



2012

NEEDS AND ASSETS REPORT

Southwest Maricopa Regional Partnership Council



FIRST THINGS FIRST

Ready for School. Set for Life.

LETTER FROM THE CHAIR

The past two years have been rewarding for the First Things First Southwest Maricopa Regional Partnership Council (SWMRPC) as we delivered on our mission to build better futures for our young children and their families. During the past year we have touched their lives by providing services and support that expanded and enhanced family resource centers, offered comprehensive services that included parent education, early literacy development, oral health and prevention information for parents and caregivers, and developed quality child care strategies.

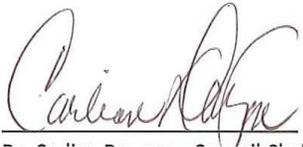
The First Things First SWMRPC pledges to continue to advocate and provide opportunities for a sustained focus on improving the strength of family, friend and neighbor child care since it appears much child care in the region is informal. We believe investing on families existing strengths will positively and effectively address kindergarten readiness.

Our strategic direction has been guided by the Needs and Assets reports, specifically created for the Southwest Maricopa Region in 2010 and the new 2012 report. The Needs and Assets reports are vital to our continued work in building a true integrated early childhood system for our young children and our overall future. The Southwest Maricopa Regional Council would like to thank our Needs and Assets vendor Southwest Institute for Families and Children for their knowledge, expertise and analysis of the Southwest Maricopa region. The new report will help guide our decisions as we move forward for young children and their families within the Southwest Maricopa region.

Going forward, the First Things First Southwest Maricopa Regional Partnership Council is committed to meeting the needs of young children by providing essential services and advocating for social change.

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

Sincerely,



Dr. Carlian Dawson, Chair
Southwest Maricopa Regional Partnership Council



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INTRODUCTORY SUMMARY AND ACKNOWLEDGMENTS

Nationally as well as locally there continues to be increased concern for and scrutiny of the early care and education of young children, which in Arizona has resulted in significant funding of existing supports and new initiatives responsive to a series of thoughtful, evidence-based priorities and indicators of First Things First- Arizona and its Regional Partnership Councils. This evidence-base is an amalgam of state and local assessments coupled with standards of practice adopted by First Things First. The following report reflects the 2012 Needs and Assets of the Southwest Region of Maricopa County, one of 31 regions across the state that is systematically investigating and improving services and supports for families of young children.

A series of assumptions are foundational to the 2012 Needs and Assets Report of the First Things First Arizona Southwest Maricopa Regional Partnership Council.

- 1) Assets are the unique strengths and capital that a community can leverage in its quest for acquisition of service, or identity.
- 2) Needs are those gaps in service and support through which citizens fall in their quests to be self-sufficient, engaged, and productive.
- 3) A community's response to the needs of families and young children is considered a valid measure of its very health.
- 4) Healthy communities are those that maintain a balance between assets and needs, always attempting to support growth and development, while providing pathways to productive futures for those in need.

The 2012 Needs and Assets Report of the Southwest Maricopa Region provides a clear portrait of the strengths emerging from the culturally diverse communities that constitute the Region as well as the unique needs that result from massive geographical distances, diverse economic growth patterns, infrastructure demands in the 21st century; and the impact that the First Things First Regional Council has had on the communities. The challenges that families with young children face are outlined in the executive summary and documented in further detail in the full report.

It is the intent of this report to provide the First Thing First Southwest Maricopa Regional Partnership Council with valid and useful information on the provision of health care, childcare, education and family support in its communities so that informed decisions that support families and young children can be made in a timely manner.

Acknowledgments:

The First Things First Southwest Maricopa Regional Partnership Council owes special gratitude to the families, providers, educators, agencies, and key stakeholders who participated in numerous surveys,



interviews, and focus groups; thereby contributing their knowledge and experiences, to an increased understanding of the assets and needs of the region.

To the current and past members of the Southwest Maricopa Regional Partnership Council, your dedication, commitment, and expertise has guided the work of making a difference in the lives of young children and families within the region. Your efforts continue to aid in the building of a true comprehensive early childhood system for the betterment of young children within the region and the State.

We also extend our gratitude to the organizations that provided secondary data for analysis including the Arizona Department of Economic Security and the Arizona Child Care Resource and Referral, the Arizona Department of Health Services Vital Statistics division and the Arizona State Immunization Information System, the Arizona Department of Education and School Districts across the State of Arizona, the U.S. Census and the American Community Survey, the Arizona Head Start Association, the Office of Head Start, and Head Start and Early Head Start Programs across the State of Arizona, Catholic Charities of Arizona, the regional school districts, and the Arizona Health Care Cost Containment System for their contribution of data for this report.



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EXECUTIVE SUMMARY

The Southwest Region of Maricopa represents 7.2% (274,866) of Maricopa County's total population (3,817,117) and 4.3% of Arizona's total population (6,392,017). Due to continual rapid population growth of its constituent cities, the region has almost tripled its size from 91,994 to 274,866 residents since the year 2000. Consequently, the Southwest Valley has witnessed extensive economic change.

The Southwest Maricopa County is the largest of the ten County regions, including the 10 communities of Arlington, Avondale, Buckeye, Gila Bend, Goodyear, Litchfield Park, Luke AFB, Palo Verde, Tolleson and Tonopah, has grown in tandem with the rest of the Valley of the Sun; more than half of the cities within the Southwest Maricopa region sustained triple-digit population growth through the first decade of the 21st century. The Southwest Valley spans the diverse rural and urban communities that represent 2,141 square miles of land or 23.3 percent of Maricopa's total square miles of 9,200.14. However, the population density varies dramatically from emerging small urban communities of Avondale and Tolleson with population density above 1,000 persons per square mile to Gila Bend having less than five persons per square mile; thus illustrating the dramatic differences within the region.

According to the 2010 U.S. Census, 23,756 children under the age of five reside in the region, accounting for 8.6 percent of the total regional population. The number of children under the age of five has risen significantly over the last 10 years and represents more than a 220 percent increase since the year 2000 when the same population was estimated to be 7,392 and 8.0 percent of the total Southwest population.

Even though growing, the region is considered stable, as 96 percent report living in their homes for one year or longer.

Southwest Maricopa RPC Demographic Facts

- The Southwest Region represents 2,141 square miles, slightly more than 23 percent of Maricopa County
- There are 274,866 persons residing within the Southwest region, representing 7.2 percent of the total number of people in Maricopa County and 4.3 percent of the total population in the state of Arizona.
- Over the last ten years the Southwest region experienced a 199 percent growth in population, while the Maricopa county population expanded ≈24 percent in the last decade.
- One out of every ten children under the age of five in Maricopa County resides in the Southwest Maricopa region.
- The population of children under the age of five grew by 220 percent over the last decade.
- Approximately 41 percent of the persons living in the Southwest Maricopa region are of Hispanic origin, which surpasses the national Hispanic estimate of 16.3 percent of the total population.
- The average median age for the Southwest Maricopa residents is 32.4 years.
- Approximately 16 percent of the population is foreign born.

Southwest Regional Assets

- On average, the percent of family households lead by females is lower than the County or State averages, one of every 6.25 family households with children under the age of 5 have a female householder compared to approximately one out of every 5 for the county or state.



- The region has the largest region of expandable land in Maricopa County.
- The community is highly diverse; two out of every five residents in the Southwest Region are of Hispanic origin.
- There are extensive and growing resources and cross sector assets including libraries, schools, three new First Things First Community Centers, Maricopa County Head Start rated as a national center of excellence, and growing faith-based communities that support families and children.
- Neighborhoods and communities are experiencing a resurgence of financial stability and new housing construction is increasing in the region.
- Volunteerism and leadership is increasing and includes organizations for new mothers, children, and families.

Southwest Regional Problems

- Fastest growing region, exceeded all other regions in 10-year growth.
- The median age for the Southwest is 2 years younger than the Maricopa median age, 3 years younger than Arizona's age and 5 years younger than the national median age.
- The growth has exceeded many services including pediatric medical care. The region is considered medically under-served.
- Childhood immunization rates are below the national goal.
- Childcare options are limited and localized.
- Vast rural areas do not have access to fresh foods.
- Public transportation does not meet the needs of many families.

Southwest Regional Needs

- Increased options for affordable childcare at night and during weekends
- Increased preschool programs for children 3-5
- Increased opportunities for diverse service providers to the ethnically and racially diverse populations
- Increased cultural competence of care providers and service facilitators
- Continued public school improvement in diverse communities
- Increased health surveillance including rates of full immunization
- Increased pediatric and specialty care
- Continued public awareness of First Things First mission, vision, and community initiatives

Southwest Regional Priorities

- **Improving the quality of early care and education.** In our region, 20 childcare centers and homes are enrolled in Quality First, which provides support; funding and education to help them better serve the children in their care. And, because so many children spend their early years in informal child care situations, the Arizona Kith & Kin program offers valuable skills and training to family and friend caregivers.
- **Partnering with families through one-stop family resource centers.** These three centrally located resource centers offer families with few transportation resources convenient access to parent education classes and additional service connections.
- **Parent Education.** Parents learn how to ensure their child is developing in a healthy way through in-person and on-line parenting skills seminars.



- **School Readiness.** Serving each community's distinct needs is a major goal of First Things First—reaching out to children and families in ways that will best offer support so that all Arizona children can start school ready to learn, be successful and reach their full potential.



Methodology

The focus of the report is the collection and meaningful analyses of informative data provided by First Things First and collected through both primary and secondary sources. The Needs and Assets Report includes issues faced by families as well as an emphasis on the Southwest Maricopa Regional Partnership Council's existing "assets," that is, the institutions, or organizations within the region that can be strengthened, expanded, and/or partnered with to support early childhood activities that strengthen systems and families.

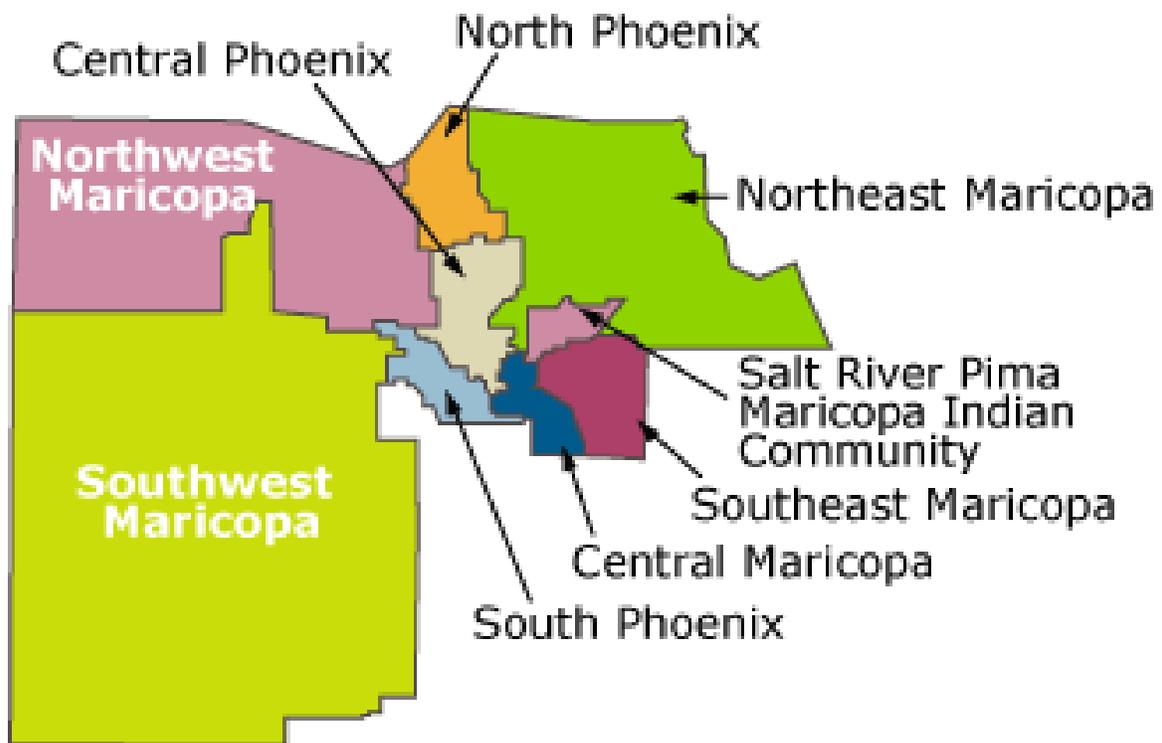
The purpose is to provide the Arizona First Things First Southwest Regional Partnership Council with current, reliable information on the assets of communities across the region; and needs of young children and the families in which they are growing up. First Things First uses a model of strengths or asset-based assessment in which it is critical to engage the constituency of families of young children to identify the strengths of communities and the systems that serve them, that highlight the communities' own capacities to grow and develop (Roehlkepartain, 2005). The model shifts the priority from being served, to service recipients who also contribute back to their community. McKnight and colleagues were pioneers in shifting the focus of community assessment or mapping to emphasize strengths (McKnight & Kretzmann, 1996; Kretzmann & McKnight, 1993). For example, a needs assessment might document patterns of crime, unemployment, pollution, and economic blight within a neighborhood (all of which are present). In contrast, a strengths map of the same neighborhood might identify individual gifts and interests, available untapped resources, as well as the capacities of local organizations and associations (all of which are also present). The difference, McKnight and Kretzmann (1996) contend is that the latter map "is the map a neighborhood must rely on if it is to find the power to regenerate itself. Communities have never been built on their deficiencies. Building community has always depended upon mobilizing the capacities and assets of a people and a place" (p. 17). In other words, needs assessments create "mental maps" that define people primarily in terms of their problems and challenges, fostering a cycle of dependency on outside services and resources (Beaulieu, 2002). Throughout the report, potential assets have been identified.



A visual overview provides a geographic framework for the vast area of the Southwest region that extends south from the outskirts of the dense core of the cities of Phoenix, Glendale and Peoria, Arizona to Pima County and the Tohono O'odham Nation; west to Yuma and La Paz Counties; and east to Pinal County and the Gila River Indian Community.

Figure 1-1

Map of First Things First Maricopa County Regions



Key Elements of Strength-Based Approaches to Community

Assessment

Strength-based approaches focus on the capacities or gifts that are present in the community, not what is absent. Bohach (1997) writes: "Every community, no matter how deprived or disadvantaged it may feel it is or be perceived to be, is comprised of citizens who have an endless supply of unique, positive, and valuable abilities that are their gifts.... Using their gifts, a community's citizens can focus on areas of strength (the positive) rather than only focusing on areas of need (the negative)" (p. 23).

Strength-based approaches stress local leadership, investment, and control in both the planning process and the outcome. This emphasis assumes that residents are in the best position to know the community's true strengths and capacities, making them experts (not clients). This shift provides a vital foundation for unleashing and sustaining community capacity, citizen engagement, and social capital (Benson, Scales, & Mannes, 2003).

Strength-based approaches 'unpack' formal, institutional resources (such as programs, facilities, and financial capital) as well as individual, associational, and informal strengths and resources. By connecting across traditional sectors and boundaries, communities often discover previously unrecognized interests, talents, skills, and capacities that can be matched with needs or challenges in another part of the community.

Strength-based approaches seek to link the strengths and priorities of all partners, including the young people. Listening to the community one seeks to serve does not take away the need to recognize families or providers personal/professional priorities, talents, skills, and passions. The best capacity building models link the priorities and resources of a community with the capacities and interests of the constituents. This mutual engagement, respect, and commitment yield reciprocal benefits to everyone involved.

Data Collection

Primary Data Collection

Local and regional data have been of essential to the success of this project. The team collected qualitative primary data to reflect the personal experiences and opinions of regional participants and quantitative data that reflect to the unique features of the region and including incidence and frequency data from families and service providers on topics of interest to the Regional Council. An extensive family survey was developed that queries families on general demographics, access to and satisfaction with health care; family-understanding the concepts of child development, cultural competency of care in both health and childcare settings of the availability and content. Three hundred families completed the survey. All childcare providers were included in the potential pool of respondents.

Four methods were used for primary data collection:

1. Face-to-face and web-based stakeholder surveys of families and providers
2. Telephone and/or face-to-face interviews with key informants
3. Family/stakeholder group meetings
4. Small focus groups of special interest groups including African American families, uninsured families, and immigrant families.



Secondary Data

Numerous sources of information are included in each of the four main sections of the report including:

5. 2010 U.S. Census data
6. Statewide reports provided by FTF including immunization, nativity and mortality, the AZ Health Survey, 2012 CCRR data, ADE Student Demographics
7. US Census Bureau American Community Survey
8. Current Population Survey (CPS)
9. Bureau of Labor Statistics
10. Arizona Health Survey
11. Small Area Health Insurance Estimates (SAHIE)
12. National Immunization Survey (NIS)
13. American Academy of Pediatrics Arizona Department of Health Services (AZDHS)
14. The National Survey of Children's Health
15. Oral Health Survey of Arizona Preschool Children 2009
16. Arizona Healthy Bodies, Healthy Smiles Survey 2010
17. National Survey of Children with Special Health Care Needs
18. WIC participation, Health Status and Vital Statistics Reports from the Arizona Department of Health Services
19. KIDSCOUNT
20. SWIFT Resources
21. Division of Developmental Disabilities (DDD)



DEMOGRAPHIC OVERVIEW

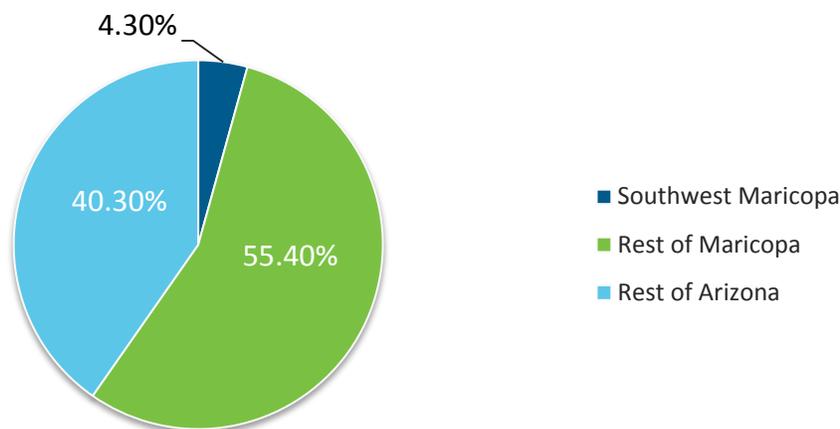
Who are the Southwest Families?

The Southwest Region of Maricopa represents 7.2% (274,866) of Maricopa County's total population (3,817,117) and 4.3% of Arizona's total population (6,392,017). With its constituent cities and continual rapid population growth, the region has almost tripled its size from 91,994 to 274,866 residents since the year 2000. Consequently, the Southwest Valley has seen its share of economic change.

The region, including the cities of Arlington, Avondale, Buckeye, Gila Bend, Goodyear, Litchfield Park, Luke AFB, Palo Verde, Tolleson and Tonopah, has grown in tandem with the rest of the Valley of the Sun; more than half of the cities within the Southwest Maricopa region sustained triple-digit population growth through the first decade of the 21st century. The Southwest Valley spans the diverse rural and urban communities that represent 2141 square miles of land or 23.3% of Maricopa's total landmass of 9,200 square miles.

Exhibit 1-1

Distribution of Total Population within Arizona



Source: US Census Bureau, 2010 Census.

“This part of Maricopa County is a unique blend of urban and rural – allowing for rich history with agricultural and suburban explosion sprawl. The small towns centers of each hub have helped maintain the community “feel,” stay strong amidst growing chain stores and commuters. The foreclosure crisis has hit the Southwest Region very hard financially but the people continue to remain very kind to each other and generous – with their time as well as their other means.”

Southwest Regional Partnership Council member



The communities of the Southwest Region vary dramatically in size and density. Tonopah is geographically the largest community with one of the lowest densities, while Avondale is one of the smallest communities with the highest densities.

Exhibit 1-2

Southwest Maricopa Geographic Characteristics

AREA	SOUTHWEST MARICOPA GEOGRAPHIC CHARACTERISTICS	
	Land Area in Square Miles 2010	Persons per Square Mile 2010
Arlington	342.40	2.2
Avondale	28.24	2649.0
Buckeye	451.30	141.5
Gila Bend	570.10	4.9
Goodyear	88.10	760.9
Litchfield Park	30.24	868.2
Luke AFB	3.41	434.6
Palo Verde	8.01	24.5
Tolleson	21.70	1430.2
Tonopah	597.50	11.1
Southwest Maricopa	2140.95	632.7*
Maricopa	9,200.14	414.9
Arizona	113,594.08	56.3
United States	3,531,905.43	87.4

Source: U.S. Census Bureau, 2010 Census

Note: Estimates are based on the Zip Code Tabulation Areas (ZCTAs) that constitute each city within the Southwest RPC.

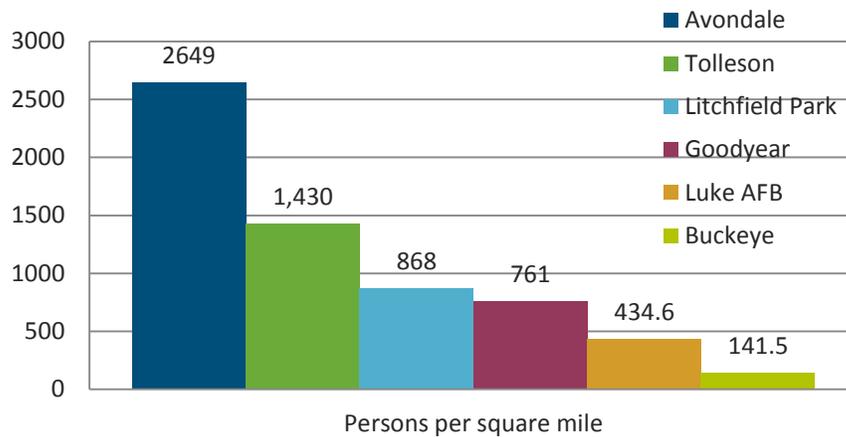
* Indicates the average number of persons per square mile based on the cities within the Southwest RPC.

Noteworthy is the dramatic distribution of emerging urban community population density in Avondale and Tolleson as compared to the rural and frontier nature of the remote populations of Gila Bend and Arlington.

Exhibit 1-3



Southwest Maricopa Persons per Square Mile (Selected Cities)

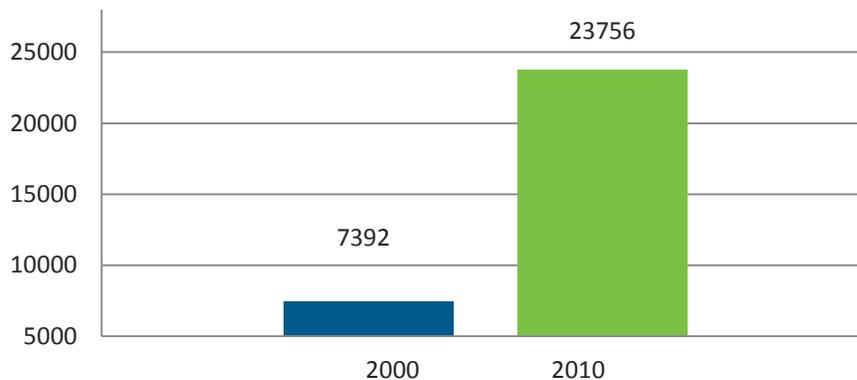


Source: US Census Bureau, 2000 & 2010 Census.

The most significant finding of the 2012 Needs and Assets Assessment is the dramatic increase in the population of children under six in the region. In 2000, the population by census count was 7,392, whereas, the 2010 population was 23,756. However, the percent of children in this age range remains relatively static, 8% vs. 8.6%, respectively.

Exhibit 1-4

Population under the Age of Five for the Year 2000 And 2010



Source: US Census Bureau, 2000 & 2010 Census.

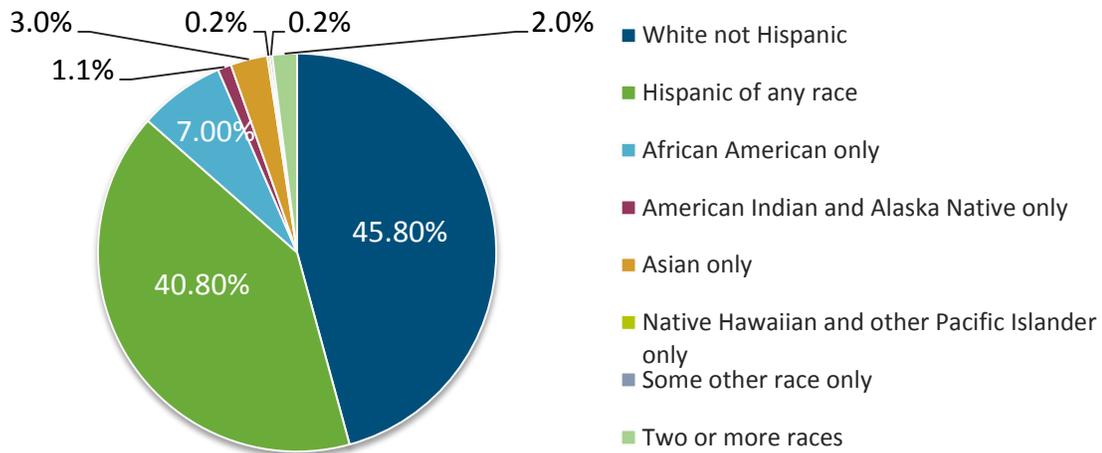
The composition of the Southwest Maricopa region is a representation of the modern day multiethnic society, the region is diverse racially and ethnically; White Americans (non-Hispanic) are the racial majority representing more than 45% of the total Southwest population, followed closely by Hispanics (of any race) which now account for more than 40% of the total population within the region making up the largest ethnic or race minority group in the region substantiating the national trends for ethnic minority groups; as of 2010 there were 112,261 Hispanics living within the boundaries of this region, almost representing one out every two persons residing in the Southwest of the Maricopa county.



African Americans compose 7% of the Southwest population, with the largest proportion of them residing at Luke Air Force Base, where they represent 13.3% of the community’s residents, followed by Avondale and Tolleson where they represent almost 9% of the total population. Other racial groups constitute the remaining 6.4% of the Southwest’s residents, the Asian community being the largest of the remaining racial groups. Almost 5% of the total number of persons in this region identified themselves as belonging to this racial group.

Exhibit 1-5

Southwest Maricopa Race/Ethnicity



Source: US Census Bureau, 2010 Census.

Note: Any person that reported having Hispanic origins is included as Hispanic and is not included in any other race.

Diversity is an asset to the region. As such, the following Exhibit illustrates the diversity among communities in the region. With the exception of Luke AFB and Gila Bend, the majority of the Southwest Maricopa Regional Partnership Council communities have a greater proportion of Hispanic families than does the rest of the County or the State. All are diverse and representative of multiple ethnicities, Tolleson appears to be a growing center of Latino families; Gila Bend is home to more American Indians, and Luke Air Force Base, to African American families. These data may be of value when considering the types of service for families in the respective regions.

Exhibit 1-6

Southwest Maricopa Population Race/Ethnicity

AREA	SOUTHWEST MARICOPA POPULATION RACE/ETHNICITY (PERCENT)
------	--------------------------------------------------------



	White not Hispanic ¹	Hispanic or Latino origin ²	African American ¹	American Indian & Alaska Native ¹	Asian ¹	Native Hawaiian & other Pacific Islander ¹	Other Race ¹	Two or more Races
Arlington	59.8	34.6	2.4	0.3	0.0	0.0	0.7	2.3
Avondale	34.1	50.3	8.8	1.0	3.2	0.3	0.2	2.2
Buckeye	51.2	38.5	5.8	1.1	1.4	0.1	0.2	1.7
Gila Bend	59.6	21.7	1.2	15.2	0.6	0.0	0.0	1.6
Goodyear	58.1	28.2	6.2	1.0	4.1	0.1	0.1	2.1
Litchfield Park	60.0	25.4	6.5	0.6	4.8	0.1	0.2	2.3
Luke AFB	65.9	11.2	13.3	0.9	4.5	0.2	0.1	4.0
Palo Verde	56.1	41.3	0.5	1.0	0.0	0.0	0.0	1.0
Tolleson	18.4	67.8	8.8	0.9	2.4	0.2	0.1	1.5
Tonopah	60.1	35.1	1.3	1.0	0.2	0.2	0.2	1.8
Southwest Maricopa	45.8	40.8	7.0	1.1	3.0	0.2	0.2	2.0
Maricopa	58.7	29.6	4.6	1.6	3.4	0.2	0.1	1.9
Arizona	57.8	29.6	3.7	4.0	2.7	0.2	0.1	1.8
United States	63.7	16.3	12.2	0.7	4.7	0.2	0.2	1.9

Source: U.S. Census Bureau, 2010 Census.

¹ Includes persons reporting only one race. ² Hispanics may be of any race, but they are not included in any other applicable race categories.

Note: Estimates are based on the Zip Code Tabulation Areas (ZCTAs) that constitute each city within the Southwest RPC.

In 1998, Arizona passed the Growing Smarter Act to preserve quality of life and promote conservation and sustainability for the future. The 14 counties and all municipalities with populations greater than 50,000, were required to contribute to the plan. Subsequently Maricopa County developed “Eye To the Future,” a visionary planning process structured to emphasize public involvement and incorporate comments, ideas, and direction from the public into a plan developed by individual communities and synthesized in a comprehensive plan with the overriding vision to accommodate growth that will preserve a sense of community and protect and enhance the quality of life. The plan contains guidelines for growth in the 21st century, including areas in the southwestern valley. A large swath of land west of Goodyear, south of Buckeye is designated as planned growth areas (2002).

The county recognizes Development Master Plans (DMP), also known as master planned communities, as a preferred type of development because of the opportunity to provide mixed land uses—an important component of the Growing Smart Act.

The dramatic growth in Southwestern communities illustrated below far outpaces other Maricopa County regions as well as the State and Nation. Fortunately, the region has significant undeveloped land on which to grow. The planning process of Eye to the Future has served as a guide with the inclusion of numerous multi-use areas and master planned communities such as Estrella Mountain Ranch, Avondale Ranch, Pebble Creek, the Vineyards, Windmill Village, Sin Lomas, Maderias, and Fireside at Sienna Hills, Tartesso, and Verrado. As these communities develop and fill, the growth of the region will continue.

Exhibit 1-7

Southwest Maricopa Population by City



AREA	SOUTHWEST MARICOPA POPULATION BY CITY						
	Population 2010	Population % change (2000 to 2010)	Population 2000	Population under 5 Years (2010)	Persons under 5 Years (percent 2010)	Population under 5 Years (2000)	Persons under 5 Years (percent 2000)
Avondale	74,817	128.3%	32,769	6,948	9.3%	3,157	9.6%
Buckeye	63,868	190.1%	22,018	5,571	8.7%	1,490	6.7%
Gila Bend	2,793	2.5%	2,726	261	9.3%	231	8.5%
Goodyear	67,037	316.6%	16,092	4,901	7.3%	1,188	7.4%
Litchfield Park	26,262	272.4%	7,053	2,031	7.7%	436	7.4%
Luke AFB	1485	117.7%	682	NA	0.1%	0	0.0%
Palo Verde	196	NA	NA	10	5.1%	NA	NA
Tolleson	31,011	329.6%	7,218	3,500	11.3%	628	8.7%
Tonopah	6645	124.0%	2966	488	7.3%	227	7.7%
Arlington	752	60.0%	470	44	5.9%	35	7.5%
Southwest Maricopa	274,866	198.8%	91,994	23,756	8.6%	7,392	8.0%
Maricopa	3,817,117	24.2%	3,072,149	282,770	7.4%	241,974	7.9%
Arizona	6,392,017	24.6%	5,130,632	455,715	7.1%	382,386	7.5%
United States	308,745,538	9.7%	281,421,906	20,201,362	6.5%	19,175,798	6.8%

Source: U.S. Census Bureau, 2010 Census

Note: Estimates are based on the Zip Code Tabulation Areas (ZCTAs) that constitute each city within the Southwest RPC.

NA Indicates estimates were not available or were too (n<25) small to be disclosed.

In order to make sure that all population growth was accounted for in this assessment, zip codes identified as comprising the region were analyzed and found to be congruent with the analysis by city; thus, accounting for unincorporated areas of Maricopa County.

Exhibit 1-8

Southwest Maricopa Population by Zip Code

ZIP CODE	SOUTHWEST MARICOPA POPULATION BY ZIP CODE ¹
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	City	Population 2010	Population % Change (2000 to 2010)	Population 2000	Population under 5 Years (2010)	Persons under 5 Years (percent 2010)
85323	Avondale	39,507	20.6%	32,769	4,189	10.6%
85392	Avondale	35,310	*	*	2,759	7.8%
85326	Buckeye	51,705	134.8%	22,018	4,603	8.9%
85396	Buckeye	12,163	*	*	968	8.0%
85337	Gila Bend	27,93	2.5%	2,726	261	9.3%
85338	Goodyear	41,115	155.5%	16,092	3,560	8.7%
85395	Goodyear	25,922	*	*	1,341	5.2%
85340	Litchfield Park	26,262	272.4%	7,053	2,031	7.7%
85309	Luke AFB	1,485	117.7%	682	NA	0.1%
85329	Palo Verde	*	*	*	*	*
85343	Palo Verde	196	*	*	NA	5.1%
85353	Tolleson	31,011	329.6%	7,218	3,500	11.3%
85354	Tonopah	6,645	124.0%	2,966	488	7.3%
85322	Arlington	752	60.0%	470	44	5.9%
Southwest Region		274,866	198.8%	91,994	23,756	8.6%
Maricopa County		3,817,117	24.2%	3,072,149	282,770	7.4%
Arizona		6,392,017	24.6%	5,130,632	455,715	7.1%
United States		308,745,538	9.7%	281,421,906	20,201,362	6.5%

Source: U.S. Census Bureau, 2010 Census.

¹Zip codes used in the table are Zip Code Tabulation Areas (ZCTAs), they are generalized area representations of U.S. Postal Service (USPS) ZIP Code service areas. They represent the most frequently occurring five-digit zip code found in a given area each ZCTA is built by aggregating 2010 Census blocks, whose addresses use a given ZIP Code. Each resulting ZCTA is then assigned the most frequently occurring ZIP Code as its ZCTA code. In most instances the ZCTA code is the same as the ZIP Code for an area.

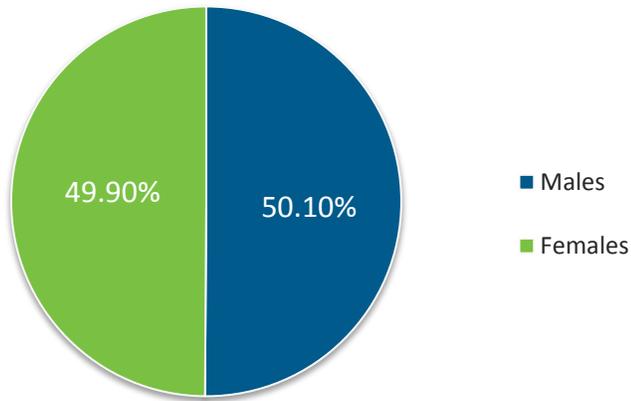
*Some ZIP Codes represent very few addresses (sometimes only one) and therefore estimates for some zip codes cannot be provided. NA Estimates were too small to be disclosed.

Not unexpectedly, gender is uniformly distributed. Almost 50% of the population in the Southwest Maricopa region is female; overall, females in the region account for 49.9%, Goodyear being the community with the largest proportion of females, in which 53% of the population is women.

Exhibit 1-9

Southwest Maricopa Gender Distribution





Source: US Census Bureau, 2010 Census.

Stability of regional population was determined by length of residence in homes. Eighty-two percent of residents of the region reported living in the same residence for one year or longer, thus, the region is considered a stable and growing population. In addition, on average, 16% of the residents in the Southwest region are foreign born individuals and almost 32% of them reported speaking a language different than English at home. This diversity of national origin and language paint a bright and vibrant community that likely has an array of traditions and cultural heritages to share.

Exhibit 1-10



Southwest Maricopa Population Selected Characteristics

AREA	SOUTHWEST MARICOPA POPULATION SELECTED CHARACTERISTICS (PERCENT)			
	Female persons 2010	Living in Same House 1 Year & over 2006-2010	Foreign Born persons 2006-2010	Language other than English ¹
Arlington	48.7	NA	NA	17.8
Avondale	50.3	76.0	16.3	36.1
Buckeye	46.1	70.3	11.2	27.1
Gila Bend	48.4	89.0	26.1	60.3
Goodyear	53.0	75.7	11.6	22.9
Litchfield Park	50.8	83.3	8.6	10.7
Luke AFB	17.2	NA	NA	NA
Palo Verde	44.9	NA	NA	NA
Tolleson	51.3	79.3	22.6	65.5
Tonopah	49.0	100.0	NA	14.3
Southwest Maricopa	49.9	81.9 ²	16.1 ²	31.8
Maricopa	50.5	79.4	15.9	26.5
Arizona	50.3	79.8	14.2	27.1
United States	50.8	84.2	12.7	20.1

Source: U.S. Census Bureau, Census 2010; American Community Survey 2006-2010 estimates.

¹Spoken at home, percent for ages 5+ (2006-2010). ² Average across the communities for which data are provided. NA indicates data were not available.

The median age of Southwest residents, on average is 32.4 years, ranging from 21 years at Luke Air Force Base to 41 years in some parts of the Goodyear community (zip code 85395). In general the Southwest can be considered younger than average regional populations, with a median age well below the state median age of 35 years and national median age of 36 years. Again, these data indicate that the region is varied by community rather than homogeneous; thus, likely requiring careful attention localized planning and resource allocation. An example may be the unique rapidly growing population of young Hispanic families in Tolleson who may require very different services and supports than older families of potential grandparents raising children in Goodyear, or young military families in transience at Luke Air Force base.

Exhibit 1-11

Southwest Maricopa Median Age by Zip Code

ZIP CODE	SOUTHWEST MARICOPA MEDIAN AGE			
	City	Male	Female	Both
85322	Arlington	38	36.3	37.3
85323	Avondale	25.8	27.7	26.7
85392	Avondale	30.1	31.5	30.9



85326	Buckeye	30.6	29.9	30.3
85396	Buckeye	37	37.1	37
85337	Gila Bend	31.3	30.5	30.9
85338	Goodyear	31	32.4	31.7
85395	Goodyear	42.4	39.8	40.7
85340	Litchfield Park	33.7	34.9	34.3
85309	Luke AFB	21.1	21.3	21.1
85343	Palo Verde	39	38.7	38.8
85353	Tolleson	25.7	26.3	26
85354	Tonopah	35.9	36.4	36.1
	Southwest Maricopa*	32.4	32.5	32.4
	Maricopa	33.5	35.7	34.6
	Arizona	34.8	37.2	35.9
	United States	35.8	38.5	37.2

Source: U.S. Census Bureau, 2010 Census.

* Represents the average median age based on the Zip Code Tabulation Areas (ZCTAs) that constitute each city within the Southwest RPC.



Southwest Maricopa RPC Demographic Facts

- The Southwest Region represents 2141 square miles, slightly more than 23% of the land where the Maricopa County sits.
- There are 274,866 persons residing within the Southwest region, representing 7.2% of the total number of people in Maricopa County and 4.3% of the total population in the state of Arizona.
- Over the last ten years the Southwest region experienced a 199% growth in population, while the inclusive Maricopa County population grew by 24% during the same period.
- 23,756 children under the age of five reside within the Southwest region, representing 8.4% of the total number of children under the age of five in Maricopa County and slightly over 5% of the total population under that age in the state of Arizona.
- The population of children under the age of five grew by 221% over the last decade.
- Almost 41% of the persons living in the Southwest Maricopa region are of Hispanic origin, which by far surpasses the national Hispanic estimate; nationally, Hispanics constitute 16.3% of the nation's total population.
- Gender is evenly distributed in the region
- The average median age for the Southwest Maricopa residents is 32.4 years, 4.8 years below the median age in the country, estimated to be 37.2 years.
- 16% of the population is foreign born, primarily from Central and South America.



The Southwest Maricopa Communities

The southwest region of Maricopa County is comprised of ten distinct communities, with unique populations, traditions, and histories. Additionally, they face distinct challenges related to growth, employment, and culture.

Arlington

The smallest of the ten communities, located about 40 miles west of Phoenix and was settled in the early 1800s as a result of the Homestead Act. Arlington sits on 342.40 square miles of land and had a 2010 population of 752 with approximately 6% of the residents being children under the age of five. This community experienced a population growth of 60% over the last decade, representing the second smallest population growth across all the communities that comprised the Southwest region. The racial makeup of the community is predominantly White (non-Hispanic), with 60% of the population constituting this racial group while 35% of the residents are of Hispanic origin.

Avondale

The City of Avondale was originally a freight station on the Avondale Ranch named Cold Water Station. Today, Avondale with a 2010 population of over 74,000 people, 10% of them being children under the age of 5, is a leader in the Southwest Maricopa region. This community experienced a population growth of 128% over the last decade; the racial makeup of the community is predominantly Hispanic (of any race), with 50% of the population constituting this racial group, one of the largest shares across all communities in this region, while 34% of the residents are White (non-Hispanic).

One of Avondale's eight goals is to encourage effective coordination and involvement with community groups and other levels of government; thus, promote community involvement among residents. Key to this coordination is the comprehensive web-based communication system administered by the Assistant to the Mayor and City Council, and facilitation of low-cost community and special events. In addition, the city recently announced grants to non-profit health and human service organizations to fund projects that improve the quality of life of its citizens.

There is extensive evidence of community use of the new public-private Care1st Avondale Resource and Housing Center. In 2011, 2383 residents accessed the center as 'walk-in' customers and additional 1047 called the center for information about available resources provided, which include services across the life span. Supports for families and young children include nutrition counseling through the USDA WIC program, court ordered parenting classes in Spanish and English, early literacy and parenting classes, developmental screening and referral for young children one month through five years of age, supports for grandparents raising children, assistance with applications for AHCCCS, food stamps, DES childcare subsidies and cash assistance; citizenship assistance, GED and ESL classes, and health and social services for pregnant teenagers and their families. Families report feeling comfortable and respected at the center and have found a continual source of useful information.

Buckeye

Buckeye, typically thought of as a small, remote, rural stop on the way to San Diego had a 2010 population of 63,868 people, in the last ten years, this community experienced a major population growth of 190%. The Buckeye Chamber of Commerce and Library have been consistent supporters of First Things First activities, providing no-cost meeting space and communication methods to inform families of community events. School leadership is strong, knowledgeable, and welcoming. The Buckeye Head Start program has



a long-standing commitment to its families; their parent leaders play an important role by informing families of educational and related events. Thirty-six families participated in the Family survey from the Buckeye Head Start as well as an additional 48 families participated in parent community-based parent education. Families reported being eager for quality information and education, and readily attend sessions.

Gila Bend

Gila Bend, located just off Interstate 8 on Arizona SR 85, had a 2010 population of 2,793 with 9.3% of the residents being children under the age of five. This community experienced a population growth of 2.5% over the last decade, representing the smallest population growth across all the communities that comprised the Southwest region. The racial makeup of the community is predominantly White (non-Hispanic), with 60% of the population constituting this racial group while 22% of the residents are of Hispanic origin.

The recently opened Care1st Gila Bend Resource Center is quickly becoming a focal point for service provision in the community. Similar to collaboration in Avondale, the Center is sponsored by the Care1st Health Plan, Town of Gila Bend, and the First Things First Southwest Maricopa Regional Council. It provides a wide range of vital services of referral, employment, childcare and family education. The Gila Bend School District and local churches have generously accommodated educational programs, providing meeting space and communication with families.

With its growing solar economy, Gila Bend is focusing on the health and well being of its citizens as well as economic opportunities.

Goodyear

Established in 1917 by the Goodyear Tire and Rubber company, the community of Goodyear had a 2010 population of 67,037 people, 7.3% of the population in this city are children under the age of five; and sustained some of the largest population growth, 317%, in the state over the last ten years. Goodyear has been a leader in First Things First collaborative efforts. Educational, faith-based, governmental, and non-profit organizations are invited members of the Goodyear Faith Community Roundtable. Supported by City of Goodyear staff, the group establishes goals and actively works toward civic goals including inviting the Buckeye Food Bank to serve the Goodyear community. The City of Goodyear sponsors numerous educational and recreational events throughout the year, with Family Concerts, Movies at the Ballpark, Summer Dry Heat Comedy Nights, Performing Arts Series and Holiday celebrations. The Goodyear Ballpark is the setting for the annual G.A.I.N. event, bringing neighborhoods together for fall friendship. Service organizations continually inform citizens of their programs. A city market of fresh produce and arts & crafts operates October through May. An online City of Goodyear newsletter highlights a large number of child and family activities available through the City Recreation Program and other providers. Goodyear is fortunate to have a wide range of programs available for its children and families. A major challenge for families may be to stay informed of all the events and programs.

Litchfield Park

With an estimated population of 26,262 people as of 2010, Litchfield Park was recognized by Phoenix Magazine as “one of the 8 best places to live” in Arizona. It touts arts and crafts events, outdoor recreational events, and ambience of resort lifestyle. The City website is a good source of information about current events.

The Litchfield Elementary School District operates eight elementary schools, which serve children and families living in Avondale, Buckeye, Goodyear and Litchfield Park. There is a growing need for child and



family support. In 2011, a new mothers club was formed, which now numbers over 80 regular members, when interviewed they expressed the need for opportunities to network with other families and learn parenting strategies especially related to early literacy. The school district and other funding sources provide a comprehensive food program for children in the schools, including summertime.

Luke AFB

Luke Air Force Base is a United States Air Force base located about 15 miles (24 km) west of Phoenix, Arizona. Luke Air Force Base is the largest and only active-duty F-16 Fighting Falcon training base in the world with more than 200 F-16s assigned. The host command at Luke is the 56th Fighter Wing (56 FW), under Air Education and Training Command's 19th Air Force. The base population includes about 7,500 military members and 15,000 family members. With about 80,000 retired military members living in greater Phoenix, the base services a total population of more than 100,000 people.

The 56th FW is composed of four groups, 27 squadrons, including six fighter squadrons. There are several tenant units on base, including the 944th Fighter Wing, assigned to 10th Air Force and the Air Force Reserve. More than 470 pilots graduate from Luke annually and proceed to combat assignments throughout the world. The 56th Fighter Wing also trains more than 700 maintenance technicians each year.

As the Base attempts to provide for the ongoing needs of families of enlisted personnel and Department of Defense personnel and there are several programs for families and children. The National Association accredits the newly expanded Child Development Center (CDC) for the Education of Young Children. Within CDC are multiple programs from infant care to preschool. The program was established to meet the needs of working parents by providing a safe, developmental program that provides a variety of activities including independent and organized group play including reading, manipulative play, music, art, play, and outdoor play. Children with *Special Needs and those with special health care problems are provided individualized programs guided by Individual Educational Plans and written concurrence of the Medical Advisor*. Active duty military (single parent, dual military) and DoD civilians assigned to Luke AFB whose spouses work full-time or go to school full-time have first priority. Full-time care and drop-in hourly care are available.

The Family Child Care (FCC) Program offers home-based childcare in licensed homes for children ages two weeks through twelve years. These self-employed providers operate their homes independently in compliance with strict Air Force policies, including frequent inspections and close monitoring by the Family Child Care staff. Extensive background screening and orientation training must be completed prior to licensing. Full time, part time, hourly, weekends, extended hours and school age care is available.

In addition to early care programs, Luke Air Force Base provides a School Age Program (SAP) Youth Center that offers a safe learning environment for youths age 6- 18 years of age that includes homework assistance, computer resource, job referral, community service projects, youth transition programs, social programs, sports programs, instructional classes, before-and-after school programs, summer and holiday camp programs.

Finally, the Air Force Aid Society (AFAS) Respite Care Program provides active duty Air Force families who have a family member with special needs a "break" for a few hours a week or month. These services are applicable to children, spouses, or parents living in the household

Palo Verde

Palo Verde is a small, unincorporated community in Maricopa County, Arizona, United States. Sitting on approximately 8 square miles of land, Palo Verde is located about 40 miles west of Phoenix, and 6 miles



southwest of downtown Buckeye. Despite sharing a name, the Palo Verde Nuclear Generating Station is actually located in nearby Wintersburg. According to the 2010 U.S. Census, Palo Verde had a population of 196 people, representing the smallest community across the Southwest Maricopa region; the racial makeup of the community is predominantly White (non-Hispanic), with 56% of the population constituting this racial group while 41% of the residents are of Hispanic origin. Palo Verde exists as a county island within the planning boundary of Buckeye; as such annexation into Buckeye is a possibility. The main industry in Palo Verde is agriculture. Palo Verde has its own elementary school district serving 441 students. During the first year of educational letter grade assignment, Palo Verde Elementary earned a 'B' and made Adequate Yearly Progress.

Tolleson

The City of Tolleson, population of 31,011, aims to “retain the foundation of our family oriented, friendly, small town atmosphere. We will support a positive, diverse growth environment that maintains and enriches the quality of life for everyone.” The city, once dependent upon agriculture, has become a strong commercial and industrial hub, particularly for transportation and distribution of goods. With a young children population of 7.3% of its total population, this community is one of the youngest communities in the Southwest. This community had the largest total population growth over the last ten years, growing by 330% the racial makeup of the community is predominantly White (Hispanic), with 68% of the population constituting this racial group while 18% of the residents are of White (non-Hispanic) origin.

Tolleson actively promotes cultural and educational opportunities. It sponsors an annual resource fair at the Veterans' Park and numerous other activities throughout the year. Tolleson has 3 city parks, a community center, five lighted ballparks, and numerous lighted basketball, tennis and racquetball courts. The West Valley Fine Arts Council provides a variety of scheduled events in the town. Nearby Estrella Mountain Regional Park, White Tank Regional Park and the Phoenix International Raceway provide additional recreational opportunities.

The Littleton Elementary School District recently opened its long-awaited Family Welcome Center, housed at Littleton Elementary. The Center serves as a hub for educational events and is a good resource for First Things First programs. The Tolleson Senior and Recreation Center has welcomed First Things First providers and families and the Library assists in publicizing events.

Tonopah

Tonopah had a 2010 population of 6,645 with 7.3% of the residents being children under the age of five. It is one of the most rural of the Southwest Maricopa communities. This community experienced a population growth of 124% over the last decade, representing a two-fold increase since the year 2000. The racial makeup of the community is predominantly White (non-Hispanic), with 60% of the population constituting this racial group while 35% of the residents are of Hispanic origin.

The community of Tonopah has experienced a significant reduction in child enrollment in the Saddle Mountain School District Elementary Schools. As a result, Winter's Well Elementary will close in the 2012-2013 school year, with students transferring to the re-opening Ruth Fisher Elementary. During the past two years, Winters' Well staff has been most welcoming to First Things First community-based parent education programs. Attendance has grown by word-of-mouth, resulting in regular attendance of greater than 50 adults per session.]Tonopah has traditionally been unserved, and remains underserved, likely due to the distance from formal services.

Families have to travel 18.27 to 23 miles into “town” for groceries (depending upon the route taken) to the nearest grocery stores at Wal-Mart or Fry's in Buckeye. There is one grocery store in town with high prices,



a new community garden, and the periodic Agua Fria Food Bank. Likewise, for health care, families travel to providers in Buckeye and other southwest Maricopa communities.

Even more remote are families who live on-site at the dairies on the outskirts of Tonopah. These families have been interested and committed in attending educational programs at Winter's Well. In a small focus group setting to determine interest in family education and possible priority of topics, these families reported a need for childcare homes, improved access to health care, a community-based computer lab, and other parent educational opportunities.



Household Demographic Characteristics

There are approximately 84,607 households located in the Southwest Maricopa region. According to the 2010 census, 78.4% of those household are defined as family households, this is, a household that has at least one member of the household related to the householder by birth, marriage or adoption; with an average family size of 3.21 persons per family.

The family households in the Southwest of the Maricopa County represent 7.1% of the estimated 932,814 family households in the entire county. Approximately 9% of the family households within this region are family households with children under the age of six; out of those households with children under the age of six, slightly more than 70% of those are occupied by married couples raising their children while 16.7% are households led by single females, implying that 16% of the family households with children under the age of six in the Southwest region, have a single mother raising her children; significantly less than the 20.4% female led households county wide.

Exhibit 1-12

Households and Families

AREA	HOUSEHOLDS AND FAMILIES					
	Total Households	Family Households ¹	Average Family Size	Families with Children under 6	Husband-Wife Families with Children under 6	Female Householder with Children under 6
Avondale	22,997	17,689	3.63	2,144	1,356	467
Buckeye	18,429	14,732	3.42	1,732	1,299	223
Gila Bend	877	652	3.69	78	53	NA
Goodyear	22,045	17,375	3.15	1,849	1,442	229
Litchfield Park	8,480	6,906	3.39	633	491	83
Luke AFB	816	NA	3.25	0	0	0
Palo Verde	65	48	3.44	NA	NA	0
Tolleson	8,485	7,108	3.89	1,070	645	239
Tonopah	2,160	1,634	3.50	116	83	14
Arlington	253	191	3.41	NA	NA	NA
Southwest Maricopa	84,607	66,339	3.21	7,633	5,375	1,272
Maricopa	1,411,583	932,814	3.25	99,226	66,583	20,273
Arizona	2,380,990	1,576,520	3.19	155,357	102,434	32,970

Source: US Census Bureau, 2010 Census.

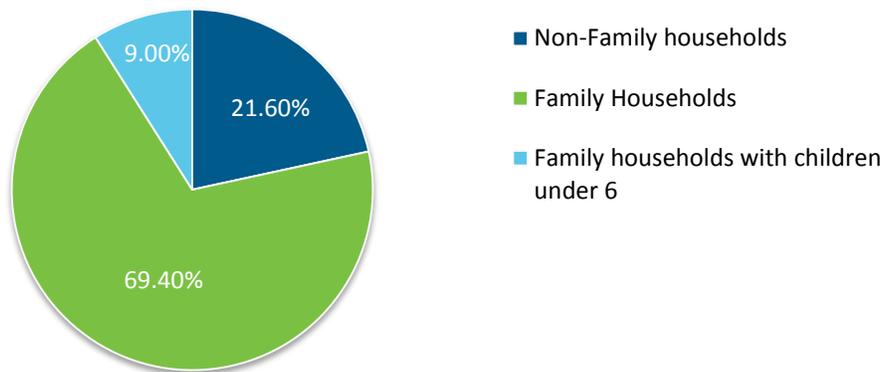
¹ A household that has at least one member of the household related to the householder by birth, marriage or adoption. NA Indicates estimates were too small to be disclosed.

Note: Estimates are based on the Zip Code Tabulation Areas (ZCTAs) that constitute each city within the Southwest RPC.

Exhibit 1-13



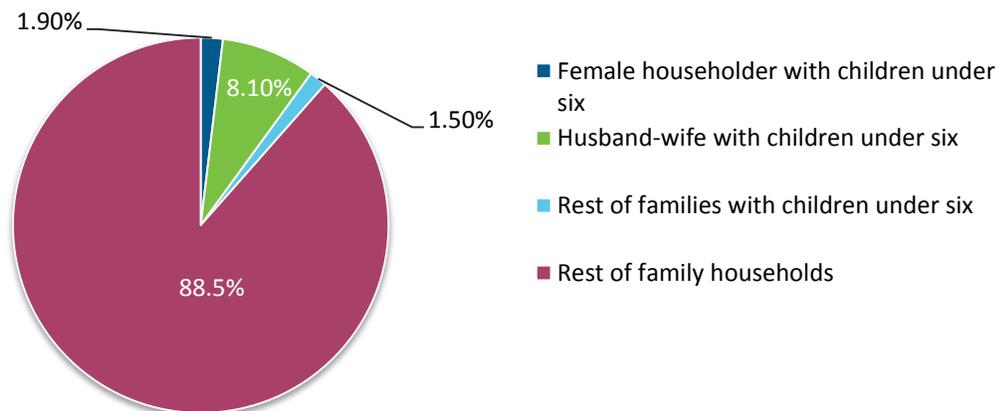
Southwest Maricopa Households



Source: US Census Bureau, 2010 Census.

Exhibit 1-14

Types of Family Households



Source: US Census Bureau, 2010 Census.

The above figures illustrate that husband-wife families of children under 6 comprise approximately 8% of the family households in the region, single mother households with children under the age of 6 accounts for 1.9% of the family households, while 1.5% represent other type of family households with children under the age of 6. Overall, out of the total number of households within the Southwest Region (family and non-family households), 9% of them have children 5 years or younger at home.

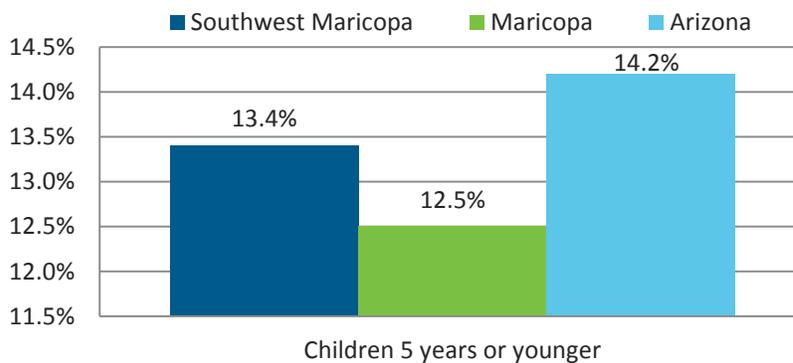
A persistent challenge faced by 21st century communities is related to the number of children being raised by grandparents. The Southwestern region is no different, rather, some its constituent communities, including Tolleson and Avondale, have greater percentages of grandparents raising children than the County or State averages. According to the 2010 Census approximately 13.4% of children ages five and



younger within the region are living under the care of their grandparents. This is slightly above the 12.5% of the children five and younger that are living with a grandparent in the Maricopa county and slightly below the 14.2% of the children under the same conditions in the state of Arizona. However, significantly more children are residing with their grandparents in the communities of Avondale, Gila Bend, Tolleson and Tonopah than the averages in the County and State; with Tonopah having the highest number of occurrences across all the Southwest communities, 1 out of every 5 children under the age of 5 in Tonopah are living with their grandparents. These data may prove valuable as plans are made to address First Things First Indicators in the future.

Exhibit 1-15

Children Five Years or Younger Living With a Grandparent



Source: US Census Bureau, 2010 Census.

Exhibit 1-16

Children under 5 Years Living with a Grandparent

AREA	CHILDREN UNDER 5 YEARS LIVING WITH A GRANDPARENT
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	Under 3 Years	3 and 4 Years	5 Years	Percent of Total Children under 5 years
Arlington	NA	NA	NA	20.5%
Avondale	759	350	157	16.0%
Buckeye	423	230	101	11.7%
Gila Bend	29	NA	NA	16.1%
Goodyear	314	194	67	10.4%
Litchfield Park	163	101	NA	13.0%
Luke AFB	0	0	0	0.0%
Palo Verde	0	0	0	0.0%
Tolleson	319	170	77	14.0%
Tonopah	67	38	NA	21.5%
Southwest Maricopa	2,079	1,100	436	13.4%
Maricopa	23,223	12,021	5,006	12.5%
Arizona	42,493	22,270	9,390	14.2%

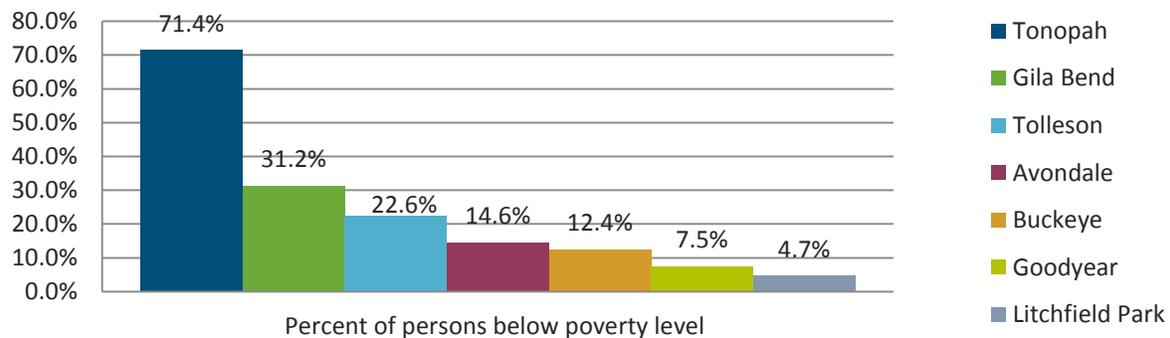
Source: US Census Bureau, 2010 Census.

NA Indicates estimates were too small to be disclosed.

Dramatic differences in household income are seen across the region and vary from the County, State and Nation. With the exception of Litchfield Park and Goodyear, the region has less household income that does the county, state and nation. Gila Bend, Tolleson, and Tonopah are considerably lower, with extensive poverty rates above 20%.

Exhibit 1-17

Persons below Poverty Level (Selected Communities)

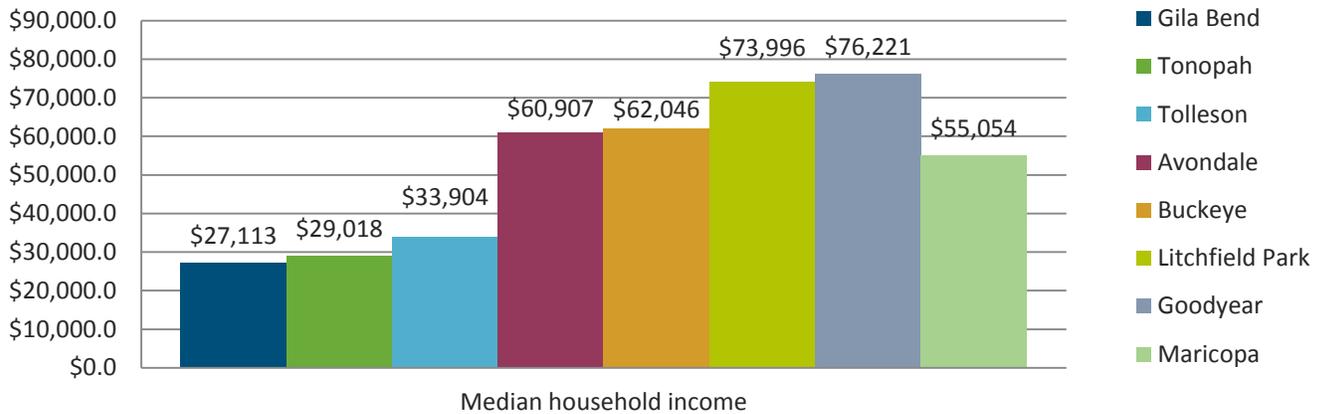


Source: U.S. Census Bureau American Community Survey 2006-2010 Estimates.

Exhibit 1-18

Median Household Income (Selected Communities)





Source: U.S. Census Bureau American Community Survey 2006-2010 Estimates.

In the figure below, likely the most telling statistic is the percent of persons in poverty. Clearly, Tonopah is of greatest concern with greater than 70% of its residents living below the poverty level, followed by Gila Bend and Tolleson.

Exhibit 1-19

Southwest Maricopa Selected Economic Characteristics

AREA	SOUTHWEST MARICOPA SELECTED ECONOMIC CHARACTERISTICS					
	Number of Households 2006-2010	Persons per Household 2006-2010	Median Value of Housing ¹ 2006-2010	Income Per Capita in Past 12 Months ²	Median Household Income 2006-2010	Persons below Poverty Level 2006-2010
Avondale	21,402	3.27	\$206,500	\$21,331	\$60,907	14.6%
Buckeye	13,193	3.21	\$194,500	\$22,305	\$62,046	12.4%
Goodyear	18,217	2.98	\$271,500	\$28,141	\$76,221	7.5%
Gila Bend	664	2.89	\$68,200	\$12,203	\$27,113	31.2%
Litchfield Park	2,341	2.25	\$336,100	\$47,203	\$73,996	4.7%
Tolleson	1,833	3.48	\$134,400	\$12,046	\$33,904	22.6%
Tonopah	1,576	3.03	\$120,000	\$17,994	\$29,018	71.4%
Maricopa	1,382,002	2.63	\$238,600	\$27,816	\$55,054	13.9
Arizona	2,326,468	2.63	\$215,000	\$25,680	\$50,448	15.3
United States	114,235,996	2.59	\$188,400	\$27,334	\$51,914	13.8

Source: U.S. Census Bureau American Community Survey 2006-2010 Estimates, County Business Patterns, Economic Census, Survey of Business Owners, Building Permits, Consolidated Federal Funds Report, Census of Governments.

¹ Value of owner-occupied housing units. ² 12 past months estimate for 2006-2010 in 2010 US Dollars.

Examination of other specific demographic characteristics indicates as well as having large numbers of foreign-born residents, many speak a language other than English. Especially in Tolleson and Gila Bend; thus, increasing the likelihood of a greater incidence of English Language Learners in preschool and



kindergarten. Another noteworthy demographic factor that predicts future economic trends is the low high school graduation rates in these two communities and respective lower incidence of college degrees.

Exhibit 1-20

Southwest Maricopa Population Selected Characteristics

AREA	SOUTHWEST MARICOPA SELECTED ECONOMIC CHARACTERISTICS					
	Female persons 2010	Living in Same House 1 Year & over 2006-2010	Foreign Born Persons 2006-2010	Language other than English ¹	High School Graduates ²	Bachelor's Degree or Higher ²
Avondale	50.4	76.0	16.3	36.1	78.0	20.1
Buckeye	45.4	70.3	11.2	27.1	84.5	19.8
Goodyear	53.1	75.7	11.6	22.9	90.0	28.7
Gila Bend	47.9	89.0	26.1	60.3	59.3	5.8
Litchfield Park	52.7	83.3	8.6	10.7	94.1	44.6
Tolleson	52.2	79.3	22.6	65.5	52.6	3.6
Tonopah	48.5	100.0	NA	14.3	100	25.0
Maricopa	50.5	79.4	15.9	26.5	85.6	29.0
Arizona	50.3	79.8	14.2	27.1	85.0	26.3
United States	50.8	84.2	12.7	20.1	85.0	27.9

Source: U.S. Census Bureau: State and County Quickfacts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, County Business Patterns, Economic Census, Survey of Business Owners, Building Permits, Consolidated Federal Funds Report, Census of Governments.

1 Spoken at home, percent for ages 5+ (2006-2010). 2 Percent of persons age 25+ (2006-2010).

In selected communities, females were significantly more likely to be the head of household as compared to the rest of Maricopa County and the State. Respectively, numbers of children in poverty were higher. Furthermore, in these communities, unemployment rates are slightly above the state and county rates in those communities from which employment data were available, indicating that Buckeye has significantly more unemployed. These indicators portend more stressful environments of young families and potentially less school readiness in the areas of language development and early literacy.

Exhibit 1-21

Southwest Maricopa Families Selected Characteristics

AREA	SOUTHWEST MARICOPA FAMILIES SELECTED CHARACTERISTICS (PERCENT)
------	----------------------------------------------------------------



	Single Parent Families ¹	Female Headed Households ¹	Children <12 in Poverty ²	Unemployed ³
Avondale/Tolleson	28.2	7.7	18.8	8.2
Buckeye	23.0	7.0	9.0	13.5
Gila Bend	17.0	5.1	0.0	9.6
Litchfield Park	18.2	6.1	11.9	7.5
Luke	11.9	0.1	1.9	9.0
Maricopa	27.6	5.9	21.4	8.6
Arizona	27.3	6.2	22.2	9.5

Source: Bureau of Health Systems Development, Arizona Department of Health Services, 02-14-2012, Based on the 2010 Census Bureau.

¹ Percent of total families per 2010 Census Summary File 1. ² Below 100 of Poverty, estimated from American Community Survey 2005-2009. ³ Average percent of unemployment (special Unemployment Report for Jan-Dec 2010 for Arizona Local Area Statistics).

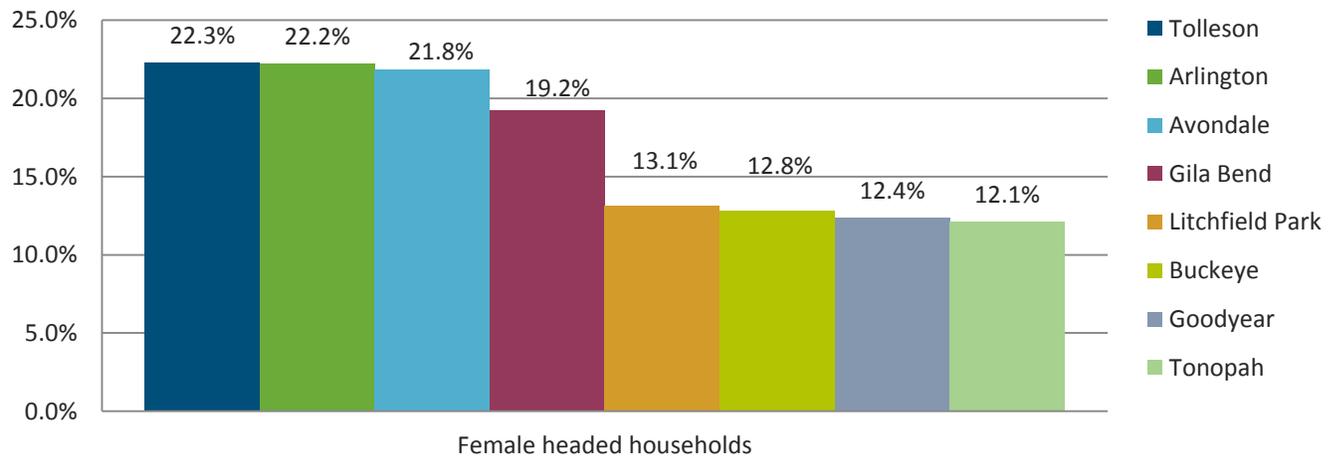
Data on female led households is provided as these households pose unique challenges for young children. Typically, mothers in these households are younger; less educated and has less income. These homes frequently benefit from targeted services and supports that might not be necessary in other communities. There are more than 66,000 family households in Southwest Maricopa, almost 8% of these family households have a female as a head of household as shown in exhibit 1-21. Furthermore, 7,633 of



these family households have children under the age of six, 16.7% of these families with young children have a female householder, as shown below in exhibit 1-23. Percent estimates for families with children under the age of 6 with a female householder by community are shown in exhibit 1-22. Tolleson presents the highest incidence of single mothers, according to the census 2010, there were a total of 7,108 family households in Tolleson; 1,070 of these family households have children under the age of 5, and out of these families with young children 22.3% have a female as a head of household.

Exhibit 1-22

Percent of Families with Children under Six with a Female Householder by Community

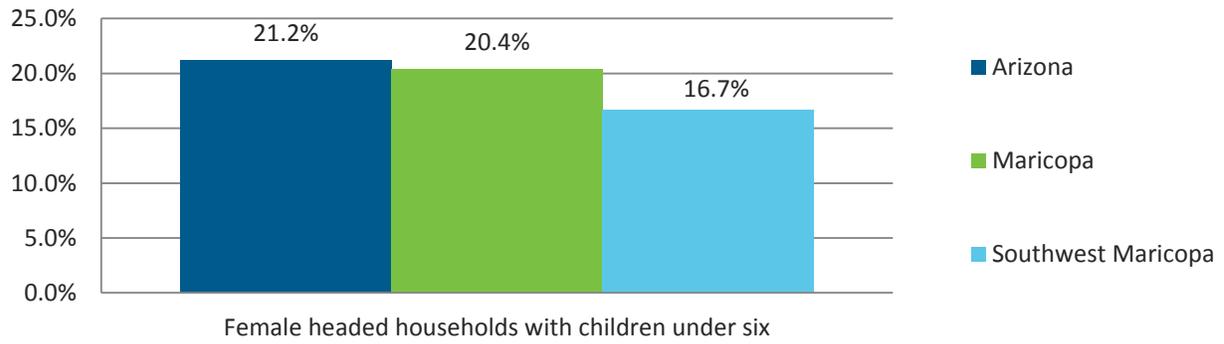


Source: U.S. Census Bureau, 2010 Census.

Exhibit 1-23

Percent Comparison of Families with Children Under Six with a Female Householder





Source: U.S. Census Bureau, 2010 Census.

Again, the Exhibit below indicates that children in Buckeye and Gila Bend are more likely to live in a family impacted by unemployment than their peers in adjacent communities.

Exhibit 1-24

Employment Status of Parents with Children under 6 Years



AREA	EMPLOYMENT STATUS OF PARENTS WITH CHILDREN UNDER 6 YEARS							
	Living with Two Parents				Living with Father		Living with Mother	
	Total	Father Only in Labor Force	Mother Only in Labor Force	Neither Parent in Labor Force	Total	Not in Labor Force	Total	Not in Labor Force
Avondale	4,826	1,679 (34.8%)	43 (0.9%)	107 (2.2%)	896	63 (7.0%)	2,511	687 (27.4%)
Buckeye	4,498	2,092 (46.5%)	66 (1.5%)	86 (1.9%)	627	165 (26.3%)	994	290 (29.2%)
Gila Bend	39	34 (87.2%)	0 (0.0%)	0 (0.0%)	27	0 (0.0%)	74	30 (40.5%)
Goodyear	4,056	1,473 (36.3%)	66 (1.6%)	32 (0.8%)	165	0 (0.0%)	870	274 (31.5%)
Litchfield Park	237	14 (5.9%)	0 (0.0%)	0 (0.0%)	0	0 (0.0%)	33	0 (0.0%)
Tolleson	170	19 (11.2%)	0 (0.0%)	0 (0.0%)	115	0 (0.0%)	409	68 (16.6%)
Southwest Maricopa	13,826	5,311 (38.4%)	175 (1.3%)	225 (1.6%)	1,830	228 (12.5%)	4,891	1,349 (27.6%)
Maricopa	225,290	105,450 (46.8%)	5,572 (2.5%)	4,598 (2.0%)	28,307	2,333 (8.2%)	83,683	26,439 (31.6%)
Arizona	342,479	155,798 (45.5%)	9,481 (2.8%)	7,296 (2.1%)	46,203	4,632 (10.0%)	141,635	44,491 (31.5%)

Source: US Census Bureau 2006-2010 American Community Survey.

NOTE: Data are based on a sample and are subject to sampling variability. Although the American Community Survey produces intercensal estimates of the population, the 2010 Census provides the official counts of the population.



Births

As shown in the Exhibit below, more than four thousand children were born in the year 2010 in the Southwest Maricopa, the number of births between the year 2009 and 2010 remained somewhat stable with a slight decrease from one year to the next one. Almost 40% of the total births registered in 2009 were births to unwed mothers, similar proportions were observed for the year 2010 in which 38.6% of the total children born in the Southwest region were born to unwed mothers.

Exhibit 1-25

Births by Community

AREA	BIRTHS BY COMMUNITY					
	2009			2010		
	Total Births	Mother 19 Years Old or Younger	Unwed Mother	Total Births	Mother 19 Years Old or Younger	Unwed Mother
Avondale	1,310	189	652	1,285	159	590
Buckeye	1,050	85	338	1,017	83	322
Goodyear	861	70	259	822	58	240
Tolleson	711	84	314	705	93	330
Litchfield Park	343	25	112	324	NA	101
Other Southwest Maricopa cities	164	25	82	151	NA	77
Southwest Maricopa	4,439	478	1,757	4,304	436	1,660

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. Retrieved on March 24, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2010/toc10.htm>.

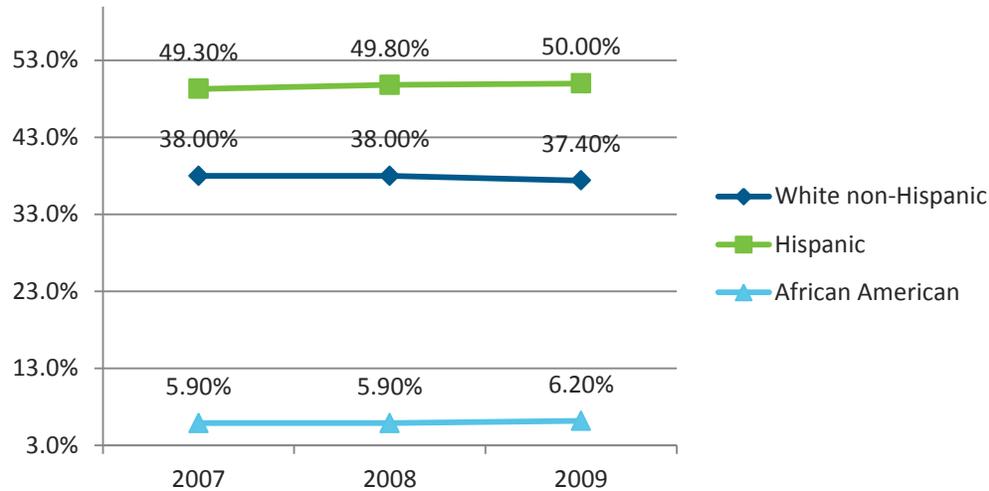
NA indicates estimates were too small to be disclosed.

The Southwest Maricopa communities have a greater proportion of Hispanic families than do the rest of the County or the State; births in this part of the county are not the exception to the ethnic composition of this region, and Hispanic's births have outnumbered the births of any other race/ethnicity over the last years. From the year 2007 to the year 2010, births to Hispanic mothers were registered more often than births to mothers of any other race/ethnicity. In the year 2009, 50% of the births were to Hispanic mothers while 37% of them were to White non-Hispanic mothers, with similar proportions occurring in the previous two years.

Exhibit 1-26



Percent Comparison of Births by Ethnicities 2007-2009



Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. Retrieved on March 24, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2010/toc10.htm>.

Exhibit 1-27

Births by Mother's Race/Ethnicity 2009

AREA	BIRTHS BY MOTHER'S RACE/ETHNICITY 2009 (PERCENT)					
	White non-Hispanic	Hispanic or Latino	African American	American Indian or Alaska Native	Asian	Unknown
Arlington	35.7	64.3	0	0	0	0
Avondale	28.6	56.5	8.3	1.7	4.2	0.7
Buckeye	49.1	42.6	4.1	1.4	2.4	0.4
Gila Bend	17.5	63.5	0	19	0	0
Goodyear	49.5	36.4	5.2	1.6	6.4	0.9
Litchfield Park	52.5	35.3	5	1.2	5.8	0.3
Luke AFB	0	100	0	0	0	0
Palo Verde	100	0	0	0	0	0
Tolleson	17.0	68.9	8.9	1.3	3.4	0.6
Tonopah	29.8	67.9	0	1.2	1.2	0
Southwest Maricopa	37.4	50.0	6.2	1.7	4.1	0.6
Maricopa	42.7	43.3	5.8	3.2	4.5	0.5
Arizona	43.0	41.4	4.7	6.7	3.7	0.6

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. Retrieved on March 24, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2010/toc10.htm>.



Southwest Family Survey

The Family Survey in the Southwest Maricopa region included families from the urban and rural communities of the Southwest of the Valley, while this sample was not created as a random sample of respondents, the respondents do represent a convenience sample of Southwest Maricopa residents with a broad range of characteristics. Thus, while we cannot assure that the opinions and points of view of the respondents represent the entire population, we can assure that the data offer insights of Southwest Maricopa residents and the issues that are salient to their lives.

A total of 362 families responded to the questionnaire, the vast majority of the respondent families tend to be long term residents of Arizona, 76.1% have been living in the state for more than six years, being a great number of them mothers (89.1%), whereas the number of respondent fathers was considerably lower (7.3%). More than 40% of the respondents (44.7%) reported being between 19 to 29 years old, followed by 40.8% that reported being 30 to 39 years old. The prevalence of married respondents in the sample (69.8%) was considerably higher than the number of families with single parents (19.8%), the median number of children living in the household for such families was three, while the median number of adults living in the family household was two.

The language spoken at home by survey respondents is primarily English (39.3%), while a slightly smaller percent reported to speak English & Spanish (30.1%) followed by 28.9% that report Spanish as the language spoken at home. As for race/ethnicities represented in the sample, 73.1% of the participants reported their ethnicity as Hispanic, followed by 15.7% that considered themselves White, and 5.7% that responded to be African Americans; the remaining participants (3.5%) classified themselves as belonging to “*other*” race/ethnicity.

Survey participant’s educational background was very diverse in the sample as well, 46.8% of the respondents in the sample reported high school as their highest educational level, 12.9% reported having a college degree, 3.7% of the respondents possess a postgraduate degree while 17.2% reported having 8th grade or less as the highest level of education.

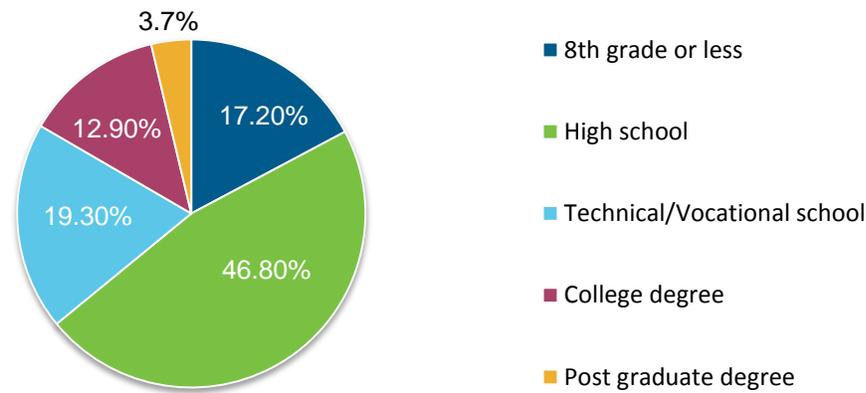
Thus, the prototypic responder was a married mother of three children under 40 years of age; primarily English speaking, with at least a high school diploma.

Results of the survey are reported in the following sections related to Childcare, Education, and Health rather than separately, in order to provide a more comprehensive picture of these components. The following data are only related to the nature and components of the survey.

Exhibit 1-28

Survey Participant’s Educational Background





Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

Survey respondents tended to be high school or vocational school trained. These data are reflective of the overall population of the region and educational level.

Exhibit 1-29

Southwest Family Survey – Selected Survey Respondents Characteristics

CHARACTERISTIC	SURVEY RESPONDENT CHARACTERISTICS (PERCENT)				
	Southwest Maricopa	Avondale	Buckeye	Goodyear	Tolleson
Relationship to child					
Mother	89.1	89.5	90.6	88.9	88.2
Father	7.3	8.6	3.1	9.5	9.8
Grandmother	3.1	2.0	6.3	0.0	0.0
Grandfather	0.0	0.0	0.0	0.0	0.0
Other	0.6	0.0	0.0	1.6	2.0
Gender					
Female	91.4	90.8	94.1	88.9	86.5
Male	8.6	9.2	5.9	11.1	13.5
Age					
Younger than 19	0.0	0.0	0.0	0.0	0.0
19 to 29 years	44.7	46.4	17.6	52.4	40.4
30 to 39 years	40.8	43.1	61.8	33.3	46.2
40 to 49 years	10.0	6.5	14.7	11.1	13.5
Older than 50	4.4	3.9	5.9	3.2	0.0

Exhibit 1-29 (continued)

Southwest Family Survey – Selected Survey Respondents Characteristics



CHARACTERISTIC	SURVEY RESPONDENT CHARACTERISTICS (PERCENT)				
	Southwest Maricopa	Avondale	Buckeye	Goodyear	Tolleson
Language spoken at home					
English	39.3	37.6	39.4	47.6	29.4
Spanish	28.9	34.2	39.4	14.3	19.6
English & Spanish	30.1	26.8	18.2	34.9	49.0
English & Other	1.5	1.4	3.0	3.2	2.0
Sample Size (n)	362	153	34	63	52

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children

As previously reported the survey respondents were primarily mothers between the ages of 18-29 who were either English or Spanish speakers.

The median number of children under the age of 18 living in a household for the participants in the family survey is three, 6.1% of the respondents reported having children with disabilities in their household, while 0.3% responded as having children in foster care.

Exhibit 1-30

Southwest Family Survey – Information about Children

AREA	INFORMATION ABOUT CHILDREN (PERCENT)				
	Families with children with disability	Families with children in foster care	Families with adopted or foster children	Families with one or two children ¹	Families with three or more children ¹
Avondale	6.8	0.7	2.0	43.3	56.7
Buckeye	9.4	3.2	3.2	48.4	51.6
Goodyear	6.9	1.6	3.3	53.2	46.8
Tolleson	5.9	1.9	2.0	51.0	49.0
Tonopah	2.7	0.0	5.6	42.1	57.9
Southwest Maricopa	6.1	0.3	3.2	46.9	53.1

¹ Children under the age of 18 living in household

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

The sample was diverse and captured families with children with disabilities and with children in foster care, as well as families with multiple children.



THE SOUTHWEST SYSTEM OF EARLY CARE AND EDUCATION

Early Childhood Education

Childcare in the Southwest Region is comprised of informal and formal structures of family childcare, center-based for and not-for profit care, Head Start and public preschool. Since 2011, Arizona has faced a crisis in preschool education with the elimination of funding for Early Childhood Block Grant preschool funding. As a result, children across the state have had to forego the opportunity for high-quality early education in preschool. This unfortunate circumstance has increased the demand for and load placed upon childcare and Head Start programs.

Educators and administrators recognize that this dearth of public funding for early education will impact kindergarten readiness, especially for children from under-resourced homes. Fortunately for many families, Maricopa County Head Start and its delegate program, Westside Catholic Charities has traditionally run a high quality program, designated by the national Office of Head Start as a Center of Excellence that serves approximately 1300 children annually.

Perspective on Childcare

Arizona families and childcare providers have witnessed dramatic changes in state funding and support for the industry. The Arizona Childcare Association reports the following has occurred since 2009:

- 48,000 children were provided childcare in February 2009.
- 24,500 children will be served in June 2012.
- 3,000 teachers no longer working in child care.

General

In 2009 the National Association for the Education of Young Children (NAEYC) adopted a position statement to promote excellence in early childhood education using a framework for best practice. It is based on evidence-based research of child development and learning, and promotes excellence and equity to enhance the potential of all young children.

NAEYC identified a number of factors affecting young children's learning opportunities including the family's economic status and education, ethnicity, culture and home language. From a programmatic perspective, ensuring there are enough quality programs with qualified teaching staff remains challenging.

Four significant recommendations were included:

- Reduce the achievement gap identified by demographic data by providing enriched, intentional, and intensive learning experiences for under-resourced children



- Institute a comprehensive, effective, evidence-based curriculum with robust content and a scope and sequence for teaching and learning in all domains (physical, social and emotional, and cognitive)
- Improve teaching and learning by promoting effective planning of intentional learning experiences and environments building on children’s interests and abilities in all domains.
- Insure that there are adequate knowledgeable teachers that know the children in their classrooms and have the ability to adapt curriculum to the strengths and needs of the children in order to enhance learning and development.

In Arizona, childcare occurs in many forms, including friends and families (Kith and Kin), babysitting, organized cooperative groups of families, and family childcare settings with under five children (unlicensed, unregistered) as well as, more formal registered, and licensed small and larger center based care programs. Parents of children with disabilities have more difficulty finding care for their children as the needs of their children increase, especially if the needs are related to behavior. In addition, Arizona has a broad collection of school-type programs including public and private preschools for children with and without disabilities, Early Head Start (both home- and center-based), and Head Start programs. However, many families report being assigned to waiting lists of at least one month.

Kith and Kin Programs

Families in Arizona, as all other states, rely extensively on home and family members as a mainstay of childcare. *Kith and kin* or *kinship care* are terms interchangeably used to describe care in which children are cared for in the home of a relative or someone close to the family (Goertzen, Chan, & Wolfson, 2006), including people related to a child by blood, marriage, or who have a family-like relationship (Goertzen, Chan, & Wolfson, 2006). According to the US department of Health and Human Services, approximately 29% of all children in out of home care are placed with family or close friends (Peters, 2005), indicating a significant increase from the 18% estimated in 1981 (Kusserow, 1992). This increase is likely due to two confluences, more single parents of young children working outside the home and generally more working parents needing care.

Mallon (n.d.) claimed that “the connection to family, kin, and the community of origin is essential to healthy child growth, development and wellbeing” (p. 3) He explained the advantages of kinship care in that kith and kin care can: (1) Be viewed as a form of family preservation and support; (2) be viewed as the natural helping approach to supporting children within their family systems; (3) preserve significant family attachments, sense of personal and historic identity and culture for children; (4) assist in providing continuity of care and meeting the developmental needs of children when their parents cannot; (5) enable children to live with persons whom they know and trust; (6) reduce the trauma children may experience when they are placed with persons who initially are unknown to them; (7) reduce the stigma involved for the child and family when relatives provide care rather than a non-relative; (8) reinforce children’s sense of positive identity and self-esteem, which flows from knowing and being connected to their family history and culture; (8) reinforce children’s connections to their siblings; (9) encourage families to consider, be responsible for, and rely on their own family members as social support resources; (10) encourage fewer moves of children, as they are less likely to disrupt in kinship homes; (11) encourages reunification in an earlier time frame (12) enhance children’s opportunities to stay connected to their own communities while promoting community responsibility for children and families; and (13) strengthen the ability of families to give children the support they need.

However, Mallon (n.d.) also proposed some potential concerns about kith and kin care as follow: (1) Some relatives may allow parents to have unauthorized access to the child; (2) some relatives may be abusive or neglectful toward the children because they came from the same “troubled” family; (3) often kinship care



may create financial disincentives to returning the child to the parent since relatives may receive more money than a parent can receive; (4) children may remain longer in formal state-funded kinship care than traditional non-relative foster care; (5) relatives may add conflict to the relationships between the agency, the family and the caretaker (6) relatives may have greater needs for services and support than traditional non-relative foster care homes; and (7) kinship care may create a disincentive for parents to comply with the treatment plan.

As with most models of care outside of the home, there are proponents as well as opponents to the Kith and Kin. However, it remains one of the major sources of care for a large portion of families today. Efforts in the Southwest Region and around the state are underway to support Kith and Kin providers with resources and training that may lead to licensure, is that is the goal of the provider.

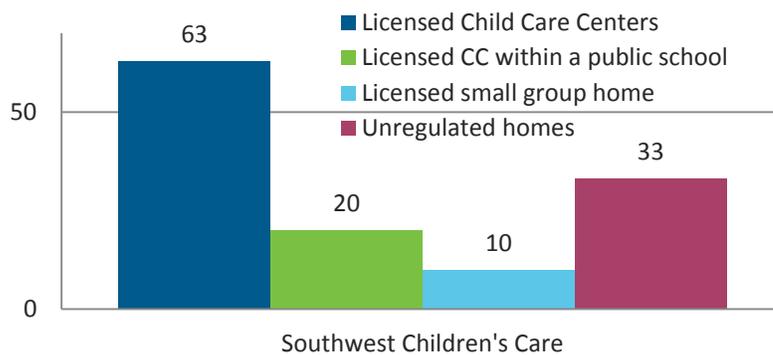


Southwest Childcare Facilities

According to the Arizona Department of Economic Security (DES), as of February 2012, there were 93 licensed facilities providing care for children in the Southwest region, 68% of them were private licensed childcare centers, 22% were licensed childcare centers within a public school district, the remaining 10% were licensed as small group homes; there were also 33 unregulated childcare group homes that voluntarily registered in the Arizona Child Care Resource and Referral (CCR&R). Shown in Appendix E Exhibit E-2.

Exhibit 2-1

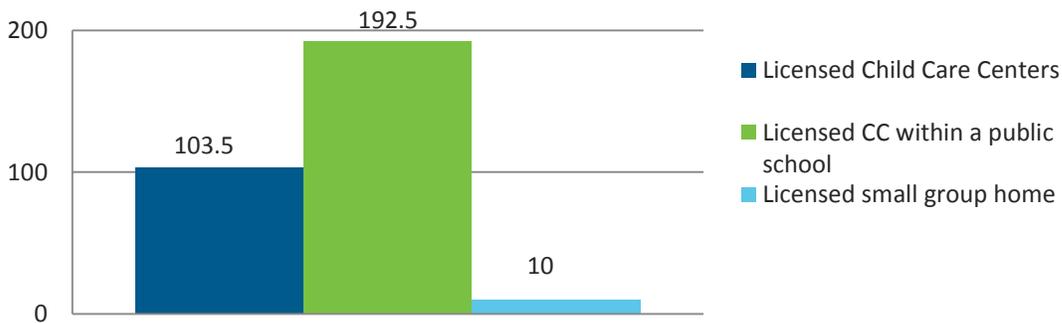
Southwest Maricopa Childcare Facilities



Source: Arizona Department of Economic Security, Child Care Resource and Referral data provided by FTF.

Exhibit 2-2

Southwest Maricopa Licensed Care Average Children Capacity



Source: Arizona Department of Economic Security.



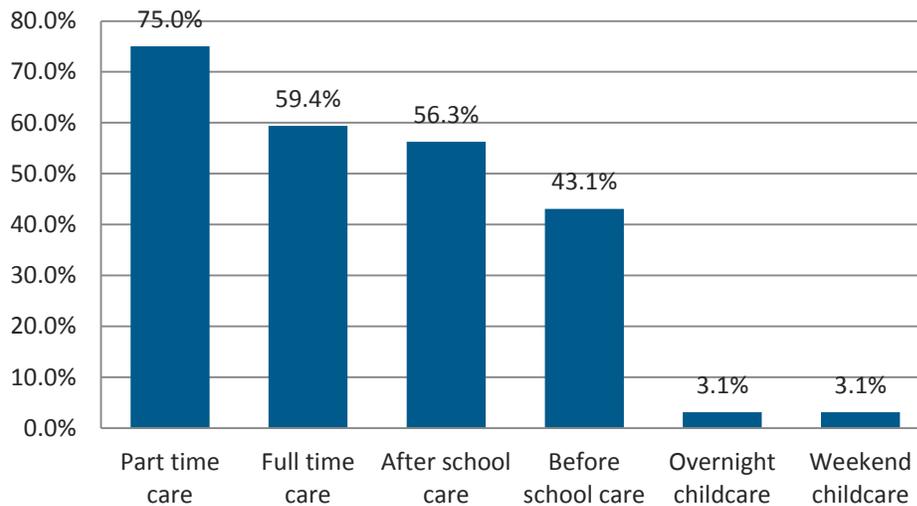
Southwest Survey Findings

Given the limited childcare information available at the regional level, a survey was conducted with a sample of families and providers in the Southwest Maricopa region; while this sample does not represent the information for all the providers in the region, it depicts information pertinent to this region in particular.

As shown in exhibit 2-3, three quarters of the surveyed providers offer part time care, almost 60% of them offer full time care, while overnight and weekend care is almost nonexistent in the region with 3% of the providers offering this type of service, in contrast, as shown in exhibit 2-4, 19% of the surveyed families indicated needing childcare services during not unavailable days or hours, more than half of the families needing the service selected nights and weekends.

Exhibit 2-3

Type of Care Provided



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit 2-4

Family Survey – Need of Childcare During not Available Days/Hours

AREA	CHILDCARE NEED DURING NOT AVAILABLE DAYS/HOURS					
	Yes	No	If so, when?			
			Nights	Weekends	Before School	After School
Southwest Maricopa	18.6	72.9	52.0	54.2	26.1	40.0

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

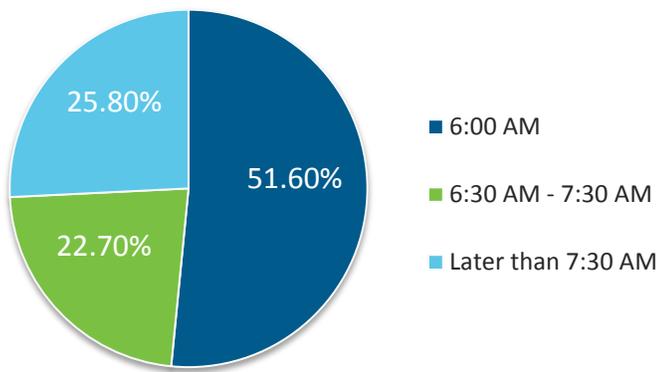
Percentages do not add up to 100; participants were allowed to select more than one choice and not all choices are shown.



According to the childcare provider’s survey, opening hours for childcare facilities range from 6:00 am to 9:00 am, more than 50% of the providers reported opening at 6:00 am, and a little more than one quarter open later than 7:30 am. Closing times range from as early as 12:30 pm to 6:30 pm; three quarters of the providers have closing times after 4:00 pm while 25% reported closing times earlier than 4:00 pm; most of the early closing times belong to preschools offering childcare services. In general, the majority of the providers are open for at least 8 hours a day, 52% of them are open 12 hours, while 16% are open less than 7 hours a day.

Exhibit 2-5

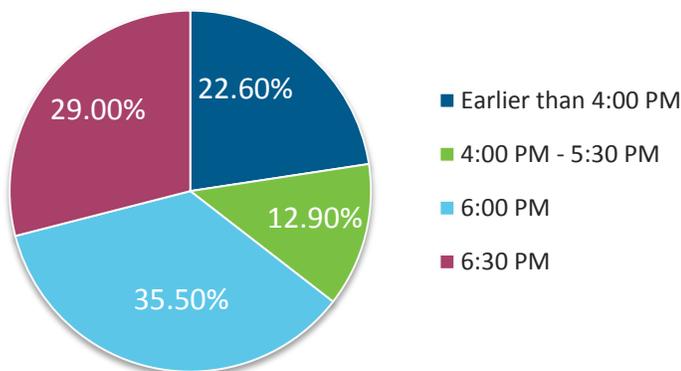
Hours of Operation – Opening



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit 2-6

Hours of Operation - Close



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.



As shown in exhibit 2-7, almost half of the participant families in the survey (45.2%) reported needing childcare services for 10 hours or less, 25% identified needing care 10 to 20 hours a week, while 29.8% indicated to need the services for more than 20 hours per week. Childcare decisions, in these families were made primarily by mothers (53.7%), while joint childcare decisions (mother and father) were made by 39.6% of the respondent families.

Exhibit 2-7

Southwest Family Survey – Childcare Weekly Hours Needed

AREA	CHILDCARE WEEKLY HOURS NEEDED			
	Do not use childcare	0-10 hours	10-20 hours	More than 20 hours
Avondale	66.1	14.9	11.6	7.4
Buckeye	70.8	16.7	8.3	4.2
Goodyear	46.2	23.1	11.5	19.2
Tolleson	63.0	13.0	6.5	17.4
Tonopah	82.6	13.0	0.0	4.3
Southwest Maricopa	63.6	16.6	9.2	11.0

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

Shown in the Exhibit below is the median number of hours spent in a daycare facility for a child who receives full time care. Typically, a child spends a median of 8 hours per day in a daycare, this is, one half of the providers reported having children that spend at least 8 or more hours in their facilities for full time care while the other half reported having children that spend 8 or less hours for full time care on a daily basis.

Exhibit 2-8

Median Number of Hours for Full Time Care

	MEDIAN NUMBER OF HOURS FULL TIME CARE
	Median number of hours
Hours per day	8

Hours per week 39

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

“A lot of daycares are not open on the weekends so you have to go and look at them during the week a lot of them aren’t open when you get out of work. So those are huge barriers! I think those are probably the two most prominent that I’ve noticed.”

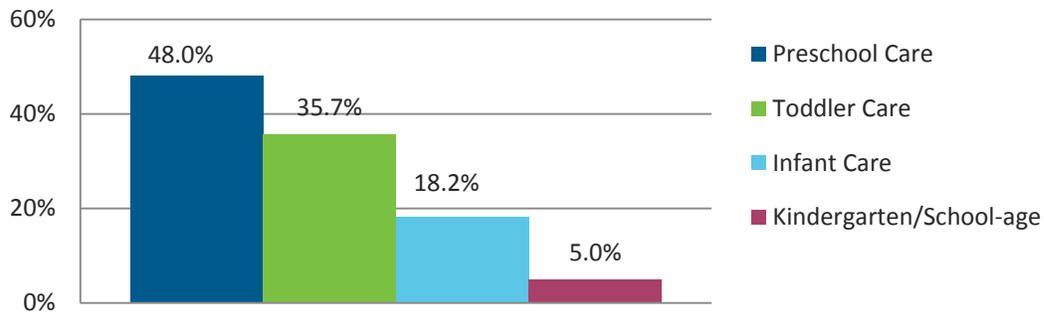
Southwest Maricopa resident



Families in need of childcare services might come across unavailability at the daycare of their choice; to account for this, providers were queried about waiting list placement, as shown below, the age group with the most incidences of waiting list placement are preschool age children, which doesn't come as a surprise considering the recent cuts in early childhood education funding in 2010. Forty eight percent of the participant providers reported maintaining an active waiting list for preschool-age children, followed by 35% of them that acknowledge placing toddlers in their waiting lists.

Exhibit 2-9

Providers with Waiting List



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

The most common reason to use childcare indicated by respondent families is to be able to work, indicated by 73.7%; 18.2% indicated needing childcare to perform personal activities while 23.2% were in need of services in order to attend school.

Exhibit 2-10

Southwest Family Survey – Reasons to Use Childcare

AREA	REASONS TO USE CHILDCARE			
	So I Can Work	So I Can Go to School	Personal Activities	Care for Other Children/Family
Avondale	75.0	17.5	12.5	7.5
Buckeye	NA	NA	NA	NA
Goodyear	76.9	23.1	26.9	0.0
Tolleson	66.7	25.0	25.0	8.3
Tonopah	66.7	16.7	33.3	0.0
Southwest Maricopa	73.7	23.2	18.2	5.1

NA indicates data were not available.

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

Location of Childcare Facilities

A complete list of available licensed childcare facilities by zip code in the Southwest Maricopa region is provided in Appendix A exhibit A-1, additionally families in the survey sample were asked how far they live



from their childcare provider, only 2.2% of the families in this sample reported to be more than 30 miles apart from their current provider, more than three quarters of the respondents (84.4%) reported to be 10 miles or less from their childcare while 13.3% indicated to be between 10 and 20 miles from their provider, the only exception was Buckeye, respondents from that area (14.3% of them) indicated to be between 21 to 30 miles from their provider.

Exhibit 2-11

Child Care Distance

AREA	CHILDCARE DISTANCE			
	0-10 miles	10-20 miles	21-30 miles	More than 30 miles
Avondale	100	0.0	0.0	0.0
Buckeye	71.4	14.3	14.3	0.0
Goodyear	73.7	21.1	0.0	5.3
Tolleson	69.2	30.8	0.0	0.0
Tonopah	66.7	33.3	0.0	0.0
Southwest Maricopa	84.4	13.3	0.0	2.2

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

Most families in the sample (94.4%) use their personal car to transport children to and from their current provider. Respondents from Avondale tend to use personal cars less often for childcare transportation (88.9%) and use (4.4 out of 100) public transportation more often.

Exhibit 2-12

Child Care Transportation

AREA	CHILDCARE TRANSPORTATION			
	Personal car	Public Transportation	Childcare Transportation	Other
Avondale	88.9	4.4	2.2	8.9
Buckeye	100	0.0	0.0	0.0
Goodyear	100	0.0	4.2	0.0
Tolleson	100	0.0	0.0	0.0
Tonopah	100	0.0	0.0	0.0
Southwest Maricopa	94.4	2.8	1.9	4.7

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

Childcare Cost in Arizona

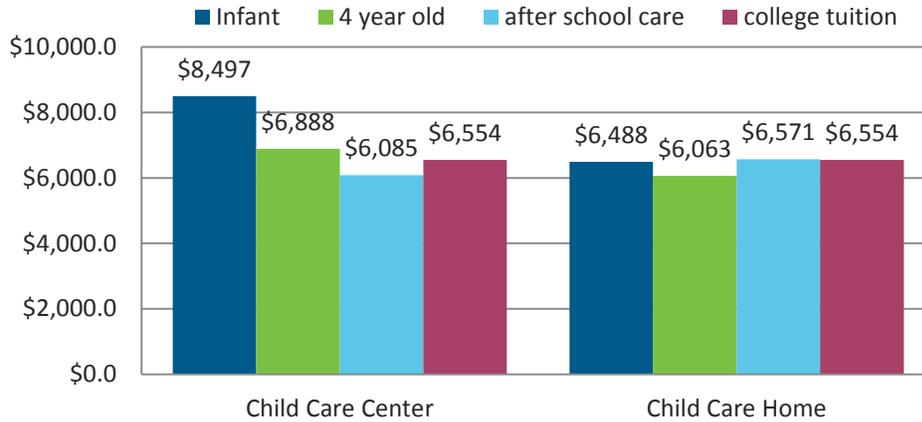
The cost of care for families of young children is high and getting higher. The figures below indicate that the cost of care for young children is as high as annual tuition at one of the three State Universities. These costs cannot be sustained for families who are frequently required to make choices regarding quality of



care and the need to work. In addition, subsidies for childcare are annually being reduced, as is access to quality public preschool.

Exhibit 2-13

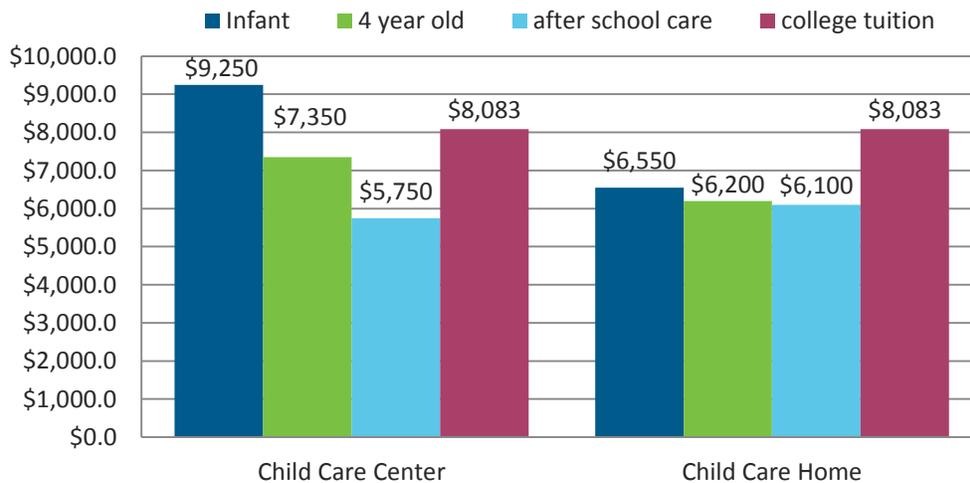
2010 Average Annual Fees for Child Care in Arizona



Source: National Association of Child Care Resource and Referral Agencies, Child Care in America 2010 Fact Sheets.

Exhibit 2-14

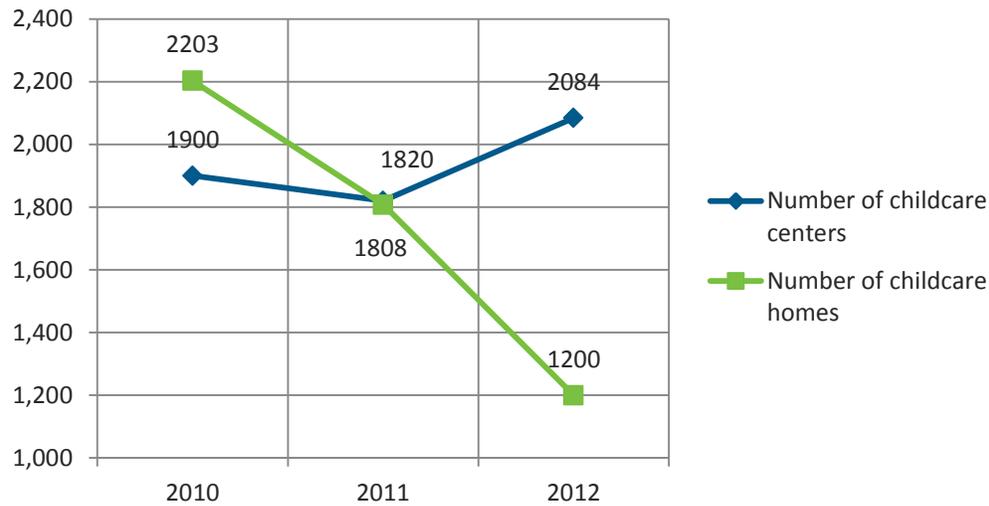
2011 Average Annual Fees for Child Care in Arizona



Source: National Association of Child Care Resource and Referral Agencies, Child Care in America 2011 Fact Sheets.

Increases in cost of care are outpacing income at a significant and unsustainable rate. Impressive is the rate relationship between infant cost of care in childcare centers and tuition rates at state universities.



Exhibit 2-15Arizona Number of Childcare Centers and Childcare Homes Three-Year Trend

Source: National Association of Child Care Resource and Referral Agencies, Child Care in America 2010, 2011 & 2012 Fact Sheets.

Of note is the change in the capacity or number of available slots in childcare settings in the region and across the state. This is likely a function of the recent increased cost of licensure per slot; thus, based on slots the cost of licensure went up precipitously and providers became more judicious when proposing and licensing. In reality, the number of slots is more in-line with what providers are actually capable of providing (B. Liggett, personal interview, 29 March 2012).

However, this does not explain the deceleration in number of childcare homes. It is more likely that the dramatic reduction in childcare homes is related to the continued cuts to childcare subsidies that began in 2010. In 2009, 46,000 Arizona families received childcare assistance. By December 2011, 26,000 children were denied service and were placed on waiting lists (<http://azcca.org/category/des-news>, Retrieved, 06 September 2012). As families were unable to pay for care, it is likely that providers ceased doing business.

Exhibit 2-16Arizona average annual fee for a full time infant three-year trend



Source: National Association of Child Care Resource and Referral Agencies, Child Care in America 2010, 2011 & 2012 Fact Sheets.

Of interest in the above figure are: 1) the differences between center and home based care; and 2) the relative stability of the cost of home based care. The fluctuation across the three years is likely statistical in nature rather than reflecting a true trend; however, the difference between years one and three is 5%.

According to the Market Rate Survey conducted in the State of Arizona, the state median daily charge for full-time care, for infants is \$38.75; for children one to two years \$34.80, for children three to five years \$30.0, and the median daily charge for school age children is \$27.0 in the State. As shown in the table below, the childcare providers in the southwest Maricopa region reported similar charges.

Exhibit 2-17

Average Weekly Charges

AGE GROUP	AVERAGE WEEKLY CHARGES	
	Full Time Care	Part Time Care
Infant	\$187.90	\$141.80
Toddler	\$161.50	\$118.96
Preschool	\$147.30	\$95.01
Kindergarten/School-age	\$122.70	\$83.70

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

“The only one [childcare] right in my neighborhood is too expensive, and the hours do not work.”

Southwest Maricopa resident



Financial and Support Assistance

The Child Care and Development Fund (CCDF) allocation for fiscal year 2012 in Arizona was estimated to be \$115,228,600, available for childcare services and related activities from October 2011 to September 2012.

The state of Arizona through the Department of Economic Security (DES) can assist eligible families with childcare costs; guidelines with income eligibility and copayments or fees for eligible families are illustrated in APPENDIX E Exhibit E-3

While the most recent data for amounts disbursed by the state for child support assistance in the southwest Maricopa region are not yet available, it is estimated that in the year 2008 (from May 2007 to April 2008) the state disbursed \$4,358,486.96 to 181 childcare providers supporting a total of 2,753 children in the southwest Maricopa region, a complete allocation by zip code of the amounts disbursed by the State in the southwest Maricopa region for the above referenced year is shown in appendix Exhibit E-4.

Exhibit 2-18

Southwest Maricopa Region Family Survey – Monthly Childcare Spending

AREA	CHILDCARE SPENDING AND FINANCIAL ASSISTANCE				
	Childcare Financial Assistance		How Much Do You Spend Monthly on Childcare		
	Yes	No	0-\$100	\$100-\$300	More than \$300
Avondale	12.5	79.2	77.8	8.3	13.9
Buckeye	12.5	87.5	83.3	0.0	16.7
Goodyear	3.3	86.7	64.0	12.0	24.0
Tolleson	11.1	83.3	53.8	38.5	7.7
Tonopah	11.1	77.8	62.5	37.5	0.0
Southwest Maricopa	8.9	83.7	68.1	16.0	16.0

Percentages do not add up to 100; participants were allowed to select more than one choice and not all choices are shown.
Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

Although 36.4% of the families reported receiving financial or support assistance from the state, only 9% of the families acknowledge having some sort of childcare financial assistance, 7% of the families receiving financial help are receiving DES childcare financial assistance while 88.3% were receiving either SNAP or WIC benefits. Also, the families as detailed in the Exhibit shown below were receiving some other types of support from the state. Furthermore, given that the constituents of the region are lower income and younger than other regions, it is somewhat surprising that so few receive state support for childcare or TANF.

“All of the income that I received at the time went partially to childcare.”

Southwest Maricopa resident

Exhibit 2-19

Southwest Family Survey – Financial and Support Assistance Received from the State.





Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

“The recent economic recession and legislation changes have definitely hurt certain communities especially those communities that don’t have the finances to participate in such early education programs that may be available”.

Southwest Maricopa resident



Early Childhood Education Quality

Several items in the family survey were related to quality aspects of the childcare providers. Even though it could be assumed that families with young children have a better understanding of childcare services, 20.2% of the respondent individuals in this sample, identified themselves as having no knowledge about childcare while 14.2% said to be in need of more information, the remaining reported to have either a good (35%) or a great (30.6%) knowledge about childcare. These findings are commensurate with findings in selected other regions across the State, likely indicating that approximately 35% of families need more knowledge and understanding of the childcare system and services.

The survey uses a question as to the parent's perception of the job satisfaction of the childcare provider as a measure of sense of security with the provider. General findings indicate that families were satisfied and secure with their childcare and that their children were happy in these settings. Relatively few indicated not knowing where to lodge a concern over quality of care.

Survey Findings

- Less than half of the families (40.2%) included in the survey sample report being with the same childcare provider for more than 12 months.
- 82% of parents believe that their childcare providers enjoy their work
- 67% of families would not change care providers
- 73% of parents report that their children look forward to going to childcare
- 13% could not identify whom they would call if they had a serious concern about their provider.

Exhibit 2-20

Southwest Maricopa Family Survey – Information about Current Childcare

AREA	INFORMATION ABOUT CURRENT CHILDCARE USED (PERCENT)								
	Length of Time with Provider			Caregivers Work Enjoyment ¹		Child Looking Forward to Go To Childcare ¹		Know Who to Call If Concerned about Childcare ¹	
	1-6 months	6-12 months	More than 12 months	Yes	No	Yes	No	Yes	No
Avondale	21.2	36.4	42.4	82.1	2.6	79.5	7.7	67.5	12.5
Buckeye	25.0	50.0	25.0	80.0	0.0	75.0	0.0	75.0	0.0
Goodyear	35.0	30.0	35.0	82.6	0.0	65.2	0.0	66.7	16.7
Tolleson	36.4	27.3	36.4	66.7	16.7	54.5	9.1	36.4	18.2
Tonopah	0.0	42.9	57.1	87.5	0.0	75.0	12.5	57.1	0.0
Southwest Maricopa	26.8	32.9	40.2	81.9	3.2	72.8	5.4	63.4	12.9

¹ Percentages do not add up to 100 some choices were excluded.

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children

Another important aspect evaluated through the family survey instrument was parent's knowledge of preschool education in Arizona through the Arizona Early Learning Standards, which, among other



qualities, serve as a tool to assist parents, caregivers and teachers to create meaningful and appropriate learning experiences for preschool children. Families were asked if they were aware of the Standards; less than half (42.1%) indicated awareness of the Standards while 37.6% indicated not being aware. Information about parental involvement in children’s educational development was also obtained, respondents were asked the frequency in which they have meetings with their childcare provider 50.5% of the respondents reported to have meetings as needed, 23.8% mentioned to never have such meetings while 21.8% have either monthly meetings (19.8%) or two to three times per year (2%).

Exhibit 2-21

Southwest Maricopa Family Survey Measures of Quality

AREA	MEASURES OF QUALITY (PERCENT)					
	Licensing Reports Important when You Decide on Childcare ¹			Aware of Arizona Early Learning Standards ¹		
	Yes	No	Don't know	Yes	No	Don't Know
Avondale	76.5	11.8	11.8	51.8	30.4	17.9
Buckeye	NA	NA	NA	33.3	66.7	0.0
Goodyear	73.3	6.7	16.7	34.5	44.8	20.7
Tolleson	72.2	5.6	22.2	40.0	40.0	20.0
Tonopah	54.5	9.1	36.4	33.3	33.3	33.3
Southwest Maricopa	73.6	9.6	16.0	42.1	37.6	20.3

NA indicates data were not available.

¹ Percentages do not add up to 100, some choices were excluded.

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children

One of the most salient aspects that respondent families rated as very important when choosing a childcare program was children’s activities, 73.1% of the families considered children’s activities a very important aspect in their decision making process, followed by location (68.9%), hours of operation (65.7%) and cost per day (65.7%). A list of activities and their respective ratings is in Appendix B. Another important aspect identified by the surveyed families for selecting childcare services were licensing reports, 73.6% considered licensing reports important when making decisions about childcare.

Exhibit 2-22

Southwest Maricopa Family Survey Attributes Rated as Very Important When Choosing Childcare Providers





Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children

Families were queried about possible areas where providers need improvements, 55.4% of the families agreed that health and safety was one of the most important areas in which daycare providers need to be trained followed by 43.3% that considered child development as the most important area while 17.3% that recognized early reading as one of the areas in which providers should enhance their trainings.

Exhibit 2-23

Southwest Maricopa Family Survey – Areas Where Providers Need Training

AREA	AREAS WHERE PROVIDERS NEED TO BE TRAINED RATED AS “MOST IMPORTANT” (PERCENT)							
	Child Development	Health & Safety	English	Mental health	Disabilities	Physical development	Language	Early Reading
Avondale	42.7	61.2	15.5	13.4	14.6	11.9	14.3	19.3
Goodyear	44.2	55.8	19.5	10.0	19.5	12.2	17.1	15.0
Tolleson	48.6	36.4	6.1	6.1	9.7	3.2	11.8	6.1
Southwest Maricopa	43.3	55.4	16.2	13.3	16.5	11.3	15.0	17.3

Percentages do not add up to 100; participants were allowed to select more than one choice.

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children

“If the best education in Arizona is mediocre in other communities, then I would definitely say that the lower socio-economic communities where most of the African Americans are very poor most definitely get the shorter end of the stick in regards to quality education and childcare.”

Southwest Maricopa resident



Children with Disabilities

With more and more young children being diagnosed with developmental problems, early childhood education for children with special needs is needed. According to the American Community Survey, (2008-2010). More than 11% of the population in Arizona has a disability, and 0.7% of the population is children under five years old with a disability.

Exhibit 2-24

Children Under 5 Years with A Disability

AREA	CHILDREN UNDER 5 YEARS WITH A DISABILITY			
	Population All Ages with a Disability	Children Under 5 with a Disability	Children Under 5 with a Hearing Difficulty	Children Under 5 with a Vision Difficulty
Avondale	5,337 (7.3%)	96 (1.3%)	96 (1.3%)	44 (0.5%)
Buckeye	3,387 (7.3%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Goodyear	4,324 (7.4%)	103 (2.0%)	103 (2.0%)	0 (0.0%)
Maricopa	371,826 (9.9%)	2,096 (0.7%)	1468 (0.5%)	1260 (0.4%)
Arizona	715,833 (11.5%)	3,399 (0.7%)	2,179 (0.5%)	1,991 (0.4%)

Source: US Census Bureau 2008-2010 American Community Survey.

NOTE: Data are based on a sample and are subject to sampling variability. Although the American Community Survey produces intercensal estimates of the population, the 2010 Census provides the official counts of the population.

The general trend of percentages of children with disabilities is under-represented as compared to national trends that indicate more general trends closer to 10% of the population by kindergarten. However, it is important to recognize that the majority of children that eventually are enrolled in special education receive that designation after enrolled in school, as a result of school failure. Additionally, the majority of young children identified as having a special need are identified as having speech and language delays.

The Arizona Department of Economic Security's Division of Developmental Disabilities (DDD) provides services to individuals with specified diagnostic conditions, namely cognitive disabilities, cerebral palsy, autism or epilepsy. As of June 30, 2009, the Division of Developmental Disabilities served over 30,000 adults and children.

The division acts like a fully capitated health plan, contracting with individual providers (including health plans, acute care providers, rehabilitation providers, and long-term care providers) for the delivery of a wide array of services such as home health nurse or aide services, attendant care, respite, transportation, habilitation services, durable medical equipment, day treatment and training programs. DDD accesses behavioral health services through the RBHA system for the delivery of needed behavioral health services for its members. Support coordinators who work for DDD are responsible for coordinating care delivery.

People who qualify for both DDD and Medicaid have their services paid for through the Arizona Long Term Care System (ALTCS) or the AHCCCS acute care system. The Division of Developmental Disabilities also provides 100 percent state-funded services for 7,893 (FY 2011 YTD) children and adults ineligible for Medicaid. The scope of available services for this group is the same as for the ALTCS-eligible group; however, there are sometimes waiting lists for state-only funded services.



Analysis of the prevalence of families receiving services from the Division of Developmental Disabilities in the southwest Maricopa region indicates that the number of children between zero and 2.9 years increased from 2007 to 2009 from 187 to 231 as did services for children 3 to 3.9 years of age from 158 to 173. As the prevalence was frequently below 25 persons, no table is presented. However the zip code of 85338 had the greatest number across both years (Arizona Department of Economic Security, 2007, 2009).

The Arizona Early Intervention Program (AzEIP) is designed to provide early intervention services for children from birth to age three who have disabilities or developmental delays. The program is part of a continuum of intervention resources for children who need specialized services in order to be successful in school.

AzEIP is part of the federal Individuals with Disabilities Education Act (IDEA) aimed at enhancing the development of infants and toddlers with disabilities to reduce educational costs by minimizing the need for special education through early intervention and minimize the likelihood of institutionalization, maximize independent living, and enhance the capacity of families to meet their child's needs.

Children enrolled in AzEIP are transitioned to the local school agency by age 3. At that time, a child is once again assessed, and an individual plan for developmental and educational services is developed in conjunction with the schools.

AzEIP is a state- and federally-funded program for children, with the majority of funding from the federal AzEIP Grant (\$10 million). State funding (\$3.6 million) represents approximately 25% of the funding. AzEIP is administered as a partnership among the Department of Economic Security, Arizona State Schools for the Deaf and the Blind, the Arizona Department of Education, the Arizona Department of Health Services and AHCCCS. The agency where most services are received takes the "lead" in coordinating the care for the child. From October 1, 2009, to September 30, 2010, over 10,000 children were served. Similar to the distribution of families of young children receiving services from the Division of Developmental Disabilities, children enrolled in AzEIP, 55 received services in 2007 and 69 in 2009. Clearly, the number of children served increased across the two years. The prevalence in each zip code is less than 25; thus, in order to preserve confidentiality, no table is presented (Arizona Department of Economic Security, 2007, 2008).

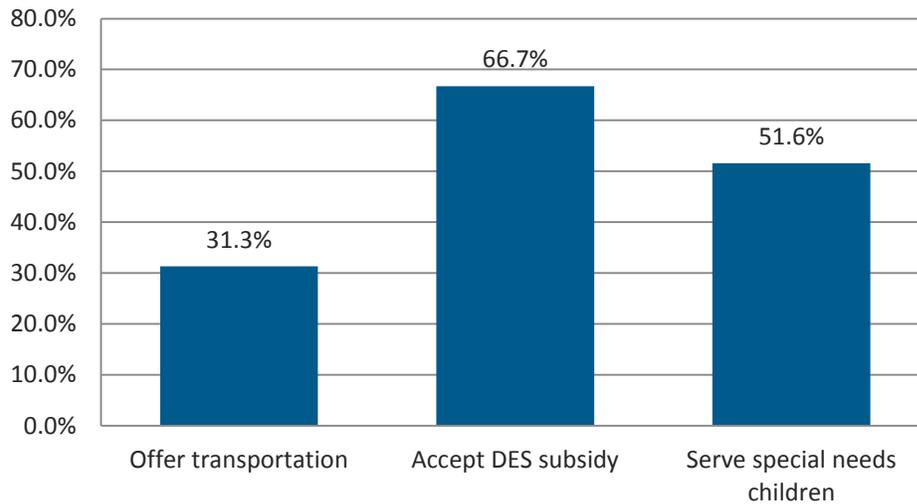
Inclusion of children with special needs, defined as the opportunity for a child with such needs to actively participate in programs and activities along with children who do not have special needs; has shown to be not only beneficial for the child with special needs, but also to the other children in the setting, the families and the community as well. Early childhood education centers were queried about the inclusion of children with special needs in their settings and the necessary training that this conveys. While the median number of children with special needs currently attending any one of the surveyed centers did not exceed one, as shown in the exhibit below, more than half of the providers reported to have the necessary skills and training to serve children with special needs. This is encouraging and is considered an asset to the general community.

Childcare providers were queried as to additional services provided to families. As previously noted, over half provide services to children with special needs and accept DES subsidy.

Exhibit 2-25

Services Available





Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

It is also worth noting that 70% of the educators that participated in the Teacher/Caregiver survey for the southwest Maricopa region acknowledge having formal training focused on the care of children with disabilities and other special needs.

Exhibit 2-26

Educators Training

AREA	TRAINING (PERCENT)			
	Early Childhood Training		Disabilities Training	
	Yes	No	Yes	No
Southwest Maricopa	65.0	35.0	70.0	30.0

Source: Southwest Maricopa Teacher/Caregiver Survey conducted by Southwest Institute for Families and Children

Early detection of special needs on children is essential to truly help children reach their fullest potential; the earlier a disability is recognized, the more parents and providers can do to help a child. Screenings to assess if a child would be in need of special services are an added tool for early detection; as shown below, more often than not such screenings are not conducted, 14% of the providers surveyed admitted conducting screenings once a year with a varying number of children screened generally depending on the size of the center.

Exhibit 2-27

Frequency of Screening for Special Needs

SPECIAL NEEDS SCREENING FREQUENCY (PERCENT)



	Never	Once a Year	Twice a Year	3-6 Times a Year	More than 6 Times a Year
Percent	57.1	14.3	9.5	14.3	4.8

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit 2-28

Number of Children Screened

	CHILDREN SCREENED LAST YEAR
	Number of Children
Average	25.08
Median	21.50
Minimum	0
Maximum	90

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.



Head Start Overview

Catholic Charities Social Services has partnered with Maricopa County Head Start Zero-Five (MCHSZF) Program for over twenty years as the Delegate Agency providing services to the children and families in the western portion of Maricopa County. The program is committed to providing high quality child development and family support services to children and families, which enhances each child's cognitive, physical, emotional, and social well being through a family-centered and nurturing environment.

The MCHSZF Program operates both Head Start and Early Head Start services through center and home-based service models. Head Start serves children 3-4 years of age while Early Head Start serves pregnant women and children birth to 3 years of age. The Head Start program operates during the public school year, August-May, while the Early Head Start provides services year-round. Most Head Start center-based classrooms operate two 3.5-hour sessions per day Monday –Thursday while Early Head Start center-based classrooms operate 7 hours per day during the public school year (August-May), five days per week. Services for these children continue in June and July through the home-based model.

Early Head Start home-based services include weekly 1.5-hour home visits. The purpose of these home visits is to support the parent as the child's primary nurturer and educator by providing the parent with education and modeling support strategies for children's growth and development. This population also attends bi-weekly socialization activities with 10-12 families. The purpose of these socialization activities is to provide parents and children with opportunities to socialize with one another through activities that promote the children's growth and development and to provide parents with skills that promote children's learning at home.

The curriculum used by both Head Start and Early Head Start is the Creative Curriculum, a scientifically based comprehensive program for children with versions for 0-3 years of age and 3-5 year olds. It is aligned with the National Association for the Education of Young Children (NAEYC) Early Childhood Programs Standards and Accreditation Criteria. In addition, the preschool version is aligned with the Head Start Outcomes and Framework and the Arizona Early Learning Standards.

Creative Curriculum guides teachers in planning and implementing developmentally appropriate activities that promote the children's social-emotional development and learning. The Infant/Toddler/Two version emphasizes consistent and responsive care environments, meaningful daily development, and cognitive and brain development so children build the confidence they need to explore their surroundings. The Preschool version emphasizes learning in core areas of literacy, math, science and social studies. The Scholastic Early Childhood Program is another curricula used in this Head Start program. This curriculum is also a scientifically based program that provides early learning, skills and experiences that are critical for future success in school including early literacy, language, math, and science while encouraging personal and social development. The Scholastic curriculum provides Spanish resources as well as activities for parents to do in the home with their children to extend learning beyond the classroom.

Using MCHSZF demographic data from 2008-2011, teacher and child population information was obtained. Of note, was the relationship found between teacher characteristics and those of the child population. A long-standing body of convergent data indicates that when children and parents can identify with their teacher on variables including race, ethnicity or language background, communication is improved, which has led to increased/improved child outcomes. Horn-Wingerd and Hyson (2000) argue that as the population grows more diverse, it becomes increasingly important to have a diverse and representative corps of teacher. A more diverse teaching pool encourages a more culturally sensitive environment for children. Further, an early childhood educator who speaks more than one language is an invaluable resource in the early childhood setting (NAEYC, 1995).

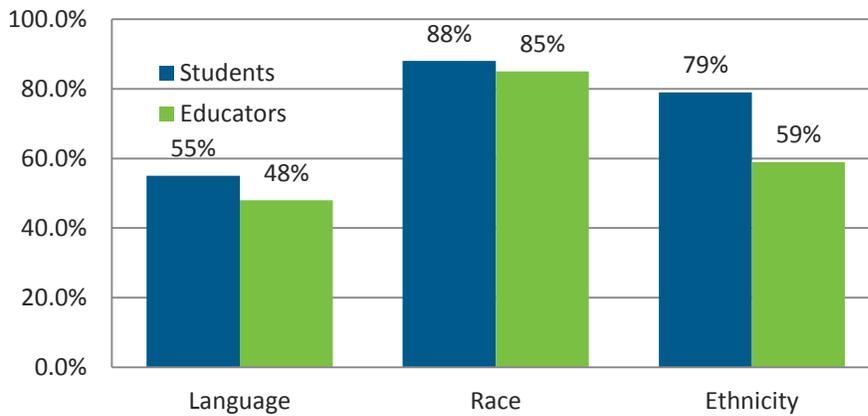


Childhood Educators and Children Demographic Comparison

For the Year 2010-2011: Population 2754 (children); 255 (childhood educators)
 79% of children are of Hispanic or Latino ethnicity compared to 59% of childhood educators, 55% of children speak Spanish compared to 48% of childhood educators.

Exhibit 2-29

Comparison of Teacher Child Demographics



Source: 2011 3-Year Retrospective Analysis of Maricopa County Head Start Enrollment and Performance

The National Head Start Association designates MCHSZF, along with its Delegate Agency Catholic Charities, as a Program of Excellence. Having first achieved this designation on July 3, 2003, the program has twice renewed this 3-year designation by demonstrating continuous significant positive impacts on children, families, and the community at large.

Exhibit 2-30

Catholic Charities Head Start Enrollment 2008-2011

YEAR	CATHOLIC CHARITIES HEADSTART ENROLLMENT MARICOPA							
	Total enrollment	IEP ¹ Children	Ethnicity/Race				Primary Language	
			Hispanic ²	White	African American	Asian	English	Spanish
2008-2009	1233	11%	84%	91%	6%	1%	39%	58%
2009-2010	1251	11%	81%	90%	8%	0.8%	41%	56%
2010-2011	1245	14%	79%	91%	8%	0.8%	45%	52%

Source: Maricopa PIR database 2008-2011.



¹ Individualized Education Plan. ² Hispanic is not a race; individuals might belong to this category and also belong to any other race shown.

Exhibit 2-31

Catholic Charities Head Start Enrollment by Child Age 2008-2011

YEAR	ENROLLMENT BY CHILD AGE		
	2008-2009	2009-2010	2010-2011
2 years old	<25	<25	<25
3 years old	320	316	281
4 years old	928	931	960

Source: Maricopa PIR database 2008-2011.

Exhibit 2-32

Catholic Charities Head Start and Maricopa Head Start Enrollment by Child Age 2008-2011

YEAR	ENROLLMENT BY CHILD AGE		
	2008-2009	2009-2010	2010-2011
2 years old	<25	<25	<25
3 years old	852	741	761
4 years old	1790	1953	1972
IEP Children	277	316	339

Source: Maricopa PIR database 2008-2011.

¹ Individualized Education Plan.

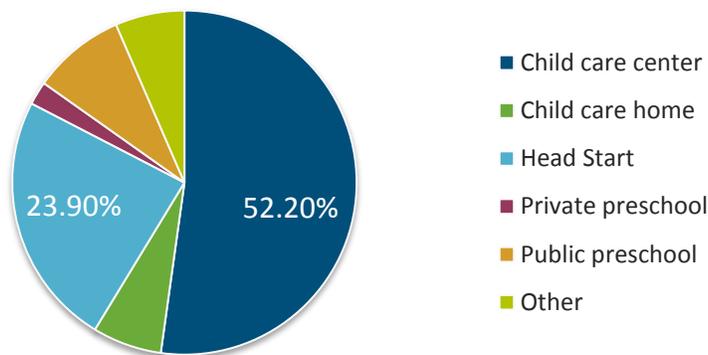


Early Childhood Educators' Insights

According to the Bureau of Labor Statistics data, the industries employing the most childcare workers in 2010, were childcare service facilities with 22% of the educators being employed by such facilities, followed by private households (15%), elementary or secondary schools (11%) and other type of organizations such as religious, civic, professional or similar organizations employing 8% of the childcare workforce. Over half of the respondents to the teacher/caregiver survey for the southwest Maricopa region are employed at Head Start and Early Head Start centers, 20% of the educators work at private preschools, 20% of them are employed either at a childcare center (17.5%) or working in a childcare home (2.5%), while 6.5% reported to work at preschools within public school districts.

Exhibit 2-33

Early Childhood Educators by Type of Center



Source: Southwest Maricopa Teacher/Caregiver Survey conducted by Southwest Institute for Families and Children

More than half of the educators (56%) had been working for the same center for more than 2 years, while 10% had been employed by the same center for 1 to 2 years; the remaining educators (34%) had been employed by the same centers for 12 months or less. The vast majority (90%) of the educators that participated in the survey had been working as early childhood educators for more than 2 years, whereas a very small percent had been an early childhood educator for 24 months or less.

Education

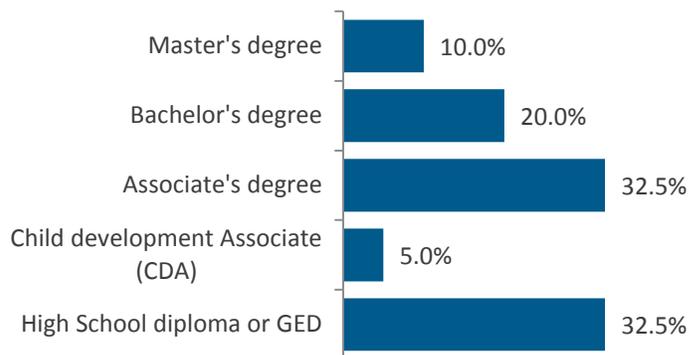
Foundations for minimum educational levels for early childhood educators in Arizona are determined by the Arizona Department of Health Services (ADHS), while the requirements might vary with settings and some employers require education above ADHS minimum educational levels, no childcare worker can be below the DHS minimum requirements. Currently a teacher-caregiver must have at least a high school diploma or equivalent, no less than 12 credit hours from an accredited college or university and 6 months of childcare experience; whereas the requirements for an assistant teacher-caregiver are milder, they only require a high school diploma or equivalent, high school current and continuous enrollment, or 12 months of work experience in a childcare facility, either one of those requirements would suffice. Requirements grow less stringent for less demanding positions (teacher-caregiver aide, student aide), and the expectations are higher for facility directors.



While, in some childcare settings, less than a high school diploma is required, all the educators in the survey sample reported to have at least a high school diploma or GED, equal proportion of participants recognized having either a high school diploma or an associate's degree as their highest level of education (32.5% respectively), 20% of the educators acknowledged having a bachelor's degree, whereas 10% of them reported a master's degree as their highest level of education. The median education for the early childhood educators in the sample is at the associate's level, which is above of the typical level of education for a childcare worker entry-level position according to the US Department of Labor Occupational Outlook Handbook.

Exhibit 2-34

Childcare Worker's Highest Level of Education



Source: Southwest Maricopa Teacher/Caregiver Survey conducted by Southwest Institute for Families and Children

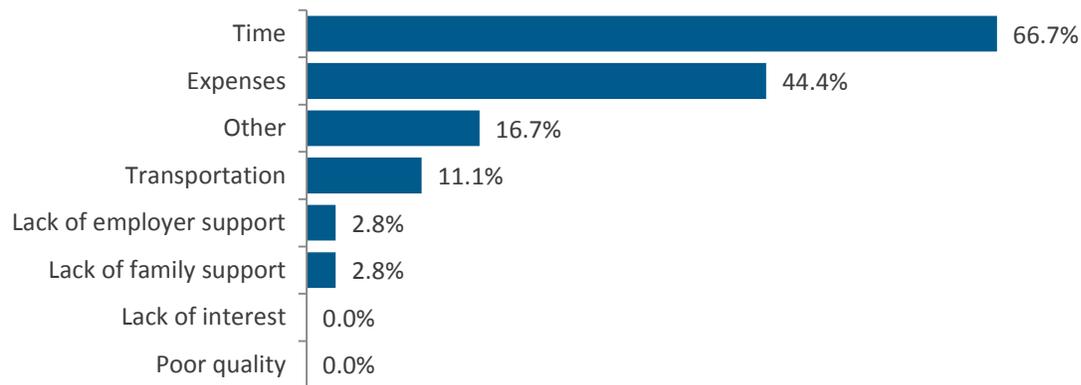
Educational levels for participants in the sample do vary by setting, early childhood educators that are employed at Head Start or Early Head Start centers appear to have higher educational levels than those educators working at for-profit childcare centers; 77% of the educators at Head Start centers have at least an associate's degree or higher, while 58% of the educators are at that educational level at for-profit childcare centers.

Professional Development

Training requirements for early childhood educators are regulated by ADHS as well, as of now, in the state of Arizona 18 or more actual hours of training every 12 months are required in at least two of the following topics, 1. Child growth and development, 2. Health and safety issues, 3. Program administration, planning, development or management and 4. Availability of community services and resources, including those available to children with special needs.

The median number of professional development hours offered over the last year to educators were 22, ranging from zero to 120 hours; while the median number of hours required by their employers was 18 which is the bare minimum to satisfy Arizona requirements. When educators were queried about the obstacles they face when attempting to access professional development 67% of the educators agreed that time is one of the main obstacles faced, followed by 44% that selected expenses as one of the reasons, transportation related issues were also considered as professional development obstacles by 11% of the participants, while lack of support by either employers or family was the reason indicated by 6% of the educators. It is worth noting that none of the educators considered poor quality of professional development programs offered or lack of interest from their part as obstacles in accessing such programs.

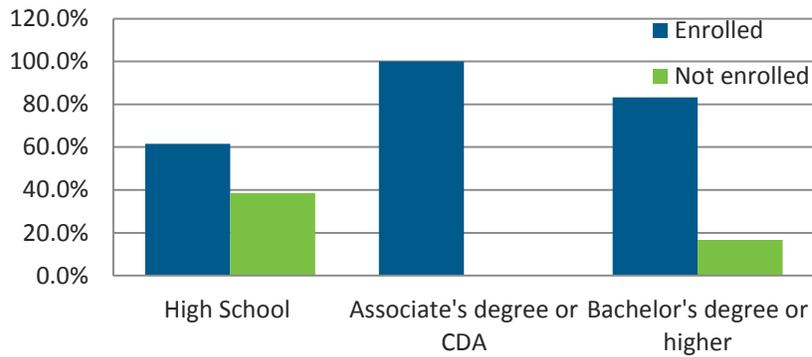


Exhibit 2-35Obstacles Faced by Educators When Attempting to Access Professional Development

Source: Southwest Maricopa Teacher/Caregiver Survey conducted by Southwest Institute for Families and Children

Sixty five percent of the survey participants had been enrolled in any type of formal early childhood training program in the last 18 months, while 70% reported having a formal training focusing on the care of children with disabilities and other special needs in the last 18 months; almost 18% of the educators reported not having any type of formal training over the last 18 months. It is worth mentioning that educators with an associate's degree or CDA were more likely to be enrolled in any type of formal early childhood training over the last 18 months than educators with only a high school diploma, practically all of the educators with an associate's degree received formal early childhood training in the last 18 months while 62% of educators with a high school diploma received such trainings.

Exhibit 2-36Early Childhood Training Enrollment in the Last 18 Months by Educational Level



Source: Southwest Maricopa Teacher/Caregiver Survey conducted by Southwest Institute for Families and Children

T.E.A.C.H.

Teacher Education and Compensation Helps (T.E.A.C.H.) is a national program based in North Carolina that began in 2009. It is comprehensive scholarship program that links training, compensation, and commitment to improving the quality of early childhood care and education experiences for young children and their families. The program works to enhance education and health services for children 5 and younger to have access to a high quality early education by helping their teachers develop their professional skills. Arizona is one of 20 states that participate in T.E.A.C.H., and the Association administers the program in Arizona for Supportive Child Care (ASCC) under contract with First Things First.

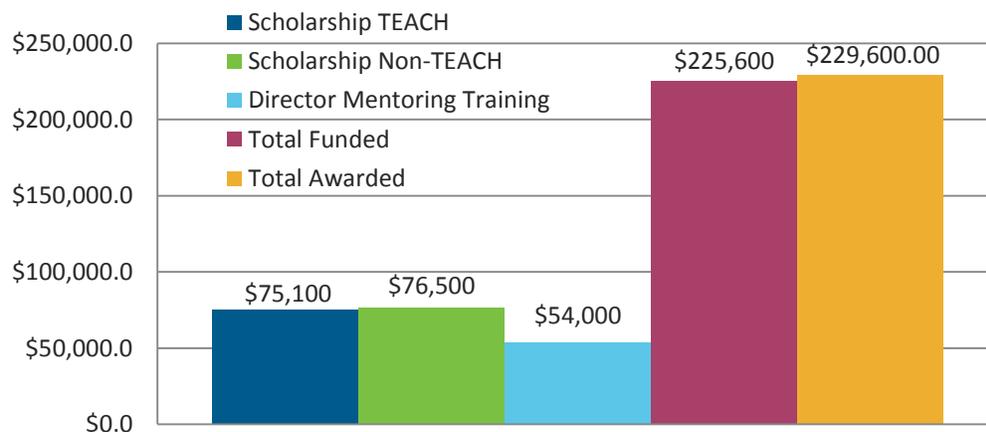
Teach a statewide initiative that addresses the First Things First Priority Need 3- Highly skilled and well-prepared early childhood development and health workforce. T.E.A.C.H provides early childhood professionals opportunities for professional development by providing trainings, scholarships and incentives to individuals pursuing a credential, certificate, or degree in early childhood development or other appropriate specialty area.

- Covers 80% of cost tuition and required course work
- 90% of textbook cost
- Funded approximately 312 scholarships for teachers and caregivers since 2009
- In 2010, 56 scholarships were available; one was used.
- In 2011 15 TEACH scholarships were available and used
- In 2012 15 are available in the southwest Maricopa region
- \$208,000 allocated in 2010
- \$30,000 per year for the years 2013-2015

Qualifications:

- Must have a high school diploma or GED
- At least 18 years of age
- Work at least 30 hours per week with children birth to 5 years old at a licensed, certified, or tribally regulated center, family childcare home or group home
- Are employed in the state of Arizona
- Earn \$20 or less an hour



Exhibit 2-37Professional Development Awarded Amount Southwest Region Maricopa 2012

Source: First Things First. Ready for School Set for Life. (2010). Retrieved June 19, 2012, from <http://www.azfff.gov/Pages/default.aspx>

Total amount awarded in 2012 to the Southwest Maricopa region for Services Funded for Children was \$2,457,670. 9%, of that, \$229,600 was allocated to Professional Development. According to FTF an estimated 12,000 children from birth to 5 years will be reached through the TEACH program. Exhibit 2-0 illustrates the funded breakdown, with over 41% of scholarship for TEACH getting funded and about 34% for Non-TEACH scholarships. This demonstrates that more funding is invested toward the TEACH scholarships than non- TEACH and director mentoring/training.

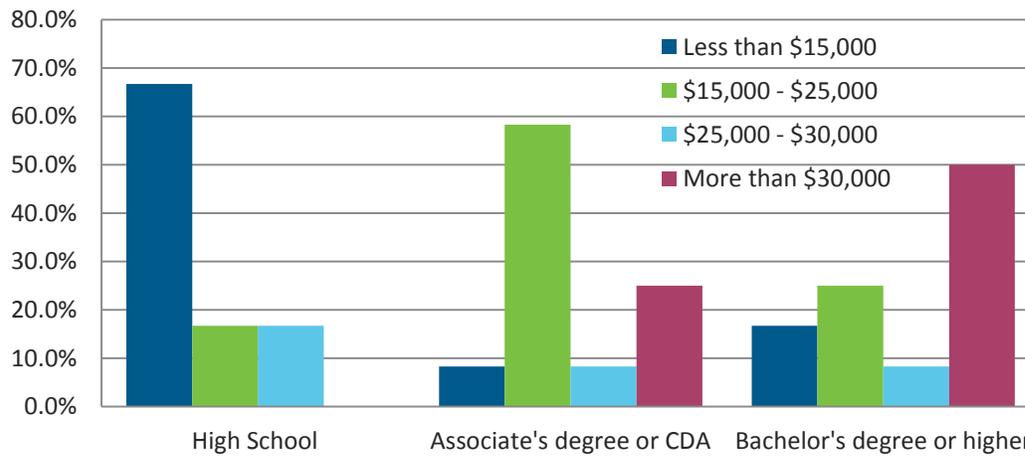
- 24% Director Mentoring/Training
- 1% Currently available

Salary and benefits

According to the bureau of labor statistics the annual mean wage for a childcare worker as of May 2011 in Arizona is \$21,440, which is a little above of annual mean wage for the nation estimated in \$21,320. The median salary category for survey participants is \$15,000 to \$25,000; 32% of the educators reported earning less than \$15,000 in the last year, 32% said they earned between \$15,000 and \$25,000, and 11% earned between \$ 25,000 to \$30,000 while 24% reported earnings of more than \$30,000 over the last year. As could be expected, income increases as education increases, participants with higher education in the sample were more likely to have a higher annual salary, 50% of the educators that reported having a bachelor's degree or higher earned more than \$30,000 last year compared to 25% of the educators with an associate's degree or CDA as their highest level of education. None of the educators that reported having a high school diploma as their highest educational level indicated having earnings greater than \$30,000 over the last year.

Exhibit 2-38

Early Childhood Educator's Salary by Educational Level



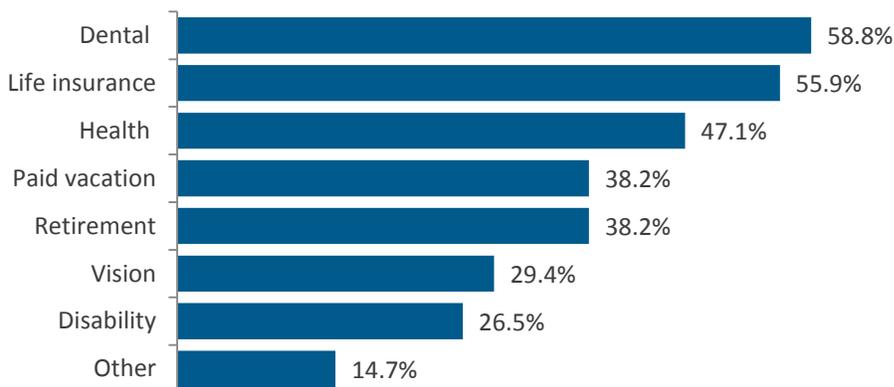
Source: Southwest Maricopa Teacher/Caregiver Survey conducted by Southwest Institute for Families and Children

While the majority of the educators in the sample (97%) responded having at least one type of benefit provided by their employer, a portion of them (24%) reported having only one benefit, 64% of the educators that reported having only one benefit commented that such benefit was paid vacation. 41% of the respondents in the sample indicated having 4 benefits or more provided to them. Educators responded having several different types of benefits provided by their employer, as shown in exhibit 1-6 below, more often than not employers provide dental and life insurance to their employees, and almost half the time (47%) health insurance is provided as well, while disability is one of the benefits that is provided less often to educators, 27% of them reported having such benefit.

Exhibit 2-39

Type of Benefits Provided to Early Childhood Educators





Source: Southwest Maricopa Teacher/Caregiver Survey conducted by Southwest Institute for Families and Children.

Analysis of respondents' reports of benefits by employer indicates a wide variance between types of employer. Professionals employed by public or private preschools have higher salaries and better access to benefits. One hundred percent of teachers were paid over \$30,000 in public and private pre-school programs. This is likely due to the fact that public preschool programs require certification in either early childhood or special education. Twenty-nine percent of childcare center teachers reported salaries greater than \$30,000. Head Start followed as the as 65% of teachers were paid between \$15,000 and \$24,000 annually. Not surprisingly, the least paid group of teachers was employed by childcare centers and Head Start as assistant teachers. Care should be taken, even though the sample of teachers was random, as the subsamples of childcare homes were less than 25 respondents.

Noteworthy when examining these data is the moderate (63.5%) number of teachers with associate or higher credentials; thus, 37.5% of teachers have not matriculated from a professional teaching program, which might explain the low rates of pay for many teachers. Also, of concern is the low (31.8) percent of teachers who are satisfied with their benefits. Inversely, 68.2% are not satisfied. As the vast majority (100% of sample) of childcare professionals are women, the lack of benefits for many of those surveyed is of concern.

Exhibit 2-40

Head Start – Public Schools Versus other for Profit and not-for Profit Providers.

CHARACTERISTIC	TYPE OF CENTERS			
	Public/Private Schools	Head Start	Childcare Centers	Childcare homes
Salary higher than \$30,000	100	0	29	
Salary between \$25-29K	0	6	14	100



Salary between \$15-24K	0	65	14	
Salary less than \$15K	0	29	34	
Health insurance paid by employer	100	60	40	0
Dental insurance paid by employer	100	61	60	0
Life insurance paid by employer	100	25	0	20
Retirement benefits	66	39	40	0
Teachers with associates degree or higher	62.5			
Teachers satisfied ¹ with benefits	31.8			
On the job more than two years	39.1			

¹ Answered in teacher/caregiver survey as satisfied or very satisfied with employment benefits.

Source: Southwest Maricopa Teacher/Caregiver Survey conducted by Southwest Institute for Families and Children

According to the response collected from the Teacher/Caregiver Survey 51.7% of public school and educators have a salary of \$30,000 or greater. However, That is over 25% more than their Public Schools and Head Start colleagues at 10.5%. The high percent for educators who work in the profit, non- profit sector could be contributed to the source of funding as opposed to the public school, which are funded by the state. 46.2% of educators in the profit, non-profit sector have their health insurance paid through their employer while on 45% for public schools. However, public school employers pay 65% of dental insurance while only 46.2% for profit/non-profit. Teachers who work in the profit/non- profit sector are 52.9% satisfied with the benefits received while only 31.8% for public school.

Employment Satisfaction

Employment satisfaction plays an important role in work performance. Several different factors contribute to overall satisfaction, such as perceptions of pay, schedules, benefits, and the children with whom they work. Different employment satisfaction factors in the southwest Maricopa region were evaluated through the survey instrument.

Examination of the raw data from the questions related to employment satisfaction did not yield clear patterns; thus, the four Likert response results were collapsed into two variables of 'satisfied' or 'not satisfied'. In general, 42.5% of respondents reported being satisfied with their supervisor, while 57.5% were less than or not satisfied with this person. Equivocal percentages reported satisfaction/dissatisfaction with the location of their work site. 60% of the educators report being satisfied or very satisfied with their current wages, while 50% report being satisfied or very satisfied with their professional development.

The least satisfying employment characteristics were reported to be supervisor, followed by wages was found to be the employment characteristic with the lowest index across the respondents, only 5% of the educators recognized not being satisfied with their wages while 10% of them acknowledge not being satisfied with the benefits provided to them. Of interest is that over 50% were less than satisfied with the children with whom they work. Anecdotally, increasing numbers of teachers are expressing concerns related to the behaviors of young children in preschool and childcare. A recent survey of 4,815 state funded preschools nationally indicated that preschool expulsion rates are 6.7 children per 1,000 or 5000 children per year nationally (Lewin, 2005).

Exhibit 2-41

Satisfaction of Early Childhood Educators with Current Work Conditions



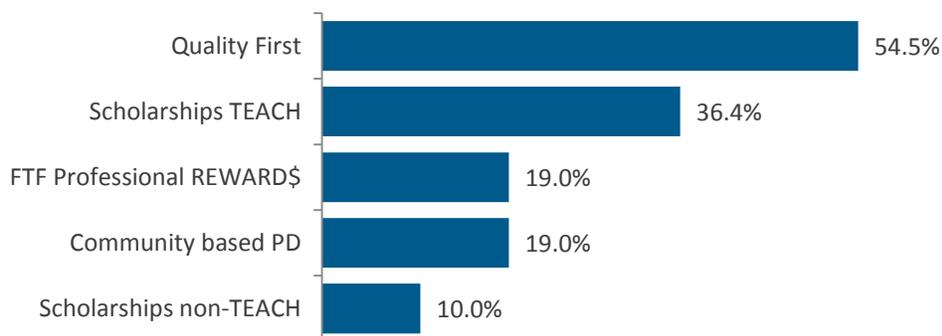
	HOW SATISFIED ARE YOU WITH YOUR CURRENT EMPLOYMENT?			
	Very Satisfied	Satisfied	Somewhat Satisfied	Not Satisfied
Supervisor	30.0	12.5	27.5	30.0
Children	27.5	20.0	20.0	32.5
Location	26.8	22.0	24.4	26.8
Wages	25.0	35.0	35.0	5.0
Schedule	22.5	25.0	35.0	17.5
Benefits	15.0	25.0	50.0	10.0
Professional development	13.2	36.8	31.6	18.4

Source: Southwest Maricopa Teacher/Caregiver Survey conducted by Southwest Institute for Families and Children

According to the respondents who took the Teacher/Caregiver survey an average of 23% of early childhood educators are very satisfied with their current working conditions while 19% are not satisfied.

Exhibit 2-42

FTF Resources Available To Teachers/Caregivers Rated As Most Valuable.



Source: Southwest Maricopa Teacher/Caregiver Survey conducted by Southwest Institute for Families and Children



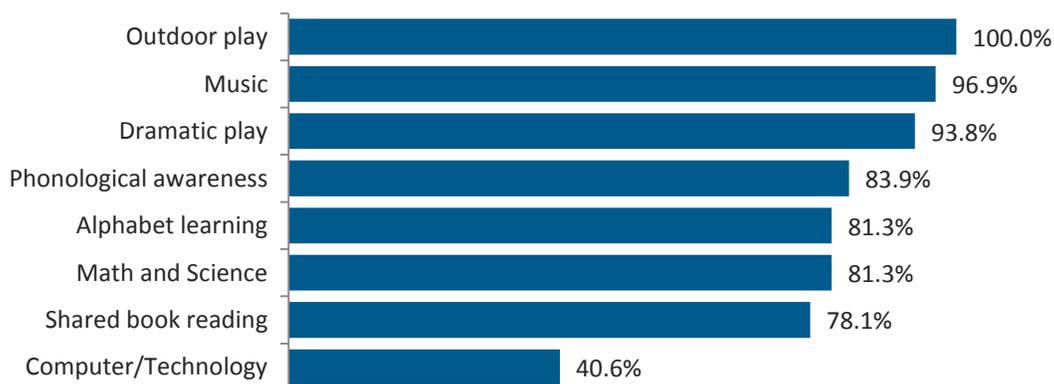
Early Literacy

The recent National Early Literacy Panel report (2008) indicates that six standard variables of early literacy are highly predictive of future reading success: alphabet knowledge, phonological awareness, rapid automatic naming of numbers and letters, rapid naming of colors and objects, writing of letters and name, and phonological memory of spoken words for short periods of time. Concepts about print, print knowledge, oral language, reading readiness, and visual memory were moderately correlated. Exhibit E-1 in APPENDIX E forms the framework of the supportive learning environment, instructional practices, differentiation strategies, transition plan, professional development and pacing of the project.

Many programs report promoting early literacy, however it was unclear the extent to which programs actually delivered early literacy activities with regularity and fidelity. Data from the provider survey indicate that the number of books in classrooms was very low as compared to traditionally acceptable rates of 5-10 books per child, at differing levels of difficulty, and types of books. Survey respondents reported an average of 66 books per class with a median number of 40 and the minimum number of two. However, when asked what activities they routinely provided, childcare centers and homes reported providing key activities to young children.

Exhibit 2-43

Activities Provided by Childcare



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Additional data were collected from 300 families that participated in a regionally funded First Things First parent education and coordination project. After participating in a series of educational seminars related to evidence-based best practices in parenting, families were asked to respond to questions on their beliefs and practices. One hundred percent reported that they gained knowledge about child development from the program. Seventy-four percent reported increased opportunities for reading at home, while 88% reported have more and better book selections at home as a result of the program. Seventy-nine percent of families queried felt that their children were ready to enter kindergarten successfully. The average number of seminars attended was four.



Public Elementary and Secondary School Demographic Characteristics

Public school performance varies across the region. Data from the most current available high stakes testing for Arizona indicates that third and fourth graders are meeting the Arizona Instrument to Measure Standards (AIMS) benchmarks. The AIMS scale scores are divided in 4 different categories for each grade and subject. Schools are then rated according to these scores as Falls Far Below, Approaches, Meets and Exceeds. Shown in table 2-46 are the AIMS scale scores and performance levels, exhibit 2-47 and 2-48 are the average AIMS scale scores for all the districts within the southwest Maricopa region.

Exhibit 2-44

Arizona Instrument to Measure Standards Scale Scores and Performance Levels

GRADE	PERFORMANCE LEVEL	AIMS SCALE SCORES AND PERFORMANCE LEVELS			
		Reading Scale Scores	Writing Scale Scores	Mathematics Scale Scores	Science Scale Scores
3rd	Falls Far Below	200-378	Suspended	100-302	Suspended
	Approaches	379-430		303-346	
	Meets	431-515		347-405	
	Exceeds	516-640		406-540	
4th	Falls Far Below	220-401		120-330	200-461
	Approaches	402-449		331-365	462-499
	Meets	450-535		366-415	500-546
	Exceeds	536-660		416-560	547-800
5th	Falls Far Below	240-423	300-438	140-347	Suspended
	Approaches	424-467	439-493	348-380	
	Meets	468-555	494-600	381-435	
	Exceeds	556-675	601-700	436-580	
6th	Falls Far Below	250-432	300-448	160-365	
	Approaches	433-477	449-492	366-397	
	Meets	478-570	493-580	398-445	
	Exceeds	571-690	581-700	446-600	

Source: Arizona Department of Education. Retrieved on March 13, 2012 from <http://www.azed.gov/research-evaluation/>
 *Administration suspended for that particular grade.

Exhibit 2-45

Southwest Maricopa Arizona Instrument to Measure Standards Results



GRADE	SOUTHWEST MARICOPA AIMS MEAN SCALE SCORES 2010-2011							
	Math		Reading		Writing		Science	
	2010	2011	2010	2011	2010	2011	2010	2011
3 rd	357	365	453	454	*	*	*	*
4 th	373	377	472	476	*	*	507	509
5 th	380	389	488	495	516	492	*	*
6 th	396	403	500	507	529	491	*	*

Source: Arizona Department of Education. Retrieved on March 13, 2012 from <http://www.azed.gov/research-evaluation/>
 *Administration suspended for that particular grade.

In general, it appears that student in the Southwest met AIMS test requirements in third and fourth grades and met benchmarks in math and reading in fifth and sixth grade; and approached benchmark in writing in sixth grade.

Exhibit 2-46

Southwest Maricopa Arizona Instrument to Measure Standards Performance

GRADE	SOUTHWEST MARICOPA AIMS PERFORMANCE LEVELS 2010-2011							
	Math		Reading		Writing		Science	
	2010	2011	2010	2011	2010	2011	2010	2011
3 rd	Meets	Meets	Meets	Meets	*	*	*	*
4 th	Meets	Meets	Meets	Meets	*	*	Meets	Meets
5 th	Approach es	Meets	Meets	Meets	Meets	Approach es	*	*
6 th	Approach es	Meets	Meets	Meets	Meets	Approach es	*	*

Source: Arizona Department of Education. Retrieved on March 13, 2012 from <http://www.azed.gov/research-evaluation/>
 *Administration suspended for that particular grade.

According to enrollment data provided by the Arizona Department of Education, approximately 100 fewer children were enrolled in 2011 than the previous year. This decreased enrollment trend continues until the 9th grade at which point a dramatic increase occurs and persists through the twelfth grade.



Exhibit 2-47

Total Enrollment by Grade

GRADE	TOTAL STUDENT ENROLLMENT BY GRADE	
	2010	2011
Preschool	705	608
Kindergarten	4,328	4,237
1 st	4,473	4,286
2 nd	4,424	4,256
3 rd	4,332	4,232
4 th	4,450	4,136
5 th	4,291	4,222
6 th	4,192	4,226
7 th	4,266	4,191
8 th	4,181	4,190
9 th	4,081	5,204
10 th	4,143	4,902
11 th	3,700	4,591
12 th	3,673	4,370

Source: Arizona Department of Education. Retrieved on March 13, 2012 from <http://www.azed.gov/research-evaluation/>

The following Exhibit illustrates the subgroups represented in each school district. Of interest are the large portions of economically disadvantaged students in Buckeye, Liberty, Littleton, Palo Verde, Pendergast, Saddle Mountain, Tolleson, and Union Districts. Each has 30% or more children identified as economically disadvantaged. Across all districts, 10% of the students in the region are enrolled in special education; 26%



of the students are economically disadvantaged; and almost 5% are English Language Learners. In 2011, there were 54,206 students enrolled in public schools.

Exhibit 2-48

Total Enrollment by Subgroup and School District

DISTRICT	STUDENT TOTAL ENROLLMENT BY SUBGROUP AND SCHOOL DISTRICT 2011					
	Male	Female	Economically Disadvantaged	Special Education	English Language Learners	Total Enrollment ¹
Agua Fria Union High School District	3,514	3,229	121	549	51	6,743
Avondale Elementary District	3,106	2,967	104	662	585	6,073
Buckeye Elementary District	2,293	2,133	2,684	598	NA	4,426
Buckeye Union High School District	1,867	1,801	1,227	381	44	3,668
Gila Bend Unified District	246	252	428	63	54	498
Liberty Elementary District	1,815	1,694	1,623	403	242	3,509
Litchfield Elementary District	4,913	4,851	NA	922	315	9,765
Littleton Elementary District	2,655	2,470	3,955	583	483	5,125
Palo Verde Elementary District	270	221	339	57	NA	491
Pendergast Elementary District	1,337	1,321	1,028	255	152	2,658
Saddle Mountain Unified School District	366	294	433	92	70	660
Tolleson Elementary District	650	641	891	128	198	1,291
Tolleson Union High School District	3,890	3,767	NA	662	NA	7,657
Union Elementary District	834	803	1,346	176	211	1,642
Total	27,756	26,444	14,179	5,531	2,405	54,206

Source: Arizona Department of Education. Retrieved on March 13, 2012 from <http://www.azed.gov/research-evaluation/>
 NA indicates data were not available. NOTE: Charter School Districts were not included. ¹ in certain cases total enrollment for male plus total enrollment for females does not add up to total enrollment since gender was not reported for every person enrolled.

The diverse nature of the region is reflected in the schools. Some districts are more diverse than others and some ethnic and racial groups are more concentrated in communities as was previously described. For example, there appears to be a much greater representation of American Indian children in Gila Bend than in other communities, and greater numbers of African American children in Agua Fria. As the Exhibit reflects percentages of children, actual numbers of children are not evident from this table.



Exhibit 2-49

Enrollment by Race Ethnicity and School District

DISTRICT	STUDENT ENROLLMENT PERCENT ¹ BY RACE/ETHNICITY AND SCHOOL DISTRICT 2011				
	White/Not Hispanic	Hispanic	African American	Asian	Native American
Agua Fria Union High School District	39.6	42.6	11.1	4.9	1.3
Avondale Elementary District	27.2	59.4	9.7	NA	NA
Buckeye Elementary District	33.1	54.7	8.8	NA	NA
Buckeye Union High School District	7.0	44.2	7.0	1.7	NA
Gila Bend Unified District	13.3	56.4	NA	NA	27.5
Liberty Elementary District	49.3	42.4	4.3	NA	NA
Litchfield Elementary District	50.4	33.0	9.8	5.0	NA
Littleton Elementary District	14.1	71.0	10.8	2.7	NA
Palo Verde Elementary District	44.4	51.5	2.0	NA	NA
Pendergast Elementary District	30.5	54.1	9.9	2.5	NA
Saddle Mountain Unified School District	49.5	45.0	NA	NA	NA
Tolleson Elementary District	5.2	87.0	5.6	NA	NA
Tolleson Union High School District	15.5	67.6	1.5	2.6	1.5
Union Elementary District	7.4	76.7	13.5	3.6	2.6
Wickenburg Unified District	82.3	9.8	NA	NA	NA

Source: Arizona Department of Education. Retrieved on March 13, 2012 from <http://www.azed.gov/research-evaluation/>
 NA indicates data were not available. ¹ Per 100 enrolled students. NOTE: Percent do not add up to 100 since some other ethnicities were omitted from this table.

Graduation rates are a critical measure of the wellbeing of a community. Numerous reports and statistics from the U.S. Department of Labor indicate the importance of a high school diploma. For example, in 2006, the unemployment rate for high school dropouts aged 25 and older was more than 1.5 times the rate of individuals who had a high school diploma (6.8% compared to 4.3%, respectively). Data for the same year also show that median annual earnings for high school graduates were \$29,000, or nearly 32% higher than the \$22,000 earned by those who did not receive a high school diploma (2008). These data make very clear the high economic costs of not completing high school.



The No Child Left Behind graduation benchmark is an 80% or better graduation rate within four years. The Exhibit below illustrates the graduation rates for the high schools in the southwest Maricopa region: 1) graduation rates for all but one high school district improved in the last year, and 2) three out of five districts met or exceeded the graduation goal. However, two districts were well below the goal of 80%.

Exhibit 2-50

Graduation Rates 2008-2009

DISTRICT	4 YEAR GRADUATION RATES BY SCHOOL DISTRICT 2008-2009								
	Number graduated			Number in Cohort			Percent Graduated		
	2008	2009	2010	2008	2009	2010	2008	2009	2010
Agua Fria Union High School Dist.	1,049	1,118	1253	1,324	1,414	1501	79.2	79.1	83.5
Buckeye Union High School Dist.	472	549	580	567	688	703	83.2	79.8	82.5
Gila Bend Unified Dist.	<25	30	32	34	42	45	70.6	71.4	71.1
Saddle Mountain Unified Schools	53	55	77	77	90	115	68.8	61.1	67
Tolleson Union High School	1,148	1,242	1694	1,390	1,478	1998	82.6	84.0	84.8

Source: Arizona Department of Education. Retrieved on July, 2012 from <http://www.azed.gov/research-evaluation/>

Exhibit 2-51

Dropout Rates by School District

DISTRICT	DROPOUT RATES BY SCHOOL DISTRICT 2009-2010					
	Total Students Enrolled		Total Dropouts		District Dropout Rate ¹	
	2009	2010	2009	2010	2009	2010
Agua Fria Union High School District	6,944	7,193	161	134	2.3	1.9



Avondale Elementary District	1,646	1,638	<25	<25	0.8	0.6
Buckeye Elementary District	1,164	1,209	<25	<25	1.6	1.5
Buckeye Union High School District	3,788	3,954	114	89	3.0	2.3
Gila Bend Unified District	255	257	<25	<25	3.5	2.3
Liberty Elementary District	942	914	<25	0	0.2	0.0
Litchfield Elementary District	2425	2,538	0	<25	0.0	0.2
Littleton Elementary District	1,316	1,334	<25	<25	0.5	0.8
Palo Verde Elementary District	104	152	<25	0	1.0	0.0
Pendergast Elementary District	798	786	<25	<25	0.1	0.3
Saddle Mountain Unified School District	803	757	<25	<25	2.1	2.2
Tolleson Elementary District	343	306	<25	<25	3.5	1.0
Tolleson Union High School District	8,046	8,335	165	210	2.1	2.5
Union Elementary District	443	442	<25	<25	0.2	0.2

According to the Arizona Department of Education dropout rates are annually reported for grades seven through twelve, and are based on a calendar year that runs from the first day of summer recess through the last day of school. A school's total enrollment is used as the population figure against which dropouts are subsequently counted. Dropouts are defined as students who are enrolled in school at any time during the school year, but are not enrolled at the end of the school year and did not transfer, graduate, or die. Data reported here reflects school years through 2011-2012

In the Exhibit below, all school districts are reported; however, the most significant numbers are those of the high school districts. Three out of five high school districts decreased their dropout rates; one stayed relatively static, and one significantly increased. Of interest and concern is the relatively high number of youth that dropped out of Buckeye Elementary School District, as these children will not be reflected in the dropout or graduation cohort numbers established at ninth grade level. Elementary School dropout rates reflect the data reported by the Arizona Department of Education for grades seven and eight.

In the Exhibit below, all school districts are reported; however, the most significant numbers are those of the high school districts. Three out of five high school districts decreased their dropout rates; one stayed relatively static, and one significantly increased. Of interest and concern is the relatively high number of youth that dropped out of Buckeye Elementary School District, as these children will not be reflected in the dropout or graduation cohort numbers established at ninth grade level. Elementary School dropout rates reflect the data reported by the Arizona Department of Education for grades seven and eight.

Dropout Rates By Subgroup and School District 2010



Critical to the health of communities are their success in educating the communities' children. In Arizona, we measure this success by Adequate Yearly Progress (AYP). In 2010-2011, 7 out of 18 selected schools did not meet AYP based on failure to meet test objectives. In July of 2012, Arizona was granted a No Child Left Behind waiver for future years to determine alternative ways to assess AYP. In addition, Arizona recently adopted letter grades for schools, based on an A-F system.

Exhibit 2-52

Dropout Rates By Subgroup and School District 2010

DISTRICT	DROPOUT RATES ¹ BY SUBGROUP AND SCHOOL DISTRICT 2010									
	Economically Disadvantaged		Female		Male		Hispanic		Special Education	
	Dropouts	Rate	Dropouts	Rate	Dropouts	Rate	Dropouts	Rate	Dropouts	Rate
Agua Fria Union High School Dist.	<25	6.7	46	1.3	88	2.4	74	2.4	<25	3.7
Avondale Elementary Dist.	<25	0.5	<25	0.8	<25	0.5	<25	0.5	<25	1.2
Buckeye Elementary Dist.	<25	1.2	<25	1.3	<25	1.7	<25	1.5	<25	2.0
Buckeye Union High School Dist.	56	2.7	34	1.8	55	2.7	51	2.8	<25	2.6
Gila Bend Unified District	<25	2.3	<25	3.1	<25	1.6	<25	3.1	<25	2.3
Liberty Elementary Dist.	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Litchfield Elementary Dist.	<25	0.3	<25	0.1	0	0.0	<25	0.1	0	0.0
Littleton Elementary Dist.	10	1.0	<25	0.6	<25	1.1	<25	0.9	<25	0.6
Palo Verde Elementary Dist.	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Pendergast Elementary Dist.	<25	0.5	0	0.0	<25	0.5	<25	0.5	0	0.0
Saddle Mountain Unified School Dist.	10	2.0	<25	2.3	<25	2.2	<25	1.0	<25	1.0
Tolleson Elementary Dist.	<25	0.9	<25	1.3	<25	0.7	<25	0.8	0	0.0
Tolleson Union High School Dist.	104	2.3	86	2.1	124	3.0	142	0.3	<25	2.7
Union Elementary School Dist.	<25	0.3	<25	0.4	0	0.0	<25	0.3	0	0.0

Source: Arizona Department of Education. Retrieved on March 13, 2012 from <http://www.azed.gov/research-evaluation/>

*Not enough data available for that particular school. ¹ Per 100 students that are associated to a particular group (e.g. female, male, Native American, etc.).



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Exhibit 2-53

Selected Schools' Adequate Yearly Progress 2010-2011

SCHOOL	SELECTED SCHOOLS AYP 2010-2011							
	AYP		Met Test Objective		Met Attendance Rate		Met Percent Tested	
	2010	2011	2010	2011	2010	2011	2010	2011
Cooper Trails	Met	Met	Yes	Yes	Yes	Yes	Yes	Yes
Lattie Coor	Met	Not Met	Yes	No	Yes	Yes	Yes	Yes
Buckeye Primary	Met	Not Met	Yes	No	Yes	Yes	Yes	Yes



Sundance Elementary	Not Met	Not Met	No	No	Yes	Yes	Yes	Yes
Gila Bend Elementary	Not Met	Met	No	Yes	Yes	Yes	Yes	Yes
Estrella Mountain Elementary	Met	Met	Yes	Yes	Yes	Yes	Yes	Yes
Liberty Elementary	Met	Not Met	Yes	Yes	Yes	No	Yes	Yes
Litchfield Elementary School	Met	Met	Yes	Yes	Yes	Yes	Yes	Yes
Verrado Elementary School	Met	Met	Yes	Yes	Yes	Yes	Yes	Yes
Country Place Elementary	Not Met	Not Met	No	No	Yes	Yes	Yes	Yes
Littleton Elementary School	Met	Not met	Yes	No	Yes	Yes	Yes	Yes
Canyon Breeze Elementary	Met	Not Met	Yes	No	Yes	Yes	Yes	Yes
Ruth Fisher Elementary School	Not Met	NA	No	NA	Yes	NA	Yes	NA
Arizona Desert Elementary School	Met	Met	Yes	Yes	Yes	Yes	Yes	Yes
Festival Foothills Elementary School	Met	Met	Yes	Yes	Yes	Yes	Yes	Yes

Source: Arizona Department of Education. Retrieved on March 13, 2012 from <http://www.azed.gov/research-evaluation/>

¹ Adequate Yearly Progress according to the Department of Education No Child Left Behind Act



HEALTH

The basic principles of child development include three domains of development (Berk, 2008). The first domain is “physical development” which refers to changes in body size, shape, and appearance, functioning of body systems, perceptual and motor capacities, and physical health. The second domain is “social/emotional development” which refers to changes in a child’s unique way of dealing with the world (e.g., understanding and expression of emotions, knowledge about others, interpersonal skills, self-awareness, friendships, moral reasoning and behavior). The last domain is “cognitive development” which refers to changes in intellectual abilities, including learning, memory, and reasoning, thinking, problem-solving, creativity and language development. The three domains of development overlap and often interact with each other.

The U.S. Bureau of Maternal and Child Health (MCHB) through State Title V Block Grants promotes early sensory screening, including vision and hearing, as critical to children’s development (First Things First, 2011). Medicaid’s child health component is known as Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program, which has been shaped to address the standards of pediatric care and to meet the special physical, emotional, and developmental needs of low income children. Since 1967, the purpose of the program has been “to discover, as early as possible, the ills that handicap our children.” And to provide “continuing follow-up and treatment so that handicaps do not go neglected.” Federal law requires that Medicaid programs, including Indian Health Services, cover a comprehensive set of benefits and services for children different from adult services. The American Academy of Pediatrics supports early sensory screening for the most common congenital disorders of vision and hearing problems (American Academy of Pediatrics, n.d.) and has developed the ‘gold standard’ of early screening, Bright Futures, which has been widely adopted nationwide. The American Speech-Language-Hearing Association also contends that speech-language pathologists’ role is critical in terms of helping young children with communicative disorders attain literacy skills (Justice, Invernizzi, & Meier, 2002). Researchers claim that the timely detection of speech-language difficulties can significantly impact literacy development (Justice, Invernizzi, & Meier, 2002).



Infant Health

Birth Conditions and Maternal Health

In 2009, there were 4,425 births in the region as compared to 4,297 in 2010, approximately a 3% decrease. The following two Exhibits illustrate the similarity between the two years on measures of maternal age, public payer births, birth weight, and marital status of mothers.

Exhibit 3-1

Characteristics of Newborns and Mothers by Community 2009

COMMUNITY	CHARACTERISTICS OF NEWBORNS AND MOTHERS BY COMMUNITY 2009						
	Total births	Mother 19 years old or younger	Prenatal care in the 1 st trimester	No prenatal care	Public payer for birth	Low birth weight ¹	Unwed mother
Avondale	1,310	189	1,110	23	727	88	652
Buckeye	1,050	85	931	9	507	59	338
Goodyear	861	70	786	7	262	74	259
Tolleson	711	84	611	9	395	51	314
Litchfield Park	343	25	318	5	126	30	112
Tonopah	84	12	68	2	67	7	39
Gila Bend	63	10	54	1	53	4	34
Luke AFB	1	0	1	0	0	0	0
Palo Verde	2	0	2	0	2	2	0
TOTAL	4425	475	3881	56	2139	315	1748

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. Retrieved on February 24, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2009/toc09.htm>.

¹ <2,500 grams at birth



Examinations of these data are impressive in that the number of low birth weight babies is relatively high, > 5% in four communities and approximates the number that did not have prenatal care in the first trimester. Additionally, approximately half of all births in the region were paid for by public assistance funds.

Exhibit 3-2

Characteristics of Newborns and Mothers by Community 2010

COMMUNITY	CHARACTERISTICS OF NEWBORNS AND MOTHERS BY COMMUNITY 2010						
	Total births	Mother 19 years old or younger	Prenatal care in the 1 st trimester	No prenatal care	Public payer for birth	Low birth weight ¹	Unwed mother
Avondale	1,285	159	1,128	16	693	88	590
Buckeye	1,017	83	916	12	486	80	322
Goodyear	822	58	763	2	293	54	240
Tolleson	705	93	630	8	388	50	330
Litchfield Park	324	21	304	0	120	16	101
Tonopah	74	12	61	1	59	6	35
Gila Bend	66	10	52	2	60	4	37
Luke AFB	3	0	3	0	0	0	0
Palo Verde	1	0	1	0	0	0	0
TOTAL	4,297	436	3,858	41	2,099	298	1,655

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. Retrieved on March 24, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2010/toc10.htm>.

¹ <2,500 grams at birth



Data for years 2010 and 2011 are not available at the community levels. However, Maricopa County data indicate that White non-Hispanic babies outnumbered the rates of Latino births and all other races, while in southwest Maricopa region, in 2009, the reverse was true.

Exhibit 3-3

Births by Mother's Race/Ethnicity 2010-2011

AREA	NUMBER OF BIRTHS BY MOTHER'S RACE/ETHNICITY ¹											
	Total Births		White non-Hispanic		Hispanic or Latino		Black or African American		American Indian or Alaska Native		Asian or Pacific Islander	
	2010	2011	2010	2011	2010	2011	2010	2011	2010	2011	2010	2011
Maricopa	54,229	53,349	24,424	24,518	21,991	20,654	3,384	3,378	1,682	1,686	2,485	2,687
Arizona	87,053	85,104	38,789	38,251	34,340	32,398	4,328	4,364	5,817	5,822	3,293	3,505
United States	4,000,279	NA	2,161,669	NA	946,000	NA	589,139	NA	46,760	NA	246,915	NA

Source: Arizona State Department of Health Services, 2010 & 2011 Monthly Updates. NA indicates data were not available. ¹Race/Ethnicity determined by mother's race.

Exhibit 3-4

Births by Mother's Race/Ethnicity 2009

AREA	BIRTHS BY MOTHER'S RACE/ETHNICITY 2009 (PERCENT)					
	White non-Hispanic	Hispanic or Latino	African American	American Indian or Alaska Native	Asian	Unknown
Arlington	35.7	64.3	0	0	0	0
Avondale	28.6	56.5	8.3	1.7	4.2	0.7
Buckeye	49.1	42.6	4.1	1.4	2.4	0.4
Gila Bend	17.5	63.5	0	19	0	0
Goodyear	49.5	36.4	5.2	1.6	6.4	0.9
Litchfield Park	52.5	35.3	5	1.2	5.8	0.3
Luke AFB	0	100	0	0	0	0
Palo Verde	100	0	0	0	0	0
Tolleson	17.0	68.9	8.9	1.3	3.4	0.6
Tonopah	29.8	67.9	0	1.2	1.2	0
Southwest Maricopa	37.4	50.0	6.2	1.7	4.1	0.6
Maricopa	42.7	43.3	5.8	3.2	4.5	0.5
Arizona	43.0	41.4	4.7	6.7	3.7	0.6

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. Retrieved on March 24, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2010/toc10.htm>.



Exhibit 3-5Births by Mother's Educational Attainment 2009

AREA	PERCENT ¹ OF BIRTHS BY MOTHER'S EDUCATIONAL ATTAINMENT 2009				
	< 8	8 – 11	12	13 – 16	17+
Maricopa County	5.0	20	28.2	36.1	10.1
Arizona	3.8	20.1	30.6	35.6	9.2
United States ^{2,3}	NA	17.4	24.4	48.4	9.8

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2010 report. Retrieved on March 25, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2010/toc10.htm>. U.S. Census Bureau, Statistical Abstract of the United States: 2012 (131st Edition) Washington, DC, 2011; <<http://www.census.gov/compendia/statab/>>.

¹ Per 100 births. Percentages may not total 100 due to rounding. ² United States percent is based on the number of women who gave birth in 2009. ³ Percent presented for 8-11 includes all women who gave birth in 2009 with less than high school diploma

The majority, ≈ 67%, of births were to women with 12 to 16 years of education. However, almost 18% were high school students or had not completed their high school diploma (?).

Exhibit 3-6Births by Mother's Educational Attainment 2010

AREA	PERCENT ¹ OF BIRTHS BY MOTHER'S EDUCATIONAL ATTAINMENT 2010				
	< 8	8 – 11	12	13 – 16	17+
Maricopa County	4.4	17.8	28.6	37.6	10.8
Arizona	3.3	18.4	30.7	36.7	9.8
United States	NA	NA	NA	NA	NA

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2010 report. Retrieved on March 25, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2010/toc10.htm>. ¹ Per 100 births. Percentages may not total 100 due to rounding.



Considered an asset to the community, the percent of births to single mothers was lower than averages for Maricopa County as well as the State and Nation in the last year of accessible data, 2010. Young single mothers and their families often have a higher degree of familial stress due to decreased resources resulting from un- or underemployment, less knowledge of and skills in parenting, and less time for high quality interactions as they frequently have less education, and frequently work less desirable hours and often multiple part-time jobs to support their families. (Amato, 2005).

Exhibit 3-7

Births to Unwed Mothers 2009-2011

AREA	PERCENT OF UNWED MOTHERS		
	2009	2010	2011 ¹
Southwest Maricopa	39.5	38.5	NA
Maricopa County	43.9	43.5	42.7
Arizona	45.2	44.7	44.5
United States	41.0	40.8	NA

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. Retrieved on January 24, 2011 from <http://www.azdhs.gov/plan/report/ahs/ahs2009/toc09.htm>. National vital statistics reports web release, vol 60 no 2. Hyattsville, MD: National Center for Health Statistics, November 2011.
NA indicates data were not available. ¹ As of 12/15/2011.

Birth weight is considered a gold standard indicator for future healthy development. Southwest Maricopa County data indicate that there are slightly fewer low birth weight babies born in the region than in the rest of Maricopa County and Arizona in general; thus, considered an asset to the region.

Exhibit 3-8

Low Birth Weight 2009-2011

AREA	PERCENT OF LOW ¹ BIRTH WEIGHT 2009-2011		
	2009	2010	2011 ²
Southwest Maricopa	7.12	6.94	NA
Maricopa County	7.13	7.10	6.96
Arizona	7.10	7.07	7.01
United States	8.16	8.15	NA

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 & 2010 report. Retrieved from <http://www.azdhs.gov/plan/report/ahs/index.htm>. National vital statistics reports web release, vol 60 no 2. Hyattsville, MD: National Center for Health Statistics, November 2011.

NA indicates data were not available. ¹ Less than 2,500 grams (5 pounds-8 ounces). ² As of 12/15/2011.

Preterm births are also a benchmark of future health and development. Preterm births can result in long term, neurological impairments, respiratory complications, and developmental disabilities. Rates of preterm births in Maricopa County remained flat during years 2008 and 2009 and slightly decreased in 2010. Rates for the State and the United States demonstrated slight annual decreases.



Exhibit 3-9Preterm Births 2008-2010

AREA	PERCENT OF PRETERM ¹ BIRTHS 2008-2010		
	2008	2009	2010
Maricopa County	10.5	10.5	9.9
Arizona	12.9	12.7	12.1
United States	12.3	12.2	12.0

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2008 & 2009 report. Retrieved on January 24, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2009/toc09.htm>. National vital statistics reports web release; vol 60 no 2 & vol 59 no 1. Hyattsville, MD: National Center for Health Statistics, NA indicates data were not available. ¹ Less than 37 weeks.

Cesarean Sections (C-sections) are also a benchmark of neonatal health. Induced and scheduled deliveries, resulting in increased rates of C-sections, are now the most common surgery in the country. Not only do C-sections have the potential of complications as other surgeries but also are dramatically more expensive. Reduction in C-section rates has become a goal of most hospitals across the State, including scheduled inductions prior to 40 weeks for single births.

C-Section rates in Maricopa County are slightly higher than the rest of the state but lower than the national average.

Exhibit 3-10Births by Cesarean Delivery 2008-2010

AREA	PERCENT OF BIRTHS BY CESAREAN DELIVERY 2008-2010		
	2008	2009	2010
Maricopa County	28.0	28.4	28.3
Arizona	27.1	27.4	27.2
United States	32.3	32.9	32.8

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2008 & 2009 report. Retrieved on January 24, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2009/toc09.htm>. National vital statistics reports web release; vol 60 no 2 & vol 59 no 1. Hyattsville, MD: National Center for Health Statistics, NA indicates data were not available.

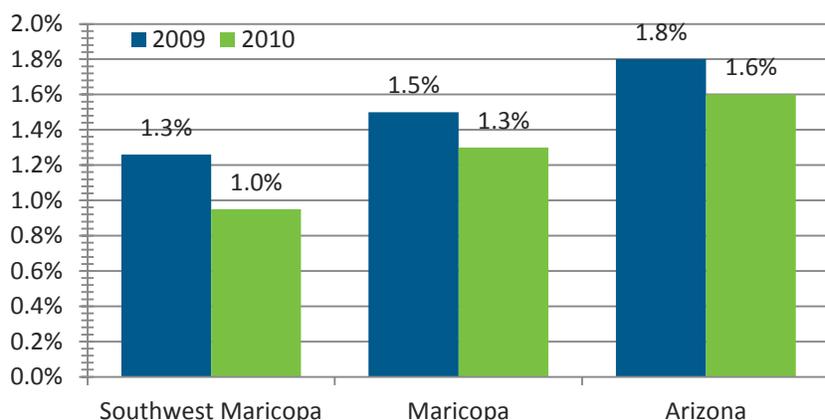
Early prenatal care is recognized as a critical component of healthy babies and positive developmental indicators. Attention to diet, nutrition, especially vitamins such as folic acid can change outcomes of prenatal fetal development. Management of weight, blood sugar and blood pressure can ensure healthy and intact pregnancies.

A closer look at the incidence of women with no prenatal care indicates that in the southwest Maricopa region, the County, and the State, rates of no prenatal care has decreased by a small percent between years 2009 and 2010.



Exhibit 3-11

Total Percent of Births to Mothers with no Prenatal Care



Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 & 2010 report. Retrieved on March 25, 2012 from <http://www.azdhs.gov/plan/report/ahs/index.htm>.

An asset to the region is the rate of prenatal care obtained and provided to its pregnant women. Less than 1% had no prenatal care as compared to 90% of women who started prenatal care during the first trimester of their pregnancies, accounting for over 90% of pregnancies.

Exhibit 3-12

Prenatal Care by Trimester of Pregnancy 2009-2010

AREA	PERCENT BY TRIMESTER OF PREGNANCY PRENATAL CARE BEGAN									
	No Care		1 st Trimester		2 nd Trimester		3 rd Trimester		Unknown	
	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010
Southwest Maricopa	1.27	0.95	87.7	89.78	NA	NA	NA	NA	NA	NA
Maricopa	1.50	1.26	84.44	85.86	11.62	10.39	2.25	2.27	0.19	0.21
Arizona	1.84	1.59	80.26	81.94	14.36	13.07	3.38	3.23	0.16	0.17
United States ¹	1.75	NA	72.13	NA	21.32	NA	4.80	NA	37.47 ²	NA

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. National Vital Statistics System, VitalStats births data files. Retrieved on January 25, 2011 from http://www.cdc.gov/nchs/data_access/vitalstats/VitalStats_Births.htm. NA indicates data were not available. ¹Percent was estimated excluding the number of unknown cases. ²Percent was estimated from the total number of registered births in 2009

The majority of pregnant women in both 2009 and 2010 received 9 or more prenatal visits followed by 5 to 8 postnatal visits.

Exhibit 3-13

Number of Prenatal Visits

Data on medical risk factors of pregnant women are unavailable at the local level; however, as a significant number of births are attributable to the southwest region of Maricopa County, data indicate that known risk



factors of diabetes, anemia, hypertension, and Eclampsia, are similar to the statewide rates, as are rates for consumption of alcohol. There are fewer smokers in Maricopa County as compared to the State.

Exhibit 3-13

Number of Prenatal Visits

AREA										
	Total Births		No Visits		1-4 Visits		5-8 visits		9+ visits	
	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010
Maricopa	57,663	54,236	864	687	1,495	1,368	7,936	6623	47,248	45,433
Arizona	92,616	87,053	1,702	1,383	3,213	2,897	14,484	12,524	73,032	70,050
United States	4130665	4000279	60,421	NA	135,554	NA	584,349	NA	3193255	NA

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. National Vital Statistics System, VitalStats births data files. Retrieved on January 25, 2011 from http://www.cdc.gov/nchs/data_access/vitalstats/VitalStats_Births.htm. NA indicates data were not available.

Exhibit 3-14

Births with Medical Risk Factors

	PERCENT ¹ OF BIRTHS WITH MEDICAL RISK FACTORS					
	Maricopa County			Arizona		
	2008	2009	2010	2008	2009	2010
Diabetes	4.1	4.0	4.3	3.9	3.9	4.2
Anemia	4.2	3.7	3.9	3.9	3.6	3.8



Hypertension	3.5	3.8	4.0	3.5	3.6	3.9
Eclampsia	0.5	0.6	0.7	0.7	0.8	0.9
Drinker	0.3	0.3	0.3	0.3	0.3	0.3
Smoker	4.0	3.9	4.0	4.7	4.6	4.5
Smoker and drinker	0.2	0.2	0.2	0.2	0.2	0.2

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 & 2010 report. Retrieved from <http://www.azdhs.gov/plan/report/ahs/index.htm>. ¹ Per 100 births.

With the exception of assisted ventilation and hyaline membrane disease, abnormal conditions have increased in Maricopa County across the past three years as they have statewide. As the numbers for all conditions are very small, it is not possible to determine trends. With respect to assisted ventilation, the duration of the treatment or the outcomes is unknown.

Exhibit 3-15

Newborns with Abnormal Conditions

INCIDENCES OF NEWBORNS WITH ABNORMAL CONDITIONS



	Maricopa County			Arizona		
	2008	2009	2010	2008	2009	2010
Assisted ventilation	249	272	267	1475	1430	1365
Hyaline membrane disease	411	352	284	534	478	387
Birth Injury	25	28	30	154	67	36
Newborn seizures	58	51	71	119	93	134
Meconium aspiration	27	28	42	46	47	83
Anemia	12	14	20	25	32	27
Fetal alcohol syndrome	1	0	3	1	3	3

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 & 2010 report. Retrieved on March 25, 2012 from <http://www.azdhs.gov/plan/report/ahs/index.htm>.

Exhibit 3-16

Payee for Births

AREA	TOTAL PERCENT OF PAYEE FOR BIRTH									
	AHCCCS		IHS		Private		Self		Unknown	
	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010
Maricopa	53.1	53.3	0.4	0.3	43.5	43.2	2.4	2.7	0.6	0.5
Arizona	53.5	53.3	1.8	2.0	41.0	41.0	2.7	3.0	1.1	0.7

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. Retrieved on January 24, 2011 from <http://www.azdhs.gov/plan/report/ahs/ahs2009/toc09.htm>.

Comparisons among the Southwest Maricopa region, Maricopa County, and the State indicate that fewer births in the region were paid for with public funds as compared to the other areas, but rates were slightly increased in 2010.

Exhibit 3-17

Public Payer for Births

AREA	PERCENT OF PUBLIC PAYER FOR BIRTH	
	2009	2010
Southwest Maricopa	48.3	48.8
Maricopa	53.5	53.6



Arizona	55.3	55.3
---------	------	------

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. Retrieved on January 24, 2011 from <http://www.azdhs.gov/plan/report/ahs/ahs2009/toc09.htm>. National vital statistics reports web release; vol 60 no 2. Hyattsville, MD: National Center for Health Statistics, November 2011.
NA indicates data were not available. ¹As of 12/15/2011.



Nativity by Teen Mothers

In 2009, births to teenage mothers were slightly lower than the rest of Maricopa County and the state; however, the reverse was true in 2010, but while higher than the county, they were still lower when compared to previous years. According to the National Vital Statistics System (NVSS), childbearing by teenagers has been falling to historic lows across the country. Arizona was ranked by NVSS as one of the 16 states with the largest significant decreases in teen births from 2007-2010.

Exhibit 3-18

Percent of Teenage Mothers 2009-2011

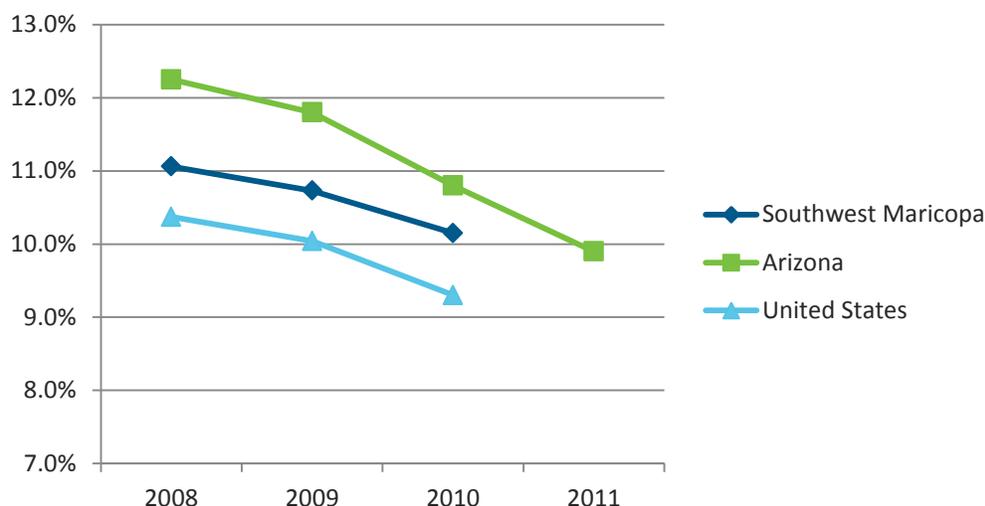
AREA	PERCENT OF TEENAGE ¹ MOTHERS 2009-2011		
	2009	2010	2011 ²
Southwest Maricopa	10.73	10.15	NA
Maricopa County	10.83	9.86	8.96
Arizona	11.83	10.82	9.93
United States	10.04	9.30	NA

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 report. Retrieved on January 24, 2011 from <http://www.azdhs.gov/plan/report/ahs/ahs2009/toc09.htm>. National vital statistics reports web release; vol 60 no 2. Hyattsville, MD: National Center for Health Statistics, November 2011. NA indicates data were not available. ¹ 19 years or younger.

The following Exhibit provides a visual illustration of the deceleration in birth rates to teen mothers.

Exhibit 3-19

Total Percent of Teenage Mothers 2008-2011



Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2008, 2009 & 2010 report



Nationally and locally, the trend of teen births has decelerated over the past three years. Indications are that this trend is continuing in 2012.

Exhibit 3-20

Trends in Teenage Pregnancy Rates

AREA	TRENDS IN TEENAGE ¹ PREGNANCY RATES ²			
	2007	2008	2009	2010
Maricopa County	35.4	32.5	27.4	23.7
Arizona	34.4	31.6	28.0	24.7
United States ³	42.5	41.5	37.9	34.3

¹ 19 years or younger. ² Number of pregnancies per 1000 females in age group. ³ Rate for 15-19 years.

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2010 report. Retrieved on March 25, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2010/toc10.htm>. National vital statistics reports web release; vol 60 no 2. Hyattsville, MD: National Center for Health Statistics, November 2011.

Births to Hispanic mothers outpaced births to other ethnicities in both 2009 and 2010. Additionally, Maricopa County had a higher incidence of births to Hispanic mothers than did the rest of the State. Rates are reported as number of births per 100 teen mothers.

Exhibit 3-21

Teenage Births by Ethnicity

AREA	PERCENT ¹ OF TEENAGE ² MOTHERS WITHIN SELECTED ETHNICITIES 2009 & 2010			
	Maricopa County		Arizona	
	2009	2010	2009	2010
White non-Hispanic	22.8	23.6	24.8	25.3
Hispanic or Latino	63.7	62.2	57.9	56.8
Black or African American	7.4	8.2	5.5	6.0
American Indian or Alaska Native	4.9	4.3	10.7	10.5
Asian or Pacific Islander	1.1	1.4	0.8	1.1
Other Race	0.2	0.1	0.3	0.1
Unknown	NA	0.2	NA	0.2

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 & 2010 report. Retrieved on March 25, 2012 from <http://www.azdhs.gov/plan/report/ahs/index.htm>

¹ Percent based in the total number of births in each ethnicity. ² 19 years or younger.

The following exhibit illustrates the percentages of births within selected ethnicities by teen mothers. Of interest are the disproportionate percentages of teenage births within Hispanic, African American, and American Indian populations. As these data compare teen to adult nativity rates and the percent displayed



are not summative; thus do not yield 100%. Of greater importance is the decline in teen births across all ethnic groups.

Exhibit 3-22

Teenage Mothers in Selected Ethnicities

AREA	PERCENT ¹ OF TEENAGE ² MOTHERS WITHIN SELECTED ETHNICITIES 2009 & 2010			
	Maricopa County		Arizona	
	2009	2010	2009	2010
White non-Hispanic	5.8	5.2	6.8	6.2
Hispanic or Latino	15.9	15.1	16.5	15.6
Black or African American	13.8	12.9	13.8	13.0
American Indian or Alaska Native	16.5	13.7	19.0	17.0
Asian or Pacific Islander	2.6	3.0	2.6	3.1

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 & 2010 report. Retrieved on March 25, 2012 from <http://www.azdhs.gov/plan/report/ahs/index.htm>

¹ Percent based in the total number of births in each ethnicity. ² 19 years or younger.

The percentage of low birth weights by teen mothers has appears to be trending downward as has the birth rate to teenage mothers.

Exhibit 3-23

Low Birth Weight to Teenage Mothers

AREA	PERCENT ¹ OF LOW ² BIRTH WEIGHT TO TEENAGE ³ MOTHERS			
	2008	2009	2010	2011
Maricopa County	7.7	8.2	8.0	7.0
Arizona	7.6	7.9	8.0	7.0
United States ³	9.7	7.9	NA	NA

Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2009 & 2010 report. Retrieved on March 25, 2012 from <http://www.azdhs.gov/plan/report/ahs/ahs2009/toc09.htm>.

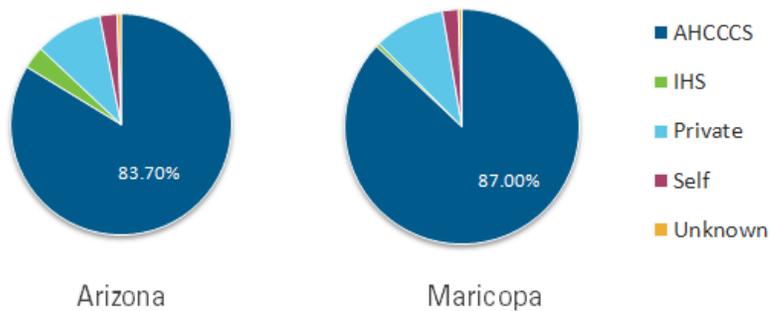
NA indicates data were not available. ¹ Per 100 births to teen mothers. ² Less than 2,500 grams (5 pounds-8 ounces). ³ 19 years or younger. ³ Percent given for 15-19 years.

The exhibits below illustrate the locus of payment for births to teen mothers, which indicates again that AHCCCS is the primary payer for births to teenagers.

Exhibit 3-24



Total Percent¹ of Payee for Births to Teenage Mothers 2010



Source: Arizona State Department of Health Services, Advanced vital statistics by county of residence 2010. Retrieved on January 24, 2012 from <http://www.azdhs.gov/plan/report/avs/avs10/index>.
¹ Per 100 births.



Immunization Compliance

Generally, immunization compliance for infants and toddlers falls well below the Healthy People 2010 goal of 90%. Additional attention to health surveillance may be required as well as more public awareness campaigns.

Exhibit 3-25

Immunization Compliance 12-24 Months of Age

AREA	IMMUNIZATION COMPLIANCE AGES 12-24 MONTHS, YEAR 2010				
	Percent completed ¹	DTAP ²	IPV ³	HIB ⁴	HEPB ⁵
Avondale	71.7	73.2	82.6	84.6	86.9
Buckeye	71.3	73.0	80.7	82.5	85.5
Goodyear	69.0	71.1	81.8	83.7	85.3
Tolleson	73.9	74.7	83.5	85.3	90.1
Litchfield Park	72.6	74.6	81.6	83.3	86.7
Tonopah	66.1	67.7	77.4	80.6	87.1
Gila Bend	68.8	68.8	77.1	77.1	83.3
Palo Verde	73.0	74.3	82.4	81.1	87.8

Source: Arizona State Immunization Information System, data provided by FTF on April 4th 2012. Vaccinations from 01/01/09 to 12/31/10.

¹ Percent of children with vaccine series completed. ² Diphtheria Tetanus and Pertussis. ³ Polio Vaccine. ⁴ Haemophilus Influenza type b. ⁵ Hepatitis B.



Since 2001, Arizona immunization rates have dramatically increased, as indicated by rates for MMR, HIB, and Varicella however; rates of compliance in the region have not kept pace with the rest of Arizona. When queried, public health officials express concerns, as a resurgence of pertussis (whooping cough) has been documented in Arizona and several other states. Resurgence of childhood diseases is potentially a dangerous threat to the well being of children and their communities. Further discussion of the issue is provided after Exhibit 3-26.

Exhibit 3-26

Immunization Compliance 19-35 Months of Age

AREA	IMMUNIZATION COMPLIANCE AGES 19-35 MONTHS, YEAR 2010						
	Percent completed ¹	DTAP ²	IPV ³	MMR ⁴	HIB ⁵	HEPB ⁶	VAR ⁷
Avondale	38.7	47.9	62.4	72.6	69.1	67.3	72.6
Buckeye	40.4	47.9	65.2	73.0	71.9	69.9	72.1
Goodyear	40.3	50.5	62.5	73.3	70.8	66.8	73.3
Tolleson	47.3	54.8	70.7	78.1	75.6	74.9	77.7
Litchfield Park	42.1	51.7	62.1	74.4	70.7	64.9	74.8
Tonopah	38.7	41.2	60.5	68.9	63.9	68.9	67.2
Gila Bend	57.1	61.9	81.0	77.4	82.1	86.9	72.6
Palo Verde	41.3	46.8	65.1	78.0	72.5	73.4	77.1

Source: Arizona State Immunization Information System, data provided by FTF on April 4th 2012. Vaccinations from 01/01/08 to 12/31/10.

¹ Percent of children with vaccine series completed. ² Diphtheria Tetanus and Pertussis. ³ Polio Vaccines. ⁴ Measles, Mumps & Rubella. ⁵ Haemophilus Influenza type b. ⁶ Hepatitis B. ⁷ Varicella.

Rates across the region are below the 90% goal for infants and toddlers. Public health surveillance may consider this an issue. The purpose of immunizations is to keep immunizing until the disease no longer exists. However, in order to ameliorate a disease a concerted, broad-based immunization program must be embraced across communities. Examples of broad-based immunization are polio and rubella; both diseases killed or maimed thousands of children. But after public health immunization efforts the diseases are rare in the United States. Public Health officials recognize that remnants of these diseases may resurface and infect populations of children again if immunization rates begin to fall. Examples of decreased surveillance and increased disease have been seen as in Japan's attenuation of the pertussis disease by 1974; however, by 1976 immunization rates dropped, which spurred an epidemic of 13,000 new cases and 41 deaths. Should the United States Public Health Service and the American public stop or reduce vaccination against disease, it is likely that the nation would see a resurgence of diseases thought long extinct such as polio, measles, mumps, ditherier, and pertussis. Today, controversy exists around the safety of vaccines and the possible relationship between vaccines and autism spectrum disorders. To date, no valid evidence exists as to these relationships. Decisions related to immunization are best made in concert with trained medical providers parents. The United States Public Health Service considers compliance with recommended immunization schedules as a key component of early health care and surveillance and core to long-term health for individuals and communities. Recommended guidelines and schedules of childhood immunizations are available at all public and private health facilities, the websites of the Centers for Disease Control (<http://www.cdc.gov/vaccines/vac-gen/why.html>), and the American



Academy of Pediatrics <http://www.immunize.org/aap/>). All have English as well as multiple language translations of the recommendations and guidelines.

In April 2012, Region 9 of the Health and Human Services National Leadership Academy for the Public's Health established a goal to create an H1N1 community by developing a public/private collaboration to increase immunization rates in school age children across Maricopa County that is not solely dependent on physicians. Maricopa County has been piloting a model that can be scaled up and replicated in communities with rural and suburban cross populations.



General Health

Health Insurance Coverage and Utilization of Plans

Alliance for Health Reform (2010) indicates a current status of families living in rural communities as follows: (1) the un-insurance rate in remote rural communities averages 23%; (2) in rural areas, a high proportion of people work at small firms or are self-employed; (3) those workers are less likely to have health coverage than those at larger firms; (4) more than 15% of rural residents are over the age of 65, compared to 12.4% nationwide; (5) rural residents have rates of chronic disease such as diabetes, heart disease, high blood pressure and obesity that are greater than urban or suburban populations; (6) seventy-seven percent of rural counties are considered primary care health professional shortage areas.

According to Transportation for America (n.d.), about 20% of the U.S. population, 56 million residents lived in rural areas and small towns. Sometimes federal transportation policy overlooks the needs and preferences of rural areas and small towns (Transportation for America, n.d.). The rural public transportation service system is important in terms of not only linking residents to jobs, health care, and other social services but also contributing to local economic development by linking businesses to customers and goods to markets (Friedman, 2004). However, only less than 10% of federal spending for public transportation goes to rural communities (Federal Highway Administration, 2001) and inter-city bus service had significantly declined (Friedman, 2004). Unfortunately, this phenomenon affected mostly to low-income workers and families because they more depend on transportation to access work and other activities (Friedman, 2004).

The average percent of uninsured people under 65 in the United States is 16.3 (SE=0.2) according to the 2010 Current Population Survey Annual Social and Economic Supplement (CPS-ASEC). a total of 49.9 million people are not insured, this represents an increase of 0.9 million from 2009, and however this difference is not statistically different. Children under 18, 9.8% (SE=0.4) for 2010 9.7% (SE=0.3) for 2009 not statistically different. The percent of children uninsured under the age of 6 that belong to a family was estimated to be 8.9% (SE=0.5) for 2010 and 8.8% (SE=0.5) for 2009.

The following Exhibit illustrates percentages of insured persons by county.

Exhibit 3-27

Percent uninsured in Arizona by county

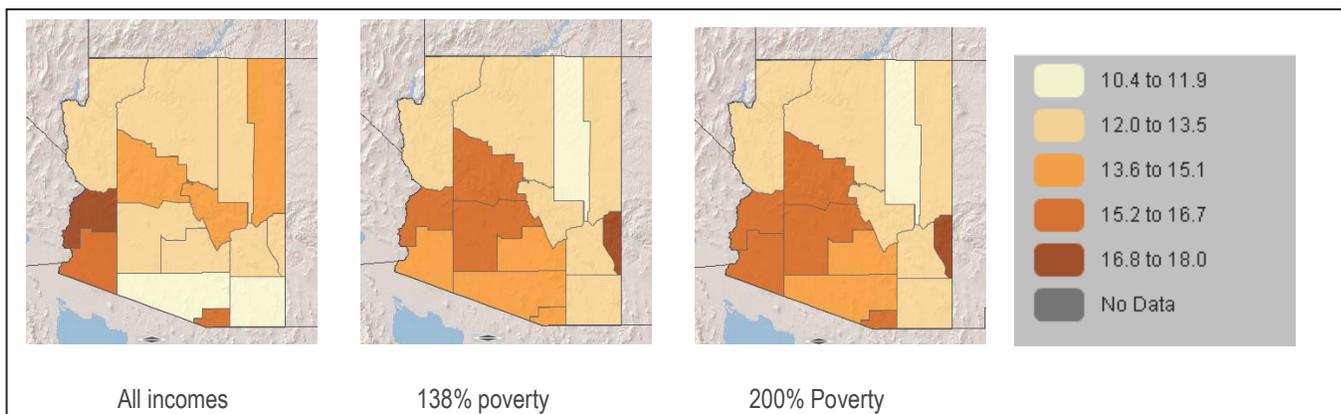


COUNTY	PERCENT UNINSURED UNDER AGE 19 (MOE*)		
	All incomes	At or below 138% poverty	At or below 200% poverty
Mohave	13.0 (2.4)	13.5 (3.7)	14.1 (3.2)
Navajo	13.4 (2.3)	9.5 (2.8)	10.7 (2.5)
Pima	11.5 (1.7)	16.3 (3.3)	16.1 (2.8)
Pinal	13.5 (2.2)	15.7 (7.4)	16.1 (3.4)
Santa Cruz	16.4 (3.4)	17.1 (4.9)	17.6 (4.3)
Yavapai	14.2 (6.0)	17.4 (4.8)	17.6 (4.0)
Yuma	15.2 (2.8)	16.6 (4.3)	17.0 (3.7)
Apache	15.1 (3.1)	13.2 (4.1)	13.8 (3.6)
Cochise	10.4 (2.0)	12.8 (3.5)	13.2 (3.0)
Coconino	12.8 (2.2)	13.3 (3.7)	14.0 (3.2)
Gila	14.2 (2.8)	13.9 (4.2)	14.6 (3.6)
Graham	13.5 (2.9)	14.5 (4.8)	14.8 (4.1)
Greenlee	12.2 (2.7)	21.9 (4.8)	20.7 (5.5)
La Paz	18.0 (3.6)	18.2 (5.1)	18.6 (4.4)
Maricopa	12.8 (1.1)	18.4 (2.5)	18.6 (2.0)

Source: U.S. Census Bureau, Small Area Health insurance Estimates Program (2009 Estimates).
 * Indicates Margin of Error.

Exhibit 3-28

Percent Uninsured in Arizona by County



Source: U.S. Census Bureau, Small Area Health insurance Estimates interactive map tool (2009 Estimates).

The following Exhibit indicates that the state or federal programs including the state’s Medicaid program, AHCCCS, KidsCare, Medicare, and ALTCS; as well as military coverage insure approximately 40% of Maricopa County children, and other governmental plans such as Indian Health Service.

Exhibit 3-29



Type of Insurance provided to Children

INSURANCE TYPE	INSURANCE TYPES FOR CHILDREN	
	Maricopa (GS 5)	Arizona
Employer/Union	66.6	64.2
Professional Association	12.7	10.5
Direct Purchase	10.1	11.7
Medicare	2.3	2.4
AHCCCS	31.3	33.5
KidsCare	1.3	1.3
Military	6.7	5.5
ALTCS	0.3	1.2
Other government plan	8.8	11.4
Other non-government plan	20.7	18.7

Source: Arizona Health Survey 2010 question 133-143, estimates provided by FTF.

¹ Percent represents and estimate based on the Arizona Health Survey and are subject to sampling error. ² GSA 5 stands for Geographic Service Area 5 and includes the following regional councils North Phoenix, Central Phoenix, South Phoenix, Northwest Maricopa, Northeast Maricopa, Central Maricopa, Southwest Maricopa, Southeast Maricopa, Salt River Pima Maricopa Indian Community, Gila River Indian Community, Tohono O'odham Nation.

The following Exhibit indicates that AHCCCS enrollment is fairly evenly distributed in the communities of Avondale, Tolleson, Buckeye, and Gila Bend; whereas, Litchfield Park has approximately one half of this enrollment.

Exhibit 3-30

Medical Enrollment

	MEDICAL ENROLLMENT ¹					
	Avondale-Tolleson	Buckeye	Gila Bend	Litchfield Park	Maricopa	Arizona
AHCCCS Enrollees	22.8	21.7	22.2	11.7	35.3	21.8
KidsCare Enrollees	1.9	1.9	3.1	1.1	1.6	1.5
Medicare Beneficiaries	NA	NA	NA	NA	10.5	12.8

Source: Bureau of Health Systems Development, Arizona Department of Health Services, 02-14-2012
NA Indicates data were not available ¹ Per 100 persons.



Nutrition

Literature reviews on the nature and incidence of childhood obesity as well as food insecurity and the impact of rural food deserts has been conducted. Furthermore, four questions have been included on the family survey to address food insecurity in remote communities including barriers to nutritious foods, limited choices, and distances traveled to food sources. As previously reported, a thematic map is included in the Appendix based on population shifts and locations of food distribution networks. In addition, additional resources to attenuate the effects of food desert phenomena have been identified including community gardens.

Childhood Obesity

One in five children are overweight by age 6 (CDC, 2010). Parents and childcare providers have the power to influence children's choice in food and activities. In 2010, the Arizona Department of Head Services initiated an award winning program titled, *letsmovechildcare.org*, in which childcare providers are given tools to help children make positive and lasting choices and learn proactive health behaviors. They estimate that about 12 million babies and young children are in childcare nationwide, and potentially at risk for later obesity. Their model includes the following recommendations.

- Physical Activity: Provide 1-2 hours of physical activity throughout the day, including outside play when possible.
- Screen Time: No screen time for children under 2 years. For children age 2 and older, strive to limit screen time to no more than 30 minutes per week during child care, and work with parents and caregivers to ensure children have no more than 1-2 hours of quality screen time per day (as recommended by the American Academy of Pediatrics, 2011).
- Food: Serve fruits or vegetables at every meal, eat meals family-style whenever possible, and don't serve fried foods.
- Beverages: Provide access to water during meals and throughout the day, and don't serve sugar-sweetened drinks. For children age 2 and older, serve low-fat (1%) or non-fat milk, and no more than one 4- to 6-ounce serving of 100% juice per day.
- Infant Feeding: For mothers, who want to continue breastfeeding, provide their milk to their infants and welcome them to breastfeed during the childcare day. Support all new parents' decisions about infant feeding

Food Insecurity

Food Deserts

The concept of *food desert* was first introduced in the United Kingdom in the early 1990 in order to survey disparities in food pricing and to depict geographical area with inadequate access to retail grocery stores (Ford, 2008). A food desert is a relatively excluded area in which people have experiences of physical and economic barriers in accessing healthy food (Reising and Hobbiss, 2000). Food deserts are widespread not only in rural but also in urban areas and particularly prevalent in low SES diverse communities; thus, residents living in low SES diverse communities are less able to sustain a healthy diet and have higher rates of obesity as a result (Powell, Slater, Mirtcheva, Bao, & Chaloupka, 2007; Glanz, Sallis, Salens, & Frank, 2007).



According to the National Poverty Center (NPC), 15.1% of all persons in the U.S. lived in poverty in 2010. NPC points out that the poverty rate in 2010 was the highest rate since 1993. In particular, poverty rates for blacks and Hispanics exceed the national average. For instance, in 2010, 27.4% of blacks and 26.6 percent of Hispanics were in poverty while only 9.9% of non-Hispanic whites and 12.1% of Asians. In 2010, 16.4 million children or 22.0 percent were in poverty. The poverty rate for children also differs by race and Hispanic origin, as shown in the table below indicating that approximately 33% of children are receiving Temporary Financial Assistance for Needy Families.

Numerous concerns have been raised over potential increases in program utilization of federal support programs for families and children; however, it appears that WIC participation in the region has generally fallen between 2010 and 2011. As the population increased across the region, this is a surprising trend.

Exhibit 3-31

WIC Participation 2010-2011

YEAR	WIC PARTICIPATION ¹ 2010-2011							
	Total certified		Certified women		Certified infants		Certified children	
	2010	2011	2010	2011	2010	2011	2010	2011
Avondale	6'722	6'524	1'711	1'672	1'876	1'804	3'144	3'048
Buckeye	4'298	4'112	1'078	1'020	1'166	1'097	2'054	1'995
Goodyear	2'260	2'363	605	642	615	678	1'040	1'043
Tolleson	3'470	3'342	894	881	950	930	1'626	1'531
Litchfield Park	859	763	223	184	250	224	386	355
Tonopah	485	468	465	107	124	107	248	254
Gila Bend	256	277	67	68	71	69	118	140
Palo Verde	303	286	69	70	79	79	155	137
Southwest Region	18'653	18'135	4'760	4'644	5'122	4'988	8'771	8'503
Maricopa County	232215	222544	59083	57164	62025	59099	111407	106281

Source: Data provided by FTF on April 4th 2012.

¹ Data only include ZIP codes that had at least 30 WIC participants per category within them to protect confidentiality of WIC participants.

Conversely, family use of Temporary Assistance for Needy Families (TANF) has increased over the period of time between 2007 and 2010. This increase may be especially important, as those enrolled are likely 'newly' in needs as effective July 1, 2010, the Lifetime Benefit Limit for TANF was reduced from 60 months to 36 months. All families that had received TANF from 37 to 60 months were immediately removed from the TANF roles.



Dramatic changes that parallel local growth patterns are demonstrated in all communities except Gila Bend and Palo Verde. The region and Maricopa County both demonstrated higher use patterns than the state in general.

Exhibit 3-32

Temporary Assistance for Needy Families

AREA	TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF)					
	TANF children age 0-5			TANF families with children age 0-5		
	Jan 2007	Jan 2010	Change (Percent)	Jan 2007	Jan 2010	Change (Percent)
Avondale	336	383	14.0%	263	297	14.0%
Buckeye	143	195	36.4%	110	144	36.4%
Gila Bend	< 25	< 25	0.0%	< 25	< 25	0.0%
Goodyear	96	144	50.0%	82	109	50.0%
Litchfield Park	46	52	13.0%	39	42	13.0%
Palo Verde	< 25	< 25	0.0%	< 25	< 25	0.0%
Tolleson	119	195	63.9%	98	150	63.9%
Tonopah	< 25	41	192.9%	< 25	32	192.9%
Southwest Maricopa	785	1043	32.9%	634	798	32.9%
Maricopa	11,784	15,452	31.1%	9,252	11,603	25.4%
Arizona	20,867	23,866	14.4%	16,511	18,129	9.8%

Source: Arizona Department of Economic Security, Provided by FTF (Unpublished Data) (< 25 = less than 25 cases).

As previously described, children in households led by single females are more likely to be in poverty than children in two parent households or households led by fathers. These data may prove valuable as a tool to identify communities of specific need for maternal service and support.

Exhibit 3-33

Children Under 5 Years Below Poverty Level



AREA	CHILDREN UNDER 5 YEARS BELOW POVERTY LEVEL			
	Total children under 5 below poverty level	In married-couple family	In male householder	In female householder
Avondale	1500 (21.0%)	459	169	872
Buckeye	861 (15.8%)	314	165	382
Gila Bend	74 (53.6%)	0	18	56
Goodyear	509 (10.5%)	79	103	327
Litchfield Park	0 (0.0%)	0	0	0
Tolleson	144 (23.5%)	19	13	112
Southwest Maricopa	3088 (16.8%)	871	468	1749
Maricopa	66,160 (23.4%)	27,046	7,098	32,016
Arizona	112,215 (24.6%)	43,403	11,594	57,218

Source: US Census Bureau 2006-2010 American Community Survey.

NOTE: Data are based on a sample and are subject to sampling variability. Although the American Community Survey produces intercensal estimates of the population, the 2010 Census provides the official counts of the population

Data in the following Exhibit indicate that diverse subpopulations account for greater numbers of children in poverty. Of note are the disproportionately large rates of American Indian, Hispanic, and African American families in poverty within the region. Again, these data may be used to target specific strategies for communities.

The following exhibit illustrates the percentages of children under the age of 18 below the federal poverty level within specific race or ethnicity. Each cell represents the percent of children within a given ethnicity who are in poverty. Thus, the sum of percentages does not equal 100%.

Exhibit 3-36

Children Under 18 Below Poverty Level by Race and Community

AREA	CHILDREN UNDER 18 BELOW POVERTY LEVEL BY RACE (2010-5 YR AVERAGE)
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	White (not Hispanic)	African American	Hispanic	Asian	American Indian	Native Hawaiian	Other race
Avondale	381(5.4%)	187(12.5%)	1566(20.4%)	45(8.2%)	36(17.1%)	0(0.0%)	188(12.5%)
Buckeye	589(9.2%)	80(11.1%)	356(11.2%)	46(14.7%)	0(0.0%)	0(0.0%)	118(14.0%)
Gila Bend	9(8.8%)	0(0.0%)	80(28.9%)	0(0.0%)	8(25.8%)	0(0.0%)	43(45.7%)
Goodyear	512(5.1%)	88(12.3%)	182(5.6%)	23(7.7%)	0(0.0%)	0(0.0%)	59(7.6%)
Litchfield Park	0(0.0%)	16(14.4%)	15(6.4%)	0(0.0%)	0(0.0%)	0(0.0%)	0(0.0%)
Tolleson	33(19.4%)	28(24.1%)	228(20.8%)	0(0.0%)	0(0.0%)	0(0.0%)	48(25.8%)
Tonopah	8(50.0%)	0(0.0%)	0(0.0%)	0(0.0%)	0(0.0%)	0(0.0%)	0(0.0%)
Arlington	0(0.0%)	21(100%)	0(0.0%)	0(0.0%)	0(0.0%)	0(0.0%)	0(0.0%)
Maricopa	29797(4.9%)	7760(19.6%)	47805(21.9%)	2584(8.7%)	2800(21.5%)	130(8.0%)	10190((18.2%)
Arizona	57495(5.7%)	9389(17.9%)	81366(21.7%)	3616(9.4%)	16054(29.2%)	210(8.5%)	21651(19.7%)

Source: US Census Bureau 2006-2010 American Community Survey.

NOTE: Data are based on a sample and are subject to sampling variability. Although the American Community Survey produces intercensal estimates of the population, the 2010 Census provides the official counts of the population.

Again, variability among communities is demonstrated by the incidence of children receiving Supplemental Security Income. These funds are designed to augment the support for individuals with federally qualified disabilities and in need of additional income.

Exhibit 3-35

Children with Supplemental Security Income

AREA	CHILDREN ¹ WITH SUPPLEMENTAL SECURITY INCOME (SSI ²)			
	Total living in household with SSI	In married couple family	In male householder family	In female householder family
Avondale	5,998	1,847	542	3,595



Buckeye	2,542	1,128	594	820
Gila Bend	118	7	0	111
Goodyear	1,897	838	131	891
Litchfield Park	89	89	0	0
Tolleson	754	74	49	631
Southwest Maricopa	11,398	3,983	1,316	6,048
Maricopa	198,816	84,628	21,056	91,235
Arizona	376,159	162,810	36,807	173,044

Source: US Census Bureau 2006-2010 American Community Survey.

NOTE: Data are based on a sample and are subject to sampling variability. Although the American Community Survey produces intercensal estimates of the population, the 2010 Census provides the official counts of the population.

¹ Children under 18 years in households. ² Cash public assistance income or food stamps/SNAP in the past 12 months.

In February 2010, the Obama Administration proposed a \$400 million Healthy Food Financing Initiative to promote healthy food retailers to access to underserved rural and urban communities, indicating the prevalence of food deserts in the communities (U.S. Department of Health and Human Services, 2010). Several states have also launched policy efforts to increase access to health food (Bitler & Haider, 2011). For example, Pennsylvania's Fresh Food Financing Initiative was launched to provide a public-private partnership in offering loans and grants to qualified food retailers that provide fresh food in underserved low-income communities (Bitler & Haider, 2011).

In Arizona, a research study, which is called Maryvale Nutrition Environment Measures Survey (NEMS) in an adjacent community but not in the southwest Maricopa region, was conducted to examine the food environment in the west Phoenix communities in the summer of 2011 (Taylor, Schoon, Crouch, Talbot, & Kelly, 2011). This study provides a depiction of the affordability and availability of health food in the area. The key findings are as follows:

There were 101 food stores in the study area, however 54% of these were convenience stores and another 16% were dollar stores or pharmacy-type stores. There were only 13 grocery stores in the region.

Accessibility to food outlets was fairly high. However, for many, grocery stores are beyond comfortable walking distance.

Availability of healthy food was low. On average, stores scored just 9 out of a possible 38 points in terms of availability of healthy food. Just 5 stores (all grocery stores) were categorized as having high availability. Two of these were concentrated at a single intersection.

Affordability of healthy food options was very poor. On average, stores scored only 1 out of a possible 21 points in terms of affordability of healthy food items. None of the stores had what could be considered a 'good' affordability rating.

Less than one-third of the stores carried any sort of fresh vegetables, or any healthy varieties of chicken, beef or cheese.

Healthy options for beef, chicken and juice were more expensive than less healthy options in most stores (p. 4).



This NEMS study provides recommendations to improve a communities' food environment, which contributes to healthy, active living in the community (Taylor, Schoon, Crouch, Talbot, & Kelly, 2011). It is plausible that the recommendations are applicable too much of the southwest Maricopa region as the demographics are similar. First, existing grocery stores should be improved in terms of availability and affordability of healthy options within the communities. Second, convenience stores should be transformed to stock more fresh fruit and vegetables. Currently only three out of approximately 60 convenience stores carry fresh vegetables, and less than half of convenience stores carry any fresh fruit. Third, farmers' markets should be start up to provide fresh and healthy fruit and vegetables. Currently there are no farmer's markets operating in the communities. Fourth, community gardens should be developed in order to provide a constant source of fresh produce for the community. Community gardens can provide organic fruit and vegetables at a low price. Presently, several community gardens exist, but more community gardens need to be developed. Lastly, education and advertising on availability and affordability of healthy options should be prevalent. For instance, community residents might not know which options are healthy and which options are unhealthy.

Community gardens are "places where neighbors can gather to cultivate plants, vegetables, and fruits" (Local Government Commission, n.d., p. 1). Community gardens can improve nutrition, safety, physical activity, community engagement, and economic vitality for residents and their neighborhood (Local Government Commission, n.d.). In particular, community gardens can provide positive impact on children in terms of teaching about the source of fresh produce, showing community stewardship, introducing the importance of environmental sustainability, being good places to teach math, business and communication skills through various activities and interaction (Local Government Commission, n.d.). According to the National Environmental Education & Training Foundation (2000), integrating environment-based education into academic programs can improve reading; science, math, and social studies test scores and reduce classroom discipline problems.

Food Insecurity Survey Findings

Family survey respondents were queried about cost and quality of the foods served at home. Fifty-one percent of respondents admitted that cost has affected the quality and nutrition value of the foods they serve, and 14.2% noted that the distance traveled to their closest food supplier affects the value of their foods as well; while 71.8% of the respondents reported traveling 5 miles or less to their closest food source. The remaining respondents travel 6 miles or more with 12.5% of them traveling more than 15 miles in order to have access their closest food supplier.

The Exhibit below illustrates the respective distances traveled for food shopping. It is clear that the more rural areas experience greater difficulty when accessing food high quality food.

Exhibit 3-36

Southwest Family Survey – Food and Nutrition

AREA	FOOD AND NUTRITION (PERCENT)						
	Miles traveled to purchase healthy foods			Distance affects quality of foods		Cost affects quality of foods	
	1-5 miles	6-15 miles	More than 15 miles	Yes	No	Yes	No



Avondale	83.6	12.7	3.7	11.3	88.7	52.2	47.8
Buckeye	46.4	25.0	28.6	27.6	72.4	46.2	53.8
Goodyear	84.7	15.3	0.0	5.3	94.7	50.9	49.1
Tolleson	79.2	16.7	4.2	12.5	87.5	47.9	52.1
Tonopah	6.9	24.1	69.0	34.5	65.5	58.6	41.4
Southwest Maricopa	71.8	15.7	12.5	14.2	85.8	50.8	49.2

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.



Oral Health

Oral health care can no longer be separated from the rest of body. Having good oral health is key to optimal general health. Primary care pediatricians who provide a medical home to their patients are in a unique position to influence the overall health of their patients by providing preventive oral health care. This care may include an oral health risk assessment; anticipatory guidance and counseling about oral hygiene and nutrition; fluoride varnish application for children at high risk of developing caries; and a referral to a *dental home*.

Why is this important?

- Early childhood caries (cavities) is the number 1 chronic disease affecting young children.
- Early childhood caries is 5 times more common than asthma and 7 times more common than hay fever.
- Tooth pain keeps many children home from school or distracted from learning.
- Children are recommended to have their first dental visit by age 1 by the American Academy of Pediatric Dentistry and the American Academy of Pediatrics.

General Considerations for Arizona Children Birth to Five (Arizona Oral Health Survey of Preschool Children 2009).

- Tooth decay starts early in childhood; 7% of children ages birth through age have the first signs of tooth decay.
- Children ages 2 through 4 have tooth decay rates far beyond national recommendations;
- 37% have tooth decay experience and 30% have untreated tooth decay.
- Disparities exist for children who come from families where parents/guardians have a high school education or less. They are significantly more likely to have untreated tooth decay (42%) than children who come from families with parents/guardians who have more than a high school education (24%).
- Children are not getting needed dental visits; 54% of children age 3 had never visited a
- dentist.

General Considerations for Arizona Third Graders (Arizona Healthy Bodies, Healthy Smiles 2010).

- 40% of Arizona's third graders have untreated tooth decay.
- 4% of third graders have urgent treatment needs.
- Urgent treatment needs are defined as pain and or infection requiring treatment within 24-48 hours.
- 47% have at least one dental sealant, 76% need initial or additional dental sealants.
- Oral health status varies among children with different types of dental insurance and among children with and without dental insurance.
- Arizona has substantial disparities in oral health.
- Low-income children, Hispanic and Asian and American Indian children have more dental treatment needs.

Exhibit 3-37



Children with Tooth Decay in Arizona

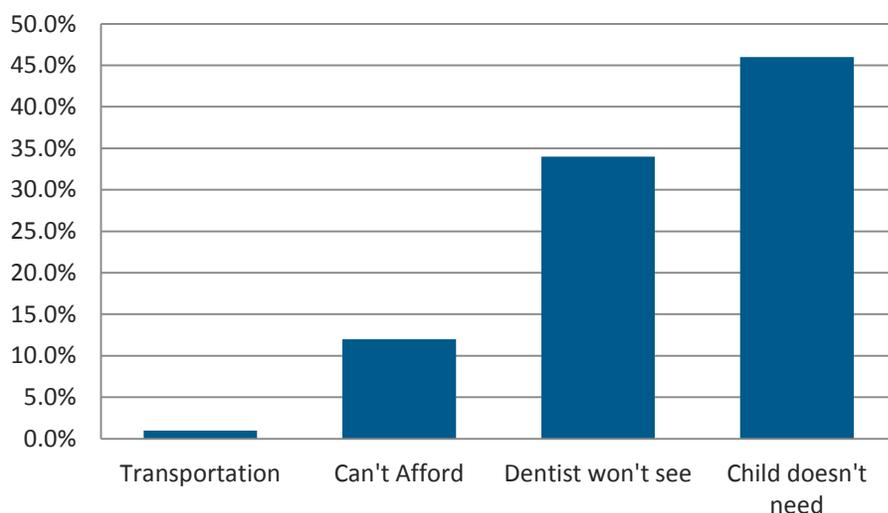
	PERCENT OF CHILDREN WITH TOOTH DECAY BY AGE				
	0	1	2	3	4
Untreated Tooth Decay	2.0	4.0	15.0	29.0	40.0
Treated Tooth Decay	1.0	0.0	2.0	5.0	16.0

Source: Office of Oral Health, Arizona Department of Health Services, Arizona Oral Health Survey of Preschool Children 2009
 Note: Percent represents an estimate based on the Arizona Oral Health Survey of Preschool Children 2009 and are subject to sampling error.

When surveyed, families reported reasons for non-compliance with dental treatment. Of concern is that greater than 30% reported dentist's refusal to see children. Further investigation yielded that local dentists did not take public insurance programs.

Exhibit 3-38

Reasons for No Dental Visits in Arizona



Source: Office of Oral Health, Arizona Department of Health Services, Arizona Oral Health Survey of Preschool Children 2009

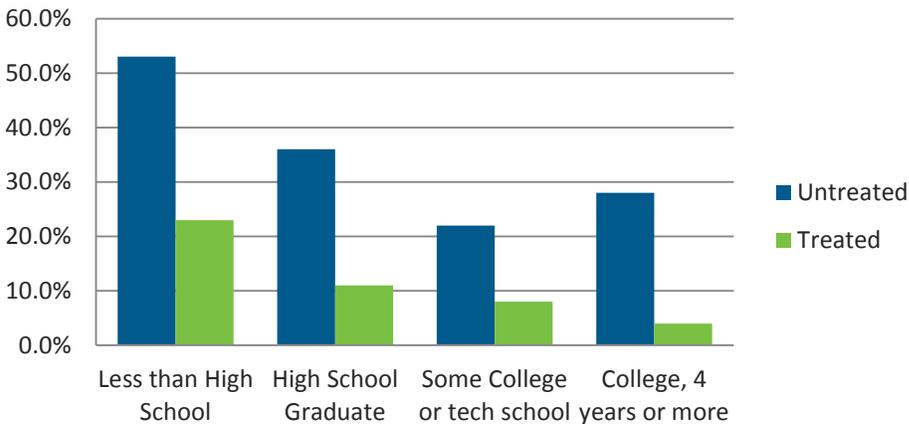
Note: Percent represents an estimate based on the Arizona Oral Health Survey of Preschool Children 2009 and are subject to sampling error.

An inverse relationship appears to exist between treatment - lack of treatment and parental education levels. Parents with less than high school preparation reported over 50% lack of treatment as compared to all other categories. This may be also be related to respective income.

Exhibit 3-39

Tooth Decay by Parents Education in Arizona

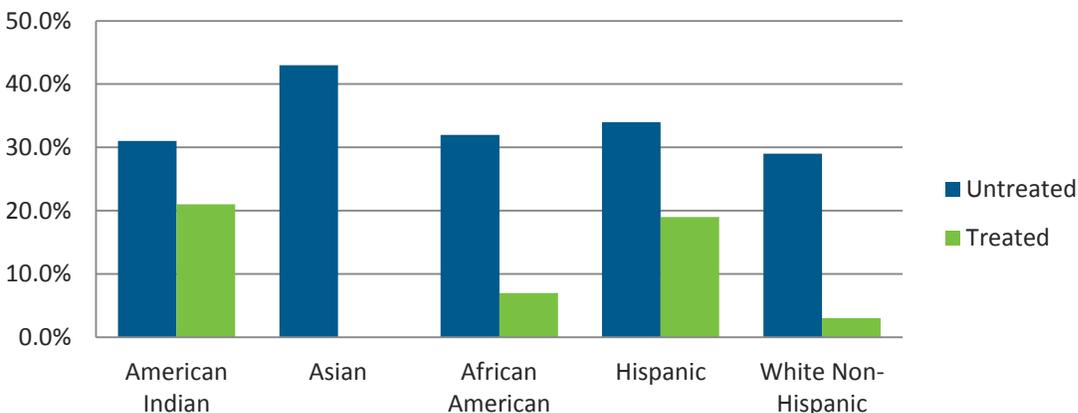




Source: Office of Oral Health, Arizona Department of Health Services, Arizona Oral Health Survey of Preschool Children 2009
 Note: Percent represents an estimate based on the Arizona Oral Health Survey of Preschool Children 2009 and are subject to sampling error.

Exhibit 3-40

Untreated and Treated Tooth Decay by Race/Ethnicity in Arizona



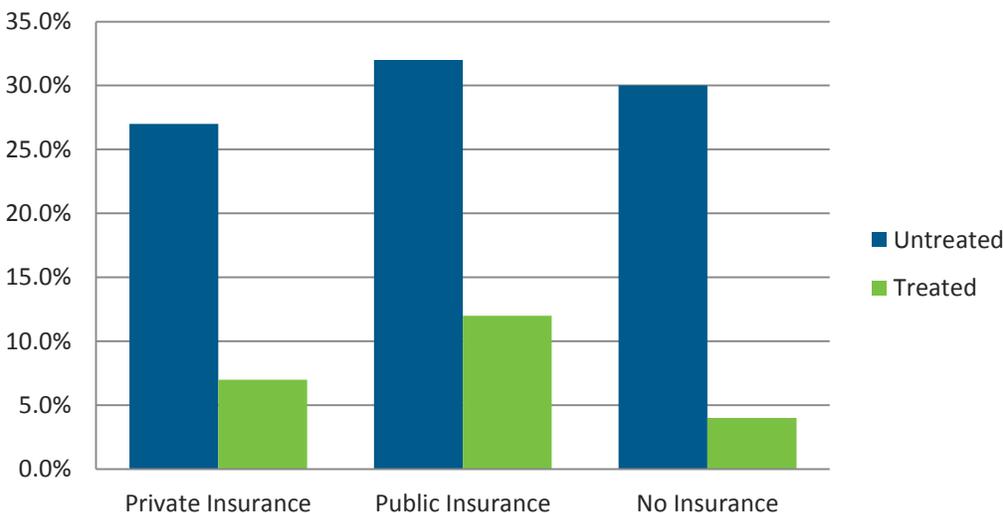
Source: Office of Oral Health, Arizona Department of Health Services, Arizona Oral Health Survey of Preschool Children 2009.
 Note: Percent represents an estimate based on the Arizona Oral Health Survey of Preschool Children 2009 and are subject to sampling error.

Based on the Arizona Department of Health Service’s Oral Health Survey, rates of untreated dental caries are less for children using private insurance than those with public insurance or no insurance.

Exhibit 3-41

Untreated and Treated Tooth Decay by Insurance Status in Arizona





Source: Office of Oral Health, Arizona Department of Health Services, Arizona Oral Health Survey of Preschool Children 2009
 Note: Percent represents an estimate based on the Arizona Oral Health Survey of Preschool Children 2009 and are subject to sampling error.

Health Literacy

In order to assess Health literacy of families, the Single Item Literacy Screener (SILS) (Morris et al, 2006) was included in the family survey for the Southwest Maricopa region, the SILS is an instrument designed to identify individuals with limited reading ability who need help reading health-related materials; individuals are classified as in need of assistance if they respond that they need someone to help them when they read instructions, pamphlets, or other written material from their child’s doctor or pharmacist sometimes or more often than that (sometimes, often, always).

Cultural competence can be a major factor in the long-term health compliance for children including immunization, well checks, nutrition, and developmental screenings. Cultural competence refers to relationship between provider and service recipient, in which patients and their families are delivered care in ways that are aligned with language, traditions, and beliefs. Health literacy or the ability to read and understand medical directives is directly related to cultural competence, especially for families whose primary/home language is not English. With respect to communities in the southwest Maricopa region, there is great variability between the percentages of families needing assistance with written materials. The greatest need for assistance appears in the communities of Buckeye and Tonopah. Consideration should be given to the almost 10% of families in Buckeye that report always needing assistance. Furthermore, low levels of health literacy may not always be related to levels of English proficiency, rather it may be due in part to general lower literacy related to parental educational levels. Numerous models of health information delivery are available including *Promotora* and home visiting models that exist in the southwest Maricopa region.

Exhibit 3-42

Southwest Family Survey – Health Literacy

AREA	HELP NEEDED WHEN READING WRITTEN MATERIALS FROM CHILD’S DOCTOR (PERCENT)
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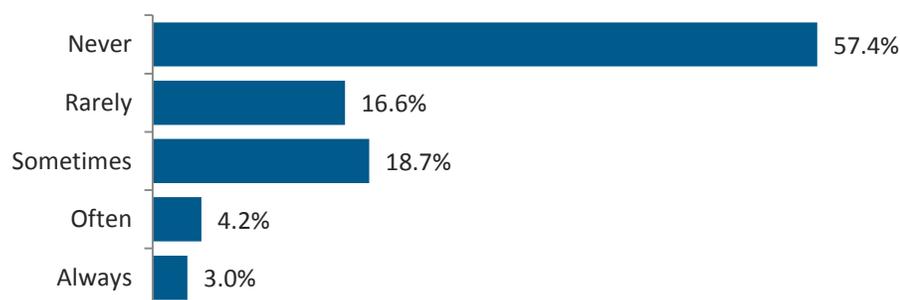
	Never	Rarely	Sometimes	Often	Always
Avondale	57.6	20.1	15.3	4.2	2.8
Buckeye	43.8	6.3	34.4	6.3	9.4
Goodyear	73.6	5.7	15.1	5.7	0.0
Tolleson	65.3	18.4	14.3	0.0	2.0
Tonopah	35.3	26.5	32.4	2.9	2.9
Southwest Maricopa	57.4	16.6	18.7	4.2	3.0

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

According to the instrument's criteria, 25.9% of the survey respondents were classified as in need of help when reading instructions or other written material from their child's doctor or pharmacist, to be more specific 3.0% responded to always need help, 4.2% responded to need help often while 18.7% of the respondents mentioned to need help sometimes, as shown in the figure below.

Exhibit 3-43

Southwest Maricopa Family Survey – Respondents in Need of Help When Reading Medical Materials



Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

Statistically significant differences [$F(6,315)=6.07, p<.001$] were detected for race/ethnicity, further multiple group analysis suggested that the difference between the White/Anglo group when compared to Hispanics was significant ($p<.001$) whereas differences in health literacy scores for other groups were not. Health literacy scores for Hispanics were on average 0.60 points higher than health literacy scores for Whites/Anglo, implying that Hispanic respondents in this sample are more likely to need help when they read instructions, pamphlets, or other written material from their child's doctor or pharmacist when compared to White respondents.



Survey Findings – General Health

Regular examinations by a doctor are of vital importance to keep children healthy, they also represent an opportunity for parents to talk to the doctor about developmental issues or to address any question they might have regarding their children's overall health. One of the sections of the southwest Maricopa County family survey was devoted to children's medical care, families were queried about their children routine and emergency medical care; 69.5% of the respondent families mentioned to have one or more persons as a personal doctor or nurse while 26.6% could not identified one person as being their child's personal doctor, being participants from Goodyear and Tolleson the ones with the highest incidence of children with an unidentified personal doctor nurse (32.2%and 28.6% respectively).

The U.S. HHS Health Resource Service Administration Bureau of Maternal and Child Health identify the source of a personal physician and a routine source of medical care other than emergency facilities as a Medical Home. Medical Home is a place where children and families can go for assistance in navigating the multiple levels of the medical care system. It is considered one of the Core Outcomes for healthy children and is also identified within the Head Start Guidelines as a measure of wellness.

While not all families have a personal doctor for their children, the majority of them (93.1%) acknowledge having a place for children to go when in need of routine preventive care such as physical examinations or well-child check-ups, whereas 79.4% mentioned having a place to take their children when they are sick or advice about children's health is needed.

However, 26% of families in the region report not having a personal source of care. Of significant concern are families in Goodyear, 32% of whom do not have a personal source of care.

Exhibit 3-44

Southwest Maricopa Family Survey – Children's Personal Doctor

AREA	ONE OR MORE PERSONS AS PERSONAL DOCTOR OR NURSE (PERCENT)			
	Yes, one person	Yes, more than one person	No	Don't know
Avondale	52.6	20.4	23.4	3.6
Buckeye	61.1	38.9	0.0	0.0
Goodyear	54.2	13.6	32.2	0.0
Tolleson	55.1	12.2	28.6	4.1
Tonopah	61.5	7.7	15.4	15.4
Southwest Maricopa	55.1	14.4	26.6	3.9

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

Convergently, the majority of families report having a medical home or routine source of care; while approximately 21% of families region-wide have no regular source for care. In addition, it appears that



greater than half of children see a physician between none and twice annually; while approximately 15 % visit a physician four or more times each year.

Exhibit 3-45

Southwest Maricopa Family Survey – Health Care

AREA	HEALTH CARE (PERCENT)				
	Place for children to go when sick		How often a medical provider has been seen in last 6 months		
	Yes	No	0-2 Times	2-4 Times	More than 4 times
Avondale	80.3	19.7	54.5	32.2	13.3
Buckeye	95.7	4.3	56.5	13.0	30.4
Goodyear	75.9	24.1	53.3	30.0	16.7
Tolleson	77.6	22.4	49.0	35.3	15.7
Tonopah	67.7	32.3	63.0	29.6	7.4
Southwest Maricopa	79.4	20.6	53.6	31.2	15.3

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

In general, respondent families reported frequent visits to their children's medical provider, more than half of the respondents (53.6%) acknowledge having seen a medical provider for the children 2 times or less in the last 6 months, 31.2% made two to four visits to their child's doctor while the remaining 15.3% made more than four visits to their child's health provider. Several reported the doctor's visit taking place at a hospital emergency room, 5.1% of the visits also took place at a hospital but at their outpatient department while slightly more than 25% were made at a clinic.

More than half the families in this sample acknowledge receiving state support for medical care, 70.7% of the respondents were currently receiving AHCCCS medical insurance benefits and 1.4% was under Medicaid; 24.9% of the participants were not receiving health care benefits from the state.

Exhibit 3-46

Southwest Maricopa Family Survey – State Health Care Support



AREA	STATE HEALTH CARE (PERCENT)			
	No	AHCCCS	Medicaid	Other
Avondale	13.8	82.2	0.7	0.7
Buckeye	32.4	61.8	2.9	2.9
Goodyear	33.3	58.7	3.2	3.2
Tolleson	26.9	69.2	1.9	1.9
Tonopah	24.3	73.0	0.0	2.7
Southwest Maricopa	24.9	70.7	1.4	1.7

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

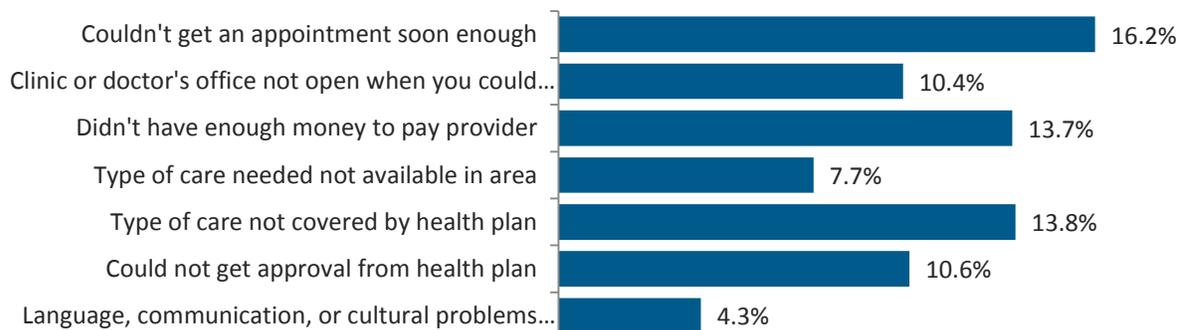
Medical Care Delays

According to the National Center for Health Statistics, children without health insurance are more likely to go without services such as medical care, dental care and prescription medicine; respondent families in the sample were asked if during the last 12 months have delayed or gone without needed health care for their children, 11.4% of the respondent families admitted delaying or going without needed healthcare for their children, a slightly less percent of respondents (10.5%) admitted not providing prescribed medicine to their children due to the cost of the medicine; numerous reasons were given as to why such medical delays have occurred in the past, as outlined in the figure below, economical reasons and type of care needed not covered by health plan were the most selected choices by the survey respondents, 13.8% admitted delaying needed healthcare because the type of care needed was not covered by health plan and 13.7% delayed the needed care for economic reasons, whereas only 4.3% noted to have such delays because of language, communication, or cultural problems with provider.

Exhibit 3-47

Southwest Maricopa Family Survey – Reasons for delaying needed medical care





Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

Generally, families do not report delays in providing prescriptions to their children; however, families in Tonopah have a higher incidence of delays than their peers in neighboring communities.

Exhibit 3-48

Southwest Maricopa Family Survey – Prescribed Medicine Delayed

AREA	HEALTH CARE (PERCENT)		
	Medicine prescribed not provided due to cost of medicine		
	Yes	No	Don't know
Avondale	11.9	85.3	0.7
Buckeye	8.7	82.6	0.0
Goodyear	4.9	91.8	1.6
Tolleson	12.2	85.7	0.0
Tonopah	16.1	77.4	3.2
Southwest Maricopa	10.5	86.2	0.9

Percentages do not add up to 100, some choices were excluded.

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

Good news is that 95% of children had well checks within the past year. This is a definite asset across the county.

Exhibit 3-49

Time Elapsed Since Last Well Child Visit – Arizona Health Survey 2010

PERCENT ¹ OF TIME ELAPSED



AREA	SINCE LAST WELL-CHILD VISIT	
	Maricopa (GSA 5)	Arizona
One year or less	94.9	94.8
Within past 2 years	4.1	4.3
Within past 5 years or more	1	0.8
Never	0.0	0.1

Source: Arizona Health Survey 2010 question 44, estimates provided by FTF.

¹ Percent represents and estimates based on the Arizona Health Survey 2010 and is subject to sampling error. ² GSA 5 stands for Geographic Service Area 5 and includes the following regional councils North Phoenix, Central Phoenix, South Phoenix, Northwest Maricopa, Northeast Maricopa, Central Maricopa, Southwest Maricopa, Southeast Maricopa, Salt River Pima Maricopa Indian Community, Gila River Indian Community, Tohono O'odham Nation.

Furthermore, according to the Arizona Health Survey (2010), only 4% of families in the service unit that includes the southwest Maricopa region reported delaying medical care for children during the previous year.

Exhibit 3-50

Delayed in Needed Medical Care – Arizona Health Survey 2010

AREA	PERCENT ¹ DELAYED IN NEEDED MEDICAL CARE IN LAST 12 MONTHS	
	Maricopa (GSA 5)	Arizona
Yes	4.3	5.4
No	95.7	94.6

Source: Arizona Health Survey 2010 question 54, estimates provided by FTF.

¹ Percent represents and estimates based on the Arizona Health Survey 2010 and is subject to sampling error. ² GSA 5 stands for Geographic Service Area 5 and includes the following regional councils North Phoenix, Central Phoenix, South Phoenix, Northwest Maricopa, Northeast Maricopa, Central Maricopa, Southwest Maricopa, Southeast Maricopa, Salt River Pima Maricopa Indian Community, Gila River Indian Community, Tohono O'odham Nation.

Findings from the Arizona Health Survey reflect those data collected for this regional report and indicate that only limited delays were experienced when obtaining prescription medications. The local survey indicates a slightly higher rate of 10%.

Exhibit 3-51

Percent Delayed in Obtaining Prescribed Medicine

AREA	PERCENT ¹ DELAYED IN OBTAINING PRESCRIBED MEDICINE IN LAST 12 MONTHS
------	---------------------------------------------------------------------------------



	Maricopa (GSA 5)	Arizona
Yes	6.1	5.8
No	93.9	94.2

Source: Arizona Health Survey 2010 question 54, estimates provided by FTF.

¹ Percent represents and estimates based on the Arizona Health Survey 2010 and are subject to sampling error. ² GSA 5 stands for Geographic Service Area 5 and includes the following regional councils North Phoenix, Central Phoenix, South Phoenix, Northwest Maricopa, Northeast Maricopa, Central Maricopa, Southwest Maricopa, Southeast Maricopa, Salt River Pima Maricopa Indian Community, Gila River Indian Community, Tohono O’odham Nation.

Cultural Beliefs and Medical Responsiveness

Health care services that are respectful of and responsive to the health beliefs and cultural needs of diverse families can help bring about positive health outcomes. When families were queried on the responsiveness of medical providers to personal and cultural beliefs about their children’s health, 45.8% of the families responded that they did not consider their medical providers were not responsive to their personal and cultural beliefs. Furthermore, 34% of families reported that that medical providers have not been willing to refer them to alternative medical services that are responsive to their beliefs. While personal and cultural beliefs might vary widely across different cultural and ethnical backgrounds, language is one of the most common barriers in the health care settings that can lead to problems such as delay or denial of services, issues with medication management, and underutilization of preventive services (Green et al. 2005, Jacobs et al. 2004), respondent families were asked if translation services have been available to them when necessary, 21.1% of the respondents agreed that such services have not been available to them, while a larger percentage (50.2%) acknowledge translation services have been offered to them when necessary.

Exhibit 3-52

Southwest Maricopa Family Survey – Responsiveness of Medical Providers

AREA	HEALTH CARE (PERCENT)					
	Medical provider responsive to personal and cultural beliefs about child’s health ¹			Medical provider willing to refer you to alternative medical services responsive to your beliefs and culture ¹		
	Yes	No	Don’t know	Yes	No	Don’t know
Avondale	39.7	46.8	5.7	47.5	31.9	7.1



Buckeye	43.5	39.1	8.7	39.1	30.4	13.0
Goodyear	47.5	41.0	4.9	41.0	31.1	9.8
Tolleson	32.0	54.0	2.0	44.0	36.0	8.0
Tonopah	41.9	41.9	9.7	38.7	35.5	12.9
Southwest Maricopa	40.9	45.8	5.6	43.2	34.0	8.3

¹ Percentages do not add up to 100, some choices were excluded.

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children.

[Child Safety](#)

Child Abuse and Neglect

In 2008, U.S. state and local child protective services (CPS) received 3.3 million reports of children being abused or neglected.

- CPS estimated that 772,000 (10.3 per 1,000) of children were victims of maltreatment.
- Approximately three quarters of them had no history of prior victimization.
- Seventy-one percent of the children were classified as victims of child neglect; 16% as victims of physical abuse; 9% as victims of sexual abuse; and 7% as victims of emotional abuse.
- A non-CPS study estimated that 1 in 5 (20%) of U.S. children experience some form of child maltreatment: approximately 1% were victims of sexual assault; 4% were victims of child neglect; 9% were victims of physical abuse; and 12% were victims of emotional abuse. Note: A child is counted each time she or he is a subject of a report, which means a child may be counted more than once as a victim of child maltreatment.

In 2008, some children had higher rates of victimization:

- African-American (16.6 per 1,000 children).
- American Indian or Alaska Native (13.9 per 1,000 children).
- Multiracial (13.8 per 1,000 children).¹

Overall, rates of victimization were slightly higher for girls (10.8 per 1,000 children) than boys (9.7 per 1,000 children).

In 2008, CPS reported the approximate rates of child maltreatment victims:

- per 1,000 for infants less than 1 year old;
- 12.9 per 1,000 for 1 year-olds;
- 12.4 per 1,000 for 2 year-olds;
- 11.7 per 1,000 for 3 year-olds;
- 11.0 per 1,000 for 4 to 7 year-olds;
- 9.2 per 1,000 for 8 to 11 year-olds;
- 8.4 per 1,000 for 12 to 15 year-olds; and
- 5.5 per 1,000 for 16 to 17 year-olds.



Non-CPS studies have reported higher rates of nonfatal child maltreatment cases, ranging from 15 to 43 per 1,000 cases. In 2008, an estimated 1,740 children ages 0 to 17 died from abuse and neglect (rate of 2.3 per 100,000 children).

- 80% of deaths occurred among children younger than age 4; 10% among 4-7 year-olds; 4% among 8-11 year-olds, 4% among 12-15 year olds; and 2% among 16-17 year-olds.
- 39% of deaths were non-Hispanic White children.
- 30% of deaths were African-American children.
- 16% of deaths were Hispanic children.
- Children with disabilities and special health care needs are three times more likely to suffer abuse than their non-disabled peers.
- In 2010, U.S. state and local child protective services (CPS) received 3.6 million reports of children being abused or neglected.
- Victims in the age group of birth to 1 year had the highest rate of victimization at 20.6 per 1,000 children of the same age group in the national population.
- Victimization was split between the sexes with boys accounting for 48.5 percent and girls accounting for 51.2 percent. Less than 1 percent of victims had an unknown sex.
- Eighty-eight percent of victims were comprised of three races or ethnicities—African-American (21.9%), Hispanic (21.4%), and White (44.8%).
- More than 75 percent (78.3%) suffered neglect.
- More than 15 percent (17.6%) suffered physical abuse.
- Less than 10 percent (9.2%) suffered sexual abuse.

Recent statistics on reports of child abuse and neglect and caseloads of the Arizona Child Protective Services System indicate a continued increase in reports since 2009. The latest reported period of October 2011 through March 2012 indicates that 20,466 reports were received, 19,274 reports were responded to, and 2,347 children were removed from their homes. 11,935 responses were in Maricopa County as were 1,334 home removals. Statewide, 3,826 children exited out of home placements during the same period. (https://www.azdes.gov/InternetFiles/Reports/pdf/semi_annual_child_welfare_report_oct_2011_mar_2012.pdf). Currently, there are over 12,649 children in the Arizona Foster Care System. While there has been a significant increase of 38% in the number of children in foster homes since 2008, the number of foster homes has decreased across the same period (<http://www.azchildren.org/MyFiles/12leg/foster-care,investigation-charts,5-29-12.pdf>. Retrieved 18 August 2012). More recently, the number of Arizona foster homes has declined 12 percent since 2009 while the number of foster children has increased more than 30 percent. There are about 3,500 licensed homes for the 13,500 children in foster care. Nationally, the number of children in foster care is declining (Arizona Republic, 01 September 2012). Of interest is that on 31 March 2012, 2,663 of the 12,453 children in out-of-home care had a case plan of adoption; 46.33 percent are between 1 and five years of age. The majority is Hispanic or Caucasian 38.9% and 38.5 % respectively and 15% are African American. Additionally, 71.2% of children free for adoption are currently placed in adoptive homes. However, a recent report (Arizona Republic, 01 September 2012) indicates that



approximately 1900 of 13,500 children in foster care including infants and toddlers are placed in shelters and group homes, as there are no foster home placements available.

As noted, Foster care placements have continued to increase with flat levels of corresponding staff. Recent public reports indicate that the Arizona Child Protective Care services are reaching critical limits due to severe shortages in staff demonstrated by approximately 500 vacant positions and a 31% turnover rate (Arizona Republic, 06 September 2012). Juvenile dependency cases in which judges determine placement and duration as well as return to have increased by approximately 40 %, which has resulted in children's time in foster care from an average of 2 months to 17.2 months (Arizona Republic, 01 September 2012).

Higher caseloads result in longer waits for parents to be reunited with children and for foster families waiting to adopt children. The real losers are the children caught in the middle. As foster care 'limbo' can interrupt critical bonding, the most vulnerable children are babies and toddlers whose growth and development may be negatively impacted.

The Department of Economic Security Child Protective Services system is plagued with growing numbers referrals. More than half of the state's home removals occur in Maricopa County. On 31 March 2010, 12,649 Arizona children were in foster care. Seven thousand plus reside in Maricopa County. Fifty-seven percent are under five years of age.

Infant and Child Fatality

In November 2011, the 18th Annual Child Fatality Review was released as required by A.R.S. §36-3501(C) (3) by the Arizona Department of Health Services under funding from the Centers for Disease and Control and Prevention, through a Cooperative Agreement 1U17CE002023-01, Core Violence and Injury Prevention Program.

American Indian children in Arizona are aggregated and constitute 6% of the population; as compared to African American children, 5%; Asian children, 3%; Latino children, 43%; and Caucasian 43%. However, deaths continue to be disproportionately high in diverse populations.

Exhibit 3-53

Infant Mortality Rates

AREA	INFANT MORTALITY ¹ RATES ²		
	2009	2010	2011
Southwest Maricopa ³	5.4	3.0	NA
Maricopa County	5.7	5.8	5.8
Arizona	5.9	6.0	5.8

Source: Arizona State Department of Health Services, Advance vital statistics by county of residence

NA indicates data were not available. ¹ Any death at any time from birth up to, but not including, the first year of age. ² Per 1,000 live births. ³ Luke AFB and Palo Verde are not included in the infant mortality rate for southwest Maricopa region.



Infant mortality rates for the region were generally lower than the rest of the County or State. We have no rationale for these data.

Neonatal deaths typically exceed deaths in other age groups and are attributable to concomitant medical problems at birth.

Results indicate that in 2010, a total of 862 children younger than 18 years of age died in Arizona and that 33% of these deaths could have been prevented. Generally child fatalities have decreased over the past five years. However, deaths from maltreatment increased during the same time period. Of significant concern to the southwest Maricopa Region is the disproportionate distribution of fatalities in minority populations. In addition, the majority of fatalities were between the ages 1 – 4 years of age and 33% of the 61 deaths were attributable to improper restraints.

Exhibit 3-54

Deaths by Age Group 2010

AREA	NUMBER OF DEATHS BY AGE GROUP 2010						
	Total	Infants <1	1-14 years	15-19 years	20-44 years	45-64 years	Elderly 65+
Arlington	4	0	0	0	0	2	2
Avondale	176	6	2	0	16	30	122
Buckeye	138	0	1	0	11	24	102
Gila Bend	13	0	1	1	0	2	9
Goodyear	165	6	0	2	12	33	112
Litchfield Park	98	1	1	0	4	23	69
Tolleson	58	0	2	0	5	9	42
Tonopah	32	0	0	1	2	7	22
Southwest Maricopa	684	13	7	4	50	130	480
Maricopa	24,438	312	140	116	1,499	4,739	17,631
Arizona	45,871	519	240	220	2,796	9,212	32,876



Source: Arizona State Department of Health Services, Arizona Health Status and Vital Statistics 2010 report Retrieved from <http://www.azdhs.gov/plan/report/avs/avs10/index>.

Exhibit 3-55

Deaths Among Children by Race Ethnicity in Arizona 2006-2010

AREA	DEATHS AMONG CHILDREN BY RACE, ARIZONA 2006-2010				
	2006	2007	2008	2009	2010
African American	9%	7%	10%	10%	8%
American Indian	10%	9%	8%	9%	9%
Asian	2%	2%	4%	2%	4%
Hispanic	42%	46%	44%	44%	45%
White Non-Hispanic	37%	36%	34%	35%	33%
Total	1161	1143	1038	947	856

Exhibit 3-56

Mortality Rates by Age Group

AGE GROUP	MORTALITY RATES PER 100,00 CHILDREN BY AGE GROUP ARIZONA 2005-2010					
	2005	2006	2007	2008	2009	2010
<1 Year*	738.7	665.2	692.1	640.0	595.0	600.8
1-4 Yrs.	36.5	39.7	28.5	31.	32.0	32.3
5-9 Yrs.	18.6	14.2	14.6	14.4	14.3	12.8
10-14 Yrs.	19.4	20.1	20.2	16.0	15.6	14.7
15-17 Yrs.	70.8	76.6	58.0	48.6	45.0	34.3
Total	71.7	70.0	67.6	60.7	55.1	52.9

Source: Arizona Department of Economic Security, Domestic violence shelter report for SFY 2011.

* As population denominators are only available for children younger than one year of age, deaths in the neonatal and postnatal periods have been combined.

Current levels of child abuse and neglect are not readily available for the current year; however, use of local domestic violence shelters provides some insight into the disposition of children and families who suffer from violence; almost 5,500 residents of Maricopa County experienced violence and ended up in shelters, half of whom were children. It is likely that many more children's abuse and neglect is unreported.

Exhibit 3-57

Domestic Violence Shelters / Population Served 2011

AREA	DOMESTIC VIOLENCE SHELTERS POPULATION SERVED
------	----------------------------------------------



	Population Served			Units of Service Provided		
	Total	Adults	Children	Bed Nights	Average Stay (Days)	Hours of support services
Autumn House – A New Leaf	220	133	87	6,547	28	2,185
Chrysalis	478	385	93	14,491	29	5,460
De Colores – Chicanos Por La Causa	336	114	222	18,536	55	4,567
Eve’s Place	253	175	78	14,799	27	6,364
Elim House – Salvation Army	328	116	212	12,470	35	3,967
My Sisters Place Catholic Charities	252	107	145	8,107	30	1,968
New Life Center, Inc.	1,121	553	568	33,970	31	27,006
Sojourner Center	1,563	788	775	47,692	24	11,647
Maricopa	5,495	2,769	2,726	187,812	NA	65,945
Arizona	9,769	5,117	4,652	332,967	29	157,615

Health Care Facilities

The major communities are considered medically underserved areas as inadequate numbers of trained medical personnel are in the community to meet recommended needs in primary and specialty care. The following Exhibits illustrate the locations and types of health care facilities available to the residents of the southwest Maricopa region. Researchers who called and interviewed each facility and collected convergent web-based data collected data that are included below. Initially, communities are identified as medically underserved areas if appropriate. Only Luke Air Force Base is excluded from the communities identified. The other communities are too small to be considered. While there appear to be numerous medical facilities, families frequently have to travel up to 30 minutes to get care. There are no inpatient specialty care facilities, meaning that families whose children require acute hospitalization for specialty care are required to go to Phoenix for care. This necessitates long travel to central Phoenix.

Exhibit 3-58

Primary Care Area Profile

CHARACTERISTIC	PRIMARY CARE AREA PROFILE						
	Avondale /Tolleson	Buckeye	Gila Bend	Litchfield Park	Luke	Maricopa	Arizona
Medically Underserved Area (MUA) ¹	Yes	Yes	Yes	Yes	No	*	*
Next Nearest Provider	Avondale	Goodyear	Avondale	Goodyear	Peoria	*	*
Second Nearest Provider	Litchfield Park	Avondale	Litchfield Park	Avondale	Sun City	*	*
Travel time to Next Nearest Provider	≤ 20 min	21-30 min	≤ 20 min	≤ 20 min	≤ 20 min	*	*
Travel time to Second	≤ 20 min	21-30 min	≤ 20 min	≤ 20 min	≤ 20 min	*	*



Nearest Provider							
General Hospitals ²	Yes	Yes	Yes	Yes	Yes	31	67
Hospital Beds/1000 Residents	1.3	0.0	0.0	0.0	0.0	2.2	2.1
Sole Community Provider ³	Yes	No	No	No	No	5	33
Specialty Beds	0	0	0	0	0	2,011	2,439
Skilled Nursing Facilities	2	0	0	0	0	83	152
Nursing Beds	331	0	0	0	0	9,176	15,847
Licensed Home Health Agencies	1	0	0	0	0	99	162
Licensed Pharmacies	25	7	1	3	0	771	1,201

The ratios of physician to patient vary across the communities. Buckeye has the largest ratio, far greater than that of Maricopa County or the state. However, the ratios for nurse practitioners to patients are inversely correlated to those of physicians. Again, care is likely inadequate based on the number of children and families.

Exhibit 3-59

Medical Personnel

PERSONNEL	MEDICAL PERSONNEL ¹						
	Avondale /Tolleson	Buckeye	Gila Bend	Litchfield Park	Luke	Maricopa	Arizona
Primary Care Providers	150	17	16	23	9	8,233	12,768
Ratio Population: Provider	863: 1	3659: 1	1349: 1	435: 1	346: 1	464: 1	501: 1
Nurse Practitioners	45	9	13	13	0	2,269	3,767
Physician Assistants	47	4	0	2	3	1,166	1,687
Registered Nurses	1,046	344	169	145	5	34,851	55,995
Midwives	0	0	0	0	0	100	220
Dentist	57	11	3	26	0	2,491	3,558
Emergency Medical	275	193	38	33	7	8,390	16,615

Source: Bureau of Health Systems Development, Arizona Department of Health Services.

¹As of September 2010.



SUPPORTING FAMILIES

Overview

Supplemental Data has been collected and organized in order to provide the Southwest Maricopa Regional Partnership Council with information to further assist in decision making related to services and supports. Reviews of current literature including the National Early Literacy Panel Report (NELP, 2008), What Works Clearing House, Institute for Educational Sciences, Child Trends, current peer reviewed early childhood journals, and the National Association for the Education of Young Children were conducted to determine best practices in early childhood and family support.

Established family supports across southwest Maricopa region including WIC, TANF through the Departments of Health and Economic Security, and local community service systems for families. Further, families were queried on access to emergency contacts, use of community resources, and community event awareness such as First Things First.

Kindergarten Success

Exhibit 4-1

Pre-Requisites of Kindergarten Academic Success

	Research Base
Alphabet knowledge	Knowledge of the names and sounds associated printed letters is a strong predictor of reading success (NELP, 2008). Alphabet knowledge is a prerequisite for developing phonics as preschoolers use letter names to access letter sounds and word pronunciations (Treiman & Rodriguez, 1999). Alphabet knowledge can be increased via direct, systematic “code focused” instruction (NELP, 2008).
Phonological awareness (PA)	PA is the ability to detect, analyze, and manipulate the sounds of spoken language. Decades of convergent research have established that is a critical precursor and predictor of reading achievement (Carnine, Silbert, Kame'enui, & Tarver, 2004; NELP, 2008). PA development is strengthened by recitations and playing with sound units and explicit, code-focused: instruction is also required (NELP, 2008; National Reading Panel, 2000; Snow et al., 1998).
Rapid Automatic Naming (RAN)	RAN is hypothesized to be related to early reading acquisition and dyslexia (Dencla & Rudel, 1976), Much interest in the relationship between processing speed and phonological awareness has arisen from neuroscience and indicates that RAN is highly predictive of early reading (Wolf & Bowers, 1999); however, later relationships and remediation strategies remain unclear (Meyer, Wood, Hart, & Felton, 1998)
Writing/Writing name	Writing manuscript letters is an important part of learning letter names and preventing later writing disabilities in young children (Schlagal, 2007). Writing letters using explicit instruction, guided practice, dictation, shared and



interactive writing (Stachoviak, 1996; McCarrier, Fountas, & Pinnell, 2000).

Phonological memory	The phonological component of short-term memory is closely associated with the acquisition of language during childhood (Baddeley, 1986). Adequate temporary storage of the phonological structure of new words is an important prerequisite for fast learning of the sound structure of the language studies of normal children and children with developmental language disorders (Baddeley, Cathercole, & Papagno, 1998).
Print awareness	Print knowledge of purposes and conventions of print is also a predictor of later reading achievement (Snow et al., 1998; Westberg, Lonigan, & Molfese, 2006). Interactive storybook reading and shared writing are effective strategy for promoting this skill (McGee, 2007; NELP, 2008; Snow et al., 1998). Research has shown that oral vocabulary is a strong predictor of elementary-grade reading comprehension (Dickinson & Tabors, 2001) and that strength of this relationship increases progressively from grade 1 to grade 7 (Snow, 2002).
Oral language	Other aspects of young children's oral language, including listening comprehension and grammar, also have important roles in later literacy achievement (NELP, 2008). Language-enhancement programs have been shown to promote early literacy development (NELP, 2008).

Source: Report of the National Early Literacy Panel, 2008.

A report of the National Early Literacy Panel (NELP, 2008) and the Institute for the Educational Science will be examined to better provide the necessary skills young children need to be successful. In addition, SWI has queried public schools on how they plan to align preschool and Head Start with the numerical identification systems to determine kindergarten readiness.

Established family supports across the northwest Maricopa Region include WIC programs (for families meeting eligibility requirements), state services such as TANF (for families meeting income eligibility); emergency social service for those families who have had contacts with social services including domestic violence, Child Protective Service or use community resources; and community events and programs funded by First Things First. Additional data have been used to help determine social services rendered by state agencies to identify welfare dependency including compilations of trainings, events, and referrals to First Things First and family support as well as lists of First Things First funded programs by priority and numbers of families served from FTF reports.

Early Learning Literacy Program

A set of four questions was included in the early childhood education centers survey for the northwest Maricopa region. These questions address curriculum, types of activities, frequency of activities and duration of activities in the centers, as well as the average number of books per classroom.

The number of books in pre-K classrooms is often considered a benchmark of quality and as a component of print rich environments, a predictor of future early literacy (Neuman & Roskos, 2007). The minimum number of books generally considered adequate is 5-7 per child in classrooms for children ages 3-5 years. ECERS (2005) recommends that a minimum of 30 books be available at any given time. Thus, based on the numbers below, the average classrooms may be adequately resourced; however, classrooms and care



homes falling below the median may require more children's literature and possibly more developmentally appropriate learning materials.

Exhibit 4-2

Average Books per Class

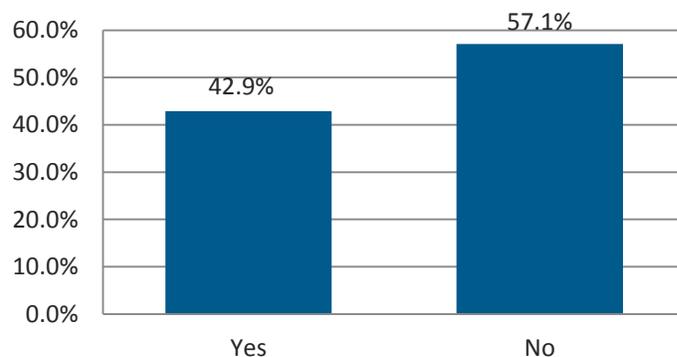
STATISTIC	BOOKS PER CLASS
	Number of books
Mean	65.5
Median	40
Minimum	2
Maximum	300

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

The presence of curriculum in 43% of classrooms is somewhat promising; however, the type, content, and fidelity to implementation is unknown. Evidence-based curriculum in early childhood classrooms is becoming more prevalent as the kindergarten demands for specific knowledge and skills is becoming more clear. Frequently core curriculum that is aligned with developmental indicators is very helpful to new or less skilled teachers.

Exhibit 4-3

Core Curriculum Use

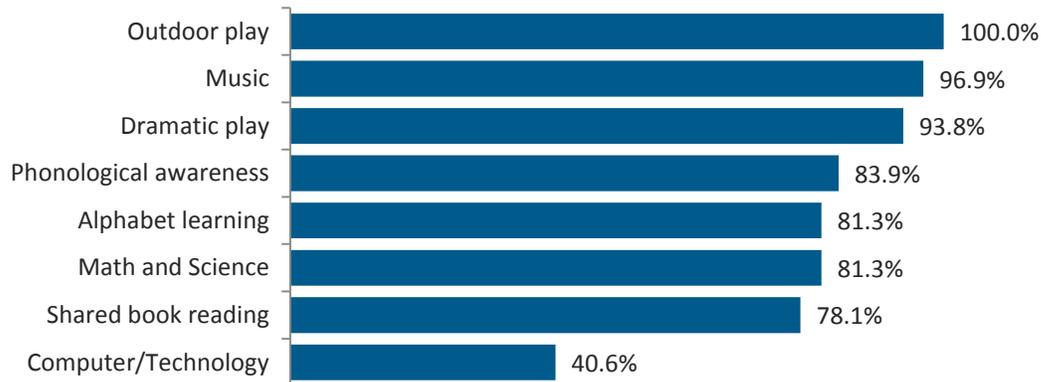


Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.



Exhibit 4-4

Activities Provided by Centers within a Week



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Of special interest is the high percent and wide variety of activities that providers report delivering within a week. This may be an artifact of teacher participation in FTF-AZ funded T.E.A.C.H., Quality First, and Community-Based Training. The relatively low incidence of technology and computer activity may be due to associated costs, availability, or concerns over the developmental appropriateness of technological applications for young children. A more specific concern is that less than 80% of programs reported engaging in at least weekly shared book reading activities with children, when shared reading is frequently considered a core component of early childhood education and is typically recommended as a daily activity (NAEYC, 1998).



Homelessness

Homelessness has many faces. The typical image of homelessness is that of disheveled males in urban centers. However, the true picture is different and includes men, women, and children. In 2007, the US Department of Housing and Urban Development issued its annual report to Congress, which reported 643,067 sheltered and unsheltered homeless persons nationwide. Additionally, about 1.56 million people used an emergency shelter or a transitional housing program during the 12-month period between October 1, 2008 and September 30, 2009, suggesting that approximately 1 in every 200 persons used the shelter system at some point in the period reported. The causes of homelessness include untreated mental illness and disability, substance abuse that drains economic and social resources, domestic violence that forces women and children to flee unsafe homes, natural disasters such as floods and hurricanes, and unexpected life events such as loss of employment, death of a significant other, unexpected illness and loss of income. Concomitant with homelessness are detrimental effects to health and educational services. Homeless students are 1.5 times more likely to perform under grade level in reading and spelling, and 2.5 times as likely to perform under grade level in math (Duffield & Lovell, 2008). Local programs for homeless families are provided by a number of social service agencies and municipal agencies. The majority is located in the urban core of Phoenix. However, as transportation is typically a barrier for homeless families, few services are available in the Southwest Maricopa region; thus, those in need typically find services in west Phoenix, central Phoenix, and in the northwest valley at Christine's House in Glendale, Oasis of Christian Love in Surprise, Catholic Charities in Peoria, Catholic Social Services, El Mirage, Saint Mary's Westside Food Bank, Glendale, and Catholic Center in Surprise. In addition, Maricopa County has an array of services for homeless families that includes the Health Care of the Homeless Outreach Team that links homeless persons to community-based health, education, mental health, legal, and social service.

Since the start of the current recession, Arizona has ranked at the top of the list of states most affected by the housing crisis and foreclosures. Foreclosure rates increased from 2007 to their peak in 2010 (Fannie, Freddie, FHA, OCC, 2012), 2012). In July of 2012, one in every 346 homes received a foreclosure notice, resulting in a total of 36,685 foreclosures in Maricopa County by that date. As a result of increased foreclosure rates in the western suburbs of Phoenix, many communities were decimated as homeowners left (http://www.ehow.com/info_7803734_arizona-foreclosure-information.html, retrieved July 21, 2012). As a result, many families are at increased risk of homelessness. In 2009, the National Coalition for the Homeless spearheaded a survey of organizations providing services to the homeless. The results indicated that approximately 10% of persons served by 178 non-profit organizations became homeless through home foreclosure. The majority reported residing with family or friends. Additionally, foreclosure of rental properties presents a significant issue for families on marginal incomes that traditionally rent and spend 50% or greater of their income on housing. Forty percent of families facing foreclosure are evicted from rental properties.

Exhibit 4-5

July 12 Foreclosure Rate Heat Map



health problems associated with lack of immunization, exposure to adverse environmental factors, which lead to developmental delays; and preschoolers are more likely to develop serious development delays and emotional problems that have long-term consequences. Additionally, homeless preschoolers receive far fewer developmental services than their non-homeless peers. Compounding the known issues of homelessness are stressful events including violence, constant change, and severe emotional distress (Ibid).

Assets in the region include the staff at all school districts. As a result of the McKinney-Vento Plan (2008), each local education agency must have a designated staff person prepared to address problems and barriers encountered by homeless children and families. School districts across the region partner with the Arizona Department of Education and the Maricopa County Health Department to attempt to meet the needs of families.

Exhibit 4-7

Maricopa Homeless by Age

AGE	MARICOPA HOMELESS AGE	
	Count	Percent
0-5	1,621	11.2%
6-8	670	4.6%
9-12	717	5.0%
13-15	462	3.2%
16-17	301	2.1%
18-24	1,490	10.3%
25-34	2,256	15.6%
35-44	2,372	16.4%
45-61	4,040	27.9%
62+	423	2.9%
Refused/Unknown	104	0.7%

Source: Homelessness in Arizona, 2011 Annual Report. Department of Economic Security.

A large number of children under 5 are reported to be homeless in the County. However, these numbers are not disaggregated at the regional level.

Exhibit 4-8

Maricopa Homeless by Gender and Ethnicity

CHARACTERISTIC	MARICOPA HOMELESS GENDER/ETHNICITY
----------------	------------------------------------



	Count	Percent
Gender		
Female	6,605	45.7%
Male	7,767	53.7%
Refused/Unknown	84	0.6%
Transgender	83	0.6%
Ethnicity		
Hispanic/Latino	3,3234	22.4%
Non-Hispanic/Latino	11,119	76.9%

Source: Homelessness in Arizona, 2011 Annual Report. Department of Economic Security.

Exhibit 4-9

Primary Reason for Homelessness

REASON	HOMELESSNESS PRIMARY REASONS	
	Count	Percent
Domestic Violence	827	5.7%
Evicted	1,767	12.2%
Lack of Financial Resources	2,196	15.2%
Loss of Job	2,045	14.1%
Overcrowding or Family Dispute	1,182	8.2%
Release from Jail or Prison	501	3.5%
Substance Abuse	746	5.2%
Don't know	1,617	11.2%
Unknown	811	5.6%

Source: Homelessness in Arizona, 2011 Annual Report. Department of Economic Security.

Exhibit 4-10

Arizona 4-Year Point in Time Street and Shelter Count

REASON	ARIZONA HOMELESS PER YEAR
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	2011 ¹	2010 ²	2009	2008 ³
Single Adults	7,768	10,473	11,364	9,916
Veterans	2,031	1,176	1,107	929
Families	5,214	6,084	6,070	5,527
Youth	117	427	387	156
Total	15,148	18,159	18,928	16,528

Source: Homelessness in Arizona, 2011 Annual Report. Department of Economic Security.

¹ 2011 Balance of state numbers were under reported. ² 2010 Balance of street count utilized 2009 numbers as a count is only conducted every two years. ³ Balance of street count utilized 2007 numbers as a count is only conducted every two years.

Transportation

It's all about getting there—is not a random statement, rather it refers to the very real issues related to getting to work, school, volunteer opportunities, church, shopping or recreation in communities that are vast and not connected by widely accessible mass transit systems.

The 2011 survey of families in southwest Maricopa region indicates that transportation is a critical component of the ability of people to maintain independence. It is the means by which people can access goods and services. While most (89.8%) of the survey respondents do have a private vehicle, 10.2% reported the need to rely on public transportation. When questioned about the latter, 50.8% of the respondents reported having public transportation available to them, whereas 35.4% do not have public transportation available. It is also worth noting that 17.9% of the respondents agreed that public transportation's current hours of operation do not meet their needs.

In general, southwest Maricopa survey respondents do not travel great distances in their daily lives. A small fraction (12.5%), acknowledge traveling more than 15 miles in order to reach their closest food supplier. A slightly smaller percent of the respondents (10.3%) report traveling more than 30 miles when they have the need to visit their child's health care provider, more than half of them (54.3%), travel 10 miles or less to do so. However, when questioned about the need to travel outside their community to seek medical care, 39.2% report doing so, 35.9% of them report having done so, at least one time in the last 6 months, whereas 12.6% of them have traveled five times or more in the last 6 months to seek medical care outside their community.

Respondent's transportation 'ability' has also been affected by economic changes. According to family survey data, 40.6% of the respondents reported missing work or an appointment, missing school, or missing an event within the last 6 months due to the cost of gas. While 21.5% reported missing similar activities due to lack of transportation. Also noteworthy is that respondents' choice of employment and medical care is predicated or has been affected by transportation related issues, 48.7% identified choice of shopping venues as affected by transportation, while 44.3% selected education based on location and transportation. Also, almost 44% of the survey respondents (43.5%) acknowledge that their employment choices have been conflicted by transportation problems as well.

Exhibit 4-11

Services Affected by Lack of Transportation



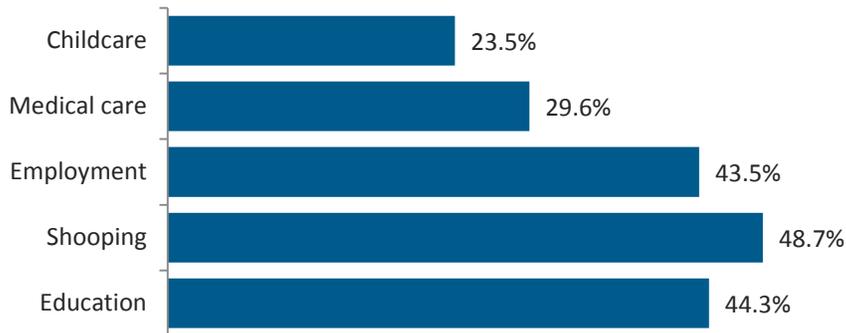


Exhibit 4-12

Percent of Appointments Missed Due to Lack of Transportation

AREA	MISSING WORK, SCHOOL OR APPOINTMENTS (PERCENT)			
	Due to lack of transportation		Due to cost of gas	
	Yes	No	Yes	No
Avondale	27.3	72.7	40.9	59.1
Buckeye	3.8	96.2	38.5	61.5
Goodyear	17.5	82.5	35.0	65.0
Tolleson	26.0	74.0	50.0	50.0
Tonopah	19.2	80.8	50.0	50.0
Southwest Maricopa	21.5	78.5	40.6	59.4

Exhibit 4-13

Distance to Childcare

AREA	CHILDCARE DISTANCE			
	0-10 miles	10-20 miles	21-30 miles	More than 30 miles
Avondale	100	0.0	0.0	0.0
Buckeye	71.4	14.3	14.3	0.0



Goodyear	73.7	21.1	0.0	5.3
Tolleson	69.2	30.8	0.0	0.0
Tonopah	66.7	33.3	0.0	0.0
Southwest Maricopa	84.4	13.3	0.0	2.2

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children

Exhibit 4-14

Distance to health Care Providers

AREA	DISTANCE TO CHILD'S HEALTH CARE PROVIDER (PERCENT)			
	1-10 miles	10-20 miles	21-30 miles	More than 30 miles
Avondale	68.9	21.8	5.9	3.4
Buckeye	33.3	33.3	16.7	16.7
Goodyear	50.9	34.0	9.4	5.7
Tolleson	45.5	36.4	15.9	2.3
Tonopah	15.4	19.2	11.5	53.8
Southwest Maricopa	54.3	26.2	9.2	10.3

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children

Of concern to many councils is resident's need to leave the community/region to seek health and social services. At least 27% of Southwest residents typically travel outside of the region for health care.

Exhibit 4-15

Travel Outside of the Region to Seek Medical Care

AREA	TRAVEL OUTSIDE COMMUNITY TO SEEK MEDICAL CARE (PERCENT)	
	Yes	How often in the past 6 months have you had to do it?



		0-1 time	1-5 times	5-10 times	More than 10 times
Avondale	29.6	38.1	54.0	6.3	1.6
Buckeye	53.6	14.3	64.3	14.3	7.1
Goodyear	26.7	51.9	33.3	14.8	0.0
Tolleson	35.3	44.4	48.1	3.7	3.7
Tonopah	84.4	20.8	58.3	20.8	0.0
Southwest Maricopa	39.2	35.9	51.5	10.2	2.4

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children

Emergency Contacts

A support network can provide to parents and/or families the comfort of knowing that their friends or relatives are there for them, studies have shown that such type of support, among many other advantages, is beneficial to health while facing stressful events (Gore 1978; Thoits 1995). With the intent of having a better understanding of the network support that families have in the southwest Maricopa region, participants were asked about their peer networks, to be more specific, were asked if they count with three persons to contact if there is an emergency; the overwhelming majority of the survey respondents (93.2%) indicated having in their network of family and friends/acquaintances at least 3 persons to contact if there is an emergency, of those, 79.2% recognized their children as able to name these persons while 20.8% acknowledge their children were not able to name the persons to contact in case of emergencies.

Exhibit 4-16

Southwest Maricopa Family Survey – Support Network

AREA	FAMILY SUPPORT (PERCENT)			
	3 persons to contact if there is an emergency		Can children name these people	
	Yes	No	Yes	No
Avondale	94.9	5.1	84.4	15.6
Buckeye	92.3	7.7	73.1	26.9
Goodyear	93.3	6.7	68.4	31.6



Tolleson	92.2	7.8	88.2	11.8
Tonopah	96.7	3.3	80.0	20.0
Southwest Maricopa	93.2	6.8	79.2	20.8

Source: Southwest Maricopa Family Survey conducted by Southwest Institute for Families and Children

It appears that the majority of families have a sense of security when confronted with an emergency. In all communities, over 90% of families were able to identify at least three sources of emergency contact; furthermore, the majority of children could name these contacts, too.

Notwithstanding the fine work accomplished in the communities and the considerable financial investments made by the southwest Maricopa Regional Partnership Council, very few citizens recognize the work or the brand of First Things First. Region wide, less than 25% of respondents were aware of the organization.

Families questioned about their awareness of other types of family support networks, more specifically were questioned about their familiarity with First Things First (FTF), more often than not (75.6% of the times) families were not familiar with the concept and mission of FTF, 24.4% of the families reported having familiarity with FTF concept. In general families are not well acquainted with the mission or activities of First Things First Regional Partnership Councils or the agency statewide. However, in-roads appear to be occurring in Tonopah, likely due to the efforts of the local elementary school and the funded 21st Century Parent Education and Coordination effort that provides parent education and materials to families five times each month in the region's communities.

Exhibit 4-17

Southwest Maricopa Family Survey – Familiarity with FTF

AREA	FAMILIAR WITH FTF (PERCENT)	
	Yes	No
Avondale	15.2	84.8
Buckeye	9.5	90.5
Goodyear	29.6	70.4
Tolleson	26.1	73.9
Tonopah	55.0	45.0
Southwest	24.4	75.6



Community Resource

A compendium of resources is attached in the Appendices of this report.

Supplemental Data

Focus group of four families from five communities across the southwest Maricopa region (N=20) was convened to determine specifics related to services and care for subgroups of families. The data collected provide information on changing environment, economy, impact of loss full-day kindergarten, and legislation impacting the community. In addition, local administrators and bureaucrats will be invited to participate in the administrative focus group. Quotes from the focus groups are interspersed throughout the report to provide anecdotal information as well as a complete report of the group included at the conclusion of the report.

Budget Cut Impacts

Arizona is a state that has experienced painful budget cuts for several years. In the last three years, Arizona's General Fund obligation to programs, which make child care more affordable for low-income families, had dropped nearly 72%, from a high of \$84.5 million in FY 2008 to a low of \$23.8 million in FY 2011 (Richardson, 2011). Arizona placed children eligible for subsidized childcare on waiting lists (Goodman, 2010). According to the Morrison Institute for Public Policy at Arizona State University, the budget cuts could continue to hit working and lower-middle class families especially hard by reducing medical, child-care assistance, cash, and other aid (Richardson, 2011).

The FY 2012 budget signed into law by Governor Jan Brewer removes General Fund appropriation for Department of Economic Security's Child Care Administration (Hager, 2011). Thus, low-income families receiving state assistance to pay for childcare might not be able to receive funds beginning July 1 (Hager, 2011). If the low-income families cannot receive state assistance to pay for childcare, they will have a huge burden and their children may not get basic education and service. In many low-income working families, childcare is one of the largest expenditures after housing (Goodman, 2010). For example, among families with working mothers and incomes below the federal poverty level - \$18,310 for a family of three, childcare absorbs nearly one third of the total household budget, (Goodman, 2010). The elimination of state funding for childcare assistance programs may also cause millions of matching federal dollars to be at risk (Hager, 2011).





PUBLIC AWARENESS AND COLLABORATION

The goal of the Southwest Maricopa Regional Partnership Council of First Things First has been to convene partners, provide leadership, and provide funding for efforts to increase public awareness of and support for early childhood development, health, and early education among partners, public officials, policy makers, and the public. This is accomplished as part of the First Things First statewide efforts of 1) Community Awareness through participation in community events, and presentations to civic groups within the region; 2) Media saturation using radio and television advertisements, newspapers, billboards, grocery carts, floor mats, cooler decals, and theater ads; and 3) Community Outreach Liaisons that outreach to the community and recruit and retain early childhood champions in the region.

The southwest Maricopa region hired a Community Outreach Liaison that has developed an interactive web-page that keeps the community up to date on activities and events, produces local news articles with photo opportunities, and organizes speakers to promote First things First at 5 formal regional presentations and 3 cross regional presentations.

Since 2010 the Southwest Maricopa Regional Partnership Council of First Things First has funded the following community initiatives:

- Three Family Resources Centers
- Home Visitation Programs
- Parent Education and Community Based Training
- Quality First
- Family, Friends, and Neighbors support
- TEACH Scholarships
- Child Care Health Consultation
- Scholarships non-TEACH
- Director Mentoring and Training
- Oral Health
- Service Coordination
- Community Awareness
- Community Outreach
- Media
- Needs and Assets
- Evaluation
- The Arizona Health Survey
- The Child Care Study
- Children's Budget
- Parent Kits (Study)
- Health Insurance Enrollment
- Childcare Scholarships
- Food Insecurity



Southwest Regional Partnership Council Interview Report

Background and Purpose of RPC Interviews

A survey of key informants was conducted including email interviews with the Southwest Maricopa Regional Partnership Council. The interviews consist of six experts in fields of health care, childcare, education, and family support. All are members of the community with approximately 20 years of individual experience. The interviews assessed members views of support from service providers and community support programs in the southwest Maricopa region. The experts also were asked about the community strengths and what contributes to barriers. Finally they were asked for recommendations to improve the health care, childcare, family support and education systems respectively.

Results

- General themes emerged across the regional interviews related to the health care, childcare, family support and education systems These are noted below. Participants, representative quotes follow the themes.
- Major regional Family Support strengths are the resource care centers in Avondale, Gila Bend, and Buckeye. These resource care centers provide a wealth of services to the parents of southwest Maricopa region communities that help foster the development of children 0 to 5.
- The region's greatest educational strength seems to be the public and private partnerships for education that exist throughout the southwest Maricopa region. The strengths can be found in the partnerships that southwest Maricopa region has formed and the dedicated volunteers who make the services available across the urban and rural areas.
- Another significant asset is the knowledgeable people across the region that know the needs of families and communities and dedicate themselves to addressing the needs.
- Generally the quality of health care of southwest Maricopa region seems somewhat inadequate; thus, many families leave the community to access care. However, the situation is improving. For example, Phoenix Children's Hospital, is considering opening a specialty clinic/urgent care facility in 2012, which will bring expert pediatric resources, especially subspecialists such as pediatric hematologists, neurologists, orthopedists, and cardiologists to the southwest Maricopa region.
- The quality of childcare seems is generally inadequate as most of families seem to be taking care of their own children through family, friends, and neighbor care. However, this may also be related to cost and accessibility or to culture that promotes care by family and friends.
- SW community's greatest barrier is the lack of a transportation system that provides families' access to needed programs including the resource centers. Many rural communities in southwest Maricopa region lack adequate public transportation services.
- Families in the rural and urban areas have been especially hard hit by the recent recession.



- Additional barriers include lack of information on available resources. This huge knowledge gap affects the ability of families to find resources as well as to make selections from available services.

Representative quotes:

“The people. Children are primarily cared for at home by family, friends, or neighbors. Childcare centers are less commercial in our region. This part of Maricopa County is a unique blend of urban and rural – allowing for rich history with agricultural and suburban explosion sprawl. The small town centers of each hub have helped maintain the community “feel” stay strong amidst growing chain stores and commuters. The foreclosure crisis has hit the southwest Region very hard financially but the people continue to remain very kind to each other and generous – with their time as well as their other means.”

“One of the greatest barriers in our community is the lack of a transit system. Good, bad, or indifferent, we don’t have a way for individuals without transportation to get around in the rural or urban areas.”

“There are bus stops along busy routes, but no busses!”

“I don’t see that my region has strength in the area of child care. Most of our families are taking care of their children through family, friends, and neighbor care. The cost of childcare service is out-of-range for the families who truly need it.”

“Many of the rural communities have lacked in services. They were not strong with business and income so when the economy got worse, this compounded the problem. Families cannot afford childcare, tuition for college, daily living/ home costs. The barriers in the rural areas have become a much bigger reality over the last three years. In the urban communities in our region, I would have to say the greatest barrier is also the financial crisis but many of the individuals might have previously had services and now no longer have access to them. It has been a process of education. These families need to know how to find resources because they need to sign up for scholarships and childcare. There is still a huge knowledge gap in knowing where to go to find things.”

“I would recommend that we continue to let the community aware of FTF initiatives and more specifically about the Family Support and how the community may best benefit from Home Visitation, Parent Kits, Resource Care Centers, etc.”

Recommendations from Council Members:

The southwest Maricopa region has many strength in terms of education, childcare, health care, and family support. However, the region has barriers to overcome in the future. For the improvement of health care system in the region, more pediatric health care facilities and physicians are needed. In addition, we need a more developed transportation system to access health care resources.

To improve the family support system of the region, better communication and awareness of First Things First (FTF) initiatives are recommended. We recommend more childcare scholarships that support low-income 4-5 year-olds to get high quality preschool that prepares them for kindergarten entry. We also need more high quality childcare facilities at reasonable costs, as well as more training for care providers and support for directors and family care providers. Finally, with respect to the education system, we need



additional public and private partnerships that will sustain and improve the quality of education in our schools.

Southwest Maricopa Region African-American And Multi-Ethnic Focus Groups Report

Background and Purpose of Focus Group Study

The council specifically requested that the unmet needs and barriers to service experienced by African-American and Hispanic individuals residing in the southwest Maricopa region be examined. Two focus groups of six mothers were facilitated by an African- American male researcher and assisted by a female research assistant. Both were parents of young children in their mid-twenties. The participants brought their children to the meetings; thus, an area was designated for the participants' children to play. The 12 participants were randomly divided into two focus groups-- A and B. Groups were conducted one week apart. In addition to the focus groups, the 12 participants were individually interviewed prior to the group meetings.

The purpose of the focus groups and questionnaire was to provide feedback to the First Things First Southwest Maricopa Regional Partnership Council on areas in which diverse populations find barriers and may need additional support such as childcare, education, and public healthcare.

Focus group "A" was conducted at an African-American Church located in downtown Phoenix, Arizona. The group consisted of mothers with varying numbers of children, employment status, marital status, and educational level.

Focus group "B" was conducted at a private home in Avondale, Arizona. The group consisted of ministry leaders from various backgrounds including age, gender, and ethnicity, number of children, work history, marital status, employment status, and level of education.

A standard protocol of eight questions was administered to each group. In addition, focus group B was asked two additional questions regarding the impact of SB1070, as members were Hispanic (See Appendix A).

Each participant was given an opportunity to answer each question. Order was randomly rotated to participants.

The facilitator's role was conduct the focus group by asking questions and rephrasing as necessary, while observing participant's behavior and record the dialogue. The assistant's role was to interview the families, take accurate field notes and write up a behavioral summary during and after each focus group.

Findings

Several common and emerging themes were expressed across both focus groups and family interviews.

- Resources provided to the African American community are inadequate and culturally unresponsive. African American families feel they are underrepresented in their communities especially in the southwest Maricopa region. Low-income African American families are discouraged by the limited amount of resources available to them.



- There is a pervasive lack of high quality childcare, which is problematic for families. Income impacts parents' childcare decision.
- Higher quality childcare and low cost childcare are necessary in the African American community as they are to other communities.
- Obstacles faced by African Americans when trying to obtain services are 1) costs and 2) hours of operation of existing childcare facilities.
- Some of the common resources that majorities of African Americans utilize in the southwest Maricopa region are the Boys and Girls Clubs of America and the public library system.
- Among the top resources used by the African American community are ACCCHS, SNAP and DES services. However, guidelines prevented certain families from receiving assistance (e.g., permanent address).
- Although resources are technically available, the lack of transportation within the southwest Maricopa region sometimes prevents African Americans from obtaining services available to them.
- African Americans are unaware of the current resources available within their communities because there are not enough available locations within the southwest Maricopa region, and resources are not properly advertised or marketed by the organizations offering them.
- Certain legislative changes and the economic recession have hurt African American communities. African Americans feel public funding for childcare and education is cut first within poor lower socio-economic communities that are heavily saturated with minorities.
- African Americans and Hispanics believe that racial discrimination occurs frequently in some Arizona Hispanic and African American communities in the southwest Maricopa region. Both Hispanics and African Americans believe they have previously been racially profiled and that SB1070 may lead to more frequent like behaviors.

Some representative quotes:

"When you say adequate resources I think of quality. I do think there are a large number of resources. However, adequate when we talk about serving the African American community no! I think that the quality is generally poor, especially unfortunately because there is a high concentration of minorities in the lower socio-economic communities and they tend to be over looked when it comes to..."

"I think that they already did that before that was passed...this just gives them license to do it that probably just made it worse and I think it has stirred up racism even more than it was before."

Participants report that there is a consistent lack of *good* customer service in the DES and Social Security registration offices. It appears to be a significant concern of the participants as they made specific recommendations for improved professional education for social workers in these offices.

Participants expressed concern that there is a public lack of information about resources, governmental institutions and state provided services. Additionally, participants report that sometimes officials make



judgments that there is a general lack of information in diverse communities about the services that are available.

Also conveyed by the parent participants and faith-based participants is the desire for the African American Church to assume a greater “role” as the voice of African American communities as it has been in the past.

Participant’s quotes:

[at]“Social Security Registration they all treat you like “You need us! We don’t need you; it’s your fault for being poor. It’s your fault for whatever has gone on not ours- and our bosses don’t want us to just approve you right away. How bad do you want it? How long are you going to sit here and be hot and sit in here in this funk?”

“I think a big thing- the biggest thing is information and if people don’t know what is available then they can’t even begin to go through all the efforts to take advantage of it.”

Recommendations/Conclusions:

Services offered to the African American community in the southwest Maricopa region are generally perceived as extremely inadequate. African American families are underrepresented in their communities all over but especially in the southwest Maricopa region. Low-income African American families in low SES communities feel discouraged by the limited amount and quality of available resources. African American participants frequently point out that information itself was a powerful resource and is at times ‘managed’ by the institutions. Government and nonprofit organizations need to do a better job of making current resources more readily understood and available; then they must efficaciously advertise and market these resources so that African American families in the southwest Maricopa region can readily access and use them. Allocation formulas need to be adjusted to better meet the needs of families. More African American and Hispanic businesses and non-profit organizations should consider applying for service grants, as they are advertised and possibly given preference in predominantly diverse communities. African American churches have historically been a positive and powerful forces for change and capacity building within communities; thus, have served as an informational and communications hubs for governmental and social services coordination. As First Things First has a designated faith-based seat on each council, participants recommend that African American church leaders be recruited and partnered with to promote effective change within the African American communities.



Summary of Strengths and Weaknesses

The Southwest region has numerous assets including the skills and talents of residents as well as services and supports. The accumulated data indicate that strengths include a young and resilient population of diverse families. The majority of households consist of two parents and children. Fewer grandparents are raising children than in other regions.

Aligned with the *Eye to the Future Comprehensive Plan*, the region has grown rapidly during the last decade; many areas have expanded as master planned communities; thus, libraries and schools, as well as 'village' model shopping and entertainment districts have spread. Frequently, partnerships between districts and developers have yielded new schools with shared community facilities. Additionally, included in the Comprehensive Plan are considerations for environmental impact and sustainability, and long-term transportation.

An additional asset are emerging community groups of families forming mothers' groups, scout troops, and volunteering. These groups have self-identified and organized with memberships ranging from 25-85 in at least three communities. First Things First has modeled leadership that engages diverse community members that bring expertise across multiple sectors, including faith-based, and philanthropic, as well as business and civic leaders. Cooperative agreements have yielded two new community centers in Avondale and Gila Bend.

Demographically, the region has many assets including diversity, youth, and traditions. This vibrant region presents rich cultural events and recreational venues that are accessible by all citizens including those with disabilities.

Educationally, the region has bragging rights to a Maricopa County/Westside Catholic Charities Head Start Center of Excellence that provides support to over 600 families and children. Schools are improving and making AYP. Graduation rates at three out of five high schools exceeded the state and national graduation goals.

General Needs. A major distinction of the southwest Maricopa region is its sheer size and distribution of families across suburban and rural communities. Due to this composition, both families and policy makers have recognized public transportation as a consistent need. Strategies for increased region-wide public transit may be long in coming. However, local initiatives are possible in the near term. Lack of public transportation coupled with inordinately high gas prices have left many families with increased financial needs that are impacting their ability to pay for childcare and food. Evidence of these problems is indicated in increased participation in TANF programs.

Growth has been the major factor in both the strengths and needs of the southwest Maricopa Region. The explosive growth across the past decade brought more families, businesses, and industry. However, some basic infrastructures have not kept pace. Families on the far south end of the region report weak and inconsistent broadband that leaves them with ineffective Internet connectivity and frequent power outages.

A summary of the needs of the southwest Maricopa region reveals that diversity can be a double-edged sword. One side provides a rich network of traditions, beliefs, language and culture, while, the other side includes more historic poverty and unemployment and frequently a legitimate distrust of systems that have not provided adequate or culturally competent services. Families in close knit diverse communities report that when cuts are made to education or subsidies, they are particularly impacting on communities of color



that have disproportionate numbers of families in poverty. Additionally, diverse populations may require additional services and supports to address unique needs such as English Language Acquisition, access to adult education, more assistance with securing employment and housing and interpretation and translation services when accessing basic services including health care. Results from in-depth interviews with African American families reveals needs for more services that are culturally competent as well as a need for diversity education for service workers. Additional reports from Hispanic families indicates ongoing fear of systems that engage in reporting practices and fear of continued racial profiling.

Health Care. Health care for families in the region remains variable. Even as numbers of teen mothers decrease both locally and nationally, the incidence in diverse ethnic groups including Latino, African American and American Indian mothers remain disproportionately high. In addition, the majority of these mothers do not have private insurance. Thus, the costs of these births are covered by Medicaid/AHCCCS funds.

Both families and policy makers recognize that as the region grows there will be a need for more physicians and health care facilities. Many families now leave the region to access pediatric care, especially for children with special health care needs. Dental care for low-income families remains a serious problem especially in remote areas. Approximately 30% of children have untreated dental caries. In addition, 30% of families surveyed report that dentists refuse to accept public dental insurance. Problems related to distance and health includes lack of access to fresh food meat, dairy, fruits and vegetables. Recommendations from the NEMS survey may prove valuable as possible solutions.

Lack of or lower immunization rates are real threats to the health and well being of families and communities; so much so that the U.S. Health and Human Serviced Department Region 9 Leadership Team has established a goal for increased immunization of school-age children through a partnership with schools to provide immunizations by means other than through the primary care physicians office.

Childcare. Convergent reports on the needs related to childcare come from both families and policy makers and include increase affordable high quality care homes and centers as well as more and better trained early childcare professionals. Southwest Maricopa Regional Partnership Council members indicate that childcare is **not** strength of the region. Recent budget cuts may be responsible for a precipitous decrease in the number of childcare homes in the region. Therefore, the Southwest Maricopa Regional Partnership Council has consistently recognized these needs and is addressing these through multiple strategies including T.E.A.C.H. and non-teach scholarships, Quality First participation, and community-based education programs. African American and Latino families that provided information through the focus groups provide insight into the unique barriers they face when attempting to access childcare including lack of high quality programs and lack of service options during non-traditional hours of operations e.g., nights and weekends. Furthermore, diverse families indicated that the services are not culturally responsive as evidenced by lack of representative caregivers. Consideration has been given by the Southwest Maricopa Regional Partnership Council of First Things First to strengthening culturally appropriate and traditional types of care including home visitor and 'Family, Friends, and Neighbors' programs.

Education. The changing face of American education that includes children from diverse ethnic and linguistic backgrounds challenges the districts within the southwest Maricopa region. In some regional districts up to 30% of the students are English language Learners. All of the districts attempt to offer rigorous instructional programs as well as family education and involvement. However, 7 of 18 selected schools did not make Adequate Yearly Progress in 2010. Educational needs are generally being addressed by education of families on their roles as partners in the education process and more importantly by the region's districts general improvement of graduation rates and AIMS scores. However, lack of state funded



pre-K remains an issue for many families. Schools in the region are generally well provisioned as evidenced by the number of books reported to be in classrooms. However, less than 50% of programs use any type of curriculum to guide early childhood instruction.

Family support needs continue based on a weak economy in which, as noted, more families are applying for TANF funds. However, childcare scholarships are assisting families. Southwest Maricopa Regional Partnership Council members, in response to their constituents, recognize these needs and have called for increased numbers of scholarships. Families continue to request information on parenting, behavior management, developmental indicators, and strategies for early education. Delivery of these topics to hard-to-reach families including those from diverse ethnic groups as described and those in distant rural communities remains challenging.

In general, the communities across the southwest Maricopa region form an exciting and diverse network. Their strengths include committed and prescient professionals and volunteers as well as civic leaders. The needs of the region are relatively predictable for an area of immense geography and diversity- disproportionate pockets of poverty within ethnic distributions, cultural mismatch between families and service systems, lack of public transportation, and schools attempting to meet changing standards and requirements. The impact of state budget cuts cannot be understated and is evident in decreased numbers of public preschools, and reductions in childcare subsidies and the impact on the number of childcare facilities. The Southwest Maricopa Regional Partnership Council can serve as

Communities differ on the numbers of families needing support and the type of resources needed. Some communities, such as those in the far southwest Maricopa County, have a greater incidence of hard-to-reach families in remote areas. Other communities such as Avondale and Buckeye have problems more akin to large urban communities including pockets of poverty and increased unemployment. Additional communities such as Tolleson and Tonopah have growing populations of English learners and have a younger median age. For all these reasons, the regional First Things First-Arizona partnership with a statewide perspective is of benefit. This unique perspective of a local planning council coupled with a state agency provides 1) a deeper understanding of available evidence-based support services, 2) knowledge of emerging best practices, 3) recognition of the specific needs of communities or sub populations of families, and 4) the ability to direct targeted supports to these populations of families. However, it is unlikely that First Things First-Arizona and its Regional Councils will be able to meet all needs. Thus, the Northwest Maricopa Regional Partnership Council appears to be building strong alliances among partners that historically have worked in silos. They are generating substantive dialogue across communities on health, early childhood education, and creation of a high quality system of childcare.

As the population of youngsters exceeds 23,756 and appears to be growing, communities will continue to expand. Families are beginning to look toward First Things First as a barometer of quality childcare and evidence-based forward planning.



APPENDIX A

Community Resources

Exhibit A-1

Licensed Childcare Facilities by Zip Code

ZIP CODE	SOUTHWEST LICENSED CHILDCARE FACILITIES BY ZIPCODE		
	Type of care	Number of Childcare	Total Capacity
85323	Child Care Center	13	1164
	Public School	1	205
	Small group home	3	30
85326	Child Care Center	13	1077
	Public School	4	578
	Small group home	1	10
85337	Public School	1	35
85338	Child Care Center	11	1164
	Public School	2	204
	Small group home	1	10
85340	Child Care Center	4	531
	Public School	4	1531
85343	Child Care Center	1	25
85353	Child Care Center	5	391
	Public School	1	52
	Small group home	3	30
85354	Child Care Center	1	38
	Public School	1	59
85392	Child Care Center	6	674
	Public School	2	530
	Small group home	1	10
85395	Child Care Center	7	1235
	Public School	2	430
85396	Child Care Center	2	220



	Public School	2	225
	Small group home	1	10
Southwest Maricopa	Child Care Center	63	6,519
	Public School	20	3,849
	Small group home	10	100

Source: Arizona Department of Economic Security.

Exhibit A-2

Early Childhood Education Centers in the Southwest

The SWift® Resource website, <http://swiftresource.com>, *People's Information Guide* published by the Arizona Community Action Association and other community-based directories were reviewed for the Southwest Maricopa resources below:

NAME	EARLY CHILDHOOD EDUCATION CENTERS SOUTHWEST		
	Address	City	Zip Code
ABC Child Care Center	11606 West Pima Street	Avondale	85323
ABC Child Care Center II	200 North Dysart Road	Avondale	85323
Arts Academy at Estrella Mountain - Charter K-8	2504 S 91st Ave	Tolleson	85353
Bel Esprit Day School at Palm Valley	1375 N. Litchfield Rd	Goodyear	85395
Bradley Academy of Excellence - Charter K-8	200 N. Dysart Road	Avondale	85323
Brighter Angels Learning Center	10740 West Lower Buckeye Road, #101	Avondale	85323
Care From the Heart Child Care	12938 West Whitton Avenue	Avondale	85323
Child Enrichment Center	3rd Street/ ason	Buckeye	85326
Cornerstone Kidz	11301 West Indian School	Avondale	85323
Estrella Mountain Preschool	10485 South Estrella Park Way	Goodyear	85338
First Steps Annex	501 North 4th Street	Buckeye	85326
First Steps Children's Center	406 North First Street	Buckeye	85326
Grace Fellowship Preschool & Child Care	1300 North Miller Road	Buckeye	85326
Great Beginnings Preschool	16060 West Van Buren Avenue	Goodyear	85338
Gymboree - West Valley - La Piazza Plaza	14130 W. McDowell Rd., Ste A102	Goodyear	85395
Kid City-Buckeye	6213 South Miller Road	Buckeye	85326
Kinder Care Learning Center Goodyear	13746 West McDowell Road	Goodyear	85338



KinderCare Learning Center	15630 West Van Buren Street	Goodyear	85338
Kings Kids of Grace	1300 North Miller Road	Buckeye	85326
Iliad and Kindergarten Academy	4290 S. Miller Road	Buckeye	85326
Image Avondale Elementary Inc.	950 N Eliseo C., Felix Jr. Way	Avondale	85323
La Petite Academy	13003 W. McDowell Road	Avondale	85323
Lil' Squirts Preschool	1003 E. Eason Ave	Buckeye	85326
Loving Care Child Care Center Learning	150 North Central Avenue	Avondale	85323
Loving Care Day Care Center	300 North Central Avenue	Avondale	85323
Montessori in the Park	1832 N. Litchfield Road	Goodyear	85395
Montessori West Preparatory School	13034 West Solano Drive	Litchfield Park	85340
Nana's House	406 East Coronado	Buckeye	85326
Noah's Nursery	901 Plaza Circle	Avondale	85323
Palm Valley Montessori LLC	629 North Sarival Avenue	Goodyear	85338
Palm Valley Preschool Inc. - DBA Teach n' Fun	12375 West Indian School Road	Avondale	85392
Phoenix Children's Academy Private Preschool # 229	17670 West Elliot Road	Goodyear	85338
Rain or Shine Daycare	197 North 223rd Avenue	Buckeye	85326
St. John Vianney Preschool	539 La Pasada Boulevard	Goodyear	85338
St. Peter's Montessori Preschool @ Latte Coor	220 West La Canada	Avondale	85323
St. Peter's School-Montessori	400 South Litchfield Road	Litchfield Park	85340
St. Thomas Aquinas Preschool	13720 West Thomas Road	Avondale	85392
St. Thomas Lutheran Preschool	16260 West Van Buren	Goodyear	85338
Stepping Stones Christian Daycare	19 North Central Avenue	Avondale	85323
Sunrise Preschool #145	8803 W. Van Buren	Tolleson	85353
Sunrise Preschool #145	8803 W. Van Buren	Tolleson	85353
Sunrise Preschools Inc	13201 West Thomas Road	Goodyear	85338
T.J.B.'s Day & Evening Child Care	11618 West Hubbell Street	Avondale	85323
Tender Care Creative Center	705 East Baseline	Buckeye	85326
The Iliad Academy, Inc	4290 S Miller Rd	Buckeye	85326



The Montessori Enrichment Center	12409 West Indian School Road	Avondale	85323
Top-Notch Learning Center	2018 North 127th Avenue	Avondale	85323
Top-Notch Learning Center II	12364 West Devonshire Avenue	Avondale	85323
Trinity Lutheran Preschool and Kindergarten	830 East Plaza Circle	Litchfield Park	85340
Tutor Time Child Care	1730 North Dysart Road	Goodyear	85338

Exhibit A-3

Southwest Maricopa Elementary Schools

SCHOOL NAME	SOUTHWEST MARICOPA ELEMENTARY SCHOOLS			
	Address	City	Zip Code	# Preschool & Kindergarten; Before/After School Care
Arizona Desert Elementary - Tolleson S.D.	8803 W. Van Buren Street	Tolleson	85353	3K
Bales Elementary School - Buckeye S.D.	25400 W. Maricopa	Buckeye	85326	2K
Barbara B. Robey Elem. - Litchfield Elementary School District	5340 Wigwam Blvd.	Litchfield Park	85340	5K
Buckeye Elementary School	210 S. 6th Street	Buckeye	85326	1 Pre; 2K – Community and Dev'al
Canyon Breeze Elementary - Pendergast S.D.	11675 W. Encanto Boulevard	Avondale	85323	4K
Centerra Mirage School – Avondale S.D.	15151 W. Centerra Drive South	Goodyear	85338	3K; YKidz B-A/School
Collier Elementary - Littleton S.D.	380 S. 118th Avenue	Avondale	85323	3K; Champions B-A/School Care
Corte Sierra Elementary - Litchfield Elementary School District	3300 N. Santa Fe Trail	Avondale	85323	5K
Country Place Elementary - Littleton S.D.	10207 W. Country Place Boulevard	Tolleson	85353	1K
Desert Oasis Elementary - Tolleson S.D.	9401 W. Garfield Street	Tolleson	85353	3K
Desert Star School – Avondale S. D.	2131 South 157th Avenue	Goodyear	85338	5K; YKidz B-A/School
Desert Thunder School – Avondale S. D.	16750 W. Garfield	Goodyear	85338	4K; YKidz B-A/School
Dos Rios Elementary - Union Elementary S.D.	2150 S. 87th Avenue	Tolleson	85353	
Dreaming Summit Elementary - Litchfield Elementary School District	1335 Missouri	Litchfield Park	85340	1 Pre; 5K



Eliseo C. Felix School – Avondale S. D.	540 La Pasada	Goodyear	85338	3K
Estrella Mountain Elementary - Liberty School District	10301 South San Miguel	Goodyear	85338	3K; Extended day
Estrella Vista Elementary: Littleton School District	11905 W. Cocopah Circle N.	Avondale	85323	2K
Freedom Elementary - Liberty S.D.	22150 W. Sundance Parkway South	Buckeye	85326	3K; Extended Day
Garden Lakes Elementary - Pendergast S.D.	10825 W. Garden Lakes Parkway	Avondale	85323	4K; YKidz B-A/ School
Gila Bend Elementary School - Gila Bend USD	308 N. Martin Avenue	Gila Bend	85337	1 Pre; 2K
Gila Bend School District	308 N. Martin	Gila Bend	85337	
H.K. Cummings Community Center	11675 West Encanto Boulevard	Avondale	85323	Provides B/A School care in Avondale schools
Hurley Ranch Elementary - Union Elementary S.D.	8950 W. Illini Drive	Tolleson	85353	5K
Kiser Elementary - Paloma School District	38739 W. I-8	Gila Bend	85337	
Liberty Elementary - Liberty S.D.	19818 West Highway 85	Buckeye	85326	
Liberty Elementary School District	19818 West Highway 85	Buckeye	85326	
Litchfield Elementary - Litchfield Elementary School District	13825 W Wigwam Blvd	Litchfield Park	85340	2 Pre; 6K
Litchfield Elementary School District	553 Plaza Circle	Litchfield Park	85340	
Littleton Early Childhood Education Center	1252 S. Avondale Boulevard	Avondale	85323	Preschool
Littleton Elementary - Littleton S.D.	1252 S. Avondale Boulevard	Avondale	85323	3 Pre; 2K
Littleton Elementary School District	1600 S. 107th Avenue	Avondale	85323	
Michael Anderson School – Avondale S. D.	45 S. 3 rd Avenue	Avondale	85323	1 Pre; 3K
Palm Valley Elementary - Litchfield Elementary School District	2801 N 135th Ave	Goodyear	85395	4K
Paloma Elementary School District	38739 W. I-8	Gila Bend	85337	
Palo Verde Elementary - Palo Verde S.D.	10700 S. Palo Verde Road	Palo Verde	85343	2K
Pendergast Elementary School District	3802 W. 91 st Avenue	Phoenix	85037	
Quentin Elementary - Littleton S.D.	11050 W. Whyman	Avondale	85323	2K; Champions B-A/School Care
Rainbow Valley Elementary - Liberty S.D.	19716 W. Narramore Road	Buckeye	85326	3K; Extended day
Rancho Santa Fe - Litchfield Elementary School District	2150 Rancho Santa Fe Blvd	Avondale	85323	4K



Rio Vista Elementary - Pendergast S.D.	10237 W. Encanto Boulevard	Avondale	85323	3K
Ruth Fisher Elementary - Saddle Mountain U.S.D.	38201 W. Indian School Road	Tonopah	85354	To reopen 2012-2013
Scott Libby Elem. - Litchfield Elementary School District	18701 W. Thomas Rd.	Litchfield Park	85340	3 Multiage classes; 2K
Steven R. Jaskinski Elementary School	4280 S. 246th Avenue	Buckeye	85326	3K
Sundance Elementary School - Peoria Unified School District	23800 West Hadley	Buckeye	85326	2 Dev'al Pre; 3K; Dev'al Preschool Assessment Team
Sundance School - Buckeye S.D.	23800 W. Hadley Street	Buckeye	85354	2K
Tartesso Elementary - Saddle Mountain U.S.D.	29677 W. Indianola	Buckeye	85396	3K
Tolleson School District	9261 A. Van Buren	Tolleson	85353	
Tolleson Union High School District	9801 W. Van Buren	Tolleson	85353	
Tres Rios Elementary: Littleton School District	5025 S. 103rd Avenue	Tolleson	85353	2K
Verrado Elementary - Litchfield Elementary School District	20873 W Sunrise Lane	Buckeye	85396	3 Pre; 3K
Union Elementary School District	3834 S. 91st Avenue	Tolleson	85354	
Verrado Middle School	20880 West Main Street	Buckeye	85326	
Westar Elementary - Liberty S.D.	17777 W. Westar Drive	Goodyear	85338	2K; Extended day child care
West Park Elementary School - Buckeye S.D.	2700 S. 267th Avenue	Buckeye	85326	2K
White Tanks Learning Center - Litchfield S.D.	18071 W. Thomas Road	Litchfield Park	85340	3K
Wildflower School – Avondale S. D.	325 S. Wildflower Drive	Goodyear	85338	3K; Ykidz B-A/School
Winters Well Elementary - Saddle Mountain U.S.D.	35220 W. Buckeye Road	Tonopah	85354	1 Pre; 3K



Exhibit A-4Southwest Head Start Centers

CENTER NAME	SOUTHWEST HEAD START CENTERS		
	Address	City	Zip Code
Avondale Kinder Head Start	44 South 3rd Avenue	Avondale	85323
Avondale South Head Start	525 East Harrison Drive	Avondale	85323
Buckeye Elementary Head Start	405 S 7th Street	Buckeye	85326
Buckeye Head Start - Maricopa County Head Start	113 East Centre	Buckeye	85326
Gila Bend Head Start Center - Maricopa County Head Start	308 Martin Avenue	Gila Bend	85337
Gila Bend Head Start Center - Maricopa County Head Start	308 Martin Avenue	Gila Bend	85337
Lattie Coor Head Start	220 West La Canada	Avondale	85323
Maricopa County Home Based - Buckeye	113 E. Center	Buckeye	85326
Maricopa County Home Based at Avondale Elementary	44 S. 3rd Avenue	Avondale	85323
Maricopa County Home Based at Avondale Kinder	44 South 3rd Avenue	Avondale	85323
Maricopa County Home Based at Avondale South	525 E. Harrison Drive	Avondale	85323
Maricopa County Home Based at Tolleson	9401 W. Garfield	Tolleson	85353
Palo Verde Head Start Center - Maricopa County Head Start	10700 S. Palo Verde Road	Palo Verde	85343
Union Head Start Center - Maricopa County Head Start	3834 S. 91st Avenue	Tolleson	85353

Exhibit A-5Community Resources

RESOURCES	SOUTHWEST MARICOPA COMMUNITY RESOURCES			
	Address	City	Zip Code	Category
Agua Fria Food Bank	405 E. Harrison	Avondale	85323	Food Boxes
Agua Fria Food Bank Tonopah	36826 W. Indian School Road	Tonopah	85354	Food Boxes
All Faith Community Services	(623) 333-2700	Buckeye	85326	Emergency Food Boxes
Arizona Call-A-Teen Resources, Inc.	(602) 252-6721	Phoenix	-	Adult Basic Education/ GED
Arizona's Children Association / Nuestra Familia	9401 W. Garfield Road	Tolleson	85353	Family Support / Parent Information
Arizona's Children Association / Nuestra Familia	9401 W. Garfield Road	Tolleson	85353	Financial Assistance
Arizona's Children Association / Nuestra Familia	9401 W. Garfield Road	Tolleson	85353	Social Services
Arizona Department of Health Services	150 N. 18 th Avenue	Phoenix	85007	Quality First
Avondale Senior Center	1007 S. 3 rd Street	Avondale	85323	Social Services; Recreation & Leisure
Avondale Taxi Program	(623) 222-4133	Avondale	85323	Transportation Services
B.O.S.S. - Buckeye Outreach For Social Services	501 E. Mahoney Street	Buckeye	85326	Social Services
Buckeye Food Bank	106 N 5th Street	Buckeye	85326	Food Boxes
Buckeye Senior Center	201 E. Centre Ave.	Buckeye	85326	Social Services; Recreation & Leisure
Buckeye Valley Museum	10th Street and Monroe, PO Box 292	Buckeye	85326	Recreation & Leisure
Burleson Park	910 N. Logan	Gila Bend	85337	Recreation & Leisure
Care1st Avondale Resource and Housing Center	328 W. Western Avenue	Social Services	85323	Social Services; Education
Care1st Gila Bend Family Resource Center	303 E. Pima Street	Social Services	85337	Social Services; Education
Central Arizona College	8470 N. Overfield Road	Coolidge	85128	Scholarships - TEACH
Christ Evangelical Lutheran Church	918 S. Litchfield Road	Goodyear	85338	Emergency Food Boxes
City of Avondale Social Services	1007 S. Third Street	Avondale	85323	Social Services
City of Goodyear	190 N. Litchfield Road	Goodyear	85338	City Government
City of Litchfield Park	214 W. Wigwam Blvd.	Litchfield Park	85340	City Government
City of Tolleson	9555 W. Van Buren St.	Tolleson	85353	Owner-occupied housing rehabilitation
Community Action Program – Avondale	1007 N. Third Street	Avondale	85323	Social Services
Community Action Program – Tolleson	9555 W. Van Buren Street	Tolleson	85353	Social Services



Community Action Program – Gila Bend	303 E. Pima Street	Gila Bend	85337	Social Services
Community Center Park	202 N. E Euclid Avenue	Gila Bend	85337	Recreation & Leisure
DES Child Care	(623) 925-0095	Avondale	85323	Child Care Assistance
DES Family Assistance Administration	290 E. La Canada	Avondale	85323	Financial Assistance
DES Family Assistance Administration	302 N. 4 th Street	Buckeye	85326	Financial Assistance
Dr. Saide Recreation Center	1003 E. Eason Ave.	Buckeye	85326	Recreation & Leisure
Estrella Mountain Emergency Assistance	11 N. 3rd Street	Avondale	85323	Social Services
Families in Need	3010 S. 92 nd Drive	Tolleson	85353	Referral & Advocacy
Financially F.I.T.	1007 S. Third Street	Avondale	85323	Social Services
Frank X. Gordon Adult Education	(602) 416-7219	Glendale, Mesa, C. Phoenix	-	Adult Basic Education,
Fria Food and Clothing Bank	405 E. Harrison Drive	Avondale	85323	Social Services
Florence Brinton Litchfield Memorial	101 W. Wigwam Blvd	Litchfield Park	85340	Recreation & Leisure
Gila Bend Senior/ Community Center	202 N. Euclid Street	Gila Bend	85337	Social Services
Goodyear (City of) Faith Community Roundtable	190 N. Litchfield Road	Goodyear	85338	Community Action
Gymboree – West Valley, La Piazza Plaza	14130 W. McDowell Rd., Ste A102	Goodyear	85395	Recreation & Leisure
H.K. Cummings Community Center	11675 West Encanto Boulevard	Avondale	85323	Social Services
Hope's Closet	116 E Western Ave	Goodyear	85338	Social Services
Litchfield Park and Recreation Center	100 South Old Litchfield Park Road	Litchfield Park	85340	Recreation & Leisure
Literacy Volunteers of Maricopa County	(602) 274-3430	Phoenix	85014	Adult Basic Education; GED; English Language Acquisition
Lutheran Social Ministries West Pantry	(623) 848-8278	West Valley	-	Emergency Food Boxes
Neighborhood & Family Services Department; City of Avondale	1007 S. 3 rd Street	Avondale	85323	Financial Assistance
New Destiny Christian Church	(602) 237-3927	Laveen	85339	Emergency Food Boxes; On-site Meals
New Life Center & Shelter	P. O. Box 5005	Goodyear	85338	Social Services; Domestic Violence
Palm Valley Community Center	14145 W. Palm Valley Blvd.	Goodyear	85338	Recreation & Leisure
Salvation Army	2702 E. Washington Street	Phoenix	85034	Social Services
Society of St. Vincent de Paul	420 W. Watkins	Phoenix	85003	On-site Meals



St. Mary's Food Bank Alliance	(602) 242-3663	Multiple Locations	-	Emergency Food Boxes
Southwest Community Network	P.O. Box 1806	Avondale	85323	Social Services
Southwest Human Development	2850 N. 24th Street	Phoenix	85008	Child Care Director Training/ Mentoring
Stillpointe Early Education Services, LLC	30301 W. Whitton Avenue	Buckeye	85396	Early Education
Tolleson Boys and Girls Club	931 W. Washington	Tolleson	85353	Recreation & Leisure
Tolleson City Hall	9555 West Van Buren Street	Tolleson	85353	City Government
Tolleson Food Bank	10 South 93rd Ave	Tolleson	85353	Emergency Food Boxes
Tolleson Senior Center	9555 W. Van Buren	Tolleson	85353	Social Services; Recreation & Leisure
Tonopah Community Garden	-	Tonopah	85354	Community grown food
Town of Buckeye	106 N. 5 th Street	Buckeye	85326	City Government
Town of Gila Bend	644 W. Pima Street	Gila Bend	85337	City Government
UMOM Shelter	(602) 263-8900	Phoenix	-	Emergency shelter; Counseling; Referrals
Unity Park	601 S. Martin Avenue	Gila Bend	85337	Recreation & Leisure
Valley of the Sun United Way		Phoenix		Quality First
Vineyard Food & Clothing Bank	(623) 934-4000	West Valley	-	Emergency Food Boxes
West Valley Human Service Alliance	3841 N. 91 st Avenue	Phoenix	85037	Human Service Alliance
YWCA of Maricopa County – Valley West	(623) 931-7436	West Valley	-	On-site Meals; Home Delivered Meals

Exhibit A-6

Libraries, Colleges and Specialized Schools



RESOURCE	SOUTHWEST MARICOPA LIBRARIES, COLLEGES, AND SPECIALIZED SCHOOLS		
	Address	City	Zip Code
Avondale Civic Center Library	11350 Civic Center Drive	Avondale	85323
Buckeye Central Library	310 N 6th Street	Buckeye	85326
e-Institute Charter High School	6213 S. Miller Rd	Buckeye	85326
Estrella Mountain Community College - Main Campus	3000 N Dysart Road	Avondale	85323
Estrella Mountain Community College - Southwest Skill Center	3000 N Dysart Road	Avondale	85323
Gila Bend Branch Library	200 N Euclid	Gila Bend	85337
Goodyear Branch Public Library	250 N. Litchfield Rd., Ste. 185	Goodyear	85338
Litchfield Park Branch Library	101 W. Indian School Road	Litchfield Park	85340
Odyssey Preparatory Academy	6500 S Apache Rd.	Buckeye	85326
Tolleson Central Library	9555 W Van Buren	Tolleson	85353
San Lucy District Library	1125 C. Street	Gila Bend	85337
Summer Reading Program	190 N. Litchfield road	Goodyear	85338

Exhibit A-7

Southwest Maricopa Hospitals/Clinics



FACILITY NAME	SOUTHWEST MARICOPA HOSPITALS/CLINICS		
	Address	City	Zip Code
Adelante Healthcare Gila Bend	100 N. Gila Boulevard	Gila Bend	85337
Alliance Urgent Care	980 S Watson Rd Ste #103	Buckeye	85326
Avondale Family Health Dental Clinic	950 E Van Buren St	Avondale	85323
Avondale Family Health Clinic	950 E Van Buren St	Avondale	85323
Bales Elementary - School Based Clinic	26400 W. Maricopa Road	Buckeye	85326
Banner Estrella Medical Center	9201 W. Thomas Road	Phoenix	85037
Buckeye Dental Clinic	306 E. Monroe	Buckeye	85326
Buckeye Union High - School Based Clinic	902 Eason Avenue	Buckeye	85326
Cigna Medical Group	14445 W McDowell Rd, Ste A104	Goodyear	85395
CMG CareToday	1473 N. Dysart Rd. Suite 100	Avondale	85323
Colleen Cunningham MD	10750 W McDowell Road	Avondale	85323
Gary Berebitsky MD	10750 W McDowell Road	Avondale	85323
Gila Bend Primary Care Center	100 N. Gila Blvd	Gila Bend	85337
Goodnight Pediatrics	10320 W McDowell Road	Avondale	85323
Hilgers Pediatric Dentistry	1646 N Litchfield Rd	Goodyear	85338
Jeffery Brownstein DDS	13575 W Indian School Road Suite 1000	Litchfield Park	85340
Jennifer Maitra MD	195 Lamar Blvd. Suite D	Goodyear	85338
Kathleen Nichols MD	14044 W Camelback Rd	Litchfield Park	85340
Kent M. Johnson MD FACP FAAP	14044 W Camelback Rd Suite 204	Litchfield Park	85340
Liberty Elementary - School Based Clinic	19818 W. Highway 85	Buckeye	85326
Maryvale Pediatric Clinic	13075 W McDowell Road	Avondale	85323
Michael Arbel MD	10750 W McDowell Road	Avondale	85323
Mission of Mercy Mobile Health Clinic	(623) 932-2723	Avondale	85323
Mountain Park Health Center	9169 W Van Buren Street	Tolleson	85353
Nextcare Urgent Care	15875 W Clubhouse Drive	Goodyear	85338
Nextcare Urgent Care	9494 W Northern Avenue	Avondale	85323
Planned Parenthood – Avondale	127 E. Western Avenue	Avondale	85323
Planned Parenthood – Goodyear	140 N. Litchfield Rd., Ste 100	Goodyear	85338
Rainbow Valley Elementary - School Based Clinic	19716 W. Narramore	Buckeye	85326
Rural Health Team Mobile Clinic	306 E. Monroe	Buckeye	85326
Southwest Family Medicine	9550 W. Van Buren Street Suite 11	Tolleson	85353



Southwest Lending Closet	218 N. Central Avenue	Avondale	85323
St. Joseph's Maternity Outreach Mobile	539 La Pasada	Goodyear	85338
Sunvalley Urgent Care	12409 W Indian School Rd, # E	Avondale	85392
Terry Woodbeck MD	14044 W Camelback Rd	Litchfield Park	85340
Tolleson Union High - School Based Clinic	9419 W. Van Buren Street	Tolleson	85353
West Valley Hospital	13677 W McDowell Road	Goodyear	85338
West Valley Pediatric Dentistry	13575 W Indian School Road Suite 1000	Litchfield Park	85340
West Valley Pediatrics	10750 W McDowell Road	Avondale	85323

Exhibit A-8

Southwest Maricopa Faith Community Centers



FAITH CENTER	SOUTHWEST MARICOPA FAITH COMMUNITY		
	Address	City	Zip Code
Abundant Harvest Church	919 N. Dysart Rd. Suite N & O	Avondale	85323
Avondale Christian Assembly	541 E Main St	Avondale	85323
Bethesda Church Of God-Christ	617 E Doris St	Avondale	85323
Blessed Sacrament	512 North 93rd Avenue	Tolleson	85353
Buckeye Seventh-Day Adventist Church:	302 East Narramore Avenue	Buckeye	85326
Calvary Chapel Goodyear	3673 South Bullard Avenue,	Goodyear	85338
Christ Evangelical Lutheran Church	918 S. Litchfield Road	Goodyear	85338
Christ Gospel Church	16 N 5th St	Avondale	85323
Christ Presbyterian Church	316 N Central Ave	Avondale	85323
Church At Litchfield Park	300 North Old Litchfield Road	Litchfield	85340
Church of God	2605 North 115th Drive	Avondale	85392
Church Of Jesus Christ Of Latter Day Saints	10930 W Garden Lakes Pkwy	Avondale	85323
Church Of Jesus Christ Of Latter Day Saints	25800 W. Southern Avenue	Buckeye	85326
Community Church Methodist	810 East Eason Avenue	Buckeye	85326
Community United Methodist Church	104 W Western Ave	Avondale	85323
Cornerstone Christian Center	11301 W. Indian School Rd	Avondale	85392
Cruz de Calvario	1010 North 95th Avenue	Tolleson	85353
Del Monte Missionary Baptist Church	714 S. 348 th Avenue	Tonopah	85354
Desert Springs Pentecostal Worship Center	10714 West 4th Street	Phoenix	85323
Estrella Mountain Church	10485 South Estrella Parkway	Goodyear	85338
Faith Assembly of God	902 South Scott Avenue	Gila Bend	85337
First Baptist Church Garden	517 North 107th Avenue	Avondale	85392
First Southern Baptist Church	8 S. 92nd Dr	Tolleson	85353
First Southern Baptist Church	1001 N Central Ave	Avondale	85323
Fuente Iglesias de Vida	9155 West Roosevelt Street,	Tolleson	85353
Gila Bend Church of Latter Day Saints	231 North Euclid Avenue	Gila Bend	85337
Living Water Lutheran Church	25560 W. Highway 85, Ste. 24	Buckeye	85326
Goodyear Spanish Congregation	230 W Western Ave	Avondale	85323
Grace Fellowship Church	1300 N Miller Rd	Buckeye	85326



Gracia Para Las Naciones	10714 West 4th Street	Cashion	85329
In Him Church	13048 W. Rancho Santa Fe Boulevard	Avondale	85392
Our Lady of Solitude Monastery Chapel	P.O. Box 639	Tonopah	85354
Our Saviour's Lutheran Church	10 North Apache Road	Buckeye	85326
Palo Verde Baptist Church	29600 W. Old Highway 80	Palo Verde	85343
Redeemer Lutheran Church	450 Rose Lane	Wickenburg	85338
Rev. Bruce Helstrom	228 North Euclid Avenue	Gila Bend	85337
Skyway Church	14900 West Van Buren Street	Goodyear	85338
St. Henry Roman Catholic Church	128 South 3rd Street	Buckeye	85326
St Thomas Aquinas Catholic church	13720 W. Thomas Road	Avondale	85392
ST. John Vianney	539 La Pasada Blvd	Goodyear	85338
St. Thomas Aquinas Catholic Church	13720 W. Thomas Road	Avondale	85323
St. Williams Catholic Church	11025 W 3rd St	Cashion	85329
Valley Baptist Church of Tonopah	37702 W. Indian School Road	Tonopah	85354



APPENDIX B

Southwest Maricopa Parent/Family Survey

Exhibit B-1

Demographic Characteristics

CHARACTERISTIC	SURVEY RESPONDENT CHARACTERISTICS (PERCENT)				
	Southwest Maricopa	Avondale	Buckeye	Goodyear	Tolleson
Relationship to child					
Mother	89.1	89.5	90.6	88.9	88.2
Father	7.3	8.6	3.1	9.5	9.8
Grandmother	3.1	2.0	6.3	0.0	0.0
Grandfather	0.0	0.0	0.0	0.0	0.0
Other	0.6	0.0	0.0	1.6	2.0
Gender					
Female	91.4	90.8	94.1	88.9	86.5
Male	8.6	9.2	5.9	11.1	13.5
Age					
Younger than 19	0.0	0.0	0.0	0.0	0.0
19 to 29 years	44.7	46.4	17.6	52.4	40.4
30 to 39 years	40.8	43.1	61.8	33.3	46.2
40 to 49 years	10.0	6.5	14.7	11.1	13.5
Older than 50	4.4	3.9	5.9	3.2	0.0
Language spoken at home					
English	39.3	37.6	39.4	47.6	29.4
Spanish	28.9	34.2	39.4	14.3	19.6
English & Spanish	30.1	26.8	18.2	34.9	49.0
English & Other	1.5	1.4	3.0	3.2	2.0
Race/Ethnicity					
White	15.7	12.2	18.8	19.4	3.8
Hispanic/Latino	73.1	79.6	71.9	59.7	84.6
African American	5.7	4.1	3.1	9.7	7.7
American Indian	1.7	0.7	0.0	3.2	1.9
Asian	0.9	0.7	0.0	3.2	0.0
Other	0.9	1.4	3.1	0.0	0.0



Sample Size (n)	362	153	34	63	52
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Exhibit B-2

Demographic Characteristics

CHARACTERISTIC	SURVEY RESPONDENT CHARACTERISTICS (PERCENT)				
	Southwest Maricopa	Avondale	Buckeye	Goodyear	Tolleson
Employment Status					
Employed for wages	29.1	25.4	9.7	39.3	54.0
Self-employed	3.5	2.8	9.7	3.3	0.0
Out of work/looking	16.8	16.9	16.1	14.8	12.0
Homemaker	44.1	49.3	61.3	31.1	30.0
Student	2.6	2.1	3.2	8.2	2.0
Retired	1.2	0.7	0.0	0.0	0.0
Unable to work	1.2	2.1	0.0	1.6	0.0
Other	1.5	0.7	0.0	1.6	2.0
Highest Level of Education					
8th grade or less	17.2	22.0	16.7	6.3	10.0
High School	46.8	49.3	36.7	33.3	66.0
Technical/Vocational school	19.3	18.0	26.7	19.0	20.0
College degree	12.9	8.7	10.0	33.3	2.0
Postgraduate	3.7	2.0	10.0	7.9	2.0
Marital Status					
Married	69.8	65.5	93.9	72.1	67.3
Divorced	5.7	6.8	0.0	6.6	8.2
Separated	4.3	2.7	3.0	3.3	6.1
Single	19.8	25.0	3.0	18.0	18.4
Widowed	0.3	0.0	0.0	0.0	0.0
Median Number of family members living in home.					
Adult	2	2	2	2	2
Children	3	3	2	2.5	2
Length of residence in AZ					
0-1 year	3.4	2.7	2.9	6.6	2.0
1-3 years	6.8	4.7	2.9	11.5	9.8
3-6 years	13.7	13.4	14.7	23.0	9.8
More than 6 years	76.1	79.2	79.4	59.0	78.4
Sample Size (n)	362	153	34	63	52



Exhibit B-3

Q7. How often do you need to have someone help you when you read instructions, pamphlets, or other written material from your child's doctor or pharmacist?

AREA	HELP NEEDED WHEN READING WRITTEN MATERIALS FROM CHILD'S DOCTOR (PERCENT)				
	Never	Rarely	Sometimes	Often	Always
Avondale	57.6	20.1	15.3	4.2	2.8
Buckeye	43.8	6.3	34.4	6.3	9.4
Goodyear	73.6	5.7	15.1	5.7	0.0
Tolleson	65.3	18.4	14.3	0.0	2.0
Tonopah	35.3	26.5	32.4	2.9	2.9
Southwest Maricopa	57.4	16.6	18.7	4.2	3.0

Exhibit B-4

Q12. Do you receive state health care?

AREA	STATE HEALTH CARE (PERCENT)			
	No	AHCCCS	Medicaid	Other
Avondale	13.8	82.2	0.7	0.7
Buckeye	32.4	61.8	2.9	2.9
Goodyear	33.3	58.7	3.2	3.2
Tolleson	26.9	69.2	1.9	1.9
Tonopah	24.3	73.0	0.0	2.7
Southwest Maricopa	24.9	70.7	1.4	1.7

Exhibit B-5

Q13. Do you receive financial and/or support assistance from the state?



AREA	FINANCIAL AND/OR SUPPORT ASSISTANCE FROM THE STATE (PERCENT)						
	Yes	Type of Assistance					
		DES childcare	TANF/AFDC	PELL	SSI	SNAP/WIC	Other
Avondale	43.5	6.3	6.3	4.7	9.4	89.1	0.0
Buckeye	15.2	0.0	0.0	0.0	0.0	80.0	20.0
Goodyear	36.1	4.3	0.0	0.0	0.0	91.3	8.7
Tolleson	42.3	13.6	0.0	0.0	4.5	90.9	0.0
Tonopah	25.7	0.0	22.2	0.0	0.0	77.8	11.1
Southwest Maricopa	36.4	7.0	4.7	2.3	5.5	88.3	3.1

NOTE: Percent for type of assistance do not add up to 100; respondents were allowed to select more than one choice.

Exhibit B-6

Q15. How many of your children under the age of 18 are living in your household?

Q17. Do any of your children have a disability?

Q18. Are any of your children in foster care?

Q19. Are any of your children adopted or from foster care?

AREA	INFORMATION ABOUT CHILDREN (PERCENT)				
	Families with children with disability	Families with children in foster care	Families with adopted or foster children	Families with one or two children ¹	Families with three or more children ¹
Avondale	6.8	0.7	2.0	43.3	56.7
Buckeye	9.4	3.2	3.2	48.4	51.6
Goodyear	6.9	1.6	3.3	53.2	46.8
Tolleson	5.9	1.9	2.0	51.0	49.0
Tonopah	2.7	0.0	5.6	42.1	57.9
Southwest Maricopa	6.1	0.3	3.2	46.9	53.1

¹ Children under the age of 18 living in household

Exhibit B-7

Q20. Who provides your childcare?

PROVIDER	CHILDCARE PROVIDED BY (PERCENT)
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	Area					
	Avondale	Buckeye	Goodyear	Tolleson	Tonopah	Southwest Maricopa
Parent	89.4	80.0	84.7	78.7	84.4	84.6
Babysitting by underage relative	2.8	0.0	11.9	2.1	0.0	4.6
Babysitting by underage non relative	1.4	0.0	5.1	4.3	0.0	2.8
Early Head Start/Head Start	40.4	32.0	28.8	46.8	31.3	35.8
School district preschool	8.5	8.0	5.1	6.4	6.3	7.7
Private preschool	2.1	0.0	1.7	2.1	0.0	2.2
Daycare center	4.3	4.0	1.7	2.1	0.0	3.1
Home child care	10.6	0.0	8.5	12.8	6.3	8.6
Before or after school care	0.0	4.0	1.7	2.1	3.1	1.2
Recreation Activity	0.0	0.0	0.0	0.0	0.0	0.0
Other	1.4	8.0	3.4	0.0	0.0	1.9

Percentages do not add up to 100; participants were allowed to select more than one choice.

Exhibit B-8

Q21. How many hours each week do you need child care per child.

AREA	CHILDCARE WEEKLY HOURS NEEDED			
	Do not use childcare	0-10 hours	10-20 hours	More than 20 hours
Avondale	66.1	14.9	11.6	7.4
Buckeye	70.8	16.7	8.3	4.2
Goodyear	46.2	23.1	11.5	19.2
Tolleson	63.0	13.0	6.5	17.4
Tonopah	82.6	13.0	0.0	4.3
Southwest Maricopa	63.6	16.6	9.2	11.0

Exhibit B-9

Q22. Who makes childcare decisions?

AREA	CHILDCARE DECISIONS					
	Mother	Father	Grandmother	Grandfather	Foster Parent	Mother & Father



Avondale	53.1	2.8	2.1	0.0	0.7	39.3
Buckeye	62.1	0.0	0.0	0.0	0.0	37.9
Goodyear	53.6	0.0	0.0	0.0	1.8	42.9
Tolleson	58.3	0.0	0.0	0.0	4.2	37.5
Tonopah	32.3	0.0	3.2	0.0	12.9	48.4
Southwest Maricopa	53.7	1.2	1.2	0.0	2.5	39.6

Percentages do not add up to 100; participants were allowed to select more than one choice and not all choices are shown.

Exhibit B-10

Q23. Why do you use childcare?

AREA	REASONS TO USE CHILDCARE			
	So I can work	So I can go to school	Personal Activities	Care for other children/family
Avondale	75.0	17.5	12.5	7.5
Buckeye	NA	NA	NA	NA
Goodyear	76.9	23.1	26.9	0.0
Tolleson	66.7	25.0	25.0	8.3
Tonopah	66.7	16.7	33.3	0.0
Southwest Maricopa	73.7	23.2	18.2	5.1

NA indicates data were not available.

Exhibit B-11

Q24. How did you find out what childcare was available to you?

AREA	INFORMATION ABOUT CHILDCARE AVAILABILITY OBTAINED FROM...							
	Friend/Relative	Phone book	Local directory	Online	School district	Church	Social service agency	Government agency
Avondale	56.4	0.0	15.4	15.4	7.7	2.6	15.4	35.9
Goodyear	88.0	0.0	0.0	8.0	8.0	0.0	4.0	4.0
Tolleson	66.7	0.0	0.0	6.7	6.7	6.7	0.0	6.7
Southwest Maricopa	67.0	0.0	6.0	12.0	11.0	3.0	8.0	19.0

Percentages do not add up to 100; participants were allowed to select more than one choice and not all choices are shown.

Exhibit B-12

Q25. What made you chose your childcare program/provider (rate from 1 very important to 5 not important).

AREA	CHILDCARE ATTRIBUTES RATED AS VERY IMPORTANT WHEN CHOSING PROVIDER (PERCENT)
------	------------------------------------------------------------------------------



	Location	Hours & Days open	Cost per day	State aid	Appearance	Customer service	Children's activities	Recommendations
Avondale	75.0	76.5	69.7	58.1	64.5	77.4	78.1	48.4
Goodyear	57.1	53.8	57.1	40.0	54.5	41.7	69.2	61.5
Tolleson	70.0	50.0	60.0	55.6	44.4	44.4	60.0	60.0
Southwest Maricopa	68.9	65.7	65.7	52.5	61.9	62.3	73.1	56.9

Percentages do not add up to 100; participants were allowed to select more than one choice.

Exhibit B-13

Q26. How many miles do you live from your childcare?

AREA	CHILDCARE DISTANCE			
	0-10 miles	10-20 miles	21-30 miles	More than 30 miles
Avondale	100	0.0	0.0	0.0
Buckeye	71.4	14.3	14.3	0.0
Goodyear	73.7	21.1	0.0	5.3
Tolleson	69.2	30.8	0.0	0.0
Tonopah	66.7	33.3	0.0	0.0
Southwest Maricopa	84.4	13.3	0.0	2.2

Exhibit B-14

Q27. What forms of transportation do you use to transport your children to your childcare?

AREA	CHILDCARE TRANSPORTATION			
	Personal car	Public Transportation	Childcare Transportation	Other
Avondale	88.9	4.4	2.2	8.9



Buckeye	100	0.0	0.0	0.0
Goodyear	100	0.0	4.2	0.0
Tolleson	100	0.0	0.0	0.0
Tonopah	100	0.0	0.0	0.0
Southwest Maricopa	94.4	2.8	1.9	4.7

Exhibit B-15

Q28. Do you need childcare during hours/days that are not available? If so, when?

AREA	CHILDCARE NEED DURING NOT AVAILABLE DAYS/HOURS					
	Yes	No	If so, when?			
			Nights	Weekends	Before School	After School
Avondale	24.0	68.0	*	*	*	*
Buckeye	0.0	100	*	*	*	*
Goodyear	14.3	78.6	*	*	*	*
Tolleson	20.0	65.0	*	*	*	*
Tonopah	18.2	72.7	*	*	*	*
Southwest Maricopa	18.6	72.9	52.0	54.2	26.1	40.0

Percentages do not add up to 100; participants were allowed to select more than one choice and not all choices are shown.
* indicates sample size is too small to provide accurate information.

Exhibit B-16

Q29. Approximately how much do you spend each month on childcare?

Q30. Do you receive financial assistance for childcare?

AREA	CHILDCARE SPENDING				
	Childcare financial assistance		How much do you spend monthly on childcare		
	Yes	No	0-\$100	\$100-\$300	More than \$300



Avondale	12.5	79.2	77.8	8.3	13.9
Buckeye	12.5	87.5	83.3	0.0	16.7
Goodyear	3.3	86.7	64.0	12.0	24.0
Tolleson	11.1	83.3	53.8	38.5	7.7
Tonopah	11.1	77.8	62.5	37.5	0.0
Southwest Maricopa	8.9	83.7	68.1	16.0	16.0

Percentages do not add up to 100; participants were allowed to select more than one choice and not all choices are shown.

Exhibit B-17

Q31. Would you like to change childcare sites?

AREA	WOULD YOU LIKE TO CHANGE CHILDCARE SITES	
	Yes	No
Avondale	4.4	75.6
Buckeye	14.3	71.4
Goodyear	14.3	64.3
Tolleson	16.7	50.0
Tonopah	25.0	50.0
Southwest Maricopa	11.3	67.0

Percentages do not add up to 100; not all choices are shown.

Exhibit B-18

Q32. Length of time you have been with this provider?

Q33. Do the caregivers seem to enjoy their work?

Q34. Does your child look forward to going to childcare?

Q35. If you have concerns with your childcare setting, do you know who to call?

AREA	INFORMATION ABOUT CURRENT CHILDCARE USED (PERCENT)			
	Length of time with provider	Caregivers work enjoyment ¹	Child looking forward to go to	Know who to call if concerned



						childcare ¹		about childcare ¹	
	1-6 months	6-12 months	More than 12 months	Yes	No	Yes	No	Yes	No
Avondale	21.2	36.4	42.4	82.1	2.6	79.5	7.7	67.5	12.5
Buckeye	25.0	50.0	25.0	80.0	0.0	75.0	0.0	75.0	0.0
Goodyear	35.0	30.0	35.0	82.6	0.0	65.2	0.0	66.7	16.7
Tolleson	36.4	27.3	36.4	66.7	16.7	54.5	9.1	36.4	18.2
Tonopah	0.0	42.9	57.1	87.5	0.0	75.0	12.5	57.1	0.0
Southwest Maricopa	26.8	32.9	40.2	81.9	3.2	72.8	5.4	63.4	12.9

¹ Percentages do not add up to 100 some choices were excluded.

Exhibit B-19

Q36. Are licensing reports important to you when you decide on childcare?

Q37. Are you aware of the AZ Early Learning Standards?

AREA	MEASURES OF QUALITY (PERCENT)					
	Licensing reports important when you decide on childcare ¹			Aware of Arizona Early Learning Standards ¹		
	Yes	No	Don't know	Yes	No	Don't Know
Avondale	76.5	11.8	11.8	51.8	30.4	17.9
Buckeye	NA	NA	NA	33.3	66.7	0.0
Goodyear	73.3	6.7	16.7	34.5	44.8	20.7
Tolleson	72.2	5.6	22.2	40.0	40.0	20.0
Tonopah	54.5	9.1	36.4	33.3	33.3	33.3
Southwest Maricopa	73.6	9.6	16.0	42.1	37.6	20.3

NA indicates data were not available.

¹ Percentages do not add up to 100, some choices were excluded.

Exhibit B-20

Q38. How often do you have meetings with your childcare provider?

AREA	MEETINGS WITH CHILDCARE PROVIDER (PERCENT)				
	As Needed	Monthly	2-3 Times a year	Yearly	Never
Avondale	47.8	23.9	2.2	2.2	23.9
Buckeye	40.0	40.0	0.0	0.0	20.0
Goodyear	42.9	19.0	0.0	4.8	28.6



Tolleson	53.3	20.0	6.7	0.0	20.0
Tonopah	71.4	0.0	0.0	14.3	14.3
Southwest Maricopa	50.5	19.8	2.0	3.0	23.8

Exhibit B-21

Q39. Rate your knowledge on childcare

AREA	KNOWLEDGE ON CHILDCARE (PERCENT)			
	Great	Good	Need more information	No Knowledge
Avondale	35.4	26.8	15.9	22.0
Buckeye	9.1	63.6	0.0	27.3
Goodyear	39.5	36.8	15.8	7.9
Tolleson	20.0	30.0	13.3	36.7
Tonopah	45.5	45.5	0.0	9.1
Southwest Maricopa	30.6	35.0	14.2	20.2

Exhibit B-22

Q40. Do you have 3 persons who you can contact if there is an emergency?

Q41. Can your Children name these people?

AREA	FAMILY SUPPORT (PERCENT)			
	3 persons to contact if there is an emergency		Can children name these people	
	Yes	No	Yes	No
Avondale	94.9	5.1	84.4	15.6



Buckeye	92.3	7.7	73.1	26.9
Goodyear	93.3	6.7	68.4	31.6
Tolleson	92.2	7.8	88.2	11.8
Tonopah	96.7	3.3	80.0	20.0
Southwest Maricopa	93.2	6.8	79.2	20.8

Exhibit B-23

Q42. Are you familiar with First Things First?

AREA	FAMILIAR WITH FTF (PERCENT)	
	Yes	No
Avondale	15.2	84.8
Buckeye	9.5	90.5
Goodyear	29.6	70.4
Tolleson	26.1	73.9
Tonopah	55.0	45.0
Southwest Maricopa	24.4	75.6

Exhibit B-24

Q43. What areas do you think care providers need to be trained? Order these from (1) most important to (8) least important.

AREA	AREAS WHERE PROVIDERS NEED TO BE TRAINED RATED AS "MOST IMPORTANT" (PERCENT)							
	Child development	Health & Safety	English	Mental health	Disabilities	Physical development	Language	Early Reading
Avondale	42.7	61.2	15.5	13.4	14.6	11.9	14.3	19.3



Goodyear	44.2	55.8	19.5	10.0	19.5	12.2	17.1	15.0
Tolleson	48.6	36.4	6.1	6.1	9.7	3.2	11.8	6.1
Southwest Maricopa	43.3	55.4	16.2	13.3	16.5	11.3	15.0	17.3

Percentages do not add up to 100; participants were allowed to select more than one choice.

Exhibit B-25

Q44. How many miles do you have to travel to purchase healthy foods including milk, meat/fish, fresh fruits and vegetables?

Q45. Has distance to grocery shopping affected the quality and nutrition value of the foods you serve?

Q46. Has cost of food affected the quality and nutrition value of the foods you serve?

AREA	FOOD AND NUTRITION (PERCENT)						
	Miles traveled to purchase healthy foods			Distance affects quality of foods		Cost affects quality of foods	
	1-5 miles	6-15 miles	More than 15 miles	Yes	No	Yes	No
Avondale	83.6	12.7	3.7	11.3	88.7	52.2	47.8
Buckeye	46.4	25.0	28.6	27.6	72.4	46.2	53.8
Goodyear	84.7	15.3	0.0	5.3	94.7	50.9	49.1
Tolleson	79.2	16.7	4.2	12.5	87.5	47.9	52.1
Tonopah	6.9	24.1	69.0	34.5	65.5	58.6	41.4
Southwest Maricopa	71.8	15.7	12.5	14.2	85.8	50.8	49.2

Exhibit B-26

Q47. Do you have a vehicle?

Q49. Is public transportation available to you? If so, do the hours meet your needs?

AREA	TRANSPORTATION (PERCENT)								
	Have a vehicle			Public transportation available			Public transportation hours of operation meet your needs		
	Yes	No	Don't know	Yes	No	Don't know	Yes	No	Don't know
Avondale	83.1	16.9	0.0	77.0	11.1	11.9	46.8	16.0	37.2



Buckeye	100	0.0	0.0	7.7	69.2	23.1	25.0	75.0	0.0
Goodyear	98.4	1.6	0.0	39.3	42.9	17.9	38.7	16.1	42.5
Tolleson	94.0	6.0	0.0	38.0	44.0	18.0	29.0	22.6	48.4
Tonopah	93.3	6.7	0.0	7.1	85.7	7.1	16.7	66.7	16.7
Southwest Maricopa	89.8	10.2	0.0	50.8	35.4	13.8	40.2	17.9	41.9

Exhibit B-27

Q48. Has transportation affected your choice of...?

AREA	HAS TRANSPORTATION AFFECTED YOUR CHOICE OF...				
	Childcare	Medical care	Employment	Shopping	Education
Avondale	20.8	26.4	45.3	47.2	45.3
Goodyear	31.8	27.3	40.9	36.4	31.8
Tolleson	21.7	21.7	39.1	39.1	47.8
Southwest Maricopa	23.5	29.6	43.5	48.7	44.3

Percentages do not add up to 100; participants were allowed to select more than one choice and not all choices are shown.

Exhibit B-28

Q50. Approximately How many miles is it round trip to your child's health care provider?

AREA	DISTANCE TO CHILD'S HEALTH CARE PROVIDER (PERCENT)			
	1-10 miles	10-20 miles	21-30 miles	More than 30 miles
Avondale	68.9	21.8	5.9	3.4
Buckeye	33.3	33.3	16.7	16.7
Goodyear	50.9	34.0	9.4	5.7
Tolleson	45.5	36.4	15.9	2.3



Tonopah	15.4	19.2	11.5	53.8
Southwest Maricopa	54.3	26.2	9.2	10.3

Exhibit B-29

Q51. During the past 6 months have you had to miss work, school or an appointment for yourself or your child due to lack of transportation?

Q52. Has the cost of gas limited your ability to miss an appointment, attend an event or school?

AREA	MISSING WORK, SCHOOL OR APPOINTMENTS (PERCENT)			
	Due to lack of transportation		Due to cost of gas	
	Yes	No	Yes	No
Avondale	27.3	72.7	40.9	59.1
Buckeye	3.8	96.2	38.5	61.5
Goodyear	17.5	82.5	35.0	65.0
Tolleson	26.0	74.0	50.0	50.0
Tonopah	19.2	80.8	50.0	50.0
Southwest Maricopa	21.5	78.5	40.6	59.4

Exhibit B-30

Q53. Do you have to travel outside your community to seek medical care? If so, how often in the past 6 months have you had to do it?

AREA	TRAVEL OUTSIDE COMMUNITY TO SEEK MEDICAL CARE (PERCENT)				
	Yes	How often in the past 6 months have you had to do it?			
		0-1 time	1-5 times	5-10 times	More than 10 times
Avondale	29.6	38.1	54.0	6.3	1.6
Buckeye	53.6	14.3	64.3	14.3	7.1
Goodyear	26.7	51.9	33.3	14.8	0.0



Tolleson	35.3	44.4	48.1	3.7	3.7
Tonopah	84.4	20.8	58.3	20.8	0.0
Southwest Maricopa	39.2	35.9	51.5	10.2	2.4

Exhibit B-31

Q54. Is there a place that your young child(ren) usually goes when he/she is sick or you need advice about his/her?

Q55. How often have you seen a medical provider during the past 6 months for your child(ren) under 5 years old?

AREA	HEALTH CARE (PERCENT)				
	Place for children to go when sick		How often a medical provider has been seen in last 6 months		
	Yes	No	0-2 Times	2-4 Times	More than 4 times
Avondale	80.3	19.7	54.5	32.2	13.3
Buckeye	95.7	4.3	56.5	13.0	30.4
Goodyear	75.9	24.1	53.3	30.0	16.7
Tolleson	77.6	22.4	49.0	35.3	15.7
Tonopah	67.7	32.3	63.0	29.6	7.4
Southwest Maricopa	79.4	20.6	53.6	31.2	15.3

Exhibit B-32

Q56. Is it a doctor's office, emergency room, hospital outpatient department, clinic, or some other place?

AREA	MEDICAL PROVIDER SEEN IN LAST 6 MONTHS IS A... (PERCENT)					
	Doctor's office	Hospital ER	Hospital outpatient department	Clinic	School	Other
Avondale	89.2	26.9	3.8	27.7	5.4	1.5
Goodyear	91.2	21.1	3.5	14.0	3.5	0.0
Tolleson	85.2	31.9	10.6	23.4	6.4	2.1
Southwest Maricopa	89.2	25.9	5.1	25.9	5.4	2.0

Percentages do not add up to 100; participants were allowed to select more than one choice.



Exhibit B-33

Q57. Is there a place where he/she usually goes when (he/she) needs routine preventive care, such as physical examination or well-child check-up?

Q58. Is the place he/she goes when he/she is sick the same place he/she goes for a routine preventive care?

AREA	HEALTH CARE (PERCENT)						
	Place for routine preventive care				Place children go when sick same as place for routine preventive care ¹		
	Yes	No	More than one	There is no place	Yes	No	Don't know
Avondale	95.7	4.3	0.0	0.0	88.4	10.9	0.7
Buckeye	85.7	4.8	9.5	0.0	95.2	4.8	0.0
Goodyear	93.3	6.7	0.0	0.0	93.3	6.7	0.0
Tolleson	87.8	12.2	0.0	0.0	86.0	10.0	4.0
Tonopah	90.0	10.0	0.0	0.0	89.3	10.7	0.0
Southwest Maricopa	93.1	6.3	0.6	0.0	89.8	8.9	1.3

¹ Percentages do not add up to 100, some choices were excluded.

Exhibit B-34

Q59. A personal doctor or nurse is a health professional who knows your child well and is familiar with your child's health history. This can be a general doctor, a pediatrician, a specialist doctor, a nurse practitioner, or a physician's assistant. Do you have one or more persons you think of his/her personal doctor or nurse?

AREA	ONE OR MORE PERSONS AS PERSONAL DOCTOR OR NURSE (PERCENT)			
	Yes, one person	Yes, more than one person	No	Don't know
Avondale	52.6	20.4	23.4	3.6
Buckeye	61.1	38.9	0.0	0.0
Goodyear	54.2	13.6	32.2	0.0
Tolleson	55.1	12.2	28.6	4.1
Tonopah	61.5	7.7	15.4	15.4
Southwest Maricopa	55.1	14.4	26.6	3.9



Exhibit B-35

Q60. During the last 12 months have you delayed or gone without needed health care for him/her?

Q61. Did you delay or not get health care for him/her you couldn't get an appointment soon enough?

Q62. Did you delay or not get health care for him/her because the clinic or doctor's office was not open when you could get there?

AREA	HEALTH CARE (PERCENT)								
	Delayed or gone without health care in last 12 months ¹			Delayed because you could not get an appointment soon enough ¹			Delayed because clinic/doctor's office was not open ¹		
	Yes	No	Don't know	Yes	No	Don't know	Yes	No	Don't know
Avondale	9.4	86.3	2.2	14.1	81.0	0.0	9.7	84.7	0.7
Buckeye	13.6	81.8	4.5	37.5	58.3	4.2	4.3	91.3	4.3
Goodyear	15.8	78.9	3.5	11.5	85.2	1.6	9.8	86.9	1.6
Tolleson	10.0	96.0	98.0	19.6	76.5	0.0	11.8	84.3	3.9
Tonopah	16.7	76.7	3.3	12.9	83.9	0.0	12.9	80.6	3.2
Southwest Maricopa	11.4	84.2	2.2	16.2	79.8	0.3	10.4	85.1	0.9

¹ Percentages do not add up to 100, some choices were excluded.

Exhibit B-36

Q63. Did you delay or not get health care because you didn't have enough money to pay the health care provider?

Q64. Did you delay or not get health care because the type of care needed was not available in your area?

Q65. Did you delay or not get health care because the type of care was not covered by your health plan?

AREA	HEALTH CARE (PERCENT)								
	Health care delayed because you did not have enough money ¹			Health care delayed because type of care needed not available in area ¹			Health care delayed because type of care needed not covered by health plan ¹		
	Yes	No	Don't know	Yes	No	Don't know	Yes	No	Don't know
Avondale	11.8	84.0	4.2	9.2	85.9	0.0	12.6	83.2	0.7
Buckeye	17.4	78.3	4.3	13.0	82.6	4.3	17.4	78.3	0.0
Goodyear	13.1	82.0	3.3	4.9	91.8	1.6	9.8	85.2	3.3
Tolleson	13.7	82.4	3.9	5.9	90.2	3.9	19.6	76.5	0.0
Tonopah	22.6	74.2	3.2	6.7	90.0	0.0	16.1	77.4	0.0
Southwest Maricopa	13.7	82.3	0.6	7.7	88.3	0.3	13.8	81.6	1.2

¹ Percentages do not add up to 100, some choices were excluded.



Exhibit B-37

Q66. Did you delay or not get health care because you could not get approval from your health plan of doctor?

Q67. Did you delay or not get health care because you have language, communication, or cultural problems with the health care provider?

AREA	HEALTH CARE (PERCENT)					
	Health care delayed because could not get approval from health plan ¹			Health care delayed because language or cultural problems with provider ¹		
	Yes	No	Don't know	Yes	No	Don't know
Avondale	8.5	87.3	4.2	6.3	88.7	0.7
Buckeye	21.7	73.9	0.0	4.2	87.5	0.0
Goodyear	4.9	90.2	3.3	0.0	96.7	1.6
Tolleson	16.3	79.6	0.0	4.0	92.0	0.0
Tonopah	10.3	82.8	0.0	6.5	90.3	0.0
Southwest Maricopa	10.6	84.8	0.9	4.3	91.4	0.6

¹ Percentages do not add up to 100, some choices were excluded.

Exhibit B-38

Q68. Did you not provide prescribed medicine due to the cost of the medicine?

AREA	HEALTH CARE (PERCENT)		
	Medicine prescribed not provided due to cost of medicine		
	Yes	No	Don't know
Avondale	11.9	85.3	0.7
Buckeye	8.7	82.6	0.0
Goodyear	4.9	91.8	1.6
Tolleson	12.2	85.7	0.0
Tonopah	16.1	77.4	3.2
Southwest Maricopa	10.5	86.2	0.9

Percentages do not add up to 100, some choices were excluded.

Exhibit B-39

Q69. Has the medical provider been responsive to personal and cultural beliefs about your child's health?

Q70. Have your medical providers been willing/able to refer you to alternative medical services that are responsive to your beliefs and culture?



AREA	HEALTH CARE (PERCENT)					
	Medical provider responsive to personal and cultural beliefs about child's health ¹			Medical provider willing to refer you to alternative medical services responsive to your beliefs and culture ¹		
	Yes	No	Don't know	Yes	No	Don't know
Avondale	39.7	46.8	5.7	47.5	31.9	7.1
Buckeye	43.5	39.1	8.7	39.1	30.4	13.0
Goodyear	47.5	41.0	4.9	41.0	31.1	9.8
Tolleson	32.0	54.0	2.0	44.0	36.0	8.0
Tonopah	41.9	41.9	9.7	38.7	35.5	12.9
Southwest Maricopa	40.9	45.8	5.6	43.2	34.0	8.3

¹ Percentages do not add up to 100, some choices were excluded.

Exhibit B-40

Q71. Have translation services been available to you and your child if necessary?

AREA	TRANSLATION SERVICES AVAILABLE (PERCENT)		
	Yes	No	Don't Know
Avondale	55.3	19.9	6.4
Buckeye	39.1	21.7	4.3
Goodyear	41.7	16.7	10.0
Tolleson	56.0	18.0	6.0
Tonopah	58.1	22.6	0.0
Southwest Maricopa	50.2	21.1	6.2

¹ Percentages do not add up to 100, some choices were excluded.





APPENDIX C

Southwest Teacher/Caregiver Survey

Exhibit C-1

Q1. Which of the following best describes the center in which you are working?

AREA	CENTER DESCRIPTION (PERCENT)					
	Child Care Center	Child Care Group Home	Early Head Start/Head Start	Private School	Public Preschool	Other
Southwest Maricopa	17.5	2.5	52.5	20.0	5.0	2.5

In the Southwest Region 52.5% of early childhood educators work for Head Start, followed by 20% in private schools. The high percentage in Head Start could be contributed to the increase number of children 4 to 5 years who qualify to be in the program. Thus, the programs increasing the number of early childhood educators needed to accommodate the growth.

Exhibit C-2

Q2. How long have you been working for this particular center?

AREA	WORK LENGTH (PERCENT)				
	1-3 months	3-6 months	6-12 months	12-24 months	More than 24 months
Southwest Maricopa	9.8	2.4	22.0	9.8	56.1

The length of employment in early childcare is 56.1% meaning early childhood educators are staying employed at their current childcare center for more than 2 years. 2.4% (3-6 months) could be contributed to centers such as private schools or home childcare where there is a decrease in the number of children enrolled because of parent's affordability and/or location.

Exhibit C-3

Q3. How long have you been working as an early childhood educator?



AREA	ECE LENGTH (PERCENT)				
	1-3 months	3-6 months	6-12 months	12-24 months	More than 24 months
Southwest Maricopa	0.0	0.0	7.5	2.5	90.0

Early childhood educators reported 90% have been working for more than 2 years in their respected field while only 2.5% for 1 to 2 years. The high percentage in the length that an early childhood educator has worked could be contributed to the number of programs available such as TEACH.

Exhibit C-4

Q4. What is your highest level of education?

AREA	EDUCATIONAL LEVEL (PERCENT)					
	Master's Degree	Bachelor's Degree	Associates Degree	Child Devel Associate	High School Diploma	Less than High School
Southwest Maricopa	10.0	20.0	32.5	5.0	32.5	0.0

Exhibit C-5

Q5. Have you been enrolled in any type of formal early childhood training program in the last 18 months?

Q6. Have you had any formal training that focused on the care of children with disabilities and/or other special needs?

AREA	TRAINING (PERCENT)			
	Early Childhood Training		Disabilities Training	
	Yes	No	Yes	No
Southwest Maricopa	65.0	35.0	70.0	30.0

Exhibit C-6

Q7. How many hours of professional development were you offered last year?, Were you required last year?

AREA	PROFESSIONAL DEVELOPMENT (PERCENT)
------	------------------------------------



	Median number of hours offered	Median number of hours required
Southwest Maricopa	22	18

Exhibit C-7

Q8. What obstacles do you face when attempting to access professional development?

AREA	OBSTACLES FOR PROFESSIONAL DEVELOPMENT (PERCENT)							
	Transp	Time	Expenses	Lack of interest	Lack of employer support	Lack of family support	Poor Quality	Other
Southwest Maricopa	11.1	66.7	44.4	0.0	2.8	2.8	0.0	16.7

Exhibit C-8

Q9. What FTF Resources available to teachers/caregivers do you find the most valuable?

AREA	FTF RESOURCES RATED AS MOST VALUABLE (PERCENT)				
	Quality First	Scholarships TEACH	FTF Professional REWARD\$	Community Based PD	Scholarships non-TEACH
Southwest Maricopa	54.5	36.4	19.0	19.0	10.0

Exhibit C-9

Q10. What was your salary in the last year?

AREA	SALARY (PERCENT)			
	Less than \$15,000	\$15,000-\$25,000	\$25,000-\$35,000	More than \$30,000
Southwest Maricopa	32.4	32.4	10.8	24.3

Exhibit C-10

Q11. What employee benefits do you currently have?

AREA	EMPLOYEE BENEFITS (PERCENT)							
	Health	Life	Dental	Vision	Disability	Paid Vacation	Retirement	Other
Southwest Maricopa	47.1	55.9	58.8	29.4	26.5	38.2	38.2	14.7

Exhibit C-11

Q12. How satisfied are you with your current employment...?

CHARACTERISTIC	SATISFACTION (PERCENT)			
	Very Satisfied	Satisfied	Somewhat Satisfied	Not Satisfied
Wages	25.0	35.0	35.0	5.0
Location	26.8	22.0	24.4	26.8
Benefits	15.0	25.0	50.0	10.0
Schedule	22.5	25.0	35.0	17.5
Supervisor	30.0	12.5	27.5	30.0
Kids	27.5	20.0	20.0	32.5
Professional Development options	13.2	36.8	31.6	18.4

Exhibit C-12

Q13. If you left your job within the last two years, was it for...?

AREA	REASONS FOR LEAVING LAST JOB (PERCENT)						
	Better wages	Better schedule	Better location	Better benefits	Supervisor	Did not leave my job	Other
Southwest Maricopa	18.8	3.1	0.0	6.3	0.0	50.0	21.9

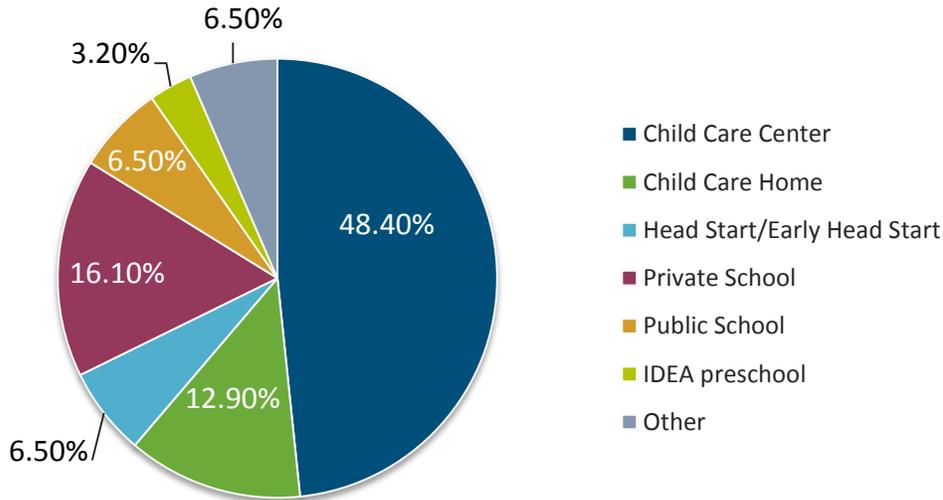


APPENDIX D

Southwest Early Childhood Education Centers Survey

Exhibit D-1

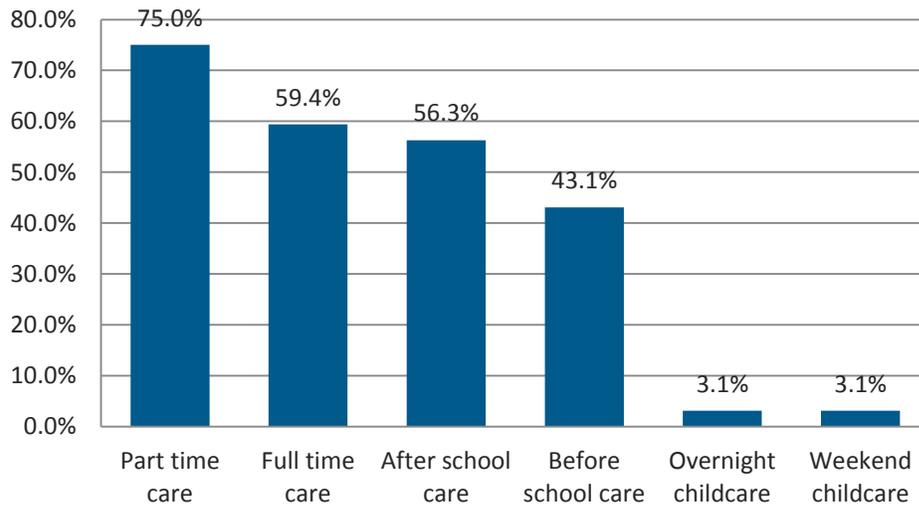
Type of centers



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-2

Type of care provided

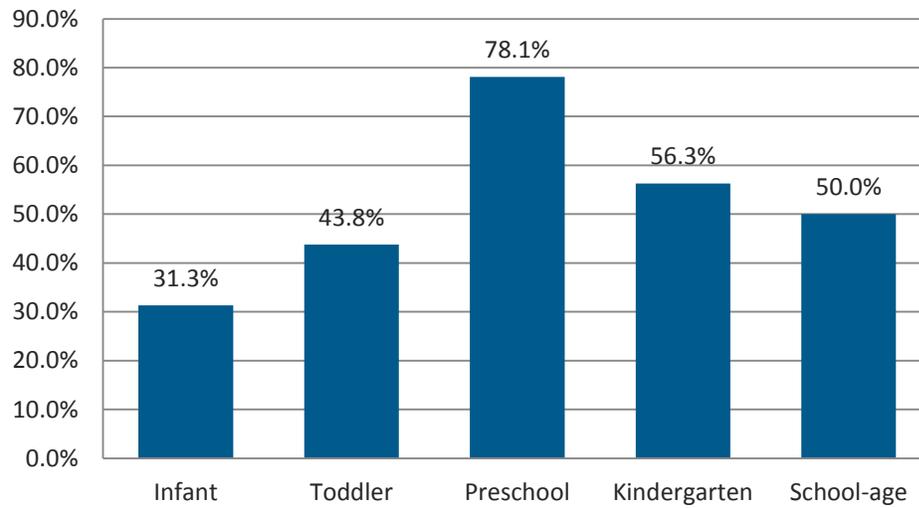


Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.



Exhibit D-3

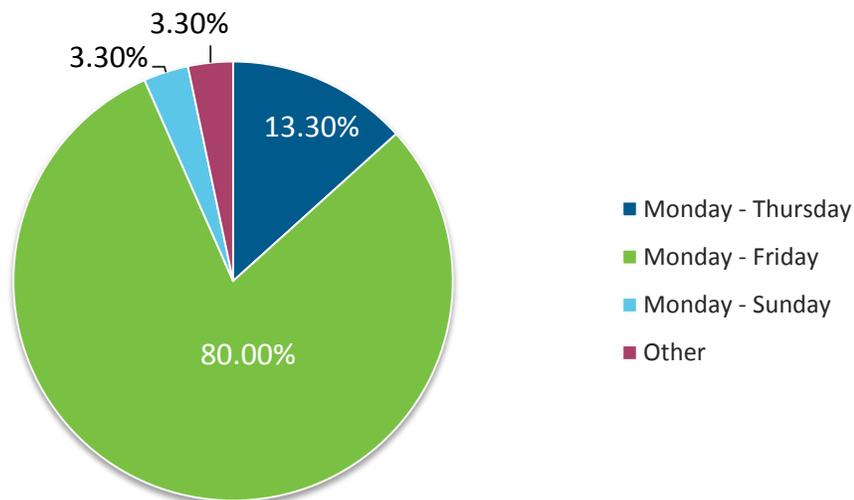
Age group served



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-4

Days of operation

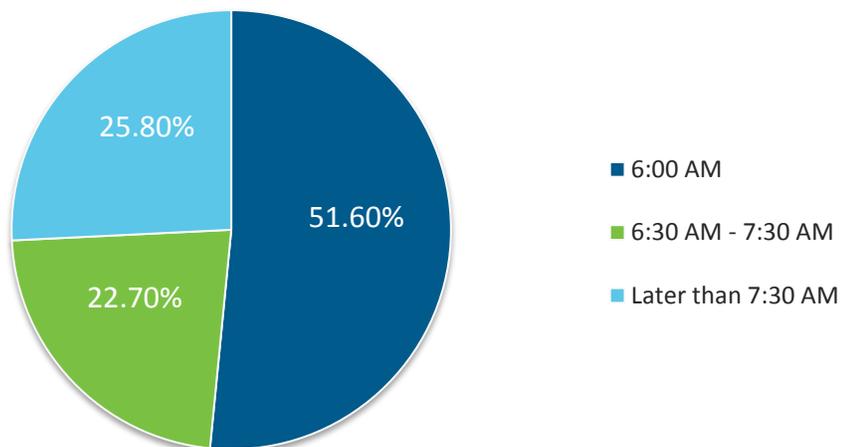


Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.



Exhibit D-5

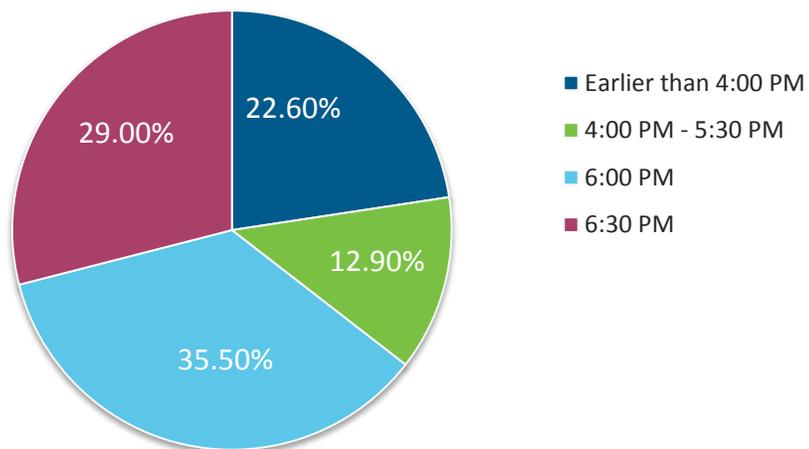
Hours of operation - opening



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

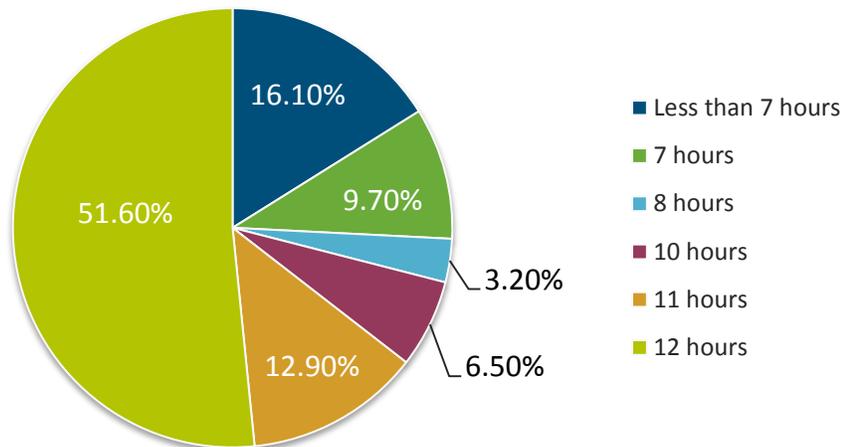
Exhibit D-6

Hours of operation - close

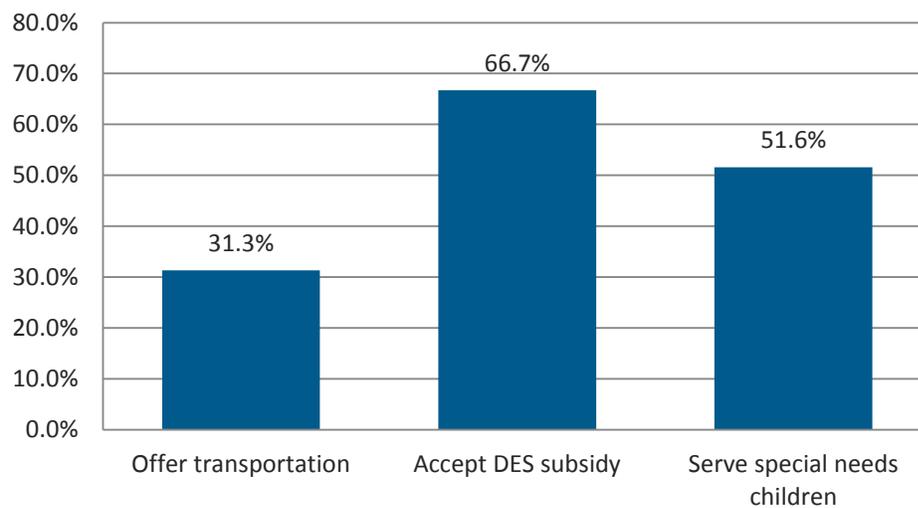


Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.



Exhibit D-7Business hours length

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-8Services

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.



Exhibit D-9

STATISTIC	CENTER'S CAPACITY
	Capacity
Mean	78.1
Median	47
Minimum	2
Maximum	236

Exhibit D-10

	MEDIAN NUMBER OF HOURS FULL TIME CARE
	Hours
Hours per day	8
Hours per week	39

Exhibit D-11

STATISTIC	BOOKS PER CLASS
	Number of books
Mean	65.5
Median	40
Minimum	2
Maximum	300

Exhibit D-12

AGE GROUP	CHILDREN ENROLLMENT		
	Median number of typical children	Median number of special needs children	Adult to child ratio ¹
Infant	5	0	1 : 5
Toddler	8	0	1 : 6
Preschool	28	1	1 : 13
Kindergarten/School-age	22.5	0	1 : 20

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

¹ Most frequent adult to child ratio reported.

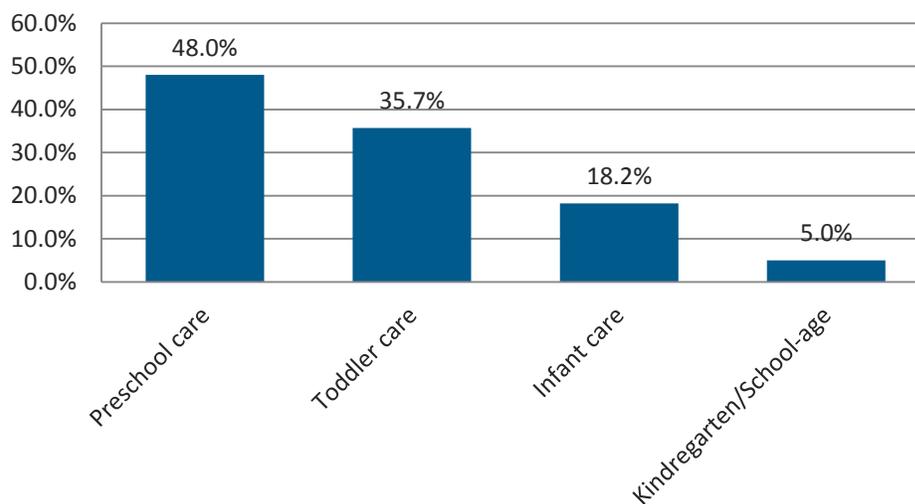
Exhibit D-13

AGE GROUP	CHILDREN ENROLLMENT	
	Median number of full time children	Median number of part time children
Infant	3	1
Toddler	6	3
Preschool	11	14.5
Kindergarten/School-age	5	25

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-14

Providers with waiting list



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-15

Average weekly charges

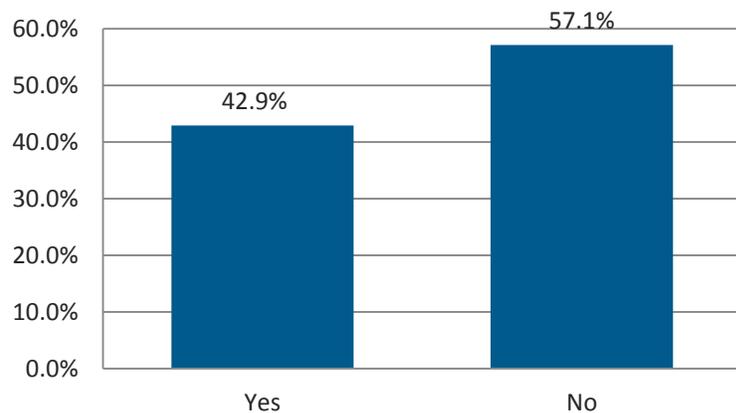
AGE GROUP	AVERAGE WEEKLY CHARGES	
	Full time care	Part time care
Infant	\$187.90	\$141.80
Toddler	\$161.50	\$118.96
Preschool	\$147.30	\$95.01
Kindergarten/School-age	\$122.70	\$83.70

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-16



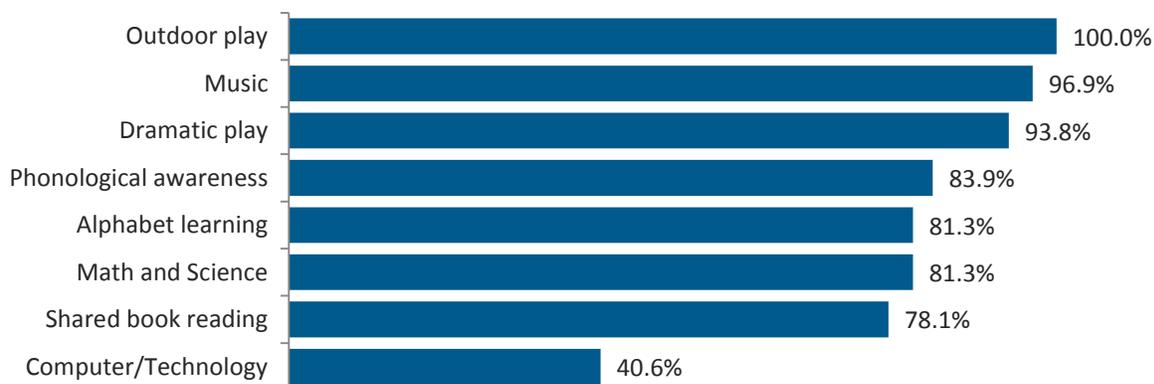
Core curriculum use



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-17

Activities provided by centers



Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-18



Frequency of screening for special needs

	SPECIAL NEEDS SCREENING FREQUENCY (PERCENT)				
	Never	Once a year	Twice a year	3-6 Times a year	More than 6 times a year
Percent	57.1	14.3	9.5	14.3	4.8

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-19

STATISTIC	CHILDREN SCREENED LAST YEAR
	Number of Children
Mean	25.08
Median	21.50
Minimum	0
Maximum	90

Exhibit D-20Safety education offered

	SAFETY EDUCATION OFFERED (PERCENT)				
	Latch Key	Pedestrian Safety	Stranger Danger	Gun Safety	Pool Safety
Child	4.5	57.7	78.6	16.0	46.4
Parent	0.0	21.7	25.0	4.0	23.1

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

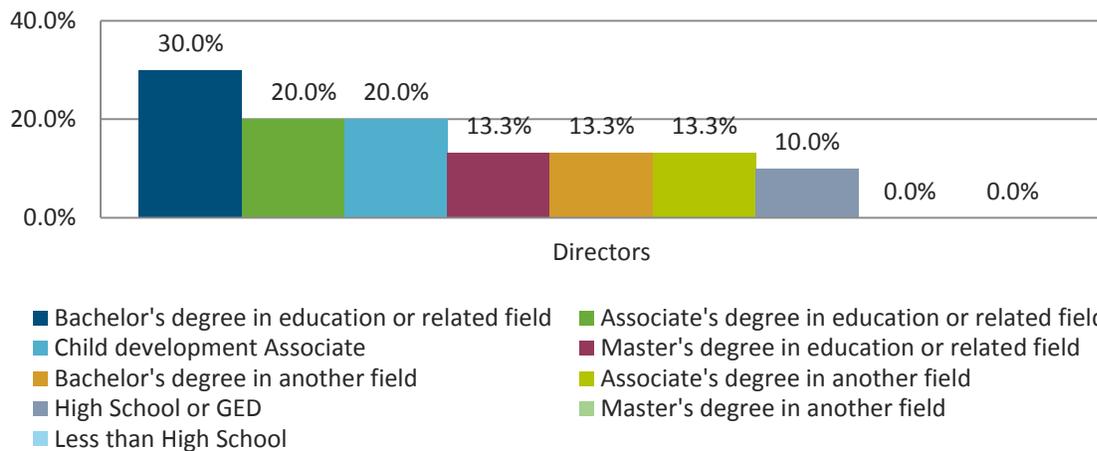
Exhibit D-21Staff Characteristics

	STAFF CHARACTERISTICS				
	Average number of staff	Left position in last 12 months (average)	Median Hourly wage	Percent of staff with salaried position	Median Annual salary
Director	1.15	0.2	\$17.2	65.6%	\$35,000
Teacher	4.23	1.0	\$10.2	27.3%	\$34,000
Teacher Assistants	4.83	1.88	\$9.0	5.6%	\$21,000
Teacher Aides	1.5	0.33	\$8.6	NA	NA

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.
 NA Indicates data were not available.

Exhibit D-22

Highest educational level Directors

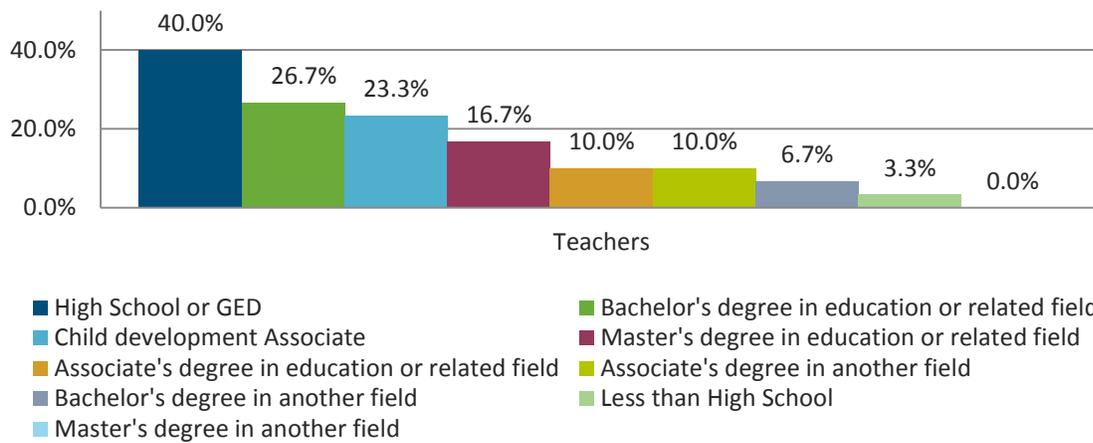


Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.
 Note: percentages do not add up to one hundred since centers have more than one person working in each position.

Exhibit D-23

Highest educational level Teachers





Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.
 Note: percentages do not add up to one hundred since centers have more than one person working in each position.

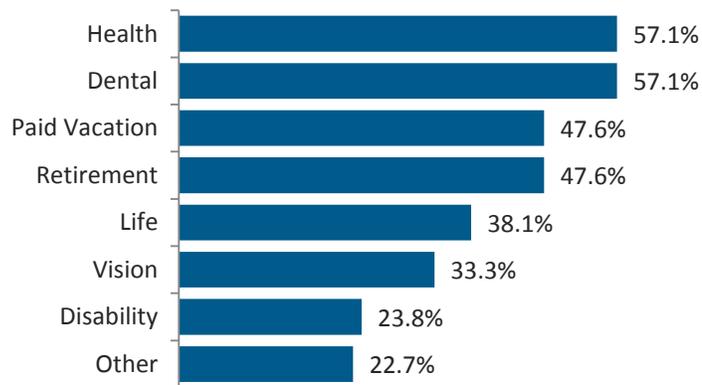
Exhibit D-24

STATISTIC	LENGTH OF EMPLOYMENT (MONTHS)
	Number of months
Mean	33
Median	36
Minimum	6
Maximum	72

Exhibit D-25

Benefits provided by employer





Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-26

Minimum qualifications required

POSITION	MINIMUM QUALIFICATIONS REQUIRED (PERCENT)			
	BA	AA	CDA	HSD
Director	23.5	35.3	17.6	23.5
Teacher	15.4	19.2	7.7	57.7
Teacher Assistants	4.2	16.7	79.2	79.2
Teacher Aides	0.0	0.0	14.3	85.7

Source: Southwest ECE Centers Survey conducted by Southwest Institute for Families and Children.

Exhibit D-27

	PROFESSIONAL DEVELOPMENT (PERCENT)		
	Median number of hours offered	Median number of hours required	Are any currently enrolled in any type of formal training?
	18	18	44.8



APPENDIX E

Exhibit E-1

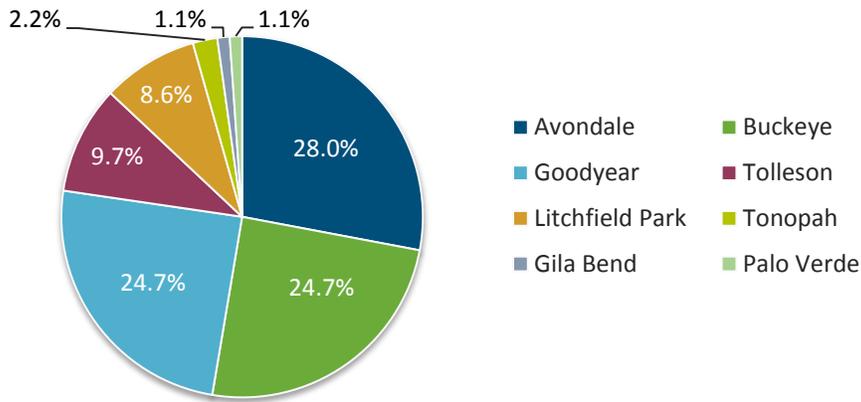
Scientifically Based Pre-Reading Skills

SKILL	SCIENTIFICALLY BASED PRE-READING SKILLS (NELP, 2008)
	Research Base
Alphabet knowledge	Knowledge of the names and sounds associated printed letters is a strong predictor of reading success (NELP, 2008). Alphabet knowledge is a prerequisite for developing phonics as preschoolers use letter names to access letter sounds and word pronunciations (Treiman & Rodriguez, 1999). Alphabet knowledge can be increased via direct, systematic “code focused” instruction (NELP, 2008).
Phonological awareness (PA)	PA is the ability to detect, analyze, and manipulate the sounds of spoken language. Decades of convergent research have established that is a critical precursor and predictor of reading achievement (Carnine, Silbert, Kame'enui, & Tarver, 2004; NELP, 2008). PA development is strengthened by recitations and playing with sound units and explicit, code-focused: instruction is also required (NELP, 2008; National Reading Panel, 2000; Snow et al., 1998).
Rapid Automatic Naming (RAN)	RAN is hypothesized to be related to early reading acquisition and dyslexia (Dencla & Rudel, 1976), Much interest in the relationship between processing speed and phonological awareness has arisen from neuroscience and indicates that RAN is highly predictive of early reading (Wolf & Bowers, 1999); however, later relationships and remediation strategies remain unclear (Meyer, Wood, Hart, & Felton, 1998)
Writing/Writing name	Writing manuscript letters is an important part of learning letter names and in preventing later writing disabilities in young children (Schlagal, 2007). Writing letters using explicit instruction, guided practice, dictation, shared and interactive writing (Stachoviak, 1996; McCarrier, Fountas, & Pinnell, 2000).
Phonological memory	The phonological component of short-term memory is closely associated with the acquisition of language during childhood (Baddeley, 1986). Adequate temporary storage of the phonological structure of new words is an important prerequisite for fast learning of the sound structure of the language studies of normal children and children with developmental language disorders (Baddeley, Gathercole, & Papagno, 1998).
Print awareness	Print knowledge of purposes and conventions of print is also a predictor of later reading achievement (Snow et al., 1998; Westberg, Lonigan, & Molfese, 2006). Interactive storybook reading and shared writing are effective strategy for promoting this skill (McGee, 2007; NELP, 2008; Snow et al., 1998).
Oral language	Research has shown that oral vocabulary is a strong predictor of elementary-grade reading comprehension (Dickinson & Tabors, 2001) and that strength of this relationship increases progressively from grade 1 to grade 7 (Snow, 2002). Other aspects of young children’s oral language, including listening comprehension and grammar, also have important roles in later literacy achievement (NELP, 2008). Language-enhancement programs have been shown to promote early literacy development (NELP, 2008).

Exhibit E-2

Southwest Maricopa Licensed Care Allocation by City





Source: Arizona Department of Economic Security.

Exhibit E-3

Child Care Income Eligibility and Fees

FAMILY SIZE	CHILD CARE ASSISTANCE ELEGIBILITY AND FEES					
	Level 1 Maximum income equal or less than 85% FPL*	Level 2 Maximum income equal or less than 100% FPL*	Level 3 Maximum income equal or less than 135% FPL*	Level 4 Maximum income equal or less than 145% FPL*	Level 5 Maximum income equal or less than 155% FPL*	Level 6 Maximum income equal or less than 165% FPL*
1	0-772	773-908	909-1,226	1,227-1,317	1,318-1,408	1,409-1,499
2	0-1,043	1,044-1,226	1,227-1,656	1,657-1,778	1,779-1,901	1,902-2,023
3	0-1,314	1,315-1,545	1,546-2,086	2,087-2,241	2,242-2,395	2,396-2,550
4	0-1,584	1,585-1,863	1,864-2,516	2,517-2,702	2,703-2,888	2,889-3,074
5	0-1,854	1,855-2,181	2,182-2,945	2,946-3,163	3,164-3,381	3,382-3,599
6	0-2,125	2,126-2,500	2,501-3,375	3,376-3,625	3,626-3,875	3,876-4,125
7	0-2,396	2,397-2,818	2,819-3,805	3,806-4,087	4,088-4,368	4,369-4,650
Copay Full Day	\$1.0	\$2.0	\$3.0	\$5.0	\$7.0	\$10.0
Copay Part Day	\$0.5	\$1.0	\$1.5	\$2.5	\$3.5	\$5.0

Source: Child Care and Development Fund Plan for Arizona FFY 2012-2013

Exhibit E-4

Amount Paid by the State of Arizona for Child Care Assistance 2007-2008



ZIP CODE	CHILD CARE ASSISTANCE DISBURSED BY THE STATE		
	Number of providers	Number of Children	Total Paid
85309	1	< 25	\$12,939.07
85323	58	1,298	\$2,485,574.73
85326	36	337	\$423,096.89
85327	1	< 25	\$1,122.05
85329	2	< 25	\$11,683.52
85337	1	< 25	\$3,830.74
85338	32	543	\$811,955.43
85340	9	42	\$37,615.11
85353	24	217	\$272,445.00
85354	4	< 25	\$7,895.15
85392	8	174	\$232,868.24
85395	2	103	\$54,471.08
85396	3	< 25	\$2,989.95
Southwest Maricopa	181	2753	\$4,358,486.96

Source: Department of Economic Security, unpublished data provided by FTF (< 25 = less than 25 cases).



APPENDIX F

Focus Group Questions

1. Do you feel that there are adequate resources provided to the African American community in the SW region?
2. In your experience what if any obstacles do African Americans face when trying to obtain services within your community?
3. What community resources have you used within the past 6 months?
4. How have these resources helped your family?
5. Were the services delivered in a way that is responsive to the unique needs of your community?
6. What other resources are needed or may be beneficial to your community?
7. Do you feel the recent Economic recession and legislation changes have impacted early childhood education in your community?
8. What is the one recommendation for children's services that you would make to your First Things First Regional Partnership Council?

SB1070 Questions

1. Do you feel SB 1070 has impacted your community?
2. Do you feel SB 1070 has limited services available in your community?

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