

 **FIRST THINGS FIRST**

Southeast Maricopa Region



2022

NEEDS AND ASSETS
REPORT

INTRODUCTORY SUMMARY AND ACKNOWLEDGMENTS

Ninety percent of a child's brain growth occurs before kindergarten, and the quality of a child's early experiences impacts whether their brain will develop in positive ways that promote learning. First Things First (FTF) was created by Arizonans to help ensure that Arizona children have the opportunity to start kindergarten prepared to be successful. 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 in 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 report is organized by topic areas pertinent to young children in the region, such as population characteristics or educational indicators. Within each topic area are sections that set the context for why the data found in the topic areas are important (Why it Matters), followed by a section that includes available data on the topic (What the Data Tell Us).

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 and education of young children in their care. 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. To that end, this information may be useful to local stakeholders 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 communities throughout the region.

Acknowledgements

The Southeast Maricopa Regional Partnership Council wishes to thank all of the federal, state and local partners whose contributions of data, ongoing support and partnership with First Things First made this report possible. These partners included the Arizona Departments of Administration (Education, Employment and Population Statistics), Child Safety, Economic Security and Health Services; the Arizona Health Care Cost Containment System; Child Care Resource and Referral; and the U.S. Census Bureau. We are especially grateful for the spirit of collaboration exhibited by all our partners during an unprecedented time of crisis for our state and our nation.

We also want to thank parents and caregivers, local service providers and members of the public who attended regional council meetings and voiced their opinions, as well as all the organizations working to transform the vision of the regional council into concrete programs and services for children and families in the Southeast Maricopa Region.

Lastly, we want to acknowledge the current and past members of the Southeast Maricopa Regional Partnership Council whose vision, dedication, and passion have been instrumental in improving outcomes for young children and families within the region. As we build upon those successes, we move ever closer to our ultimate goal of creating a comprehensive early childhood system that ensures children throughout Arizona are ready for school and set for life.

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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 Southeast Maricopa Region

The Southeast 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 about 4.4 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 Southeast 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 Southeast 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:

- Improving the quality of child care and preschool programs and
- Maternal health.

The following section provides a summary of the key findings for each of the six domains of the 2022 Regional Needs and Assets report, highlighting the major data findings, the needs and assets they uncover for the Southeast 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. *Maricopa County Quick Facts*. Retrieved from <https://www.maricopa.gov/3598/County-Quick-Facts>

Key Findings

Population Characteristics

The demographic profile of residents in a particular community helps policy and decision makers make effective decisions that will positively impact the community's well-being. The Southeast Maricopa Region has a total population of 725,950 residents and close to 70,000 children under the age of six. The population of zero- to five-year-old within Maricopa County 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% identifying as white and 82% identifying English as their primary language.

The majority of households in the region with children under six years old are married-couple households (76%), with 16% of households led by single females and eight percent led by single males, slightly less than the percentage of single-parent households statewide. Additionally, nine percent of children under six years old live in the same household as a grandparent.² Of children under 18 years old that live in the same household as their grandparent, 41% are primarily cared for by a grandparent, compared to 50% for the state. The high percentage of children growing up in dual-parent households could be 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.³ 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. Grandparents who are taking on the task of raising a second generation may need resources and parenting education.

Economic Circumstances

As children are growing and developing, outcomes such as school achievement, physical health, and emotional well-being are all impacted by a child's economic situation.⁴ The average unemployment rates for both the state and county increased in 2020 due to the COVID-19 pandemic but started to decrease in 2021 (though not fully down to pre-pandemic rates). Almost all households with children under six years old in the region (93%) 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 \$94,782 while single females with children have a median income of \$32,479 and single males with children have a median income of \$46,157.⁵ This suggests that single parents (and especially females) may experience financial hardships and need support through federal assistance programs.

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>>

³ The US Census defines dual-parent households as a living arrangement with two parents.

⁴ Brooks-Gunn, J., & Duncan, G. J. (1997). *The effects of poverty on children. The future of children*, 55-71.

⁵ U.S. Census Bureau (2019) American Community Survey, 5-year estimates (2015-2019), Table B19126

Eighteen percent of children under six years old in the Southeast Maricopa Region live under the poverty level, a lower percentage than the state (23%). However, almost 30% of children under age six in Apache Junction (27%) and West Mesa (30%) sub-regions live in poverty, while poverty for children under six years old is less common in Gilbert (7%) and Queen Creek (9%) sub-regions. This data may help identify geographic areas and populations to target for further intervention or support around increasing financial resources.

Technology serves many purposes in people's lives, providing access to information and communication resources. As technology becomes increasingly prevalent in daily lives, it is imperative that households have access to a reliable computer and internet. A majority (79%) of households in the region have both a smartphone and computer, more than in the county (77%) and the state (73%). Similarly, the vast majority of Southeast Maricopa Region residents (92%) live in households with a computer and internet, which is also a larger proportion than the county (88%) and the state (87%). For children specifically, household access to a computer and internet is slightly higher at 94%. Fewer children in Apache Junction (87%) and West Mesa (90%) sub-regions have access to a computer and internet. Of people living in households with a computer and internet in the region, 74% have fixed broadband with a cellular data plan. Though many of the households in the Southeast Maricopa Region have access to technology and internet, some sub-regions (i.e., Apache Junction and West Mesa) are less likely to have these resources in their household. This may further the digital divide within the Southeast Maricopa Region.

Educational Indicators

Children's participation in early learning experiences is likely to result in higher academic performance in future years.⁶ About half of children between ages three and four (51%) are enrolled in nursery school, preschool, or kindergarten in the Southeast Maricopa Region. This is lower than the county (55%) and state (65%) proportions. In addition, about half of third grade students in the region scored proficient or highly proficient on the AZ Merit English Language Arts (54%) and Math (59%) assessments in 2018-2019, which were both higher than the county and statewide proportion.

The percentage of first, second, and third graders missing ten or more days of school slightly decreased from 2019 to 2020 across the Southeast Maricopa Region. Many adults in the region have completed high school, received a GED, or pursued education past high school (92%), which is higher than the state and county percentages. The strong norm of high school completion among Southeast Maricopa Region residents (including parents) suggests that parents may hold an expectation that their children will also complete their education. The West Mesa and Apache Junction sub-regions had higher percentages of adults that did not complete high school or receive a GED, at 13% and 14%, respectively, and may benefit from additional support to help children succeed in school.

⁶ Bakken, L., Brown, N., Downing, B. (2017) *Early Childhood Education: The Long-Term Benefits*. *Journal of Research in Childhood Education*. Volume 31. Issue 2. Retrieved from: <https://doi.org/10.1080/02568543.2016.1273285>

Early Learning

Participation in early care and education programs plays an important role in preparing children for kindergarten and beyond.⁷ Based on the employment status of the adults in the household, 59% of households are assumed to need child care. Yet only 51% 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. Though the number of children receiving child care subsidies decreased between 2019 to 2020, child care subsidies are helpful to children in the region.

According to the most recent data from the Arizona Department of Economic Security (2020) and Arizona Department of Health Services (2020), there are currently 601 early childhood centers and homes in the region with a capacity of 64,503 children. Additionally, about 3,573 children in the region are enrolled in Quality First centers rated three, four, or five stars. Increasing access to quality early care and education programs is essential for the region's children.

In the Southeast Maricopa Region, fewer children were served by the Arizona Early Intervention Program (AzEIP) in FY2020 (278) than in FY2018 (337). In addition, the number of children living in the region and served by the Division of Developmental Disabilities (DDD) has decreased over time. In the region, 825 children (ages birth to 5) were served by DDD in 2017 but only 722 were served in 2020 despite an increase in eligible children.

Child Health

Ensuring healthy development through early identification and treatment of children's health issues helps families understand healthy developmental pathways and how health issues affect children and their school readiness.⁸ According to American Community Survey data averaged over the five years from 2015 to 2019, seven percent of young children in the Southeast Maricopa Region are estimated to be without health insurance, along with ten percent of the all-ages population in the region.

In 2019, Southeast Maricopa Region residents gave birth to 10,271 babies, 13% of all births in the state. Sixty-one percent of residents who participated in WIC were overweight or obese before becoming pregnant, which is slightly lower than the percentage statewide. The rate of pre-pregnancy obesity in the region has stayed fairly consistent, but in the state has gradually increased each year since 2017. Nearly all who gave birth in 2019 (98%) received at least some form of prenatal care, and nearly three-quarters (72%) started to receive prenatal care in the first trimester.

In the region in 2019, seven percent of babies were low birth weight, on par with the statewide percentage. The percent of premature births was also similar within the region (8%) as the state (9%).

⁷ *University of Massachusetts Global (2021) What is the purpose of early childhood education? Why it's so important. Retrieved from: <https://www.umassglobal.edu/news-and-events/blog/what-is-purpose-of-early-childhood-education>*

⁸ *Schools & Health (2016). Impact of Health on Education. Retrieved from <http://www.schoolsandhealth.org/pages/Anthropometricstatusgrowth.aspx>*

The percentage of infants participating in WIC in the region and being breastfed has gradually increased from 2017 (78%) to 2020 (80%).

Although immunization rates vary by vaccine, over 90% of children in child care and kindergarten in the Southeast Maricopa Region had completed each of the three major (DTAP, polio, and MMR) vaccine series. Rates of personal exemptions for vaccinations among children in child care in the region were slightly higher than exemption rates at the county and state levels.⁹

Among children participating in WIC in the Southeast Maricopa Region in 2020, 16% were obese and an additional 17% were overweight. The region's proportion of children in WIC who are obese or overweight has increased in recent years, from 30% in 2017 to 34% in 2020.

Family Support

Support for young families is an essential piece of the holistic efforts around kindergarten readiness and long-term success for children.¹⁰ The number of families and children receiving assistance from SNAP, TANF, and WIC has decreased over the years.¹¹ While the number of young children participating in SNAP and TANF has declined since 2017, SNAP still supports nearly 16,000 children and TANF supports about 900 children annually in the Southeast Maricopa Region. WIC enrollment has also declined from 2017 (32% of children under five) to 2020 (26%). Approximately 40% of all public- and charter-school students in the region have been eligible for free or reduced-price lunch since 2018.

The total number of fatal opiates or opioid overdoses in the Southeast Maricopa Region was 413 from 2017 to 2020, which accounts for eight percent of the total deaths in Arizona. In Maricopa County, the number of the non-fatal overdoses from opiates or opioids increased from 963 in 2017 to 2,772 in 2020.

⁹ Exemption rates are: Southeast Maricopa Region (6% for religion exemption and 0.2% for medical exemption); Maricopa County (5% for religion exemption and 0.5% for medical exemption); and Arizona (5% for religion exemption and 0.4% for medical exemption).

¹⁰ 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

¹¹ The number of children or families that are not eligible for the supports was not available; thus, the data could not calculate the number of children or families that need the supports but did not receive it.

Opportunities for Further Exploration

Most of the findings provided in this report are based on secondary data sources. As the Southeast Maricopa Regional Partnership Council continues to make increasingly difficult decisions with diminishing funds, the following suggestions for further data collection and analysis may provide evidence to inform those decisions. These opportunities would help fill gaps in available data to meet priorities identified by the Council. Methods could include gathering existing data from local sources or conducting surveys among local families. Listed in order of the domains in this report, the Council may want to consider collecting additional information regarding:

- Impact of the **COVID-19 pandemic** on young children’s mental health and socioemotional well-being.
- School districts with **high third grade proficiency** scores versus those with lower scores and factors that contribute to those results to inform policy and practice changes supporting lower-performing districts. In addition, looking at scores in relation to socioeconomic status and racial and ethnic identity of students to identify best practices.
- Where families are turning for **child care** if licensed care is too expensive or not available in their communities.
- Efforts to curb childhood obesity and overweight.

BACKGROUND AND APPROACH

Family well-being is an important indicator of child success.^{12, 13} 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.¹⁴ Early childhood interventions promote well-being and impact outcomes for children and adults later in life, including school readiness, parent involvement, K-12 achievement, educational attainment, crime prevention and remedial education.¹⁵

First Things First (FTF) is one of the critical partners in the 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 Southeast 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:

- Improving the quality of child care and preschool programs and
- Maternal health.

Methodology

This is the eighth Needs and Assets report conducted on behalf of the Southeast 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 Southeast 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

¹² Bøe, T., Serlachius, A., Sivertsen, B., Petrie, K., Hysing, M. (2017) *Cumulative effects of negative life events and family stress in children's mental health: the Bergen child study*. *Social Psychiatry and Psychiatric Epidemiology*. Retrieved from <https://link.springer.com/article/10.1007/s00127-017-1451-4>

¹³ Sosu, E., Schmidt, P. (2017) *Economic deprivation and its effects on childhood conduct problems: the mediating role of family stress and investment factors*. Retrieved from <https://doi.org/10.3389/fpsyg.2017.01580>

¹⁴ Knitzer, J. (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.

¹⁵ Reynolds, A., Ou, S., Mondt, C., Hayakawa, M. (2017) *Processes of early childhood interventions to adult well-being*. *Child Development*. Volume 88 Issue 2. Retrieved from <https://doi.org/10.1111/cdev.12733>

are represented in this report in six unique domains:

- Population characteristics;
- Economic circumstances;
- Educational indicators;
- Early learning;
- Child health; and
- Family support.

A systematic review designed to reveal the needs and assets of the Southeast 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 Southeast Maricopa Region and are often presented alongside data for the County and the State of Arizona for comparative purposes. Subregional data from the American Community Survey and 2010 Census were calculated by aggregating the ZIP Code Tabulation Areas (ZCTA) in each subregion. ZCTAs were assigned to a subregion by FTF, and Harder+Company then used those assignments to determine which ZCTAs belonged to each subregion. For ZCTAs that are in more than one subregion, a percentage of the tabulation area was assigned to each subregion based upon the population living in ZCTA within the subregions' portion of the ZCTA.

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), Department of Child Safety (DCS) 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. 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 is 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 Southeast Maricopa Region, such as more detailed data on housing or homelessness, home visiting, oral health, hearing loss screenings, 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, education data from the Arizona Department of Education (ADE), with counts of or percentages related to fewer than eleven, excluding counts of zero (i.e., all counts of one through ten) are suppressed. Percentages greater than 98% or less than 2% were presented as >98% and <2% respectively. For data related to health or developmental delay, all counts and rates/ratios/percentages are based on non-zero counts less than six, excluding counts of zero (i.e., all counts of one through six, depending on the indicator) are suppressed.

Limitations

In the United States, the COVID-19 pandemic began in March 2020 and continues through the writing of this report. Thus, it is important to contextualize how the pandemic impacted data availability and the process to develop this report. First, public agencies had limited capacity to support data requests while they focused on their pandemic response, therefore some data sets could not be provided. For this reason, the timeline for the 2022 RNA report was modified to adapt to the barriers in collecting data and moving forward with the report process.

This report relied primarily on secondary data. Most of the data were extracted by teams other than the evaluation team conducting the asset and needs assessment, except for the data of the Arizona Department of Education (ADE) which the evaluation team accessed through the ADE data system.

Some of the most recent data was not available for this report. 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 as 2020 Census data were delayed due to COVID-19. For some of the indicators reported, the most recent data for the region was released in 2018, thus trends may have changed within the past four years, especially due to the pandemic. For example, the most recent data for the Child Care Market Rate Survey is from 2018. This survey provides the median cost for licensed centers, approved family homes and certified group homes.

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, WIC data only includes a sample of the young children and families served. In regards to education data, ADE provided AZMerit only for 2018-2019 school year (prior to COVID-19) since this assessment was not administered during the 2019-2020 school year. The report uses public data for the 2020-2021 school year at the state and county level.

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.



POPULATION CHARACTERISTICS

POPULATION CHARACTERISTICS

Why It Matters

The demographic profile of residents in a particular community helps inform the types of services needed in that community. Policy and decision makers need 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 and composition of households, racial and ethnic composition, languages spoken, and living arrangements help policy makers identify the needs of the region they serve and the services and resources that would benefit the community. For example, knowing where non-English speakers live and what their primary languages are can inform translation and interpretation services to help these families access health care and other social services. Knowing where children and families are located will help identify the needs for early childhood services to support their development and well-being.

This first domain of the report provides 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). Indicators about children living with grandparents are included as well. Although only limited research has been conducted on the influence of grandparents on child development and health, this data provides an overview of their participation in the region's households and shows trends in grandparental care over time.¹⁶ Understanding how the population is changing and where it is growing allows decision makers to strategically and proactively allocate resources.

What the Data Tell Us

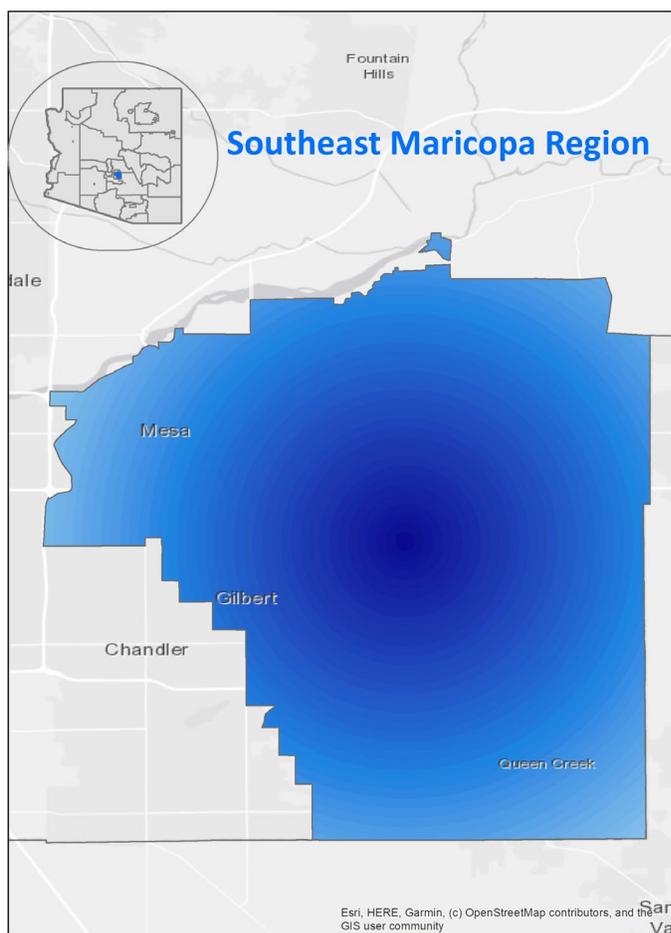
The Southeast Maricopa Region is in the southeast corner of Maricopa County and is adjacent to Pinal County, as shown in Exhibit 1.1. Maricopa County is the most populous county in Arizona with a population of over 4.0 million people, which is more than half of Arizona's population.¹⁷ The major cities in the region include Mesa, Gilbert, and parts of Queen Creek and Apache Junction.

¹⁶ Sadruddin, A., Ponguta, L., Zonderman, A., Wiley, K., Grimshaw, A., Panter-Brick, C. (2019) How do grandparents influence child health and development? A systematic review. *Social Science & Medicine*. Volume 239. Retrieved from <https://doi.org/10.1016/j.socscimed.2019.112476>

¹⁷ Maricopa County. *Maricopa County Quick Facts*. Retrieved from <https://www.maricopa.gov/3598/County-Quick-Facts>

Southeast Maricopa Regional Partnership Council provides services to the communities of Gilbert, Higley, Mesa, Queen Creek and the following ZIP codes in Maricopa County: 85120, 85142, 85201, 85202, 85203, 85204, 85205, 85206, 85207, 85208, 85209, 85210, 85212, 8213, 85215, 85233, 85234, 85295, 85296, 85297 and 85298. The region does not include the portion of Salt River Pima- Maricopa Indian Community, the Gila River Indian Community or the portion of Apache Junction city limits outside of Maricopa County.

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



Population Counts and Projections

According to the 2010 Census, the Southeast 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 (Exhibit 1.2). Within the region, East Mesa (22,718 children under the age of six) and Gilbert (21,816) are the most populated sub-regions, while Apache Junction and Queen Creek both have populations below 35,000. Sub-regions with the highest proportion of children under six years old include Queen Creek (12%) and West Mesa (11%).

Exhibit 1.2. Population in the 2010 Census

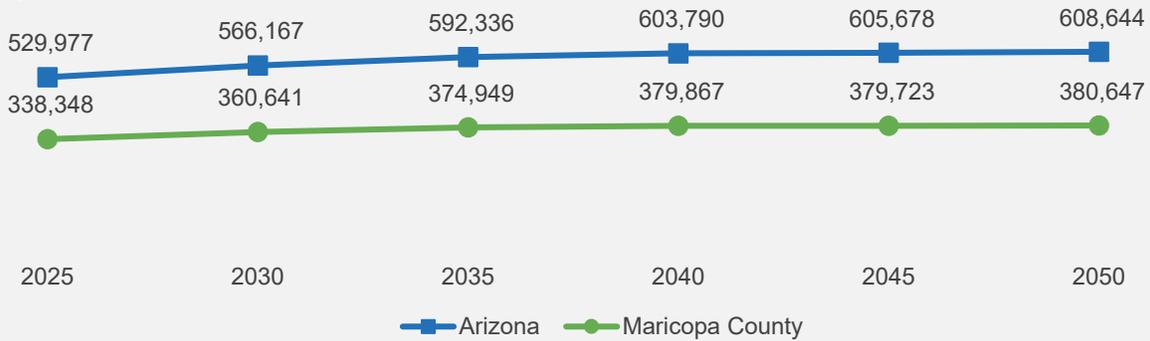
	All ages	Ages 0-5	Children (0-5) as a percentage of the total population
Southeast Maricopa Region	725,950	68,482	9%
Apache Junction (SE Maricopa portion)	4,573	189	4%
Gilbert	211,159	21,816	10%
East Mesa	293,094	22,718	8%
West Mesa	184,805	19,813	11%
Queen Creek (SE Maricopa portion)	32,379	3,935	12%
Maricopa County	3,817,117	339,217	9%
ARIZONA	6,392,017	546,609	9%

U.S. Census Bureau; 2010 Census Summary File 1; Tables P11 & P14

**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 children under six in Maricopa County is expected to increase over the next ten years, rising to about 380,000 by 2050 (Exhibit 1.3). About 60% of Arizona’s children under six years old reside in Maricopa County. Over the same time period the number of children under six is expected to increase in the state as a whole.

Exhibit 1.3. Projected population of children 0-5 in Arizona and Maricopa County

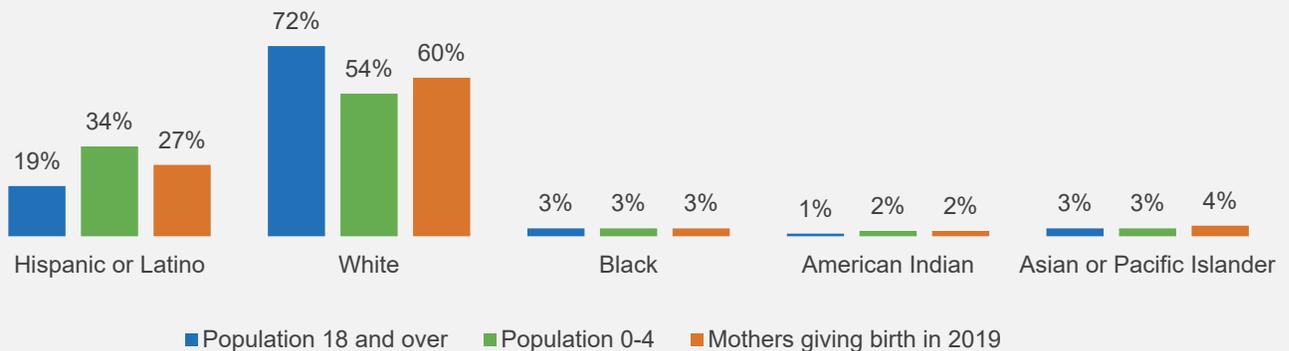


Arizona Department of Administration, Office of Employment & Population Statistics (2017). Arizona Population Projections: 2020 to 2050, Medium Series

Demographics and Language

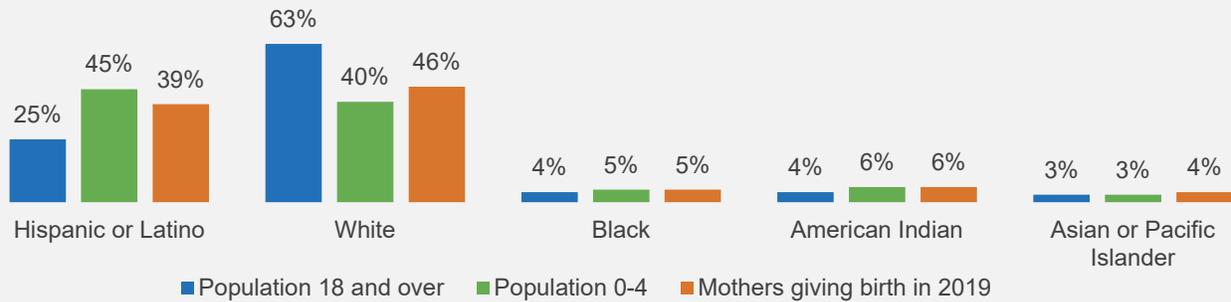
In the Southeast Maricopa Region more than 70% of adults 18 and over identify as white and 19% identify as Hispanic or Latino (Exhibit 1.4). This compares to 63% and 25%, respectively, for Arizona (Exhibit 1.5). In the region, children under five and mothers who gave birth in 2019 are more likely to identify as Hispanic or Latino than the overall population (Exhibit 1.4).

Exhibit 1.4. Distribution of race/ethnicity in the Southeast Maricopa Region



U.S. Census Bureau; 2010 Census Summary File 1; Tables P11 & P14
 U.S. Census Bureau; 2010 Census Summary File 1; SF 1, Tables P12B, P12C, P12D, P12E, P12H, and P12I
 ADHS Office of Disease Prevention and Health Promotion. (2021). Arizona Health Status and V

Exhibit 1.5. Distribution of race/ethnicity in Arizona



U.S. Census Bureau; 2010 Census Summary File 1; Tables P11 & P14
 U.S. Census Bureau; 2010 Census Summary File 1; SF 1, Tables P12B, P12C, P12D, P12E, P12H, and P12I
 ADHS Office of Disease Prevention and Health Promotion. (2021). Arizona Health Status and V

In four of five of the sub-regions, over three-quarters of adults identify as white (Exhibit 1.6). In the same sub-regions, more than 60% of children under 5 years old identify as white (Exhibit 1.7). West Mesa has the highest proportion across sub-regions of residents that identify as Hispanic/Latino (34% for adult population and 57% for children under age five).

Exhibit 1.6. Race and ethnicity of the adult population (ages 18 and older) in the 2010 Census by sub-region

	Hispanic or Latino	White	Black	American Indian	Asian or Pacific Islander	Other
Apache Junction (SE Maricopa portion)	9%	87%	1%	1%	1%	1%
Gilbert	13%	75%	3%	1%	6%	2%
East Mesa	13%	81%	2%	1%	2%	1%
West Mesa	34%	55%	4%	3%	3%	1%
Queen Creek (SE Maricopa portion)	17%	75%	3%	1%	3%	1%

U.S. Census Bureau; 2010 Census Summary File 1; Tables P11 & P14

Exhibit 1.7. Race and ethnicity of children (ages 0-4) in the 2010 Census by sub-region

	Hispanic or Latino	White	Black	American Indian	Asian or Pacific Islander
Apache Junction (SE Maricopa portion)	27%	64%	1%	3%	1%
Gilbert	19%	67%	3%	1%	6%
East Mesa	29%	62%	3%	2%	2%
West Mesa	57%	30%	4%	5%	2%
Queen Creek (SE Maricopa portion)	22%	70%	3%	1%	2%

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

Approximately four out of five people (82%) in the region speak English as their primary language, while 14% primarily speak Spanish and an additional five percent speak a language other than English or Spanish (Exhibit 1.8).¹⁸ Moreover, six percent speak another language at home and reported that they speak English less than “very well” and three percent reside in limited English speaking households (Exhibits 1.9 and 1.10). The West Mesa sub-region had the highest percentage of households (25%) that do not speak English at home (Exhibit 1.8); correspondingly, that region also had the highest percentage of households that speak English less than “very well” (9%, Exhibit 1.9) and limited English speaking households (5%, Exhibit 1.10) within the Southeast Maricopa Region.

Exhibit 1.8. Primary language spoken at home for population ages 5 and over

	Estimated population (ages 5 and older)	Speak English at home	Speak Spanish at home	Speak another language at home
Southeast Maricopa Region	779,638	82%	14%	5%
Apache Junction (SE Maricopa portion)	5,002	87%	10%	3%
Gilbert	224,409	86%	7%	7%
East Mesa	172,787	87%	9%	3%
West Mesa	333,509	75%	21%	4%
Queen Creek (SE Maricopa portion)	43,931	86%	10%	4%
Maricopa County	4,050,301	73%	20%	7%
ARIZONA	6,616,331	73%	20%	7%

U.S. Census Bureau (2019). American Community Survey, 5-year estimates (2015–2019), Table B16001

¹⁸ 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 1.9. Proficiency in English (ages 5 and older)

	Population (ages 5 and older)	Speak English at home	Speak another language at home, and speak English "very well"	Speak another language at home, and do not speak English "very well"
Southeast Maricopa Region	779,621	82%	13%	6%
Apache Junction (SE Maricopa portion)	5,002	87%	8%	5%
Gilbert	224,392	86%	10%	3%
East Mesa	172,787	87%	9%	4%
West Mesa	333,509	75%	16%	9%
Queen Creek (SE Maricopa portion)	43,931	86%	11%	3%
Maricopa County	4,050,301	73%	18%	9%
ARIZONA	6,616,331	73%	19%	9%

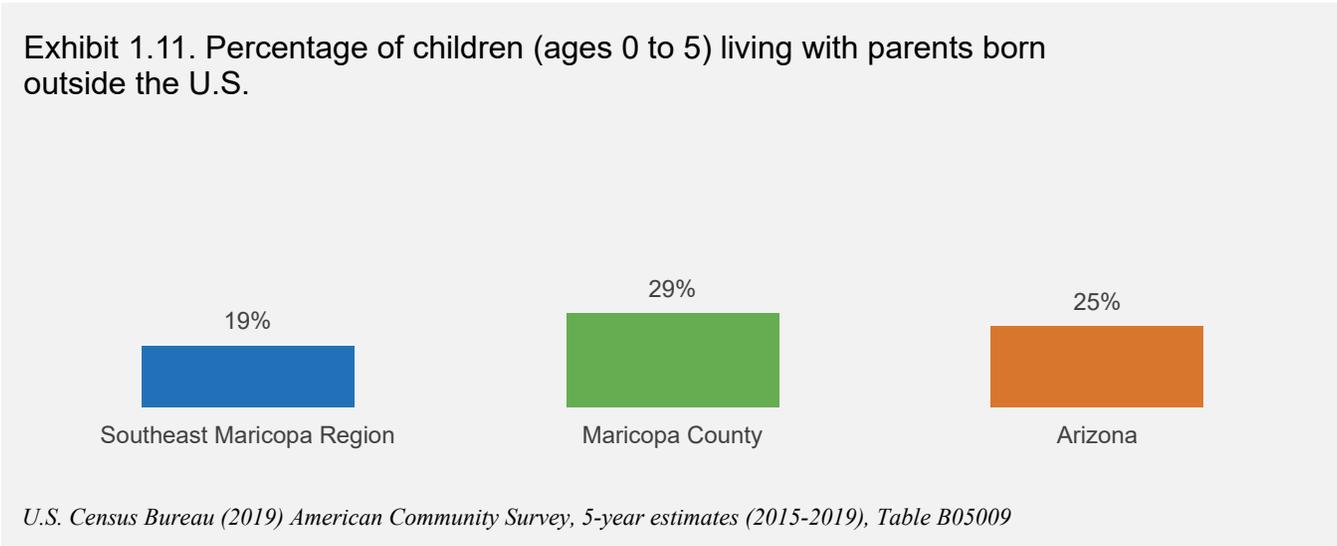
U.S. Census Bureau (2019). American Community Survey, 5-year estimates (2015-2019), Table B16001

Exhibit 1.10. Limited-English-Speaking households

	Number of households	Households which speak a language other than English	Limited-English- speaking households (Total)	Limited-English- speaking households (Spanish)
Southeast Maricopa Region	292,304	20%	3%	2%
Apache Junction (SE Maricopa portion)	2,573	12%	3%	2%
Gilbert	77,368	19%	1%	0%
East Mesa	67,432	14%	1%	1%
West Mesa	131,020	25%	5%	4%
Queen Creek (SE Maricopa portion)	13,911	20%	1%	0%
Maricopa County	1,552,096	27%	4%	3%
ARIZONA	2,571,268	28%	4%	3%

U.S. Census Bureau (2019). American Community Survey, 5-year estimates (2015-2019), Table B16002

Young children in the Southeast Maricopa Region are less likely to be living with parents born outside the United States (19%) than children across Arizona (25%) or Maricopa County (29%, Exhibit 1.11). Similar to language trends, young children in West Mesa are the most likely to live with parents born outside the United States (27%, not shown).



Among kindergarten through third grade students in the region, 24 were reported to be migrants in 2018 and 2020 but dipped to 12 in 2019 (Exhibit 1.12). Arizona defines a migrant child as “child or youth, from birth up to 20 [22 with an IEP], who made a qualifying move in the preceding 36 months as a migratory agricultural worker or migratory fisher; or with, or to join, a parent or spouse who is a migratory agricultural worker or migratory fisher.”¹⁹

Exhibit 1.12. Children in grades K to 3 that are migrants from 2018 to 2020

	Arizona	Maricopa County	Southeast Maricopa Region
2018	662	52	24
2019	570	43	12
2020	809	33	24

Arizona Department of Education (2021). Migrant Children. Provided by AZ FTF.

¹⁹ Alvarez, L. (2021) *Comprehensive Needs Assessment. Arizona Migrant Education Program*. Retrieved from <https://www.azed.gov/sites/default/files/2022/01/Arizona%20Comprehensive%20Needs%20Report%202021.pdf>

The percent of kindergarten through third grade students in the region who are English Language Learners (ELL) is seven percent, which is lower than the countywide and statewide proportions (Exhibit 1.13). These percentages remained consistent from 2018 to 2020.

Exhibit 1.13. Percentage of children in grades K to 3 that are English Language Learners from 2018 to 2020

	Arizona	Maricopa County	Southeast Maricopa Region
2018	10%	12%	7%
2019	9%	11%	7%
2020	10%	12%	7%

Arizona Department of Education (2021). *English Language Learners*. Provided by AZ FTF.

Household Characteristics

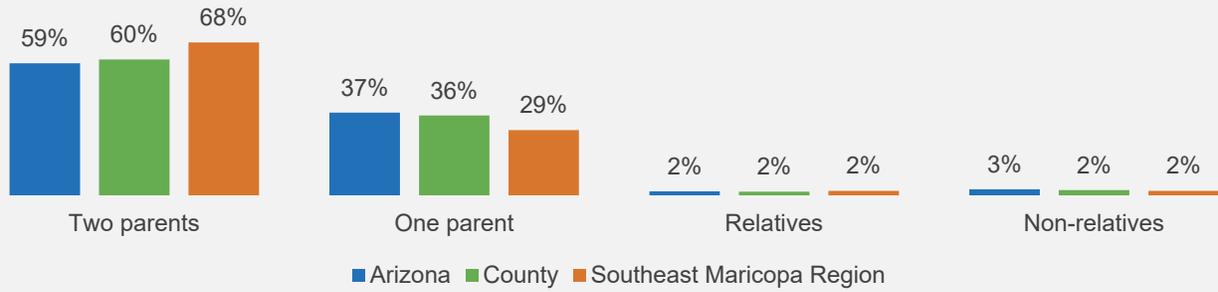
Of more than 200,000 households in the Southeast Maricopa Region, nearly 40,000 (20%) include children under six years old (Exhibit 1.14). Although the majority of children under six live in married-couple households, nearly one-quarter (24%) live in single-parent households. The highest proportion of young children that live in single-parent households reside in West Mesa (37%) followed by Apache Junction (26%). Four percent of children under six in the Southeast Maricopa Region live with relatives or non-relatives instead of their parents (Exhibit 1.15).

Exhibit 1.14. Number of households and household characteristics

	Total number of households	Total number of households with children 0-5	Percent of households with children 0-5	Percent of married-couple households with children 0-5	Percent of single-male households with children 0-5	Percent of single-female households with children 0-5
Southeast Maricopa Region	202,421	39,822	20%	76%	8%	16%
Apache Junction (SE Maricopa portion)	1,360	124	9%	73%	4%	22%
Gilbert	59,996	13,428	22%	88%	5%	7%
East Mesa	48,182	6,427	13%	82%	5%	14%
West Mesa	81,534	17,524	21%	63%	11%	26%
Queen Creek (SE Maricopa portion)	22,087	2,319	20%	89%	2%	9%
Maricopa County	1,018,723	188,572	19%	70%	9%	21%
ARIZONA	1,679,198	291,242	17%	68%	10%	22%

U.S. Census Bureau (2019) *American Community Survey, 5-year estimates (2015-2019)*, Table B11003

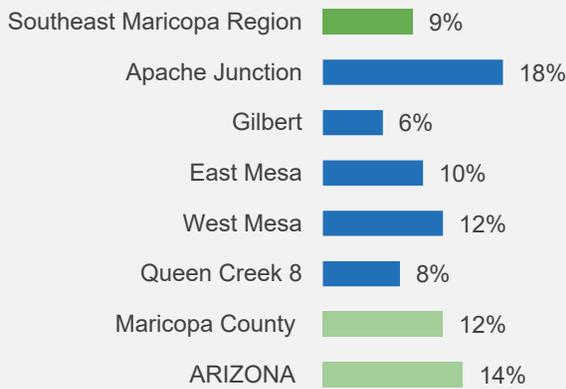
Exhibit 1.15. Living arrangements of children 0-5



U.S. Census Bureau (2019) American Community Survey, 5-year estimates (2015-2019), Tables B05009, B09001, & B17006

Grandparents are an important presence in the lives of some young children. Nine percent of young children in Southeast Maricopa live in the same household as a grandparent (Exhibit 1.16).

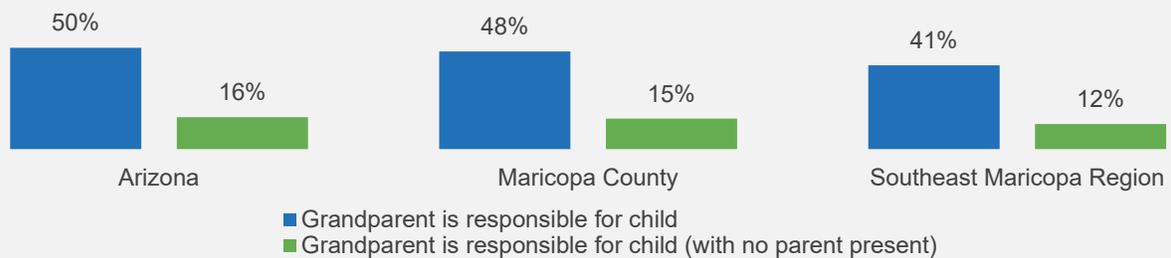
Exhibit 1.16. Percent of children (0-5) Living in a grandparent's household in the 2010 Census



U.S. Census Bureau (2010) Census Summary File 1; SF 1, Table P41

Of children under 18 years old who live in the same household as a grandparent, 41% are primarily cared for by a grandparent, which is less than the percentages for Arizona (50%) and Maricopa County (48%, Exhibit 1.17).²⁰ There can be several advantages to living in a multigenerational household, including an increase in emotional well-being and grandparents serving as role models in the socialization of children. While some families choose multigenerational living, others may do so out of financial necessity if either the parent or grandparent generation lacks the resources to live on their own. Given particularly high percentages of grandparents responsible for the care of grandchildren in several communities, additional financial and parenting supports for grandparents raising grandchildren may be needed. Specifically, grandparents raising grandchildren may face challenges related to a nontraditional family structure, changes in parenting practices over time, and limited finances due to fixed incomes.

Exhibit 1.17. Children (ages 0-17) living in a grandparent’s household



U.S. Census Bureau (2019). American Community Survey, 5-year estimates (2015-2019), Table B10002

²⁰ The United States Census Bureau defines the grandparent as responsible for the grandchild(ren) if they the grandparent is “financially responsible for food, shelter, clothing, day care, etc., for any or all grandchildren living in the household.”

POPULATION CHARACTERISTICS HIGHLIGHTS

The Southeast Maricopa Region 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 diverges slightly from the state profile with a higher percentage of the adult population identifying as white (72%) and 34% of children under five who identify as Hispanic or Latino. The majority of households speak English as their primary language and less than 15% 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 four percent of children under six in the region live with non-parental relatives or non-relatives. Nine percent live in the same household as their grandparents and 41% of those children 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 age 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 are in West Mesa or the SE portion of Apache Junction.	Discuss supporting services specifically designed for single-parent and grandparent-led households as well as targeting those services in the West Mesa and SE portion of Apache Junction sub-regions.



ECONOMIC CIRCUMSTANCES

ECONOMIC CIRCUMSTANCES

Why it Matters

The economic situation of children and their families has a large impact on their ability to access opportunities and services that can contribute to their well-being and healthy development. As children are growing and developing, outcomes such as school achievement, physical health, and emotional well-being are all impacted by a child's economic situation.²¹ Additionally, being unemployed or living below the federal poverty level indicates that parents and caregivers have fewer resources to be able to meet their families' basic needs, such as adequate, nutritious food and quality, stable housing.

Economic stability is critical to supporting young children and families to maintain a household where children can thrive. Recent research has shown that physical housing quality, neighborhood environment and housing stability play an important role in children's development and well-being.^{22, 23, 24} Housing instability, which includes frequent moves, difficulty paying rent, being evicted or being homeless, is associated with worse health, academic, and social outcomes.²⁵ Children without housing stability often experience negative outcomes such as higher grade retention, higher high school dropout rates, and lower educational attainment as adults.^{26,27} Unemployment of parents can also affect the psychological well-being of children in the long-term due to negative experiences and stressful events.²⁸ 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.^{29, 30, 31} Thus, housing, families' employment and food security are important components to

²¹ Brooks-Gunn, J., & Duncan, G. J. (1997). *The effects of poverty on children. The future of children*, 55-71.

²² Blau, D. M., Haskell, N. L., & Haurin, D. R. (2019). *Are housing characteristics experienced by children associated with their outcomes as young adults? Journal of Housing Economics*, 46, 101631.

²³ Roy, J., Maynard, M., Weiss, E. (2008) *Partnership for America's Economic Success. The Hidden Costs of the Housing Crisis*. Retrieved from http://www.pewtrusts.org/~media/legacy/uploadedfiles/wwwpewtrustsorg/reports/partnership_for_americas_economic_success/paeshousingreportfinal1pdf.pdf

²⁴ Clair, A. (2019). *Housing: An under-explored influence on children's well-being and becoming. Child Indicators Research*, 12(2), 609-626.

²⁵ 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

²⁶ *Ibid.*

²⁷ Kushel, M., Gupta, R., Gee, L., Haas, J. (2006) *Housing Instability and Food Insecurity as Barriers to Health Care Among Low-Income Americans*. Retrieved from <http://onlinelibrary.wiley.com/doi/10.1111/j.1525-1497.2005.00278.x/full>

²⁸ Nikolova, M., Nikolaev, B. (2018) *How having unemployed parents affects children's future well-being. Brookings*. Retrieved from <https://www.brookings.edu/blog/up-front/2018/07/13/how-having-unemployed-parents-affects-childrens-future-well-being/>

²⁹ *Feeding America*. Retrieved from <http://www.feedingamerica.org/hunger-in-america/impact-of-hunger/child-hunger/child-development.html>

³⁰ 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.

³¹ *Data for food security appears in the family support section.*

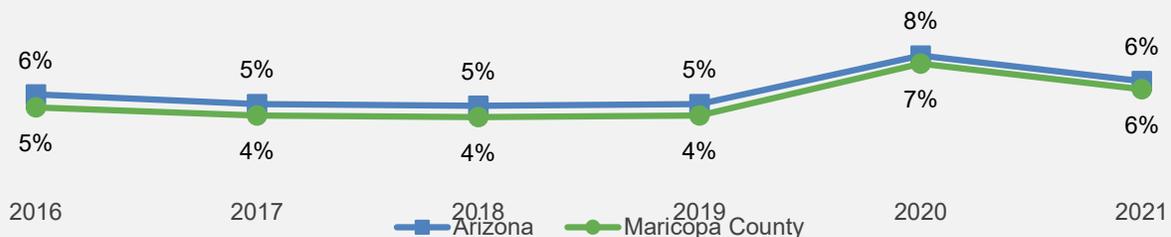
consider when evaluating the conditions that affect a child’s development and well-being during their first five years of life.

What the Data Tell Us

Employment Indicators

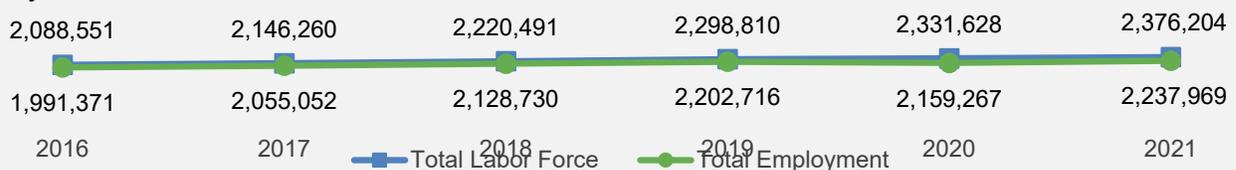
In Maricopa County the unemployment rate increased between 2016 and 2021 but has consistently been lower than the unemployment rate for Arizona as a whole (Exhibit 2.1). Starting in 2020 due to the COVID-19 pandemic, unemployment rates for both Maricopa County and Arizona increased. During the COVID-19 pandemic, those who tended to be affected by unemployment included those with jobs in services, restaurants, transportation, and other fields that typically do not offer long-term contracts, decent wages, and health benefits.³² The monthly unemployment rate in Maricopa County reached a peak at 14% in March 2020 and started to decline to seven percent in August 2020 (not shown). The yearly unemployment rate in Maricopa County decreased from seven percent in 2020 to six percent in 2021 (Exhibit 2.1). This decrease indicates that more people started to re-enter the labor force as pandemic-related restrictions eased. The number of people in the labor force has consistently increased in Maricopa County from 2016 through 2019 (Exhibit 2.2).³³ In 2020, the number of people employed slightly decreased but increased in 2021.

Exhibit 2.1. Average unemployment rates from 2016 to 2021



U.S. Department of Labor, Bureau of Labor Statistics (2021). Local Area Unemployment Statistics (LAUS), Arizona Office of Employment. Note: The data for 2021 goes up to September 2021.

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

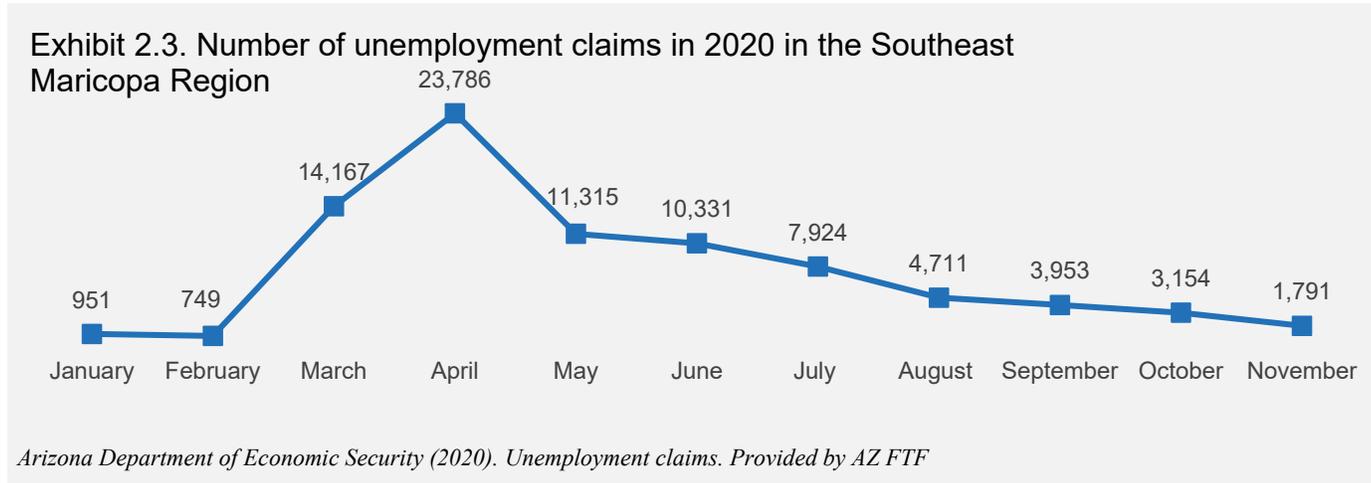


U.S. Department of Labor, Bureau of Labor Statistics (2021). Local Area Unemployment Statistics (LAUS), Arizona Office of Employment.

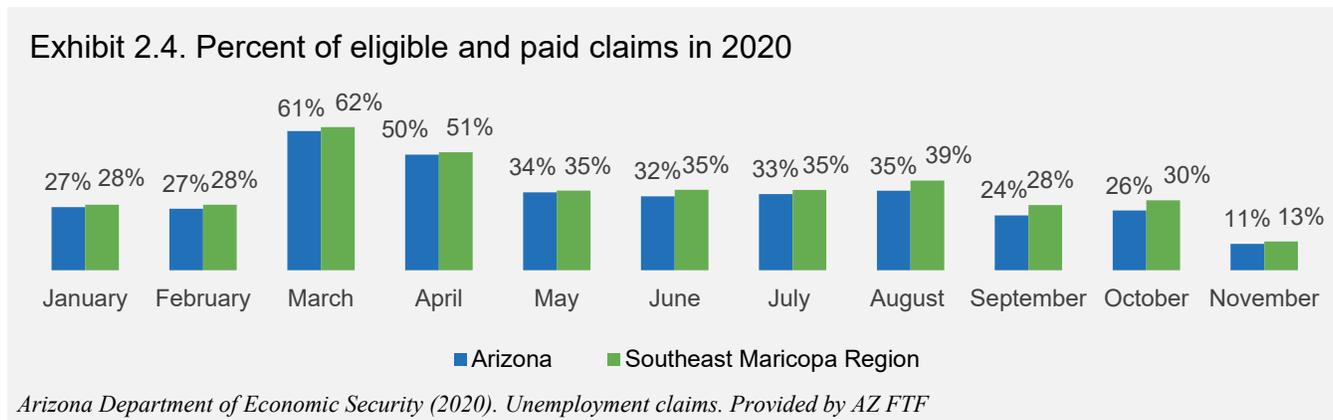
³² Blustein, David L., and Paige A. Guarino. "Work and unemployment in the time of COVID-19: the existential experience of loss and fear." *Journal of Humanistic Psychology* 60.5 (2020): 702-709.

³³ "In the labor force" includes persons who are employed and persons who are unemployed but looking for work.

Unemployment claims provide temporary payments to individuals who are unemployed through no fault of their own and meet the other eligibility requirements. In order to receive these benefits, an individual that has lost their job must complete an application to determine eligibility for unemployment benefits. In the Southeast Maricopa Region, the number of unemployment claims per month started to increase in March 2020 as national lockdowns started to take place (Exhibit 2.3). In April 2020, the number of claims peaked at 23,786 and gradually started to decrease starting in May 2020 to 11,315. By November 2020, the number of claims had declined to 1,791.



In addition to the number of claims increasing in March and April 2020, the percentage of unemployment claims determined to be eligible also increased in the Southeast Maricopa Region and in Arizona (Exhibit 2.4). At the beginning of 2020, 28% of employment claims were determined eligible for benefits in the Southeast Maricopa Region, and this increased to over 50% in March and April 2020. As the number of total claims decreased through the rest of 2020, the percentage of eligible claims also decreased. By November 2020, only 13% of claims were found eligible which was the lowest percentage in 2020.



In the Southeast Maricopa Region in 2019, 93% of children under age six lived in a household where at least one adult was in the labor force (Exhibit 2.5), which is higher than the percentage in Arizona (89%). Fifty-nine percent of children under age six have either both parents in the labor force or a single parent in the labor force, indicating they have some need for child care.

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

	Estimated number of children (ages 0-5) living with one or two parents	Children (ages 0-5) living with two parents who are both in the labor force	Children (ages 0-5) living with two parents, one in the labor force, and one not	Children (ages 0-5) living with two parents, neither in the labor force	Children (ages 0-5) living with a single parent who is in the labor force	Children (ages 0-5) living with a single parent who is not in the labor force
Southeast Maricopa Region	66,913	36%	34%	1%	23%	6%
Apache Junction (SE Maricopa portion)	191	47%	24%	1%	15%	13%
Gilbert	21,411	44%	41%	1%	12%	2%
East Mesa	10,886	40%	35%	1%	20%	4%
West Mesa	30,425	28%	27%	1%	34%	10%
Queen Creek (SE Maricopa portion)	3,999	40%	46%	1%	10%	4%
Maricopa County	319,099	34%	28%	1%	29%	8%
ARIZONA	494,590	32%	28%	1%	29%	9%

U.S. Census Bureau (2019). American Community Survey, 5-year estimates (2015-2019), Table B23008

Note: "In the labor force" includes persons who are employed and persons who are unemployed but looking for work. Persons who are "not in the labor force" include stay-at-home parents, students, retirees, and others who are not working or looking for work.

The household type and employment mapped by zip code in Exhibits 2.6 and 2.7 identify the areas of the region that had higher and lower populations of single- and dual-parent households and those in the labor force from 2015-2019. The 85210, 85201, and 85203 zip codes have the highest percentage of single-parent households, while 85204, 85201, and 85203 have the highest dual-parent households.

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

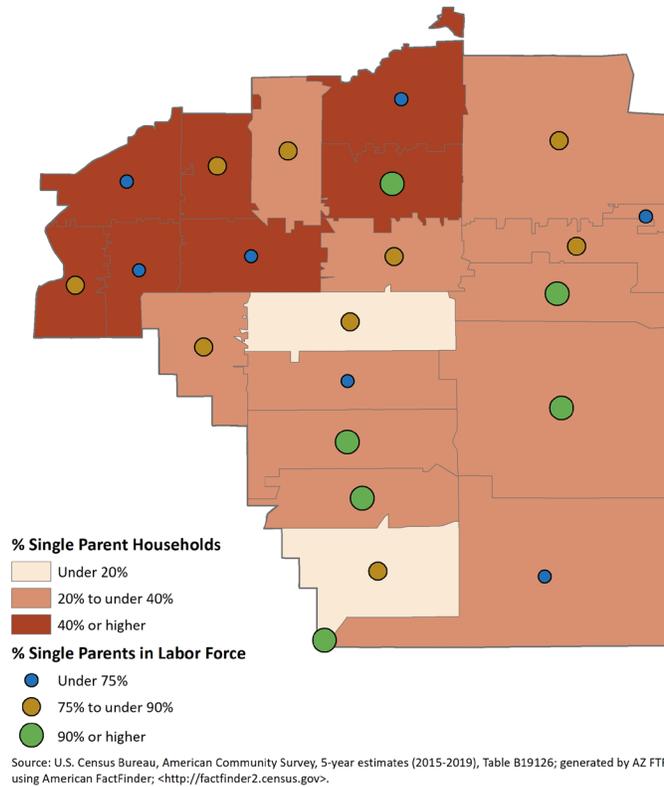
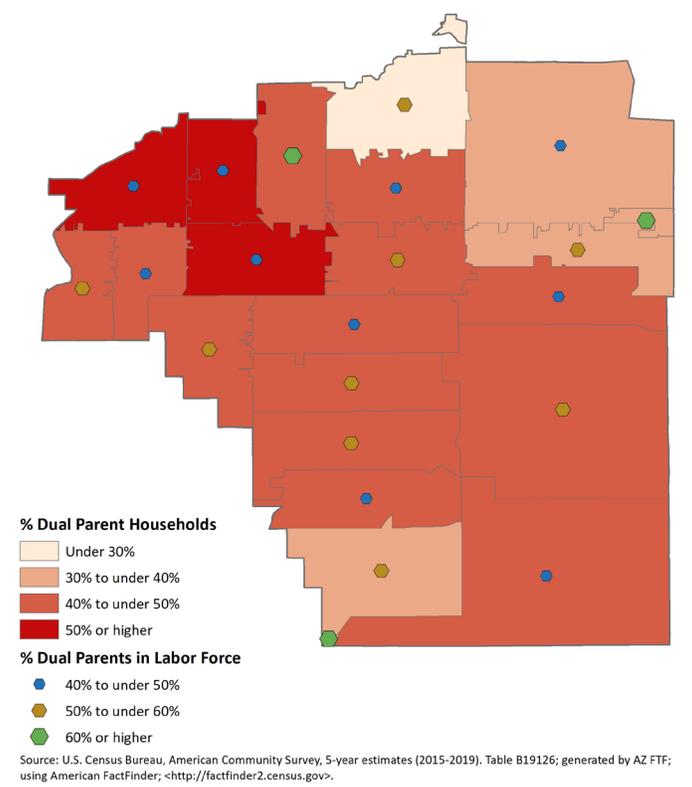
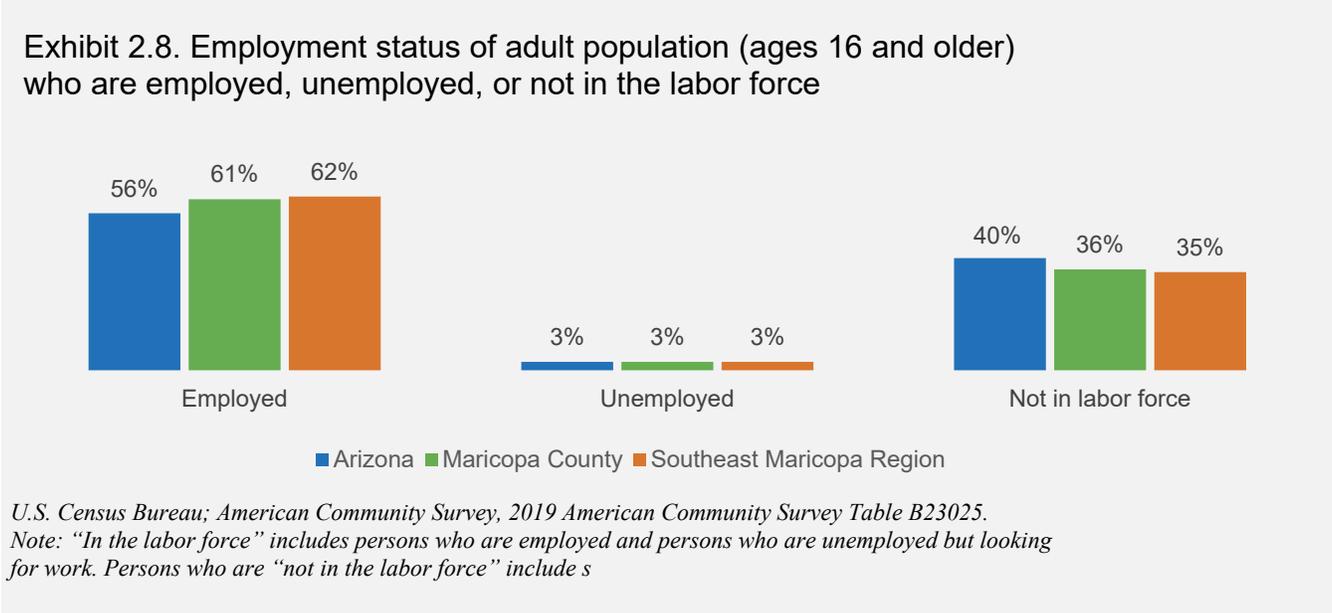


Exhibit 2.7. Dual-parent households with children under six and labor force status by zip code

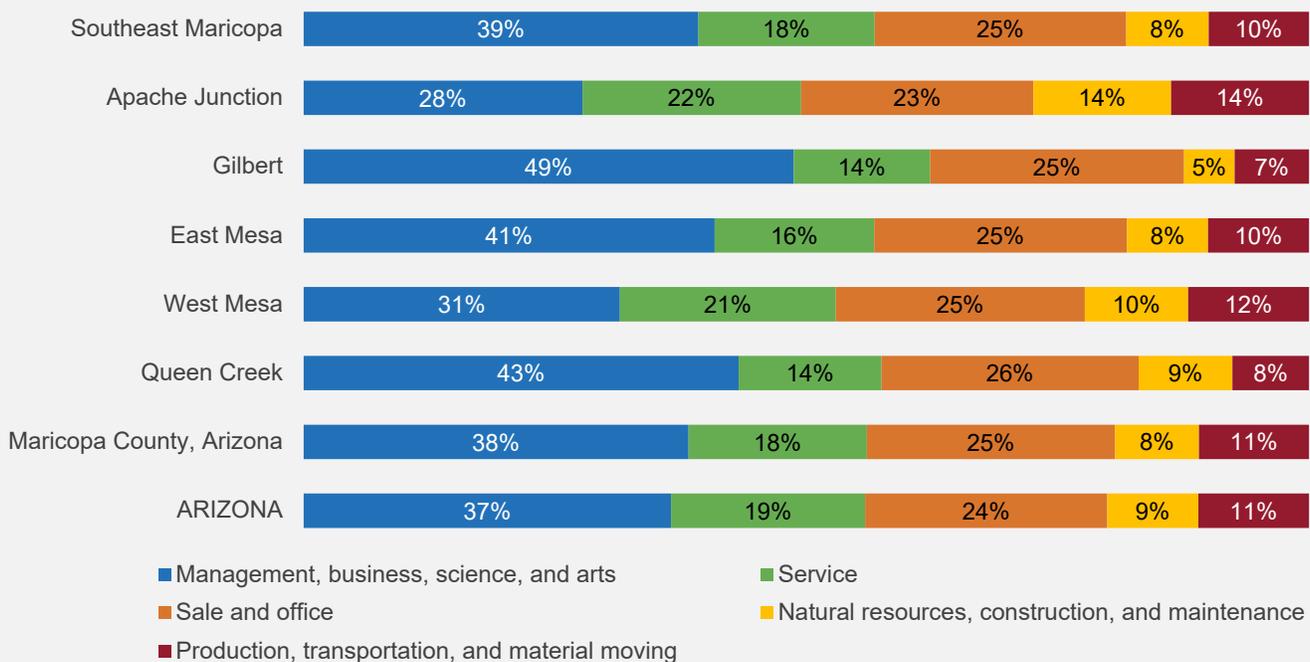


The overall percentage of adults who were employed in 2019 in the Southeast Maricopa Region was 62%, which was higher than the proportion in Arizona (56%) and slightly higher than Maricopa County (61%, Exhibit 2.8).



As Exhibit 2.9 shows, nearly 40% of working adults from 2015 to 2019 had occupations in the management, business, science, and arts sector. These occupations include, but are not limited to, educators, healthcare professionals, engineers, and managers, and tend to be the highest paid occupations.³⁴ Across the Southeast Maricopa Region and its sub-regions, about a quarter of adults in the workforce work in Sales and Office, which includes employment in supermarkets, merchandise/retail stores and offices.

Exhibit 2.9. Occupations of adults in the labor force



U.S. Census Bureau (2019). *American Community Survey, 5-year estimates (2015-2019), Table S2401*

Long commute times can take a toll on physical and mental health along with leaving less time to spend with family and on leisure activities.³⁵ On average from 2015 to 2019, workers 16 years old and over in the Southeast Maricopa Region spent 27.2 minutes traveling to work (Exhibit 2.10). This time is slightly higher than the average commute time across Maricopa County (26.4 minutes) and Arizona (25.7 minutes). Those in the Queen Creek and Apache Junction sub-regions had the longest commute times (34.0 minutes and 30.6 minutes, respectively).

³⁴ Data USA: Management, business, science, & arts occupations. Retrieved from <https://datausa.io/profile/soc/management-business-science-arts-occupations>

³⁵ Morin, A. (2014) *Want to be happier? Change your commute or change your attitude.* Forbes. Retrieved from <https://www.forbes.com/sites/amymorin/2014/12/07/want-to-be-happier-change-your-commute-or-change-your-attitude/?sh=b1bca7a7417f>

Exhibit 2.10. Average commute time for getting to work for workers 16 years and over

	Total number of workers 16 years and over	Mean travel time to work (minutes)
Southeast Maricopa Region	395,547	27.2
Apache Junction (SE Maricopa portion)	1,842	30.6
Gilbert	120,111	28.6
East Mesa	81,192	27.5
West Mesa	171,101	24.3
Queen Creek (SE Maricopa portion)	21,300	34.0
Maricopa County	2,040,912	26.4
ARIZONA	3,094,170	25.7

U.S. Census Bureau (2019) American Community Survey, 5-year estimates (2015-2019), Table S0804

To get to work during the 2015 to 2019 time period, over three-fourths of workers across Southeast Maricopa Region drove alone (Exhibit 2.11). About seven percent of workers worked from home, which does not reflect the COVID-19 pandemic that later forced many workers to work from home full-time. In addition, within Maricopa County, workers spent \$12,781, on average, on annual transportation costs (not shown).³⁶ For families in the county, the cost of transportation was about 17% of their income.

Exhibit 2.11. Workers' mean of transportation for getting to work

	Total number of workers 16 years and over	Drove alone	Carpool	Public transit	Walked	Bicycle	Taxicab, motorcycle or other means	Worked from home
Southeast Maricopa Region	395,547	77%	11%	1%	1%	1%	2%	7%
Apache Junction (SE Maricopa portion)	1,842	78%	9%	0%	2%	2%	2%	7%
Gilbert	120,111	79%	9%	1%	1%	0%	2%	9%
East Mesa	81,192	76%	11%	1%	1%	1%	2%	9%
West Mesa	171,101	75%	13%	2%	2%	1%	2%	5%
Queen Creek (SE Maricopa portion)	21,300	77%	11%	0%	1%	0%	1%	10%
Maricopa County	2,040,912	76%	11%	2%	2%	1%	2%	7%
ARIZONA	3,094,170	76%	11%	2%	2%	1%	2%	7%

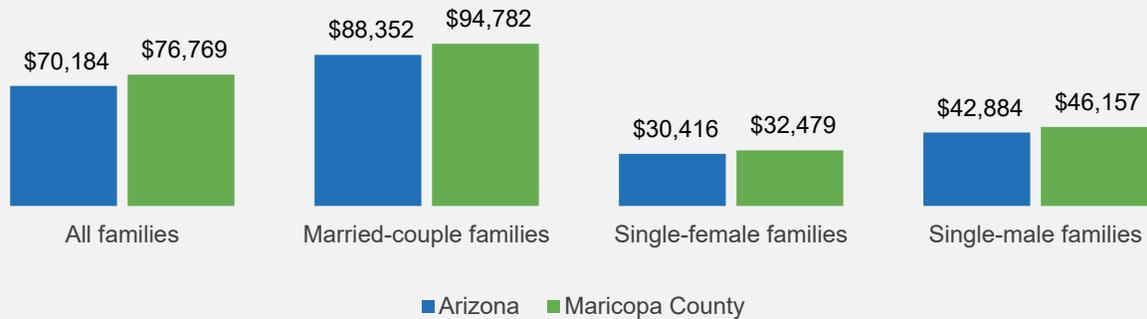
U.S. Census Bureau (2019) American Community Survey, 5-year estimates (2015-2019), Table S0804

³⁶ The Housing and Transportation (H+T) Affordability Index. The Center for Neighborhood Technology. Retrieved from <https://htaindex.cnt.org/fact-sheets/?focus=county&gid=851#>

Median Income and Poverty

The median income of families with children under age eighteen in Maricopa County is \$76,769, which is more than the median income statewide. The median income for single-parent families, which comprise about 40% of households with children under age six, is significantly less than for married-couple families. Exhibit 2.12 shows the difference in median income for married-couple families, single-female families, and single-male families.

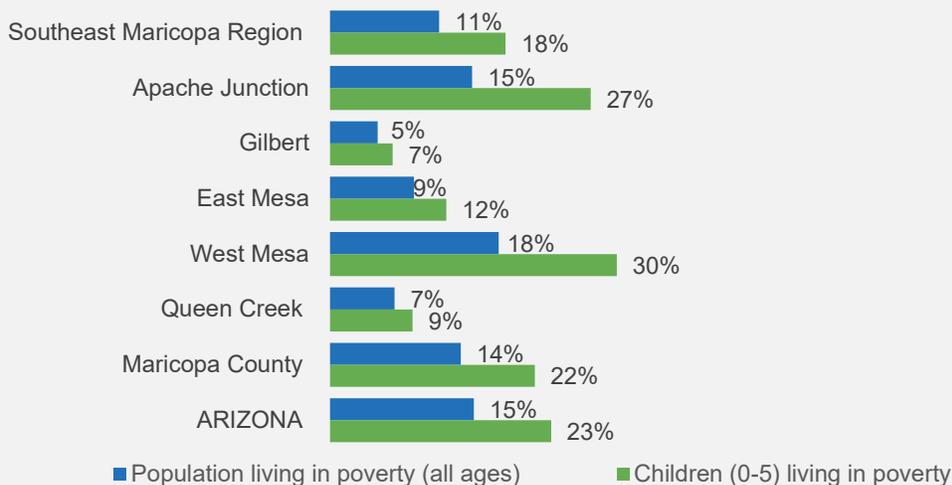
Exhibit 2.12. Median income for families with children (0-17)



U.S. Census Bureau (2019) American Community Survey, 5-year estimates (2015-2019), Table B19126

The large number of single-parent families combined with their low median income contributes to a sizable portion of the population in the Southeast Maricopa Region living in poverty. In the Southeast Region 11% of the population and 18% of children under age six are living in poverty (Exhibit 2.13). In West Mesa (30%) and Apache Junction (27%) sub-regions, more than a quarter of children under age six live in poverty. This is considerably more than other sub-regions, including East Mesa (12%), Queen Creek (9%), and Gilbert (7%).

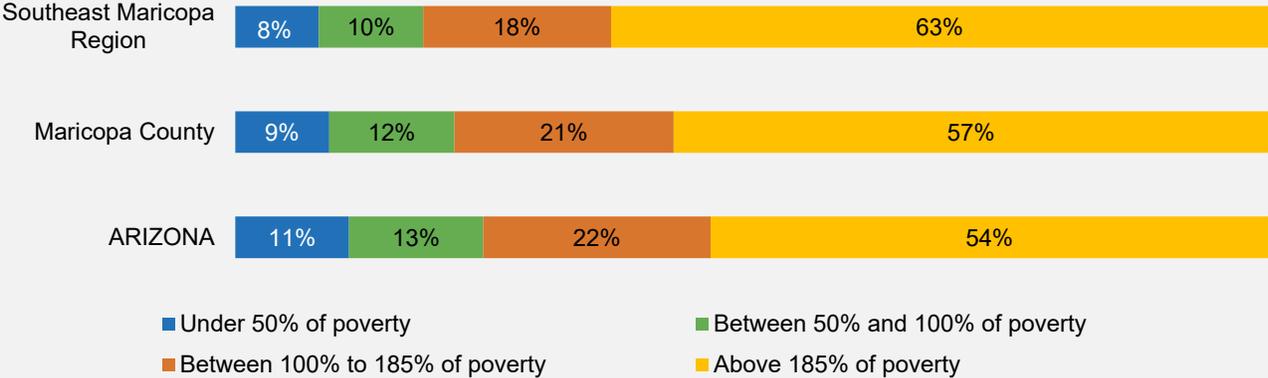
Exhibit 2.13. Percentage of population living in poverty



U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B17001

Federal poverty levels (FPL) are used to determine eligibility for certain programs and benefits, including SNAP and Arizona Health Care Cost Containment System (AHCCCS). The federal poverty level changes every year and is based on family size. For example, in 2021, the FPL was \$26,500 for a family of four. In other words, a family of four that makes less than or equal to \$26,500 was considered to be in poverty. In the Southeast Maricopa Region in 2019, 37% of families were living in poverty. This is lower than the proportion in Maricopa County (43%) and Arizona (46%, Exhibit 2.14).

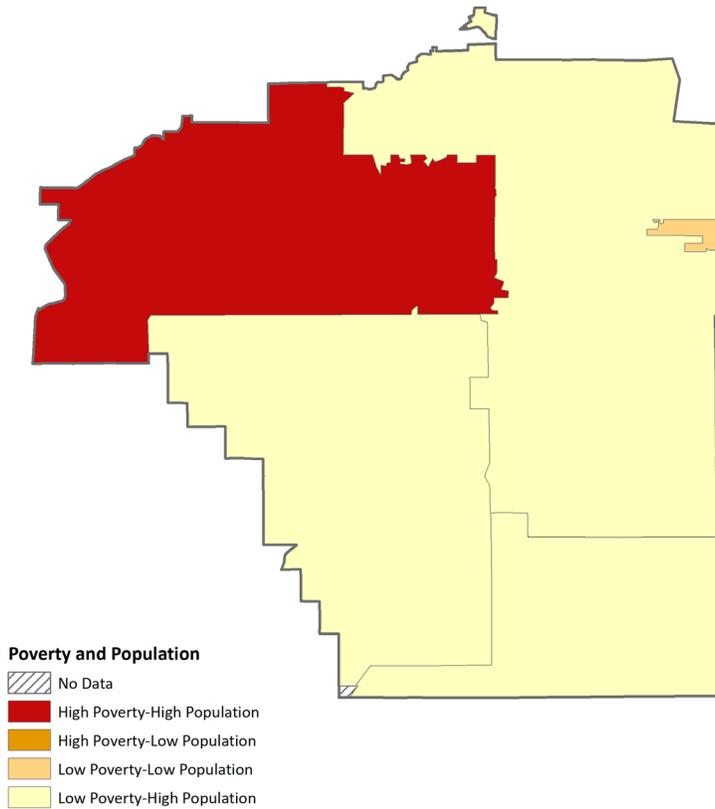
Exhibit 2.14. Families with young children (ages 0-5) living at various poverty thresholds



U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Tables B17001 & B17022.

The relative population and poverty of areas for young children within the Southeast Maricopa Region in 2010 are mapped in Exhibit 2.15. The West Mesa sub-region had a high rate of poverty and high population, while the rest of the sub-regions had low poverty rates.

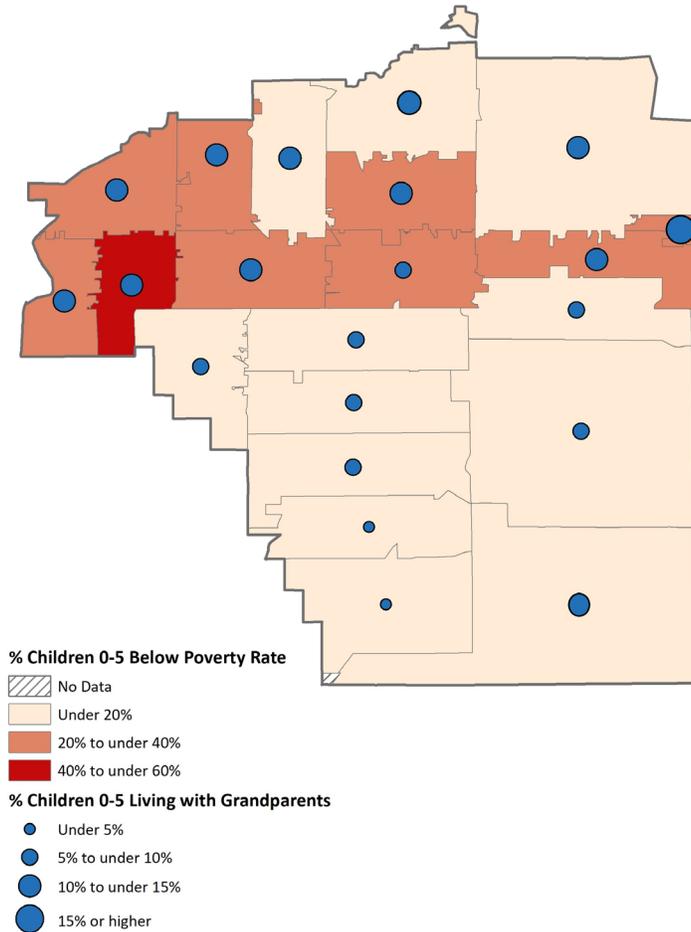
Exhibit 2.15. Poverty in the Southeast Maricopa Region



Source: U.S. Census Bureau 2010.

Exhibit 2.16 shows the poverty rates for specific zip codes in the Southeast Maricopa Region. The map shows that zip codes with higher poverty rates also tend to have a higher percentage of children under age six living in the same household as a grandparent.

Exhibit 2.16. Poverty rates and percentage of children living with grandparents by zip code



Source: U.S. Census Bureau 2010 Demographic Profile

In Maricopa County individuals who identify as white or Asian are the 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 experienced poverty rates above 20% in 2019 (Exhibit 2.12). Compared to the general population, higher proportions of children under five years old are living below the federal poverty level (Exhibit 2.13). In Maricopa County, children under five years old who identify as Black or African-American, American Indian or Alaskan Native, Hispanic or Latino, or some other race have poverty rates over 30%. This trend is similar to the proportions in Arizona indicating that children of color experience high rates of poverty.

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

	Arizona	Maricopa County
Black or African-American	20%	19%
American Indian or Alaskan Native	33%	23%
Asian	12%	11%
Native Hawaiian and Other Pacific Islander	16%	12%
Other Race	23%	24%
Two or More Races	17%	15%
White, not Hispanic	10%	9%
Hispanic or Latino	22%	22%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Tables B17001B, Table B17001C, Table B17001D, Table B17001E, Table B17001F, Table B17001H, Table B17001I.

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

Exhibit 2.18. Percentage of children under 5 years old below the federal poverty level by race/ethnicity*

	Arizona	Maricopa County
Black or African-American	34%	33%
American Indian or Alaskan Native	44%	37%
Asian	11%	11%
Native Hawaiian and Other Pacific Islander	31%	24%
Other Race	53%	52%
Two or More Races	13%	10%
White, not Hispanic	12%	11%
Hispanic or Latino	31%	31%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Tables B17001B, Table B17001C, Table B17001D, Table B17001E, Table B17001F, Table B17001H, Table B17001I.

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

Housing

The United States Department of Housing and Urban Development (HUD) define "rent burdened" as spending more than 30 percent of income on housing.³⁷ Residents of the Southeast Maricopa Region have a similar housing cost burden to residents of the state as a whole: 29% (approximately 86,000 households) of the region's housing units require their residents to contribute more than 30% of their household income toward housing (Exhibit 2.19). Housing costs are somewhat more burdensome in the West Mesa sub-region (35%, n= 45,646), while less burdensome in the Gilbert (24%, n=18,850) and Queen Creek (25%, n= 3,510) sub-regions.

Exhibit 2.19. The cost of housing, relative to household income

	Number of households	Less than 20%	20 to 29 percent	30% or more	Zero or negative income	No cash rent
Southeast Maricopa Region	99,615	45%	24%	28%	1%	2%
Apache Junction (SE Maricopa portion)	2,573	52%	16%	29%	3%	1%
Gilbert	77,368	50%	24%	24%	1%	1%
East Mesa	67,432	51%	21%	26%	1%	1%
West Mesa	131,020	40%	22%	35%	1%	1%
Queen Creek (SE Maricopa portion)	21,300	47%	25%	25%	2%	1%
Maricopa County	1,552,096	44%	22%	31%	2%	1%
ARIZONA	2,571,268	46%	21%	30%	2%	2%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B25106

³⁷ PD&R Edge (n.d.) Rental Burdens: Rethinking Affordability Measures. Retrieved from https://www.huduser.gov/portal/pdredge/pdr_edge_featd_article_092214.html

Children that are homeless qualify for rights and services under the McKinney-Vento Act. The McKinney-Vento Act defines homeless children as “individuals who lack a fixed, regular, and adequate nighttime residence.”³⁸ The number of homeless children in kindergarten through third grade from 2018 to 2020 is displayed in Exhibit 2.20. From 2018 to 2020, many districts within the Southeast Maricopa Region had fewer than 11 students that were homeless. Mesa Unified District (the largest school district in the region) had the most homeless students across the three years with over 200 homeless children for each year. Across all schools in the Southeast Maricopa Region, the number of homeless students decreased from 2018 to 2020, similar to the trends in Arizona and Maricopa County.

Exhibit 2.20. Number of homeless students in kindergarten through third grade, 2018 to 2020

	2018	2019	2020
Southeast Maricopa Region Schools	408	358	355
American Basic Schools LLC	<11	<11	<11
American Leadership Academy, Inc.	<11	<11	<11
Archway Classical Academy Arete	NA	<11	<11
Arizona Connections Academy Charter School, Inc.	<11	<11	<11
ASU Preparatory Academy	<11	<11	<11
Ball Charter Schools (Val Vista)	<11	<11	<11
BASIS Schools, Inc.	<11	<11	<11
Benjamin Franklin Charter School	<11	<11	<11
Boys & Girls Clubs of the East Valley dba Mesa Arts Academy	<11	<11	<11
CAFA, Inc. dba Learning Foundation and Performing Arts Alta Mesa	<11	<11	<11
CAFA, Inc. dba Learning Foundation and Performing Arts Gilbert	<11	<11	<11
CAFA, Inc. dba Learning Foundation Performing Arts School	12	<11	14
Cambridge Academy East, Inc	<11	<11	<11
Challenger Basic School, Inc.	<11	<11	<11
Chandler Unified District #80	<11	<11	<11
Concordia Charter School, Inc.	<11	<11	<11
EAGLE South Mountain Charter, Inc.	<11	<11	<11
East Mesa Charter Elementary School, Inc.	<11	<11	<11
East Valley Academy	<11	<11	<11
Edkey, Inc. - Pathfinder Academy	<11	<11	<11
Edkey, Inc. - Sequoia Charter School	<11	<11	12
Edkey, Inc. - Sequoia Choice Schools	<11	<11	<11
Eduprize Schools, LLC	<11	<11	<11
Gem Charter School, Inc.	<11	<11	<11
Gilbert Unified District	51	43	39
Higley Unified School District	22	25	31
Kaizen Education Foundation dba Gilbert Arts Academy	<11	<11	<11

³⁸ Arizona Department of Education. *Welcome to Homeless Education Program*. Retrieved from <https://www.azed.gov/homeless>

	2018	2019	2020
Kaizen Education Foundation dba Liberty Arts Academy	<11	<11	<11
Kaizen Education Foundation dba Vista Grove Preparatory Academy Elementary	42	26	<11
LEAD Charter Schools	<11	<11	<11
Legacy Traditional School - East Mesa	NA	<11	<11
Legacy Traditional School - Gilbert	<11	<11	<11
Leman Academy of Excellence, Inc.	NA	<11	<11
Mesa Unified District	219	201	207
Montessori Education Centre Charter School	<11	<11	<11
Montessori House, Inc.	<11	<11	<11
New Horizon School for the Performing Arts	<11	12	14
Noah Webster Schools - Mesa	<11	<11	<11
Queen Creek Unified District	<11	<11	<11
San Tan Montessori School, Inc.	<11	<11	<11
Self Development Charter School	<11	<11	<11
Self Development Eastmark Academy	NA	NA	<11
STEP UP Schools, Inc.	<11	<11	<11
West Gilbert Charter Elementary School, Inc.	<11	<11	<11
Maricopa County Schools	2,637	2,051	1,841
All Arizona Schools	4,565	3,676	3,191

Arizona Department of Education (2020). [homeless students]. Unpublished data.

Note: The school-district data in this table include only the schools that are located within the Southeast Maricopa Region.

In 2019, about 79% of households had both a smartphone and computer, which was higher than the proportion in Maricopa County (77%) and Arizona (73%, Exhibit 2.21). Households with neither a smartphone or computer were most likely located in the Apache Junction (16%) or West Mesa (9%) sub-regions. About nine of ten (92%) residents in Southeast Maricopa Region lived in households with a computer and internet (Exhibit 2.22).

Exhibit 2.21. Households with and without computers and smartphones

	Total number of households	Percent with computer but no smartphone	Percent with smartphone but no computer	Percent with both smartphone and computer	Percent with neither smartphone nor computer
Southeast Maricopa Region	292,281	6%	9%	79%	6%
Apache Junction (SE Maricopa portion)	2,296	10%	12%	62%	16%
Gilbert	77,371	3%	5%	91%	1%
East Mesa	67,431	9%	7%	77%	6%
West Mesa	130,980	6%	12%	72%	9%
Queen Creek (SE Maricopa portion)	14,203	4%	6%	88%	2%
Maricopa County	1,552,096	6%	11%	77%	7%
ARIZONA	2,571,268	7%	12%	73%	8%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B25106
 Note: In this table, "computer" includes both desktops and laptops.

Exhibit 2.22. Persons (all ages) in households with and without computers and internet connectivity*

	Number of person (all ages) living in households	Percent in households with computer and internet	Percent in households with computer but no internet	Percent in households without computer
Southeast Maricopa Region	831,992	92%	4%	4%
Apache Junction (SE Maricopa portion)	5,774	82%	8%	10%
Gilbert	241,990	97%	2%	1%
East Mesa	180,970	91%	4%	4%
West Mesa	356,944	88%	6%	7%
Queen Creek (SE Maricopa portion)	46,314	96%	3%	1%
Maricopa County	4,274,725	88%	7%	5%
ARIZONA	6,892,175	87%	7%	6%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B25106
 Note: In this table, "computer" includes both desktops and laptops.

*Internet includes a dial-up internet subscription or a broadband internet subscription.

Among households with children under 18 years old, 94% had a computer and internet in the region in 2019 (Exhibit 2.23). During the nationwide closures of elementary and secondary schools due to the COVID-19 pandemic, increased reliance on computers and reliable internet for children to engage in schooling from home underscored the digital divide.³⁹ Households that were most impacted by the digital divide included those in rural communities, people living in poverty, and people of color.^{40,41}

Exhibit 2.23. Children (ages 0-17) in households with and without computers and internet connectivity*

	Number of children (ages 0-17) living in households	Percent in households with computer and internet	Percent in households with computer but no internet	Percent in households without computer
Southeast Maricopa Region	217,024	94%	3%	3%
Apache Junction (SE Maricopa portion)	912	87%	7%	5%
Gilbert	72,455	98%	2%	0%
East Mesa	40,755	95%	3%	2%
West Mesa	88,204	90%	5%	5%
Queen Creek (SE Maricopa portion)	14,698	98%	2%	0%
Maricopa County	1,044,531	89%	8%	4%
ARIZONA	1,632,019	88%	8%	4%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B28005

Note: In this table, "computer" includes both desktops and laptops.

*Internet includes a dial-up internet subscription or a broadband internet subscription.

³⁹ Masonbrink, A, Hurley, E. (2020) "Advocating for children during the COVID-19 school closures." *Pediatrics* 146.3.

⁴⁰ Goldschmidt, K. (2020) "The COVID-19 pandemic: Technology use to support the wellbeing of children." *Journal of pediatric nursing* 53.

⁴¹ Dorn, E., Hancock, B., Sarakatsannis, J, Viruleg, E. (2020) "COVID-19 and learning loss—disparities grow and students need help." McKinsey & Company.

Of the people living in households with a computer and internet in 2019, 74% had fixed broadband and a cellular data plan as their internet. Sub-regions with the lowest proportion of households that had fixed broadband with cellular data plan as their internet included Apache Junction (60%) and East Mesa (66%, Exhibit 2.24).

Exhibit 2.24. Households with computer & internet by type (dial-up, broadband, satellite, other)

	People living in households with computer and internet (all ages)	Percent with fixed broadband and cellular data plan	Percent with fixed broadband without cellular data plan	Percent with cellular data plan without fixed broadband	Percent with dial-up internet only
Southeast Maricopa Region	762,268	74%	15%	11%	0%
Apache Junction (SE Maricopa portion)	4,711	60%	18%	21%	0%
Gilbert	234,329	81%	15%	4%	0%
East Mesa	165,330	66%	18%	16%	0%
West Mesa	313,485	73%	14%	14%	0%
Queen Creek (SE Maricopa portion)	44,413	77%	17%	7%	0%
Maricopa County	3,773,777	71%	17%	12%	0%
ARIZONA	5,968,639	69%	18%	12%	0%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B2808

Note: In this table, "computer" includes both desktops and laptops.

ECONOMIC CIRCUMSTANCES HIGHLIGHTS

The unemployment rate in Maricopa County peaked in 2020 (7%) due to the COVID-19 pandemic and started to decline in 2021 (6%). Single-parent families who are working earn significantly less, on average, than dual-parent households. Additionally, 18% of children under age six in the region live in poverty. About three out of ten (29%) residents pay 30% or more of their household income towards housing.

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
Southeast Maricopa Region generally has higher employment 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, almost 20% of children in the region live in poverty and 29% 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.



EDUCATIONAL INDICATORS

EDUCATIONAL INDICATORS

Why it Matters

Early care and education helps children thrive in school. Research shows that children who participate in early care and education programs are more likely to perform better on educational indicators such as math and reading tests, attendance rates, and discipline referrals than children who do not.^{42, 43}

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.⁴⁴ In addition, irregular attendance influences school budgets and could potentially lead to fewer funds for essential classroom needs.⁴⁵

Notably, children's participation in quality early care and education can also yield lifelong benefits. Improved performance on standardized tests and lower drop out rates in turn increases children's likelihood of graduating from high school, earning higher monthly earnings, and owning a home. Research shows that high-quality early care and education programs can reduce disparities in college graduation, educational attainment, and wages.⁴⁶ Research has also shown that students who do not complete high school are more likely to earn less than high school graduates, be unemployed, receive public assistance, and a higher chance of being incarcerated. These factors can add additional barriers while raising a family.⁴⁷ Essentially, a child's enrollment in early learning provides short-term and long-term benefits that will contribute to the child successfully transitioning into and prospering in adulthood.

⁴² Bakken, L., Brown, N., Downing, B. (2017) *Early Childhood Education: The Long-Term Benefits*. *Journal of Research in Childhood Education*. Volume 31. Issue 2. Retrieved from: <https://doi.org/10.1080/02568543.2016.1273285>

⁴³ Campbell, F., Pungello, E., Kainz, K., Burchinal, M., Pan, Y., Wasik, B., Barbarin, O., Sparling, J., Ramey, C., (2012) *Adult outcomes as a function of an early childhood educational program: an abecedarian project follow-up*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3989926/>

⁴⁴ GreatSchools staff. *Why attendance matters*. (2011). Retrieved from <http://www.greatschools.org/gk/articles/school-attendance-issues/>

⁴⁵ National Center for Education Statistics (2009). *Every school day counts: The forum guide to collecting and using attendance data*. Retrieved from <https://nces.ed.gov/pubs2009/attendancedata/chapter1a.asp>

⁴⁶ Bustamante, A., Dearing, E., Zachrisson, H., Vandell, D. (2021) *Adult outcomes of sustained high-quality early child care and education: Do they vary by family income?* Retrieved from <https://doi.org/10.1111/cdev.13696>

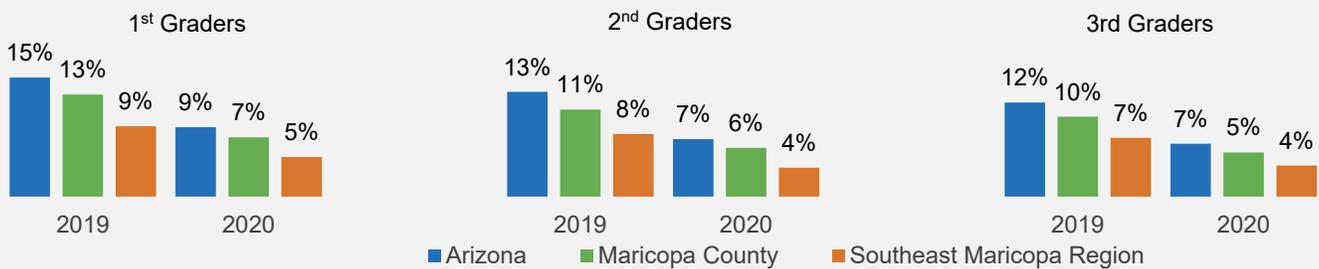
⁴⁷ Christle, C. A., Jolivet, K., Nelson, M. C. (2007). *School characteristics related to high school dropout rates*. *Journal of Remedial and Special Education*, 28, 15. Retrieved from www.eric.ed.gov/ERICWebPortal/recordDetail?accno=EJ785964

What the Data Tell Us

Student Attendance

Between 2019 and 2020, the state, Maricopa County, and the Southeast Maricopa Region experienced a decrease in the percentage of students missing ten or more days of school (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. There are many potential explanations for such findings, including that younger children may get sick more frequently than older children, parents may be more willing to let their children miss school in earlier years, or that the perception of the value of education changes as children grow. Across all grade levels, the decrease in absences from 2019 to 2020 is likely related to shifts to virtual learning during the COVID-19 pandemic. Younger children in 2020 remained at higher percentage absences from school. This may be due to virtual learning requiring intensive parental time and attention, so parents who worked were in a bind.

Exhibit 3.1. Percentage of students absent ten or more days from school

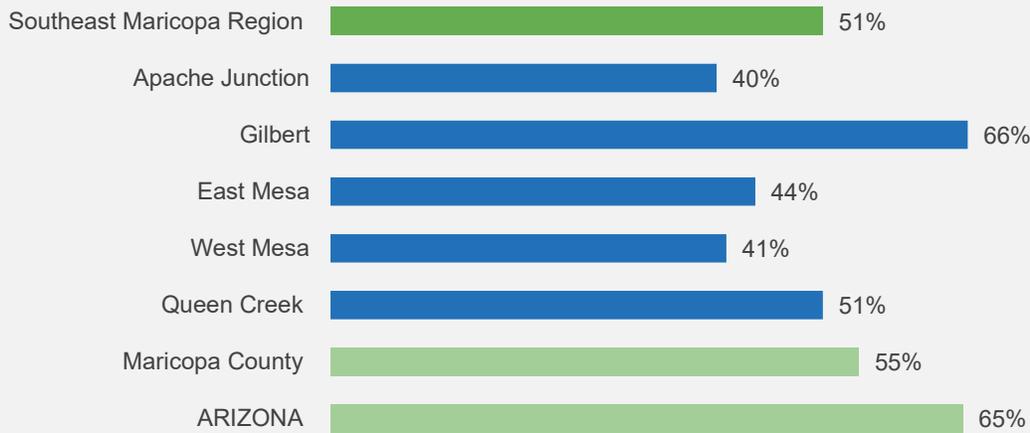


Arizona Department of Education (2021). *Chronic Absences*. Provided by AZ FTF.

Early Achievement

A little over half of preschool-aged children in the Southeast Maricopa Region (51%) were enrolled in nursery school, preschool, or kindergarten in 2019, which was lower than Arizona’s enrollment rate by 14 percentage points and lower than Maricopa County’s rate by four percentage points (Exhibit 3.2). Sub-regions with less than 50% of children ages three to four enrolled in school included: Apache Junction (40%), East Mesa (44%), and West Mesa (41%). Higher rates of participation occurred in Gilbert (66%).

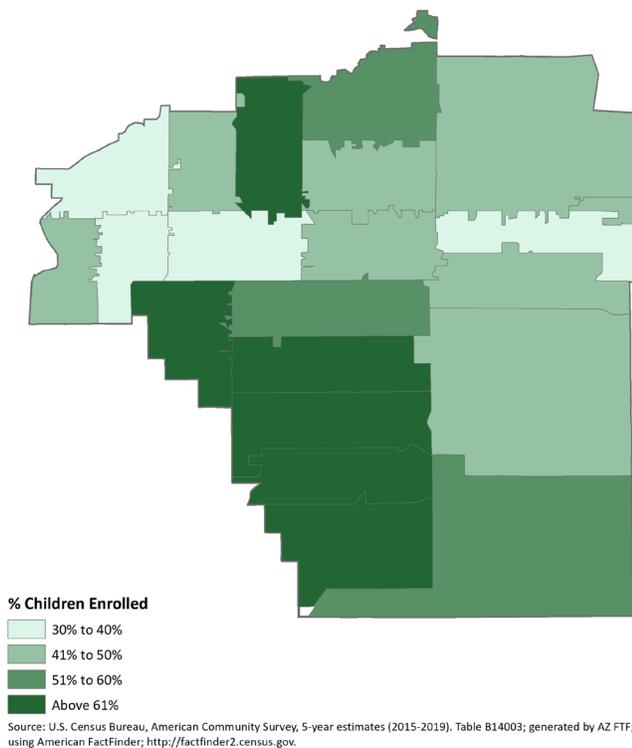
Exhibit 3.2. Percent of children ages 3-4 enrolled in private or public school



U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B2808.

Exhibit 3.3 shows the enrollment of children ages three to four enrolled in private or public school by zip code in the Southeast Maricopa Region. The map shows over 61% of enrollment in the Gilbert sub-region (i.e., zip codes of 85297, 85296, 85233, 85298, and 85295). In the West Mesa sub-region, over 61% of children are enrolled in the 85213 area but about 30 to 40 percent are enrolled in the remaining areas of the sub-region.

Exhibit 3.3. Enrollment of children ages 3-4 enrolled in private or public school by zip code



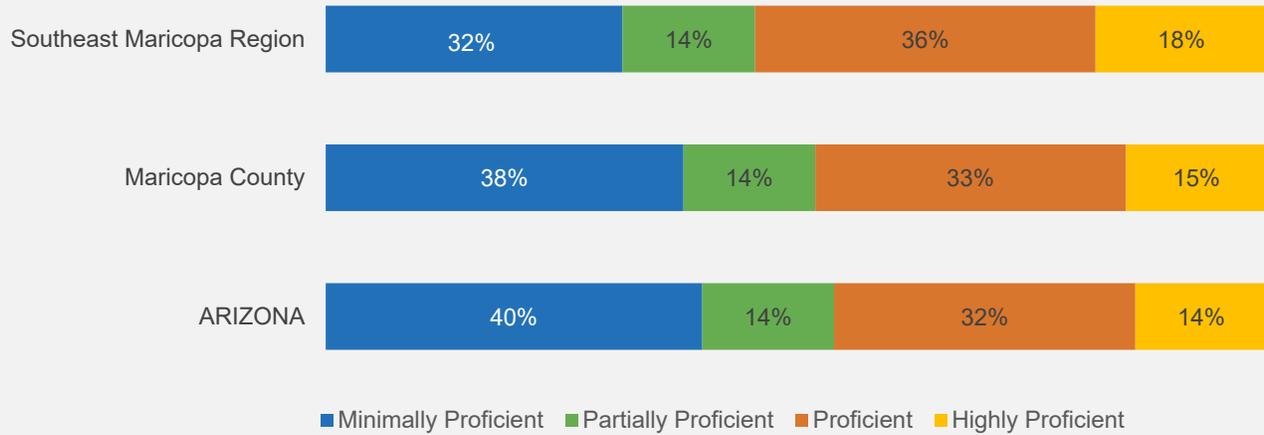
Research shows that preschool attendance influences future academic performance, specifically English and math scores.⁴⁸ The 2019 English Language Arts (ELA) assessment results of the AzMERIT demonstrated that about 54% of all third graders in the Southeast Maricopa Region scored “proficient” or “highly proficient”, which is about eight percentage points higher than the corresponding results across Arizona (Exhibit 3.4). Arizona Progress Meter’s goal for proficiency is 72% by 2030, so Southeast Maricopa Region is about 18 percentage points below the goal.⁴⁹ Within the region, districts varied widely in ELA proficiency (Exhibit 3.5). For example, several districts (e.g., Challenger Basic School, Inc.; Lemn Academy of Excellence, Inc.; and Self Development Charter School) achieved 75% or higher proficiency, while several other districts (e.g., Concordia Charter School, Inc. and STEP UP

⁴⁸ Andrews, R. J., Jargowsky, P., & Kuhne, K. (2012). *The effects of Texas's targeted pre-kindergarten program on academic performance* (No. w18598). National Bureau of Economic Research.

⁴⁹ Center for the Future of Arizona (n.d.) *Third Grade Reading*. Retrieved from <https://www.arizonafuture.org/progress-meters/education/third-grade-reading/>

Schools, Inc.) had less than a quarter of third graders reaching proficiency. These differences may be affected in part by the type of school (charter versus public) and the number of students that took the assessment.

Exhibit 3.4. 2019 AzMERIT English Language Arts assessment results for third grade students



Arizona Department of Education (2019). AzMERIT Reports. Provided by AZ FTF.

Exhibit 3.5. AzMERIT English Language Arts test results for third-graders in 2018-19, by school district

	Minimally proficient in English Language Arts	Partially proficient in English Language Arts	Proficient in English Language Arts	Highly proficient in English Language Arts	Passing English Language Arts (proficient or highly proficient)
Southeast Maricopa Region Schools	32%	14%	36%	18%	54%
American Basic Schools LLC	33%	19%	27%	22%	49%
American Leadership Academy, Inc.	15%	15%	41%	29%	70%
Archway Classical Academy Arete	20%	10%	46%	24%	70%
Arizona Connections Academy Charter School, Inc.	37%	10%	35%	19%	54%
ASU Preparatory Academy	20%	9%	40%	31%	71%
Ball Charter Schools (Val Vista)	16%	16%	44%	24%	68%
BASIS Schools, Inc.	15%	15%	34%	37%	71%
Benjamin Franklin Charter School	22%	17%	45%	17%	61%
Boys & Girls Clubs of the East Valley dba Mesa Arts Academy	57%	4%	32%	7%	39%
CAFA, Inc. dba Learning Foundation and Performing Arts Alta Mesa	35%	17%	30%	17%	48%
CAFA, Inc. dba Learning Foundation and Performing Arts Gilbert	39%	16%	29%	16%	45%

	Minimally proficient in English Language Arts	Partially proficient in English Language Arts	Proficient in English Language Arts	Highly proficient in English Language Arts	Passing English Language Arts (proficient or highly proficient)
CAFA, Inc. dba Learning Foundation Performing Arts School	54%	DS	42%	4%	46%
Cambridge Academy East, Inc	47%	5%	21%	26%	47%
Challenger Basic School, Inc.	12%	5%	44%	40%	84%
Chandler Unified District #80	21%	14%	42%	24%	65%
Concordia Charter School, Inc.	63%	13%	19%	6%	25%
EAGLE South Mountain Charter, Inc.	30%	24%	27%	18%	45%
East Mesa Charter Elementary School, Inc.	45%	21%	30%	4%	34%
Edkey, Inc. - Pathfinder Academy	18%	18%	34%	29%	63%
Edkey, Inc. - Sequoia Charter School	53%	23%	24%	DS	24%
Edkey, Inc. - Sequoia Choice Schools	64%	12%	24%	DS	24%
Eduprize Schools, LLC	20%	14%	41%	25%	66%
Gilbert Unified District	26%	15%	39%	19%	59%
Higley Unified School District	21%	13%	46%	20%	66%
Kaizen Education Foundation dba Gilbert Arts Academy	35%	19%	35%	12%	46%
Kaizen Education Foundation dba Liberty Arts Academy	79%	7%	14%	DS	14%
Kaizen Education Foundation dba Vista Grove Preparatory Academy Elementary	78%	19%	4%	DS	4%
LEAD Charter Schools	31%	17%	41%	10%	52%
Legacy Traditional School - East Mesa	34%	15%	30%	21%	51%
Legacy Traditional School - Gilbert	15%	13%	46%	26%	72%
Leman Academy of Excellence, Inc.	10%	10%	50%	30%	80%
Mesa Unified District	41%	14%	30%	15%	45%
Montessori Education Centre Charter School	DS	4%	26%	70%	96%
Montessori House, Inc.	40%	DS	40%	20%	60%
New Horizon School for the Performing Arts	68%	23%	9%	DS	9%
Noah Webster Schools - Mesa	31%	13%	43%	13%	56%
Queen Creek Unified District	26%	15%	42%	17%	59%
San Tan Montessori School, Inc.	19%	13%	40%	27%	67%
Self Development Charter School	12%	5%	46%	37%	82%
STEP UP Schools, Inc.	80%	DS	20%	DS	20%
West Gilbert Charter Elementary School, Inc.	38%	15%	38%	8%	46%
Maricopa County Schools	38%	14%	33%	15%	48%
All Arizona Schools	40%	14%	32%	14%	46%

Arizona Department of Education (2019). AzMERIT Reports. Provided by AZ FTF.

Note: The school-district data in this table include only the schools that are located within the Southeast Maricopa Region

On the 2019 AzMERIT Math Assessment, 59% of third graders scored “proficient” or highly proficient” in the Southeast Maricopa Region, eight percentage points higher than the corresponding results across

Arizona and six percentage points higher than those across Maricopa County (Exhibit 3.6). Within the region, there were some differences in proficiency by district (Exhibit 3.7). For example, in several districts (e.g., BASIS Schools, Inc. and Challenger Basic School, Inc.) 75% or more third graders achieved proficiency, while in other districts (e.g., Concordia Charter School, Inc. and Arizona Connections Academy Charter School, Inc.) fewer than a third of students reached proficiency. Although math assessment results are slightly higher than the ELA assessment results, overall, about 40% of all third graders are not meeting the proficiency standard in each of the two subjects.

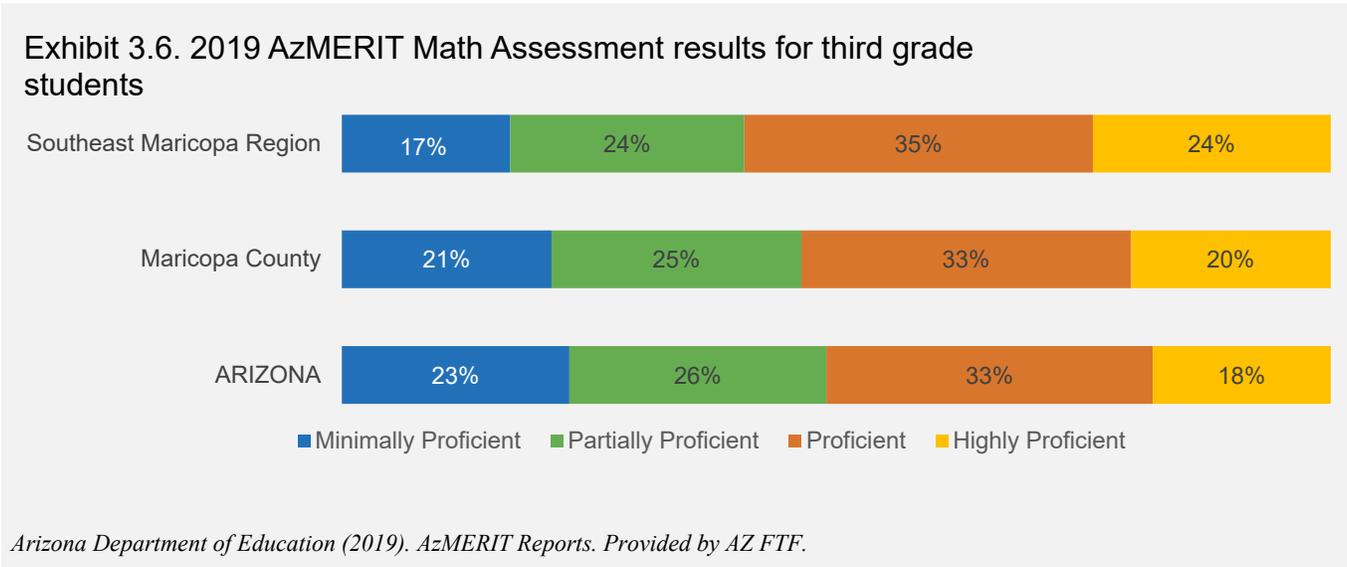


Exhibit 3.7. AzMERIT Math Assessment results for third-graders in 2018-19, by school district

	Minimally proficient in Math	Partially proficient in Math	Proficient in Math	Highly proficient in Math	Passing Math (proficient or highly proficient)
Southeast Maricopa Region Schools	17%	24%	35%	24%	59%
American Basic Schools LLC	10%	23%	33%	34%	67%
American Leadership Academy, Inc.	7%	17%	39%	37%	76%
Archway Classical Academy Arete	7%	23%	37%	33%	70%
Arizona Connections Academy Charter School, Inc.	33%	39%	24%	5%	28%
ASU Preparatory Academy	11%	13%	37%	39%	76%
Ball Charter Schools (Val Vista)	12%	12%	40%	36%	76%
BASIS Schools, Inc.	3%	15%	34%	48%	82%
Benjamin Franklin Charter School	9%	19%	37%	35%	72%
Boys & Girls Clubs of the East Valley dba Mesa Arts Academy	7%	46%	46%	DS	46%
CAFA, Inc. dba Learning Foundation and Performing Arts Alta Mesa	48%	22%	26%	4%	30%
CAFA, Inc. dba Learning Foundation and Performing Arts Gilbert	36%	36%	26%	DS	28%
CAFA, Inc. dba Learning Foundation Performing Arts School	19%	42%	38%	DS	38%
Cambridge Academy East, Inc	25%	24%	35%	16%	51%
Challenger Basic School, Inc.	5%	12%	49%	35%	84%
Chandler Unified District #80	8%	21%	40%	31%	72%
Concordia Charter School, Inc.	75%	6%	19%	DS	19%
EAGLE South Mountain Charter, Inc.	9%	15%	27%	48%	76%
East Mesa Charter Elementary School, Inc.	16%	38%	41%	4%	45%
Edkey, Inc. - Pathfinder Academy	7%	18%	42%	33%	75%
Edkey, Inc. - Sequoia Charter School	37%	24%	27%	11%	39%
Edkey, Inc. - Sequoia Choice Schools	36%	36%	24%	4%	28%
Eduprize Schools, LLC	12%	23%	34%	31%	65%
Gilbert Unified District	15%	23%	37%	25%	63%
Higley Unified School District	13%	20%	38%	29%	67%
Kaizen Education Foundation dba Gilbert Arts Academy	19%	23%	54%	4%	58%
Kaizen Education Foundation dba Liberty Arts Academy	64%	21%	14%	DS	14%
Kaizen Education Foundation dba Vista Grove Preparatory Academy Elementary	32%	36%	25%	7%	32%
LEAD Charter Schools	9%	28%	48%	16%	64%
Legacy Traditional School - East Mesa	14%	34%	33%	19%	52%
Legacy Traditional School - Gilbert	9%	22%	51%	18%	69%

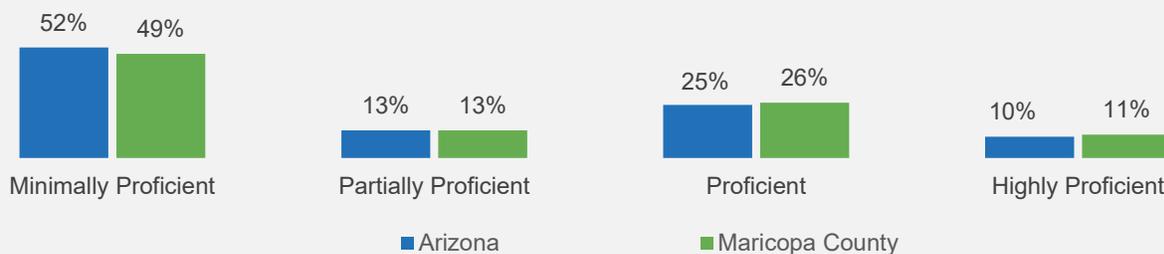
	Minimally proficient in Math	Partially proficient in Math	Proficient in Math	Highly proficient in Math	Passing Math (proficient or highly proficient)
Leman Academy of Excellence, Inc.	10%	30%	60%	DS	60%
Mesa Unified District	23%	26%	31%	20%	51%
Montessori Education Centre Charter School	DS	26%	45%	26%	72%
Montessori House, Inc.	60%	20%	20%	DS	20%
New Horizon School for the Performing Arts	35%	39%	22%	4%	26%
Noah Webster Schools - Mesa	14%	15%	43%	28%	71%
Queen Creek Unified District	11%	21%	41%	28%	69%
San Tan Montessori School, Inc.	12%	19%	34%	35%	69%
Self Development Charter School	5%	19%	35%	40%	75%
STEP UP Schools, Inc.	20%	DS	80%	DS	80%
West Gilbert Charter Elementary School, Inc.	12%	23%	46%	19%	65%
Maricopa County Schools	21%	25%	33%	20%	53%
All Arizona Schools	23%	26%	33%	18%	51%

Arizona Department of Education (2019). AzMERIT Reports. Provided by AZ FTF.

Note: The school-district data in this table include only the schools that are located within the Southeast Maricopa Region

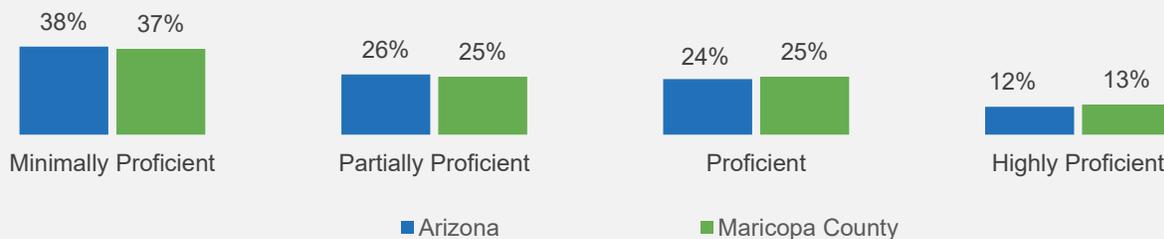
Arizona students in grades third to eighth and tenth grade were not assessed in the 2019-2020 school year due to the COVID-19 pandemic. For the 2020-21 school year, the AZMERIT changed its name to AzM2. For the third grade assessment, the content areas and design were similar to the AZMERIT. In the 2021 school year, fewer students participated in the state assessments (88% to 90% of students). On the ELA assessment, 37% of all third graders in Maricopa County scored “proficient” or “highly proficient”, which is about two percentage points higher than in Arizona overall (Exhibit 3.8).⁵⁰ Similarly, 38% of third graders scored “proficient” or highly proficient” on the math assessment test in Maricopa County, again two percentage points higher than statewide results (Exhibit 3.9). The COVID-19 pandemic and its effects on schooling and learning are a likely cause behind the decrease in assessed ELA and math proficiency from 2019 to 2021. Learning disruptions due to the pandemic may have included limited technology access, online learning fatigue, losing family members, caregivers losing jobs, social isolation, and mental health challenges.⁵¹

Exhibit 3.8. 2021 AzM2 English Language Arts assessment results for third grade students



Arizona Department of Education (2021). AzMERIT Reports. Provided by AZ FTF.

Exhibit 3.9. 2021 AzM2 Math assessment results for third grade students



Arizona Department of Education (2021). AzMERIT Reports. Provided by AZ FTF.

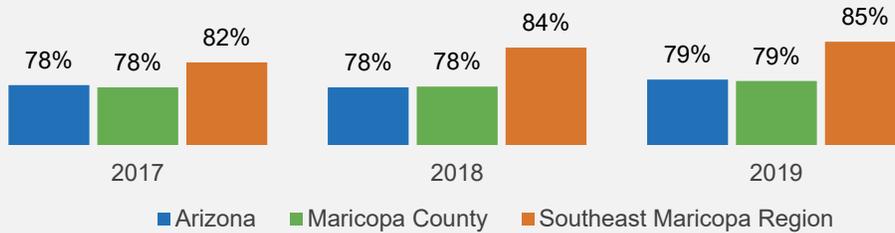
⁵⁰ 2020-21 data was not available at the regional level.

⁵¹ Dorn, E., Hancock, B., Sarakatsannis, J., Viruleg, E. (2021) McKinsey & Company. COVID-19 and education: The lingering effects of unfinished learning. Retrieved from: <https://www.mckinsey.com/industries/public-and-social-sector/our-insights/covid-19-and-education-the-lingering-effects-of-unfinished-learning>

High School Graduation & Dropout Rates

Between 2017 and 2019, high school graduation rates increased for the Southeast Maricopa Region (Exhibits 3.10 and 3.11). In 2019, 85% of students graduated within four-years in the region, higher than graduation rates in Maricopa County and Arizona (Exhibit 3.10). The high percentage of high school graduation may be associated with the region’s dropout rate, which was lower than the state’s (Exhibit 3.12).

Exhibit 3.10. 2017-2019 High school graduation rates: 4-year cohort

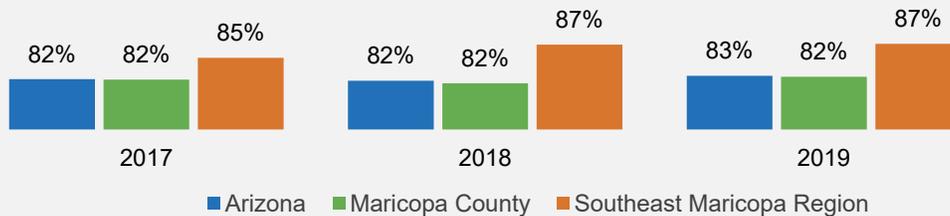


Arizona Department of Education (2021). Graduation Rate 2018 Cycle. Provided by AZ FTF.

*Data available by breakdown city, school district, school, and zip code

**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

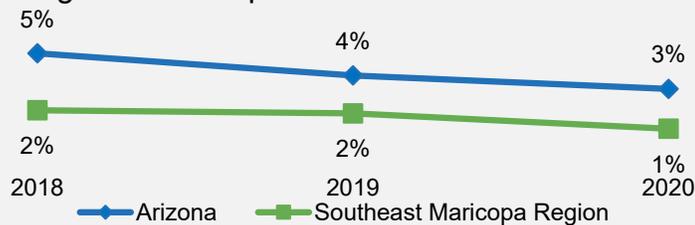
Exhibit 3.11. 2017-2019 High school graduation rates: 5-year cohort



Arizona Department of Education (2021). Graduation Rate 2018 Cycle. Provided by AZ FTF.

*Data available by breakdown city, school district, school, and zip code

Exhibit 3.12. 2018-2020 High school dropout rates



Arizona Department of Education (2021). Graduation Rate 2018 Cycle. Provided by AZ FTF.

Educational Attainment

In the Southeast Maricopa Region, 92% of adults ages 25 and older have completed high school education or beyond. In addition, 69% have completed at least some college, which is a higher percentage than across the county and state (Exhibit 3.13). At the sub-regional level, Gilbert (96%) and Queen Creek (95%) have the highest percentage of high school completion. Moreover, 44% of adults in Gilbert have a bachelor’s degree or more. More than ten percent of adults 25 and older in Apache Junction (14%) and West Mesa (13%) do not have a high school diploma or GED. People who complete more education typically earn more and have lower rates of unemployment compared to those with lower education.⁵²

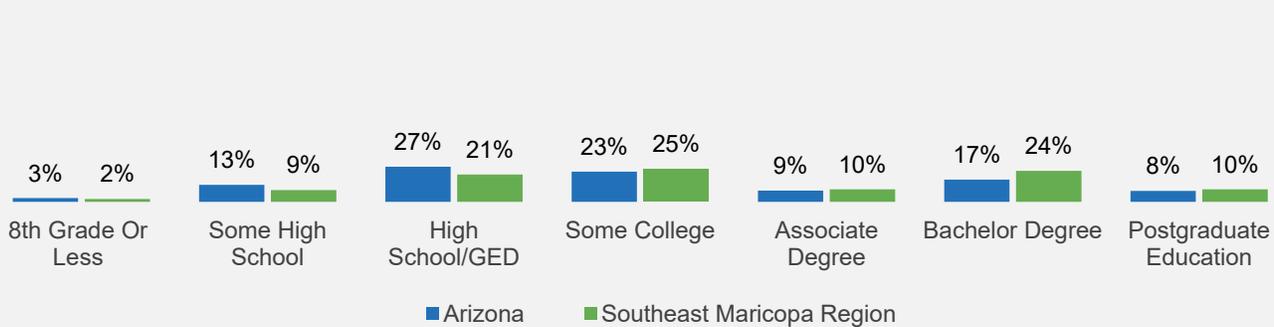
Exhibit 3.13. Level of education for the adult population (ages 25 and older)

	Estimated population (ages 25 and older)	Percent less than high school	Percent high school or GED	Percent some college or professional education	Percent bachelor’s degree or more
Southeast Maricopa Region	546,342	9%	23%	37%	32%
Apache Junction (SE Maricopa portion)	4,073	14%	36%	36%	14%
Gilbert	149,455	4%	16%	36%	44%
East Mesa	128,679	8%	24%	38%	30%
West Mesa	235,331	13%	25%	37%	25%
Queen Creek (SE Maricopa portion)	28,804	6%	25%	37%	33%
Maricopa County	2,878,815	12%	22%	33%	33%
ARIZONA	4,732,532	13%	24%	34%	29%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B15002

Approximately, nine of ten (90%) of mothers giving birth in 2019 had at least a high school graduation in the Southeast Maricopa Region, higher than the state’s proportion (84%, Exhibit 3.14).

Exhibit 3.14. 2019 Percentage of live births by mother’s educational attainment



Arizona Department of Health Services (2021). Vital Statistics. Provided by AZ FTF.

⁵² Torpey, E. (2021) U.S. Bureau of Labor Statistics. Education pays, 2020. Retrieved from <https://www.bls.gov/careeroutlook/2021/data-on-display/education-pays.htm>

EDUCATIONAL INDICATORS HIGHLIGHTS

A child’s development during their first five years of life makes an impact on their performance in future educational endeavors. Overall, the Southeast Maricopa Region is performing better than the state or county on many educational indicators. Student absences are lower in the region than in Arizona or Maricopa County. Additionally, 51% of preschool-age children are enrolled in early education and over half of third-grade students in the Southeast Maricopa Region are scoring proficiently on the math and English Language Arts (ELA) assessments, which are both more than the state and county. The region remains consistent at 87% of students graduating from high school, higher than both the state and the county. Less than ten percent of adults 25 and older in the region do not have a high school education and only 9% of mothers who gave birth in 2019 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 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 high school graduation rates and the average educational attainment level of adults are high, though educational attainment is lower in the West Mesa subregion and the Southeast Maricopa portion of Apache Junction.	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 West Mesa subregion and the Southeast Maricopa portion of Apache Junction.

Needs	Considerations
AzMERIT reports from the Arizona Department of Education show that about 40% of third graders are not meeting proficiency standards for English Language Arts (54%) and Math (59%).	Increase parent outreach and awareness of early education programs to support learning and school readiness.



EARLY LEARNING

EARLY LEARNING

Why it Matters

Early learning fosters children's development and well-being at a critical time in their lives. Early learning is supported by early care and education (ECE), a constellation of all formal and informal educational programs and strategies designed to contribute to the growth and development of children from birth through age five.⁵³ 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.⁵⁴ Research also shows that when children participate in high-quality learning environments, they learn and develop important skills and abilities such as motivation, self-control, focus and self-esteem. These skills prepare them for educational achievement later in life and reduce the need for special education programs.⁵⁵ In addition, research shows that investments in ECE have long-term health effects, helping to prevent disease and promote health.^{56, 57} For disadvantaged families, early childhood programs have benefits on health, future wages, crime reduction, and education.⁵⁸ 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.^{59, 60}

Key indicators of early learning that help identify the needs of children include, but are not limited to, the availability of ECE centers and homes; enrollment in ECE programs; 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.

⁵³ University of Massachusetts Global (2021) *What is the purpose of early childhood education? Why it's so important*. Retrieved from: <https://www.umassglobal.edu/news-and-events/blog/what-is-purpose-of-early-childhood-education>

⁵⁴ Early Childhood Education. (n.d.). Retrieved from <https://teach.com/where/levels-of-schooling/early-childhood-education/>

⁵⁵ McCoy, C., Yoshikawa, H., Ziol-Guest, K. (2017) *Impacts of early childhood education on medium- and long-term educational outcomes*. Retrieved from <https://journals.sagepub.com/doi/abs/10.3102/0013189X17737739>

⁵⁶ Garcia, J., Heckman, J., Ziff, A. (2019) *Early Childhood education and crime*. Retrieved from <https://doi.org/10.1002/imhj.21759>

⁵⁷ 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.

⁵⁸ Garcia, J., Heckman, J., Leaf, D., Prados, M. (2016) *The life-cycle benefits of an influential early childhood program*. National Bureau of Economic Research. <https://www.nber.org/papers/w22993>

⁵⁹ Reynolds, A., Temple, J., Ou, S., Robertson, D., Mersky, J., Topitzes, J., & Niles, M. (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.

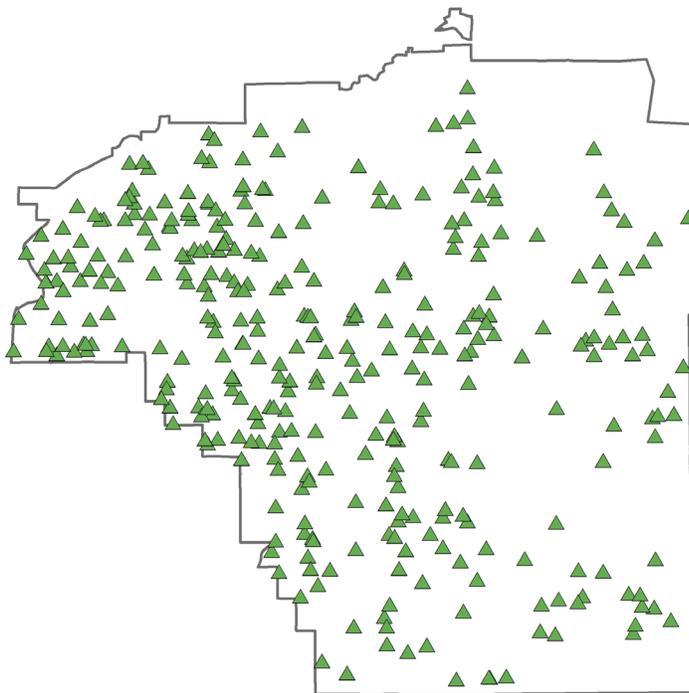
⁶⁰ Weiland, C., & Yoshikawa, H. (2013). *Impacts of a prekindergarten program on children's mathematics, language, literacy, executive function, and emotional skills*. *Child Development*, 84(6), 2112-2130.

What the Data Tell Us

Early Care and Education

There are 601 ECE centers and homes with a capacity of 64,503 children in the Southeast Maricopa Region.⁶¹ Although the total licensed capacity may be high, the actual facility may choose not to enroll the total number of children they are licensed to serve. The number of children served mainly depends on the center's ability to meet the adult to child ratio, which varies by child's age and must comply with licensing requirements. Exhibit 4.1 shows the locations of child care centers throughout the Southeast Maricopa Region.

Exhibit 4.1. Child care locations in the Southeast Maricopa Region



Source: Arizona Department of Economic Security (2019-2020) and Arizona Department of Health Services (2020).
Provided by AZ FTF.

⁶¹ Arizona Department of Economic Security (2020) and Arizona Department of Health Service (2020). Provided by AZ FTF.

As previously mentioned, 51% of children ages three and four are enrolled in ECE programs in the Southeast Maricopa Region (Exhibit 3.2). This is lower than the 59% estimated to need child care since all adults in the household are employed (Exhibit 2.5). 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.⁶²

Quality of Early Care and Education

Quality First (QF) 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 ECE 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 ECE programs along with associated 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.⁶³ In the Southeast Maricopa Region, out of the 5,678 children enrolled in a Quality First site, 3,573 (63%) are enrolled in a three, four, or five star center or home (Exhibit 4.2). Moreover, 56 out of 78 childcare providers (72%) in Quality First have received a three-to-five-star rating (Exhibit 4.2).

Research has demonstrated that a full-day of preschool is associated with increased school readiness skills, attendance, and reduced chronic absences compared with a part-day program.⁶⁴ In 2020, for the 525 children that received scholarships for QF programming, almost three-fourths (72%, n=379) attended programming full-time. These children attended QF programming for an average of 176 hours per month with a minimum of 20 hours and maximum of 264 hours. The children that attended programming part-time attended an average of 54 hours with a minimum of 17 hours and maximum of 207 hours.

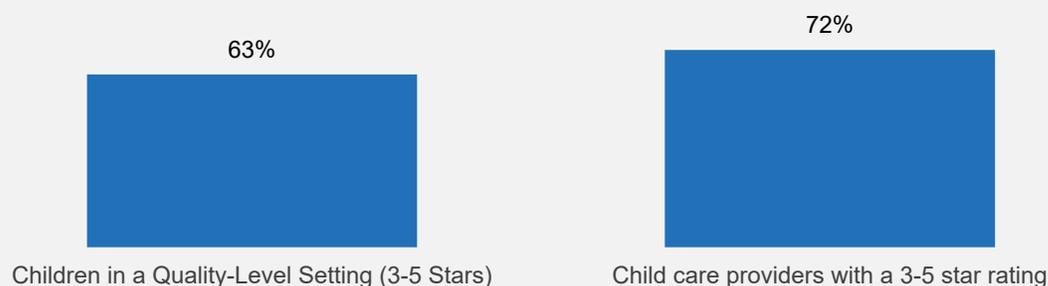
	Highest Quality	Far exceeds quality standards
	Quality Plus	Exceeds quality standards
	Quality	Meets quality standards
	Progressing Star	Approaching quality standards
	Rising Star	Committed to quality improvement
	No Rating	Program is enrolled in Quality First but does not yet have a public rating

⁶² Greenberg, M. (2007). *Next steps for federal child care policy. The Next Generation of Antipoverty Policies*, 17, 2. Retrieved from <http://www.futureofchildren.org/publications/journals/article/index.xml?journalid=33&articleid=67§ionid=353>

⁶³ Arizona First Things First (October 2021). *Quality First*. Retrieved from: <https://www.firstthingsfirst.org/resources/quality-first/>

⁶⁴ Reynolds, A., Richardson, B., Hayakawa, M., Lease, E., Richter, M., Englund, M., Ou, S., Sullivan, M. (2015) *Association of a full-day versus part-day preschool intervention with school readiness, attendance, and parent involvement*. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4505551/>

Exhibit 4.2. Percentage of 3 to 5 star ratings at Quality First centers in Southeast Maricopa Region



Arizona First Things First (July 2020). Quality First. Data retrieved July 2021.

Costs of Child Care & Access

In addition to supporting improvements in the quality of child care, FTF provides scholarships for low income children to attend quality ECE programs. Previous research has shown that low-income mothers receiving child care subsidies, a form of financial assistance, are more likely than other low-income mothers to work, sustain employment, and work longer hours.⁶² The negative effects of not accessing child care include the possibility of incurring financial debt, choosing child care that is lower quality and less stable, and losing time from work.

Across the Southeast Maricopa Region, state and Maricopa County, licensed centers had the highest cost per day, certified group homes had the second highest cost per day, and approved family homes had the lowest cost per day in 2018 (Exhibit 4.3). In general, the median costs per day of licensed centers, approved family homes and certified group homes in Southeast Maricopa Region and Maricopa County were greater than those across 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 Southeast Maricopa Region totals approximately \$11,000 a year for licensed centers and approximately \$7,000 a year for approved family homes and certified group homes. Compared to the median income of families in Maricopa County with children under 18 (Exhibit 2.12), licensed centers comprise approximately 14% and approved family homes and certified group homes are about 9% to 12% of the county's median income.

The median cost per year of child care comprises an even higher amount of the median income for single parent led families with children under 18 in Maricopa County and is considerably higher for single-female families compared to single-male families. Based on the median income of single-female families (Exhibit 2.12), licensed centers make up 34% of median income and approved family homes

and certified group homes make up 22% of median income. High costs can be a barrier in affording quality child care especially for single-female families.

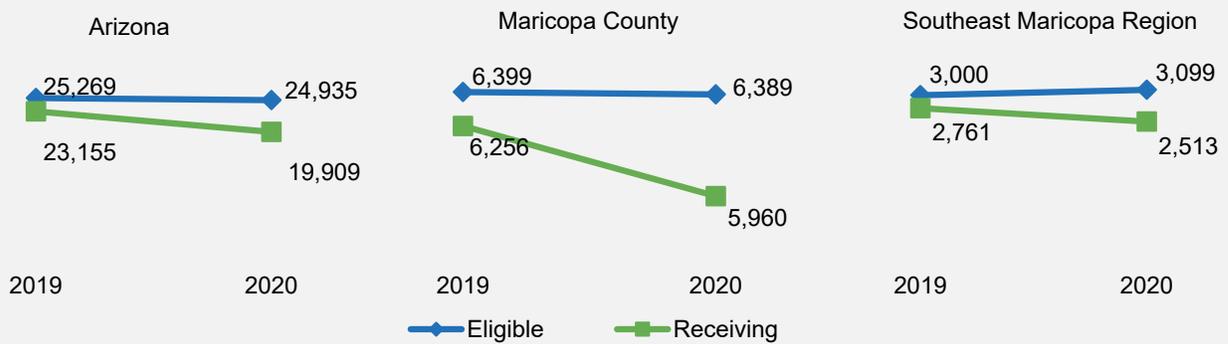
Exhibit 4.3. 2018 Median cost per day of early childhood care

	Southeast Maricopa Region	Maricopa County	Arizona
Cost for one infant Licensed Centers	\$45.00	\$44.99	\$43.03
Cost for one infant Approved Family Homes	\$29.00	\$20.00	\$20.00
Cost for one infant Certified Group Homes	\$28.00	\$30.00	\$30.00
Cost for one child (1 to 2 years old) Licensed Centers	\$40.00	\$40.00	\$38.00
Cost for one child (1 to 2 years old) Approved Family Homes	\$25.00	\$20.00	\$20.00
Cost for one child (1 to 2 years old) Certified Group Homes	\$27.57	\$28.50	\$28.00
Cost for one child (3 to 5 years old) Licensed Centers	\$34.78	\$34.00	\$33.00
Cost for one child (3 to 5 years old) Approved Family Homes	\$20.00	\$20.00	\$20.00
Cost for one child (3 to 5 years old) Certified Groups	\$28.00	\$28.00	\$28.00

Arizona Department of Economic Security (2018). Child Care Market Rate Survey. Provided by AZ FTF.

From 2019 to 2020, Southeast Maricopa Region experienced a slight increase in the number of children eligible for Department of Economic Security (DES) child care, while Maricopa County and Arizona experienced a slight decrease (Exhibit 4.4). During the same time period, the state, Maricopa County, and the Southeast Maricopa Region experienced a decrease in the number of children receiving child care subsidies. For example, in 2019 in the Southeast Maricopa Region, 92% of eligible children received child care subsidies compared to just 81% of children in 2020. The decrease in the number of children eligible and receiving child care subsidies in 2020 may be due to COVID-19 pandemic as centers were closed.

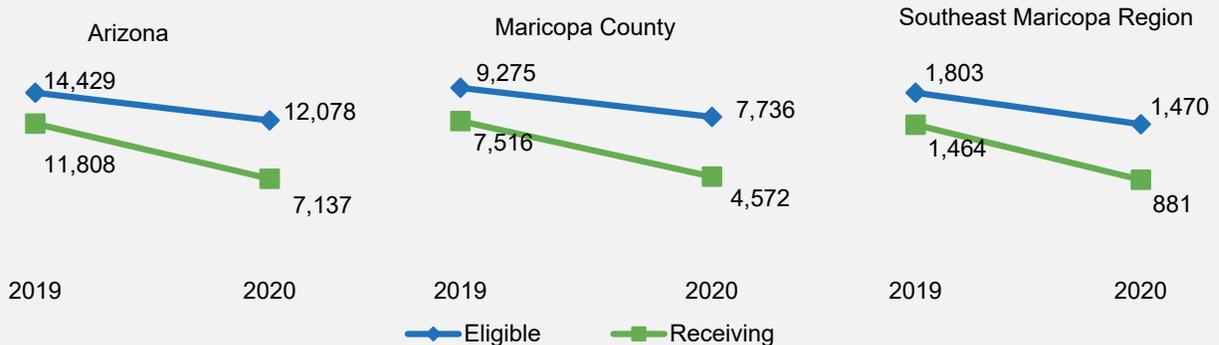
Exhibit 4.4. 2019-2020 Number of children eligible and receiving child care subsidies



Arizona Department of Economic Security (2020). Child Care (CCA) Subsidies. Provided by AZ FTF.

Department of Child Safety (DCS) involved children had similar trends of a decrease in the proportion of children eligible for child care subsidies and the proportion of eligible children who received subsidies from 2019 to 2020 (Exhibit 4.5). For example, in 2019 in the Southeast Maricopa Region, 81% of DCS-involved children that were eligible for child care subsidies received subsidies compared to 60% of children in 2020. In both years, a smaller proportion of eligible children received subsidies among those involved with DCS than non-DCS children.

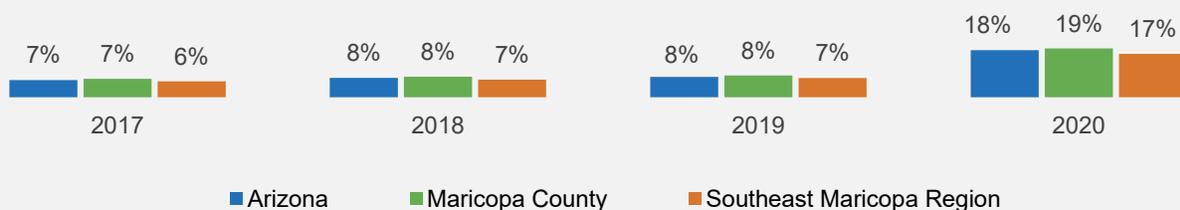
Exhibit 4.5. 2019-2020 Number of DCSinvolved children eligible and receiving child care subsidies



Arizona Department of Economic Security (2020). Child Care (CCA) Subsidies. Provided by AZ FTF.

The proportion of eligible families not using DES child care subsidies remained fairly steady between 2017 to 2019, but increased in 2020 across the state, county and region (Exhibit 4.6). In 2020, 17% of families in the Southeast Maricopa Region did not use their child care subsidies compared to six percent of families in 2017. The decrease in families using child care subsidies may have been due to the closure of child care sites in Spring 2020 due to the COVID-19 pandemic.

Exhibit 4.6. 2017-2020 Percent of eligible families not using DES child care subsidies



Arizona Department of Economic Security (2020). *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. There are diverse perspectives on how to effectively teach young children with developmental delays and special needs.⁶⁵ 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 (ages zero to two) and their families receive early intervention services under IDEA Part C. Children and youth (ages three to 21) receive special education and related services under IDEA Part B.⁶⁶

AzEIP is a statewide system that offers services and assistance to families and their children with disabilities or developmental 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.⁶⁷ Research shows that children and youth with mild intellectual disabilities are behind in academic skills compared to their peers.⁶⁸ Without

⁶⁵ Dyson, A. (2001). *Special needs education as the way to equity: an alternative approach?* *Support for Learning*, 16, 3.

⁶⁶ US Department of Education: Office of Special Education and Rehabilitative Services. Retrieved from <https://www2.ed.gov/about/offices/list/osers/osep/osep-idea.html>

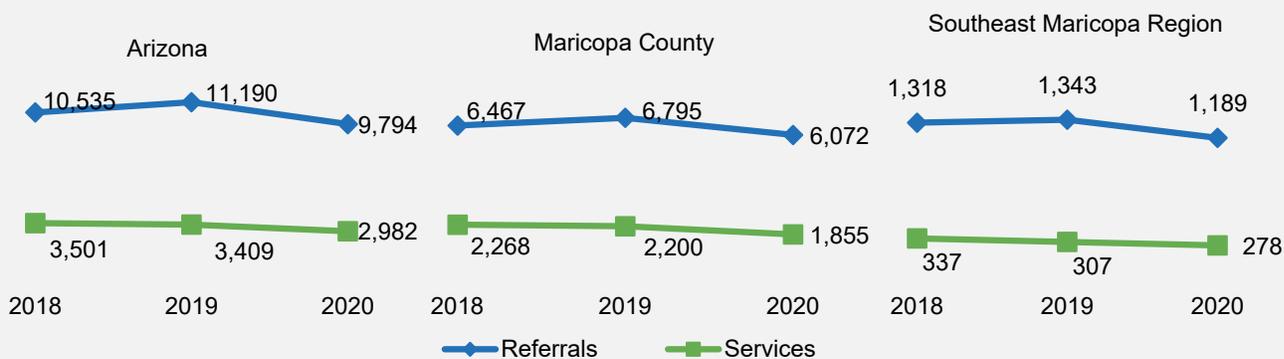
⁶⁷ Arizona Department of Economic Security (n.d.). *Arizona Early Intervention Program*. Retrieved from: <https://des.az.gov/services/disabilities/developmental-infant>

⁶⁸ Rosenberg, L., Bart, O., Ratzon, N., Jarus, T. (2013) *Personal and Environmental Factors predict participation of children with and without mild developmental disabilities*. Retrieved from: <https://link.springer.com/article/10.1007/s10826-012-9619-8>

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 with a high probability of resulting in a developmental delay, as defined by the state.⁶⁹ A child is considered to be developmentally delayed when s/he has not reached 50% of the milestones expected at her/his chronological age in one or more of the areas of development: cognitive, physical, communication, social or emotional, or adaptive.

From 2018-2020, Southeast Maricopa Region, Maricopa County and Arizona experienced a decrease in the number of children receiving AzEIP referrals and services (Exhibits 4.7). Compared to 2018, the number of children receiving referrals in the Southeast Maricopa Region in 2020 decreased by 129. In the Southeast Maricopa Region, of those who received referrals to AzEIP, only about a quarter received services. One reason why all referred children do not receive services may be because of the high eligibility threshold of having a 50% or greater delay in development.

Exhibit 4.7. 2018-2020 Children receiving AzEIP referrals and services in Maricopa County and the Southeast Maricopa Region



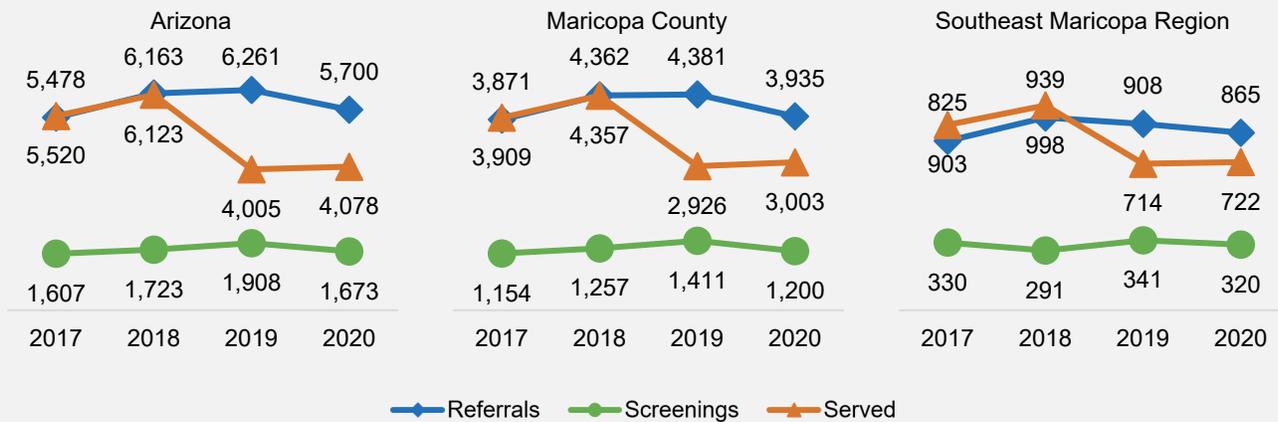
Arizona Department of Economic Security (2021). AzEIP Referred and Served Children. Provided by AZ FTF.

⁶⁹Arizona Department of Economic Security (n.d.) Eligibility for the Arizona Early Intervention Program. Retrieved from: <https://des.az.gov/services/disabilities/early-intervention/arizona-early-intervention-program-azeip-eligibility>

To qualify for Division of Developmental Disabilities (DDD) services an individual must have a cognitive disability, cerebral palsy, autism, epilepsy, or be at risk for a developmental disability. Children under the age of six are eligible if they show significant delays and a strong potential that they will have a developmental disability in one or more of these areas of development: physical, cognitive, communication, social-emotional, or self-help.

From 2017 to 2020, the patterns of children ages zero to five receiving referrals and services through the DDD were similar for Arizona, Maricopa County, and the Southeast Maricopa Region. Overall, across Arizona, Maricopa County, and the Southeast Maricopa Region, the number of referrals increased from 2017 to 2018 but had decreased by 2020 (Exhibit 4.8). In addition, the number of children receiving services peaked in 2018 across the state, county and region but sharply declined in 2019. This decline may be due to changes in agencies’ service capacity over time.

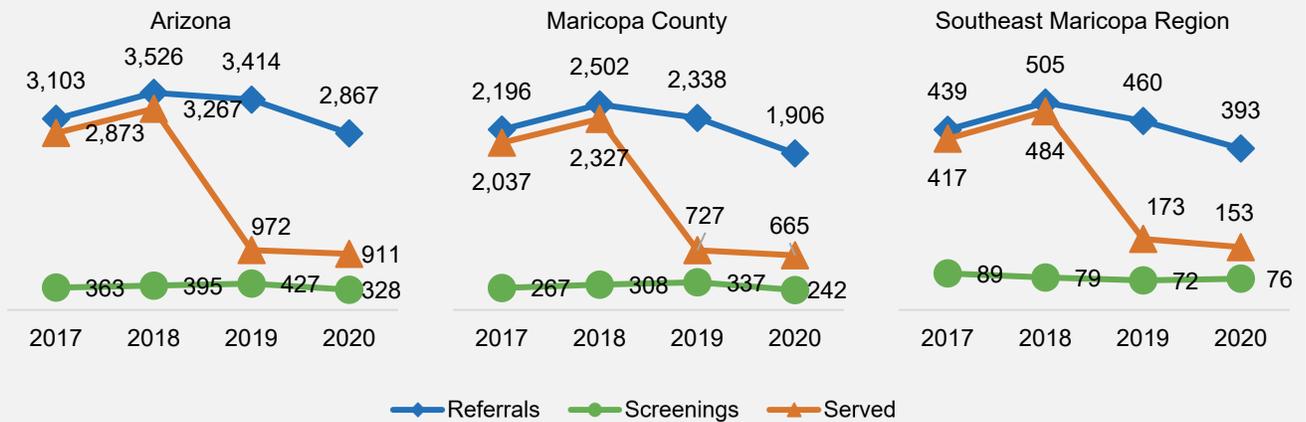
Exhibit 4.8. 2017-2020 Number of children (0-5) receiving referrals, screenings, and services from the Division of Developmental Disabilities in Arizona, Maricopa County, and Southeast Maricopa Region



Arizona Department of Economic Security (2020). Division of Developmental Disabilities. Provided by AZ FTF.

When limiting the analyses to children ages zero to two, the number of children served declined sharply in 2019 and continued to decline in 2020 (Exhibit 4.9). In the Southeast Maricopa Region, 153 children ages zero to two were served in 2020, down from a peak of 484 in 2018. This decline may also be due to changes in agencies' service capacity over time.

Exhibit 4.9. 2017-2020 Number of children (0-2) receiving referrals, screenings, and services from the Division of Developmental Disabilities in Arizona, Maricopa County, and Southeast Maricopa Region



Arizona Department of Economic Security (2020). Division of Developmental Disabilities. Provided by AZ FTF.

Special Education

In 2020, the most common types of disabilities for preschool children were developmental delay and speech/language impairment (Exhibit 4.10). Almost none of the children enrolled in any of the Southeast Maricopa Region schools had a hearing impairment. Across Southeast Maricopa, there were districts with high concentrations of preschool students with developmental delays or speech/language impairment.⁷⁰ At Chandler Unified District #80 (59%) and Gilbert Unified District (47%), more than two out of five preschool students in special education had a speech or language impairment. Half of preschool students in special education had a developmental delay at Mesa Unified (50%).

Exhibit 4.10. Types of disabilities among preschoolers in special education, 2020

	Developmental Delay	Hearing Impairment	Other	Preschool Severe Delay	Speech/Language Impairment
Southeast Maricopa Region Schools	42%	<2%	<2%	22%	35%
Chandler Unified District #80	30%	<2%	<2%	11%	59%
Gilbert Unified District	32%	<2%	<2%	20%	47%
Higley Unified School District	38%	2%	<2%	25%	34%
Mesa Unified District	50%	<2%	<2%	23%	26%
Queen Creek Unified District	38%	<2%	<2%	27%	34%
Maricopa County Schools	45%	<2%	<2%	21%	32%
All Arizona Schools	43%	<2%	<2%	20%	34%

Arizona Department of Education (2020). [Special education]. Unpublished data.

Note: The school-district data in this table include only the schools that are located within the Southeast Maricopa Region.

Note: The data presented in this table are unduplicated (i.e., children diagnosed with multiple disabilities are counted only one time in the Federal Primary Need (FPN) category)

For students in kindergarten through third grade within the region in 2020, 13% were enrolled in special education (not shown). This percentage was slightly higher than the county (11%) and state (12%) percentages. Similar to the disabilities of preschool children, the most common disabilities for students in kindergarten through third grades were developmental delay and speech/language impairment.

⁷⁰ Examples of developmental delays for preschoolers include, but not limited to, cognitive, motor, social/emotional/behavioral or speech.

EARLY LEARNING HIGHLIGHTS

About 51% of preschool-aged children in the region are enrolled in ECE programs, which is less than the 59% assumed to need child care based on their parents’ employment status. A contributing factor may be the high cost of child care. However, fewer children are becoming eligible for and receiving childcare subsidies. The most common disabilities for preschoolers are developmental delay and speech/language impairment.

Below are key findings that highlight the early learning assets, needs, and data-driven considerations for the Southeast 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. Of the children enrolled in a Quality First site, 72% are enrolled in a three, four, or five star center or home.	Support Quality First efforts in the region to increase the opportunities for children to receive quality early care and education.

Needs	Considerations
The percentage of eligible families not using DES child care subsidies has increased from 2017 (6%) to 2020 (17%).	Spread awareness about the availability of scholarships and subsidies for child care, especially for low-income families.



CHILD HEALTH

CHILD HEALTH

Why it Matters

Ensuring healthy development through early identification and treatment of children's health issues helps families understand healthy developmental pathways and how health issues affect children and their school readiness.⁷¹ There are many health factors that impact the well-being of young children and their families. Research has shown that high quality prenatal care improves maternal health and health behaviors during pregnancy and after childbirth.⁷² 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, all of which influence a baby's development. For example, maternal overweight and obesity have been associated with risks of gestational diabetes mellitus, caesarean delivery, large for gestational age, pre-eclampsia, preterm birth, and admission to special care nursery or intensive care unit.⁷³

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.⁷⁴ 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 in life. Children under the age of five are at the highest risk of contracting severe illnesses because their bodies have not built a strong immune system yet.⁷⁵ Another factor that may impact health outcomes and may be deemed less important by parents is early screening for hearing loss. According to the Center for Disease Control and Prevention (CDC), hearing loss can impact a child's ability to develop communication, language, and social skills.⁷⁶ Fortunately, early screening for hearing loss can connect children with services that can increase the likelihood of the child reaching their full potential.⁷⁷

⁷¹ *Schools & Health* (2016). *Impact of Health on Education*. Retrieved from <http://www.schoolsandhealth.org/pages/Anthropometricstatusgrowth.aspx>

⁷² Yan, J. (2016) *The effects of prenatal care utilization on maternal health and health behaviors*. *Health Economics*. Volume 26 Issue 8. Retrieved from <https://doi.org/10.1002/hec.3380>

⁷³ Yang, Z., Phung, H., Freebairn, L., Sexton, R., Raulli, A., Kelly, P. (2018) *Contribution of maternal overweight and obesity to the occurrence of adverse pregnancy outcomes*. *ANZJOG*. Volume 59 Issue 3. Retrieved from <https://doi.org/10.1111/ajo.12866>

⁷⁴ *Office on Women's Health* (2014). *Why breastfeeding is important*. Retrieved from <https://www.womenshealth.gov/breastfeeding/breastfeeding-benefits.html>

⁷⁵ *Centers for Disease Control and Prevention* (2016). *Infant Immunizations*. Retrieved from <http://www.cdc.gov/vaccines/parents/parent-questions.html>

⁷⁶ *Center for Disease Control and Prevention Division* (2020). *Hearing Loss*. Retrieved from <https://www.cdc.gov/ncbddd/hearingloss/index.html>

⁷⁷ *Though hearing loss screenings and oral health screenings is part of healthy preventative practices for children, this data was not available for the 2022 RNA report.*

This chapter provides an overview of the health indicators for this region that highlight the well-being of children under age six and their families. Healthy People 2030 (HP 2030) 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 to make informed health decisions, and measure the impact of prevention activities.⁷⁸ When appropriate, these benchmarks will be presented throughout this chapter as comparison points for local indicators.

⁷⁸ *Healthy People 2030. U.S. Department of Health and Human Services. ODPHP Office of Disease Prevention and Health Promotion. <https://health.gov/healthypeople>*

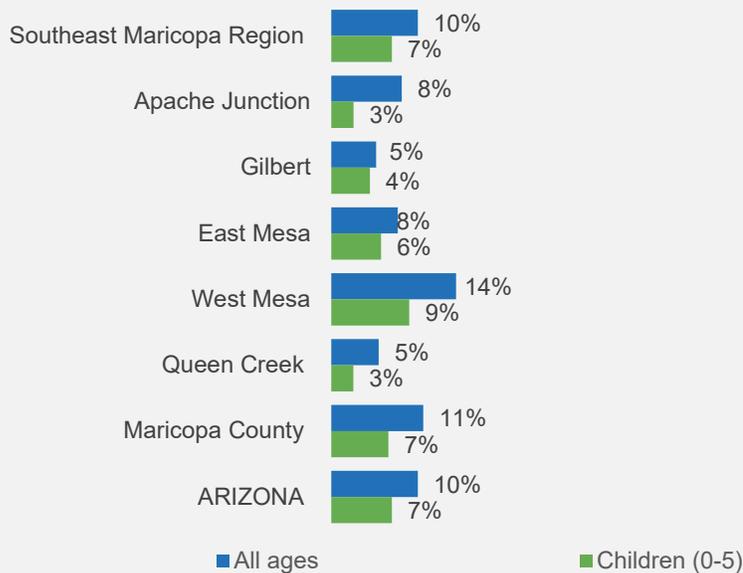
What the Data Tell Us

Access to Health Services

One indication of people’s access to health services is whether they have health insurance coverage that helps make health care affordable. When children lack health insurance, they are at risk of poor health outcomes and long-term complications if their families avoid or delay medical care because of cost. The HP 2030 target is for 92.1% of Americans to have medical insurance by 2030.⁷⁹ In 2019, 90% of the population in Southeast Maricopa Region had health insurance, which is only 2.1 percentage points below the HP 2030 goal.

In 2019, seven percent of children under age six in the Southeast Maricopa Region did not have any health insurance (Exhibit 5.1). The highest proportion of children without health insurance was in the West Mesa sub-region (9%), while the Queen Creek (3%) and Apache Junction (3%) sub-regions had the lowest proportions of those without health insurance. When children lack health insurance, their families may delay or avoid seeking needed health care due to inability to pay.

Exhibit 5.1. Estimated percentage without health insurance

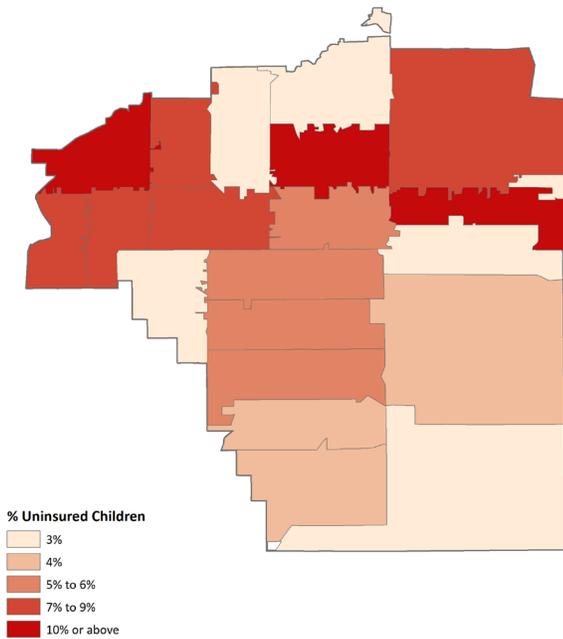


U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B27001

⁷⁹ Healthy People 2030. About Health People. Retrieved from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality/increase-proportion-people-health-insurance-ahs-01>

Exhibit 5.2 shows the percentage of children (0-5) without health insurance by zip code in the Southeast Maricopa Region. There are areas within the region with a higher proportion of children without health insurance. Ten percent or more of young children do not have health insurance in the northern area of the Southeast Maricopa Region (i.e., zip codes of 85208 within East Mesa sub-region, 85205 and 85201 within the West Mesa sub-region).

Exhibit 5.2. Percentage of children (0-5) without health insurance by zip code



Hospitalizations

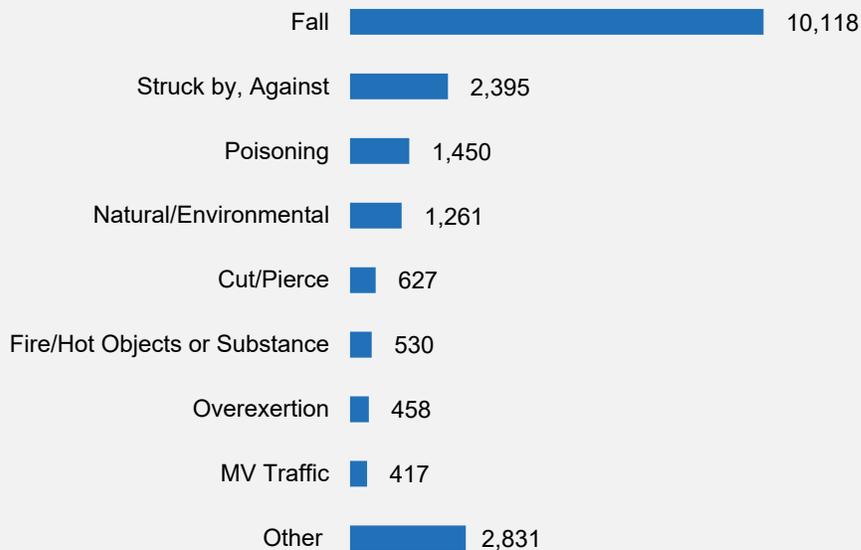
In the Southeast Maricopa Region, there were 321 non-fatal inpatient hospitalizations and 20,087 non-fatal emergency department visits for children from 2016-2020 (Exhibit 5.3). Among children zero to four years old, the most common reasons for non-fatal emergency department visits were for falling, being struck or against an object, or poisoning (Exhibit 5.4). In addition, children that had non-fatal emergency department visits or emergency department visits were most likely to identify as male (56% and white (59%, not shown). Accidents experienced by young children emphasize the importance of health insurance coverage for families, as early care can prevent long term or more severe health complications later in life. Infant and child mortality rates can be a good indicator of a population’s health status and level of care; Maricopa County has infant and child mortality rates of 5.3 and 61.6 respectively, which is lower than the rates in Arizona overall (not shown).

Exhibit 5.3. Injury hospitalizations and ED visits for children 0-4, ADHS (2016-2020)

Indicator	Arizona	Maricopa County	Southeast Maricopa Region
Number of Non-Fatal Hospitalizations	2,890	1,790	321
Number of ED Visits	181,035	116,180	20,087

Arizona Department of Health Services (July 2020). *Unintentional Injuries in Children 0-5, Arizona 2016-2020. Provided AZFTF*

Exhibit 5.4. Non-fatal emergency department visits by type of injury for children under six years old in the Southeast Maricopa Region.



Arizona Department of Health Services (July 2020). *Unintentional Injuries in Children 0-5, Arizona 2016-2020. Provided AZFTF*

*Other includes transportation, unknown, pedestrian, machinery, or drowning.

From 2018 to 2019 in the Southeast Maricopa Region, the total number of child deaths among children 0 to 17 years old decreased from 94 to 87 (Exhibit 5.5). More than half of these deaths across both years occurred among young children 0 to 4 years old. In Arizona, the most common causes of child death include accidents, congenital malformations, premature birth, and low birth weight.

Exhibit 5.5. 2018-2019 total number of deaths for children 0-17 in Southeast Maricopa Region



Arizona Department of Health Services (July 2020). Child mortality, Arizona 2018-2019. Provided AZFTF

From 2016 to 2020 in the Southeast Maricopa Region, children ages 0 to 14 with asthma experienced a total of 711 inpatient hospitalizations (Exhibit 5.6) and 4,331 emergency visits (not shown). By sub-region, West Mesa had the most inpatient hospitalizations with 416 visits and Apache Junction had the least with fewer than six (Exhibit 5.7). Throughout the Southeast Maricopa Region, 38% of child inpatient hospitalizations were among children 0 to 4 years old with a high of 61% in the Queen Creek sub-region.

Exhibit 5.6. Inpatient hospitalizations for asthma for children 0-14 compared to children 0-4 (2016-2020)

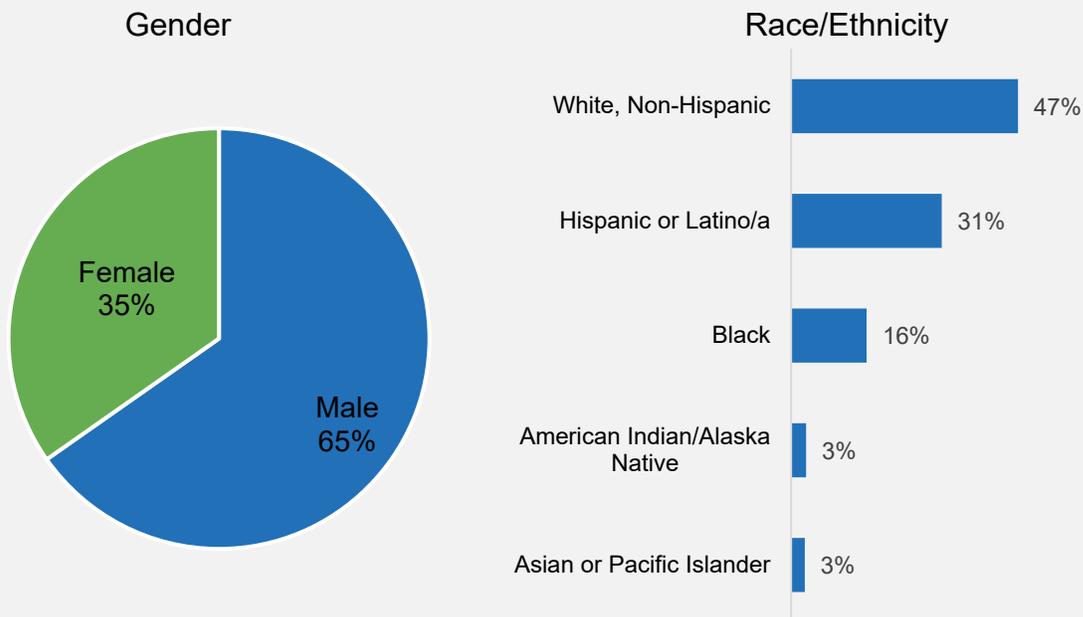
	#Inpatient hospitalization of children 0-4	#Inpatient hospitalization of children 0-14	Percent of children inpatient hospitalization that were 0-4
Southeast Maricopa Region	267	711	38%
Apache Junction (SE Maricopa portion)	*	*	*
Gilbert	70	169	41%
East Mesa	27	87	31%
West Mesa	147	416	35%
Queen Creek (SE Maricopa portion)	23	38	61%
Maricopa County	1,339	3,700	36%
ARIZONA	2,214	5,672	39%

Arizona Department of Health Services (July 2020). Asthma, Arizona 2016-2020. Provided AZFTF

*cell suppressed due to small size (less than 6)

Children 0 to 14 that were hospitalized for asthma were most likely to identify as male (65%) and white, non-Hispanic (47%) or Hispanic or Latino/a (31%, Exhibit 5.6). Children that identified as Hispanic or Latino/a or Black were overrepresented in asthma hospitalization compared to their proportions in the region’s overall populations.

Exhibit 5.7. Inpatient hospitalizations for asthma for children 0-14 by race/ethnicity and gender in Southeast Maricopa Region (2016-2020)



Arizona Department of Health Services (July 2020). Asthma, Arizona 2016-2020. Provided AZFTF

From 2016 to 2020, there were a total of ten inpatient hospitalizations and 87 emergency visits for diabetes among children 0 to 17 years old in the Southeast Maricopa Region (Exhibit 5.8). The Southeast Maricopa Region accounted for 14% of the inpatient hospitalizations and 14% of the emergency room visits related to diabetes in Maricopa County. The average length of stay for hospitalization due to diabetes in the Southeast Maricopa Region was 1.6 days, which is lower than the averages for Maricopa County (3.2 days) and Arizona (3.0 days).

Exhibit 5.8. Inpatient hospitalizations for diabetes for children 0-17 (2016-2020)

	#Inpatient hospitalizations	Average length of stay (days) for hospitalization	#Emergency room visits
Southeast Maricopa Region	10	1.6	87
Maricopa County	72	3.2	618
ARIZONA	150	3.0	1,002

Arizona Department of Health Services (July 2020). Asthma, Arizona 2016-2020. Provided AZFTF

Prenatal Care

Research suggests that a lack of prenatal care is associated with many negative health issues for both the parent and the child.⁸⁰ Research also shows that children of people 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 people who did receive prenatal care.⁸¹ In addition, studies show that women who are at the highest risk of not receiving prenatal care are parents younger than 19 years old and single parents.^{82, 83} Educational attainment has also been associated with people receiving prenatal care, such that the more education a parent has, the more likely they are to seek prenatal care.⁸⁴ It is important that people seek and receive prenatal care at an early stage in their pregnancy so health professionals can treat and prevent health issues that may occur.⁸⁵

HP 2030 aims to bring the proportion of pregnant people who receive early and adequate prenatal care to 80.5%.⁸⁶ In 2019, in the Southeast Maricopa Region, the percentage of people who began prenatal care in the first trimester was 72%, which is about nine percentage points lower than the HP goal but higher than the state proportion (69%, Exhibit 5.9). In 2019, only two percent of women did not receive prenatal care which is lower than the proportion in the state (3%) and the same as the county (2%, Exhibit 5.10).

⁸⁰ *Prenatal Care Effects Felt Long After Birth. (n.d.)*. Retrieved from <http://toosmall.org/blog/prenatal-care-effects-felt-long-after-birth>

⁸¹ *Womens Health (n.d.)*. Prenatal care fact sheet. Retrieved from <https://www.womenshealth.gov/publications/our-publications/fact-sheet/prenatal-care.html#b>

⁸² *Center for Disease Control and Prevention (n.d.)*. Vital Statistics Online. Retrieved from http://www.cdc.gov/nchs/data_access/vitalstatsonline.htm

⁸³ *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/*

⁸⁴ *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=zIFPAQAIAAJ&pg=RA2-PA19&lpg=RA2PA19&dq=lack+of+prenatal+care+linked+with+mothers+educational+attainment&source=bl&ots=ilqp_JVnA&sig=SQBGbmlhOG9JNrgFLEjMOVkt90&hl=en&sa=X&ved=0ahUKEwjM6vH_6vPAhWCjlQKHWRjCwkQ6AEIVDAH#v=onepage&q&f=false

⁸⁵ *Womens Health (n.d.)*. Prenatal care fact sheet. Retrieved from <https://www.womenshealth.gov/publications/our-publications/fact-sheet/prenatal-care.html#b>

⁸⁶ *Healthy People 2030. About Health People Retrieved from https://health.gov/healthypeople/objectives-and-data/browse-objectives/pregnancy-and-childbirth/increase-proportion-pregnant-women-who-receive-early-and-adequate-prenatal-care-mich-08*

Exhibit 5.9. Percentage of women starting prenatal care in the first trimester

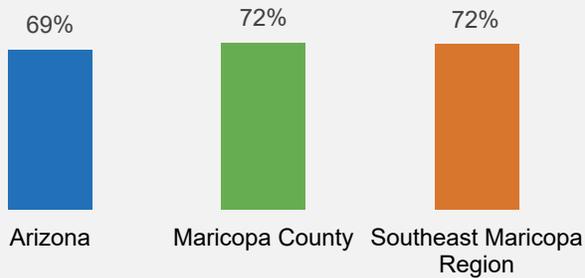


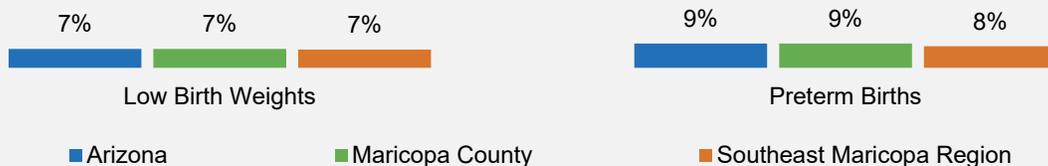
Exhibit 5.10. Percentage of women who did not receive prenatal care



Arizona Department of Health Services (2019). Vital Statistics. Provided by AZ FTF

In 2019, 10,271 births took place in the Southeast Maricopa Region, which comprised about 13% of the total births in Arizona.⁸⁷ Across the Southeast Maricopa Region, Maricopa County and Arizona, the percentage of low birth weight children was seven percent and preterm births was between eight and nine percent in 2019 (Exhibit 5.11). Additional pregnancy- and birth-related statistics show that six percent of newborns were admitted to the intensive care unit and four percent of people used tobacco during pregnancy in the Southeast Maricopa Region in 2019 (not shown).

Exhibit 5.11. Percentage of births with Low Birth Weights (<2,500 g) and Preterm Births (<37 weeks) in 2019



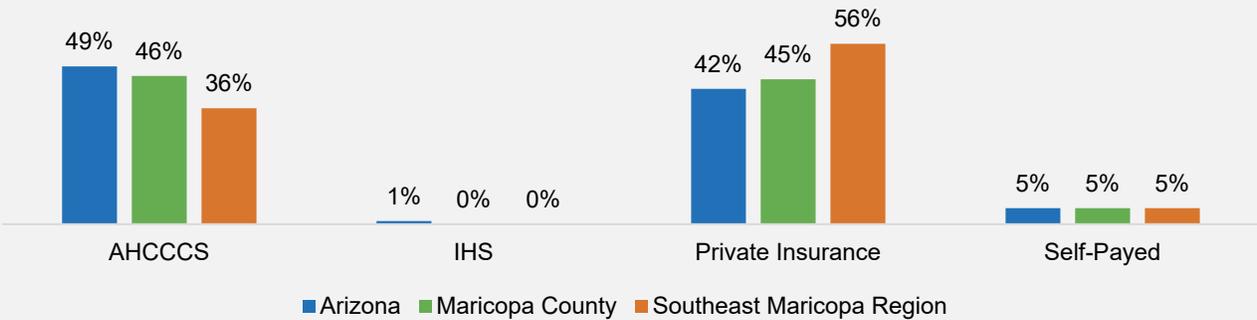
Arizona Department of Health Services (2019). Vital Statistics. Provided by AZ FTF.

⁸⁷ Arizona Department of Health Services (2021). Vital Statistics. Provided by AZ FTF.

Additional factors that place people at-risk of not receiving prenatal care include teen pregnancy, single parenting, and people with lower educational attainment. In the Southeast Maricopa Region, teen pregnancy comprised of three percent of those who gave birth in 2019, which was lower than the percentage in Arizona (6%, not shown). As previously reported in the Educational Indicators chapter, in 2019, 90% of those who gave birth in the region in 2019 had a high school education or more (Exhibit 3.14).

In terms of payers of births in Southeast Maricopa Region, many of those who gave birth were covered through insurance such as private insurance (56%) or Arizona Health Care Cost Containment System (AHCCCS, 36%). The proportion of those covered through private insurance within the Southeast Maricopa Region was higher than the proportion in Arizona (42%) and Maricopa County (45%). About five percent of births were self-paid in the Southeast Maricopa Region, which is the same as the proportions in Maricopa County and Arizona (Exhibit 5.12).

Exhibit 5.12. Percentages for payers of births in 2019



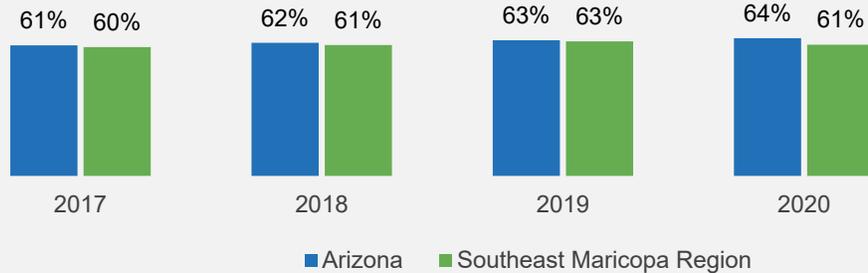
Arizona Department of Health Services (2019). Vital Statistics. Provided by AZ FTF.

Obesity

Obesity has been a concern in the US due to associated health outcomes, such as higher risks of diabetes, cancer, and heart disease.⁸⁸ Diabetes has also been associated with many negative health complications such as blindness, kidney failure, and amputation of limbs.⁸⁹

In the Southeast Maricopa Region and the state as a whole, over 60% of people participating in WIC reported being overweight or obese pre-pregnancy in 2020 (Exhibit 5.13). The rate of people being overweight or obese pre-pregnancy has remained fairly consistent in the region between 2017 and 2020. Families participating in WIC are likely limited to less expensive food options which often tend to be less healthy as well.

Exhibit 5.13. Percentage of mothers overweight and obese pre-pregnancy



Arizona Department of Health Services (2020). Women, Infants & Children (WIC). Provided by AZ FTF.

⁸⁸ Center for Disease Control and Prevention. (n.d.). Adult Obesity Facts. Retrieved from <https://www.cdc.gov/obesity/data/adult.html>

⁸⁹ 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>

In the Southeast Maricopa Region, the percentage of children ages two to five participating in WIC that were obese or overweight was 33% in 2020. This proportion was the same as Maricopa County (33%) and slightly higher than Arizona (32%). Across the region, state and county, about six of ten children are considered to be normal weight (Exhibit 5.14). The proportion of children ages two to five in WIC with obesity increased from 30% in 2017 to 34% in 2020 (Exhibit 5.15). This pattern is similar throughout the county and state as it suggests a growing need for better access to healthy food and active living opportunities for young children.

Exhibit 5.14. WIC children's weight status (ages 2 to 5), 2020



Arizona Department of Health Services (2020). Women, Infants & Children (WIC). Provided by AZ FTF.

Exhibit 5.15. WIC children's overweight and obesity rates (ages 2 to 5), 2017 to 2020

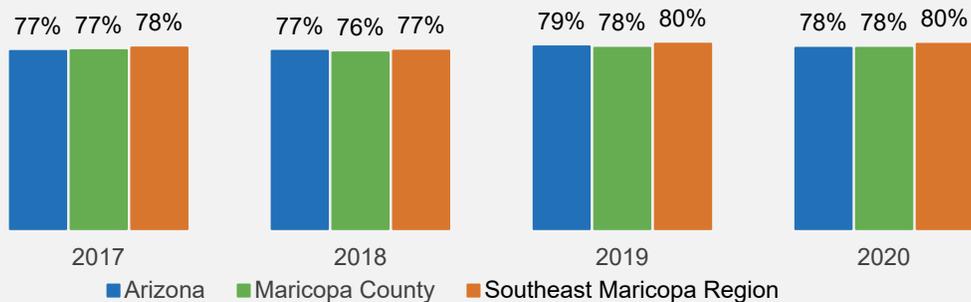
	Childhood rate, 2017	Childhood rate, 2018	Childhood rate, 2019	Childhood rate, 2020	Percentage change from 2017 to 2020
Southeast Maricopa Region	30%	31%	31%	34%	+4%
Maricopa County	30%	31%	31%	33%	+3%
ARIZONA	30%	30%	31%	32%	+2%

Arizona Department of Health Services (2020). Women, Infants & Children (WIC). Provided by AZ FTF.

Engaging in Healthy Preventive Practices

The American Academy of Pediatrics recommends that people breastfeed for the first six months after giving birth.⁹⁰ Breast milk has antibodies that prevent babies from getting ill and it has been shown to decrease the likelihood of babies becoming obese.⁹¹ In the Southeast Maricopa Region, the percentage of people participating in WIC who ever breastfed their infant on average at least once per day increased from 2017 to 2020 by two percentage points (78% to 80%). In 2020, this percentage was two percent higher than the state percentage (Exhibit 5.16).

Exhibit 5.16. Percentage of people who ever breastfeed their infant



Arizona Department of Health Services (2020). Women, Infants & Children (WIC). Provided by AZ FTF

⁹⁰ 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>

⁹¹ Office on Women's Health (2014). *Why breastfeeding is important*. Retrieved from <https://www.womenshealth.gov/breastfeeding/breastfeeding-benefits.html>

Routine childhood vaccinations protect children from many illnesses, including measles, mumps, polio, and whooping cough, which are all severe and potentially fatal to young children.⁹² Receiving timely vaccinations not only protects the child who receives them, but protects the community by reducing the likelihood of disease spread.⁹³ In the Southeast Maricopa Region in 2020, the percentage of children in child care who were exempt from immunizations for religious reasons was slightly higher than the corresponding percentage statewide (Exhibit 5.17). Compared to the state, the region has a slightly lower percentage of children who received Hib, DTaP, MMR, Hep B, Polio, and Varicella vaccines (Exhibits 5.17 and 5.18).

Exhibit 5.17. Vaccination rates and exemption rates for children in childcare

	Students enrolled	Four or more DTAP	Three or more Polio	Two or more MMR	Three or more Hib	Two Hep A	Three or more Hep B	One or more Varicella	Religious exemption	Medical exemption
Southeast Maricopa Region	11,091	91%	92%	92%	91%	86%	90%	91%	6%	0.4%
Maricopa County	57,253	91%	92%	92%	93%	87%	92%	92%	6%	0.5%
ARIZONA	85,805	92%	93%	93%	93%	85%	92%	93%	5%	0.4%

Arizona Department of Health Services (2020). Immunization Data Reports. Provided by AZ FTF.

Exhibit 5.18. Vaccination rates and exemption rates for children in kindergarten

	Students enrolled	Four or more DTAP	DTAP Exempt	Three or more Polio	Polio Exempt	Two or more MMR	MMR Exempt	Three or more Hep B	Hep B Exempt	One or more Varicella	Varicella Exempt
Southeast Maricopa Region	11,923	91%	7%	91%	7%	91%	7%	93%	6%	94%	5%
Maricopa County	54,687	93%	5%	93%	5%	93%	5%	94%	5%	95%	4%
ARIZONA	330,412	93%	5%	94%	5%	93%	5%	95%	4%	96%	4%

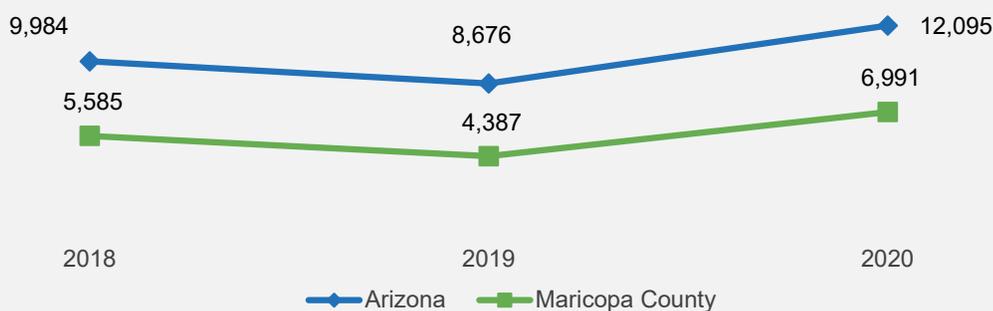
Arizona Department of Health Services (2020). Immunization Data Reports. Provided by AZ FTF.

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

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

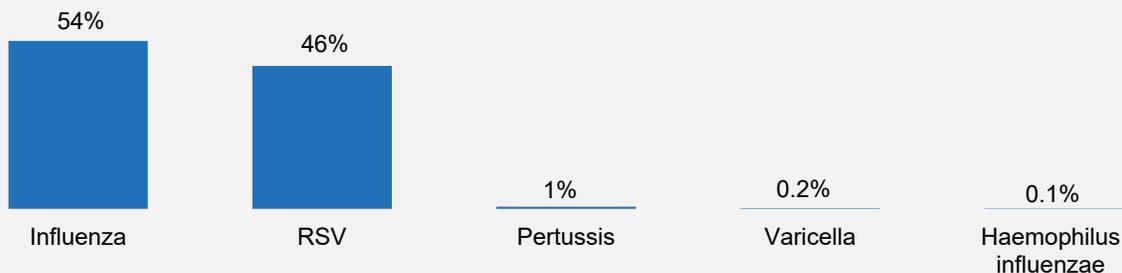
The number of infectious disease cases per year for children less than five years of age in Maricopa County increased from 5,585 cases in 2018 to 6,991 cases in 2020 (Exhibit 5.19). Like Maricopa County, Arizona experienced an increase of infectious diseases from 2018 to 2020. As seen in Exhibit 5.20, the most common infectious diseases in young children in Maricopa County in 2020 were influenza (3,741 cases; 54%) and respiratory syncytial virus (3,183 cases; 46%). Though influenza cases can be reduced by the flu shot, influenzas cause the most hospitalizations for young children amongst vaccine-preventable diseases.⁹⁴

Exhibit 5.19. Number of cases of infectious diseases per year for children (0-4) from 2018 to 2020 in Maricopa County and Arizona*



Arizona Department of Health Services (2019). *Infectious Diseases*. Provided by AZ FTF.
 *Data was not available at the regional level.

Exhibit 5.20. Percentage of occurrence of infectious diseases for children (0-4) in 2020 in Maricopa County*



Arizona Department of Health Services (2019). *Infectious Diseases*. Provided by AZ FTF.
 *Data was not available at the regional level.

⁹⁴ Centers for Disease Control and Prevention (n.d.) *Information for Schools & Childcare Providers*. Retrieved from: <https://www.cdc.gov/flu/school/index.htm#:~:text=Influenza%20causes%20more%20hospitalizations%20among,seasonal%20influenza%20vaccine%20each%20year>

CHILD HEALTH HIGHLIGHTS

The Southeast Maricopa Region has both assets and challenges for supporting the health of pregnant women, young children, and their families. The percentage of children and the entire population without health insurance is similar to the state, indicating a relatively high access to healthcare in the region, though variable by area. Additionally, most women are receiving prenatal care and a high percentage are breastfeeding. However, the region, similar to the state and county, has an increase of children that are obese or overweight over the years.

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 people participating in WIC who ever breastfeed their infant has been increasing and reached 80% by 2019.	Continue to provide public education about the benefits of breastfeeding and consider supporting workplace efforts to encourage breastfeeding practices for working parents.
According to the Arizona Department of Health Services, almost all pregnant people (98%) are receiving some prenatal care.	Promote the importance of early prenatal care and provide education on the impact of prenatal care on the parent and child's future well-being.

Needs	Considerations
The percentage of children (ages 2 to 5) that participate in WIC that are obese or overweight has increased from 30% in 2017 to 34% in 2020.	Address root causes of obesity in low-income communities by pursuing improved neighborhood safety, opportunities for outdoor activity, and better access to low-cost healthy food options. Seek ideas from and partnership with community members to create culturally meaningful, lasting change.
Across all vaccinations, the percentage of kindergartners exempt from receiving immunizations is higher than the state and county.	Coordinate with agencies that work with immunization efforts to do outreach and education regarding the importance of immunizations. Explore further to understand why parents are exempting their children from receiving vaccinations.



FAMILY SUPPORT

FAMILY SUPPORT

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.⁹⁵ 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 for parents to receive support and access to programs that provide tools and knowledge about their child’s needs and effective parenting techniques. Providing more knowledge about parenting and child development supports parents in improving their parenting practices and providing their children with the experiences they need to succeed in kindergarten and beyond.⁹⁶ Public assistance programs in the United States can play an important role in providing adequate socioeconomic conditions for families to raise their children. The Supplemental Nutrition Assistance Program (SNAP) has been associated with helping families move out of poverty, guarantee food security, and improve child health and school performance.⁹⁷ Research has also shown that the Temporary Assistance to Needy Families (TANF) could prevent child maltreatment due to increased cash benefits and access that have been associated with decreased physical abuse.⁹⁸ The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) has reduced the prevalence of child food insecurity. Further, the revisions made to the WIC food package in October 2009 have been associated with reduced maternal preeclampsia and gestational weight gain, as well as improvements in infant gestational age and birth weight.^{99, 100}

⁹⁵ 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

⁹⁶ *Ibid.*

⁹⁷ Carlson, S., Rosenbaum, D., Keith-Jennings, B., Nchako, C. (2016) *SNAP works for America’s Children*. Center on Budget and Policy Priorities. Retrieved from <https://www.cbpp.org/sites/default/files/atoms/files/9-29-16fa.pdf>

⁹⁸ Spencer, R., Livingston, M., Komro, K., Sroczynski, N., Rentmeester, S., Woods-Jaeger, B. (2021) *Association between Temporary Assistance for Needy Families (TANF) and child maltreatment among a cohort of fragile families*. *Child Abuse & Neglect*. Volume 120. Retrieved from <https://doi.org/10.1016/j.chiabu.2021.105186>

⁹⁹ Kreider, B., Pepper, J., Roy, M. (2016) *Identifying the effects of WIC on food insecurity among infants and children*. *Southern Economic Association*. Volume 82 Issue 4. Retrieved from <https://doi.org/10.1002/soej.12078>

¹⁰⁰ Hamad, R., Collin, D., Baer, R., Jelliffe-Pawlowski, L. (2019) *Association of revised WIC food package with perinatal and birth outcomes*. Retrieved from <https://jamanetwork.com/journals/jamapediatrics/article-abstract/2737097>

Promoting a safe home environment for children is another key aspect of family support. The adverse and long-term effects of childhood trauma have become well-documented. For example, children who are exposed to domestic violence or experience abuse or neglect are at increased risk of depression, anxiety, physical aggression, and behavior problems.¹⁰¹ Children who are exposed to opioid misuse are more likely to experience mental health problems, drug use, accidental opioid poisoning, substance use disorder, family dissolution, foster care placement or the death of a parent due to an opioid overdose.¹⁰² Children in foster care are particularly likely to have had trauma exposure and are more likely than other children to have poor mental and physical health.^{103, 104} Understanding the impact of trauma has led to identifying opportunities to both prevent and mitigate its adverse effects. Opportunities include family support services like home visitation and parent education, as well as prioritizing out-of-home placements with family members or foster families before turning to congregate care in a residential facility.

¹⁰¹ 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.

¹⁰² Winstanley, E., Stover, A. (2019) *The impact of the opioid epidemic on children and adolescents. Clinical Therapeutics. Volume 41 Issue 9.* Retrieved from <https://doi.org/10.1016/j.clinthera.2019.06.003>

¹⁰³ Dorsey, S., Burns, B., Southerland, D., Cox, J., Wagner, H., Farmer, E. (2012) *Prior Trauma Exposure for Youth in Treatment Foster Care. J Child Fam Stud.* Retrieved from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3667554/>

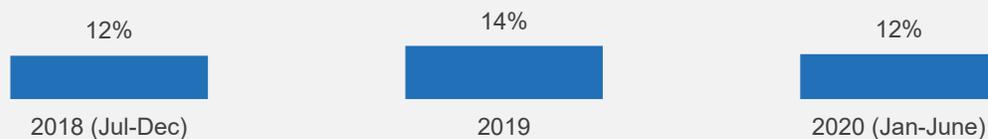
¹⁰⁴ Turney K, Wildeman C. (2016) *Mental and Physical Health of Children in Foster Care. Pediatrics.* Retrieved from: <https://pubmed.ncbi.nlm.nih.gov/27940775/>

What the Data Tell Us

Child Safety and Domestic Violence

Understanding the scope of child removals in a region can help policy makers and organizations better support this vulnerable group. The percentage of child removals in Southeast Maricopa Region by the Department of Child Safety (DCS) remained fairly steady from 2018 to 2020 (Exhibit 6.1). These percentages represent the percentage of removed children in Arizona that were removed in Southeast Maricopa Region.

Exhibit 6.1. Percentage of children removed in Arizona by the Department of Child Safety that resided in Southeast Maricopa Region



Source: Arizona Department of Child Safety. (2019). *Semi-Annual Child Welfare Report*.

Substance Use

In 2017, the U.S. Department of Health and Human Services declared a public health emergency to address the national opioid crisis.¹⁰⁵ While substance abuse is risky for users themselves, parents who misuse substances also expose their children to risks. Specifically, when parents use opiates or opioids, they are more likely to expose their children to maltreatment and neglect.¹⁰⁶ Children in these situations are more likely to suffer later mental health disorders, their own substance abuse, and post-traumatic stress disorder.¹⁰⁷

From 2017 to 2020, 413 fatal opioid deaths occurred in the Southeast Maricopa Region totaling eight percent of opioid-related deaths in Arizona (Exhibit 6.2).

Exhibit 6.2. Number of fatal overdoses from opiates or opioids from 2017 to 2020 in Southeast Maricopa Region, Maricopa County and Arizona



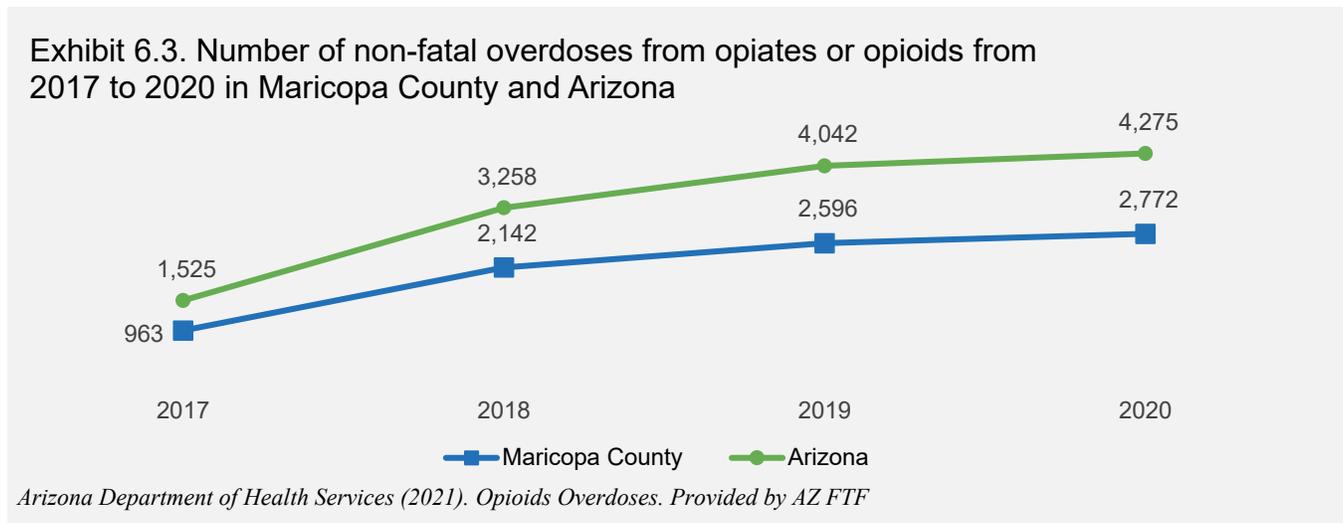
Arizona Department of Health Services (2021). *Opioids Overdoses*. Provided by AZ FTF

¹⁰⁵ U.S. Department of Health and Human Services (2017) *HHS Acting Secretary Declares Public Health Emergency to Address National Opioid Crisis*. Retrieved from <https://public3.pagefreezer.com/browse/HHS.gov/31-12-2020T08:51/https://www.hhs.gov/about/news/2017/10/26/hhs-acting-secretary-declares-public-health-emergency-address-national-opioid-crisis.html>

¹⁰⁶ *Child Welfare Information Gateway* (n.d.) *The Opioid Crisis*. Retrieved from <https://www.childwelfare.gov/topics/systemwide/bhw/impact-substance/opioid-crisis/>

¹⁰⁷ *American Society for the Positive Care of Children* (n.d.) *The Opioid Crisis and the Effect on Children*. Retrieved from <https://americanspcc.org/the-opioid-crisis-and-the-effect-on-children/>

In both Maricopa County and Arizona, the number of non-fatal overdoses from opiates or opioids more than doubled from 2017 to 2020 (Exhibit 6.3). In Maricopa County, the number of non-fatal overdoses drastically increased by 187% from 963 in 2017 to 2,772 in 2020. This trend was similar in Arizona with a 180% increase of non-fatal overdoses from 2017 to 2020.



Services to Help Families

Numerous federal and local programs and services aim to provide families with food security, including the Supplemental Nutrition Assistance Program (SNAP); Temporary Assistance for Needy Families (TANF); Women, Infants & Children (WIC); National School Lunch Program (NSLP); Child and Adult Care Food Program (CACFP); Summer Food Program (SFP); and free and reduced priced lunch programs for children in schools.

Despite the prevalence of these programs, the number of children and families receiving assistance in recent years has decreased. Federal programs such as SNAP and TANF shrank from 2017 to 2020 despite widespread job loss and an increasing number of families living in poverty during the COVID-19 pandemic.¹⁰⁸ Exhibits 6.4 and 6.6 show how the number of children and families receiving assistance has decreased in recent years.

For SNAP benefits, the percentage of families and children who received benefits decreased by 25% in Southeast Maricopa Region from 2017 to 2020. As of 2020, the program supported approximately 16,000 children and 11,000 families annually in the Southeast Maricopa Region (Exhibits 6.4 and 6.6). In 2020, most young children enrolled in SNAP were white (72%), about a third were Hispanic/Latino (34%), and almost one of five were African American (17%; Exhibit 6.5).¹⁰⁹

¹⁰⁸ Center on Budget and Policy Priorities (n.d.) *Tracking the COVID-19 Economy's Effects on Food, Housing, and Employment Hardships*. Retrieved from <https://www.cbpp.org/research/poverty-and-inequality/tracking-the-covid-19-economy-effects-on-food-housing-and>

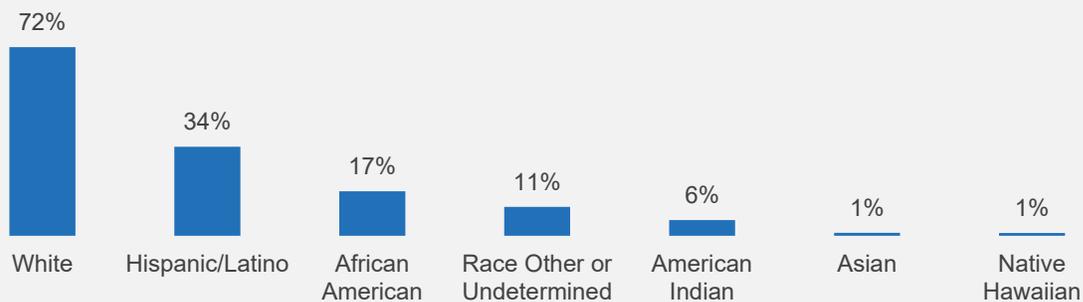
¹⁰⁹ Respondents were allowed to select more than one response; thus, the total is more than 100%.

Exhibit 6.4. Numbers of young children (ages 0 to 5) receiving SNAP benefits, 2017 to 2020

	FY 2017	F7 2018	FY 2019	FY 2020	Change from 2017 to 2020
Southeast Maricopa Region	22,025	19,829	17,551	16,321	-25%
Maricopa County	142,724	131,473	120,427	113,174	-21%
ARIZONA	247,414	229,275	211,814	198,961	-20%

Arizona Department of Economic Security (2020). Supplemental Nutrition Assistance Program (SNAP).

Exhibit 6.5. Young children (0-5) enrolled in SNAP in 2020 by race/ethnicity in Southeast Maricopa Region



Arizona Department of Economic Security (2020). Supplemental Nutrition Assistance Program (SNAP).

Exhibit 6.6. Numbers of families receiving SNAP benefits, 2017 to 2020

	FY 2017	F7 2018	FY 2019	FY 2020	Change from 2017 to 2020
Southeast Maricopa Region	14,476	13,057	11,590	10,875	-25%
Maricopa County	93,992	86,352	78,980	74,572	-21%
ARIZONA	164,092	151,816	140,056	132,466	-19%

Arizona Department of Economic Security (2020). Supplemental Nutrition Assistance Program (SNAP).

Similar to SNAP benefits, the number of children and families receiving TANF benefits decreased from 2017 to 2020 in Southeast Maricopa, Maricopa County and Arizona (Exhibits 6.7 and 6.8). In 2020, approximately 660 families and 900 young children received TANF benefits. TANF benefits can be the primary cash assistance program for families with low incomes.¹¹⁰ Some research has raised a criticism that TANF does a poor job in providing enough assistance to Hispanic/Latino and African American families, especially those most impacted by the COVID-19 pandemic.¹¹¹ In the Southeast Maricopa Region, in 2020, most of

¹¹⁰ U.S. Department of Health & Human Services (n.d.) Office of Family Assistance. Temporary Assistance for Needy Families (TANF). Retrieved from: <https://www.acf.hhs.gov/ofa/programs/temporary-assistance-needy-families-tanf>

¹¹¹ Safawi, A., Reyes, C., (2021) States must continue recent momentum to further improve TANF benefit levels. Center on Budget and Policy Priorities. Retrieved from <https://www.cbpp.org/research/family-income-support/tanf-benefits-still-too-low-to-help-families-especially-black>

the children that received TANF benefits identified as white (69%), while 27% were Hispanic/Latino and 22% were African American (Exhibit 6.9).¹¹²

Exhibit 6.7. Numbers of families receiving TANF benefits, 2017 to 2020

	FY 2017	F7 2018	FY 2019	FY 2020	Change from 2017 to 2020
Southeast Maricopa Region	901	727	626	658	-27%
Maricopa County	6,873	5,745	5,063	5,300	-23%
ARIZONA	12,315	10,538	9,360	9,947	-19%

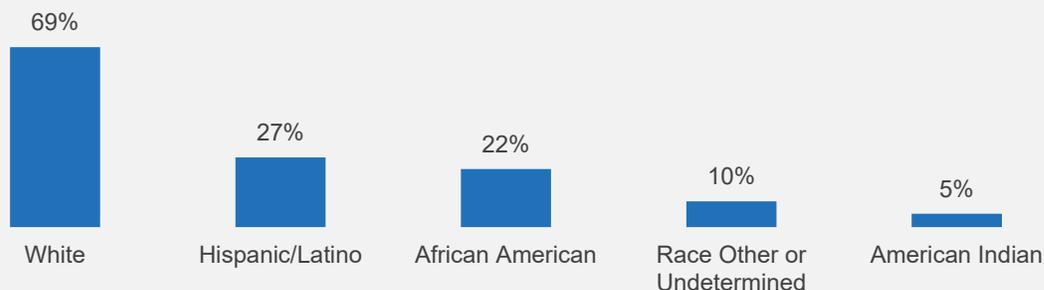
Arizona Department of Economic Security (2020). Temporary Assistance for Needy Families (TANF).

Exhibit 6.8. Numbers of young children (ages 0 to 5) receiving TANF benefits, 2017 to 2020

	FY 2017	F7 2018	FY 2019	FY 2020	Change from 2017 to 2020
Southeast Maricopa Region	1,255	1,002	830	906	-28%
Maricopa County	9,696	8,017	7,103	7,452	-23%
ARIZONA	17,143	14,659	13,029	13,747	-20%

Arizona Department of Economic Security (2020). Temporary Assistance for Needy Families (TANF).

Exhibit 6.9. Young children (0-5) enrolled in TANF in 2020 by race/ethnicity in Southeast Maricopa Region



Arizona Department of Economic Security (2020). Temporary Assistance for Needy Families (TANF).

Due to mandatory pandemic-related school closures in 2020, the Arizona Department of Economic Security, the US Department of Agriculture Food and Nutrition Service, and the Arizona Department of Education issued Pandemic Electronic Benefit Transfer (P-EBT) benefits to SNAP households and non-SNAP households with children eligible for free and reduced-price school meals.¹¹³ Enrolled families were given a pre-loaded EBT card to purchase groceries. The number of families with children 0 to 5 years old that were enrolled in P-EBT from March 2021 to May 2021 decreased by about 18% to 21% across the Southeast Maricopa Region, Maricopa County and Arizona. Although the number of enrolled families decreased in May 2021, P-EBT was able to provide financial relief to 2,408 families with young

¹¹² Respondents were allowed to select more than one response; thus, the total is more than 100%.

¹¹³ Arizona Department of Economic Security (n.d.) Arizona P-EBT Benefits. Retrieved from <https://des.az.gov/services/basic-needs/food-assistance/other-food-programs/arizona-p-ebt-benefits>

children in the Southeast Maricopa Region (Exhibit 6.10). Families with young children accounted for six to eight percent of the families enrolled in P-EBT from March to May 2021.

Exhibit 6.10. Number of families with children 0-5 enrolled in P-EBT, March 2021 to May 2021

	March 2021	April 2021	May 2021	Change from March 2021 to May 2021
Southeast Maricopa Region	3,038	2,707	2,408	-21%
Maricopa County	23,577	21,438	19,422	-18%
Arizona	36,971	33,431	30,066	-19%

Arizona Department of Economic Security (2021). EBT Enrollment.

Through federal grants, WIC provides nutrition, education and breastfeeding support services, supplemental nutritious foods and referrals to health and social services for women, infants, and children under five years old. In 2020 in the Southeast Maricopa Region, WIC served a total of 23,419 women (n=5,575), infants (n=6,300), and children (n=11,544, Exhibit 6.11). Within the Southeast Maricopa Region, many of the WIC enrollees resided in West Mesa, East Mesa or Gilbert (Exhibit 6.11).

Exhibit 6.11. Number of Women, Infants and Children enrolled in the WIC program during 2020

	Total	Women	Infants	Children
Southeast Maricopa Region	23,419	5,575	6,300	11,544
Apache Junction (SE Maricopa portion)	104	25	28	51
Gilbert	3,100	722	852	1,526
East Mesa	4,172	921	1,105	2,146
West Mesa	15,348	3,749	4,105	7,494
Queen Creek (SE Maricopa portion)	695	158	210	327
Maricopa County	155,754	38,545	43,050	74,159
ARIZONA	256,733	63,111	70,242	123,380

Arizona Department of Health Services (2020). Women, Infants & Children (WIC). Provided by AZ FTF.

The WIC enrollment for children under 5 years old decreased from 2017 (32% of children under five) to 2020 (26% of children under five) in the Southeast Maricopa Region (Exhibit 6.12).

Exhibit 6.12. Infants and children (ages 0 to 4) enrolled in the WIC program as a percentage of the population, 2017 to 2020

	Number of children (ages 0-4) in the 2010 US Census	Number and percentage of children (0 to 4) enrolled, 2017		Number and percentage of children (0 to 4) enrolled, 2018		Number and percentage of children (0 to 4) enrolled, 2019		Number and percentage of children (0 to 4) enrolled, 2020	
Southeast Maricopa Region	68,482	22,231	32%	21,267	31%	19,360	28%	17,844	26%
Maricopa County	339,217	137,050	40%	130,101	38%	122,607	36%	117,209	36%
ARIZONA	546,609	221,387	41%	211,732	39%	201,644	37%	193,622	37%

Arizona Department of Health Services (2020). *Women, Infants & Children (WIC)*. Provided by AZ FTF.

Exhibit 6.13 provides a single month snapshot of participation in the program in November 2020; 91% of women, 95% of infants, and 94% of children who were enrolled in WIC in the region claimed their benefits in the month of November. Those enrolled in WIC may not participate due to logistical barriers, such as job conflicts, lack of transportation, not enough time to wait at WIC appointments, and lack of child care.¹¹⁴ Maricopa County WIC streamlined its services with an electronic portal where participants can make appointments and view their benefits to help enrolled participants claim their benefits.¹¹⁵ This system may explain the high participation rate within Maricopa County and the Southeast Maricopa Region.

Exhibit 6.13. WIC participation rates during November 2020

	Total	Women	Infants	Children
Southeast Maricopa Region	93%	91%	95%	94%
Apache Junction (SE Maricopa portion)	94%	88%	100%	94%
Gilbert	95%	93%	97%	94%
East Mesa	91%	90%	93%	91%
West Mesa	94%	91%	96%	95%
Queen Creek (SE Maricopa portion)	86%	84%	93%	84%
Maricopa County	89%	89%	93%	88%
ARIZONA	89%	89%	93%	88%

Arizona Department of Health Services (2020). *Women, Infants & Children (WIC)*. Provided by AZ FTF.

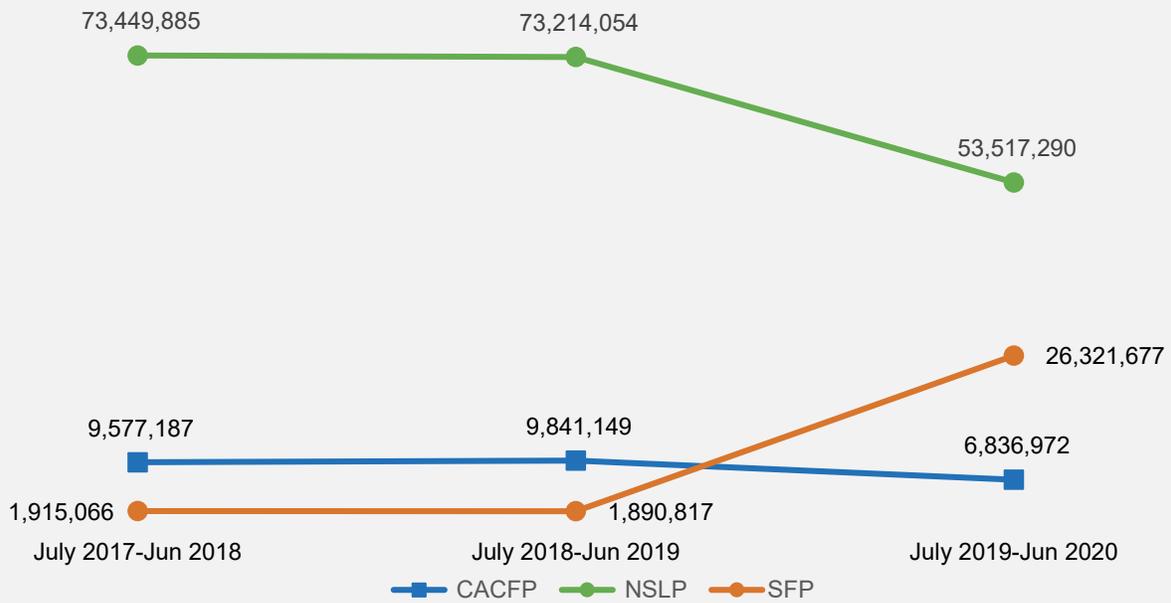
Note: The participation rate is the number of persons receiving WIC benefits during November 2020, divided by the total number of persons enrolled in the program.

Child and Adult Food Care Program (CACFP), National School Lunch Program (NSLP), Summer Food Program (SFP), and free and reduced priced lunch programs for children in schools provide food assistance to eligible families. From June 2018 to June 2020, the number of children and families receiving assistance decreased for CACFP and NSLP but increased dramatically for SFP (Exhibit 6.14).

¹¹⁴ Whaley, S. E., Martinez, C. E., Paolicelli, C., Ritchie, L. D., & Weinfield, N. S. (2020). Predictors of WIC participation through 2 years of age. *Journal of Nutrition Education and Behavior*, 52(7), 672-679.

¹¹⁵ Center on Budget and Policy Priorities (2021). *WIC Case Study: Maricopa County, Arizona*. Retrieved from <https://www.cbpp.org/sites/default/files/atoms/files/8-30-19fa-casestudies-maricopa-county.pdf>

Exhibit 6.14. Number of free meals provided by CACFP, NSLP and SFP to children and adults in Maricopa County



Arizona Department of Education (2020). Child and Adult Care Food Program. Provided by AZ FTF.
 Arizona Department of Education (2020). National School Lunch Program. Provided by AZ FTF.
 Arizona Department of Education (2020). Summer Food Program. Provided by

Schools are an important part of the nutrition assistance system, especially for children experiencing food insecurity. Around 40% of all public and charter school students in the Southeast Maricopa Region were eligible for free or reduced-price lunch from 2018 to 2020 (Exhibit 6.15). This is lower than the statewide percentage, which has hovered around 55% to 57%. Over these three years, the proportion of students receiving free or reduced-price lunch has stayed fairly constant in most school districts in the region. For larger districts, such as Mesa Unified District, more than half of students were eligible for free or reduced-price lunch in 2020 (55%). (Note that the data in Exhibit 6.15 refers only to schools located inside the Southeast Maricopa Region boundaries).

Exhibit 6.15. Proportion of students (pre-kindergarten through twelfth grade) eligible for free or reduced-price lunch, 2018 to 2020

	2018	2019	2020
Southeast Maricopa Region Schools	41%	40%	38%
American Basic Schools LLC	76%	76%	76%
American Charter Schools Foundation d.b.a. Desert Hills High School	54%	41%	51%
American Charter Schools Foundation d.b.a. Sun Valley High School	78%	78%	78%
Boys & Girls Clubs of the East Valley dba Mesa Arts Academy	80%	78%	75%
CAFA, Inc. dba Learning Foundation and Performing Arts Alta Mesa	75%	76%	72%
CAFA, Inc. dba Learning Foundation and Performing Arts Gilbert	34%	36%	40%
CAFA, Inc. dba Learning Foundation Performing Arts School	85%	82%	92%
Chandler Unified District #80	11%	9%	9%
Concordia Charter School, Inc.	95%	92%	92%
EAGLE South Mountain Charter, Inc.	95%	92%	92%
East Mesa Charter Elementary School, Inc.	56%	55%	57%
Edkey, Inc. - Pathfinder Academy	26%	24%	18%
Edkey, Inc. - Sequoia Charter School	69%	68%	72%
Gilbert Unified District	26%	25%	24%
Higley Unified School District	19%	18%	17%
Imagine Middle at East Mesa, Inc.	42%	49%	41%
Kaizen Education Foundation dba Gilbert Arts Academy	50%	40%	46%
Kaizen Education Foundation dba Liberty Arts Academy	73%	71%	67%
Kaizen Education Foundation dba Vista Grove Preparatory Academy Elementary	>98%	>98%	>98%
LEAD Charter Schools	31%	28%	29%
Legacy Traditional School - East Mesa	N/A	36%	32%
Mesa Unified District	58%	56%	55%
New Horizon School for the Performing Arts	>98%	>98%	98%
Noah Webster Schools - Mesa	43%	46%	46%
Queen Creek Unified District	24%	22%	19%
STEP UP Schools, Inc.	93%	93%	95%
West Gilbert Charter Elementary School, Inc.	34%	42%	39%
West Gilbert Charter Middle School, Inc.	38%	44%	41%
Maricopa County Schools	54%	53%	51%
All Arizona Schools	57%	56%	55%

Arizona Department of Education (2020). [Free and reduced lunch dataset]. Unpublished data.

Note: The school-district data in this table include only the schools that are located within the Southeast Maricopa Region.

FAMILY SUPPORT

In the Southeast Maricopa Region there is opportunity to strengthen parental knowledge about child development and engaging in positive parenting practices. With regard to opioid overdoses, in Southeast Maricopa Region, there were 413 fatal overdoses from opiates and opioids from 2017 to 2020 and the percentage of non-fatal overdoses in Maricopa County increased 187% from 2017 to 2020. The number of families and young children receiving federal program assistance, such as SNAP, WIC and TANF, decreased from 2017 to 2020.

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

Assets	Considerations
About 93% of women, infants, and children enrolled in WIC claimed their benefits.	Continue to support women, infants and children to participate in WIC and claim their benefits.

Needs	Considerations
Despite the need of federal program assistance, enrollment in SNAP, WIC, and TANF has decreased.	Encourage grantmaking partners and stakeholders to promote federal program assistance for low-income families.

CONCLUSION

The FTF Southeast 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 Southeast 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 age 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	
Southeast Maricopa Region generally has higher employment 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	
The high school graduation rates and the average educational attainment level of adults are high, though educational attainment is lower in the West Mesa subregion and the Southeast Maricopa portion of Apache Junction.	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 West Mesa subregion and the Southeast Maricopa portion of Apache Junction.
Early Learning	
Quality First has been increasing the quality of child care programs in the region. Of the children enrolled in a Quality First site, 72% are enrolled in a three, four, or five star center or home.	Support Quality First efforts in the region to increase the opportunities for children to receive quality early care and education.

Child Health	
The percentage of people participating in WIC who ever breastfeed their infant has been increasing and reached 80% by 2019.	Continue to provide public education about the benefits of breastfeeding and consider supporting workplace efforts to encourage breastfeeding practices for working parents.
According to the Arizona Department of Health Services, almost all pregnant people (98%) are receiving some prenatal care.	Promote the importance of early prenatal care and provide education on the impact of prenatal care on the parent and child's future well-being.
Family Support	
About 93% of women, infants, and children enrolled in WIC claimed their benefits.	Continue to support women, infants and children to participate in WIC and claim their benefits.

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 are in West Mesa or the SE portion of Apache Junction.	Discuss supporting services specifically designed for single-parent and grandparent-led households as well as targeting those services in the West Mesa and SE portion of Apache Junction sub-regions.
Economic Circumstances	
According to the American Community Survey, almost 20% of children in the region live in poverty and 29% 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.
Education	
AzMERIT reports from the Arizona Department of Education show that about 40% of third graders are not meeting proficiency standards for English Language Arts (54%) and Math (59%).	Increase parent outreach and awareness of early education programs to support learning and school readiness.
Early Learning	
The percentage of eligible families not using DES child care subsidies has increased from 2017 (6%) to 2020 (17%).	Spread awareness about the availability of scholarships and subsidies for child care, especially for low-income families.
Child Health	
The percentage of children (ages 2 to 5) that participate in WIC that are obese or overweight has increased from 30% in 2017 to 34% in 2020.	Address root causes of obesity in low-income communities by pursuing improved neighborhood safety, opportunities for outdoor activity, and better access to low-cost healthy food options. Seek ideas from and partnership with community members to create culturally meaningful, lasting change.
Across all vaccinations, the percentage of kindergartners exempt from receiving immunizations is higher than the state and county.	Coordinate with agencies that work with immunization efforts to do outreach and education regarding the importance of immunizations. Explore further to understand why parents are exempting their children from receiving vaccinations.
Family Support	
Despite the need of federal program assistance, enrollment in SNAP, WIC, and TANF has decreased.	Encourage grantmaking partners and stakeholders to promote federal program assistance for low-income families.