Census Summary File 1; Table P1; generated by Harder+Company; using American FactFinder; <http://factfinder2.census.gov>

DEMOGRAPHICS

Population	2010 Census	5 Year Estimate
Total Population	37,006	
Population below Poverty*		8,602** (22.4%)
Children 0-5	2,572	
Children 0-5 below Poverty*		649 (28.1%)**
Population Change Children 0-4 for 2010-2014***	4.2%	

*Where economic status is reported
** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001.
*** U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table DP05 and U.S. Census Bureau, 2010 Census Summary File 1; Table DP-1. The Census and ACS collect data for children under 5 therefore the change in population only includes children 0-4.

Race



U.S. Census Bureau; 2010 Census Summary File 1; Table P11 and
U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I.

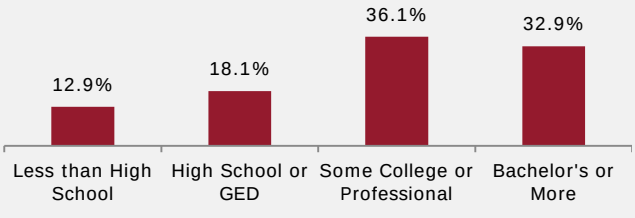
Families

Families	YEAR
Total Number of Families	14,994
Families with Children 0-5	1,870 (12.5%)
Single Parent Families with Children 0-5	764 (40.9%)
Single Parent Families with Children 0-5 (Mother only)	585 (31.3%)

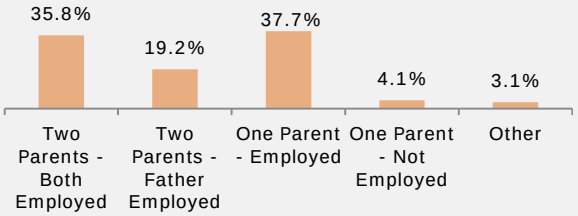
U.S. Census Bureau; 2010 Census Summary File 1; Table P20.

Additional FTF Data	Number	Percent
Children 0-5 Living with Grandparents[1]	382	14.9%
Children 3-4 Enrolled in Pre-K[2]	403	52.5%
Children 0-5 without Health Insurance[3]	225	9.6%

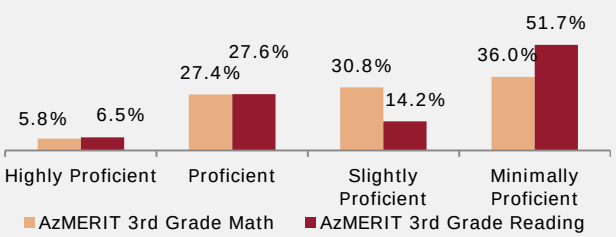
Educational Attainment Adults[5]



Employment Status of Parents of Children 0-5[4]



AzMERIT 3rd Grade Reading and Math Proficiency[6]



1 U.S. Census Bureau; 2010 Census Summary File 1; Table P41.
2 U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003.
3 U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001.
4 U.S. Census Bureau; American Community Survey, 2014 American Community Survey Table B23008
5 U.S. Census Bureau; American Community Survey, 2014 American Community Survey; Table B15002.
6 Arizona Department of Education (2015). AzMERIT Reports. Provided by AZ FTF.

EARLY EDUCATION AND CHILDCARE

Providers Listed with CCR&R	Total Number of Providers			Capacity
	2012	2013	2016	2016
ADHS Licensed Centers	13	15	15	1,087
ADHS Certified Group Homes	8	7	7	70
DES Certified Homes	17	16	16	61
Listed Homes (Unregulated)	4	3	0	0
Total	42	41	38	1,218
Subsets: Head Start	0	1	1	86
Accredited	0	5	5	114
Quality First	-	-	5	222
DES Child Care Subsidy Eligibility-Children 0-5	-	-	384	n/a
DES Child Care Subsidy Recipients-Children 0-5	-	-	347	n/a

Arizona Department of Economic Security (2015).Childcare Resource and Referral. Provided by AZ FTF.

HEALTH

Child Immunizations	2014
4+ doses DTaP	83.5%
3+ doses Polio	84.4%
2+ doses MMR	85.0%
3+ doses Hepatitis B	84.1%
2+ doses Varicella	80.4%
1 dose Varicella+ History	4.4%

Immunization Data Reports (2015). Provided by AZ FTF.

Division of Developmental Disabilities Data	2015
# Children Referred for Screening	15
# Children Served	18

Arizona Department of Economic Security (2015). DDD Referred and Served Children. Provided by AZ FTF.

Arizona Early Intervention Program Data	2015
# Children Referred for Screening	59
# Children Served	35

Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

FAMILIES AND CHILDREN RECEIVING PUBLIC ASSISTANCE

Public Assistance	2015
TANF Family Recipients with Children 0-5	68
TANF Children 0-5 Recipients	96
Food Stamp Recipients – Families with Children 0-5	854
Food Stamp Recipients – Children 0-5	1,178

Arizona Department of Economic Security (2015). Temporary Assistance for Needy Families (TANF) program. Provided by AZ FTF.
Arizona Department of Economic Security (2015). Supplemental Nutrition Assistance Program (SNAP).

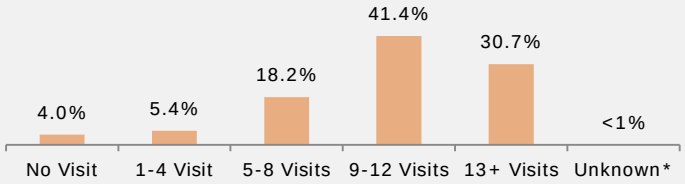
WIC Enrollment	'12	'13	'14	'15
WIC Enrolled/ Participants Women	393	395	368	321
WIC Enrolled/Participants Children 0-4	627	622	568	542

Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

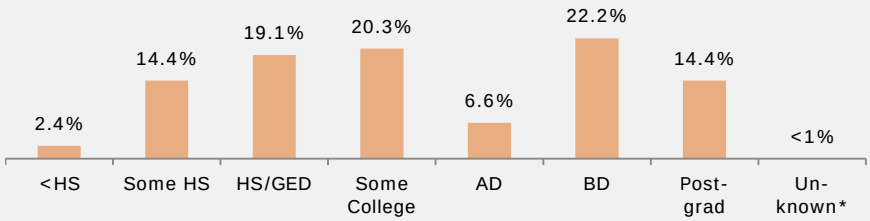
MATERNAL HEALTH 2014

Maternal Health	Number	Percent
Teen Mothers	31	7.3%
Low Birth Weight	35	8.3%
High School Dropout Rate		6.5%

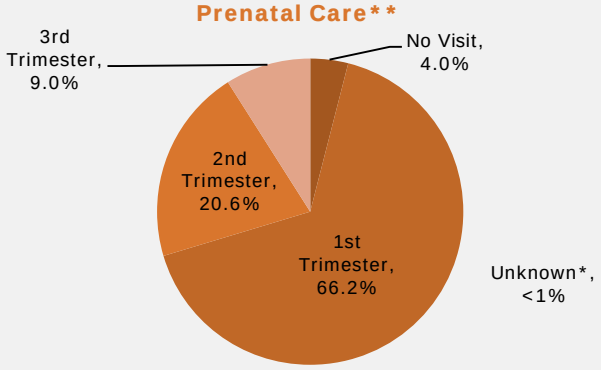
Prenatal Visits



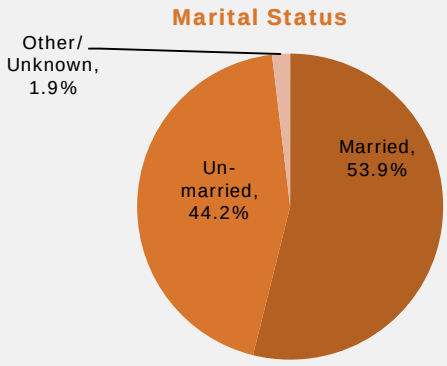
Mother's Education

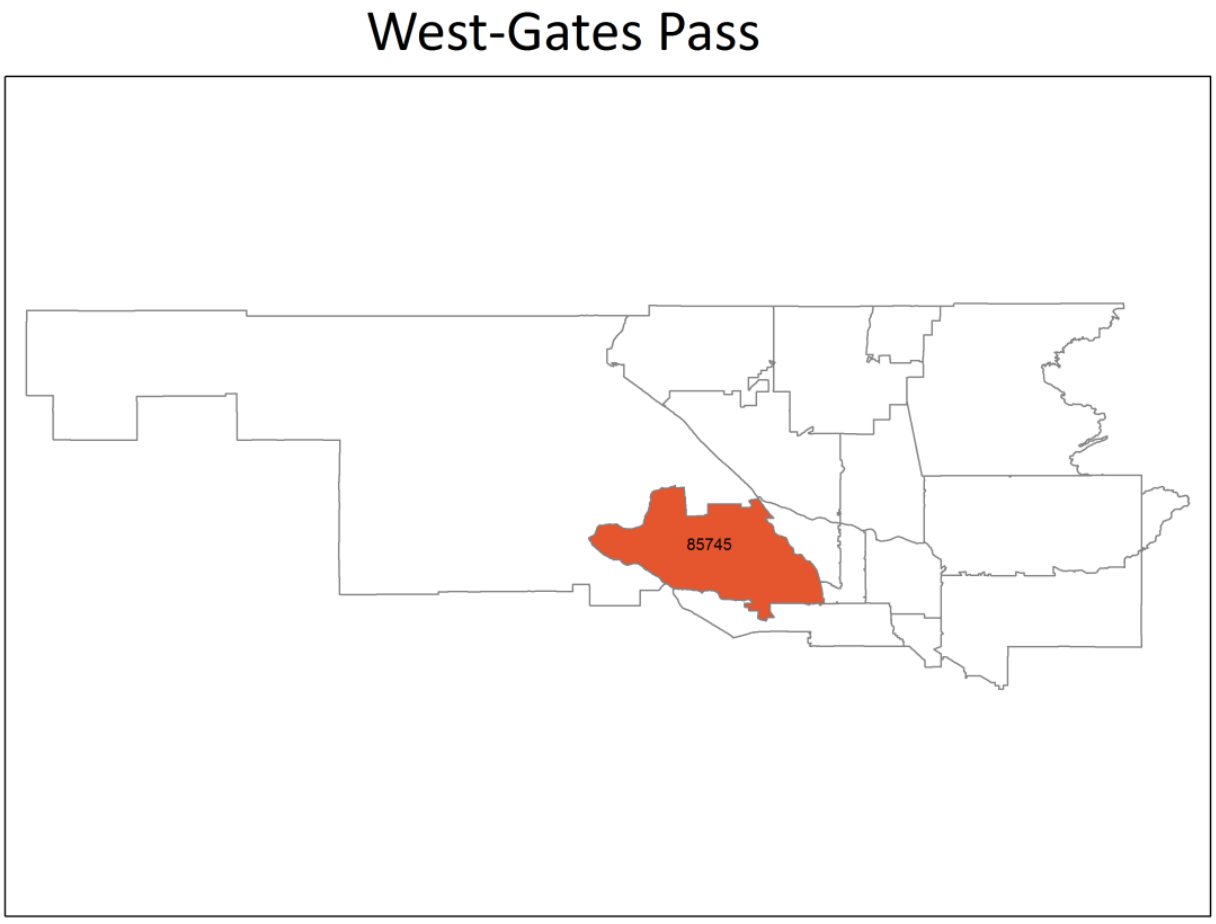


Prenatal Care**



Marital Status



Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.
* Data supressed; Non-zero count less than 6
**As of 2014, the new version of the Birth Certificate has introduced major changes in the way prenatal care by trimester is assessed. Month when the prenatal care began is no longer directly reported but rather calculated using the date of last menstrual period and the date of the first prenatal care visit. Due to this structural change prenatal care is not comparable between 2013 and 2014 onward

West-Gates Pass Map