

FIRST THINGS FIRST

Southeast Maricopa



2018 NEEDS AND ASSETS REPORT

SOUTHEAST MARICOPA REGIONAL PARTNERSHIP COUNCIL 2018 NEEDS AND ASSETS REPORT

Prepared by
Harder and Company Community Research

Funded by
First Things First Southeast Maricopa Regional Partnership Council

LETTER FROM THE CHAIR

January 17, 2018

Message from the Chair:

Since the inception of First Things First, the Southeast Maricopa 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 Southeast Maricopa Regional Council would like to thank our Needs and Assets vendor, Harder and Company Community Research, for their knowledge, expertise and analysis of the Southeast Maricopa 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 Southeast Maricopa 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,

A handwritten signature in cursive script, reading "Rev. Abigail Conley". The signature is written in dark ink on a light-colored background.

Rev. Abigail Conley, Chair

SOUTHEAST MARICOPA REGIONAL PARTNERSHIP COUNCIL

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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 Southeast Maricopa 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 Southeast Maricopa 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 Southeast Maricopa 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 US Children's Bureau, office of Administration for Children and Families, the Maricopa County Human Services Department, the Mesa and Gilbert School districts, and the Arizona Health Care Cost Containment System for their contributions of data for this report, and their ongoing support and partnership with First Things First on behalf of young children.

To the current and past members of the Southeast Maricopa 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.

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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 to 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 data sources, as well as provided directly to FTF by state agencies.

Overview of the FTF Southeast Maricopa Region

The FTF Southeast (SE) Maricopa Region is in the southeast corner of Maricopa County and is adjacent to Pinal County. Maricopa County is the most populous county in Arizona with a population of over 3.8 million people.¹ As part of a county that is very diverse in terms of topography, population density, and economic status, amongst other factors, the SE Maricopa Region both shares characteristics with and differs from Maricopa County. The major cities in the region include Mesa, Gilbert, and parts of Queen Creek and Apache Junction.

The FTF SE Maricopa Regional Partnership Council (Council) makes strategic investments to support the healthy development and learning of the young children in the region. The Council's priorities include:

- Strengthening families through voluntary home visitation and resource centers;
- Improving the quality of child care and preschool programs;
- Scholarships for children to access high-quality early learning; and
- Oral health screenings and fluoride varnishes.

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, the needs and assets they uncover for the FTF SE Maricopa region, potential considerations and opportunities for further exploration. 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.

¹ Maricopa County. Retrieved from <http://www.maricopa.gov/openbooks/profile.aspx>

Key Findings

Population Characteristics

The FTF SE Maricopa Region has a total population of 725,950 residents and close to 70,000 children under the age of six. Though the total number of births has remained stable 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 adult population in the region is less diverse than the rest of the state with 72 percent identifying as White and 81 percent identifying English as their primary language.

The majority of households with children under six are married-couple households, with about 19 percent of households led by single females and ten percent led by single males, slightly less than the state. Additionally, nine percent live in the same household as a grandparent.² Of children under 18 that live in the same household as a grandparent, 50 percent are primarily cared for by a grandparent, compared to 53 percent for the state. Almost one in five children in the SE Maricopa portion of Apache Junction (18%) live in the same household as a grandparent. 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. Though living with grandparents can be an asset, it can also indicate that the child's parents are emotionally or financially unable to care for their child on their own and there may be need for resources and parenting education for grandparents who are taking on the task of raising a second generation. Additionally, about a third of children are living in single-family households which may indicate a more stressful home environment and less time spent with their parents who are likely the sole breadwinners for their family.

Population Characteristic Considerations:

- Discuss tactics for planning ahead for the projected slow, but steady, growth of the under six population and the needs that accompany that growth, such as healthcare and child care needs for young children.
- Discuss supporting services specifically designed for single-parent and grandparent-led households and targeted in the SE Maricopa portion of Apache Junction and Mesa areas, to help them support the young children in their homes.

Economic Circumstances

The average unemployment rates for both the state and county have decreased and the labor force has increased since 2010, indicating the county as a whole is healthy and growing. Almost all households with children under six in the region (92%) have at least one parent who is employed. The median annual income for families with children under 18 in the county is consistently higher than the statewide median for all household types. Married-couple families in the county have a median income of about \$80,000 while single females have a median income of \$28,000. With the self-sufficiency standard for an adult with a young child being around \$40,000, single females are likely struggling and have need for support to help their child's growth and development. Additionally, the unemployment rates are higher and median incomes are lower in Mesa, suggesting this area of the region is not as

² 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>>

economically stable as the rest of the region and county.

Only 20 percent of children in the FTF SE Maricopa Region live under the poverty level, less than the state (29%). However, almost two in five children under age six in West Mesa (39%) live in poverty. These data may help identify geographic areas and populations to target for further intervention or support around increasing financial resources. Additionally, the school districts and populations with lower poverty rates may be able to identify strategies or assets within their areas that can be applied to others.

About a third of residents in the FTF SE Maricopa Region (34%) do not have affordable housing but the foreclosure rates for the county are lower than statewide. Although Maricopa County has relatively high access to grocery stores, 16 percent of the overall population and 25 percent of children under 18 are food insecure in Maricopa County, meaning they have limited or uncertain access to adequate food.

Economic Circumstances Considerations:

- Consider encouraging stakeholders to target job training and employment programs to the subregions with higher need to help increase employment and median incomes.
- Encourage community awareness of social service resources in the region, including housing support.
- Promote supports and resources that can help subsidize child care and other expenses for grandparents raising their grandchildren.

Educational Indicators

Participation in early learning experiences is likely to result in higher academic performance in future years. About two in five children between ages three and four (40%) are enrolled in nursery school, preschool, or kindergarten in the SE Maricopa Region. Slightly more, 50% of the third-grade students in the region, scored proficient or highly proficient on the AZ Merit English Language Arts and Math assessments. Chandler and Higley Unified school districts have the highest percentage of children scoring proficiently. Though higher than the state and county, the finding that only half of the region's third graders are proficient in math and English is concerning and supports the need for greater participation in early education.

The percentage of first, second, and third graders missing ten or more days of school slightly increased between 2014 to 2015 in both the FTF SE Maricopa Region and the state, though it was lower in the region and decreased as grade level increased. The region's high school graduation rate has remained fairly steady since 2011 at around 80 percent and the high school dropout rate has remained around two percent since 2012. Almost all of the adults in the region have completed high school/received a GED or pursued further education past high school (90%), more than the state or county. A similar percentage of mothers in the region (87%) have at least completed high school or their GED, seven percent more than at the state level. In general, residents in the SE Maricopa region have completed high school or more, indicating the potential understanding of the value and importance of education that will hopefully be incorporated into their parenting. West Mesa and Apache Junction had the highest percentage of adults that did not complete high school or receive a GED, 20% and 15%, respectively.

Educational Indicators Considerations:

- Consider supporting programs for parents, such as peer support or mentoring programs, to support each other and share knowledge and attitudes around the importance of education, targeting teen parents or parents without a high school degree, especially in the SE Maricopa portion of Apache Junction and West Mesa.
- Increase parent outreach and awareness of early education programs to support learning and school readiness from an early age.

Early Learning

Participation in early care and education programs plays an important role in preparing children for kindergarten and beyond. About 58 percent of households are assumed to need child care based on the employment status of the adults in the household, yet only 40 percent of preschool-aged children in the region are enrolled in early care and education programs. One factor that may influence this finding is the high cost of child care in the region. Child care subsidies in the region appear to be helping as the number of children receiving subsidies increased, though the number on the waitlist also increased between 2013 to 2014.

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. Just under 3,000 children in the FTF SE Maricopa Region are enrolled in Head Start or Early Head Start. Additionally, over 2,000 children in the region are enrolled in Quality First centers rated between three to five stars. Increasing access to quality early care and education programs is essential for the regions' children, especially since early care and education teachers throughout the state are not well compensated, most earning minimum wage. Almost half leave the profession within five years, impacting the continuity and quality of care.

Children receiving AzEIP referrals and services have increased in the region, indicating both increased need and capacity to meet the need. The percentage of children in the region who participate in special education while in preschool but transition out before entering kindergarten was generally steady until 2014. The most common types of disabilities for preschool children were developmental delays and speech and language impairments.

Early Learning Considerations:

- Consider continuing support for Quality First efforts in the region to increase the opportunities for children to receive quality early care and education experiences.
- Promote the importance of subsidies in providing low-income children access to early care and education.
- Consider providing supports, such as professional development and networking opportunities, for quality early childhood professionals to retain their skills in the early childhood field and reduce staff turnover.

Child Health

According to the Arizona Department of Health Services, Maricopa County has a slightly lower ratio of population to primary healthcare providers than the state. And based on the American Community

Survey, SE Maricopa region has a lower percentage of children without health insurance than the state average, indicating that there is relatively high access to healthcare in the area.

The percentage of mothers participating in WIC who breastfeed their children in the SE Maricopa Region has been increasing since 2013, similar to the state average. However, the parents of children in child care or kindergarten in the region are also more likely to exempt their children from receiving immunizations, especially in kindergarten.

Although 74 percent of parent respondents to the Healthy Smiles Healthy Bodies survey in the SE Maricopa Region report regularly taking their children to dental visits, almost half (42%) report their children have had tooth decay experience and 18% have had untreated decay. Though better than the state, there is still room for improvement of oral health care for the region's youngest children. Additionally, 22 percent of respondents in the state have AHCCCS insurance but are not aware that dental insurance is included. This indicates a need for increased oral health education and services in the SE Maricopa Region.

Child Health Considerations:

- Continue to provide public education about the benefits of breastfeeding and consider supporting workplace efforts to encourage breastfeeding practices for working mothers.
- Promote the importance of early prenatal care and support parent education about the impact of prenatal care on the mother and child's future well-being.
- Promote more outreach and education regarding the importance of immunizations. Explore further to understand why parents are exempting their children from receiving vaccinations.
- Promote oral health services and education within existing programs, such as home visitation, to inform parents of the importance of early oral healthcare. Also, consider partnering with primary care physicians and pediatricians to be allies of oral healthcare and encourage their patients to practice healthy oral health behaviors and regularly visit the dentist.

Family Support and Literacy

In 2012, 200 parents and caregivers in the FTF SE Maricopa Region completed the FTF Family and Community survey 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 that 34 percent of respondents understand their impact on their child in the prenatal stage, 45 percent understood that an infant takes in the world right from birth, and 49 percent understood that a baby can sense and be affected by his parents' mood, all higher than the state as a whole. The majority of respondents in SE Maricopa Region also understood the importance of play at all ages.

However, respondents in the region scored lower than the statewide average in understanding that the first year of life has a major impact on school performance (64% vs 83%). And although a higher percentage had 100 or more books in their home, less respondents in the region actually engaged in developmentally enriching activities, like reading and singing with their child, than at the state level. These findings indicate that, though more education around the prenatal and infant stages may be helpful, most parents in the region are aware of their impact on their child's development but may be

too busy to engage in behaviors to enhance their learning.

Family Support and Literacy Considerations:

- Continue to provide family support services like home visitation in targeted areas to provide support and resources to families.
- Support community education campaigns to increase awareness of parents' impact on their child's development and the importance of engaging in activities with their children on a daily basis.

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, effective early childhood system in Arizona. Since 2011, FTF has led a collaborative, concerted effort to build public awareness and support across Arizona employing several integrated communications strategies.

Additionally, the 2012 Family and Community survey included questions around parent satisfaction with community services and resources. Overall, the majority of respondents were satisfied with the information and resources available, agreed that it is easy to locate services they need or want, and felt that services were available at convenient times or locations. However, less than half (47%) knew if they were eligible to receive services, and 42 percent felt they were asked to fill out paperwork or eligibility forms multiple times, indicating potential opportunity for streamlining the eligibility and enrollment process. A high percentage of respondents were unsure about whether the services were very good or that they fill the needs of their whole family, suggesting a need for further exploration.

Almost all respondents (92%) reported taking their children to the same doctor's office regularly and slightly less (77%) reported regularly visiting the same dental provider. The slight majority of respondents (54%) felt they had access to preventive services.

Communication, Public Information and Awareness Considerations:

- Continue to support the current network of services and programs so children and their families have access to high quality programs and services.
- Consider supporting a care coordination system that helps link families to information and services and reduces redundancies in paperwork.
- Consider supporting more parent outreach and/or the development of an online inventory that describes the availability of services and the eligibility criteria for children and their families to receive services.

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-nine respondents from Maricopa County participated in the survey, the majority of whom (54%) were from Family Support/Social Service Agencies or Local/Public entities and considered themselves participants or partners in the early childhood system in the county.

Overall, 61 percent of respondents perceived the early childhood system in the county to be partially coordinated followed by 22 percent who considered it to be well-coordinated. The majority of respondents felt all four areas of the system (Family Support and Literacy, Children's Health, Early Learning, and Professional Development) to be effective in addressing the needs of young children and their families. Family Support was considered to have the highest level of collaboration (26%), followed by Children's Health (21%). Professional Development had the lowest level of collaboration (11%), though the implementation of the registry may impact this moving forward. Though the level of collaboration appears relatively low in Maricopa County, it was noted that the level of competition and siloed nature of the region has actually decreased in recent years and the current system is more coordinated than before.

System Coordination Considerations:

- Identify more system leaders that can guide the system partners and participants towards a more coordinated and collective network that will even more efficiently serve children and families.
- Identify successes from the Family Support and Children's Health 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 SE Maricopa as appropriate.
- Consider supporting collective partnerships and collaborations between organizations to reduce duplication, leverage funding, and increase efficiency.

Opportunities for Further Exploration

Most of the findings provided in this report are based on secondary data sources. As the FTF SE Maricopa Regional Partnership 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 following opportunities were identified based on the priorities identified by the Council that data were not available to fully explore. Methods could include gathering existing data from local sources or conducting local focused surveys. Listed in order of the domains in this report, the Council may want to consider collecting additional information regarding:

- **Further breakdown of data by subregions** to better understand which areas of the region are struggling or succeeding and leverage learning and winning strategies across the region;
- **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 whether it is more often the case of parents 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 low scores and the factors that contribute to those results that can inform policy and practice changes within the lower-performing districts;

- 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;
- Reasons for and characteristics of the high percentage of **families that are opting to exempt their child from receiving immunizations**;
- **Oral health gaps** in the region and what the region is doing well and what they could improve on to decrease the percentage of children with tooth decay and other negative oral health experiences;
- 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;
- **Parent-level gains** as a result of participation in FTF services;
- More information on **child abuse and neglect at the regional level** to inform the needs around child safety; and
- 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

First Things First (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 to age five. FTF is intent on bolstering current child-focused systems within Arizona as a strategic way to maximize current and future resources. The SE Maricopa Regional Partnership Council (Council) makes strategic investments to support the healthy development and learning of the young children in the region. The Council's priorities include:

Strengthening families through voluntary home visitation and resource centers

Improving the quality of child care and preschool programs

Scholarships for children to access high-quality early learning

Oral health screenings and fluoride varnishes

About this Report

This is the fifth Needs and Assets report conducted on behalf of the FTF SE Maricopa Regional 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 from birth to age five and their families in the region. This report is designed to provide updated information to the FTF SE Maricopa 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 region.

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

- Population characteristics;
- Economic circumstances;
- Educational indicators;

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.

- Early learning;
- Child health;
- Family support and literacy;
- Communication, public information and awareness;
- System coordination among early childhood programs and services ;
- Limitations and Conclusions; and
- Appendices

Methods

A systematic review designed to reveal the needs and assets of the SE Maricopa 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 Region, Maricopa County, and State of Arizona. Wherever possible, data throughout the report are provided specifically for the FTF SE Maricopa region, and are often presented alongside data for the County and the State of Arizona for comparative purposes. Some data are also presented at the city level for Mesa, Gilbert, Apache Junction, and Queen Creek. The Apache Junction data presented in this report includes only the portion of the city within the FTF SE Maricopa region. City-level data for Queen Creek may be presented when available, and is clearly identified as such in the report. When the data available for Queen Creek includes portions of the city that are outside of the FTF SE Maricopa Region, they will likely be overestimates of the actual numbers within the region. Additional subregional analyses that distinguished between East Mesa and West Mesa was critical for the FTF Southeast Maricopa Region due to the wide variation within the city that is not apparent in the aggregated data. Subregional data from the American Community Survey and 2010 Census were calculated by aggregating the census tracts in each subregion. Census blocks were assigned to a subregion by FTF, and Harder+Company then used those assignments to determine which census tracts that belonged to each subregion. For census tracts that are in more than one subregion, a percentage of the tract was assigned to each subregion based upon the number of children under age six living in the census blocks within the subregions' portion of the census tract. Gilbert Road served as the dividing line between East Mesa and West Mesa.

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

Further secondary data were gathered directly from public databases. For example, demographic data included in this report were primarily gathered from the US Census and the American Community Survey. Likewise, early education data were gathered from the US Children's Bureau, an 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, for small towns, or certain zip codes, whereas for other indicators, data were available at

all levels. Whenever possible this report presents all data available. 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 results 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 under age six and their families were not available for the FTF SE Maricopa Region, such as more detailed data on housing or homelessness and child welfare. The analysis presented in this report aims to integrate relevant data indicators from a variety of credible sources, including regional and subregional, 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 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 Regional Council and community members, FTF Research and Evaluation Unit, and FTF Regional Directors which allowed for a deeper discussion on the interpretation of the findings. Whenever possible, the rich context provided by these stakeholders 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. The demographic and economic profile of the region relied mostly on Census and ACS data. For some of the Census indicators, only 2010 Census data were available. For some of the indicators reported, the most recent data for the region was released in 2014, thus trends may have changed within past four years. For example, the most recent diabetes and obesity data are from 2013 and the most recent data for the number of fitness facilities and access to grocery stores is from 2012.

Another limitation impacting the findings and interpretation of findings is the targeted population included in each of the different data sources. For many domains reported, data were often available only at the county level rather than the region, and data for children often includes children under 18 rather than children under six. Additionally, ACS estimates are less reliable for small geographic areas or areas with smaller populations. Similarly, rural areas tend to be undercounted, along with non-white populations. Federal data also have similar limitations. For example, Head Start and WIC data only include a sample of the young children and families' service.

Another major limitation is the discrepancy in the definitions and criteria used by each agency that is

collecting the data. Because various different data sources are used for each domain and they each have different definitions, it is difficult to make confident comparisons on indicators between data sources. Given these limitations, interpretation of key findings requires a deep understanding of the region. Contextualizing the findings is equally important as what the data tell us.



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 that community. It is 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 most culturally and geographically appropriate.

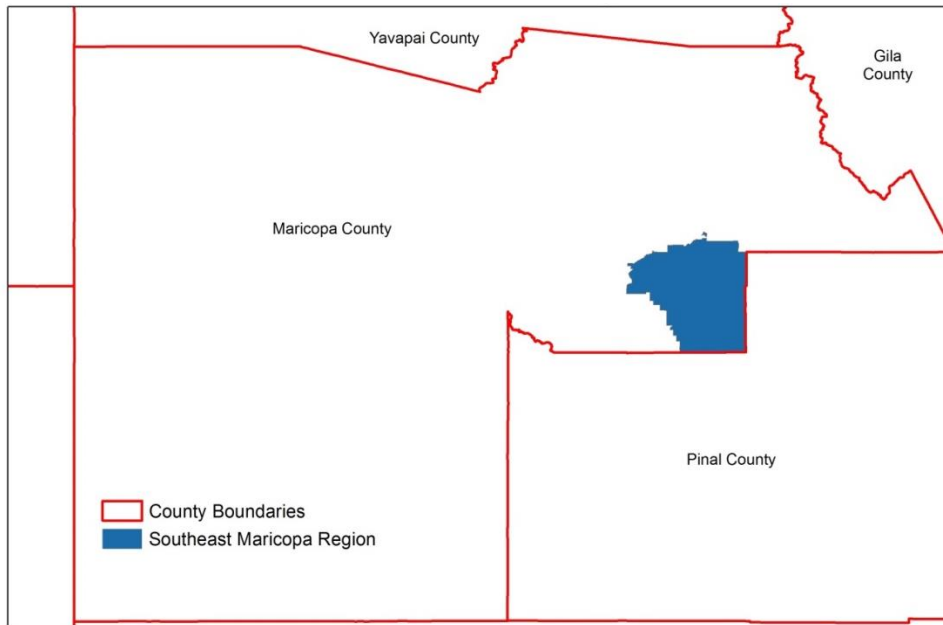
A thorough and comprehensive demographic profile allows policy makers to understand the residents of a region, the strengths they bring, and the needs and barriers they face by providing an overview of the geographic region's population dynamics, projected growth, ethnic and racial composition, languages 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 Southeast (SE) Maricopa Region is in the southeast corner of Maricopa County and is adjacent to Pinal County, as shown in Exhibit 1.1. Maricopa County is the most populous county in Arizona with a population of over 3.8 million people.⁶ The major cities in the region include Mesa, Gilbert, and parts of Queen Creek and Apache Junction.

⁶ County of Maricopa. Retrieved from <http://www.maricopa.gov/openbooks/profile.aspx>

Exhibit 1.1. Map of Maricopa County and FTF Southeast Maricopa Region boundaries



Population Counts and Projections

According to the 2010 Census, the FTF SE Maricopa Region has a total population of 725,950 residents. There are nearly 70,000 children under six years old in the region, accounting for nine percent of the total population in the region (see Exhibit 1.2). Within the region, East Mesa is the largest subregion with a population of 293,034 and more than 20,000 children under the age of six, followed by Gilbert with a population of 211,159. The sections of Apache Junction and Queen Creek within the region both have populations below 35,000 (see Exhibit 1.3). The breakdown of children by age is provided in Appendix 1.1.

Exhibit 1.2. 2010 Population of Arizona, Maricopa County, and the FTF Southeast Maricopa Region

	Arizona	Maricopa County	Southeast Maricopa Region
Total Population	6,392,017	3,817,117	725,950
Population of children 0-5	546,609	339,217	68,482
Percent of children 0-5 out of total population	8.6%	8.9%	9.4%

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

Exhibit 1.3. 2010 Population of cities within the FTF Southeast Maricopa Region

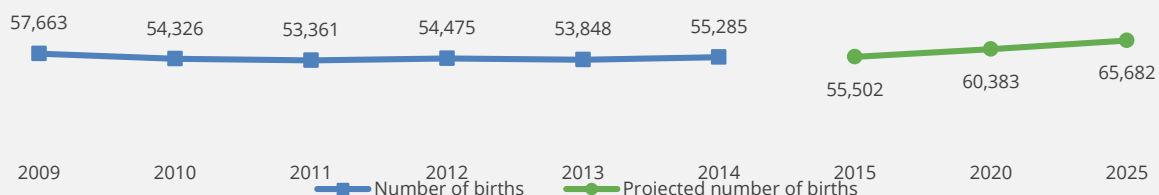
	Apache Junction (SE Maricopa portion)	Gilbert	East Mesa	West Mesa	Queen Creek (SE Maricopa portion)
Total Population	4,573	211,159	293,034	184,805	32,379
Population of children 0-5*	189	21,816	22,718	19,813	3,935
Percentage of children 0-5 out of total population	4.1%	10.3%	7.8%	10.7%	12.2%

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

*Due to small discrepancies in the way that the boundaries were determined for city data pulled from American FactFinder, city totals may not equal the total given for the Southeast Maricopa Region.

The number of births in the FTF SE Maricopa Region has remained around 11,000 per year between 2009 and 2014.⁷ This compares to a six percent decrease for Arizona. Over the next ten years the number of births in Maricopa County are expected to increase to 65,682 in 2025, up from 55,285 in 2014 (see Exhibit 1.4). The number of children under six in Maricopa County is also expected to increase over the next ten years, rising to nearly 385,000 by 2025 (see Exhibit 1.5). Over the same time period the number of births and number of children under six are expected to increase for the state as a whole.

Exhibit 1.4. Number of births from 2009 to 2014 and projected number of births from 2016 to 2025 in Maricopa County

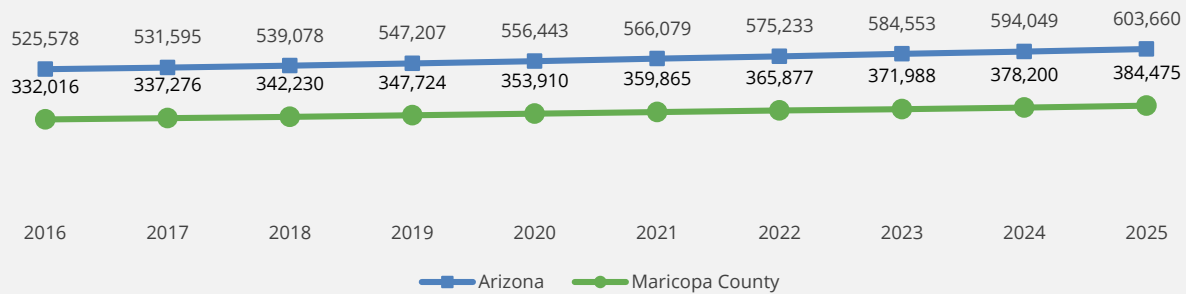


Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

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

⁷ Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

Exhibit 1.5. Projected population of children 0-5 for Arizona and Maricopa County



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

Demographics and Language

In the FTF SE Maricopa Region more than 70 percent of adults 18 and over identify as White and 19 percent identify as Hispanic or Latino. This compares to 63 percent and 25 percent, respectively, for Arizona. In the region children under five and mothers who gave birth in 2014 are more likely to identify as Hispanic or Latino than the overall population (see Exhibit 1.6 and Exhibit 1.7).

Exhibit 1.6. Distribution of race/ethnicity in the FTF Southeast Maricopa Region

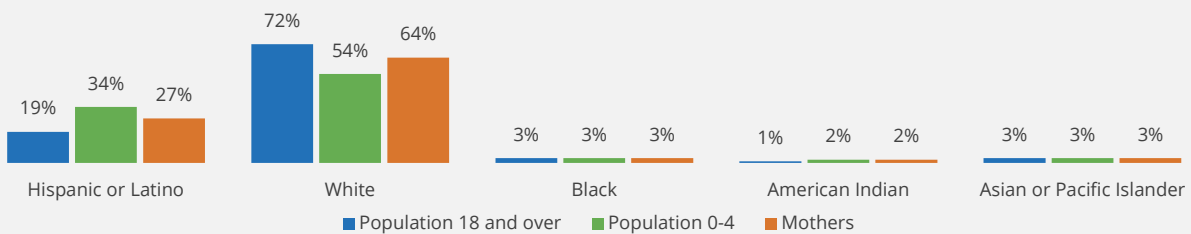
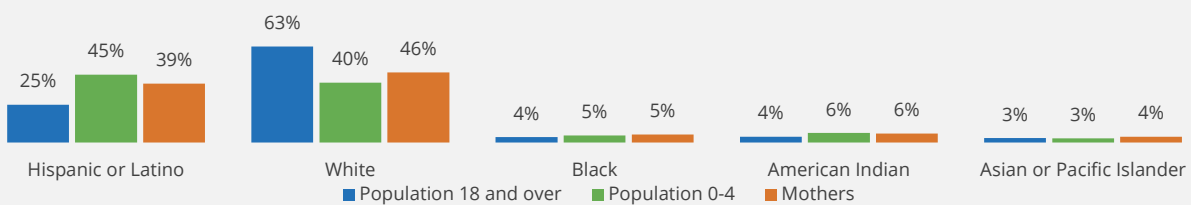


Exhibit 1.7. Distribution of race/ethnicity in Arizona



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

In four of the five subregions, over three-quarters of the adult population and the majority of children under age five identify as White (see Exhibit 1.8). In West Mesa, one-third of the adult population (34%) and over half of the children under age five (57%) identify as Hispanic (see Exhibits 1.8 and 1.9).

Exhibit 1.8. Race/Ethnicity of the population 18 and over

	Apache Junction (SE Maricopa portion)	Gilbert	East Mesa	West Mesa	Queen Creek (SE Maricopa portion)
Hispanic	8.5%	13.3%	13.1%	33.9%	16.8%
White	87.2%	75.4%	80.5%	54.9%	75.2%
Black	1.0%	3.1%	2.2%	4.2%	3.2%
American Indian	1.0%	0.7%	0.8%	3.0%	0.5%
Asian or Pacific Islander	1.4%	6.1%	2.1%	2.5%	3.0%
Other	1.0%	1.5%	1.2%	1.4%	1.3%

U.S. Census Bureau; 2010 Census Summary File 1; Table P11; generated by Harder+Company using American FactFinder; <http://factfinder2.census.gov>

Exhibit 1.9. Race/Ethnicity of the population 0-4

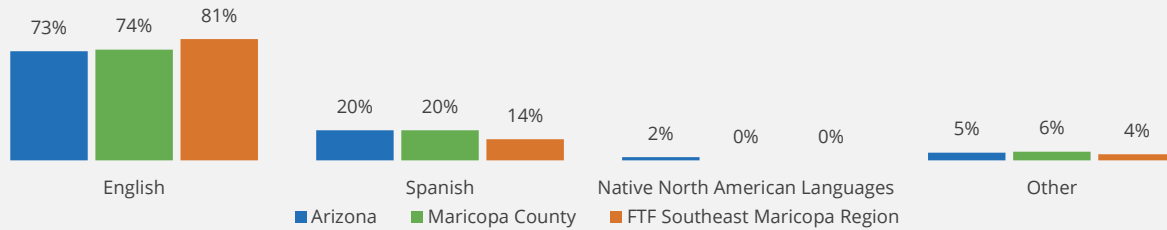
	Apache Junction (SE Maricopa portion)	Gilbert	East Mesa	West Mesa	Queen Creek (SE Maricopa portion)
Hispanic	26.5%	18.8%	28.7%	57.2%	21.7%
White	64.1%	67.2%	61.7%	29.8%	70.0%
Black	0.5%	3.1%	2.8%	4.2%	2.8%
American Indian	3.2%	1.0%	1.7%	5.0%	0.9%
Asian or Pacific Islander	0.6%	5.7%	1.8%	1.8%	1.7%

U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I; generated by Harder+Company using American FactFinder; <http://factfinder2.census.gov>

Approximately four out of five (81%) people in the region speak English as their primary language, while 14 percent primarily speak Spanish and an additional four percent speak a language other than English, Spanish, or a Native North American language (see Exhibit 1.10). In addition to the 18 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 1.11).⁸

⁸ 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 1.10. 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 1.11. Percentage of population that speaks English less than "very well" and percentage of limited English 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>>

As expected based on the ethnicity breakdown, West Mesa has the highest percentage of people who primarily speak a language other than English. In West Mesa, 30 percent of the population primarily speaks Spanish and four percent speak a language other than English, Spanish, or a Native North American language (see Exhibit 1.12). West Mesa also has the highest percentage of limited English-speaking households in the region, more than four times higher than the other subregions (Exhibit 1.13).

Exhibit 1.12. Primary language spoken at home for population ages 5 and over for cities in the FTF SE Maricopa Region

	Apache Junction (SE Maricopa portion)	Gilbert	East Mesa	West Mesa	Queen Creek (SE Maricopa portion)
English only	90.3%	85.5%	86.5%	66.0%	90.3%
Spanish	8.5%	7.4%	10.0%	29.8%	7.2%
Native North American languages	0.0%	0.1%	0.1%	0.6%	0.0%
Other languages	1.1%	6.9%	3.3%	3.6%	2.5%

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

Exhibit 1.13. Percentage of population that speaks English less than “very well” and percentage of limited English-speaking households

	Apache Junction (SE Maricopa portion)	Gilbert	East Mesa	West Mesa	Queen Creek (SE Maricopa portion)
Percent of limited English-speaking households	0.4%	2.0%	2.0%	9.0%	0.8%

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 SE Maricopa Region, seven percent of the population are not US citizens compared to eight percent in Arizona.⁹ Children under the age of six in the FTF SE Maricopa Region are also less likely to be living with foreign-born parents than children under six in Arizona (see Exhibit 1.14). In Maricopa County there were an estimated 7,529 migrant farmworkers and 6,061 seasonal farmworkers in 2008 (see Exhibit 1.15). Statewide data regarding refugee arrivals is available in Appendix 1.2.

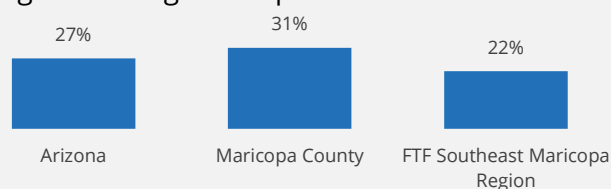
7

Percent of the population in the **FTF SE Maricopa Region** are not US Citizens

8

Percent of the population in **Arizona** are not US Citizens

Exhibit 1.14. 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

Exhibit 1.15. 2008 Estimated number of migrant and seasonal farm workers

	Arizona	Maricopa County
Number of migrant farm workers	39,913	7,529
Number of seasonal farm workers	27,791	6,061

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

⁹ 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>>

Household Characteristics

In the FTF SE Maricopa Region there are over 260,000 households and nearly 50,000 include children under six years old (see Exhibit 1.16). The largest percentage of households with children under age six are in the SE Maricopa portion of Queen Creek and the city of Gilbert (see Exhibit 1.17). Although the majority of children under six live in married-couple households, one-quarter live in single-parent households (see Exhibit 1.18). Three percent of children under six in the FTF SE Maricopa Region live with relatives or non-relatives. Additionally, nine percent live in the same household as a grandparent.¹⁰ Of children under 18 who live in the same household as a grandparent, 50 percent are primarily cared for by a grandparent, which is slightly less than 53 percent for Arizona.¹¹ In the SE Maricopa portion of Apache Junction, East Mesa, and West Mesa more than ten percent of children under six live in the same household as a grandparent (see Exhibit 1.19). There can be several advantages to living in a multigenerational household, including an increase in emotional well-being and parents 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, changes in parenting practices since grandparents are 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 factors that result in grandparents living in the same household as their grandchildren.

Exhibit 1.16. Number of households and household characteristics

	Arizona	Maricopa County	SE Maricopa Region
Total number of households	2,380,990	1,411,583	264,385
Households with children 0-5	16.1% (384,441)	16.9% (238,955)	18.0% (47,569)
Married-couple households with children 0-5	65.1% (250,217)	66.3% (158,440)	71.4% (33,964)
Single-male households with children 0-5	11.3% (43,485)	11.2% (26,815)	9.8% (4,656)
Single-female households with children 0-5	23.6% (90,739)	22.5% (53,700)	18.8% (8,949)

U.S. Census Bureau; American Community Survey. 2014 American Community Survey 5-Year Estimates, Tables B11003; generated by AZ FTF; using American FactFinder; <<http://factfinder2.census.gov>>

¹⁰ 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>>

¹¹ U.S. Census Bureau; American Community Survey. 2014 American Community Survey 5-Year Estimates, Tables B10002; generated by AZ FTF; using American FactFinder; <<http://factfinder2.census.gov>>

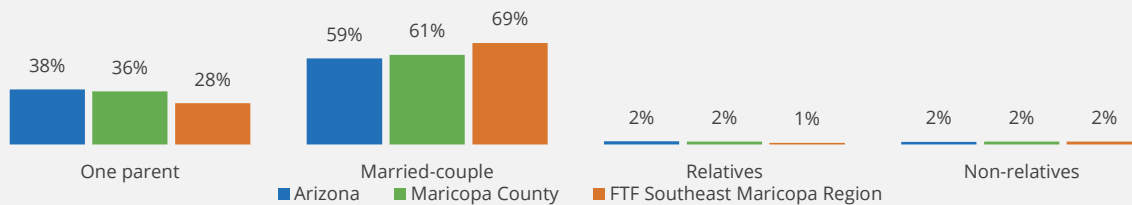
Exhibit 1.17. Household characteristics of children 0-5 by subregion

	Apache Junction (SE Maricopa portion)	Gilbert	East Mesa	West Mesa	Queen Creek (SE Maricopa portion)
Total number of households	1,666	70,123	116,229	67,387	9,332
Households with children 0-5*	8.0% (133)	21.9% (15,333)	13.7% (15,877)	20.1% (13,536)	28.7% (2,682)

U.S. Census Bureau; American Community Survey. 2014 American Community Survey 5-Year Estimates, Tables B11003; generated by AZ FTF; using American FactFinder; <http://factfinder2.census.gov>

*Due to small discrepancies in the way that the boundaries were determined for city data pulled from American FactFinder, city totals may not equal the total given for the Southeast Maricopa Region.

Exhibit 1.18. 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 1.19. Grandchildren under six years living with a grandparent in their household

	Apache Junction (SE Maricopa portion)	Gilbert	East Mesa	West Mesa	Queen Creek (SE Maricopa portion)
Percent of children 0-5 that live in the same household as a grandparent	18.3%	5.8%	10.3%	12.3%	7.7%

U.S. Census Bureau; American Community Survey. 2014 American Community Survey 5-Year Estimates, Tables B10002; generated by AZ FTF; using American FactFinder; <<http://factfinder2.census.gov>>

DEMOGRAPHIC HIGHLIGHTS

Southeast Maricopa is located in the southeast corner of Maricopa County with a growing population of children under the age of six. The ethnic profile of the region is slightly different from the profile of the State of Arizona with a higher percentage of the adult population identifying as White (72%) and 34 percent of children under five who identify as Hispanic or Latino. The majority of households speak English as their primary language and less than 15 percent primarily speak Spanish. The majority of households with children under six are led by married couples, though this varies widely between the different cities. Only three percent of children under six in the region live with relatives or non-relatives. Nine percent live in the same household as their grandparents and half of those are primarily cared for by a grandparent.

Below are key findings that highlight the demographic assets, needs and data-driven considerations for the 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 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, such as healthcare and child care needs for young children.

Needs	Considerations
According to the American Community Survey, most of the children under six living in single-parent households or cared for by grandparents, both of which face additional barriers and difficulties when compared to two parent households, are in Mesa or the SE Maricopa portion of Apache Junction.	Discuss supporting services specifically designed for single-parent and grandparent-led households and targeted in the SE Maricopa portion of Apache Junction and Mesa areas, to help them support the young children in their homes.



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.¹² Additionally, being unemployed or living below the federal poverty level indicates that families have fewer resources to be able to meet their basic needs and support their child's growth and development, such as by having a stable, quality home and being able to provide adequate and nutritional 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.^{13, 14, 15} Poor housing conditions are a strong predictor of emotional and behavioral problems and poor health outcomes.^{16, 17} Housing instability, which includes frequent moves, difficulty paying rent, being evicted or being homeless, is also associated with worse health, academic, and social outcomes.¹⁸ Children who experience housing instability demonstrate higher grade retention, higher high school dropout rates, and lower educational attainment as adults.^{19, 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}

¹² Brooks-Gunn, J., & Duncan, G. J. (1997). The effects of poverty on children. *The future of children*, 55-71.

¹³ <https://www.huduser.gov/portal/periodicals/em/fall14/highlight1.html>

¹⁴ http://www.pewtrusts.org/~media/legacy/uploadedfiles/wwwpewtrustsorg/reports/partnership_for_americas_economic_success/paeshousingreportfinalpdf.pdf

¹⁵ http://www.urban.org/research/publication/negative-effects-instability-child-development-research-synthesis/view/full_report

¹⁶ <https://www.huduser.gov/portal/periodicals/em/fall14/highlight1.html>

¹⁷ <http://www.nchh.org/Portals/0/Contents/Article0286.pdf>

¹⁸ 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

¹⁹ http://www.urban.org/research/publication/negative-effects-instability-child-development-research-synthesis/view/full_report

²⁰ <http://onlinelibrary.wiley.com/doi/10.1111/j.1525-1497.2005.00278.x/full>

²¹ <http://www.feedingamerica.org/hunger-in-america/impact-of-hunger/child-hunger/child-development.html>

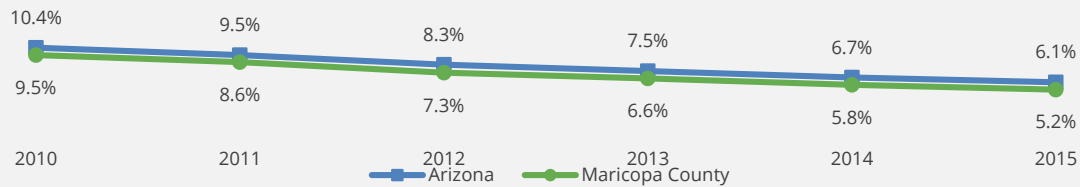
²² Ke, Janice, and Elizabeth Lee Ford-Jones. "Food Insecurity and Hunger: A Review of the Effects on Children's Health and Behaviour." *Paediatrics & Child Health* 20.2 (2015): 89-91. Print.

What the Data Tell Us

Employment Indicators

In Maricopa County the unemployment rate declined between 2010 and 2015 and has consistently been lower than the unemployment rate for Arizona as a whole (see Exhibit 2.1). Within the FTF SE Maricopa Region, the unemployment rates between the different cities vary somewhat. The cities of Queen Creek and Gilbert have unemployment rates that are slightly lower than the unemployment rate in Mesa (see Exhibit 2.2). The number of people in the labor force and the number of people employed has consistently increased in Maricopa County from 2010 through 2015, indicating a healthy and growing local economy (see Exhibit 2.3).

Exhibit 2.1. Average unemployment rates



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

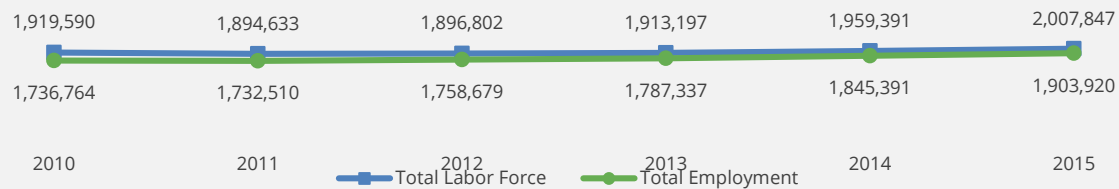
Exhibit 2.2. Average unemployment rates

	Gilbert	Mesa	Queen Creek*
2010	6.5%	9.7%	4.6%
2011	6.5%	8.7%	6.3%
2012	5.4%	7.4%	5.0%
2013	5.1%	6.7%	4.7%
2014	4.6%	5.8%	4.4%
2015	4.2%	5.2%	4.0%

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

*Includes portions of Queen Creek that are outside the FTF SE Maricopa Region.

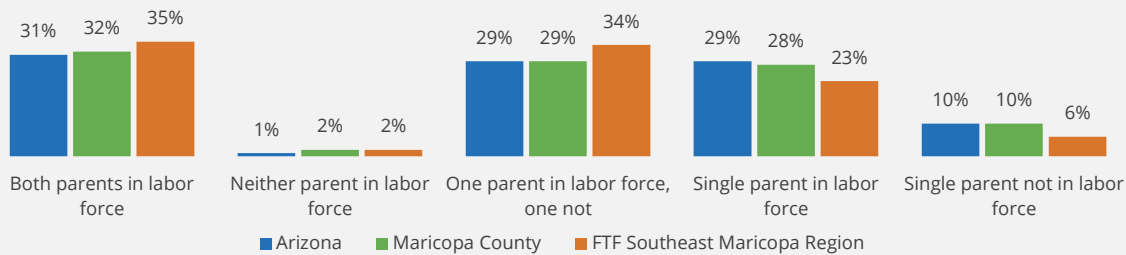
Exhibit 2.3. Number of people in the labor force and employed in Maricopa County



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

In the FTF SE Maricopa Region more than 90 percent of children under age six live in a household where at least one adult is in the labor force. More than 50 percent have either both parents in the labor force or a single parent in the labor force, indicating they have some need for child care (see Exhibit 2.4). In West Mesa, 14 percent of children under age six live in a household where no adult is in the labor force. This compares to eight percent in East Mesa and the SE Maricopa portion of Queen Creek, four percent in Gilbert and zero percent in the SE Maricopa portion of Apache Junction (see Exhibit 2.5).

Exhibit 2.4. 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>>.

Exhibit 2.5. Employment status of parents with children 0-5

	Apache Junction (SE Maricopa portion)	Gilbert	East Mesa	West Mesa	Queen Creek (SE Maricopa portion)
Both parents in labor force	26.1%	42.6%	35.0%	25.8%	37.4%
One parent in labor force, one not	48.9%	39.8%	31.4%	27.6%	42.0%
Neither parent in labor force	0.0%	1.6%	1.3%	2.7%	4.5%
Single parent in labor force	25.0%	14.0%	26.0%	32.9%	12.2%
Single parent not in labor force	0.0%	1.9%	6.2%	11.1%	3.9%

The household type and employment mapped by zip code in Exhibits 2.6 and 2.7 identify the areas of the region that have higher and lower populations of single- and dual-parent households and employment status. The 85202, 85203, and 85212 zip codes have the highest percentage of single-parent households, while 85295 and 85297 have the highest dual-parent households. At least 26 percent of the single parents in 85120, 85207, 85210, and 85298 are unemployed.

Exhibit 2.6. Single-parent households with children under six and employment status by zip code

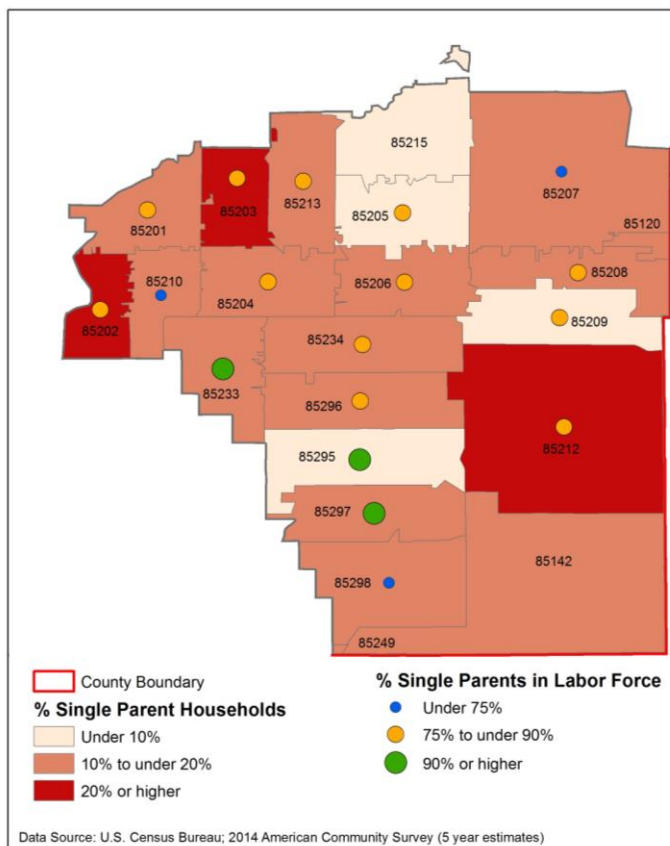
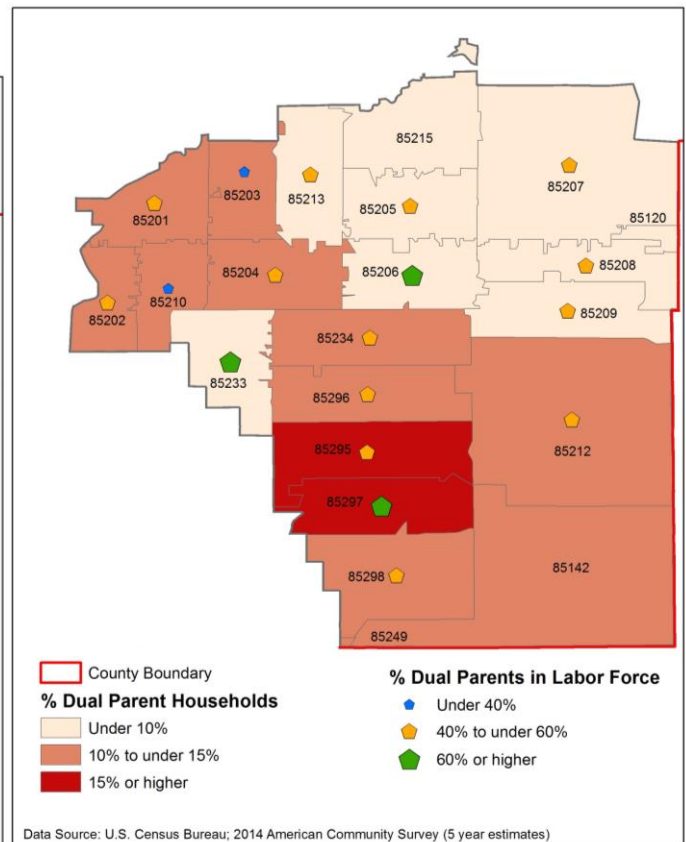


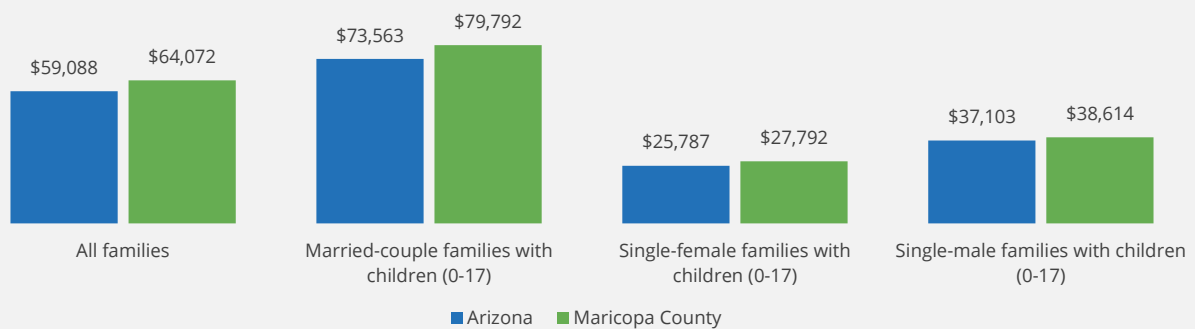
Exhibit 2.7. Dual-parent households with children under six and employment status by zip code



Median Income and Poverty

The annual median income for all families in Maricopa County is just over \$64,000, and is nearly \$5,000 more than the median income statewide. Single-parent families, which comprise over one-quarter of households with children under six, make significantly less on average than married-couple families. Exhibit 2.8 shows the difference in median income for married-couple families, single-female families, and single-male families. Families in Gilbert and Queen Creek, which includes portions outside of the FTF Southeast Maricopa region, have annual median incomes above \$85,000 compared to \$58,000 in Mesa. The differences are even more pronounced when looking at married versus single-parent families across cities in the region (see Exhibit 2.9).

Exhibit 2.8. Median Income for families



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>>.

Exhibit 2.9. Median income for families

	Gilbert	Mesa	Queen Creek City*
All families	\$89,271	\$58,369	\$87,332
Married-couple families with children (0-17)	\$101,106	\$71,145	\$104,455
Single-male families with children (0-17)	\$65,417	\$36,270	\$24,524
Single-female families with children (0-17)	\$44,935	\$25,873	\$57,917

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>>.

*Represents all of Queen Creek, including parts outside of the FTF SE Maricopa Region.

According to a 2012 report published by the Center for Women’s Welfare, the annual income to be self-sufficient in Maricopa County for an adult and infant is \$36,684 and for an adult and preschooler it is \$42,214 (see Exhibit 2.10). The median income for families in Gilbert and Queen Creek is higher than the self-sufficiency standard, but the median income for single-parent families in Mesa is lower than the self-sufficiency for the county. Families who are living with insufficient financial resources are likely to encounter challenges in securing affordable housing, childcare, and nutritious food that may prevent them from living a healthy life.^{23, 24} Living below the self-sufficiency standard is one of the factors that negatively impacts health and well-being, placing children at risk for developmental delays and low academic achievement.²⁵

Exhibit 2.10. Self-Sufficiency standard for Maricopa County

Wage	Adult	Adult + infant	Adult + preschooler	Adult + school-age	Adult + teenager
Hourly	\$10.19	\$17.37	\$19.99	\$17.21	\$13.38
Monthly	\$1,793	\$3,057	\$3,518	\$3,030	\$2,354
Annual	\$21,512	\$36,684	\$42,214	\$36,357	\$28,252

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

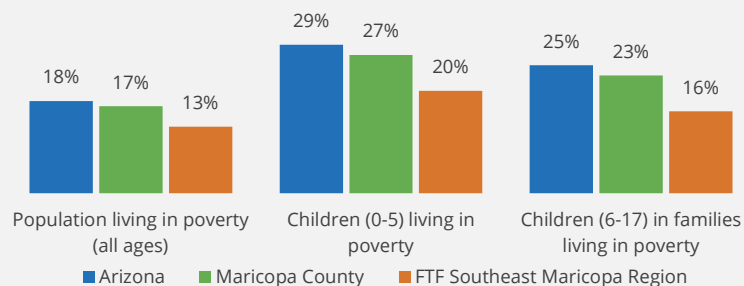
The large number of single-parent families combined with their low median income contributes to a sizable portion of the population in the FTF SE Maricopa Region living in poverty. In the region, 13 percent of the total population and 20 percent of children under age six are living in poverty (see Exhibit 2.11). In West Mesa and the Southeast Maricopa portion of Apache Junction, more than a quarter of children under age six live in poverty. This is considerably more than East Mesa (18%), the Southeast Maricopa portion of Queen Creek (16%), and Gilbert (8%) (see Exhibit 2.12).

²³ Brooks-Gunn, J., & Duncan, G. J. (1997). *The effects of poverty on children. The future of children*, 55-71.

²⁴ McLoyd, V. C. (1998). *Socioeconomic disadvantage and child development. American psychologist*, 53(2), 185.

²⁵ Brooks-Gunn, J., & Duncan, G. J. (1997). *The effects of poverty on children. The future of children*, 55-71.

Exhibit 2.11. Percentage of 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>>.

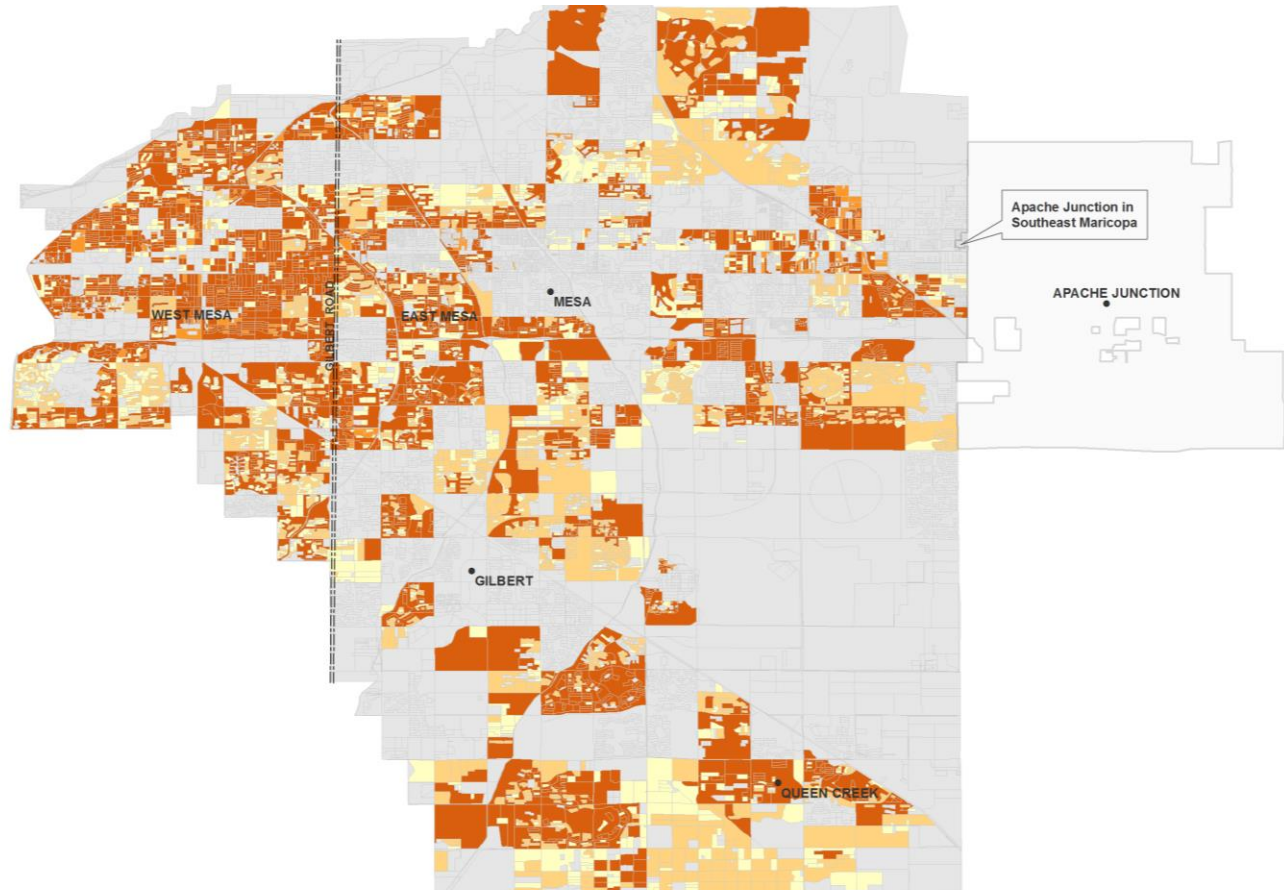
Exhibit 2.12. Percentage of population living in poverty

	Apache Junction (SE Maricopa portion)	Gilbert	East Mesa	West Mesa	Queen Creek (SE Maricopa portion)
Percentage of population in poverty (all ages)	18.4%	6.7%	12.0%	24.3%	9.0%
Percentage of children (0-5) in poverty	27.1%	8.1%	17.5%	38.5%	15.7%

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>>.

The relative population and poverty of areas within the FTF SE Maricopa Region are mapped in Exhibit 2.13. The map identifies cities or towns by both their population and poverty density.

Exhibit 2.13. Map of FTF SE Maricopa Region Population and Poverty



	Legend	# of Census Blocks	Poverty 0-5	Population 0-5	% Poverty
	High Poverty-High Population	2,128	11,132	39,952	28%
	High Poverty-Low Population	681	1,059	2,735	39%
	Low Poverty-High Population	712	310	7,649	4%
	Low Poverty-Low Population	2,098	667	5,551	12%
	No Poverty	7,581	0	12,584	0%
	Total	13,200	13,168	68,471	19%

Note: Census 2010 census block data were utilized for the population of children 0-5. The 2007-2011 American Community Survey (ACS) data were used to obtain poverty estimates and proportionally assign them to census blocks because these estimates align better with the Census 2010 population of children 0-5. To establish the assignment of each geographical area to one of the categories listed above, the region's median number (children 0-5) for all census blocks was determined (census blocks with no children 0-5 were excluded from the analysis). Those census blocks with the number of children 0-5 below the median were assigned to the "low population" category, while census blocks with the number of children 0-5 above the median were assigned to the "high population" category. The same process was independently followed with the poverty indicator to arrive at the "low poverty" and "high poverty" categories (census blocks with "0 poverty" were excluded from the analysis). The combination of categories was ultimately used to assign a geographical area to one of the categories listed above.

Exhibit 2.14 shows the poverty rates for specific zip codes in the FTF SE Maricopa Region. The map shows that zip codes with higher poverty rates also have a higher percentage of children under age six living in the same household as a grandparent.

Exhibit 2.14. Poverty rates and percentage of children living with grandparents by zip code

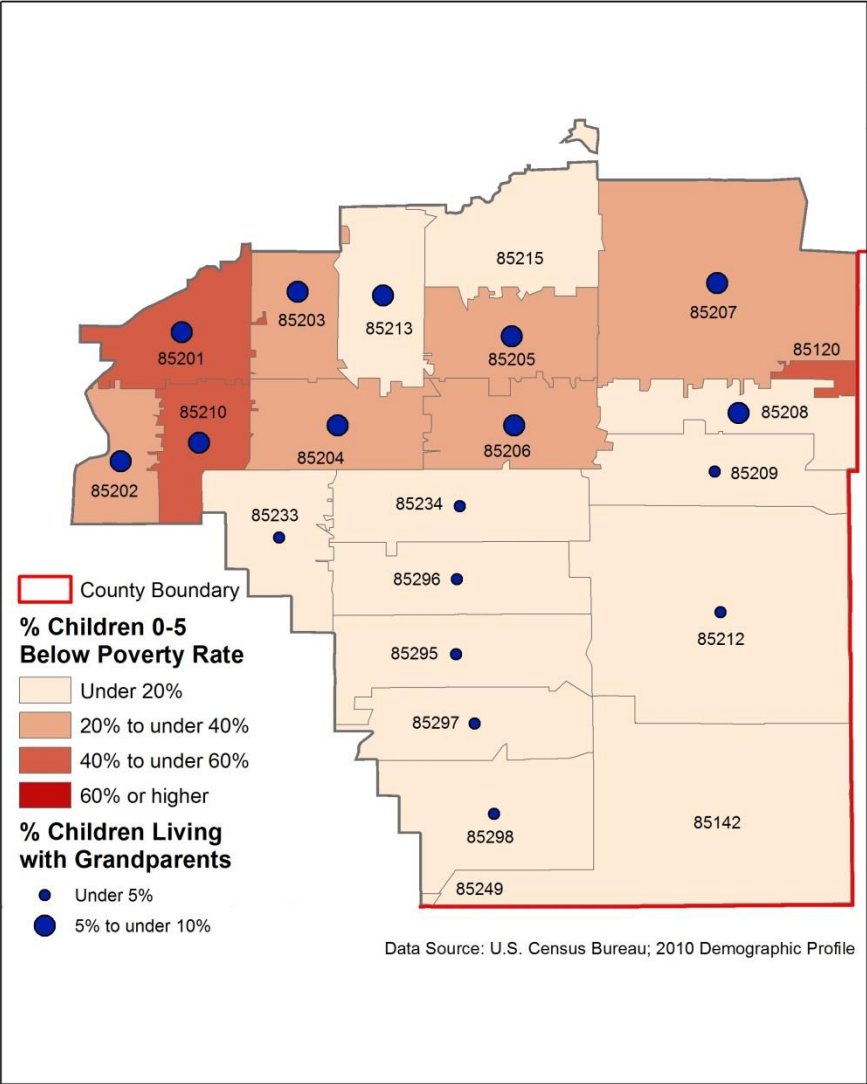


Exhibit 2.15 shows a map of the school districts within the FTF SE Maricopa Region and Exhibit 2.16 shows the percentage of children ages five to 17 living in poverty by school district. As expected based on the large difference in poverty rates in different areas of the region, the school districts in the region have a large range of children age five to 17 living in poverty (see Exhibit 2.16).

Exhibit 2.15. Map of FTF SE Maricopa Region School Districts

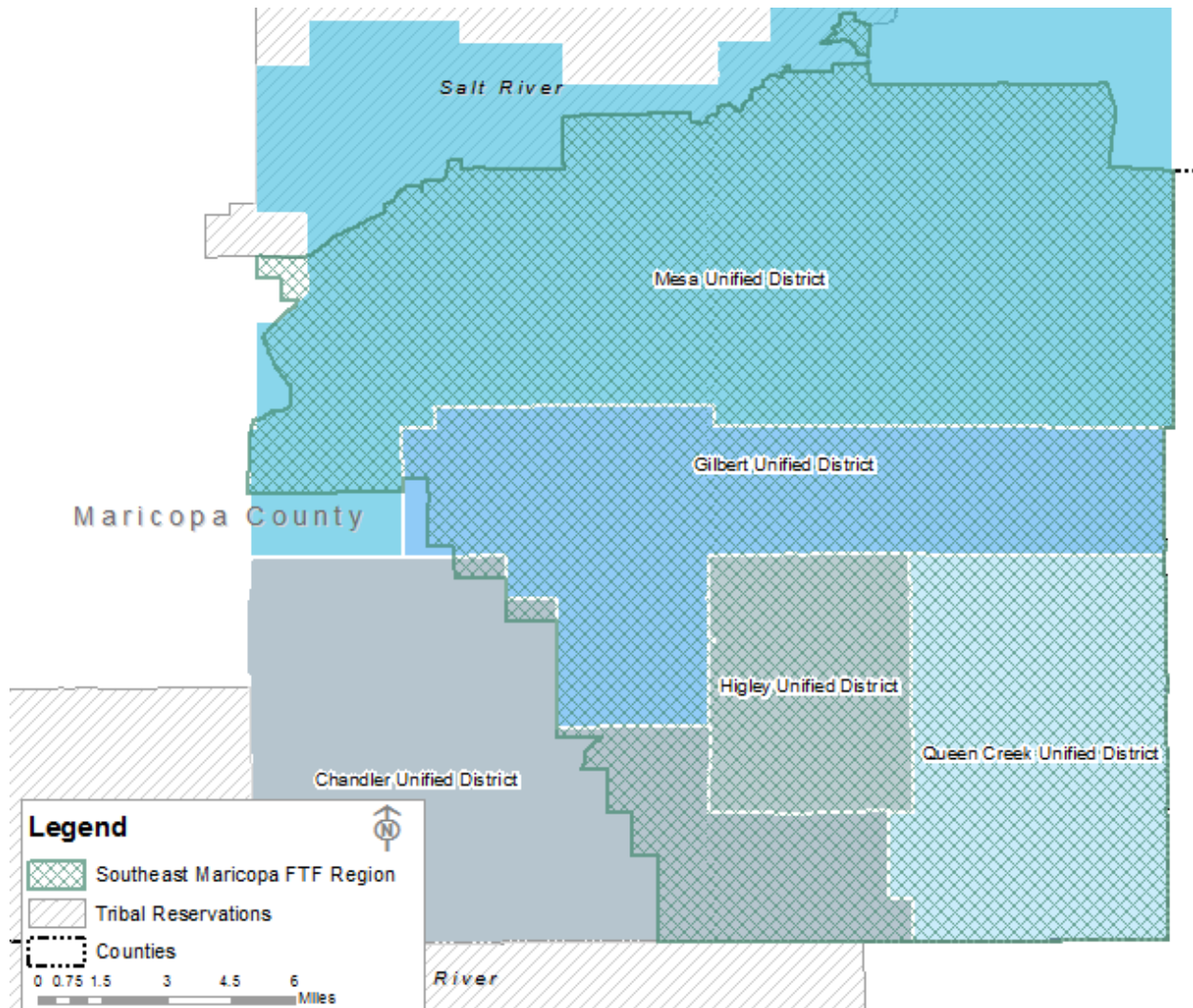


Exhibit 2.16. Children 5 to 17 living in poverty by school district

School district	Estimated percent of children 5 to 17 living in families in poverty
Gilbert Unified District (N=43,787)	9.1%
Higley Unified District (N=15,704)	7.9%
Mesa Unified District (N=82,636)	24.0%
Queen Creek Unified District (N=6,958)	12.5%

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 Maricopa County individuals who identify as White or Asian are least likely to be living in poverty. In contrast people who identify as Hispanic or Latino, American Indian or Alaskan Native, or some other race have poverty rates close to or exceeding 30 percent (see Exhibit 2.17).

Exhibit 2.17. Percentage of population below the federal poverty level by race/ethnicity*

	Arizona	Maricopa County
Black or African-American	24.7%	25.4%
American Indian or Alaskan Native	38.5%	28.2%
Asian	13.7%	12.9%
Native Hawaiian and Other Pacific Islander	27.5%	24.0%
Other Race	29.3%	30.9%
Two or More Races	19.9%	18.1%
White, not Hispanic	11.3%	10.0%
Hispanic or Latino	28.1%	29.4%

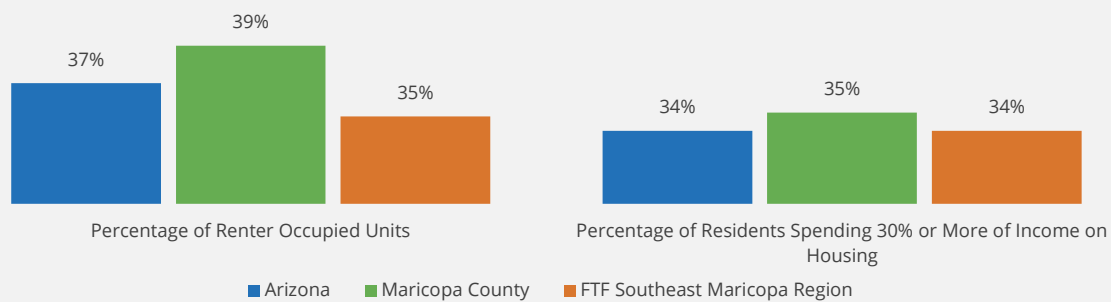
U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B17001B, Table B17001C, Table B17001D, Table B17001E, Table B17001F, Table B17001H, Table B17001I; generated by Harder+Company; using American FactFinder; <<http://factfinder2.census.gov>>.

*Estimates for city and subregional breakdowns are not presented due to the limited sample size for these indicators

Housing and Food Insecurity

In the region, 35 percent of occupied housing units are rented and 34 percent of residents spend 30 percent or more of their income on housing, which is how affordable housing is commonly defined (see Exhibit 2.18). In the FTF SE Maricopa Region the residential foreclosure rate differs widely throughout the area. Maricopa County has a lower foreclosure rate than the state at one in every 1,827 homes, but the city of Queen Creek has a residential foreclosure rate that is more than twice as high at one in every 761 homes (see Exhibit 2.19).

Exhibit 2.18. 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 2.19. Residential foreclosure and pre-foreclosure rates

Location	Foreclosure and pre-foreclosure rates
Arizona	1 in every 1,721
Maricopa County	1 in every 1,827
- Queen Creek (city)	1 in every 761
- Gilbert	1 in every 1,622
- Mesa	1 in every 2,100

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

In Maricopa County 13 percent of the population has low access to grocery stores, compared to 19 percent in Arizona. Along with most of the population having access to grocery stores, in Maricopa County there are similar amounts of grocery stores, fast food restaurants, SNAP-authorized stores, and WIC-authorized stores as the state as a whole (see Exhibit 2.20). Although residents in Maricopa have greater access to stores than many other places in the state, there is still a substantial proportion of the population that is food insecure, defined as limited or uncertain access to adequate food. In Maricopa County, 25 percent of children under 18 are food insecure (see Exhibit 2.21). 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.^{26, 27}



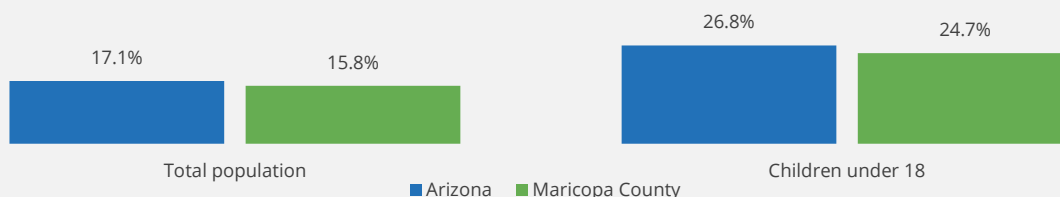
In 2010, **13%** of the Maricopa County population had low access to grocery stores.

Exhibit 2.20. Food accessibility indicators

	Year	Arizona	Maricopa County
Percentage of population with low access to grocery stores	2010	19.0%	12.9%
Grocery stores per 1,000 people	2012	0.1259	0.1251
Fast food restaurants per 1,000 people	2012	0.6467	0.6996
SNAP-authorized stores per 1,000 people	2012	0.5596	0.5313
WIC-authorized stores per 1,000 people	2012	0.1106	0.1063

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 2.21. Food insecurity rates



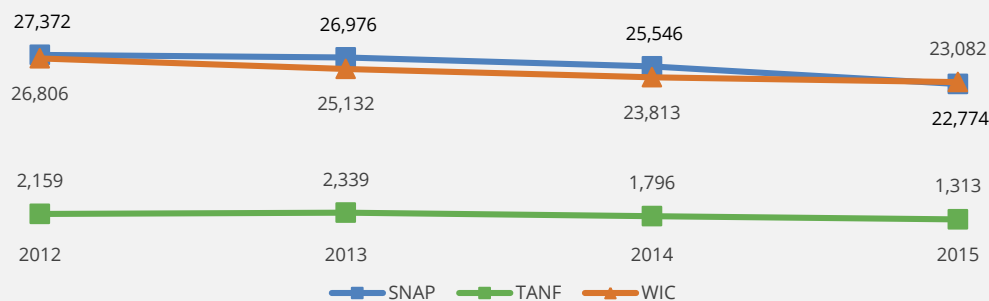
Gundersen, C., A. Dewey, A. Crumbaugh, M. Kato & E. Engelhard. Map the Meal Gap 2016: Food Insecurity and Child Food Insecurity Estimates at the County Level. Feeding America, 2016.

²⁶ Feeding America (2016). Child Development. Retrieved from <http://www.feedingamerica.org/hunger-in-america/impact-of-hunger/child-hunger/child-development.html>

²⁷ 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.

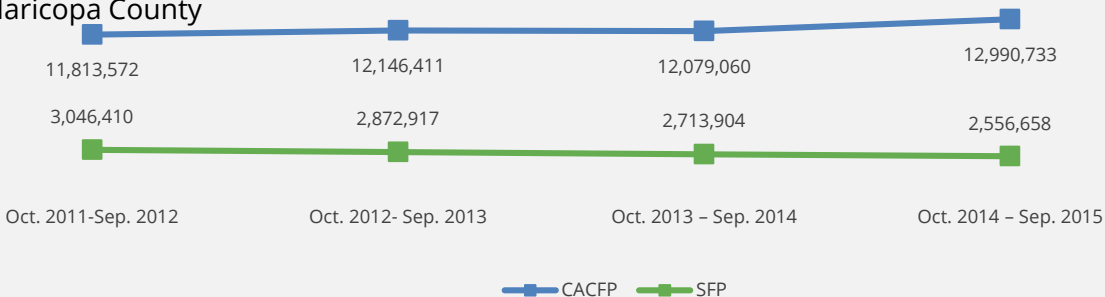
There are several federal and local programs and services aimed at providing families with the food they need, including the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Women, Infants, and Children (WIC), Child and Adult Food Care Program (CACFP), Summer Food Program (SFP), and free and reduced-price lunch programs for children in schools. Despite the prevalence of these programs, in recent years the number of children and families receiving assistance has decreased. Federal programs such as SNAP, TANF, and WIC have decreased in recent years due to the expiration of benefit increases instituted during the recession.²⁸ These decreases come even as the number of families living in poverty has increased nationally.²⁹ Exhibit 2.22 and Exhibit 2.23 show that the number of children and families receiving assistance has decreased in recent years. More information about students eligible for free and reduced-price lunch is available in Appendix 2.1.

Exhibit 2.22. Number of children served in the FTF Southeast Maricopa Region by SNAP, TANF and WIC



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

Exhibit 2.23. Number of meals provided by CACFP and SFP to children and adults in Maricopa County



Arizona Department of Education (2015). Child and Adult Care Food Program. Provided by AZ FTF.
 Arizona Department of Education (2015). Summer Food Program. Provided by AZ FTF.

²⁸ 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>

²⁹ 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 CHARACTERISTICS HIGHLIGHTS

The unemployment rate in Maricopa County has been consistently less than the state average and has been declining over the past several years. Single-parent families who are working earn significantly less, on average, than dual-parent households, and families in Gilbert and Queen Creek have much higher median incomes than Mesa. Additionally, 20 percent of children under age six in the region live in poverty, again mostly from Mesa and the SE Maricopa portion of Apache Junction. One in three residents live without affordable housing in the region and the residential foreclosure rate is more than twice as high in Queen Creek as the state. And although the county's access to food is better than the statewide rate, one-quarter of the children under 18 in the county are still food insecure.

Below are key findings that highlight the economic assets, needs, and data-driven considerations for the 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
SE Maricopa region generally has higher employment and median incomes and lower poverty rates than the state, though this varies among subregions.	Consider encouraging stakeholders to target job training and employment programs to the subregions with higher need to help increase employment and median incomes.

Needs	Considerations
According to the American Community Survey and Feeding America, about 20% of children in the region live in poverty and 34% of residents in the region spend more than 30% of their income on housing.	Encourage community awareness of social service resources in the region, including housing support.
Based on the US Census, zip codes with the highest poverty rates also have more grandparents raising their grandchildren.	Promote supports and resources that can help subsidize child care and other expenses for grandparents raising their grandchildren.



3. Educational Indicators

Why it Matters

Research shows that children who participate in early care and education programs are more likely to perform better on future educational indicators than children who do not.^{30, 31} More specifically, the research shows that children enrolled in quality early care and education programs are more likely to experience improved performance on standardized tests and less likely to drop out or fail in comparison to their counterparts. This in turn increases their likelihood of graduating from high school, earning higher monthly earnings, and owning a home. Essentially, a child's enrollment in early learning provides short-term and long-term benefits that will enable the child to successfully transition and prosper in adulthood.

Educational indicators that affect student outcomes and are likely related to participation in early care and education include, but are not limited to, school attendance, proficiency exams, grades, graduation and dropout rates, and educational attainment. For example, poor attendance in school affects student outcomes because it limits children from gaining knowledge and thriving in an academic setting. Research indicates an association between high school dropout rates and poor attendance as early as kindergarten; on average, dropouts have missed 124 days of school by the time they reach 8th grade.³² In addition, irregular attendance has an effect on school budgets and could potentially lead to fewer funds for essential classroom needs.³³ Research has also shown that students dropping out of high school have an increased likelihood of earning less than high school graduates, being unemployed, receiving public assistance, and a higher chance of being incarcerated, therefore likely to confront more barriers while raising a family.³⁴

What the Data Tell Us

Student Attendance

Between 2014 and 2015, the state, Maricopa County, and the FTF SE Maricopa Region experienced an increase in the percentage of students missing ten or more days of school (see Exhibit 3.1). A lower percentage of students in the region missed ten or more days of school than in the county or state as a whole. It can be observed that the higher the grade level, the lower the rate of absences, suggesting that parents are more willing to let their children miss school in earlier years. There are many potential explanations for such findings, including that younger children may get sick more frequently than older children or that the perception of the value of education changes as children grow.

³⁰ Naudeau, S. (2011). *Investing in young children: An early childhood development guide for policy dialogue and project preparation*. World Bank Publications.

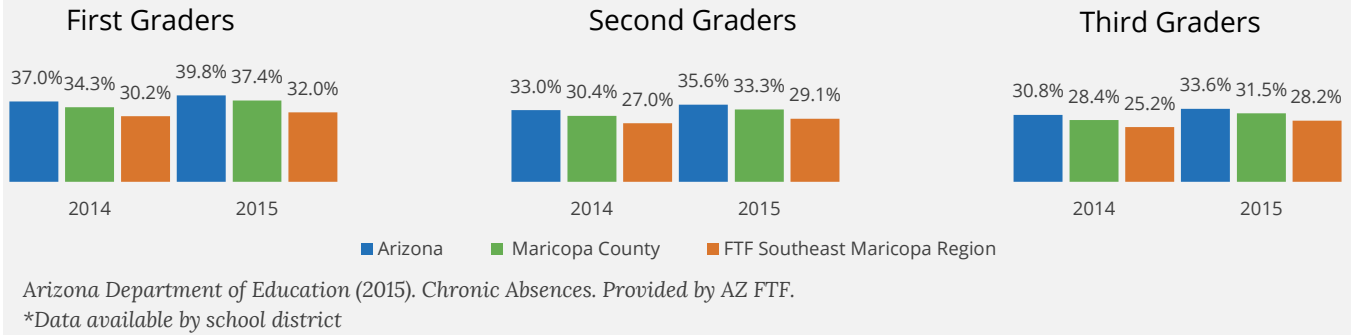
³¹ Reynolds, A. J., Temple, J. A., Ou, S. R., Robertson, D. L., Merskv, J. P., Tomitzes, J. W., & Niles, M. D. (2007). Effects of a school-based, early childhood intervention on adult health and well-being: A 19-year follow-up of low-income families. *Archives of Pediatrics & Adolescent Medicine*, 161(8), 730-739.

³² Why attendance matters. (2016, June 9). Retrieved from <http://www.areaschools.org/ak/articles/school-attendance-issues/>

³³ 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>

³⁴ 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

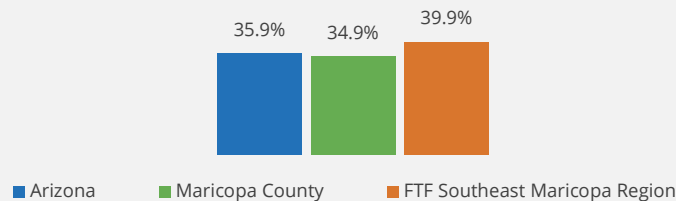
Exhibit 3.1. Students absent 10 or more days of school



Early Achievement

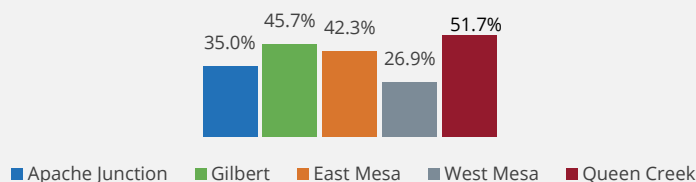
The FTF SE Maricopa Region also had a larger percentage of children between the ages of three and four who are enrolled in nursery school, preschool, or kindergarten than the state and county (see Exhibit 3.2). At the subregional level, the percentage of children between the ages of three and four who are enrolled in early education is highest in Queen Creek with a 52 percent enrollment rate, followed by Gilbert with 46 percent (see Exhibit 3.3).

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



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>>.

Exhibit 3.3. Children ages 3-4 enrolled in nursery school, preschool, or kindergarten in 2014 by subregion

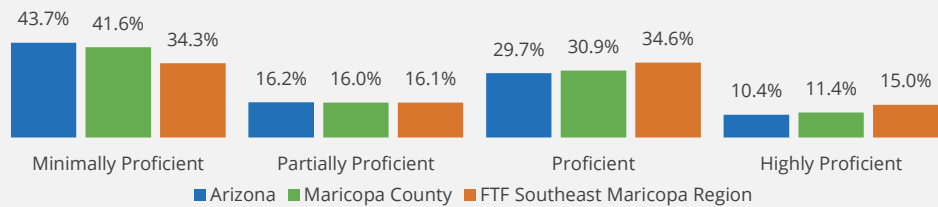


U.S. Census Bureau American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B14003; generated by AZ FTF; using American Fact Finder; <<http://factfinder2.census.gov>>.

³⁵ Andrews, R. I., Jaraowski, P., & Kuhne, K. (2012). The effects of Texas's targeted pre-kindergarten program on academic performance (No. w18598). National Bureau of Economic Research.

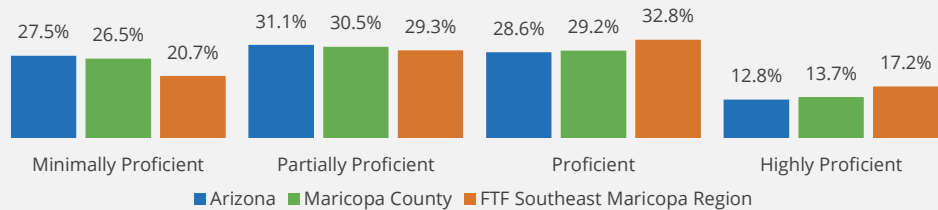
In Arizona, the Department of Education (ADE) uses AzMERIT (which replaced AIMS in the 2014-2015 school year), a statewide achievement test for English Language Arts and Mathematics, to assess academic proficiencies. Students who receive a proficient or highly proficient score are considered adequately prepared for success in the next grade. In the FTF SE Maricopa Region, half of children (50%) in the third grade scored “proficient” or “highly proficient” on the English Language Arts (ELA) assessment test (see Exhibit 3.4). This is higher in comparison to Arizona by ten percent and higher than Maricopa County by eight percent. Similarly, half of children (50%) in the region also scored “proficient” or “highly proficient” on the AZMERIT math assessment test, which is nine percent higher than Arizona and seven percent higher than Maricopa County (see Exhibit 3.5). Although children in the third grade scored similarly on both assessment tests, the remaining half of the region is not meeting the standard for either test.

Exhibit 3.4. 2015 AzMERIT English Language Arts assessment results for third grade students



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

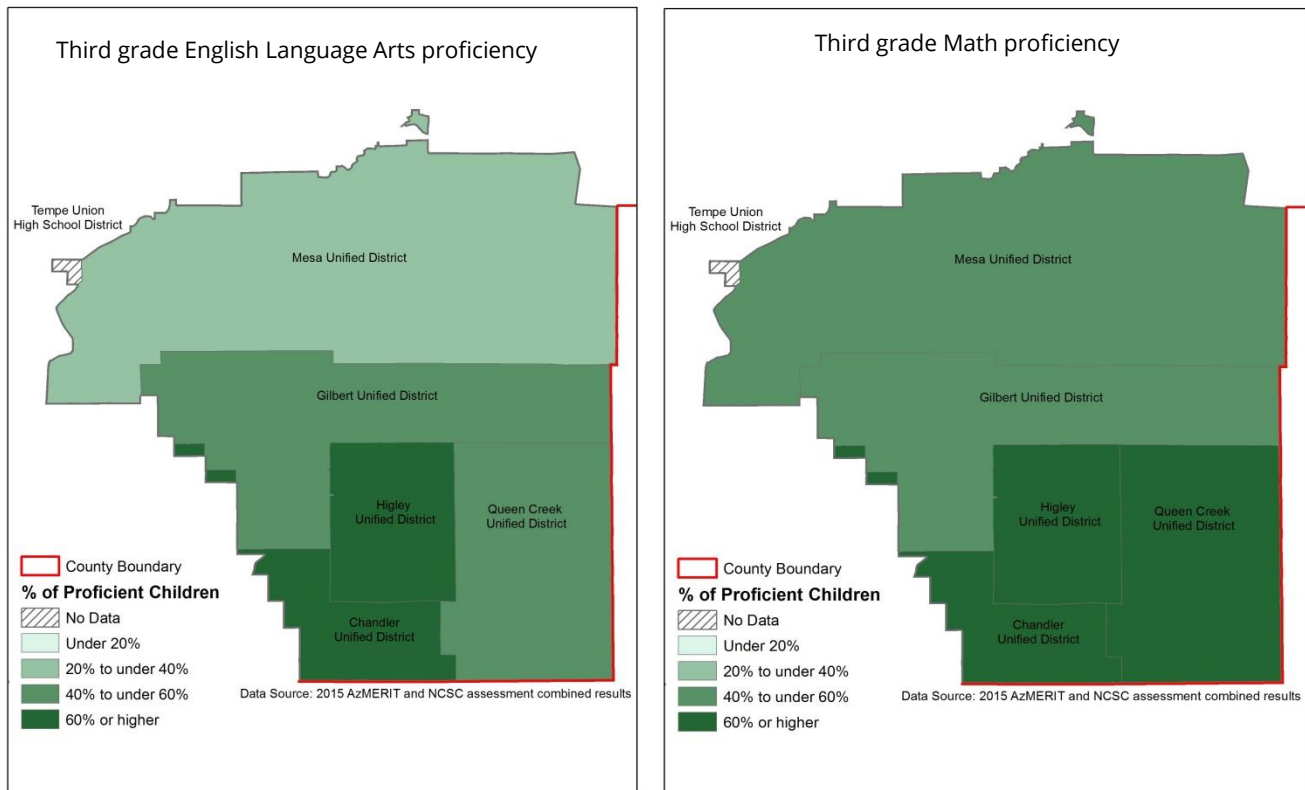
Exhibit 3.5. 2015 AzMERIT Math Assessment results for 3rd grade students



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

The third grade proficiency data available, mapped by school district, indicates that the districts towards the southeast part of the region have higher percentages of children proficient in ELA while the school districts in the northern parts of the region have lower percentages of children proficient in ELA (see Exhibit 3.6). Additionally, the southern school districts have higher percentages of children proficient in math than most of the northern school districts. Chandler District and Higley Unified District have the highest percentage of children proficient in both math and English while Gilbert Unified District and Mesa Unified District report the lowest percentage of children proficient in math and ELA.

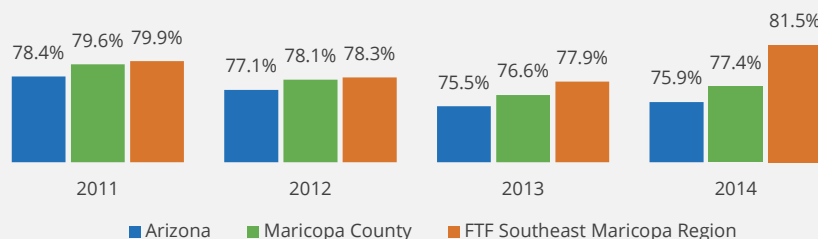
Exhibit 3.6. Geographic representation of third grade English and math proficiency by school district



High School Graduation & Dropout Rates

From 2011 to 2014, the FTF SE Maricopa Region experienced a slight increase in the percentage of students who graduated high school (see Exhibits 3.7 and 3.8). In comparison, the state and Maricopa County experienced a slight decrease. By 2014, the percentage of students graduating was highest in the FTF SE Maricopa Region at an 82 to 86 percent completion rate. The high graduation rates may be due to the flexibility that the schools provide their students, such as allowing students to work at their own pace or to complete their work online. This may impact the region's dropout rate which was two percent lower than the state and one percent lower than Maricopa County in 2015 (see Exhibit 3.9).

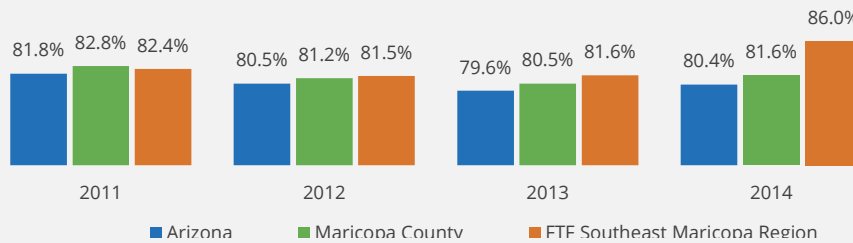
Exhibit 3.7. 2011-2014 High school graduation rates: 4-year cohort



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

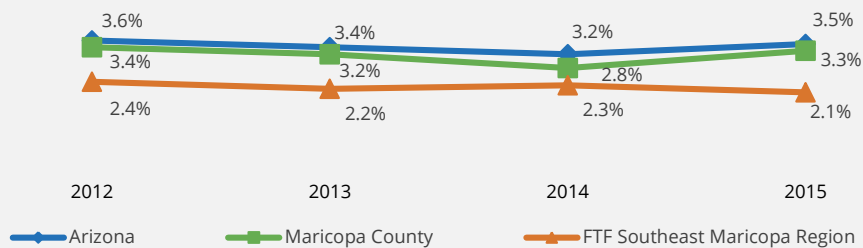
**The four-year graduation rate counts a student who graduates with a regular high school diploma in four years or less as a high school graduate in his or her original cohort

Exhibit 3.8. 2011-2014 High school graduation rates: 5-year cohort



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

Exhibit 3.9. 2012-2015 High school dropout rates

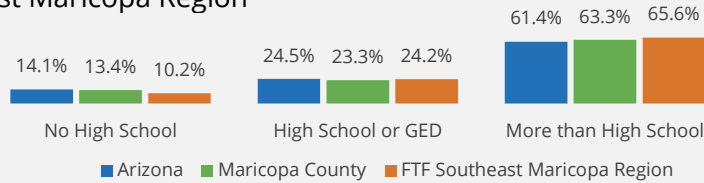


Arizona Department of Education (2014). Graduation Rate 2018 Cycle. Provided by AZ FTF.

Educational Attainment

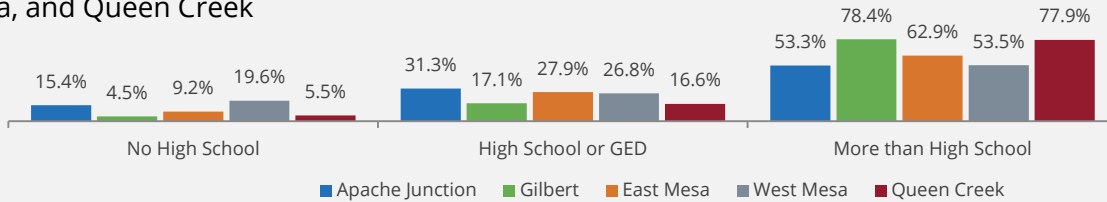
In the FTF SE Maricopa Region, 90 percent of adults 25 and older have completed at least a high school education, more than the state or county (see Exhibit 3.10). At the subregional level, Gilbert and Queen Creek have the highest high school completion rate at 96 percent (see Exhibit 3.11). More than 15 percent of adults 25 and older in Apache Junction and West Mesa do not have a high school diploma or GED.

Exhibit 3.10. 2014 Educational attainment of adults 25 and older in Arizona, Maricopa County, and the FTF Southeast Maricopa Region



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

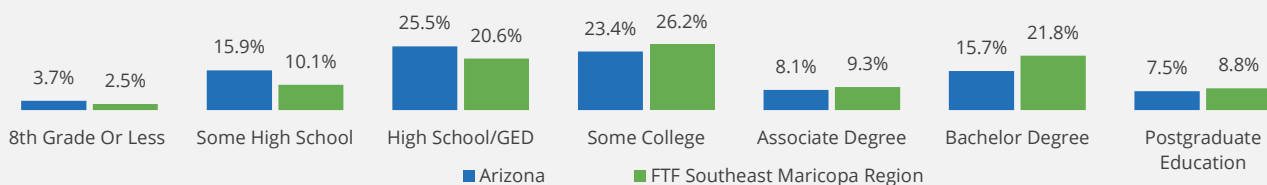
Exhibit 3.11. 2014 Educational attainment of adults 25 and older in Apache Junction, Gilbert, Mesa, and Queen Creek



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

Similarly, the percentage of mothers who completed at least a high school education in the FTF SE Maricopa Region was 87 percent, higher than the state (80%) (see Exhibit 3.12). To see more about school indicators such as 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 3.12. 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

A child’s development during their first five years of life makes an impact on their performance in future educational endeavors. Overall, the FTF SE Maricopa Region is performing better than the state or county on many education indicators. Student absences are lower in the region than in Arizona or Maricopa County, though increasing in all three. Additionally, about 40 percent of preschool-age children are enrolled in early education and about 50 percent of third-grade students in the FTF SE Maricopa Region are scoring proficiently on the math and English Language Arts (ELA) assessments, more than the state or county. The region experienced an increase in the rate of students graduating from high school, while the state and county experienced a decrease. Less than ten percent of adults 25 and older in the region do not have a high school education and only 13 percent of mothers do not have a high school education in the region.

Below are key findings that highlight the educational assets, needs, and data-driven considerations for the SE Maricopa 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
According to the American Community Survey, the high school graduation rates and the average educational attainment level of adults and parents in the region are high, though lower in the SE Maricopa portion of Apache Junction and West Mesa.	Consider supporting programs for parents, such as peer support or mentoring programs, to support each other and share knowledge and attitudes around the importance of education, targeting teen parents or parents without a high school degree, especially in the SE Maricopa portion of Apache Junction and West Mesa.

Needs	Considerations
AzMERIT reports from the Arizona Department of Education show that half of third graders are not meeting proficiency standards for English Language Arts (50%) and Math (50%), especially in Mesa and Gilbert Unified School Districts.	Increase parent outreach and 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) consists of educational programs and strategies designed to improve future school performance for children under the age of eight.³⁶ 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.^{36, 37} Research also shows that children's participation in high-quality learning environments leads to higher educational achievement later in life. Children who participate in early care and education 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.^{38, 39} The quality and type of care provided to children also significantly influence the development of social and behavioral skills.⁴⁰

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.⁴¹ On average, services that are delivered in the home have an adult-to-child ratio between 1:5 and 1:6.⁴² 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 may impact the ability of child care centers to care for children and limit the opportunities for families to access child care services but also allow centers to maintain quality care. The requirements also make it difficult to track the number of vacancies and the total number of children enrolled, specifically because this 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 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 compensation and retention of ECE professionals, costs of child care and availability of child care subsidies or scholarships, and capacity to serve children with special needs. Research shows that investments in early childhood programs yields long-term benefits and can reduce crime rates, increase earnings, and encourage education.⁴³ In addition, the research also shows that investments in

36 Early Childhood Education. (2016, September 06). Retrieved from <http://k6educators.about.com/od/educationallossary/a/earlychildhood.htm>

37 Early Childhood Education. (n.d.). Retrieved from <https://teach.com/where/levels-of-schooling/early-childhood-education/>

38 Reynolds, A. I., Temple, J. A., Ou, S. R., Robertson, D. L., Mersky, J. P., Tomitzes, 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.

39 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.

40 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>

41 De Schimmer, E. I., Marianne Riksen-Walraven, I., & 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.

42 Child Care Resource and Referral (CCR&R). Meeting Arizona's Childcare Needs: Quality Indicators. Retrieved from <http://www.arizonachildcare.org/childcare-indicators.html?lang=en>

43 Campbell, F., Conti, G., Heckman, J. J., Moon, S. H., Pinto, R., Pungello, E., & Pan, Y. (2014). Early childhood investments substantially boost adult health. *Science*, 343(6178), 1478-1485.

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

What the Data Tell Us

There are 319 early care and education centers and homes⁴⁴ with a capacity of 26,954 children in the FTF SE Maricopa Region. Although the capacity is determined by the square footage of the facility, the facility may not always serve the amount of children they are licensed to serve. The amount of children served mainly depends on the center's ability to meet the adult-to-child ratio, which varies by the child's age, and availability of staff in order to be in compliance with licensing requirements.

As previously mentioned, 40 percent of children between the ages of three and four participated in nursery school, preschool, or kindergarten in the FTF SE Maricopa Region (see Exhibit 3.2). This is lower than the 58% assumed to need child care since all adults in the household are employed (see Exhibit 2.4). 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.⁴⁵

Early care and education teachers 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 partners 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.⁴⁶ However, a teacher's ability to provide quality care and education can depend on many factors. As previously mentioned, Arizona pays its teachers one of the lowest annual salaries. This may help explain why almost half of teachers (45%) maintain their employment for less than five years.⁴⁷ The exception is the 71 percent of Head Start teachers who stay five or more years, which may be because Head Start teachers are paid the highest of all providers.⁴⁸ 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.⁴⁹ 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 in Head Start.⁵⁰ In addition, Head Start children are more likely to improve their social skills, impulse

⁴⁴ Arizona Department of Economic Security (2015). *Child care Providers and Capacity*. Provided by AZ FTF.

⁴⁵ 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§ionid=353>

⁴⁶ Bano, N., Ansari, M., & Ganai, 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.

⁴⁷ First Things First – Arizona's Unknown Education Issue (2013). *Early Learning Workforce Trends*. Provided by AZ FTF.

⁴⁸ IBID.

⁴⁹ Head Start Programs. (2016, August 15). Retrieved from <http://www.acf.hhs.gov/ohs/about/head-start>

⁵⁰ Head Start impact study: Final report. (2010, January). Retrieved from http://www.acf.hhs.gov/sites/default/files/opre/executive_summary_final.pdf

control, and approaches to learning while concurrently decreasing their problem behaviors—becoming less aggressive and hyperactive over the course of a year.⁵¹

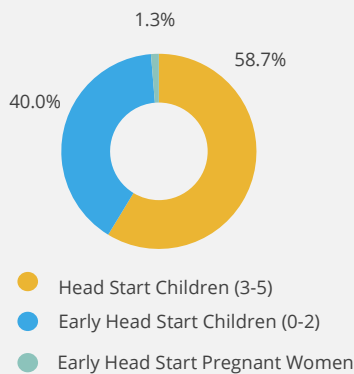
As of 2016, there were two Head Start and five Early Head Start programs covering the cities of Gilbert, Mesa, and Queen Creek as well as other cities outside the FTF SE Maricopa Region. Although the majority of centers were traditional, one was a Migrant Head Start center and the other was a Migrant Early Head Start center. The classification “migrant” indicates that the center caters to migrant farmworker families who tend to work nontraditional hours or move frequently.⁵² Grantees for the programs include County of Maricopa, Maricopa County Human Services, Chicanos Por La Causa, Inc., and Child Crisis Arizona. The data presented in this section are aggregated for all Head Start and Early Head Start programs funded by these grantees.

In 2016, there was a cumulative total of 2,961 children enrolled in Head Start and Early Head Start programs, including Migrant Head Start and Migrant Early Head Start. Of those enrolled, about 59 percent were Head Start Children and 40 percent were Early Head Start Children (see Exhibit 4.1). Close to 35 percent of children enrolled in Head Start were four years old (see Exhibit 4.2). The lower enrollment rates of younger children may be 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.

⁵¹ Aikens, N., Kopack Klein, A., Tarullo, L. & West, 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.

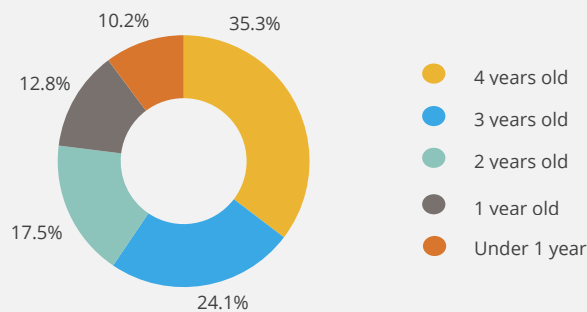
⁵² Targeting Vulnerable Populations . Retrieved from http://www.diversitydatakids.org/files/Policy/Head%20Start/Logic/Targeting%20Vulnerable%20Populations_Migrant%20and%20Seasonal%20Head%20Start.pdf

Exhibit 4.1. Cumulative enrollment in Head Start and Early Head Start programs in FY 2015-2016*



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

Exhibit 4.2. Cumulative enrollment of children in Head Start and Early Head Start by age in FY 2015-2016*

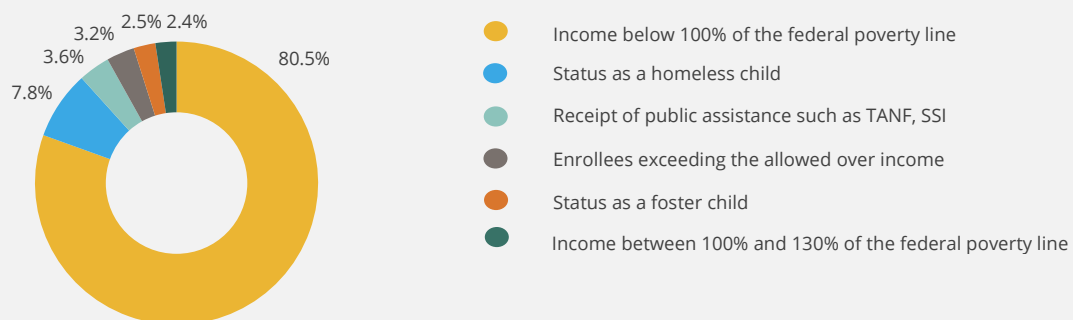


Office of Head Start (2016). Head Start Data. Retrieved from <https://hses.ohs.acf.hhs.gov/pir/>
*Count of children five years and older is zero

* Data presented includes all programs funded by the County of Maricopa, Maricopa County Human Services, Chicanos Por La Causa, Inc., and Child Crisis Arizona.

Eighty-one percent of children and pregnant women who were eligible for Head Start or Early Head Start qualified because the household income was below 100 percent of the federal poverty level (see Exhibit 4.3). Those whose income exceeded 130 percent of the federal poverty line are eligible to receive services if spots are available after all income-eligible children are enrolled. Three percent of people whose income exceeded 130 percent of the federal poverty line were enrolled in Head Start and Early Head Start (HS/EHS) programs. Although low-income families benefit from their qualification for free early education services through Head Start, there are likely many families that lie just outside of the qualifying income brackets yet cannot afford other quality early education programs. Children with disabilities typically make up 10% of HS/EHS enrollment as well and can be enrolled regardless of income level.

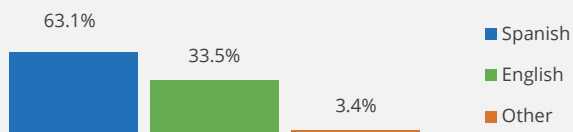
Exhibit 4.3. Eligibility status in Head Start and Early Head Start programs in FY 2015-2016*



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

* Data presented includes all programs funded by the County of Maricopa, Maricopa County Human Services, Chicanos Por La Causa, Inc., and Child Crisis Arizona.

Exhibit 4.4. 2016 Primary language for children/pregnant women enrolled in Head Start and Early Head Start programs in FY 2015-2016*



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

* Data presented includes all programs funded by the County of Maricopa, Maricopa County Human Services, Chicanos Por La Causa, Inc., and Child Crisis Arizona.

Quality of Early Care and Education

Quality First is a signature program of First Things First that is designed to improve the quality of early learning for children birth to age five. Quality First partners with early care and education providers across Arizona to provide coaching and funding that is meant to improve the quality of their services. Quality First implemented a statewide standard of quality for early care along with star ratings. The star ratings allow parents to easily take quality into consideration when deciding on care providers. The star ratings range from one to five indicating the level of quality and attainment of quality standards.⁵³

Quality First Star Rating

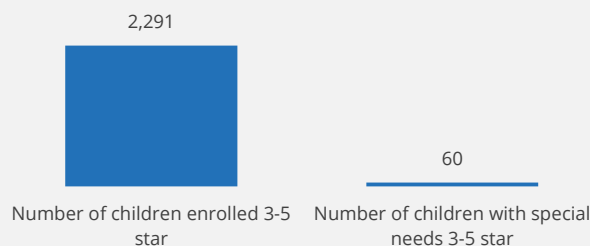
★★★★★	Highest Quality	Far exceeds quality standards
★★★★	Quality Plus	Exceeds quality standards
★★★	Quality	Meets quality standards
★★	Progressing Star	Approaching quality standards
★	Rising Star	Committed to quality improvement
	No Rating	Program is enrolled in Quality First but does not yet have a public rating

¹Arizona First Things First (October 2016). Quality First.

In the FTF SE Maricopa Region, 2,291 children are enrolled in three- to five-star centers and homes and of those, 60 children have special needs (see Exhibit 4.5). For additional data on Quality First star ratings for centers and providers, see Appendix 4.8.

⁵³ Arizona First Things First (October 2016). Quality First.

Exhibit 4.5. Quality First Enrollment by Quality First Star Ratings



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

Costs of Child Care & Access

In addition to supporting improvements in the quality of child care settings, First Things First provides scholarships for children from low-income families to attend quality child care 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.⁴⁵ 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 spending time away from work.

Across the state and Maricopa County, licensed centers have the highest cost per day, certified group homes have the second highest cost per day, and approved family homes have the lowest cost per day (see Exhibit 4.6). The median cost per day of licensed centers and certified group homes in Maricopa County is slightly higher than the state while approved family homes in the county have a lower 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.

Based on the median cost per day, the median cost of child care per year for one infant in District 1 is approximately \$11,489 a year for licensed centers, \$7,800 a year for certified group homes, and \$5,200 for approved family homes. Compared against the median income of husband-wife families in Maricopa with children under 18 (see Exhibit 2.8), licensed centers comprise approximately 14 percent of the median income, certified group homes comprise nearly ten percent of the median income, and approved family homes comprise nearly seven percent of the median income.

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

	Arizona	District 1**
Cost for one infant Licensed Centers	\$42.00	\$44.19
Cost for one infant Approved Family Homes	\$22.00	\$20.00
Cost for one infant Certified Group Homes	\$27.00	\$30.00
Cost for one child (1-2) Licensed Centers	\$38.00	\$40.00
Cost for one child (1-2) Approved Family Homes	\$20.00	\$20.00
Cost for one child (1-2) Certified Group Homes	\$25.00	\$27.00
Cost for one child (3-5) Licensed Centers	\$33.00	\$35.00
Cost for one child (3-5) Approved Family Homes	\$20.00	\$16.00
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.

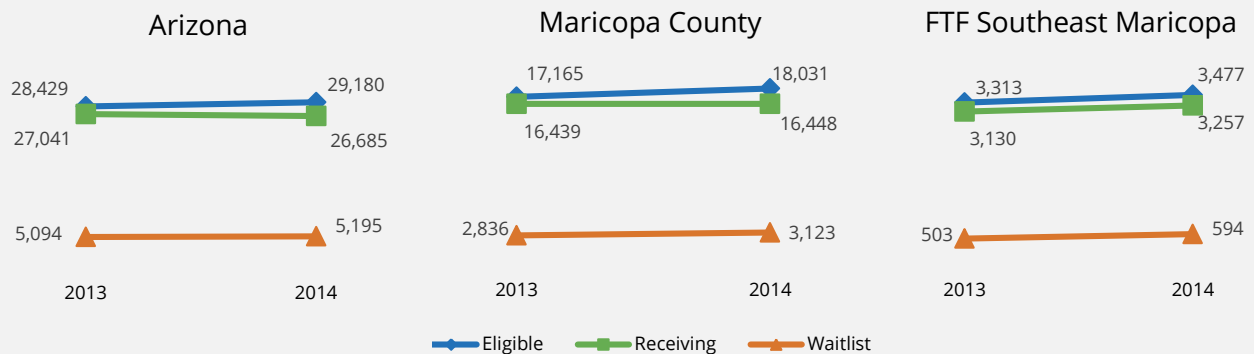
*Data are not available for FTF Region

**District 1 represents Maricopa County

The median cost per year of child care comprises an even higher proportion of the median income for single families with children under 18 and is considerably higher for single-female families compared to single-male families (see Exhibit 2.8). Based on the median income of single-female families in the county, the cost of licensed centers make up nearly 41 percent of their median income, certified group homes make up 28 percent of their median incomes, and approved family homes make up almost 19 percent of their median income. High costs can be a barrier in affording quality child care, especially for single-female families.

From 2013-2014, the state, Maricopa County, and the FTF SE Maricopa Region experienced an increase in the number of children who are eligible for child care subsidies (see Exhibit 4.7). Similarly, the number of children receiving services increased in Maricopa County and the FTF SE Maricopa Region while the state experienced a decrease. In addition, in the state, Maricopa County, and the FTF SE Maricopa, a higher number of children are remaining on the waitlist.

Exhibit 4.7. 2013-2014 Number of children eligible, receiving, or on the waitlist for child care subsidies



Arizona Department of Economic Security (2015). Child Care (CCA) Subsidies. 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.⁵⁴ 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-two) and their families receive early intervention services under IDEA Part C. Children and youth (ages three-21) receive special education and related services under IDEA Part B.⁵⁵

The Arizona Early Intervention Program (AzEIP) is a statewide system that offers services and assistance to families and their children with disabilities or delays under the age of three. The purpose of the program is to intervene at an early stage to help children develop to their highest potential.⁵⁶ Research shows that children and youth with mild intellectual disabilities are behind in academic skills compared to their peers.⁵⁷ 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 36 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.⁵⁸

From 2013-2015, the number of AzEIP referrals increased for the state, Maricopa County and the FTF SE Maricopa Region, and the number of services nearly doubled (see Exhibit 4.8 and 4.9). Referrals

⁵⁴ Dyson, A. (2001). *Special needs education as the way to equity: an alternative approach?* Support for Learning, 16, 3.

⁵⁵ US Department of Education: Office of Special Education and Rehabilitative Services.

<https://www2.ed.gov/about/offices/list/osers/osep/osep-idea.html>

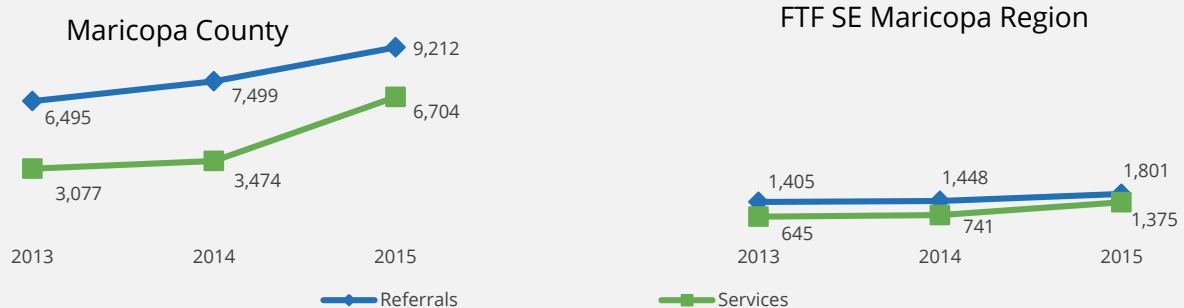
⁵⁶ ADES, 2016 - <https://des.az.gov/services/disabilities/early-intervention/about-arizona-early-intervention-program-azeip>

⁵⁷ Rosenberg, 2013 - <http://www.education.com/reference/article/characteristics-intellectual-disabilities/>

⁵⁸ ADES, 2016: <https://des.az.gov/services/disabilities/early-intervention/arizona-early-intervention-program-azeip-eligibility>

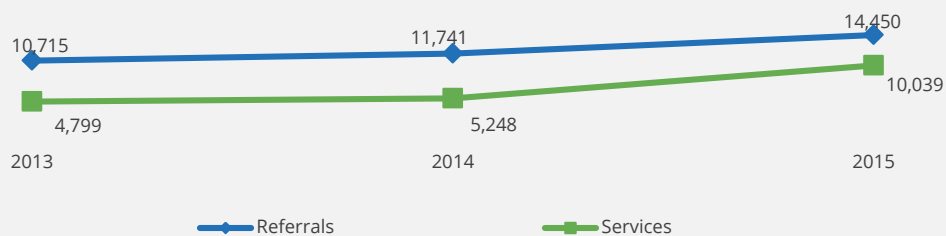
increased by 396 in the FTF SE Maricopa Region and services increased by 730.

Exhibit 4.8. 2013-2015 Children receiving AzEIP referrals and services in Maricopa County and the FTF SE Maricopa Region



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

Exhibit 4.9. 2013-2015 Children receiving AzEIP referrals and services in Arizona

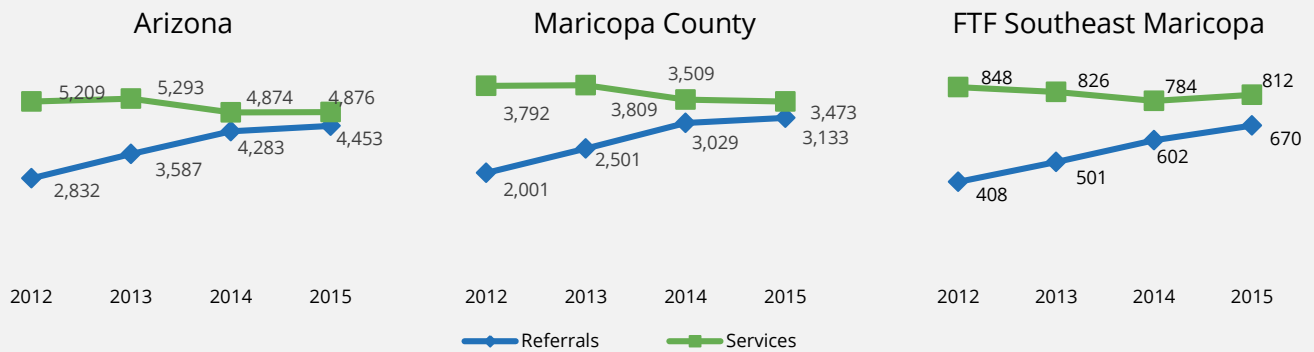


Arizona Department of Economic Security (2015). AzEIP Referred and Served Children. Provided by AZ FTF.

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.⁵⁹ From 2012- 2015, the trends of children receiving referrals and services from the Division of Developmental Disabilities were similar for Arizona, Maricopa County, and the FTF SE Maricopa Region (see Exhibit 4.10). Overall, across the three, the number of referrals increased and the number of services decreased. See Appendix 4.9 and 4.10 to see further breakdown and unduplicated counts of children receiving services and visits by age.

⁵⁹ Arizona Department of Economic Security (2015). Division of Developmental Disabilities Criteria for Children Birth to Age 6 (200-H). Retrieved from: <https://des.az.gov/sites/default/files/200-Requirements-for-Division-Eligibility.pdf>

Exhibit 4.10. 2012-2015 Number of children receiving referrals and services from the Division of Developmental Disabilities

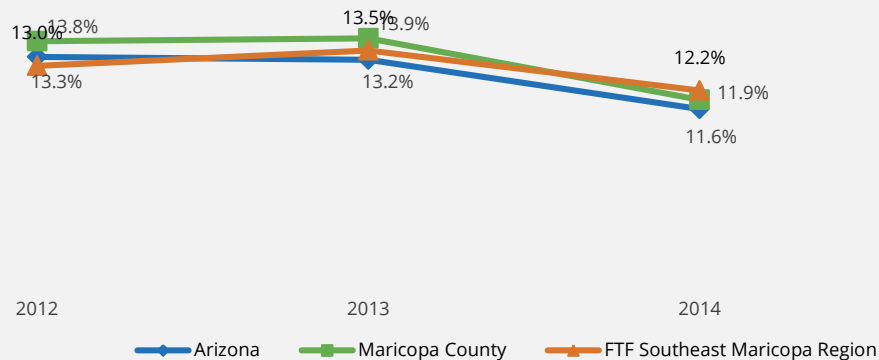


Arizona Department of Economic Security (2015). Division of Developmental Disabilities. Provided by AZ FTF.

Special Education

The Arizona Department of Education collects information on special education pre-k children who entered kindergarten without the need for an IEP. The percentage of students who participate in preschool special education, but no longer require special education in kindergarten, decreased slightly from 2012 to 2014 for the state and the FTF SE Maricopa Region (see Exhibit 4.11).

Exhibit 4.11. Percentage of students transitioning out of special education between preschool and kindergarten

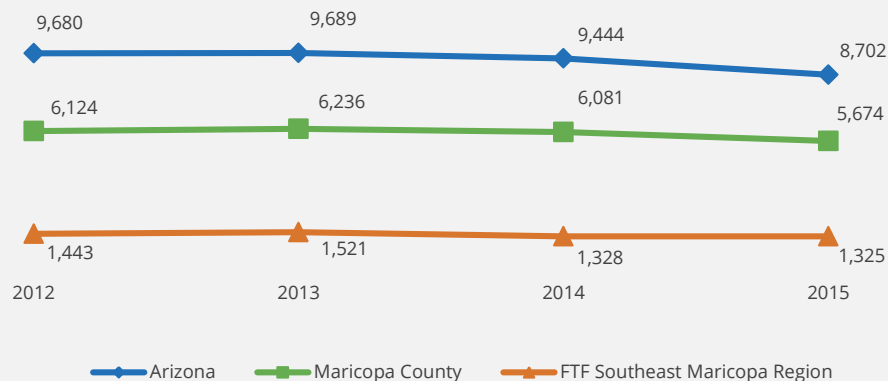


Arizona Department of Education (2015). Special Education. Provided by AZ FTF.

*Data available by zip code and city

From 2012-2015, the number of preschool children identified with developmental disabilities decreased across the state, county, and region (see Exhibit 4.12). The most common types of disabilities for preschool children were developmental delays and speech/language impairments. For further information on disabilities including types of disabilities of preschool children, types of speech/language and hearing service providers, and information on Individual Family Service plans, see Appendices 4.11 – 4.13.

Exhibit 4.12. Total number of preschool children with disabilities*



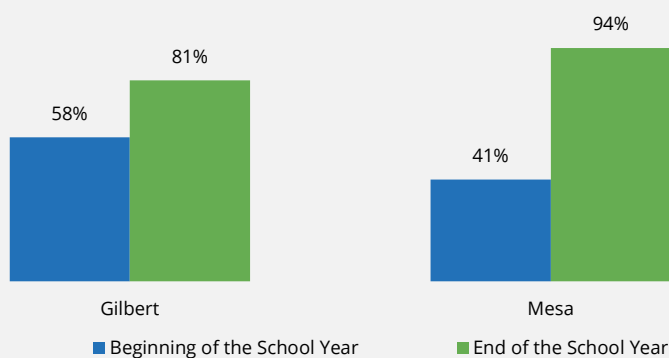
Arizona Department of Education (2015). Special Education. Provided by AZ FTF.

*The data presented are unduplicated (i.e., children diagnosed with multiple disabilities are counted only one time in the Federal Primary Need [FPN] category).

Early Literacy

The Dynamic Indicators of Basic Early Literacy Skills (DIBELS) assessment is a set of procedures and measures for assessing the acquisition of early literacy skills.⁶⁰ The DIBELS is administered by the school districts in the FTF Southeast Maricopa Region. During the 2014-2015 school year, the percentage of kindergartners achieving Core Support Status on the DIBELS assessment increased in both the Gilbert and Mesa School Districts, by 23 percent and 53 percent, respectively (see Exhibit 4.13). Scores for other school districts in the region were not available for this report.

Exhibit 4.13. Kindergartners meeting DIBELS Core Support Status for School Year 2014-2015



Gilbert and Mesa School Districts

⁶⁰ University of Oregon Center on Teaching and Learning. UO DIBELS Data System. Retrieved from <https://dibels.uoregon.edu/assessment/dibels/>

EARLY LEARNING HIGHLIGHTS

About 40 percent of preschool-aged children are enrolled in nursery school, preschool or kindergarten, which is less than the 58 percent assumed to need child care based on their parents' employment status. A contributing factor may be the high cost of child care. With respect to child care subsidies, more children are becoming eligible and more children are receiving child care subsidies. However, more children are also on the waitlist. AzEIP referrals and services are increasing for the region, as well as referrals and screenings from the Division of Developmental Disabilities. These early intervention services are essential as the percentage of students who transitioned from special education while in preschool to mainstream kindergarten classrooms largely decreased in the region. 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 assets, needs and data-driven considerations for the FTF SE Maricopa 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.	Consider continuing support for Quality First efforts in the region to increase the opportunities for children to receive quality early care and education experiences.
According to the Arizona Department of Economic Security, child care subsidies provided in the region increased from 2013 to 2014 (3,130 to 3,257).	Promote the importance of subsidies in providing low income children access to early care and education.
Needs	Considerations
According to the FTF Arizona's Unknown Education Issue brief, almost half of early care and education professionals in the state leave the profession within five years (45%).	Consider providing supports, such as professional development and networking opportunities, for quality early childhood professionals to retain their skills in the early childhood field and reduce staff turnover.



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 how health issues affect children's learning supports their school readiness. There are many health factors that impact the well-being of young children and their families. The availability of resources and services for expectant families is one key factor that contributes to their overall health. For example, during prenatal care visits, expectant mothers are provided with information and resources to promote a healthy pregnancy and increase the healthy development of their child. At routine prenatal visits, 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 preventative 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 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 built a strong immune system yet.⁶⁴ Another factor that may impact health outcomes and 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. This chapter provides an overview of the health indicators for the FTF SE Maricopa Region that highlight the well-being of children under age six and their families.

Healthy People 2020 (HP 2020) set 10-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 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 an issue 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 Overall, Maricopa County has a lower population to primary care provider ratio, indicating more access to physicians when needed (see Exhibit 5.1).

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

Location	Ratio-Population: Provider
Statewide	449:1
Maricopa County	412:1
Primary Care Area	
Gilbert South	274:1
Gilbert Central	478:1
Gilbert North	387:1
Mesa North	652:1
Mesa West	464:1
Mesa Central	896:1
Mesa East	236:1
Mesa Gateway	639:1
Apache Junction	1,761:1
Queen Creek	448:1

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>

In 2014, eight percent of children under age six in the FTF SE Maricopa Region reported not having any health insurance (see Exhibit 5.2). The HP 2020 target is for 100 percent of Americans to have medical insurance by 2020.⁶⁸ The SE Maricopa portion of Apache Junction and West Mesa had a higher percentage of children without health insurance compared to Arizona (10%), Gilbert (7%), East Mesa (7%), and the SE Maricopa portion of Queen Creek (2%) (see Exhibit 5.3). This could potentially place

⁶⁷ LaVeist, Gaskin and Richard (2009). *The Economic Burden of Health Inequalities in the United States*. Joint Center for Political and Economic Studies.

⁶⁸ Healthy People 2020. About Healthy People Retrieved from <https://www.healthypeople.gov/2020/About-Healthy-People>

children in these areas at risk for long-term health complications if they fall ill but their parents do not have the sufficient funds to seek care.

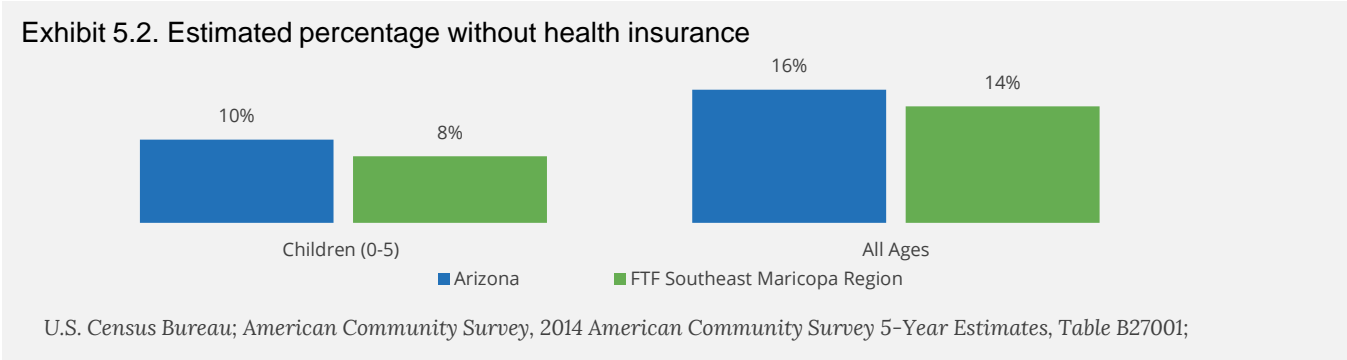


Exhibit 5.3. Estimated percentage without health insurance by city

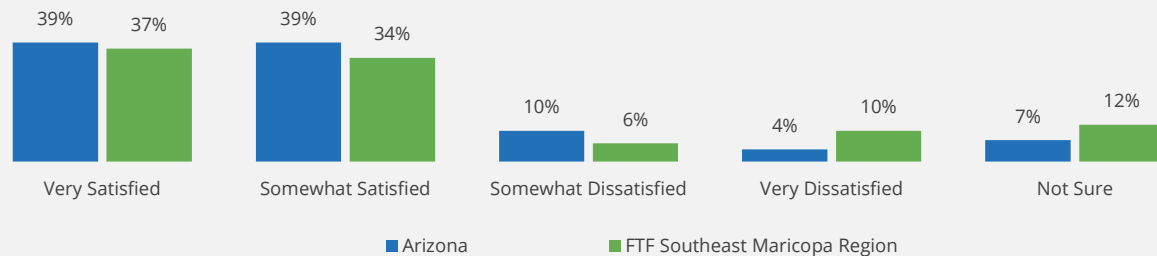
	Apache Junction (SE Maricopa portion)	Gilbert	East Mesa	West Mesa	Queen Creek (SE Maricopa portion)
Percentage of children (0-5) without health insurance	10.8%	7.1%	6.7%	13.5%	2.0%

U.S. Census Bureau; American Community Survey, 2014 American Community Survey 5-Year Estimates, Table B27001; generated by AZ FTF; using American FactFinder; <<http://factfinder2.census.gov>>.

To better understand parents’ and families’ perceptions and knowledge of the services available to them and their children in their community, FTF conducted a survey in 2012 asking parents about their satisfaction with and perception of these programs.⁶⁹ Despite challenges such as lack of transportation and health insurance, most families in the FTF SE Maricopa Region who responded to the FTF Family and Community Survey (90%) report taking their children to regular doctor visits.⁷⁰ When asked about the perception of services available in the region, 71 percent of respondents in the region reported being somewhat or very satisfied with the resources available to support their child’s healthy development (see Exhibit 5.4). Additional information regarding health access is provided in Appendix 5.1-Appendix 5.8.

⁶⁹ Family and Community Survey data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.
⁷⁰ Arizona First Things First (2012). Family and Community Survey.

Exhibit 5.4. Family and Community Survey Respondents satisfied with the community information and resources available about children's development and health



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 implications 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 and unwed mothers.^{73, 74} 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.⁷⁵ 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.⁷⁶

HP 2020 aims to bring the proportion of pregnant women receiving prenatal care in the first trimester to 77.9 percent.⁷⁷ In the FTF SE Maricopa Region, the rate of mothers who began prenatal care during their first trimester remained stable from 2009-2013 (see Exhibit 5.5) and the rate of mothers who did not receive any prenatal care was under two percent during the same time period.⁷⁸ In 2014, a new version of the Birth Certificate introduced changes in the way prenatal care by trimester is assessed.

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 Institute of Medicine (US) Committee to Study Outreach for Prenatal Care; Brown SS, editor. Prenatal Care: Reaching Mothers, Reaching Infants. Washington (DC): National Academies Press (US); 1988. Chapter 1, Who Obtains Insufficient Prenatal Care? Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK217693/>

⁷⁵ 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=zIFPAQAAIAAJ&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

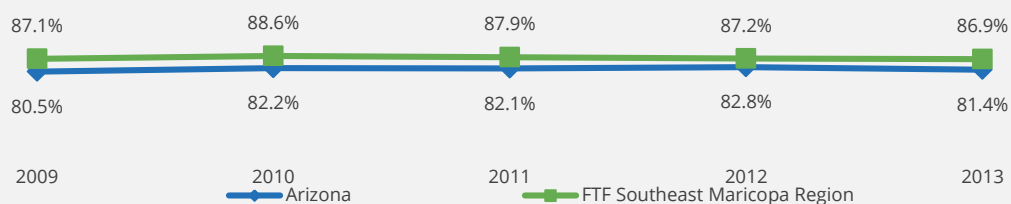
⁷⁶ Womens Health (n.d.). Prenatal care fact sheet. Retrieved from <https://www.womenshealth.gov/publications/our-publications/fact-sheet/prenatal-care.html#b>

⁷⁷ Healthy People 2020. About Healthy People Retrieved from <https://www.healthypeople.gov/2020/About-Healthy-People>

⁷⁸ Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

Trimester when prenatal care began is no longer directly reported but rather calculated using the date of the mother's 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. Based on the new methodology, 66 percent of mothers in the region started prenatal care in the first trimester in 2014. According to the Family and Community Survey, only 34 percent of respondents in the FTF SE Maricopa region reported believing they could impact their child's brain during the prenatal period.⁷⁹ This may indicate a lack of knowledge around prenatal care's impact on a child's growth and development.

Exhibit 5.5. Percentage of women who began prenatal care in their first trimester



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

In the FTF SE Maricopa Region the percentage of births with medical risks and complications during labor and delivery was on the rise between 2009–2013 (see Exhibit 5.6 and Exhibit 5.7, respectively). In 2014, the definition of medical risk was modified to exclude cardiac disease, lung disease, and other medical conditions that were previously included, and therefore dropped to 17 percent for the region and 18 percent for the state.⁸⁰ The percentage of births with complications during labor and delivery was also on the rise but dropped by four percent in the region in 2013, prior to the definition changing in 2014. Over 95 percent of mothers in the FTF SE Maricopa Region reported not drinking or smoking during their pregnancy in 2013.⁸¹ However, from 2010 to 2014, the number of infants born with drug withdrawal symptoms increased from 170 to 260 in Maricopa County.⁸²

⁷⁹ Arizona First Things First (2012). Family and Community Survey.

⁸⁰ Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

⁸¹ Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

⁸² 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>

Exhibit 5.6. Percentage of births with medical risks*

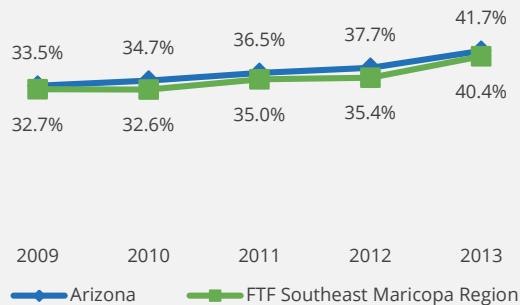
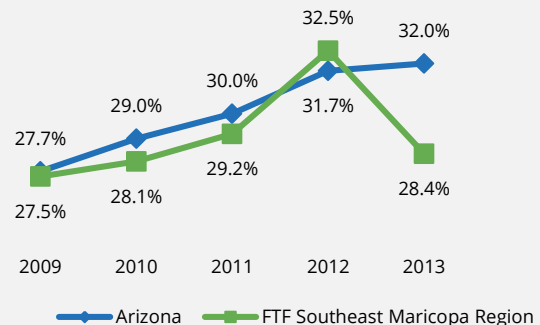


Exhibit 5.7. Percentage of births with complications

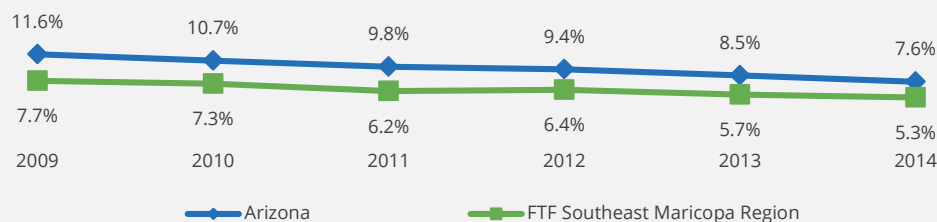


Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

*In 2014, Anemia, Cardiac disease, Lung disease and others were removed from the list of medical risks

Factors that place mothers at risk of not receiving prenatal care, such as teen pregnancy, unwed mothers, and mothers with lower education levels, have decreased or remained steady over the past few years. In the FTF SE Maricopa Region, the percentage of teen mothers decreased from 2009-2014, and was slightly lower than the state (see Exhibit 5.8). The percentage of single mothers remained stable from 2009 to 2014 and was lower than the state (34% versus 46%) in 2014.⁸³ In addition, the high majority of mothers in the region (87%) had a high school education or more in 2014 (see Exhibit 3.12). These indicate that the mothers in the region exhibit fewer risk factors for not receiving prenatal care and may contribute to the high level of early prenatal care in the region. Additional details regarding prenatal care are provided in Appendices 5.9-5.13.

Exhibit 5.8. Percentage of mothers who are 19 years old or younger



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

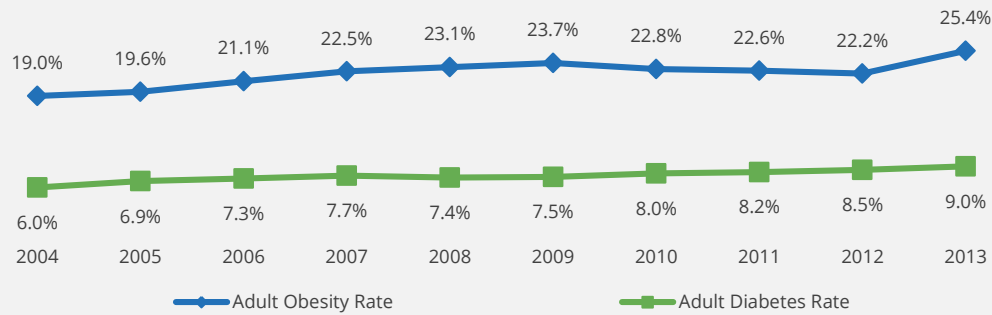
⁸³ Arizona Department of Health Services (2014). Vital Statistics. Provided by AZ FTF.

Obesity

Obesity has been a concern in the US due to associated health outcomes, such as higher risk for diabetes, cancer, and heart disease.⁸⁴ Diabetes has also been associated with many negative health complications such as blindness, kidney failure, and amputation of limbs.⁸⁵

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.⁸⁶ According to the CDC, diabetes and obesity can be prevented by increasing physical activity and maintaining a healthy diet.⁸⁷ In Maricopa County, the percentage of adults with obesity has increased from 19 percent to 25 percent between the years 2004–2013 (see Exhibit 5.9). Within the same timeframe the percentage of adults with diabetes has increased from six to nine percent (see Exhibit 5.9).

Exhibit 5.9. Percentage of adults with obesity or diabetes in Maricopa County



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

In the FTF SE Maricopa Region and the state as a whole, over 50 percent of mothers participating in WIC reported being overweight or obese pre-pregnancy in 2015 and that percentage has been increasing since 2012 (see Exhibit 5.10). As previously described in the demographic chapter, almost 13 percent of the population in Maricopa County has low access to grocery stores, six percent lower than the state (see Exhibit 2.20). However, there are few recreation and fitness facilities where residents of Maricopa can stay active.⁸⁸ Although the percentage with low access to grocery stores is lower than the state, having few places where residents can engage in fitness activities may contribute to the increasing percentages of mothers and children who are obese or have diabetes in the FTF SE Maricopa Region. Additional information regarding obesity and diabetes is provided in Appendices 5.14–5.16.

⁸⁴ Center for Disease Control and Prevention. (n.d.). Adult Obesity Facts. Retrieved from <https://www.cdc.gov/obesity/data/adult.html>

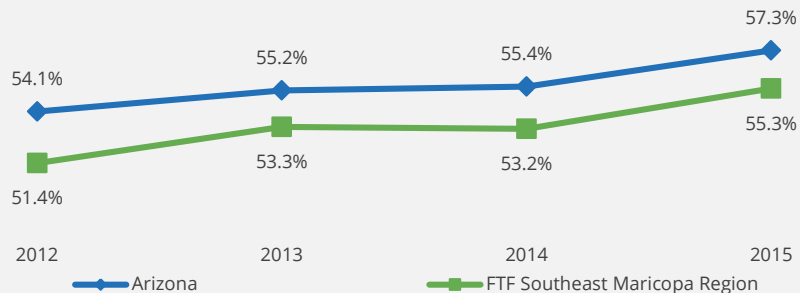
⁸⁵ Chronic Disease Prevention and Health Promotion. (n.d.). Diabetes At A Glance Reports. Retrieved from <http://www.cdc.gov/chronicdisease/resources/publications/aag/diabetes.htm>

⁸⁶ ACOG (2016). Obesity and Pregnancy. Retrieved from <http://www.acog.org/Patients/FAQs/Obesity-and-Pregnancy>

⁸⁷ 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>

⁸⁸ United States Department of Agriculture and Economic Research Service (2012). *Food Environment Atlas*.

Exhibit 5.10. Percentage of mothers overweight or obese pre-pregnancy



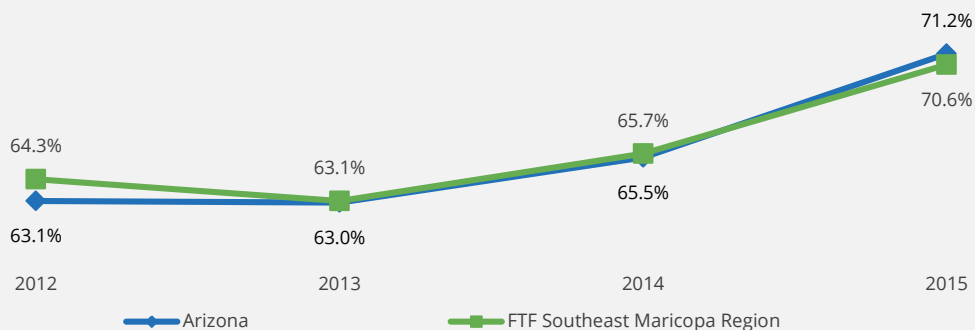
Arizona Department of Health Services (2015). Women, Infants & Children (WIC). Provided by AZ FTF.

Engaging in Healthy Preventative Practices

The American Academy of Pediatrics recommends that mothers breastfeed for the first six months after giving birth.⁸⁹ Breast milk has antibodies that prevent babies from getting ill and it has been shown to decrease the likelihood of babies becoming obese.⁹⁰ HP 2020 aims to increase the proportion of infants who are breastfed at six months to 60.6 percent.⁹¹

In the FTF SE Maricopa Region, the percentage of mothers participating in WIC who breastfed their infant on average at least once per day increased from 2012-2015 and has closely followed the state rate (see Exhibit 5.11).

Exhibit 5.11. Percentage of mothers 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.

Vaccinations can protect children from measles, mumps, and whooping cough, which are all severe illnesses still present and potentially fatal to young children.⁹² Receiving timely vaccinations is not only

⁸⁹ American Academy of Pediatrics (2012). Breastfeeding and the Use of Human Milk. Retrieved from <http://pediatrics.aappublications.org/content/129/3/e827.full#content-block>

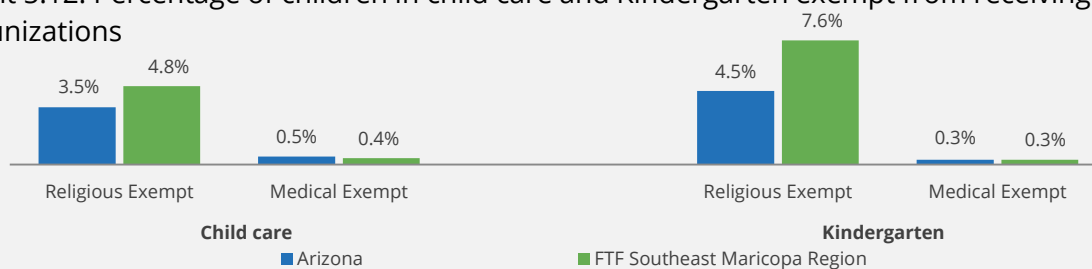
⁹⁰ Office on Women's Health (2014). Why breastfeeding is important. Retrieved from <https://www.womenshealth.gov/breastfeeding/breastfeeding-benefits.html>

⁹¹ Healthy People 2020. About Health People Retrieved from <https://www.healthypeople.gov/2020/About-Healthy-People>

⁹² Basic Vaccines (2016). Importance of Vaccines. Retrieved from <http://www.vaccineinformation.org/vaccines-save-lives/>

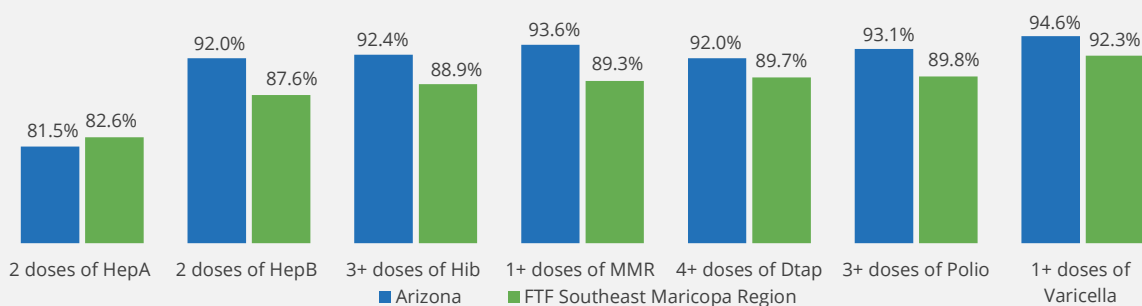
a protective factor to oneself, but to the community's immunity.⁹³ In the FTF SE Maricopa Region, the percentage of children in child care or kindergarten who are exempt from immunizations for medical reasons was about the same as the state. However, the percentage of children who are exempt from immunizations for religious reasons is higher than the state, especially in kindergarten (see Exhibit 5.12). In addition, compared to the state, children in child care in the region were less likely to have received each of the recommended immunizations (see Exhibit 5.13). Additional information regarding immunization data from Head Start is provided in Appendix 5.17.

Exhibit 5.12. Percentage of children in child care and Kindergarten exempt from receiving immunizations



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

Exhibit 5.13. Percentage of children in child care receiving immunizations by type of immunization



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

Oral Health

Severe forms of tooth decay can have negative effects on a child's speech, jaw development, cause malnourishment or anemia, and may lead to life-threatening infections.^{94,95} Fortunately, tooth decay has also been found to be one of the most preventable diseases. It can be prevented by



74% of respondents indicated their child(ren) regularly visited the same dental provider

⁹³ U.S Department of Health and Human Services (2016). Community Immunity. Retrieved from http://www.health.ny.gov/prevention/immunization/vaccine_safety/

⁹⁴ National Children's Oral Health Foundation (2015). Facts About Tooth Decay. Retrieved from <http://www.ncohf.org/resources/tooth-decay-facts/>

⁹⁵ Raising Children Network. (n.d.). Tooth decay. Retrieved from http://raisingchildren.net.au/articles/tooth_decay.html

using fluoridated water, brushing and flossing teeth, taking a child to see a dentist regularly starting by the age of one, and mothers practicing good oral health care during pregnancy. In 2014, about half of the residents living in Arizona did not have access to public water systems that were fluoridated.⁹⁶

The *Healthy Smiles Healthy Bodies Survey* was designed to obtain information on the prevalence and severity of tooth decay among Arizona's kindergarten children.⁹⁷ 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 84 non-reservation district and charter schools throughout Arizona.⁹⁸ A total of 3,630 kindergarten children in Arizona received a dental screening. In the FTF SE Maricopa region, 235 children received a dental screening. The parent/caregiver questionnaire was optional and was returned for only 44% (N=1,583) of the children screened. Because of this, information obtained from the questionnaire may not be representative of the state or region.

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, and (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.⁹⁹

In the FTF SE Maricopa Region, 82 percent of survey respondents reported having some type of dental insurance, which is six percent higher than the state (76%).¹⁰⁰ Of the *Healthy Smiles Healthy Bodies* respondents, almost half (48%) had AHCCCS insurance yet many (22%) were unaware that AHCCCS includes dental benefits for their children.¹⁰¹

Nearly three-fourths of respondents (74%) reported that they regularly take their children to dental visits.¹⁰² According to the survey results, children in the FTF SE Maricopa Region were less likely to have experienced tooth decay or untreated decay than at the state level (see Exhibit 5.14). Additional information regarding oral health from Head Start is provided in Appendix 5.18.

⁹⁶ Fluoride Action Network (2014). State Fluoride Database. Retrieved from <http://fluoridealert.org/researchers/states/arizona/>

⁹⁷ Using another funding source, ADHS expanded data collection to include 3rd grade children but that information is not included in this report.

⁹⁸ Schools serving children with special needs and schools located in tribal communities were excluded.

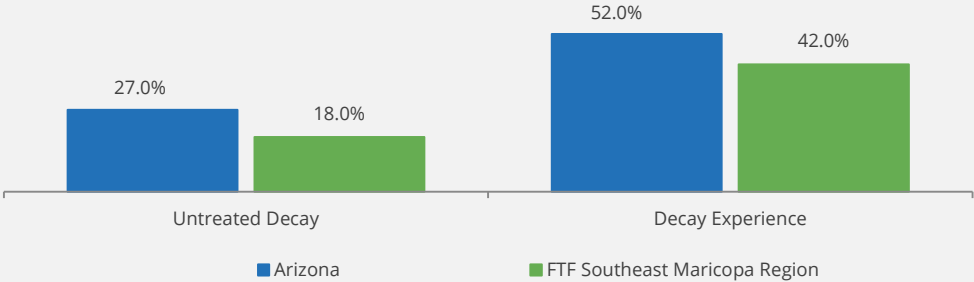
⁹⁹ Probability proportional to size sampling: a sampling technique where the probability that a particular school will be chosen in the sample is proportional to the enrollment size of the school

¹⁰⁰ Arizona First Things First (2016). Oral Health Report.

¹⁰¹ IBID.

¹⁰² Arizona First Things First (2012). Family and Community Survey.

Exhibit 5.14. Percentage of kindergarten children who experienced tooth decay



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

CHILD HEALTH HIGHLIGHTS

The diversity of the FTF Southeast Maricopa Region presents both assets and challenges for supporting the health of pregnant women, young children, and their families. Both the ratio of population to health care providers and the percentage without health insurance are lower than the state, indicating a relatively high access to healthcare in the region, though variable by area. Apache Junction and West Mesa have relatively high numbers of uninsured kids. Additionally, most women are receiving prenatal care and a high percentage are breastfeeding. However, the region has a high percentage of children exempt from receiving immunizations and, though lower than the state, almost half of children have experienced tooth decay.

Below are key data trends that highlight the health assets, needs, and data-driven considerations for the 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 mothers participating in WIC who breastfeed their child at least once a day has been increasing and reached 70 percent in 2015.	Continue to provide public education about the benefits of breastfeeding and consider supporting workplace efforts to encourage breastfeeding practices for working mothers.
According to the Arizona Department of Health Services, almost all pregnant women (98%) are receiving some prenatal care.	Promote the importance of early prenatal care and provide education on the impact of prenatal care on the mother and child's future well-being.

Needs	Considerations
The percentage of kindergartners exempt from receiving immunizations for religious reasons is almost double the state percentage (8% vs. 5%).	Promote more outreach and education regarding the importance of immunizations. Explore further to understand why parents are exempting their children from receiving vaccinations.
Almost half of the children in the region whose parents responded to the Healthy Smiles Healthy Bodies survey (42%) have experienced tooth decay and 18 percent have had untreated tooth decay.	Promote oral health services and education within existing programs, such as home visitation, to inform parents of the importance of early oral healthcare. Also, consider partnering with primary care physicians and pediatricians to be allies of oral healthcare and encourage their patients to practice healthy oral health behaviors and regularly visit the dentist.



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.¹⁰³ Support for young families is an essential piece of the holistic efforts around kindergarten readiness and long term success for children. First Things First supports families through home visitation and parent outreach and education programs. Evidence-based Parenting Education and supports 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.¹⁰⁴

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.¹⁰⁵ 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.¹⁰⁶ 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 SE Maricopa region to provide the necessary support to children and their families.

¹⁰³ 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

¹⁰⁴ 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

¹⁰⁵ Putnam, F. (2006). The impact of trauma on child development. *Juvenile and Family Court Journal*. 57 (1) 1-11.

¹⁰⁶ 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.

What the Data Tell Us

Parent Knowledge

In 2012, FTF developed and administered a phone-based survey for parents and caregivers throughout the state to better understand parents' knowledge of parenting practices and child development. 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*.¹⁰⁷ Survey items explored multiple facets of parenting. The FTF Family and Community Survey had six major areas of inquiry:

- Early childhood development
- Developmentally appropriate child behavior
- Child care and sources of parenting advice and support
- Family literacy activities
- Perceptions of early childhood services
- Perceptions of early childhood policies

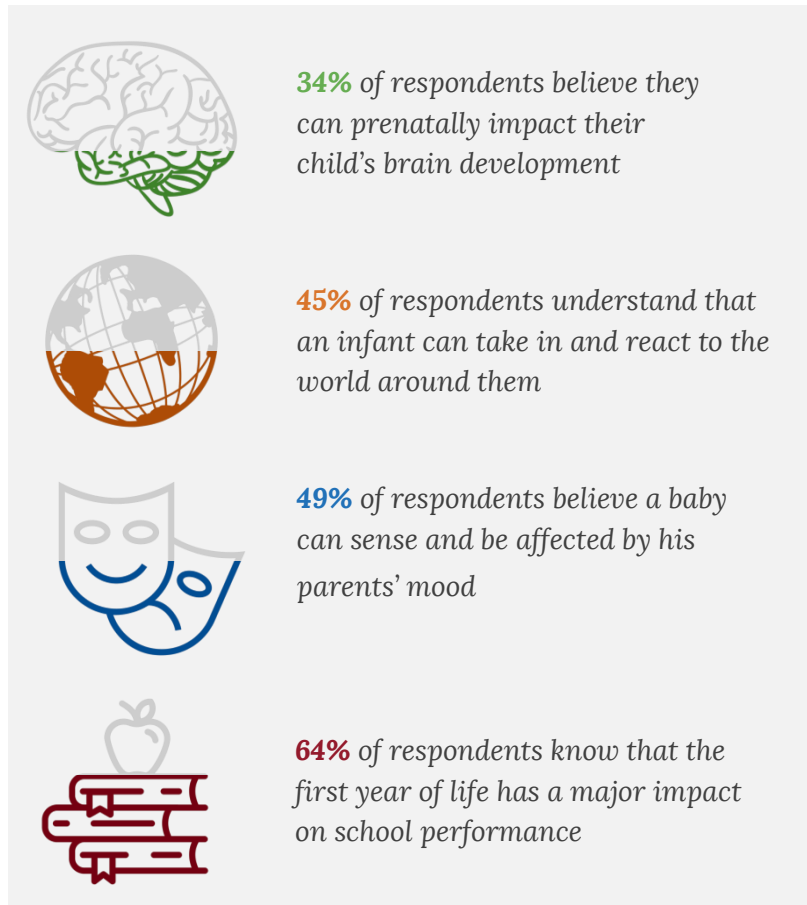
A total of 3,708 parents with children under six (FTF's target population) responded to the survey. The majority of respondents (83%) were the child's parent. The remaining respondents were grandparents (13%) or other relatives (4%). In the FTF SE Maricopa region, 200 parents participated in the survey.¹⁰⁸ 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.

¹⁰⁷ CIVITAS Initiative, ZERO TO THREE, and BRIO Corporation, Researched by DYG, Inc. 2000. *What Grown-ups Understand About Child Development: A National Benchmark Survey*. Online, INTERNET, 06/20/02.

http://www.civitasinitiative.com/html/read/surveypdf/survey_public.htm

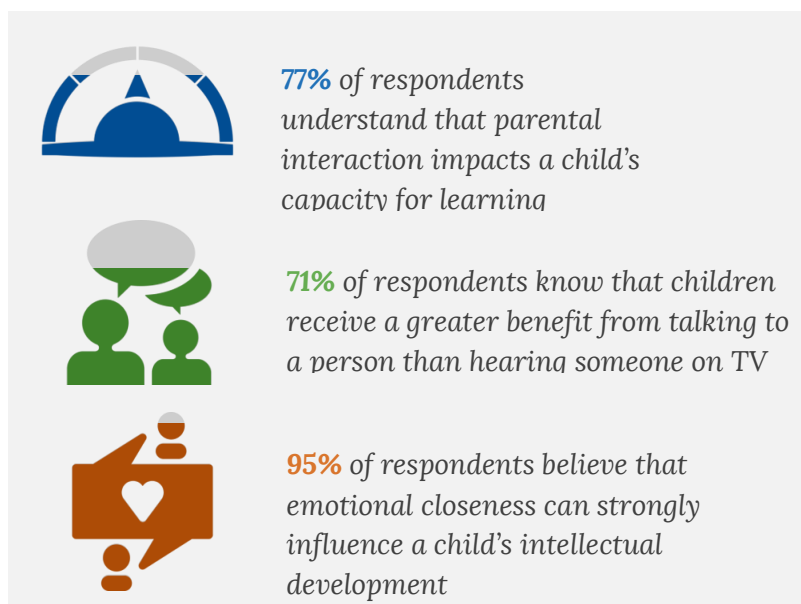
¹⁰⁸ Family and Community Survey data are from 2012. At that time, there were three First Things First regions in Pima County: North Pima, Central Pima, and South Pima. We are including the data from South Pima in this report.

As discussed in the Health section, about one-third (34%) of respondents in the FTF SE Maricopa Region understand they can significantly impact their child's brain development prenatally, compared to 32 percent of respondents statewide. Results also show that 45 percent of respondents in the region understand that an infant can take in and react to the world around them right from birth, which is ten percent higher than statewide. About half (49%) of respondents in the 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. Only two-thirds (64%) of respondents in the region understand that the first year of life has a major impact on school performance, which is 19 percent lower than statewide.¹⁰⁹ This indicates that parents in the region may not understand the importance of early child development, the stages of development and the impact they have on their child, beginning prenatally.



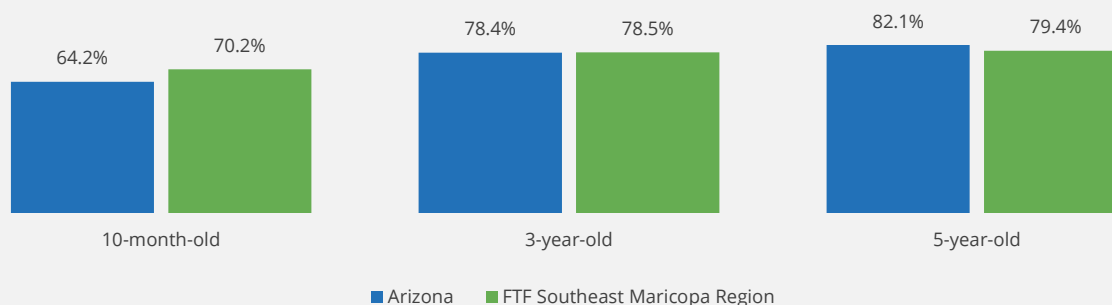
¹⁰⁹ Arizona First Things First (2012). Family and Community Survey.

Over three-quarters of respondents in the state of Arizona (77%) and the FTF SE Maricopa Region (77%) understand that a child's capacity for learning is not set from birth and can be increased or decreased by parental interaction. Survey results also show that over 70 percent of respondents in the 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, 95 percent of respondents in the FTF SE Maricopa Region understand emotional closeness can strongly influence a child's intellectual development, which is one percent lower than the state.¹¹⁰



In the FTF SE Maricopa Region parents also understand the importance of play for young children of all ages. More than 70 percent of respondents recognize the crucial importance of play for children who are 10 months old, three years old, and five years old (see Exhibit 6.1).

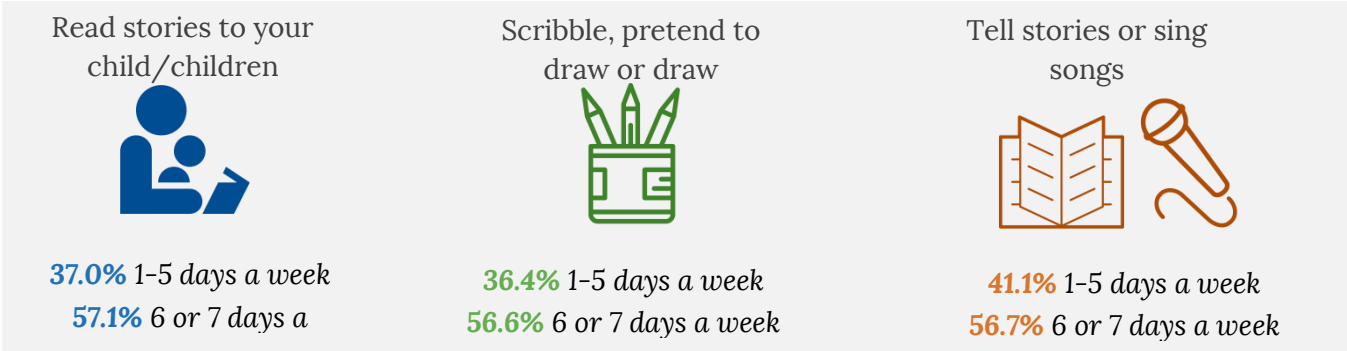
Exhibit 6.1. Percentage of parents who understand the crucial importance of play for children of different ages



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

¹¹⁰ Arizona First Things First (2012). Family and Community Survey.

Over half of respondents in the FTF SE Maricopa Region reported either reading, drawing, or telling stories/singing songs to their children six or seven days a week.¹¹¹ More than half of respondents in the FTF SE Maricopa Region (54%) indicated that they have more than 100 books in their home and nearly one-third (33%) reported that they have 100 or more children’s books in their home. Both of these numbers are higher than statewide.¹¹²



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. About three-quarters of respondents in the region correctly identified that this behavior likely means that the child wants to get her parents’ attention or enjoys learning about what happens when buttons are pressed. Over a quarter of respondents thought it meant the child was angry at her parents or trying to get back at them, confirming the need for more understanding of age-appropriate behaviors (see Exhibit 6.2).

Exhibit 6.2. Parent understanding of child behaviors in the FTF SE Maricopa 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
The child wants to get her parents’ attention	49.8%	28.8%	11.4%	10.0%
The child enjoys learning about what happens when buttons are pressed	68.1%	21.7%	2.2%	7.9%
The child is angry at her parents for some reason or she is trying to get back at them	3.3%	23.6%	63.8%	9.3%

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

The FTF Family and Community Survey also assessed parent or caregiver perceptions around developmentally appropriate behaviors. About three-quarters of survey respondents in the region

¹¹¹ Arizona First Things First (2012). Family and Community Survey.
¹¹² Arizona First Things First (2012). Family and Community Survey.

(74%) correctly responded that a 15-month-old baby should not be expected to share her toys with other children and 59 percent correctly responded that a three-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 over age one, only one-third (34%) correctly responded that a six-month-old is too young to spoil. Over 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 is finished as appropriate behavior.

74%

of respondents correctly said a 15-month-old baby should not be expected to share her toys with other children

59%

of respondents correctly said a 3-year-old child should not be expected to sit quietly for an hour or so

34%

of respondents correctly said a 6-month-old is too young to spoil

Exhibit 6.3. Parent understanding of appropriate and spoiling behavior with their child in the FTF SE Maricopa Region

Please rate the following behavior, on the part of a parent or caregiver, as appropriate, or as something that will likely spoil a child, if done too often	Appropriate	Will likely spoil the child	Not sure
Picking up a three-month-old every time she cries	59.5%	38.4%	2.1%
Letting a two-year-old get down from the dinner table to play before the rest of the family	52.5%	46.3%	1.2%
Letting a five-year-old choose what to wear to school every day	81.9%	14.6%	3.6%

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

Child Safety and Domestic Violence

Maltreatment of children during early childhood has been shown to negatively affect child development, including cognitive development, attachment, and academic achievement.¹¹³ 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.¹¹⁴

From October 2014 to September 2015 there were 30,753 reports of maltreatment of children under age 18 in Maricopa County.¹¹⁵ Of those, nearly 1,500 cases of child abuse and neglect were substantiated, i.e., determined to be true, by the Department of Child Services, with the majority of these being neglect cases (see Exhibit 6.4). 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, including nearly 8,000 in Maricopa County (see Exhibit 6.5).

Exhibit 6.4 Substantiated cases of child abuse and neglect in Fiscal Year 2015

	Arizona	Maricopa County
Total	5,461	1,445
Neglect	4,619	1,281
Physical abuse	712	131
Sexual abuse	125	32
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

¹¹³ Child Welfare Information Gateway. Retrieved from <https://www.childwelfare.gov/topics/can/impact/development/>

¹¹⁴ 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.

¹¹⁵ 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 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	Maricopa County
Children under 18 in foster placements	18,657	**
Children under 18 entering out-of-home care	12,754	7,953

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

** Data not available at County level.

In Maricopa County there are ten domestic violence shelters and in 2015 they served a total of 3,934 people and provided over 60,000 hours of support services (see Exhibit 6.6).

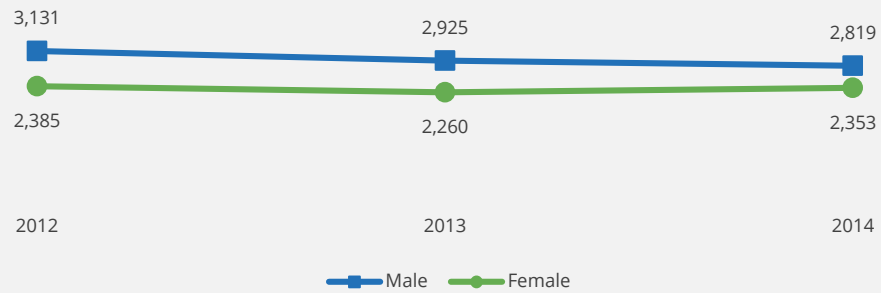
Exhibit 6.6 Domestic violence shelters, people served, and hours of support services provided

	Arizona	Maricopa County
Number of domestic violence shelters	31	10
Number of adults served	3,862	1,834
Number of children served	3,705	2,100
Hours of support services provided	144,025	60,611

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

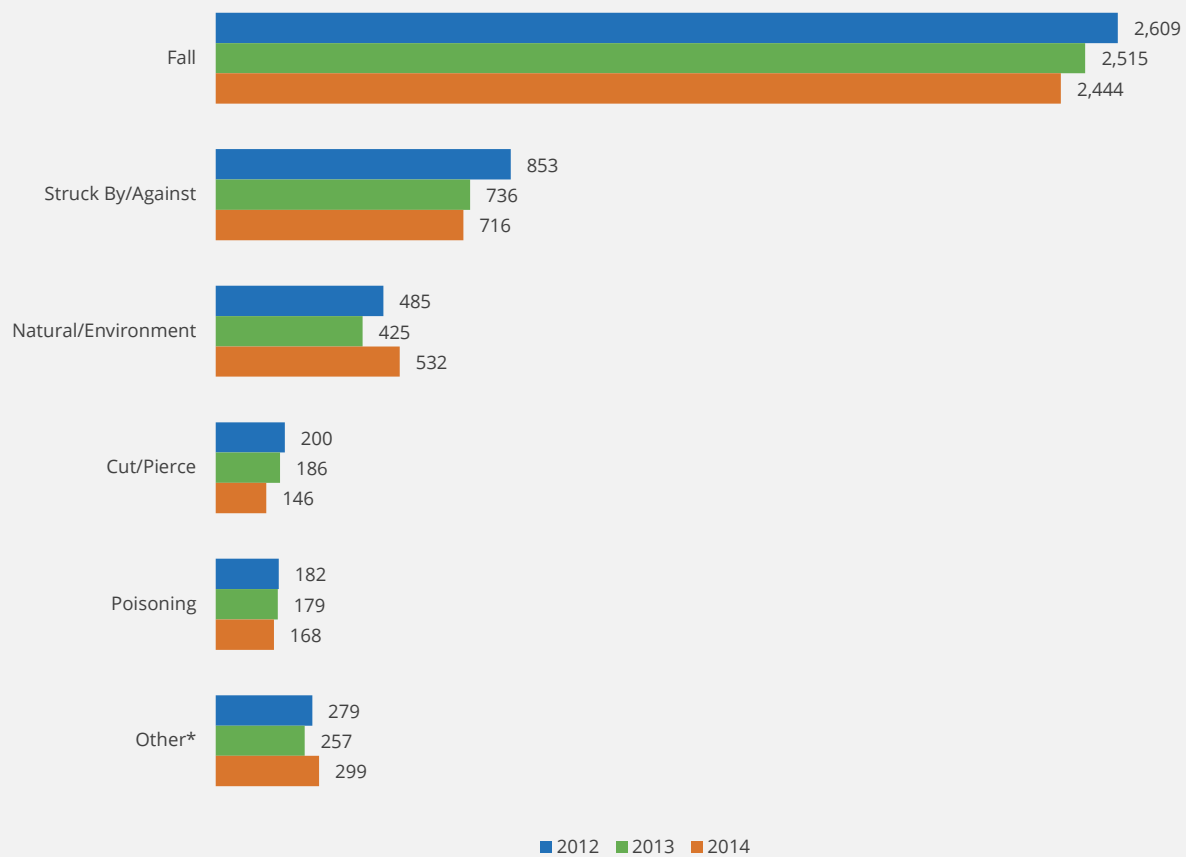
In the FTF SE Maricopa Region the number of children under age six who went to the emergency department for a non-fatal injury decreased from 2012 to 2014. During this time period, male children were more likely to be injured than female children and the most common reasons for visiting the emergency department were falls and being struck by or against an object (see Exhibit 6.7 and Exhibit 6.8).

Exhibit 6.7. Non-fatal emergency department visits for children 0-5 in the FTF Southeast Maricopa Region



Arizona Department of Health Services (March 2016). Unintentional Injuries in Children 0-5, Arizona 2012-2014. Provided AZFTF

Exhibit 6.8. Non-fatal emergency department visits by type of injury for children 0-5 in the FTF Southeast Maricopa Region

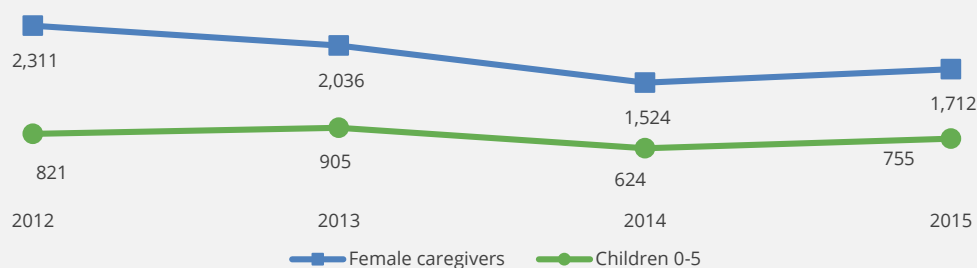


Arizona Department of Health Services (March 2016). Unintentional Injuries in Children 0-5, Arizona 2012-2014. Provided AZFTF
 *Other types of injury include Drowning, Fire/Hot object, Motor Vehicle and Pedal-Cycle

Behavioral Health Services

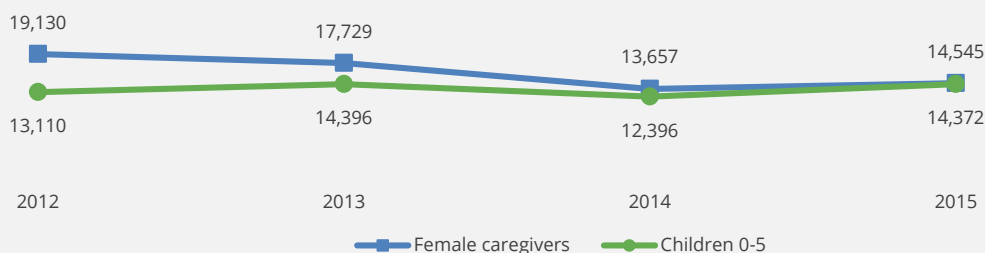
Behavioral health focuses on the promotion of family well-being through the prevention or intervention of mental health issues, such as depression or addiction. Children of parents with mental health issues often grow up in inconsistent and unpredictable family environments and are at risk for developing social, emotional, and/or behavioral problems.¹¹⁶ 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 SE Maricopa Region 1,712 female caregivers and 755 children under six received behavioral health services from the Arizona Department of Health Services in 2015. Behavioral health services provided include behavioral health day programs, crisis intervention services, inpatient services, medical services, rehabilitation services, support services, and treatment services. Exhibit 6.9 and Exhibit 6.10 show how the number of female caregivers and children served has fluctuated from 2012 to 2015.

Exhibit 6.9 Number of female caregivers and children receiving behavioral health services in the FTF Southeast Maricopa Region



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

Exhibit 6.10 Number of female caregivers and children receiving behavioral health services in Arizona



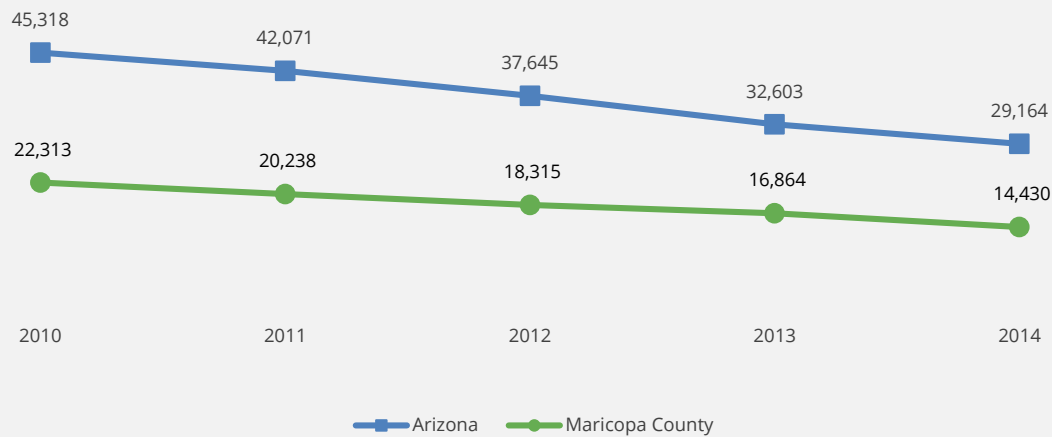
Arizona Department of Health Services (2014). Behavioral Health. Provided by AZ FTF.

¹¹⁶ 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 17 decreased by 35 percent in Maricopa County from 2010 to 2014 (see Exhibit 6.11). This compares to a 36 percent decrease in Arizona. See Appendix 6.1 and 6.2 for additional information on the type and number of arrests for Arizona.

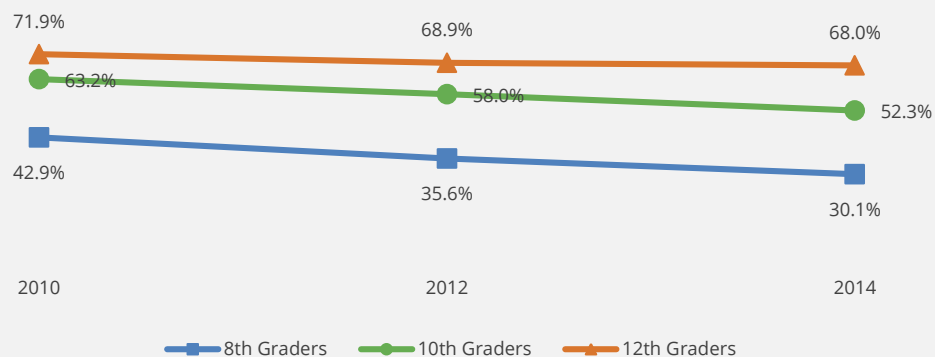
Exhibit 6.11. Arrests of children ages eight to 17



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

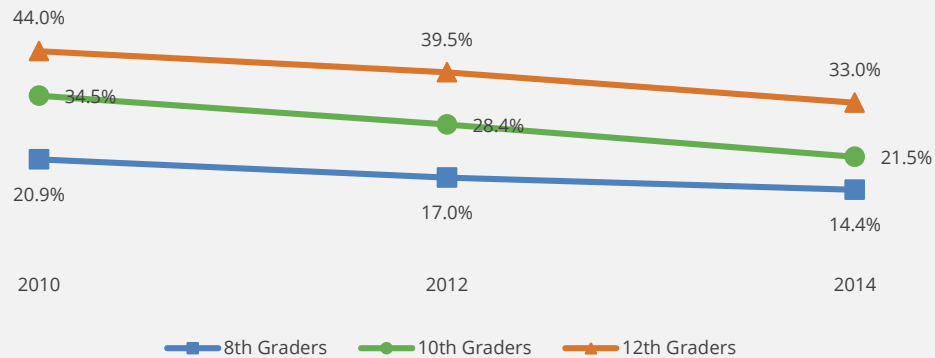
The use of alcohol and cigarettes by adolescents in Maricopa County has decreased in recent years. Across all grades reported, the use of alcohol declined in Maricopa County from 2010 to 2014, with the largest decline among eighth graders. Cigarette use by adolescents showed similar declines with 33 percent of twelfth graders reporting use of cigarettes in 2014, compared to 44 percent in 2010. While alcohol and cigarette use declined, marijuana use stayed the same or increased in the county (see Exhibit 6.12, Exhibit 6.13, and Exhibit 6.14).

Exhibit 6.12. Alcohol use by adolescents in Maricopa County



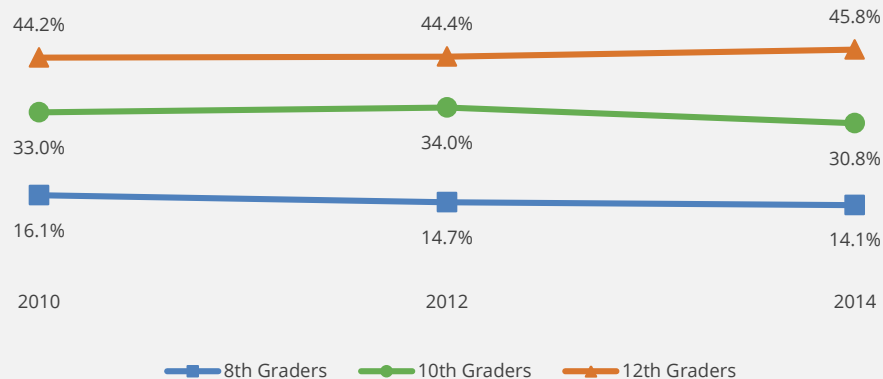
Arizona Criminal Justice Commission (2014) Arizona Youth Survey State Report. Retrieved from <http://www.azcjc.gov/acjc/web/sac/ays.aspx>

Exhibit 6.13. Cigarette use by adolescents in Maricopa County



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

Exhibit 6.14. Marijuana use by adolescents in Maricopa County



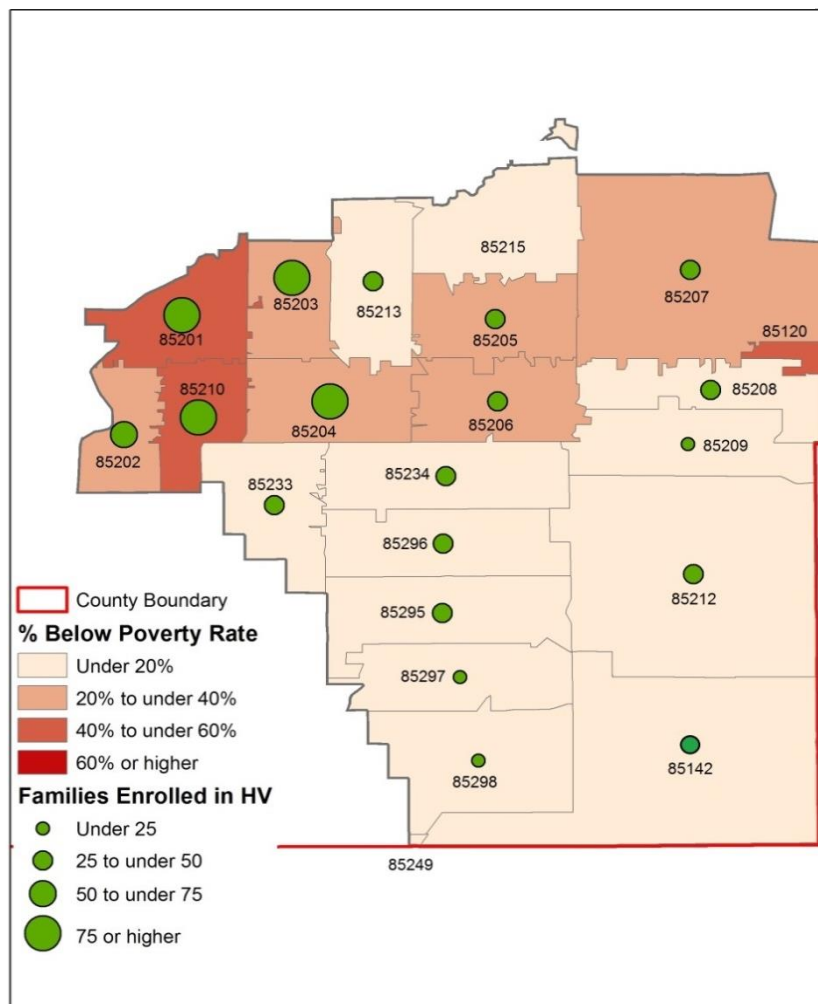
Arizona Criminal Justice Commission (2014) Arizona Youth Survey State Report. Retrieved from <http://www.azcjc.gov/acjc.web/sac/ays.aspx>

Home Visitation Services

As part of their Family Support and Literacy strategy, First Things First provides home visitation services to families in the FTF SE Maricopa region. These services intend to provide personalized support for families with young children and may include developmental screenings, weekly home visits, linking families with needed community-based services, and other support services that empower families.

The largest cluster of families receiving home visitation services in the region are in the 85201, 85210, 85203, and 85204 zip codes (see Exhibit 6.15). Two of these zip codes have the highest percentage of the population living below the poverty rate in the region. Based on the map, the FTF home visitation services appear to be reaching the areas of the region with the highest poverty and, likely, the highest need for support and resources.

Exhibit 6.15. Map of Home Visitation services over poverty



FAMILY SUPPORT AND LITERACY HIGHLIGHTS

In the FTF Southeast Maricopa Region there is opportunity to strengthen parental knowledge about child development and engaging in positive parenting practices. Only one-third of respondents to the FTF Family and Community Survey understood that parents can significantly impact their child's brain development prenatally and that infants can take in and react to the world around them right from birth. Only about half of respondents reported that they read, draw, or tell stories and sing songs with their children six or more days a week. With regard to child safety, in Maricopa County there were nearly 1,500 substantiated cases of abuse or neglect from October 2014 to September 2015, and 7,953 children under 18 in Maricopa County entered out-of-home care. In the county there are ten domestic violence shelters; in 2015 they served nearly 4,000 people and provided more than 60,000 hours of support services. From 2010 to 2014 the number of arrests for juveniles ages eight to 17 decreased by 35 percent.

Below are some data trends that highlight the family support related assets, needs, and data-driven considerations for the region.

Assets	Considerations
In Maricopa County, the number of juvenile arrests has decreased and there is a robust support system of ten domestic violence shelters and behavioral health services for female caregivers and young children.	Continue to provide family support services like home visitation in targeted areas to provide support and resources to families.

Needs	Considerations
Based on the FTF Family and Community Survey, parent respondents' knowledge of child development and engagement in developmentally enriching activities is lower in the FTF SE Maricopa Region than statewide.	Support community education campaigns to increase awareness of parents' impact on their child's development and the importance of engaging in activities with their children on a daily basis.



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, 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 birth to age five, 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 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 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

Public Awareness

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.

	Friends	Supporters	Champions
Southeast Maricopa Region	1,867	277	47
Arizona	21,369	3,102	908

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.

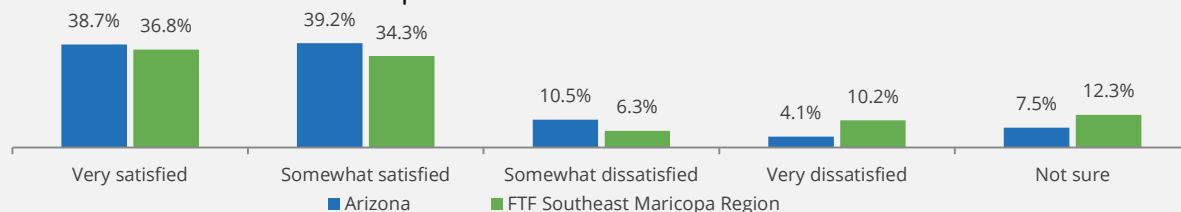
Finally, FTF recently launched enhanced online information for parents of young children, including the more intentional and strategic placement of early childhood content and resources in the digital platforms that today’s parents frequent. Future plans for this parenting site include a searchable database 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.

Parent Knowledge and Perception of Services

The FTF Family and Community Survey conducted in 2012 included questions intended to capture parents’ and families’ perceptions and knowledge of the services available to them and their children in their community. In the FTF SE Maricopa Region 200 people responded to the survey. The data presented in this section describe the results of the survey.

The majority of respondents in both Arizona and the FTF SE Maricopa Region reported being either very or somewhat satisfied (78% and 71%, respectively) with the community information and resources available to them about children's development and health (see Exhibit 7.2).

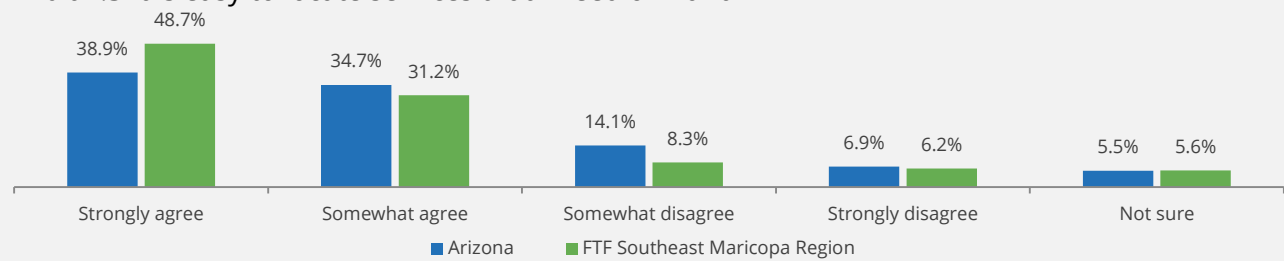
Exhibit 7.2. Satisfaction with community information and resources available about children's development and health



First Things First Family and Community Survey (2012) . Provided by AZ FTF.

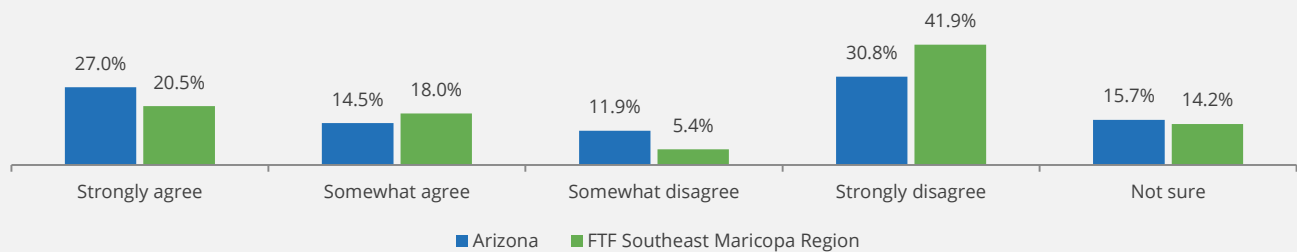
When asked about the ease of locating needed services, the majority of respondents in the FTF SE Maricopa Region (80%) strongly or somewhat agreed that it is easy to locate services that they need or want, slightly higher than the 74 percent statewide (see Exhibit 7.3). Over one-third of respondents in the region (39%) strongly or somewhat agreed that they do not know if they are eligible to receive services (see Exhibit 7.4), and 42 percent strongly or somewhat agreed that they are asked to fill out paperwork or eligibility forms multiple times when trying to access services (see Exhibit 7.5). Although these percentages are lower than statewide, this indicates that there is an opportunity to streamline the eligibility and enrollment processes.

Exhibit 7.3 It is easy to locate services that I need or want



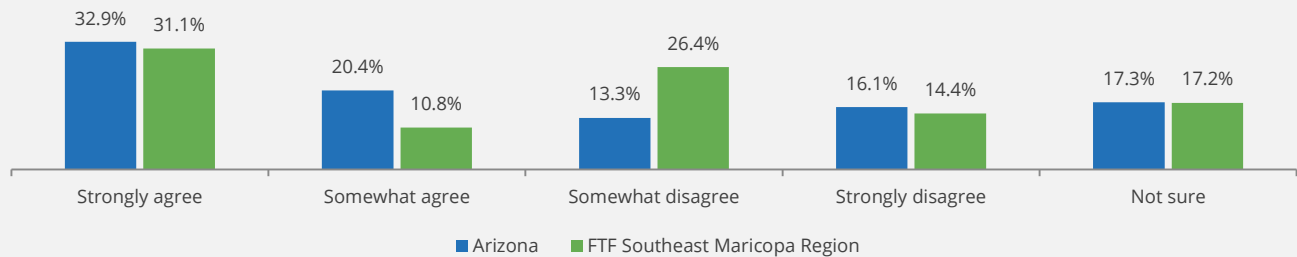
First Things First Family and Community Survey (2012). Provided by AZ FTF.

Exhibit 7.4. I do not know if I am eligible to receive services



First Things First Family and Community Survey (2012). Provided by AZ FTF.

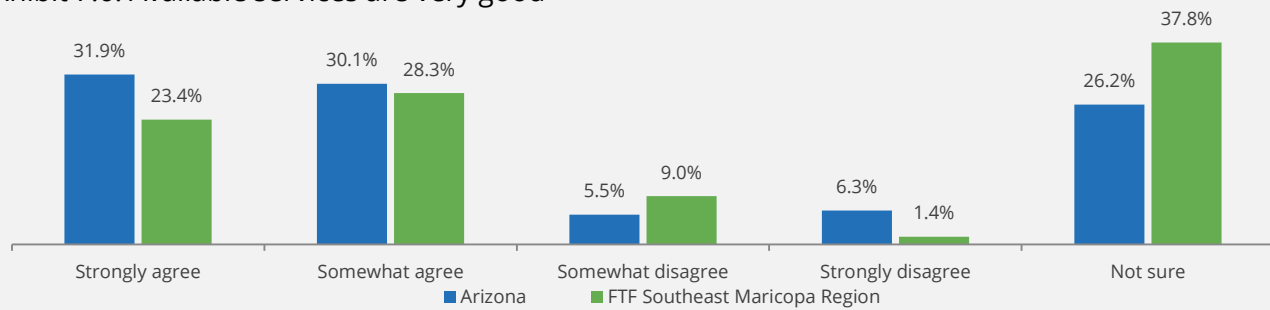
Exhibit 7.5 I am asked to fill out paperwork or eligibility forms multiple times.



First Things First Family and Community Survey (2012). Provided by AZ FTF.

The FTF Family and Community Survey also asked respondents about the quality of services available to them. Just over half of respondents in the FTF SE Maricopa Region (52%) felt that the available services are very good, ten percent less than those in the state overall (see Exhibit 7.6). Additionally, about 11 percent more respondents in the FTF SE Maricopa Region reported being unsure of whether the available services are very good than in the state.

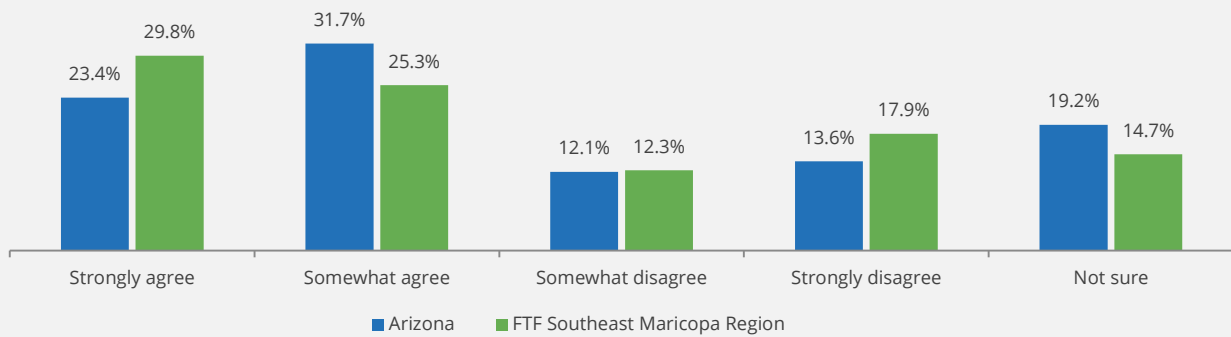
Exhibit 7.6. Available services are very good



First Things First Family and Community Survey (2012). Provided by AZ FTF.

About half of survey respondents in the region (55%) felt that the available services reflect their cultural values, similar to the percentage statewide (see Exhibit 7.7). The majority of respondents in the FTF SE Maricopa Region (71%) also felt services and materials were provided in their language, consistent with the percentage statewide. Almost 20 percent more respondents felt that services are available at times or locations that are convenient in the FTF SE Maricopa Region (58%) than statewide (40%).¹¹⁷

Exhibit 7.7. Available services reflect my cultural values

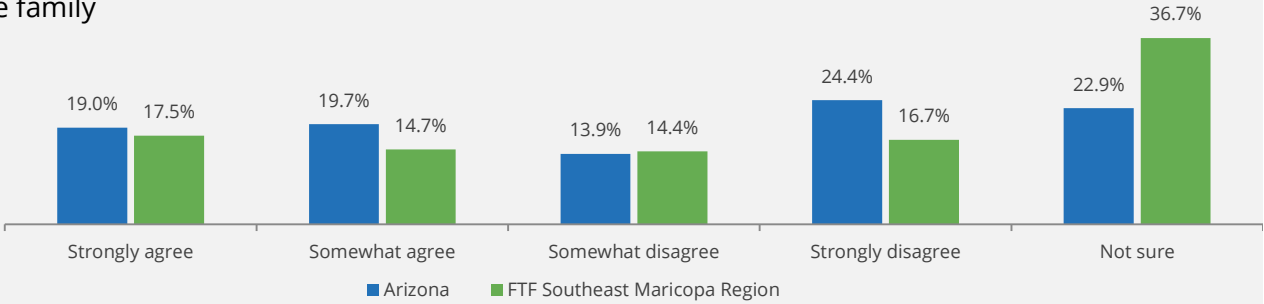


First Things First Family and Community Survey (2012). Provided by AZ FTF.

Survey respondents were asked about the ability of available services to fill their needs. About one-third of respondents in the region (32%) strongly or somewhat agreed that available services fill some of their needs, but do not meet the needs of their whole family, compared to 39 percent statewide. The percentage of respondents who were unsure if services filled their needs but not the needs of their family was higher in FTF SE Maricopa Region than in the state as a whole (see Exhibit 7.8).

¹¹⁷ First Things First Family and Community Survey (2012). Provided by AZ FTF.

Exhibit 7.8. Available services fill some needs, but do not meet the needs of the whole family



First Things First Family and Community Survey (2012). Provided by AZ FTF.

The majority of respondents in the FTF SE Maricopa Region (92%) strongly or somewhat agreed that their children under age six have regular visits at the same doctor's office. A smaller majority (77%) reported that their children have regular visits with the same dental provider.¹¹⁸ Just over half of those in the FTF SE Maricopa Region (54%) reported being able to access preventive services.¹¹⁹

When asked about inter-agency cooperation, just over one-third of respondents (33%) were very or somewhat satisfied with how care providers and government agencies worked and communicated with each other.¹²⁰



92% of respondents took their child(ren) to the same doctor's office regularly



77% of respondents indicated their child(ren) regularly visited the same dental provider



54% of respondents could find services to prevent problems



33% of respondents were very or somewhat satisfied with how care providers and government agencies worked and communicated with each other

¹¹⁸ First Things First Family and Community Survey (2012). Provided by AZ FTF.

¹¹⁹ First Things First Family and Community Survey (2012). Provided by AZ FTF.

¹²⁰ First Things First Family and Community Survey (2012). Provided by AZ FTF.

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, effective early childhood system in Arizona. FTF has led a collaborative, concerted effort to build public awareness and support across Arizona employing several integrated communications strategies. Additionally, in the FTF SE Maricopa Region 200 people completed the 2012 FTF Family and Community Survey providing feedback on the programs and services available in their communities. Overall the findings from the survey suggest that parents are satisfied with the services in their communities. Seventy-one percent of respondents in the region are satisfied with the community information and resources available to them and 80 percent agreed that it is easy to locate the services they want or need. However, almost 40 percent of respondents agreed that they do not know if they are eligible to receive services and 42 percent felt services were not available at convenient times and locations.

Below are key data trends that highlight the assets, needs, and data-driven considerations for the 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
More than two-thirds of Family and Community Survey respondents (71%) are satisfied with the quality of the services in the region	Continue to support the current network of services and programs so children and their families have access to high quality programs and services.

Needs	Considerations
Nearly half of respondents (42%) agree that services are not available at convenient times and locations and 42% agree that they are asked to fill out paperwork or eligibility forms multiple times.	Consider supporting a care coordination system that helps link families to information and services and reduces redundancies in paperwork.
Almost 40 percent of respondents do not know if they are eligible to receive services	Consider supporting more parent outreach and/or the development of an online inventory that describes the availability of services and the eligibility criteria for children and their families to receive services.



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 birth to age 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 Taskforce 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 is coordinated, integrated and comprehensive.” First Things First’s role to realize this outcome is to foster cross-system collaboration among and 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 more 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 increase their own capacity to deliver services as they work collectively to identify and address gaps in the service delivery continuum.

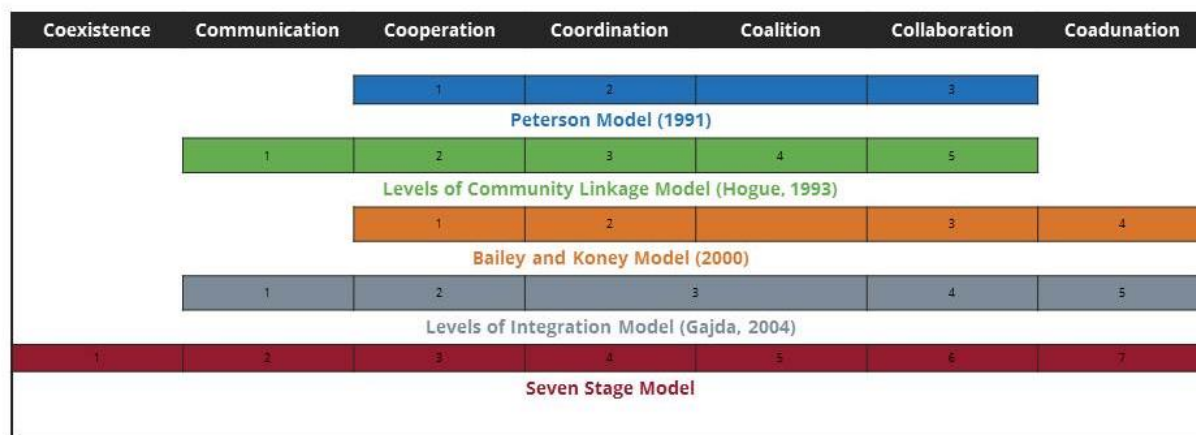
Service coordination and collaboration approaches work to advance the early childhood system in the following ways:

- Build stronger collaborative relationships among 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 below). Frey et al., (2006) 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.¹²¹ 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 five-stage level of collaboration model based on the following levels of a continuum of collaboration: No Interaction, Networking, Cooperation, Coordination and 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 participants and rewards are shared.

¹²¹ Frey, B.B., Lohmeier, J.H, Lee, S.W., & Tollefson, N. (2006) *Measuring collaboration among grant partners. American Journal of Evaluation*, 27, 383.

- **Collaboration:** Collaboration is characterized by a more durable and pervasive relationship. Participants bring separate organizations into a new structure, often with a formal commitment to a common mission. The collaborative structure determines authority and leadership roles. Risk is greater. Partners pool or jointly secure resources, and share the results and rewards.

Coordination and Collaboration Survey

To gain a better understanding of the coordination and collaboration occurring among early childhood system partners within FTF regions, First Things First developed the Coordination and Collaboration Survey that was disseminated to system partners via an online survey in October 2016. Data were collected from system partners in 18 FTF county-based regions. The six FTF regions in Maricopa County (Phoenix North, Phoenix South, East Maricopa, Northwest Maricopa, Southeast Maricopa, and Southwest Maricopa) elected to conduct combined county-wide surveys.

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. Surveys on tribal lands were not conducted because tribal approvals for this survey have not yet been requested. Therefore, 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 is 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 to remind them about the participation via either email and/or phone call. Responses were collected via Survey Monkey. Data were then cleaned and compiled by region by the First Things First Research and Evaluation Unit.

The Coordination and Collaboration survey asked system partners about their organization's role in the Early Childhood System, the system building efforts within each area of the Early Childhood System in the county (i.e., Family Support and Literacy, Early Learning, Child's Health and Professional Development), the level of collaboration that is occurring among system partners, the sectors engaged in system building work, and the FTF regional partnership councils' role in system building efforts.

What the Data Tell Us

The following results are based on the responses from 69 respondents who participated in the survey from Maricopa County out of 102 that were contacted to participate, for a 68% survey response rate. The respondents represent the following FTF Regional Partnership Councils: Phoenix North, Phoenix South, East Maricopa, Northwest Maricopa, SE Maricopa, and Southwest Maricopa. The majority of the respondents work for Family Support/Social Service agencies (32%), Local/public entities (22%), and Early Care and Education organizations (12%), while state agencies and businesses were not represented at all in this survey (see Exhibit 8.2).

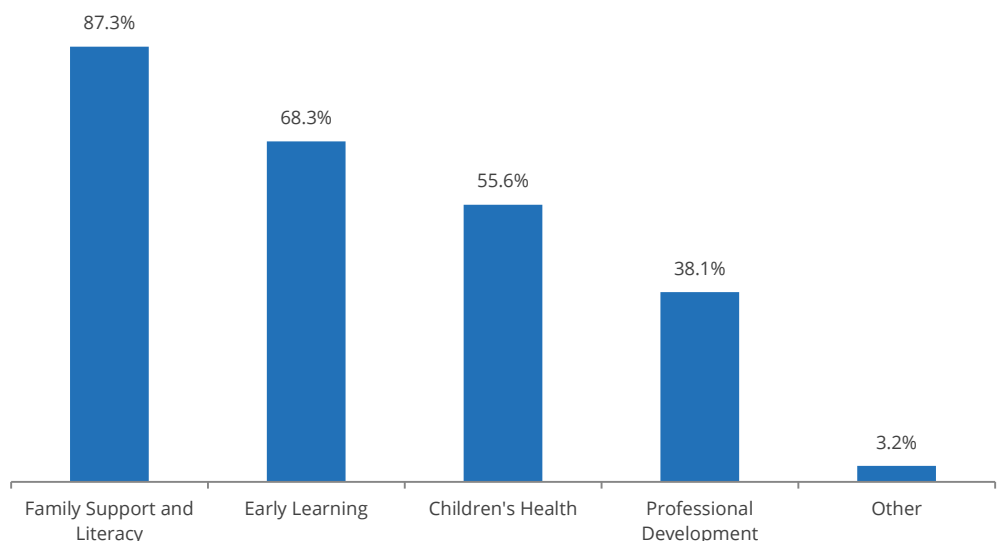
Exhibit 8.2. Sectors with which organizations work (n=61)

Sector	Percentage
Advocacy	3.0%
Philanthropic	6.0%
Family Support/Social Service Agency	32.0%
Early Care and Education	12.0%
K-12 Education	9.0%
Local/Public Entity	22.0%
Higher Education Organization	4.0%
Health Care or Medical Organization	6.0%
Other Type of Organization	7.0%

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

The majority of respondents (93%) consider themselves to be a part of the Early Childhood System in Maricopa County. 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 Family Support/Social Service sector (see Exhibit 8.2), the area within the early childhood system that the majority of respondents engaged with was Family Support and Literacy (87%) (see Exhibit 8.3).

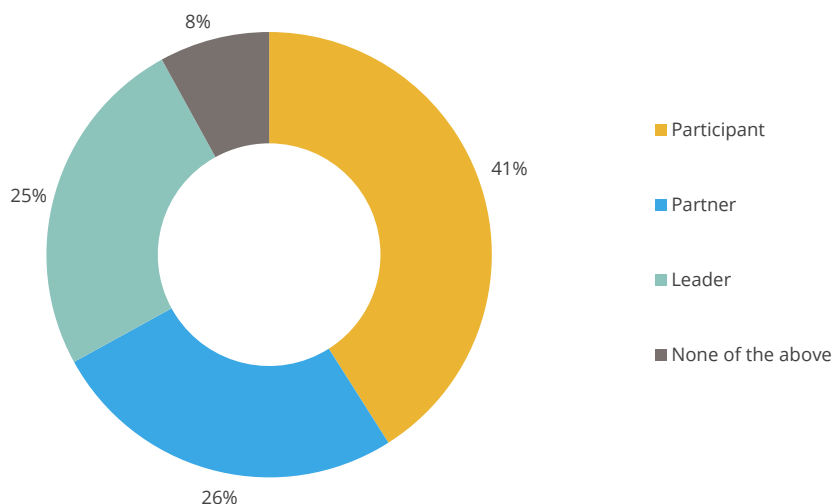
Exhibit 8.3. Area(s) of the early childhood system that organizations engage with (n=63)



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 Maricopa County (n=61)



When asked about their organizations' role in the development and advancement of the Early Childhood System in Maricopa County, the majority of respondents viewed their organization's role as a Participant (41%), one of many community organizations involved in supporting the Early Childhood System. This was followed by Partner (26%) and then Leader (25%). Interestingly, eight percent of respondents defined their role in the development and advancement of the Early Childhood System as something different from the defined roles of Participant, Partner, Leader (see Exhibit 8.4). Respondents falling into "Other" category noted they had a very specific role that they played which they could not identify within one of the three roles (e.g., advocacy) or they target specific populations (e.g., low-income families or African Americans).

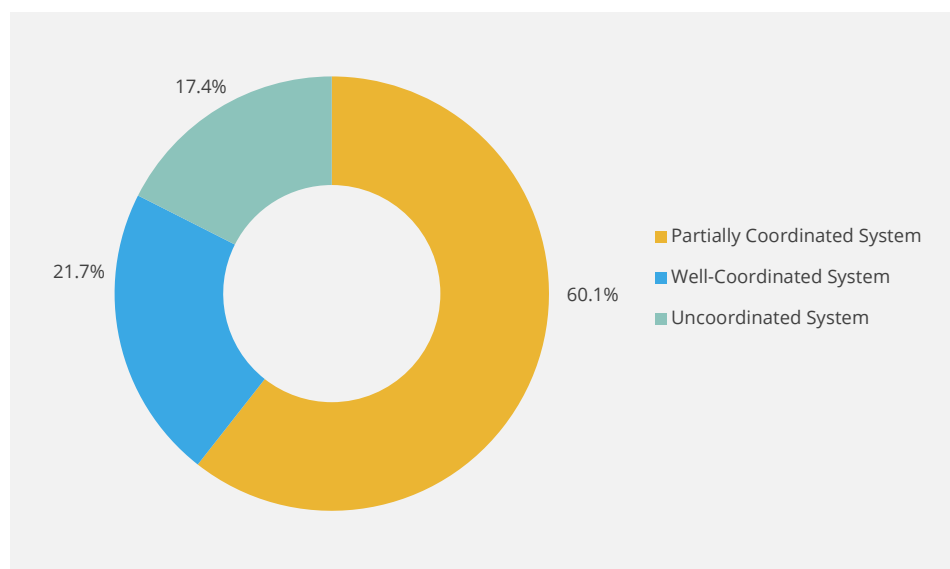
In their role as participant, partner, or a leader, survey respondents noted several successful partnerships. Key areas of success included partnerships among several organizations to deliver home visitation and specialized services to benefit families in the community, including Southwest Human Development's countywide home visitation service coordination system, Parent Partners Plus (PPP). PPP convenes regular alliance meetings with all home visitation programs serving in the county. Multiple respondents also reported having Head Start partnerships as well as other collaborations providing preschool services, such as Getz Special Needs Preschool and Autism Spectrum Therapies, who provide therapy and parenting classes to birth to five-year-old autistic children and their parents. Respondents reported collaborations that provide dental services and screenings such as with First Teeth First, as well as trainings and focus meetings for staff on how to use FindHelpPhx and how to educate parents in its use for themselves. Other examples include partnerships with local rehab clinics for mothers to enhance their ability to meet their goals for parenting and sobriety, and partnerships with the Department of Child Safety to better equip parents and caregivers to care for their children, facilitate reunification, and prevent removals from the home. Additionally, one agency reported developing a weekly resource newsletter that shares the up-to-date resources for families, including

resources related to health, early literacy, financial supports, and trainings/professional development opportunities. Overall, respondents were able to identify ways the system was helping build relationships between agencies to collaborate and work together in order to better serve young children and their families.

System Partners' Perspective on Systems Building

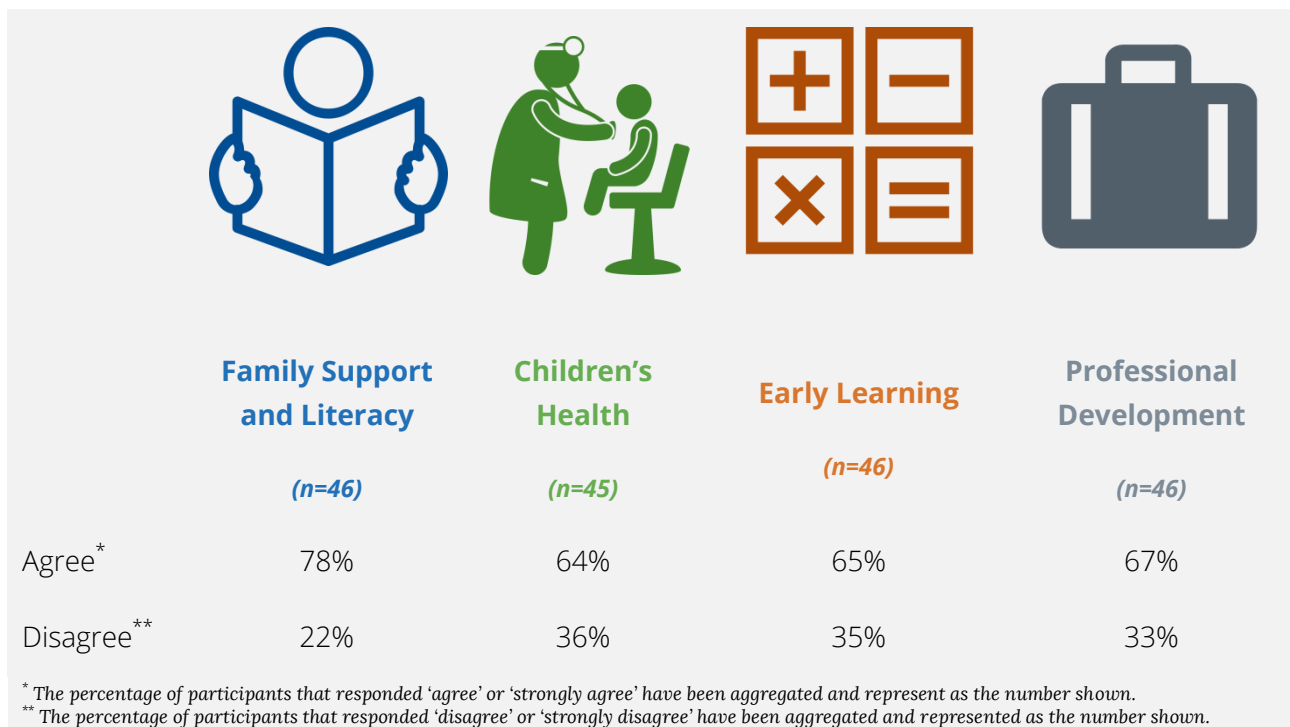
Respondents were also asked to provide their perspective on the early childhood system and systems building. Early childhood system building is the ongoing process of developing approaches and connections that make all the components of an early childhood system operate as a whole to promote shared results 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 Maricopa County (n=46)



Overall, a majority of survey respondents describe the early childhood system in Maricopa County as a partially coordinated system (60%), with less than a quarter of participants (22%) describing the system as a well-coordinated system, and 17 percent viewing the early childhood system as a group of separate, uncoordinated system partners working in isolation (see Exhibit 8.5). Though baseline data is not available, this is viewed as a positive change from previous perspectives of the system as a competitive space.

Exhibit 8.6. Extent to which the Early Childhood System in Maricopa County effectively addresses the needs of young children and their families across Early Childhood Development System



Respondents across all areas reported that the early childhood system in Maricopa County effectively addresses the needs of young children (see Exhibit 8.6). The percentage was highest in the Family Support and Literacy area (78%), followed by the Professional Development (67%), Early Learning (65%), and Children's Health (64%) areas. This may be related to the large percentage of respondents from the Family Support/Social Service sector and their higher familiarity with the Family Support and Literacy area.

Continuum of Collaboration in the Early Childhood System Areas

First Things First has adopted a five-level continuum of collaboration model grounded in the work of stage theorists based on the following levels of collaboration: No Interaction, Networking, Cooperation, Coordination and Collaboration.¹²² 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 Maricopa county within each area of the early childhood system.

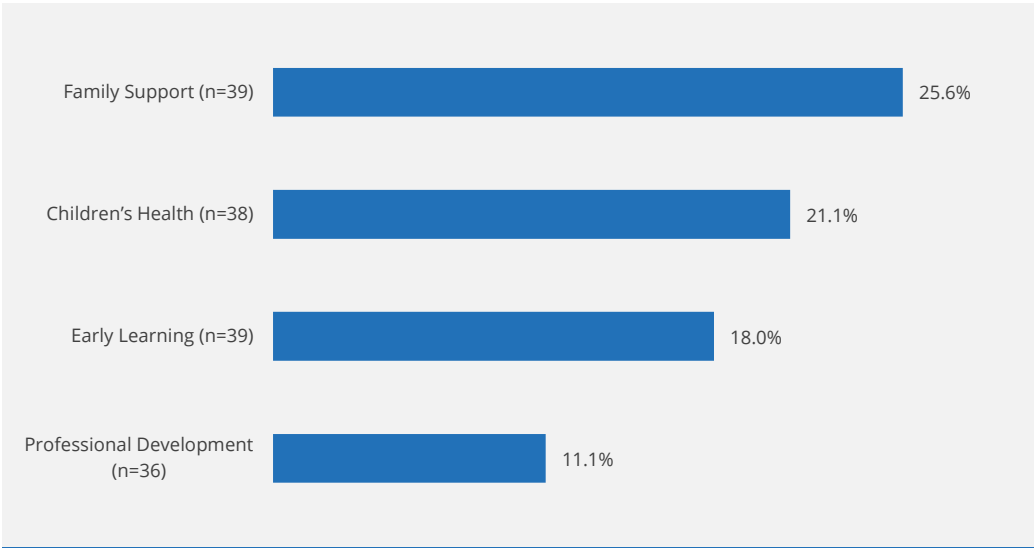
¹²² Frey, B.B., Lohmeier, J.H, Lee, S.W., & Tollefson, N. (2006) *Measuring collaboration among grant partners. American Journal of Evaluation*, 27, 383.

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 Maricopa County for each area of the Early Childhood System. Not surprisingly, and in accordance with respondents' view of the Early Childhood System as a partially coordinated system, the results did not indicate strong support for a high level of Collaboration, the highest and most intense level of system partners working together along the Continuum of Collaboration. Within the area of Family Support and Literacy, 26% of respondents indicated that Collaboration was occurring among partners in Maricopa County. This was followed by the areas of Children's Health (21%), Early Learning (18%), and Professional Development (11%) (see Exhibit 8.8).

Exhibit 8.7. The five levels of the Continuum of Collaboration

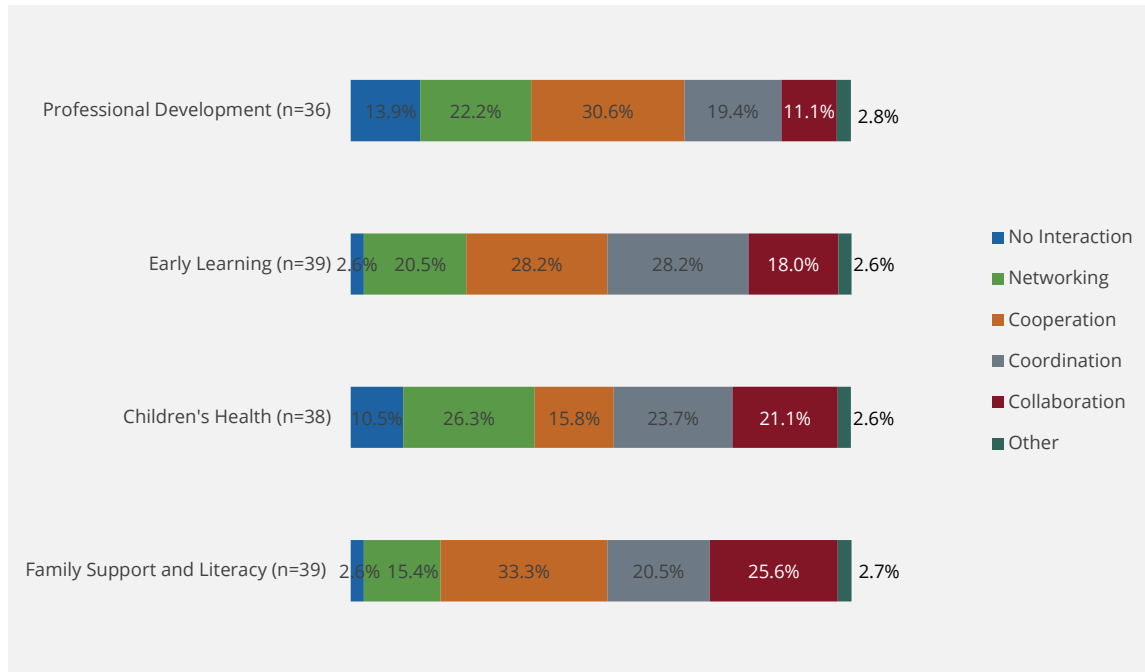


Exhibit 8.8. Collaboration in the Early Childhood System Areas



In the Family Support and Literacy area and in the area of Professional Development the highest percentage of the respondents noted that there was Cooperation among system partners: a relationship characterized by short-term, informal relationships that exist without a clearly defined mission. In the area of Early Learning, the highest percentage of participants selected Cooperation and Coordination. 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 Networking (26%) as the most prevalent mode of relationships between system partners. Networking is a relationship of low intensity, characterized by bringing individuals or organizations together for relationship building and information sharing (see Exhibit 8.9). One additional finding was the relatively large percentage of respondents in the Professional Development (14%) and Children's Health areas (11%) who indicated that there is no interaction among system partners.

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



The FTF Regional Councils in Maricopa County have come together to increase and coordinate resources and supports available to families and providers in Maricopa County. The regions throughout Maricopa County fund a variety of countywide initiatives to enhance the early childhood system including:

FindHelpPhoenix

Maricopa County Department of Public Health created FindHelpPhx.org and its Spanish partner site EncuentraAyudaPhx.org, as an easy-to-use, bilingual, mobile-friendly website that empowers residents of Maricopa County to find the help they need for themselves. FindHelpPhx (EncuentraAyudaPhx) lists approximately 2,000 low-cost and free healthcare and social service resources including mental health, housing, parenting, and food/clothing services. With only two “clicks” (“touches” for mobile users), visitors are able to locate a specific resource, displaying an easy-to-read description of the organization, its services, cost, eligibility requirements, and directions to the point of service. New resources are added routinely and verified annually for accuracy.

Family Resource Network

Established in 2011, the Family Resource Network is a collaboration of more than 35 Family Resource Centers working together to supply parents and caregivers with referrals to connect them with community resources and provide them with the tools they need to support the learning and healthy development of their young children. The objectives of the Network are as follows: increase awareness and availability of services for families and children; improve service delivery to adequately address the needs of families; build capacity throughout the regions to deliver highly effective and efficient family

resource centers services; share expertise and training resources; and foster a learning community across community organizations, health clinics, public entities, and other groups. The long-term goal of the Network is that all families in Arizona have access to the resources and information they need to support their child's health, development, and education.

First Teeth First

First Teeth First is a countywide initiative designed to provide best practice approaches that enhance the oral health status of young children through the prevention of tooth decay, reduction of the prevalence of early childhood tooth decay, and the elimination of the associated risks for pain and infections that can lead to lifelong complications for health and well-being. Maricopa County's Office of Oral Health, in partnership with Dignity Health, administers First Teeth First. Services provided through this program include: oral health screenings, fluoride varnish applications, education and referrals for children zero to five years of age and pregnant women. The program provides services at Women, Infant and Children (WIC) clinics, Immunization clinics, child care centers, preschools and community events. The program also offers professional development and outreach to medical and dental providers to increase awareness and services for young children.

Parent Partners Plus

Southwest Human Development's Parent Partners Plus program is a coordinated referral system that provides families with a single entry point to access home visitation programs. Parent Partners Plus is also responsible for assessing families' needs and referring them to the most appropriate program. The coordinated referral system simplifies and streamlines the referral process for families and for home visitation providers. The coordinated referral also provides a feedback loop for referring agencies and assists, as needed, with linking families to ancillary family support services. This single system that processes referrals increases coordination among programs, limits duplication of services, and improves the utilization of available resources. All home visitation providers in Maricopa County, representing 14 organizations, as well as other social service providers, participate in this system and also work together to coordinate marketing, outreach, and recruitment.

Sectors involved in 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 (85%). This was followed by the State Agencies (61%), and Local and Public Entities (55%, see Exhibit 8.10).

In the area of Children's Health, participants indicated that the Health Care/ Medical Sector (88%), followed by State Agencies (72%), and the Early Care and Education (63%) were the most engaged in systems buildings.

In Early Learning, State Agencies (69%) and Early Care and Education (66%) play the largest role, followed by the Family Support and Social Services (63%).

Finally, in the area of Professional Development, participants indicated that State Agencies (70%) were

mostly involved, followed by the Family Support/ Social Services (52%) and Early Care and Education (48%).

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

	N	State Agency	Early Care & Edu	Family Support/ Social Service Agency	Philanthropy	K-12 Edu	Higher Edu	Advocacy	Local/ Public Entity	Business	Health Care/ Medical	Other
Family Support and Literacy	33	61%	52%	85%	39%	48%	21%	30%	55%	15%	33%	3%
Children's Health	32	72%	63%	53%	28%	28%	13%	28%	50%	19%	88%	3%
Early Learning	35	69%	66%	63%	31%	54%	31%	29%	49%	20%	31%	3%
Professional Development	33	70%	48%	52%	18%	27%	39%	21%	36%	12%	15%	3%

While earlier items asked system partners about the level of collaboration occurring among system partners, when a survey item asked 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 Maricopa County, while several respondents opted not to answer these survey items. Those that did respond 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 (see Exhibits 8.11). 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 (31% to 37%) 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.

Exhibit 8.11. Activities: Family Support & Literacy

Activity	Not At All	A little/ Somewhat	A Lot	Don't Know
Leveraging resources/funding across partners	3%	51%	16%	30%
Sharing facility space	0%	55%	26%	18%
Shared development of program materials	11%	49%	14%	26%
Coordination of outreach and referrals	3%	69%	19%	8%
Knowledge of other programs' intake requirements/referral process	9%	71%	3%	17%
Shared record keeping and management of data information systems	37%	29%	6%	29%
Co-location of programs or services	6%	51%	14%	29%
Partner in program evaluation and/or assessment	24%	36%	3%	36%
Jointly conducting staff training	15%	56%	9%	21%
Shared approach to informing the public of available services	6%	55%	12%	27%
Jointly implement policy changes	25%	19%	6%	50%
Common forms (e.g., intake and/or referral forms)	31%	28%	6%	34%
Child/Family service plan development OR PD plan for ECE professionals	16%	28%	9%	47%
Participation in standing inter-agency committees	3%	52%	21%	24%
Informal agreements	3%	56%	13%	28%
Formal written agreements (e.g., MOUs)	6%	34%	19%	41%
Environmental scan of other organizations in the community that provide services to young families	3%	48%	15%	33%
Other (please describe below)	0%	0%	0%	100%

Within Children's Health, partners noted the most frequent system activities as formal written agreements and shared development of program materials. Shared record keeping and management of data information systems and jointly implementing policy changes were most likely to be rated as not happening at all (see Exhibit 8.12).

Exhibit 8.12. Activities: Children's Health

Activity	Not At All	A little/ Somewhat	A Lot	Don't Know
Leveraging resources/funding across partners	0%	50%	19%	31%
Sharing facility space	0%	53%	17%	31%
Shared development of program materials	6%	33%	21%	39%
Coordination of outreach and referrals	9%	50%	15%	26%
Knowledge of other programs' intake requirements/referral process	6%	73%	6%	15%
Shared record keeping and management of data information systems	24%	18%	6%	52%
Co-location of programs or services	3%	45%	18%	33%
Partner in program evaluation and/or assessment	13%	26%	3%	58%
Jointly conducting staff training	9%	28%	9%	53%
Shared approach to informing the public of available services	0%	53%	16%	31%
Jointly implement policy changes	19%	16%	3%	61%
Common forms (e.g., intake and/or referral forms)	13%	23%	6%	58%
Child/Family service plan development OR PD plan for ECE professionals	6%	26%	6%	61%
Participation in standing inter-agency committees	6%	44%	13%	38%
Informal agreements	3%	52%	13%	32%
Formal written agreements (e.g., MOUs)	6%	23%	23%	48%
Environmental scan of other organizations in the community that provide services to young families	3%	44%	16%	38%
Other (please describe below)	0%	0%	0%	100%

In the area of early learning, partners reported the activities occurring most frequently were leveraging resources or funding across partners or sharing facility space. Shared record keeping, jointly implementing policy changes and using common forms were most likely to be reported as not happening at all (Exhibit 8.13).

Exhibit 8.13. Activities: Early Learning

Activity	Not At All	A little/ Somewhat	A Lot	Don't Know
Leveraging resources/funding across partners	0%	54%	20%	26%
Sharing facility space	3%	64%	17%	17%
Shared development of program materials	6%	53%	9%	31%
Coordination of outreach and referrals	0%	70%	12%	18%
Knowledge of other programs' intake requirements/referral process	12%	70%	3%	15%
Shared record keeping and management of data information systems	28%	28%	3%	41%
Co-location of programs or services	3%	45%	16%	35%
Partner in program evaluation and/or assessment	13%	40%	3%	43%
Jointly conducting staff training	13%	53%	9%	25%
Shared approach to informing the public of available services	13%	52%	16%	19%
Jointly implement policy changes	23%	23%	3%	50%
Common forms (e.g., intake and/or referral forms)	23%	27%	7%	43%
Child/Family service plan development OR PD plan for ECE professionals	10%	23%	10%	57%
Participation in standing inter-agency committees	6%	53%	13%	28%
Informal agreements	7%	47%	3%	43%
Formal written agreements (e.g., MOUs)	6%	35%	13%	45%
Environmental scan of other organizations in the community that provide services to young families	6%	45%	10%	39%
Other (please describe below)	0%	0%	0%	100%

Similar to Early Learning, in the area of Professional Development, partners reported the activities occurring most frequently were leveraging resources and funding across partners and sharing facility space. Across all four areas, respondents reported that using common forms, jointly implementing policy changes, and shared record keeping and management of data information systems were least likely to occur.

Exhibit 8.14. Activities: Professional Development

Activity	Not At All	A little /Somewhat	A Lot	Don't Know
Leveraging resources/funding across partners	3%	49%	26%	23%
Sharing facility space	0%	46%	17%	37%
Shared development of program materials	6%	47%	9%	38%
Coordination of outreach and referrals	0%	64%	6%	30%
Knowledge of other programs' intake requirements/referral process	9%	47%	3%	41%
Shared record keeping and management of data information systems	25%	16%	6%	53%
Co-location of programs or services	3%	32%	13%	52%
Partner in program evaluation and/or assessment	20%	20%	3%	57%
Jointly conducting staff training	6%	48%	10%	35%
Shared approach to informing the public of available services	6%	45%	13%	35%
Jointly implement policy changes	20%	23%	3%	53%
Common forms (e.g., intake and/or referral forms)	23%	17%	3%	57%
Child/Family service plan development OR PD plan for ECE professionals	13%	20%	10%	57%
Participation in standing inter-agency committees	0%	42%	10%	48%
Informal agreements	7%	37%	3%	53%
Formal written agreements (e.g., MOUs)	7%	23%	13%	57%
Environmental scan of other organizations in the community that provide services to young families	3%	42%	0%	55%
Other (please describe below)	0%	0%	0%	100%

Barriers and Future Directions

Respondents were also asked to reflect on barriers in moving the system forward with other Early Childhood System Partners. Several respondents highlighted limited funding as a barrier, leading to a lack of personnel, materials and resources, as well as more specific barriers such as limited funding to cover substitutes so that teachers can attend professional development opportunities. Respondents noted a perception that funds were being allocated to just a few large organizations, resulting in more specialized aspects of service delivery to be eliminated as many of the larger organizations may not address more specific needs of families. Additionally, respondents felt that families must contact several agencies to determine what services they might be eligible to receive. Respondents also identified lack of support by state leaders as a barrier, noting a lack of understanding that funding early

care and education is critical to the success of the state and future workforce, and that placing a greater priority on funding early care and education and all-day kindergarten could significantly reduce crime rates and prison population, saving money in the long run.

Respondents were also asked to reflect on the role of the FTF Regional Partnership Councils in supporting Early Childhood System Building and collaboration efforts in Maricopa County. Respondents had several considerations on how the Councils could support Early Childhood System Building and partner collaboration efforts in Maricopa County. Among these, a common recommendation was requiring collaboration efforts during the development of programs so that a variety of services are available and coordinated for families. Respondents felt that without support for this type of collaboration, organizations were competing against each other to obtain funding from FTF rather than finding a way to work together to serve families more efficiently. They encouraged supporting a way for all agencies to sit at the same table and build mutually beneficial relationships instead of competing for funding support. Respondents recommended combining some of the various networking groups throughout the county to help create a more efficient network to navigate, also resulting in eliminating the duplication of services and competition between organizations for the advancement of their own interests rather than the community's needs.

Respondents also recommended more collaboration specifically with school districts and early childhood entities, recognizing the value in school districts extending into early learning, as well as continued engagement of businesses and agencies outside the existing grantees to participate in system building activities.

SYSTEM COORDINATION HIGHLIGHTS

In Maricopa County, 69 system partners responded to the FTF Coordination and Collaboration Survey providing insight on the system building efforts, level of collaboration and FTF regional partnership 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 was the most collaborative, followed by Children's Health, while Professional Development was the least.

Below are key data trends that highlight the system coordination related assets, needs, and data-driven considerations for the FTF SE Maricopa 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
Over half of FTF Coordination and Collaboration Survey respondents (60%) feel the region's early childhood system is partially coordinated and a quarter consider themselves leaders within the system.	Identify more system leaders that can guide the system partners and participants towards a more coordinated and collective network that will more efficiently serve children and families.

Needs	Considerations
Survey respondents identified Professional Development (11%) as the least collaborative area, followed by Early Learning (18%).	Identify successes from the Family Support and Children's Health 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 SE Maricopa as appropriate.
Respondents expressed the need for further collaboration and partnership.	Consider supporting collective partnerships and collaborations between organizations to reduce duplication, leverage funding, and increase efficiency.

Conclusion

The FTF SE Maricopa Region has both strengths and opportunities for improvement. The region has higher employment, median income and economic resources than other parts of the state and county. Parents in the region are educated but may benefit from more information and awareness of age-appropriate child development and the impact they have on their child's readiness to learn and grow. The region has many strong providers who are continuing to build a more efficient system of care dedicated to the well-being of the region's youngest children and their families, yet could use support to overcome barriers like limited funding and competition for resources. 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 include the assets, needs and considerations from the eight domains presented in this report. These key findings are intended to provide information to the FTF SE Maricopa 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	Considerations
Population Characteristics	
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, such as healthcare and child care needs for young children.
Economic Circumstances	
SE Maricopa region generally has higher employment and median incomes and lower poverty rates than the state, though this varies among subregions.	Consider encouraging stakeholders to target job training and employment programs to the subregions with higher need to help increase employment and median incomes.
Education	
According to the American Community Survey, the high school graduation rates and the average educational attainment level of adults and parents in the region are high, though lower in the SE Maricopa portion of Apache Junction and West Mesa.	Consider supporting programs for parents, such as peer support or mentoring programs, to support each other and share knowledge and attitudes around the importance of education, targeting teen parents or parents without a high school degree, especially in the SE Maricopa portion of Apache Junction and West Mesa.
Early Learning	
Quality First has been increasing the quality	Consider continuing support for Quality First

of child care programs in the region.	efforts in the region to increase the opportunities for children to receive quality early care and education experiences.
According to the Arizona Department of Economic Security, child care subsidies provided in the region increased from 2013 to 2014 (3,130 to 3,257).	Promote the importance of subsidies in providing low income children access to early care and education.
Child Health	
The percentage of mothers participating in WIC who breastfeed their child at least once a day has been increasing and reached 70 percent in 2015.	Continue to provide public education about the benefits of breastfeeding and consider supporting workplace efforts to encourage breastfeeding practices for working mothers.
According to the Arizona Department of Health Services, almost all pregnant women (98%) are receiving some prenatal care.	Promote the importance of early prenatal care and provide education on the impact of prenatal care on the mother and child's future well-being.
Family Support and Literacy	
In Maricopa County, the number of juvenile arrests has decreased and there is a robust support system of ten domestic violence shelters and behavioral health services for female caregivers and young children.	Continue to provide family support services like home visitation in targeted areas to provide support and resources to families.
Communication, Public Information and Awareness	
More than two-thirds of Family and Community Survey respondents (71%) are satisfied with the quality of the services in the region	Continue to support the current network of services and programs so children and their families have access to high quality programs and services.
System Coordination	
Over half of FTF Coordination and Collaboration Survey respondents (60%) feel the region's early childhood system is partially coordinated and a quarter consider themselves leaders within the system.	Identify more system leaders that can guide the system partners and participants towards a more coordinated and collective network that will more efficiently serve children and families.

Needs	Considerations
Population Characteristics	
According to the American Community Survey, most of the children under six living in single-parent households or cared for by grandparents, both of which face additional barriers and difficulties when compared to two parent households, are in Mesa or the SE Maricopa portion of Apache Junction.	Discuss supporting services specifically designed for single-parent and grandparent-led households and targeted in the SE Maricopa portion of Apache Junction and Mesa areas, to help them support the young children in their homes.
Economic Circumstances	
According to the American Community Survey and Feeding America, about 20% of children in the region live in poverty and 34% of residents in the region spend more than 30% of their income on housing.	Encourage community awareness of social service resources in the region, including housing support.
Based on the US Census, zip codes with the highest poverty rates also have more grandparents raising their grandchildren.	Promote supports and resources that can help subsidize child care and other expenses for grandparents raising their grandchildren.
Education	
AzMERIT reports from the Arizona Department of Education show that half of third graders are not meeting proficiency standards for English Language Arts (50%) and Math (50%), especially in Mesa and Gilbert Unified School Districts.	Increase parent outreach and awareness of early education programs to support learning and school readiness from an early age.
Early Learning	
According to the FTF Arizona's Unknown Education Issue brief, almost half of early care and education professionals in the state leave the profession within five years (45%).	Consider providing supports, such as professional development and networking opportunities, for quality early childhood professionals to retain their skills in the early childhood field and reduce staff turnover.
Child Health	
The percentage of kindergartners exempt from receiving immunizations for religious reasons is almost double the state percentage (8% vs. 5%).	Promote more outreach and education regarding the importance of immunizations. Explore further to understand why parents are exempting their children from receiving vaccinations.
Almost half of the children in the region whose parents responded to the Healthy Smiles Healthy Bodies survey (42%) have	Promote oral health services and education within existing programs, such as home visitation, to inform parents of the importance of early oral

experienced tooth decay and 18 percent have had untreated tooth decay.	healthcare. Also, consider partnering with primary care physicians and pediatricians to be allies of oral healthcare and encourage their patients to practice healthy oral health behaviors and regularly visit the dentist.
Family Support and Literacy	
Based on the FTF Family and Community Survey, parent respondents' knowledge of child development and engagement in developmentally enriching activities is lower in the FTF SE Maricopa Region than statewide.	Support community education campaigns to increase awareness of parents' impact on their child's development and the importance of engaging in activities with their children on a daily basis.
Communication, Public Information and Awareness	
Nearly half of respondents (42%) agree that services are not available at convenient times and locations and 42% agree that they are asked to fill out paperwork or eligibility forms multiple times.	Consider supporting a care coordination system that helps link families to information and services and reduces redundancies in paperwork.
Almost 40 percent of respondents do not know if they are eligible to receive services	Consider supporting more parent outreach and/or the development of an online inventory that describes the availability of services and the eligibility criteria for children and their families to receive services.
System Coordination	
Survey respondents identified Professional Development (11%) as the least collaborative area, followed by Early Learning (18%).	Identify successes from the Family Support and Children's Health 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 SE Maricopa as appropriate.
Respondents expressed the need for further collaboration and partnership.	Consider supporting collective partnerships and collaborations between organizations to reduce duplication, leverage funding, and increase efficiency.

Appendix A

Additional Data Indicators

Chapter 1

Appendix 1.1. Detailed age breakdown for children 0-5

	Arizona	Maricopa County	Southeast Maricopa Region
0 years old	87,557	54,300	10,924
1 year old	89,746	55,566	11,038
2 years old	93,216	57,730	11,629
3 years old	93,880	58,192	11,867
4 years old	91,316	56,982	11,534
5 years old	90,894	56,447	11,490

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
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

Chapter 2

Appendix 2.1. Percent of students eligible for free and reduced-price lunch by school in the FTF Southeast Maricopa Region for the 2014-2015 school year

School	Percent of students eligible for free and reduced price lunch
Concordia Charter School	97.3%
Sequoia Secondary School	97.2%
Holmes Elementary School	96.8%
Lowell Elementary School	96.5%
Guerrero Elementary School	96.2%
Burke Basic School	95.2%
Longfellow Elementary School	94.9%
Hawthorne Elementary School	94.1%
New Horizon School for the Performing Arts	93.7%
Lincoln Elementary School	93.0%
Redbird Elementary School	92.5%
Webster Elementary School	92.1%
Lindbergh Elementary School	91.9%
Mesa Arts Academy	91.6%
Adams Elementary School	91.1%
Whitman Elementary School	90.5%
Jefferson Elementary School	89.3%
Kaizen Education Foundation dba Vista Grove Preparatory Academy Elementary	89.3%
Kino Junior High School	89.1%
Kerr Elementary School	87.2%
STEP UP SCHOOL	87.1%

Sequoia Charter Elementary School	87.0%
Eisenhower Center for Innovation	85.8%
Edison Elementary School	84.8%

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

Chapter 3

Appendix 3.1. Race or ethnicity of preschool through 12th grade students by school in FY 2016

School	American Indian/ Alaska Native	Asian	Black /African American	Hispanic / Latino	Native Hawaiian/ Other Pacific	White	Multi-racial
Academy with Community Partners	3	0	5	32	0	15	2
Adams Elementary School	141	5	87	438	10	83	25
ALA Mesa	0	10	7	60	5	310	26
ALA QC Elem	6	5	18	97	2	596	18
American Leadership Academy	2	24	19	63	4	510	24
American Leadership Academy - Queen Creek	8	19	49	180	5	1013	32
Arizona Agribusiness & Equine Center, Inc. - Red Mountain	3	0	2	22	2	125	2
Arizona Connections Academy	47	32	75	420	3	1228	147
Ashland Elementary	10	24	16	154	2	549	26
Augusta Ranch Elementary	7	24	21	210	6	656	34
Ball Charter Schools (Val Vista)	0	31	12	68	4	238	20
BASIS Mesa	4	119	49	101	0	333	16
Benjamin Franklin Charter School - Crismon	5	8	11	97	2	623	26
Benjamin Franklin Charter School - Gilbert	2	26	13	83	0	379	36
Benjamin Franklin Charter School - Power	2	22	10	61	6	603	21
Benjamin Franklin High School	3	20	15	111	2	688	27
Boulder Creek Elementary	5	11	17	196	5	398	36
Brinton Elementary	10	15	17	165	4	318	25
Burk Elementary School	6	10	9	183	5	203	25
Burke Basic School	7	4	34	739	3	70	2
Bush Elementary	3	6	12	125	1	424	22
Cambridge Academy East	0	6	23	92	0	296	22
Campo Verde High School	12	110	79	319	1	1534	33

Canyon Rim Elementary	9	11	21	220	2	538	39
Carol Rae Ranch Elementary	3	22	20	104	1	409	26
Carson Junior High School	135	15	73	581	3	186	8
Centennial Elementary School	7	23	18	231	1	581	39
Challenger Basic School	5	18	9	23	1	286	2
Chandler Traditional Academy-Freedom	0	62	18	78	0	508	26
Chaparral Elementary School	7	41	18	165	2	638	29
Charlotte Patterson Elementary	3	36	26	137	2	667	23
Concordia Charter School	7	0	1	102	0	2	0
Cooley Middle School	9	35	52	175	3	661	24
Coronado Elementary School	3	28	16	121	3	472	32
Cortina Elementary	4	30	24	164	3	662	38
Crismon Elementary School	21	6	43	209	1	297	14
Desert Hills High School	33	0	21	65	0	73	7
Desert Mountain Elementary	5	8	5	110	2	465	15
Desert Ridge High	24	102	117	563	5	1895	71
Desert Ridge Jr. High	9	37	53	281	1	878	31
Dobson High School	130	74	202	1204	15	994	21
EAGLE College Preparatory School-Mesa	3	4	8	120	1	20	5
Eagleridge Enrichment Program	3	3	13	96	8	609	17
Early Education Center	2	2	1	38	0	40	3
East Valley Academy	22	5	18	243	1	63	2
East Valley High School	3	0	4	55	0	80	6
Edison Elementary School	37	0	32	424	6	196	9
Edkey Inc. - Pathfinder Academy at Eastmark	2	10	8	34	4	245	7
Edkey, Inc. - Pathfinder Academy - Sequoia Lehi	5	2	3	29	0	55	3
EDUPRIZE SCHOOL Gilbert	15	69	49	316	13	1321	61
Eisenhower Center for Innovation	23	1	48	395	2	79	15
Elona P. Cooley Early Child Development Center	1	4	5	24	0	58	4

Emerson Elementary School	46	4	75	433	2	243	11
Entz Elementary School	18	5	50	202	2	435	8
Falcon Hill Elementary School	7	8	22	88	3	377	9
Field Elementary School	27	4	26	292	5	256	17
Finley Farms Elementary	9	25	28	137	3	481	25
Frances Brandon-Pickett Elementary	7	1	14	166	1	402	15
Franklin at Alma Elementary	7	14	17	88	9	155	9
Franklin at Brimhall Elementary	3	13	23	131	6	701	12
Franklin Elementary School	14	6	2	263	11	482	12
Franklin Junior High School	2	7	4	71	5	187	7
Franklin West Elementary	7	5	8	172	12	367	7
Fremont Junior High School	24	30	37	300	2	625	9
Gateway Pointe Elementary	13	28	75	171	6	402	50
Gem Charter School	4	0	0	14	0	10	2
Gilbert Classical Academy High School	2	51	6	44	1	184	3
Gilbert Classical Academy Jr.	1	38	6	30	0	143	5
Gilbert Elementary School	5	11	22	269	0	236	13
Gilbert Global Academy High School	1	1	2	7	1	39	0
Gilbert Global Academy Junior High	0	0	0	0	0	3	0
Gilbert High School	32	86	83	576	7	1588	49
Gilbert Junior High School	4	13	39	173	1	266	7
Great Hearts Academies - Arete Prep	5	22	19	92	0	372	17
Greenfield Elementary School	4	17	6	72	3	654	27
Greenfield Junior High School	4	30	19	144	2	622	11
Guerrero Elementary School	38	2	42	517	6	55	5
Hale Elementary School	32	11	7	114	3	473	31
Harris Elementary School	13	7	23	228	3	180	12
Hawthorne Elementary School	6	1	26	422	9	87	10
Heritage Academy	4	15	12	100	5	576	4

Heritage Academy Queen Creek	0	2	3	31	0	309	1
Hermosa Vista Elementary School	34	5	9	112	4	582	14
Highland Elementary School	19	4	24	137	5	515	24
Highland High School	22	159	84	431	12	2349	34
Highland Jr High School	9	34	32	209	5	920	13
Highland Park Elementary	4	20	13	112	2	697	27
Higley High School	7	84	81	338	6	1112	55
Higley Traditional Academy	5	57	23	141	3	418	41
Hillcrest Academy	1	2	9	34	1	96	5
Holmes Elementary School	1	0	10	580	1	41	3
Houston Elementary School	3	7	9	127	3	275	17
Imagine East Mesa Elementary	6	16	27	215	2	347	27
Imagine East Mesa Middle	0	4	8	40	2	76	3
Imagine West Gilbert Elementary	6	7	27	58	2	197	19
Imagine West Gilbert Middle	2	4	4	28	2	40	9
Irving Elementary School	12	3	14	262	2	260	5
Ishikawa Elementary School	91	11	6	190	2	516	20
Islands Elementary School	14	21	19	157	4	316	22
Jack Barnes Elementary School	4	4	8	81	3	377	13
Jefferson Elementary School	7	0	16	384	0	121	2
Johnson Elementary School	6	6	14	167	3	365	23
Kaizen Education Foundation dba Gilbert Arts Academy	0	2	9	35	1	90	12
Kaizen Education Foundation dba Vista Grove Preparatory Academy Elementary	20	1	48	144	4	62	14
Keller Elementary School	8	6	15	434	7	152	6
Kerr Elementary School	109	1	38	421	5	77	25
Kino Junior High School	72	4	34	792	2	130	5
Las Sendas Elementary School	9	19	12	71	5	667	22
Leading Edge Academy at East Mesa	5	0	4	20	0	83	7

Leading Edge Academy Gilbert Elementary	2	3	23	60	1	107	17
Leading Edge Online Academy	2	0	3	19	0	52	2
Learning Foundation	5	3	10	106	0	62	22
Learning Foundation and Performing Arts Alta Mesa	1	3	23	71	0	81	18
Learning Foundation and Performing Arts Gilbert	2	11	30	95	3	238	41
Learning Foundation and Performing Arts Warner	3	10	40	125	2	240	52
Legacy Elementary School	1	1	8	70	0	80	3
Legacy Traditional Charter School - Gilbert	5	62	61	180	5	696	53
Lehi Elementary School	51	1	9	262	1	59	7
Liberty Arts Academy	1	8	22	76	0	98	10
Lincoln Elementary School	21	1	9	714	4	43	2
Lindbergh Elementary School	3	3	20	377	1	55	10
Longfellow Elementary School	16	2	15	614	5	31	7
Lowell Elementary School	7	2	15	556	6	20	6
MacArthur Elementary School	11	2	10	110	7	396	2
Madison Elementary School	9	5	18	194	2	263	15
Mendoza Elementary School	6	3	17	133	2	316	6
Meridian	3	17	25	185	4	610	24
Mesa Academy for Advanced Studies	2	40	4	44	0	336	7
Mesa Arts Academy	12	0	15	145	0	57	10
Mesa Distance Learning Program	4	4	5	56	2	127	8
Mesa High School	75	54	142	2137	27	1018	26
Mesa Transitional Learning Center	3	2	13	16	0	37	1
Mesquite Elementary School	8	28	24	160	3	392	26
Mesquite High School	21	116	104	469	5	1149	44
Mesquite Jr High School	5	36	36	183	3	378	18
Montessori Education Centre Charter School - Mesa	1	2	9	42	1	182	13
Montessori Education Centre Charter School - North Campus	1	6	3	38	3	160	8
Montessori House Charter School	1	0	2	0	0	47	0

Mountain View High School	134	75	94	810	14	2212	27
Neely Traditional Academy	4	107	9	104	1	534	46
New Horizon School for the Performing Arts	7	0	11	100	4	33	6
Newell Barney Junior High School	10	13	27	179	2	587	7
Noah Webster Schools- Mesa	9	30	25	295	2	650	60
Oak Tree Elementary	10	29	24	235	1	295	34
O'Connor Elementary School	6	4	23	198	5	305	23
Pathfinder Academy	0	0	2	19	0	233	4
Patriot Academy	0	0	9	16	0	51	0
Patterson Elementary	13	11	25	192	6	381	18
Patterson Elementary School	13	14	17	130	2	386	31
Perry High School	37	221	153	497	5	2465	45
Pieceful Solutions Charter School	0	4	8	11	0	35	1
Pioneer Elementary School	10	21	8	110	5	347	26
Playa del Rey Elementary School	5	27	18	148	4	289	25
Porter Elementary School	18	4	27	240	2	201	17
Poston Junior High School	29	10	51	473	6	440	10
Power Ranch Elementary	10	20	23	133	2	513	45
Quartz Hill Elementary	3	6	9	107	0	510	20
Queen Creek Elementary School	2	9	13	266	0	486	14
Queen Creek High School	26	32	61	437	6	1311	36
Queen Creek Middle School	3	5	11	102	0	273	6
Red Mountain Center for Early Childhood	11	1	10	94	0	233	10
Red Mountain High School	61	68	119	686	7	2387	60
Red Mountain Ranch Elementary	7	8	14	104	2	437	13
Redbird Elementary School	18	2	26	356	17	71	10
Rhodes Junior High School	58	18	57	555	8	250	11
Riggs Elementary	10	26	29	154	0	764	40
Robson Elementary School	24	3	24	425	2	175	9

Roosevelt Elementary School	56	22	51	322	10	104	15
Salk Elementary School	17	3	35	313	5	290	16
San Tan Charter School	6	35	21	89	2	449	35
San Tan Elementary	5	35	33	138	1	447	20
Self Development Charter School	2	34	20	121	8	268	19
Sequoia Charter Elementary School	5	5	33	338	1	125	5
Sequoia Choice School Arizona Distance Learning School	37	12	17	74	5	374	10
Sequoia School for the Deaf and Hard of Hearing	5	3	5	22	1	26	1
Sequoia Secondary School	5	4	40	213	1	138	5
Settlers Point Elementary	6	26	16	139	0	383	30
Shepherd Junior High School	19	14	27	150	2	415	13
Skyline High School	54	50	100	960	18	1413	28
Smith Junior High School	12	13	35	312	1	589	22
Sonoma Ranch Elementary School	10	22	13	129	1	304	26
Sonoran Desert School	1	0	1	4	0	31	0
Sossaman Middle School	7	30	35	172	2	632	39
Sousa Elementary School	8	3	3	135	2	397	16
South Valley Jr. High	12	38	37	178	0	869	19
Spectrum Elementary	10	34	37	108	2	427	29
Stapley Junior High School	74	22	11	172	1	668	8
STEP UP SCHOOL	5	0	11	65	0	13	2
Stevenson Elementary School	17	4	20	416	11	302	6
Sue Sossaman Early Childhood Development Center	1	3	0	17	3	63	7
Sun Valley High School	30	3	47	312	4	126	15
Superstition Springs Elementary	6	17	16	153	5	420	23
Taft Elementary School	5	1	5	214	6	237	9
Taylor Junior High School	35	15	63	607	8	407	18
Towne Meadows Elementary School	5	23	29	123	4	445	28
Val Vista Lakes Elementary School	6	11	12	111	1	373	23

Washington Elementary School	44	6	45	157	3	225	28
Webster Elementary School	63	3	37	378	2	94	18
Weinberg Elementary School	5	21	18	112	1	602	18
Westwood High School	329	66	196	1653	11	881	23
Whitman Elementary School	131	1	34	369	11	86	29
Whittier Elementary School	62	10	28	293	3	145	17
Williams Field High School	13	100	99	400	7	1185	67
Willie & Coy Payne Jr. High	19	53	48	172	1	830	20
Wilson Elementary School	24	10	45	266	2	314	26
Zaharis Elementary	6	3	7	101	2	780	26
Grand Total	3608	4065	5791	45811	686	86022	3950

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

Appendix 3.2. 2014 School Report Card Letter Grade for Districts

School District	Growth Points	Composite Points	Total Points	Final Letter Grade
East Valley Academy	94	103	197	A
Self Development Charter School	73	102	175	A
Challenger Basic School, Inc.	70	101	171	A
CAFA, Inc. dba Learning Foundation Performing Arts School	80	89	169	A
Boys & Girls Clubs of the East Valley dba Mesa Arts Academy	70	95	165	A
Cambridge Academy East, Inc	70	89	159	A
Higley Unified School District	63	96	159	A
Heritage Academy, Inc.	56	100	156	A
Edkey, Inc. - Pathfinder Academy	62	93	155	A
Arizona Agribusiness & Equine Center, Inc.	.	.	154	A
Legacy Traditional School - Gilbert	57	96	153	A
Queen Creek Unified District	59	94	153	A
Patriot Academy, Inc.	58	94	152	A
Benjamin Franklin Charter School	61	90	151	A
Ball Charter Schools (Val Vista)	55	92	147	A
Noah Webster Schools - Mesa	57	89	146	A
Gilbert Unified District	55	90	145	A
Montessori Education Centre Charter School	62	83	145	A
Mesa Preparatory Academy, Inc.	.	.	144	A
BASIS School, Inc.	.	.	143	A
East Mesa Charter Elementary School, Inc.	56	80	136	B
West Gilbert Charter Middle School, Inc.	53	80	133	B
LEAD Charter Schools	48	84	132	B
West Gilbert Charter Elementary School, Inc.	53	79	132	B
Kaizen Education Foundation dba Gilbert Arts Public Charter Academy	45	78	123	B

Kaizen Education Foundation dba Liberty Arts Academy	51	72	123	B
Hillcrest Academy, Inc.	53	68	121	B
CAFA, Inc. dba Learning Foundation and Performing Arts Alta Mesa	.	.	118	C
CAFA, Inc. dba Learning Foundation and Performing Arts Gilbert	40	75	115	C
Kaizen Education Foundation dba Vista Grove Preparatory Academy Elementary	57	57	114	C
Legacy Education Group	.	.	114	C
Montessori House, Inc.	47	65	112	C
Arizona Connections Academy Charter School, Inc.	.	.	111	C
Legacy Schools	49	61	110	C
New Horizon School for the Performing Arts	48	62	110	C
American Basic Schools LLC	42	67	109	C
Imagine Middle at East Mesa, Inc.	44	64	108	C
STEP UP Schools, Inc.	43	61	104	C
Gem Charter School, Inc.	46	57	103	C

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

Appendix 3.3. Enrollment by district and school in 2015

District & School	Sum of Total Enrollment
Academy with Community Partners Inc	57
Academy with Community Partners	57
American Basic Schools LLC	859
Burke Basic School	859
American Charter Schools Foundation d.b.a. Desert Hills High School	199
Desert Hills High School	199
American Charter Schools Foundation d.b.a. Sun Valley High School	537
Sun Valley High School	537
American Leadership Academy, Inc.	3112
ALA Mesa	418
ALA QC Elem	742
American Leadership Academy	646
American Leadership Academy - Queen Creek	1306
Arete Preparatory Academy	527
Great Hearts Academies - Arete Prep	527
Arizona Agribusiness & Equine Center, Inc.	156
Arizona Agribusiness & Equine Center, Inc. - Red Mountain	156
Arizona Connections Academy Charter School, Inc.	1952
Arizona Connections Academy	1952
Ball Charter Schools (Val Vista)	373
Ball Charter Schools (Val Vista)	373
BASIS Schools, Inc.	622
BASIS Mesa	622
Benjamin Franklin Charter School	2902
Benjamin Franklin Charter School - Crismon	772

Benjamin Franklin Charter School - Gilbert	539
Benjamin Franklin Charter School - Power	725
Benjamin Franklin High School	866
Boys & Girls Clubs of the East Valley dba Mesa Arts Academy	239
Mesa Arts Academy	239
CAFA, Inc. dba Learning Foundation and Performing Arts Alta Mesa	197
Learning Foundation and Performing Arts Alta Mesa	197
CAFA, Inc. dba Learning Foundation and Performing Arts Gilbert	892
Learning Foundation and Performing Arts Gilbert	420
Learning Foundation and Performing Arts Warner	472
CAFA, Inc. dba Learning Foundation Performing Arts School	208
Learning Foundation	208
Cambridge Academy East, Inc	439
Cambridge Academy East	439
Challenger Basic School, Inc.	344
Challenger Basic School	344
Chandler Unified District #80	7952
Chandler Traditional Academy-Freedom	692
Charlotte Patterson Elementary	894
Perry High School	3423
Riggs Elementary	1023
Weinberg Elementary School	777
Willie & Coy Payne Jr. High	1143
Concordia Charter School, Inc.	112
Concordia Charter School	112
EAGLE South Mountain Charter, Inc.	161
EAGLE College Preparatory School- Mesa	161
East Mesa Charter Elementary School, Inc.	640
Imagine East Mesa Elementary	640

East Valley Academy	<25
East Valley Academy	<25
Edkey, Inc. - Pathfinder Academy	665
Edkey Inc. - Pathfinder Academy at Eastmark	310
Edkey, Inc. - Pathfinder Academy - Sequoia Lehi	97
Pathfinder Academy	258
Edkey, Inc. - Sequoia Charter School	918
Sequoia Charter Elementary School	512
Sequoia Secondary School	406
Edkey, Inc. - Sequoia Choice Schools	529
Sequoia Choice School Arizona Distance Learning School	529
Edkey, Inc. - Sequoia School for the Deaf and Hard of Hearing	63
Sequoia School for the Deaf and Hard of Hearing	63
Eduprize Schools, LLC	1844
EDUPRIZE SCHOOL Gilbert	1844
Gem Charter School, Inc.	30
Gem Charter School	30
Gilbert Unified District	35987
Ashland Elementary	781
Augusta Ranch Elementary	958
Boulder Creek Elementary	668
Burk Elementary School	441
Campo Verde High School	2089
Canyon Rim Elementary	840
Carol Rae Ranch Elementary	585
Desert Ridge High	2777
Desert Ridge Jr. High	1290
Finley Farms Elementary	708
Gilbert Classical Academy High School	291

Gilbert Classical Academy Jr.	223
Gilbert Elementary School	556
Gilbert Global Academy High School	51
Gilbert Global Academy Junior High	<25
Gilbert High School	2421
Gilbert Junior High School	503
Greenfield Elementary School	783
Greenfield Junior High School	832
Harris Elementary School	466
Highland High School	3091
Highland Jr High School	1222
Highland Park Elementary	875
Houston Elementary School	441
Islands Elementary School	553
Meridian	868
Mesquite Elementary School	641
Mesquite High School	1908
Mesquite Jr High School	659
Neely Traditional Academy	805
Oak Tree Elementary	628
Patterson Elementary School	593
Pioneer Elementary School	527
Playa del Rey Elementary School	516
Quartz Hill Elementary	655
Settlers Point Elementary	600
Sonoma Ranch Elementary School	505
South Valley Jr. High	1153
Spectrum Elementary	647
Superstition Springs Elementary	640

Towne Meadows Elementary School	657
Val Vista Lakes Elementary School	537
Heritage Academy Queen Creek, Inc.	346
Heritage Academy Queen Creek	346
Heritage Academy, Inc.	716
Heritage Academy	716
Higley Unified School District	11878
Centennial Elementary School	900
Chaparral Elementary School	900
Cooley Middle School	959
Coronado Elementary School	675
Cortina Elementary	925
Elona P. Cooley Early Child Development Center	96
Gateway Pointe Elementary	745
Higley High School	1683
Higley Traditional Academy	688
Power Ranch Elementary	746
San Tan Elementary	679
Sossaman Middle School	917
Sue Sossaman Early Childhood Development Center	94
Williams Field High School	1871
Hillcrest Academy, Inc.	148
Hillcrest Academy	148
Imagine Middle at East Mesa, Inc.	133
Imagine East Mesa Middle	133
Kaizen Education Foundation dba Gilbert Arts Academy	149
Kaizen Education Foundation dba Gilbert Arts Academy	149
Kaizen Education Foundation dba Liberty Arts Academy	215
Liberty Arts Academy	215

Kaizen Education Foundation dba Vista Grove Preparatory Academy Elementary	293
Kaizen Education Foundation dba Vista Grove Preparatory Academy Elementary	293
LEAD Charter Schools	410
Leading Edge Academy at East Mesa	119
Leading Edge Academy Gilbert Elementary	213
Leading Edge Online Academy	78
Legacy Education Group	148
East Valley High School	148
Legacy Schools	163
Legacy Elementary School	163
Legacy Traditional School - Gilbert	1062
Legacy Traditional Charter School - Gilbert	1062
Maricopa County Regional District	72
Mesa Transitional Learning Center	72
Mesa Unified District	62509
Adams Elementary School	789
Brinton Elementary	554
Bush Elementary	593
Carson Junior High School	1001
Crismon Elementary School	591
Dobson High School	2640
Eagleridge Enrichment Program	749
Early Education Center	86
East Valley Academy	341
Edison Elementary School	704
Eisenhower Center for Innovation	563
Emerson Elementary School	813
Entz Elementary School	720
Falcon Hill Elementary School	514

Field Elementary School	627
Franklin at Alma Elementary	299
Franklin at Brimhall Elementary	889
Franklin Elementary School	790
Franklin Junior High School	283
Franklin West Elementary	578
Fremont Junior High School	1027
Guerrero Elementary School	665
Hale Elementary School	671
Hawthorne Elementary School	561
Hermosa Vista Elementary School	760
Highland Elementary School	728
Holmes Elementary School	636
Irving Elementary School	558
Ishikawa Elementary School	836
Jefferson Elementary School	530
Johnson Elementary School	584
Keller Elementary School	628
Kerr Elementary School	676
Kino Junior High School	1039
Las Sendas Elementary School	805
Lehi Elementary School	390
Lincoln Elementary School	794
Lindbergh Elementary School	469
Longfellow Elementary School	690
Lowell Elementary School	612
MacArthur Elementary School	538
Madison Elementary School	506
Mendoza Elementary School	483

Mesa Academy for Advanced Studies	433
Mesa Distance Learning Program	206
Mesa High School	3479
Mountain View High School	3366
O'Connor Elementary School	564
Patterson Elementary	646
Porter Elementary School	509
Poston Junior High School	1019
Red Mountain Center for Early Childhood	359
Red Mountain High School	3388
Red Mountain Ranch Elementary	585
Redbird Elementary School	500
Rhodes Junior High School	957
Robson Elementary School	662
Roosevelt Elementary School	580
Salk Elementary School	679
Shepherd Junior High School	640
Skyline High School	2623
Smith Junior High School	984
Sousa Elementary School	564
Stapley Junior High School	956
Stevenson Elementary School	776
Taft Elementary School	477
Taylor Junior High School	1153
Washington Elementary School	508
Webster Elementary School	595
Westwood High School	3160
Whitman Elementary School	661
Whittier Elementary School	558

Wilson Elementary School	687
Zaharis Elementary	925
Montessori Education Centre Charter School	469
Montessori Education Centre Charter School - Mesa	250
Montessori Education Centre Charter School - North Campus	219
Montessori House, Inc.	50
Montessori House Charter School	50
New Horizon School for the Performing Arts	161
New Horizon School for the Performing Arts	161
Noah Webster Schools - Mesa	1071
Noah Webster Schools- Mesa	1071
Patriot Academy, Inc.	76
Patriot Academy	76
PS Charter Schools, Inc.	59
Pieceful Solutions Charter School	59
Queen Creek Unified District	5630
Desert Mountain Elementary	610
Frances Brandon-Pickett Elementary	606
Jack Barnes Elementary School	490
Newell Barney Junior High School	825
Queen Creek Elementary School	790
Queen Creek High School	1909
Queen Creek Middle School	400
Riverside Elementary District	<25
Emerson Elementary School	<25
San Tan Montessori School, Inc.	637
San Tan Charter School	637
Self Development Charter School	472
Self Development Charter School	472

Sonoran Desert School	37
Sonoran Desert School	37
STEP UP Schools, Inc.	96
STEP UP SCHOOL	96
West Gilbert Charter Elementary School, Inc.	316
Imagine West Gilbert Elementary	316
West Gilbert Charter Middle School, Inc.	89
Imagine West Gilbert Middle	89
Grand Total	149935

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

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

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

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%

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 and Early Head Start*

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	1.2%	1.6%
Asian	0.1%	0.7%
Black or African American	0.5%	6.5%
Native Hawaiian or other pacific Islander	0.1%	0.5%
White	76.9%	9.0%
Biracial/Multi-racial	1.8%	1.1%
Other	0.0%	0.0%
Unspecified	0.0%	0.0%

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

*County of Maricopa, Chicanos Por La Causa, Inc., Child Crisis Arizona, and Maricopa County Human Services are Head Start grantees for three cities in Arizona that fall within the FTF SE Maricopa Region: Mesa, Gilbert, and Queen Creek. Data presented are aggregated across all grantees and may include cities outside of the FTF SE Maricopa Region..

Appendix 4.7. 2016 Funded Enrollment by Program Option for Head Start*

Funded enrollment by program option -children	# of children
Center-based program- 5 days per week - Full day enrollment	1226
Of these, the number available as full-working-day	1130
Of these, the number available for full-calendar-year	1082
Center-based program- 5 days per week - Part-day enrollment	20
Of these, the number in double sessions	0
Center-based program- 4 days per week - Full-day enrollment	0
Center-based program- 4 days per week - Part-day enrollment	1076
Of these, the number in double sessions	891
Home-based program	176
Combination option program	0
Family child care program	80
Of these, the number available as full-working-day enrollment	80
Of these, the number available for full-calendar-year	80
Locally designed option	0

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

*County of Maricopa, Chicanos Por La Causa, Inc., Child Crisis Arizona, and Maricopa County Human Services are Head Start grantees for three cities in Arizona that fall within the FTF SE Maricopa Region: Mesa, Gilbert, and Queen Creek. Data presented are aggregated across all grantees and may include cities outside of the FTF SE Maricopa Region..

Appendix 4.8. Quality First Enrollment by Quality First Star Ratings for Centers and Providers

Center Data	FTF Southeast Maricopa Region
Total Quality First licensed participants	63
Total Licensed Capacity 3-5 Star	3,346
Number of sites 3-5 Star	38
Number of Non-Quality First licensed centers	243
Total Non-Quality First licensed providers	427

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

Appendix 4.9. 2012-2015 Number of children receiving services from the Division of Developmental Disabilities

Year	Arizona	Maricopa County	FTF Southeast Maricopa Region
Total number of children (ages 0-2) receiving services			
2012	2,646	1,926	396
2013	2,693	1,918	364
2014	2,341	1,662	325
2015	2,336	1,647	347
Total number of children (ages 3-5) receiving services			
2012	2,536	1,866	452
2013	2,600	1,891	462
2014	2,533	1,847	459
2015	2,540	1,826	465

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

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

Year	Arizona	Maricopa County	FTF Southeast Maricopa Region
Total number of visits for children ages 0-2			
2012	168,992	130,651	32,255
2013	158,496	117,268	28,238
2014	130,486	98,971	22,991
2015	120,519	87,309	21,947
Total number of visits for children ages 3-5			
2012	363,468	285,585	71,441
2013	374,440	294,586	75,646
2014	367,590	285,484	78,266
2015	358,322	275,800	75,989

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

Appendix 4.11. Types of Disabilities of Preschool Children

Type of Disability	Arizona	County	FTF Southeast Maricopa Region
2012			
Deaf-Blind	<25	<25	<25
Developmental Delay	3,672	2,231	443
Hearing impaired	160	112	<25
Preschool Severe Delay	2,164	1,442	327
Speech/Language Impairment	3,560	2,299	638
Visual Impairment	111	37	<25
Total	9,680	6,124	1,443
2013			
Deaf-Blind	<25	<25	<25
Developmental Delay	3,774	2,384	513
Hearing impaired	157	109	25
Preschool Severe Delay	2,187	1,444	334
Speech/Language Impairment	3,437	2,251	642
Visual Impairment	118	44	<25
Total	9,689	6,236	1,521
2014			
Deaf-Blind	<25	<25	<25
Developmental Delay	3,747	2,369	456
Hearing impaired	154	104	<25
Preschool Severe Delay	1,921	1,277	267
Speech/Language Impairment	3,503	2,285	578
Visual Impairment	105	40	<25
Total	9,444	6,081	1,328
2015			
Deaf-Blind	<25	<25	<25
Developmental Delay	3,571	2,267	456

Hearing impaired	63	42	<25
Preschool Severe Delay	1,859	1,233	267
Speech/Language Impairment	3,155	2,096	578
Visual Impairment	54	36	<25
Total	8,702	5,674	1,325

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

*The data presented are unduplicated (i.e., children diagnosed with multiple disabilities are counted only one time in the Federal Primary Need [FPN] category).

Appendix 4.12. Types of Speech, Language, and Hearing Service Providers

Types of Service Provider	County
Number of Speech Language Pathologists	1,657
Number of Hearing Aid Dispensers	314
Number of Dispensing Audiologists	209
Number of Speech Language Assistants	767
Number of Speech Language Pathologists (Limited Licensed)	156
Number of Temporary Speech Language Pathologists	89
Number of Temporary Hearing Aid Dispensers	19
Number of Audiologists	13
Number of Specialized DUI/DVTX Audiologists	1
Number of Special Licensing Pathologists	2

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

Appendix 4.13. Infants and toddlers with an Individual Family Service Plan (IFSP) who received an evaluation assessment and IFSP within 45 days of referral

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 new environment ****	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

Chapter 5

Appendix 5.1. 2009-2014 Number of Births that Were Covered by AHCCCS or Indian Health

Year	Arizona	FTF SE Maricopa Region
2009	51,046	4,829
2010	48,014	4,692
2011	46,507	4,525
2012	46,923	4,332
2013	46,872	4,639
2014	47,234	4,676

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

Appendix 5.2. 2016 Enrollment: Health Insurance Information from Head Start Programs FY 2015-2016*

	# of children at enrollment	# of children at end of enrollment year
Number of Children with Health Insurance	2,804	2,915
Number of Enrollment Medicaid and/or CHIP	2,652	2,724
Number of enrollment in State-Only Funded Insurance (for example, medically indigent insurance)	0	0
Number with private health insurance (for example, parent's insurance)	126	142
Number with Health Insurance other than listed above, for example, Military Health (Tri-Care or CHAMPUS)	26	49
Number of Children with no health insurance	157	46
Number of Children with an ongoing source of continuous accessible health care	2,753	2,935
Number of children receiving medical services through the Indian Health service	37	38

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

*County of Maricopa, Chicanos Por La Causa, Inc., Child Crisis Arizona, and Maricopa County Human Services are Head Start grantees for three cities in Arizona that fall within the FTF SE Maricopa Region: Mesa, Gilbert, and Queen Creek. Data presented are aggregated across all grantees and may include cities outside of the FTF SE Maricopa Region..

Appendix 5.3. 2012-2015 Reportable Illnesses for all Ages

Year	Arizona	County
2012	20,690	15,068
2013	13,913	8,592
2014	13,211	8,473
2015	15,966	10,241

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 5.4. 2012-2014 Total Number of Asthma-Related Visits to ER

Year	Arizona	County	FTF SE Maricopa Region
2012	5,450	3,974	565
2013	4,890	3,643	542
2014	4,560	3,446	470

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

Appendix 5.5. 2009-2014 Child Fatality Rates for Children under 18

Year	Arizona	County
2009	947	57%
2010	862	56%
2011	837	57%
2012	854	59%
2013	810	59%
2014	834	60%

Arizona Department of Health Services (2015). Arizona Child Fatality Review. Retrieved from <http://azdhs.gov/documents/prevention/womens-childrens-health/reports-fact-sheets/child-fatality-review-annual-reports/cfr-annual-report-2015.pdf>

Appendix 5.6. 2009-2014 Manner of Death for Children Under 18*

Manner of Death	Arizona
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	
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://azdhs.gov/documents/prevention/womens-childrens-health/reports-fact-sheets/child-fatality-review-annual-reports/cfr-annual-report-2015.pdf>
 *Does not include deaths of pending manner

Appendix 5.7. 2014 Manner of Death for Children 1-4 Years of Age*

Manner of Death	Arizona
2014 (n=95)	
Natural Accident	44.2%
Accident	40.0%
Undetermined	5.3%
Homicide	15.8%
Suicide	0.0%

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

Appendix 5.8. 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	5,082	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 5.9. 2009-2014 Women Who Received Prenatal Care*

Number of Prenatal Care Visits	Year	Statewide	FTF Region
Received fewer than five prenatal care visits			
	2009	3.4%	1.5%
	2010	3.3%	1.4%
	2011	3.4%	1.7%
	2012	3.6%	1.8%
	2013	3.8%	1.7%
	2014	4.4%	1.7%
5-8 prenatal visits			
	2009	15.6%	9.6%
	2010	14.4%	7.7%
	2011	14.0%	8.1%
	2012	13.7%	8.0%
	2013	13.5%	8.0%
	2014	14.7%	9.4%
9-12 prenatal visits			
	2009	49.1%	59.5%
	2010	49.0%	58.9%
	2011	47.0%	52.9%
	2012	46.8%	49.1%
	2013	46.4%	41.9%
	2014	47.6%	42.2%
13 or more prenatal visits			
	2009	30.1%	27.6%
	2010	31.7%	30.7%
	2011	34.0%	36.1%

	2012	34.7%	40.3%
	2013	34.9%	47.6%
	2014	31.1%	45.2%

Vital Statistics Birth (2014). Provided by AZ FTF.
 *Data are not available for County

Appendix 5.10. Tobacco and Alcohol Use During Pregnancy 2009-2014

Year	Mother's Substance use	Arizona	FTF SE Maricopa Region
2009			
	Drinker, Nonsmoker	0.3%	0.1%
	Smoker, Nondrinker	4.6%	4.2%
	Smoker and Drinker	0.2%	0.1%
	Nonsmoker and Nondrinker	94.9%	95.4%
2010			
	Drinker, Nonsmoker	0.3%	0.2%
	Smoker, Nondrinker	4.4%	4.3%
	Smoker and Drinker	0.2%	0.1%
	Nonsmoker and Nondrinker	95.1%	95.3%
2011			
	Drinker, Nonsmoker	0.4%	0.3%
	Smoker, Nondrinker	4.1%	4.9%
	Smoker and Drinker	0.2%	0.1%
	Nonsmoker and Nondrinker	95.4%	94.7%
2012			
	Drinker, Nonsmoker	0.3%	0.3%
	Smoker, Nondrinker	4.0%	4.4%
	Smoker and Drinker	0.2%	0.2%
	Nonsmoker and Nondrinker	95.5%	95.1%
2013			
	Drinker, Nonsmoker	0.2%	0.2%
	Smoker, Nondrinker	4.3%	4.2%
	Smoker and Drinker	0.2%	0.1%
	Nonsmoker and Nondrinker	95.3%	95.5%
2014**			

	Nonsmoker	96.0%	96.3%
	Light Smoker	2.7%	2.4%
	Heavy Smoker	1.3%	1.2%

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 5.11. 2010-2014 Drug Withdrawal Syndrome in Infants of Drug Dependent Mothers*

Year	Arizona	County
Total	1,840	1,090
2010	260	170
2011	360	220
2012	360	210
2013	390	230
2014	470	260

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>

*Sum rounded to nearest tens unit due to non-zero addend less than 6

Appendix 5.12. 2009-2014 Infant Mortality and At-Risk Births

	Year	Arizona	FTF SE Maricopa Region
Baby had low birthweight (5.5 lbs or less)			
	2009	7.1%	6.5%
	2010	7.1%	6.5%
	2011	7.0%	6.0%
	2012	6.9%	6.6%
	2013	6.9%	6.1%
	2014	7.0%	6.1%
Number Premature births (under 37 weeks)			
	2009	10.0%	9.8%
	2010	9.6%	8.8%
	2011	9.3%	8.4%
	2012	9.2%	8.6%
	2013	9.0%	8.1%
	2014	9.0%	7.8%
Infant Mortality Rate			
	2009	0.6%	0.7%
	2010	0.6%	0.7%
	2011	0.6%	0.7%
	2012	0.6%	0.7%
	2013	0.5%	0.5%
	2014	0.6%	0.5%
Births with congenital anomalies			
	2009	0.7%	0.8%
	2010	0.6%	0.5%
	2011	0.6%	0.4%
	2012	0.6%	0.5%

	2013	0.7%	0.7%
	2014	0.5%	0.6%

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

*Data are not available.

Appendix 5.13. 2009-2014 Mothers who were not married

	Year	Arizona	FTF SE Maricopa Region
Mother was not married			
	2009	44.9%	34.5%
	2010	44.4%	34.5%
	2011	44.4%	32.6%
	2012	45.5%	34.7%
	2013	45.7%	34.8%
	2014	45.5%	34.1%

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

Appendix 5.14. 2012-2015 Pre-Pregnancy Overweight and Obesity Rates

Indicators	Arizona	County	FTF SE Maricopa Region
2012			
Total	52,600	32,797	5,472
Percent Pre-Pregnancy under weight	4.8%	4.9%	5.0%
Percent Pre-Pregnancy normal weight	41.2%	41.0%	43.6%
Percent Pre-Pregnancy overweight	26.7%	26.9%	25.5%
Percent Pre-Pregnancy obese	27.4%	27.1%	25.9%
2013			
Total	51,894	32,413	5,668
Percent Pre-Pregnancy under weight	4.7%	4.7%	5.0%
Percent Pre-Pregnancy normal weight	40.1%	39.9%	41.7%
Percent Pre-Pregnancy overweight	26.8%	27.5%	26.2%
Percent Pre-Pregnancy obese	28.4%	27.9%	27.1%
2014			
Total	53,717	33,839	5,524
Percent Pre-Pregnancy under weight	4.6%	4.8%	4.8%
Percent Pre-Pregnancy normal weight	40.0%	39.7%	42.0%
Percent Pre-Pregnancy overweight	26.4%	26.8%	25.7%
Percent Pre-Pregnancy obese	29.0%	28.7%	27.5%
2015			

Total	58,495	37,002	5,905
Percent Pre-Pregnancy under weight	4.1%	4.2%	4.6%
Percent Pre-Pregnancy normal weight	38.6%	38.4%	40.2%
Percent Pre-Pregnancy overweight	26.8%	27.2%	25.9%
Percent Pre-Pregnancy obese	30.5%	30.2%	29.4%

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

Appendix 5.15. Reported Medical Issues in Head Start and Early Head Start Programs in FY 2015-2016*

Chronic Conditions	# of children
Anemia	99
Asthma	71
Hearing Difficulties	41
Vision Problems	199
High Lead Levels	<25
Diabetes	<25

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

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Appendix 5.16. Number of Children by Body Mass Index in Head Start and Early Head Start Programs in FY 2015-2016*

	# of children at enrollment
Underweight (BMI less than 5th percentile for child's age and sex)	62
Healthy weight (at or above 5th percentile and below 85th percentile for child's age and sex)	1,129
Overweight (BMI at or above 85th percentile and below 95th percentile for child's age and sex)	252
Obese (BMI at or above 95th percentile for child's age and sex)	298

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

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Appendix 5.17. Immunization Received in Head Start and Early Head Start Programs in FY 2015-2016*

	# 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	2,272	2,745
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	500	150
Number of children who meet their state's guidelines for an exemption from immunizations	23	25
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	2,066	2,376

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

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Appendix 5.18. Oral Health Information from Head Start and Early Head Start Programs in FY 2015-2016*

	# of children at enrollment
Number of children at enrollment with Continuous Accessible Dental Care provided by a dentist	2,412
Number of children who received dental preventive care	1,613
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	1,369
Of these, the number of children diagnosed as needing treatment since last year's PIR was reported	309
Of these, the number of children who have received or are receiving treatment	297

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

*County of Maricopa, Chicanos Por La Causa, Inc., Child Crisis Arizona, and Maricopa County Human Services are Head Start grantees for three cities in Arizona that fall within the FTF SE Maricopa Region: Mesa, Gilbert, and Queen Creek. Data presented are aggregated across all grantees and may include cities outside of the FTF SE Maricopa Region..

Chapter 6

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

	Arizona	Maricopa County
2004	1,569	788
2005	1,576	812
2006	1,647	884
2007	1,604	906
2008	1,630	959
2009	1,355	746
2010	1,245	672
2011	1,082	608
2012	1,048	624
2013	961	607
2014	827	819

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	Maricopa County
2004	5,587	2,173
2005	5,396	1,993
2006	5,225	2,225
2007	5,456	2,383
2008	5,440	2,370
2009	5,507	2,285
2010	5,417	2,444
2011	5,109	2,214
2012	4,550	2,018
2013	3,939	2,002

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

Data indicators not provided by AZ FTF and not available to Harder+Company

Data Indicator	Source
Number of children in ELL program	ADE
Migrant children	ADE
Percent of housing units with housing problems	US Department of Housing and Urban Development (2011)
Supplemental food program eligibility	Feeding America
Food bank data on numbers served	Local request
Children receiving McKinney Vento (homeless) designations (note: also includes ED)	ADE
Homelessness (including # of homeless children, services; clients receiving	The Homeless Management Information System (HMIS)
Children removed by DCS	DCS; Tribal Social Services
Child Welfare Reports: # of reports, assessed risk, types of maltreatment	DES/DCS Child Welfare Reports; Tribal Social Services
Number of licensed foster homes by zip code	DES/ DCS
Age of entry into out-of-home care	DES/DCS Child Welfare Reports; Tribal Social Services
Re-entry in 12 months from exits to reunification or live with relatives	DES Child Welfare Reports
Children of Incarcerated Parents	The Pima Prevention Partnership; Arizona Judicial Branch 2010; Department of Justice, OJP
Domestic violence data (Number of domestic violence reports, arrests, victims served)	Dept of Justice, OJP; tribal police departments