



ANNUAL REPORT



2016



 FIRST THINGS FIRST

# FULFILLING OUR COMMITMENT TO ARIZONA'S YOUNGEST KIDS

Dear Fellow Arizonans:

A citizen's initiative established First Things First to provide consistent support for early childhood education and health programs that help young children arrive at school healthy and prepared to succeed.

This action was based on decades of research that demonstrates that children with access to high quality early development and health opportunities are more prepared for kindergarten, do better in school, and are more likely to graduate and enroll in college. They also tend to be healthier and more productive members of society.

Voters established First Things First to be community-driven, research-based, and accountable for improving outcomes for children and families. This year's report provides comprehensive information on the needs of young children, the early childhood programs funded by First Things First, and most importantly, improvements achieved in the education and health of Arizona's youngest children as a result of those programs. The robust information contained within these pages reflects not only the return on Arizona's early childhood investment, but also the Board's on-going commitment to accountability and transparency in all that we do. This report includes:

- Information about the number of children impacted in the last year alone by FTF's support for programs that strengthen families, improve the quality early learning, and expand access to preventive health.
- Details on studies that show long-term improvement in various aspects of early childhood, including a 40% increase in the number of child care and preschool providers who meet quality standards and an 8% decrease in kindergarteners with tooth decay (a leading cause of school absence later on).
- And, information -not only on which programs FTF has invested in - but also how the FTF Board has strategically planned to ensure that these impactful programs are able to continue despite ongoing decreases in tobacco revenue.

While we are very proud of these successes, we are also aware that too many children in our communities continue to face significant challenges in having the nurturing environments that support their optimal health and learning. The First Things First Board, regional partnership councils, and our staff are committed to continuing our work with families, early childhood stakeholders, policymakers, business leaders and faith communities to ensure that every child in Arizona has the opportunity to start kindergarten healthy and ready to succeed!

Sincerely,



**NADINE MATHIS BASHA**

Board Chair

A handwritten signature in black ink that reads "Nadine Mathis Basha".



**SAM LEYVAS**

Chief Executive Officer

A handwritten signature in black ink that reads "Sam Leyvas".

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## THE STATE OF ARIZONA'S YOUNG CHILDREN

A child's early years hold the key to their success – and our state's. Children who are healthy and prepared when they enter kindergarten have better language, math and social skills, are less likely to need special education, and are more likely to read at grade level by third grade. They also are more likely to graduate and enroll in college. Well-educated adults are more prepared for the job opportunities of a global marketplace and to contribute to the strength of their communities. Many of Arizona's young children face significant challenges when it comes to stable, nurturing environments and high quality early learning experiences that will put them on a trajectory for success in kindergarten and beyond.

**What follows are state-national comparisons in three key areas – Strong Families; Healthy Kids; and, Educated Young Students – followed by more detailed data regarding the environments in which Arizona's young children live, learn and grow.**

Recognizing that early experiences lay the foundation for success in school and in life, Arizonans set aside state funds for early childhood programs. They created First Things First (the Arizona Early Childhood Development and Health Board) to oversee that investment and give communities a voice when it came to programs that would benefit children birth to 5 in their area.

This report details much progress that has been made in expanding or enhancing early childhood education

and health programs, and how those investments have improved outcomes for Arizona's youngest children. These data also remind us that all early childhood stakeholders – including families, educators, service providers, community leaders and policymakers – must work together to leverage these successes and maximize resources so that every child in Arizona has the opportunity to start kindergarten healthy and ready to succeed.

## THE BIG PICTURE FOR ARIZONA'S LITTLE KIDS

### WHAT FOLLOWS ARE STATE-NATIONAL COMPARISONS IN THREE KEY AREAS <sup>1</sup>



#### Strong Families



#### Healthy Kids



#### Educated Young Students

For more information visit  
[azftf.gov/big-picture](http://azftf.gov/big-picture)

– and how First Thing First, as a critical partner in Arizona's early childhood system, is doing its part to expand opportunities in each of those three areas for children to develop the tools they need to be ready for school and set for life. Along with other community data, this information can be used as a starting point for discussions with early childhood stakeholders – including educators, service providers, community leaders and families – on how to maximize the resources in their area and yield the most positive outcomes for Arizona's youngest children.

# STRONG FAMILIES

Family stability can affect the resources a child has that either support or restrict their optimal development. Poverty and its effects – including unreliable access to food, housing and child care – can impact a child’s physical and emotional development.

The number of young children in Arizona grew much faster between 2000 and 2010 than in the nation as a whole.

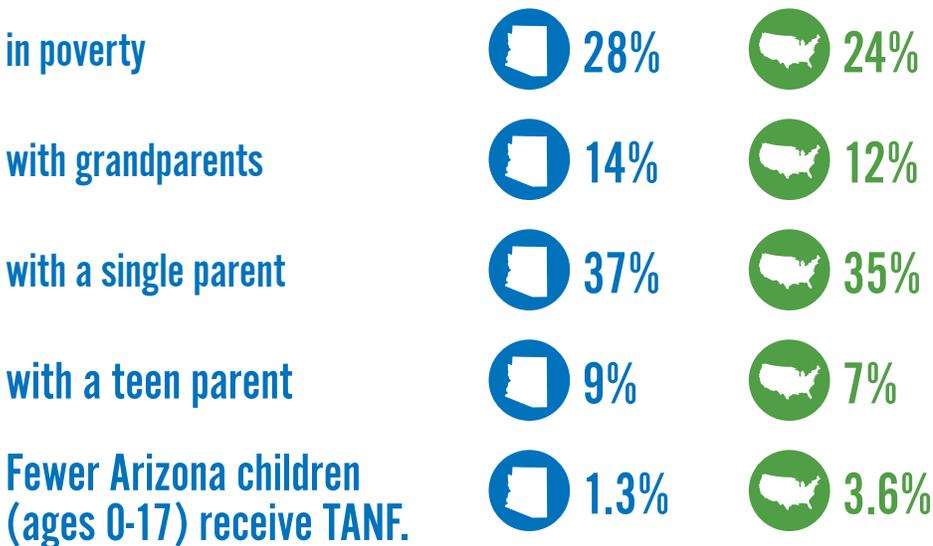


The percentage of households with young children in Arizona is about the same as in the U.S.



Arizona’s young children are more likely than their peers nationally to be born into challenging situations like poverty and being raised by single parents, teenage parents or grandparents. They also are less likely to receive the supports that can help mitigate the effects of poverty on their overall well-being. Compared to the U.S. as a whole:

## MORE YOUNG CHILDREN IN AZ LIVE



First Things First helps strengthen families by giving parents options when it comes to fulfilling their role as their child’s first teachers, including kits for families of newborns with resources to support their child’s health and learning, community-based parenting education, voluntary home-based coaching for families with multiple challenges, support for families of children with special needs, and referrals to existing programs that meet the family’s specific challenges.

# HEALTHY KIDS

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Children's health encompasses not only their physical health, but also their mental, intellectual, social and emotional well-being. Factors such as a mother's prenatal care, access to health care and health insurance, and receipt of preventive care such as immunizations and oral health care all influence a child's current health and also their long-term development and success.

Arizona's babies are born healthier than their peers nationally, which is encouraging.

## FEWER AZ BABIES ARE BORN



Yet, too many children lack the necessary immunizations before they enter school, and many lack access to care to prevent dental problems – a key cause of school absenteeism later on.

## MORE YOUNG CHILDREN IN AZ



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First Things First supports healthier kids by supporting pregnant mothers; giving parents tools to promote good nutrition and healthy weight; expanding access to oral health screenings and preventive fluoride varnishes; building awareness of health insurance options available for families with children; helping early educators meet the social-emotional needs of kids in their care; and, improving health practices in home- and center-based child care settings.

# EDUCATING YOUNG STUDENTS

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The quality of a child's early experiences impacts whether their brain will develop in ways that promote optimal learning. Research has demonstrated that children with access to quality early learning environments are more prepared for kindergarten: they have increased vocabulary, better language, math and social skills, have more positive relationships with classmates, and score higher on school-readiness assessments. They are less likely to need special education services or be held back a grade, and are more likely to graduate and go on to college.

Compared to the U.S. as a whole:

## Far fewer of AZ's 3- and 4-year-olds attend preschool.



Healthy development is important for school readiness. Early identification of developmental delays – through regular screenings starting at birth – is a critical first step to ensuring that children receive the intervention and support that can mitigate the impact of delays on future learning.

## Fewer of AZ's young children received developmental or sensory screenings.



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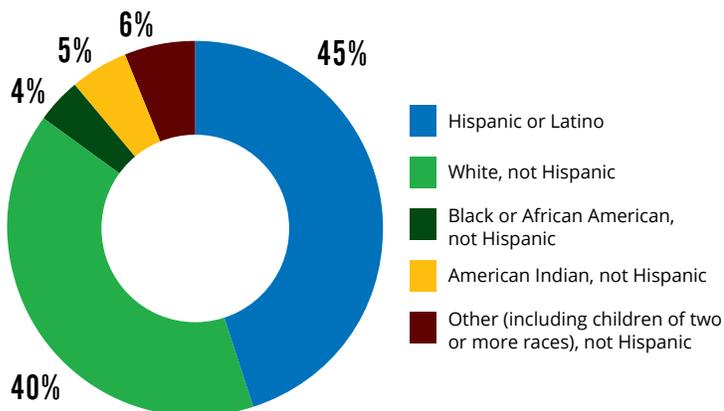
First Things First promotes early learning by: completing more than 31,000 screenings to detect developmental or sensory issues that can become learning problems later on; working with almost 1,000 child care and preschool providers statewide to enhance the quality of early learning programs for more than 50,000 young children; funding scholarships that helped more than 16,600 children access early learning in the past year; working with relatives and friends who provide child care to increase their knowledge of brain development and how young children learn; and helping early educators expand their skills working with infants, toddlers and preschoolers.

# A SNAPSHOT OF ARIZONA'S CHILDREN<sup>1</sup>

## Demographics

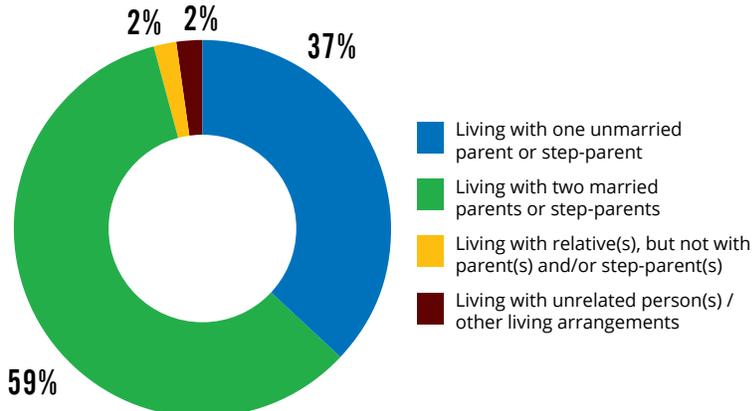
**546,609** Number of kids under 6 in Arizona

Ethnic breakdown of kids under 6



**384,441** Households with kids under 6

Living arrangements of kids under 6



## Education

**65%** Percentage of 3-4 year-olds who don't go to preschool

**22%** Percent of 3rd grade students not passing AIMS in reading (2014)

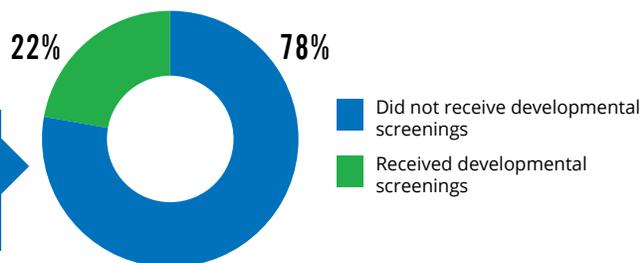
**25%** Percentage of teens who don't graduate high school in four years

Children ages 10 months to 5 years who received developmental screenings during a health care visit (2011-2012)

## Health

**9%** Babies born to teen mothers

**7,050** Number of children birth to 5 entering out of home care



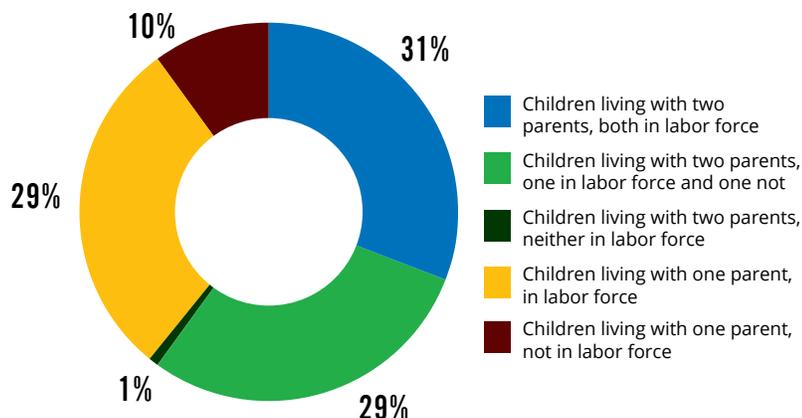
## Economics

**28%** Percentage of young kids in poverty

Median annual income for families with at least one child birth to age 17, by family type

|                                    |          |
|------------------------------------|----------|
| Married-couple families            | \$72,700 |
| Families headed by a single male   | \$36,700 |
| Families headed by a single female | \$26,100 |

Employment status of parents with young kids



# ABOUT FIRST THINGS FIRST

## Our Vision

All Arizona children are ready to succeed in school and in life.

## Our Mission

First Things First is one of the critical partners in creating a family-centered, comprehensive, collaborative and high-quality early childhood system that supports the development, health and early education of all Arizona children birth through age 5.

## Our Priorities

### Quality Child Care and Preschool

Children exposed to high quality early learning do better in school and are more likely to graduate. FTF funds researched-based quality improvements that help children thrive, including learning environments rich in language and literacy, coaching for early learning professionals to better engage young learners, and developmentally appropriate learning materials. Scholarships also are funded to help more infants, toddlers and preschoolers access quality early care and learning.

### Strengthening Families and Early Literacy

Families are a child's first and best teachers. FTF programs give parents options when it comes to supporting their child's health and learning. Services are voluntary and provided at levels that meet the family's needs, from community-based parenting education to in-home coaching to address tough situations like parenting a child with special needs or dealing with multiple births.

### Preventive Health

Undetected or untreated health issues can impact learning later on. Left unaddressed, developmental delays and chronic medical conditions can become serious learning problems that require more costly interventions. FTF funds preventive developmental and sensory screenings, parent education and referrals to existing services to ensure that kids arrive at kindergarten healthy and ready to succeed.

### Teacher and Workforce Training and Development

A child's relationships with early caregivers impact

whether her brain will develop in ways that promote learning. Children 5 and younger learn differently than school-age children. The quality of early learning depends on the education and skills of the teacher. FTF funds scholarships and training to expand the skills of professionals working with infants, toddlers, and preschoolers.

### System Coordination

Collaboration among system partners maximizes resources and effectiveness. FTF works with early childhood system partners – like the child welfare system and juvenile courts – to maximize funding, reduce duplication, and ultimately improve outcomes for young children.

### Parent and Community Engagement

We all have a shared responsibility to help children arrive at school prepared to succeed. FTF works with families, caregivers, and community leaders to build awareness of the importance of early childhood and steps they can take to support the education and health of young children in their communities.

### Research and Accountability

Measuring effectiveness and promoting continuous quality improvement rely on robust, accurate data. Data collected by FTF are used to inform decision-making, monitor grantee performance, enhance program effectiveness and measure improved outcomes resulting from the collective investments of Arizona's early childhood system.

# THE IMPACT OF ARIZONA'S EARLY CHILDHOOD INVESTMENT

Evaluation and research have been a critical component of First Things First since its inception. FTF strives for transparency and holds itself, and its collaborations with partners, accountable for achieving intended outcomes for children, families and the early childhood system. Additionally, high-quality information for decision-making increases the effectiveness of planning and improves the implementation and potential impact of programs.

In January 2012, First Things First convened the Early Childhood Research and Evaluation National Advisory Panel (Panel) to provide recommendations to the First Things First Board on developing a comprehensive statewide and regional research and evaluation framework. Panel members' expertise included evaluation design and methodology, early childhood development and education, placed-based systems level evaluation, school readiness, state prekindergarten evaluation, special needs, and health. Additionally, Arizona early education experts participated to ensure that a unique state-specific perspective was included.

The Panel engaged in extensive discussion and worked collaboratively with First Things First to define an overarching, long-term approach to research and evaluation. First Things First programming is implemented in the context of a diverse and comprehensive early childhood system. As such, the Panel recommended that First Things First research and evaluation should constitute a family of studies that reflect this same complexity and flexibility.

The Panel recommended a long-term vision that includes funding of early childhood strategies that already have a significant research or evidence base, capacity-building, data collection and analysis, and strategy-specific research and evaluation to support ongoing program implementation and improvement.

## **ALIGNED WITH THAT FRAMEWORK, THE FOLLOWING PAGES DEMONSTRATE THE IMPACT OF EARLY CHILDHOOD INVESTMENTS ON ARIZONA'S YOUNG CHILDREN, THEIR FAMILIES, AND THE EARLY CHILDHOOD SYSTEM DURING FISCAL YEAR 2016 (FY16), IN SEVERAL AREAS, INCLUDING:**

- Improving the quality of early learning programs;
- Expanding young children's access to high quality child care and preschool;
- Building capacity among early childhood professionals to meet the social-emotional needs of young children in their care;
- Improving pediatric oral health;
- Strengthening families in their role as their child's first teacher;
- Reducing recurrence of abuse for infants and toddlers in the child welfare system, and decreasing the amount of time it takes for young children to find safe, permanent homes;
- Promoting community collaborations to enhance early literacy; and,
- Expanding early childhood development and health information available to new parents.

These successes have been achieved through early childhood investments, as well as coordination and collaboration with families, partner agencies, grantees, community partners and other early childhood stakeholders statewide. They demonstrate the progress made in First Things First's efforts to fulfill Arizona's commitment to our youngest children.

# FISCAL YEAR 2016 – IMPACT AT-A-GLANCE

## STRENGTHENING FAMILIES AND EARLY LITERACY

34,812

Parents and caregivers attended parenting workshops or groups at family resource centers. In addition, more than 232,000 accessed early childhood information, resources or referrals through the centers.

72,058

Families of newborns left the hospital with tools to help them support their child's health and learning.

6,121

Families received voluntary, evidence-based home visitation from trained providers to enhance their parenting skills and deal with specific challenges, including first-time parenting, parenting a child with special needs or dealing with multiple births.

3,711

Parents and other caregivers completed a voluntary series of community-based classes on topics like parenting skills, brain development, early literacy and nutrition.

## QUALITY PRESCHOOL AND CHILD CARE

51,069

Children had access to a higher standard of early learning through preschool and child care programs participating in Quality First.

9,250

Infants, toddlers, and preschoolers accessed high quality early learning with the help of a preschool or child care scholarship.

812

Early childhood educators expanded their skills to provide better quality education and developmental supports for infants, toddlers and preschoolers with the help of a college scholarship.

## PREVENTIVE HEALTH

27,376

Children received screenings to detect vision, hearing, and developmental issues to prevent learning challenges later on.

457

Children received referrals for mental health services as a result of classroom consultation provided to early educators on meeting the social-emotional needs of children in their care.

48,480

Children received an oral health screening to detect tooth decay. In addition, 41,805 fluoride varnishes were applied to protect against dental decay.

# IMPROVING QUALITY IN EARLY CHILDHOOD LEARNING PROGRAMS: ARIZONA'S QUALITY IMPROVEMENT AND RATING SYSTEM

Every young child in Arizona deserves a high-quality early learning experience. In the first five years of life, quality early learning plays a critical role in the social, emotional, cognitive and physical development of children. Neuroscientists, economists and educators agree: early care and education pays dividends as children enter kindergarten; and it continues to serve them as they move through elementary school, transition into college and career, and become citizens in their communities.

Science tells us that 90 percent of a child's brain development occurs before they reach kindergarten.<sup>2</sup> So, the quality of early learning can have a profound effect during the first five years of life. Longitudinal studies, spanning more than 40 years, demonstrate that quality care and education from birth through age 5 results in higher IQ scores, higher school graduation rates and lower crime rates.<sup>3,4</sup> Young children with high-quality experiences have been shown to have increased vocabulary, better language, math and social skills, more positive relationships with classmates, and higher scores on school-readiness assessments. In short, these children are better prepared for school.<sup>5,6</sup>

Nationally, all 50 states are in some stage of implementing quality improvement and rating systems for their early child care and preschool providers: to create a unified, measurable standard of care, and inform parents on their local providers' proximity to that standard. Quality Improvement and Rating Systems (QIRS) are designed to assess, improve, and communicate the level of quality in early and school-age care and education programs. Quality First,

Arizona's quality improvement system, was established in response to this educational reform effort to improve quality and promote school readiness.

High quality early childhood programs are defined by several characteristics: skilled teachers that know how to engage young learners; indoor and outdoor environments that are safe, child-centered, stimulating and well-stocked with materials; predictable and balanced daily schedules and routines; evidence-based, culturally responsive curriculum; supportive assessments of each child's progress; and ample opportunities for family involvement in their child's education.

The Quality First Rating Scale, which measures quality on a 5-star scale, incorporates evidence-based predictors that lead to positive child outcomes. The scale ranges from a 1-star rating – where the provider demonstrates a commitment to examine practices and improve the quality of care beyond basic health and safety requirements – to a maximum rating of 5-stars, where providers offer lower ratios/group size, higher staff qualifications that support significant positive outcomes for young children, curriculum that aligns with state standards and child assessment, and nurturing relationships between adults and children that promote emotional, social and academic development.

The child care options currently available in Arizona's communities can contain vast differences as to the quality of care and education provided. This puts a substantial burden on families, who must find and accurately assess prospective providers to find good care for their children, at an affordable price. But even the concept of "good" remains vague without an accepted standard of quality. Arizona's current licensing regulations ensure basic health and safety requirements. But they do not address higher standard issues such as an optimal adult- child ratio, group size, well-qualified personnel, and strong curriculum and instruction.

That is why First Things First created Quality First - Arizona's Quality Improvement and Rating System - to create a unified, measurable standard of care, inform parents on their local providers' proximity to that standard, improve quality and promote school readiness.

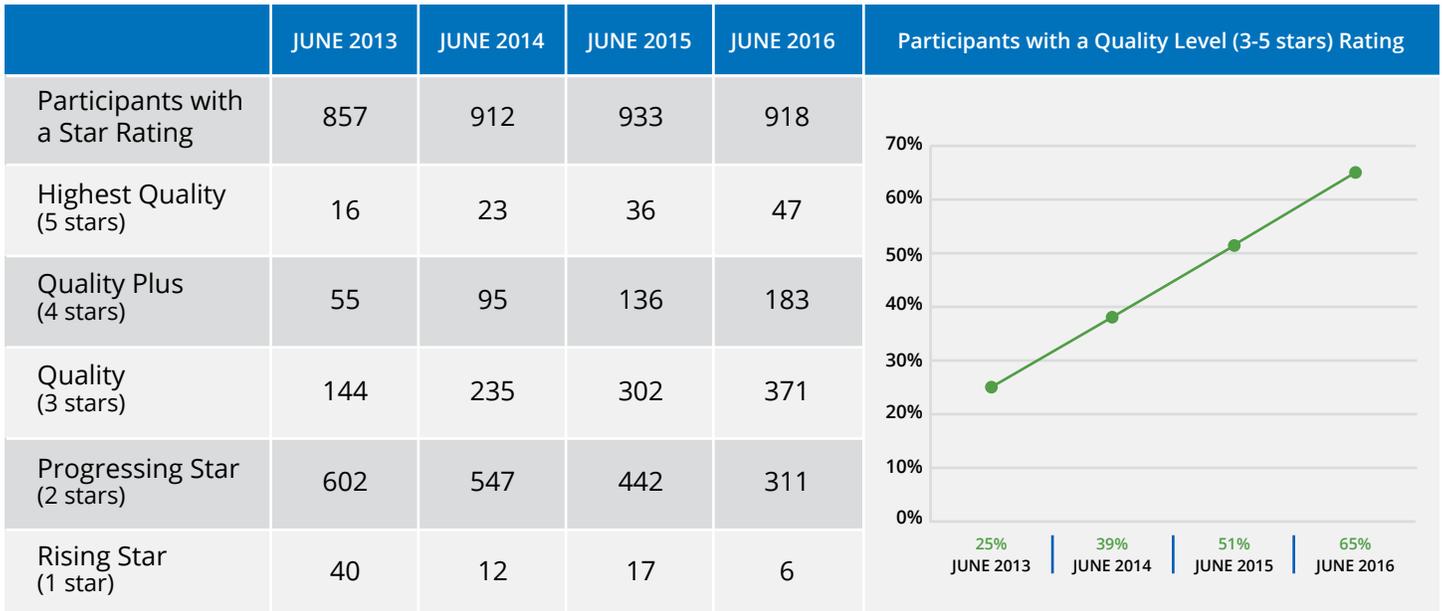
Early learning providers regulated by the state, tribal governments or the Department of Defense who voluntarily apply for and enroll in Quality First receive supports to improve and maintain the quality of their programs. These supports can include: individualized coaching and specifically targeted technical assistance, incentive grants, and professional development scholarships.

## QUALITY FIRST HAS SIGNIFICANTLY IMPROVED EARLY LEARNING THROUGHOUT ARIZONA

The latest data indicate that Quality First has significantly improved the quality of early learning options available to Arizona's families (See Figure 1). In fiscal year 2013, 25% of 857 participating providers met quality standards. Over the past three years, both enrollment and quality improvement have improved. In fiscal year 2016, 65% percent of 918 participating providers met or exceeded quality standards. When combined with providers who continue to work diligently on enhancing the quality of their child care and preschool programs, Quality First has ensured that more than 51,069 children throughout the state have access to a higher standard of early education.

The quality of early learning has improved regardless of the type of program participating in Quality First: center-based and home-based programs, as well as faith-based, non-profit and for-profit providers. In addition, Quality First is enhancing early learning opportunities throughout the state. Twenty-seven regional councils throughout Arizona invest in Quality First, making it the largest early childhood system initiative funded through First Things First. Coaches and consultants working with Quality First recognize the unique challenges early learning providers face in the diverse parts of our state, and can tailor their support for quality improvement accordingly. As a result, Quality First has been able to enhance the quality of child care and preschool in metropolitan, rural and tribal regions of Arizona. The appendix demonstrates quality improvement region-by-region.

**Figure 1. Quality Improvement and Rating System Progress and Outcomes**



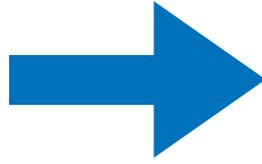
## MORE INFANTS, TODDLERS AND PRESCHOOLERS ACCESSED QUALITY EARLY LEARNING THROUGH FIRST THINGS FIRST

First Things First also prioritizes access to quality early learning programs by funding Quality First scholarships.. The intent of this evidence-based strategy is to provide financial assistance in the form of scholarships for children from low-income families (200% of Federal Poverty Level and below) to attend quality early care and education programs. The intended outcome for children and families is increased access for families to quality early care and education settings that promote readiness for kindergarten.

Access to quality early care and education programs can result in social, developmental and health benefits to young children that help to prepare them for later success in school and in life. Where families choose out-of-home settings, stable and high quality early care and learning experiences help young children develop strong attachments to caregivers and teachers, in addition to their parents. These attachments set the stage for future relationships throughout a child’s life. Scholarships support continuity of care for children so that previously formed supportive relationships with caregivers can remain in place.

In FY2016, Quality First scholarships helped

9,250



infants, toddlers and preschoolers throughout Arizona access a higher standard of early learning.

## INTER-AGENCY COLLABORATION EXPANDS QUALITY EARLY LEARNING OPTIONS IN HIGH-NEEDS COMMUNITIES

Quality First has improved early learning for children statewide, and the program continues to grow. In fiscal year 2015, Arizona was one of five states that received a federal Preschool Development Block Grant totaling \$80 million over FFY2017-2020. The goals of the grant are to expand quality preschool in underserved areas; implement state-level infrastructure and quality improvements; ensure strong partnerships between school districts and other early learning providers; align preschool programs with a birth through third grade continuum of services; and, create sustainable programs by coordinating existing early childhood funds. Through a partnership with the Arizona Department of Education, First Things First includes the new preschool development sites in Quality First, giving those programs access to resources that will: ensure their settings are rich in language and literacy opportunities; expand teachers' skills in working with young learners; enhance the programs' ability to meet

the social-emotional needs of students; promote the inclusion of children with special needs; and, provide developmentally appropriate learning materials.

Through all these efforts, Quality First has made quality early learning available throughout the state. Quality early learning experiences are essential to the future of Arizona. High quality early education prepares Arizona's children for school and lays a strong foundation for their future, and ours. Program improvement and rating efforts, like Quality First, offer transparent measures of Arizona's earliest educators and the quality of care they provide. When coupled with clear models on the costs of high quality care, these will become a vital resource for parents, advocates and policy makers. They will also mark an important step toward a system which supports improved school readiness, and closes the achievement gaps for Arizona's children.

## CONTINUOUS IMPROVEMENT OF QUALITY FIRST

The First Things First Board is committed to continuous quality improvement across all areas, including Quality First. Based on the National Panel recommendation, First Things First has initiated a series of studies to ensure that Quality First is improving child outcomes. The studies will be done in three phases. Phase One is examining the

conceptual framework and design of Quality First; the Quality First data system and related databases, to determine if the existing data elements and infrastructure support effective management, program evaluation, and quality improvement of the quality improvement and rating process; and the Quality First Star Rating Scale (1 to 5 stars) to validate that the five tiers represent differential levels of quality.

To conduct the Phase One work, First Things First has selected Child Trends, a non-profit, non-partisan research organization providing social science research for those who serve children and youth. For more than 35 years, policymakers, funders, educators and service providers in the U.S. and around the world have relied on data and analyses from Child Trends to improve their policies and programs. Additionally, Child Trends is working with an Arizona-based organization, LeCroy & Milligan Associates, Inc., a full service consulting firm specializing in program evaluation, technical assistance and training, to conduct data collection with Quality First participants.

Phase Two will include examination of the comprehensive array of Quality First program components, fidelity of implementation of program components, the contribution of program components—alone and in combination—to improve quality, and analysis of the cost of the QRIS system related to overall system improvement (cost of quality).

Phase Three will study differences in quality between Early Care and Education (ECE) programs at various levels on the Quality First rating scale (or with no rating), and to what extent changes in quality are associated with improved child outcomes.

Taken together, these studies will help ensure that Arizona – through Quality First – has a quality improvement and rating system that is valid, highly effective, successfully supports improvements and sustainable changes in quality in individual ECE programs, and contributes to building a stronger statewide ECE system.

## FTF INVESTMENTS PREVENT LOSS OF MILLIONS IN FEDERAL CHILD CARE FUNDS

In addition to improving the quality of early care and education for thousands of Arizona's young children, FTF's child care quality improvement investments also ensure that the state's child care voucher program is able to make full use of available federal child care funds.

The State of Arizona currently receives more than \$118 million per year in federal Child Care and Development Fund (CCDF) grant funds. Since the grant's inception, the Department of Economic Security (DES) has been designated by the governor as the lead agency for the CCDF. DES is also responsible for the operation of the

State's subsidized child care program, for which CCDF dollars provide the bulk of the funding.

CCDF funds are used in a number of ways, including ensuring that low-income working families have access to safe, reliable child care (which may reduce instances of abuse or neglect because children are not left to be cared for in unsafe environments), and to provide child care for families providing temporary placement to children in the child welfare system (such as foster families and relatives).

The CCDF grant requires that the State provide both Maintenance of Effort (MOE) and matching funds. Specifically, Arizona cannot claim a \$37 million portion of the total CCDF grant unless the State expends \$30 million in non-federal dollars on child care-related activities. Historically the State met the MOE and matching requirement with State General Fund dollars appropriated by the Legislature to DES for additional child care vouchers. Non-CCDF appropriations, including General Fund and other appropriated fund sources, reached a high point of \$69.1 million in fiscal year 2008. Due to significant reductions in General Fund revenues resulting from the economic recession, the Legislature has drastically reduced non-CCDF appropriations since that year. In fiscal year 2012, all General Fund appropriations to child care vouchers were eliminated, although some were briefly restored in FY15.

The Legislature’s elimination of General Fund appropriations to child care vouchers in 2012

resulted in the State’s inability to meet the CCDF’s MOE and matching requirements, thus threatening the loss of tens of millions of dollars for child care vouchers annually.

In order to continue to access Arizona’s full allotment of CCDF dollars, FTF collaborated with the Governor’s Office and DES in establishing a Memorandum of Understanding (MOU) to leverage FTF investments as the MOE and State match. These expenditures have included the various components of quality improvement efforts – including assessing programs, coaching providers on quality improvement and professional development for early educator to expand their skills working with young children – as well as Quality First Scholarships.

Over the six years this MOU has been in place (see Figure 2), Arizona has been able to leverage almost \$228 million in federal child care funds that otherwise would have been lost.

**Figure 2. Federal Child Care Matching Funds and Draw Down**

| Federal Fiscal Year | FTF Match Provided | Federal Child Care Subsidy Dollars Drawn Down as Result of FTF-DES MOU |
|---------------------|--------------------|--|
| 2011                | \$10 M             | \$40.5 M   |
| 2012                | \$30 M             | \$37.9 M   |
| 2013                | \$30 M             | \$37.2 M   |
| 2014                | \$30 M             | \$37.4 M   |
| 2015                | \$34 M             | \$37.8 M   |
| 2016                | \$30 M             | *\$37.1 M  |
| <b>TOTAL</b>        | <b>\$164 M</b>     | <b>\$227.9 M</b>   |

*\*Estimated*

The growing importance of this FTF-DES collaboration on the child welfare system's outcomes is clear. During the past few years, Arizona has seen explosive growth in the number of children in out-of-home care due to abuse or neglect. Between the end of federal fiscal year (FFY) 2010 and the middle of FFY15, the total number of children in out-of-home care grew by 67% percent. As a result, the percentage of children birth to 5 years old served by the child care subsidy program who are involved with the child welfare system continues to rise. In FY11, 28% of

young children served by the program were involved with the child welfare system; by the end of FY15, that number was 41%.

By ensuring that Arizona is able to draw down all available CCDF funds and by working to improve the quality of care in licensed and certified child care and preschool settings, FTF is helping to promote quality early learning for thousands of Arizona's youngest children, including those in out-of-home care whose foster families use DES child care vouchers.

## NORTHWEST MARICOPA REGION

When Victoria Roybal needed to find child care for her toddler, she wanted most to find a caregiver she could trust. This was even more critical for her son Angelo because as an infant, he was diagnosed with dysphagia, a condition which causes swallowing difficulties and other development delays.

Roybal found a partner in his care through Charter Oak Academy in Peoria which participates in Quality First, a signature program of First Things First, which partners with child care and preschool providers to improve the quality of early learning across Arizona. Quality First funds quality improvements that research proves help children thrive, such as training for teachers to expand their skills and to help create learning environments that nurture the emotional, social and academic development of every child. The in-home child care center is a Highest Quality rated center.

Center Director Valerie Forney took time to accommodate Angelo's health care needs, Roybal said. "I felt like she went the extra mile to make sure he was safe. I could drop him off with peace of mind, and never have to worry. She was amazing."

Forney ensured that Angelo received the proper food and drinks and she even learned some sign language to help communicate with him until his speech improved. After four years at Charter Oak, Angelo is now thriving in kindergarten. Although he still faces challenges, his mom said he is far ahead of where he might have been if he hadn't benefited from the high-quality care he received in his early years.

Angelo was able to receive the high-quality care with the help of a Quality First scholarship. The single mom and full-time nursing student said she is grateful for the opportunity that Angelo had to attend a center where he learned to love books and become accustomed to routines, which helped his transition to school.

# NAVAJO NATION

A year into studying for her bachelor's degree in early education, Jessica Lake needed to begin student teaching full time.

This meant that she would lose her job as an instructional assistant at Salt River Community School and her daughter's child care enrollment that came with it. Searching for a quality child care center that was able to care for baby Meggan was overwhelming. She needed to find a place that could work with Lake's 12-hour school and work days.

Lake soon learned of a small number of Quality First scholarships funded by First Things First for Navajo Nation students who are temporarily living off the reservation to attend college. Lake was awarded a scholarship for her daughter and immediately began looking for a child care center that could accommodate her schedule without sacrificing the elements of quality child care that she was learning were so important in the first years of a child's life.

When Lake dropped Meggan off for the first time at Alegrias Child Care in Tempe, she knew it was going to be a great experience.

The setup of the classroom immediately caught her eye. There were separate areas for different types of play, such as a dress up and a quiet corner for the children to read books. "I'm learning about it in school and seeing it here," Lake thought to herself. The primary teacher even spoke Navajo, so Meggan was able to learn her language while at school.

Meggan is now in kindergarten in Monument Valley, AZ. She is reading well above her grade level and her teacher continually comments on how advanced she is for her age, Lake said.

The mother sees the difference between Meggan and her two older daughters at the same age who didn't go to preschool. "Meggan is a lot more advanced at her age, compared to her sisters," Lake said.

Lake knows Meggan's academic success is due to her exposure to quality early childhood experiences that would not have been possible without the Quality First scholarship.



# SOCIAL-EMOTIONAL SUPPORT FOR INFANTS, TODDLERS & PRESCHOOLERS: IMPROVING EARLY CHILDHOOD MENTAL HEALTH OUTCOMES

Research demonstrates that young children’s social-emotional skills promote school readiness and future academic success <sup>7,8,9</sup> (e.g. Blair, 2002; Duncan et al., 2007; Raver, 2003). Children with poorer socio-emotional skills may benefit from positive early education experiences that could help facilitate their transition into formal schooling <sup>10</sup> (Entwisle & Alexander, 1993). Unfortunately, children with socio-emotional and behavioral problems may be more at-risk for expulsion from early education programs. Given the high rate of expulsion in preschool and child care programs <sup>11</sup> (Gilliam, 2005), First Things First has prioritized an evidence-informed Early Childhood Mental Health Consultation (ECMHC) strategy to promote positive transition practices and reduce expulsion rates for children in Arizona.

The ECMHC strategy is intended to help early childhood education professionals more effectively interact with children and their families through consultation with trained mental health professionals. Based on evidence found in research on ECMHC programs, ECMHC is effective in preventing and reducing challenging classroom behaviors, improving teacher skills and lowering preschool expulsion rates <sup>12</sup> (Gilliam, 2005; Perry, Dunne, Mcfadden, & Campbell, 2008).

Mental Health Consultants (MHCs) are mental health professionals with expertise in children’s social and emotional development who collaborate with early care and education providers. With early care and education providers, MHCs conduct activities that promote early childhood socio-emotional competence and development as well as problem-solve specific child and family issues. ECMHC has primarily been implemented in licensed child care centers or homes; however, ECMHC services can also be provided to professionals providing Home Visitation services or those involved in Family, Friend and Neighbor (FFN) programs. Whether these expanded services are provided depends on strategy decisions made by a First Things First (FTF) regional partnership council.

The evidence demonstrating that ECMHC is effective at promoting positive social and emotional outcomes and reducing negative outcomes, has led many states to incorporate the practice in efforts to improve the quality of early learning settings, like child care and preschool.

First Things First has incorporated ECMHC into Arizona’s quality improvement and rating system, Quality First. The program –referred to as Smart Support – is administered through a partnership with a community-based organization. More than 238 providers in 11 regions of the state had access to the ECMHC program to help them address issues at the child, staff or program levels. The federal Preschool Development Grant is expanding quality preschool in 15 high-needs communities statewide who will also have access to ECMHC. ECMHC is also being implemented in Maricopa County’s Head Start programs.



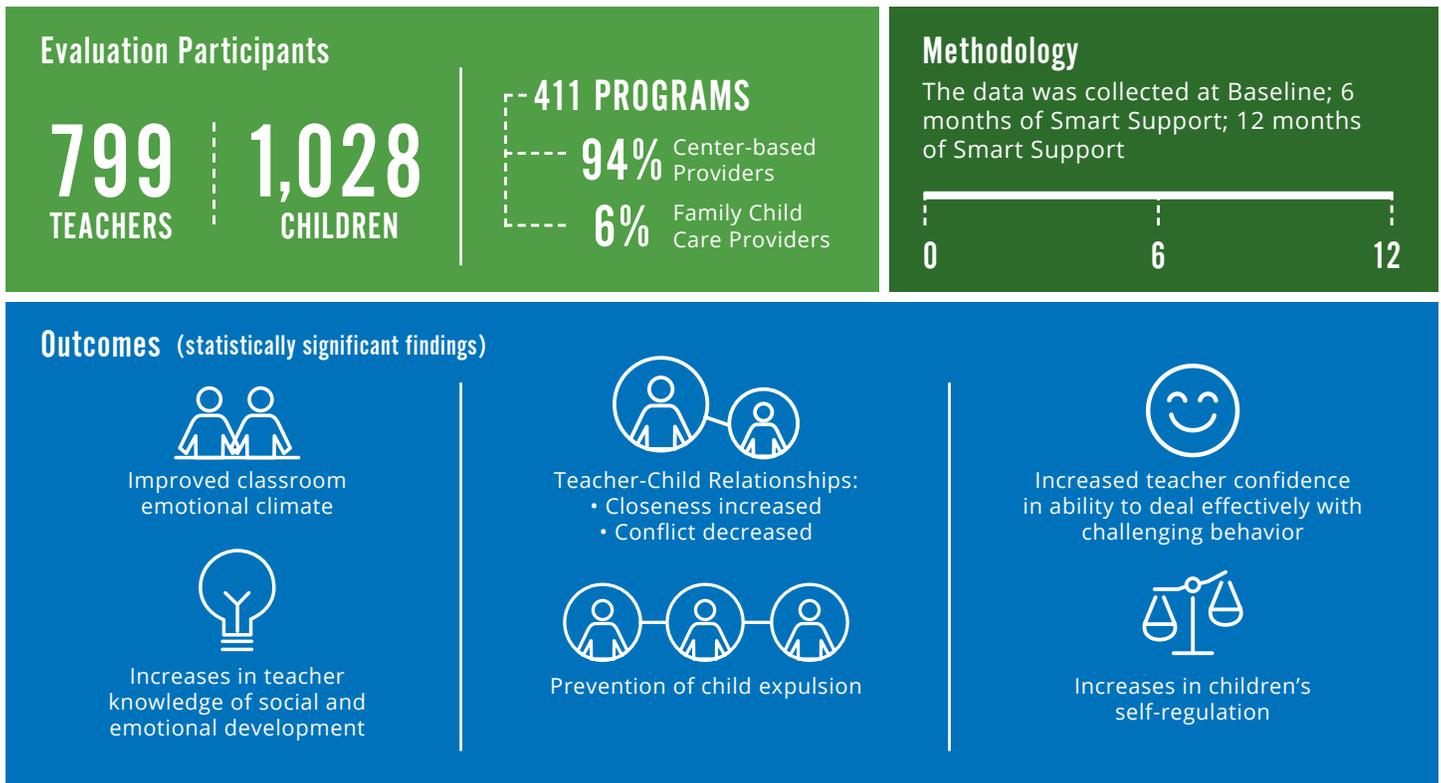
**ECMHC IS NOT A THERAPEUTIC SERVICE FOR CHILDREN; IT WORKS TO ENHANCE THE ABILITY OF TEACHERS AND PROGRAMS TO ADDRESS THE VARIED SOCIAL-EMOTIONAL NEEDS OF CHILDREN, THUS IMPROVING OUTCOMES FOR ALL CHILDREN. THERE ARE A VARIETY OF SITUATIONS IN WHICH PROGRAMS MIGHT REQUEST OR BE OFFERED ECMHC:**

- **Child-Focused Consultation:** working with adults, including teachers and families, to understand a specific child's behavior and ways to address the child's needs through an individualized plan;
- **Classroom-Focused Consultation:** working with a specific teacher to identify attitudes, beliefs, practices and conditions that may be undermining quality relationships between teachers and children; and,
- **Program-Focused Consultation:** working with program leadership, like directors, to ensure their early learning practices and/or policies benefit of all of the children and adults in that setting.

ECMHC consultants are typically experienced master's level professionals from disciplines such as social work, counseling, and marriage and family therapy. Some also have advanced degrees in early education or early childhood special education. They typically visit programs weekly and might address issues at the child, classroom or program level, depending on their agreement with the program leadership and staff.

Recently, the results of a four-year evaluation of Smart Support were released.<sup>13</sup> The study – performed by the Institute for Child Development Research and Social Change – found that ECMHC services resulted in improved outcomes for children, teachers and programs. Specifically, data collected from teachers in preschools and child care centers with ECMHC Smart Support demonstrates:

**Summary of Evaluation Findings**



Source: Shivers, E. M., (2015). Arizona's Smart Support Evaluation Report: The First Four Years., Institute for Child Development Research & Social Change

The findings demonstrate that First Things First’s investment in ECMHC has had a positive impact on young children in participating programs. The results of this evaluation inform on-going efforts to improve the quality of early learning settings, particularly the ability of early care and education providers to address the social-emotional needs of young children who may be disproportionately affected.

“These findings provide compelling evidence that the investment First Things First Regional Partnership Councils have made in supporting child care mental health consultation is paying off. Throughout the past four years, Arizona has emerged as a leading voice in informing national and federal policy agendas related to the importance of mental health consultation in early care and education programs.” –Arizona’s Smart Support Evaluation Report, Institute for Child Development Research and Social Change <sup>13</sup>



# TAKING A BITE OUT OF SCHOOL ABSENCES

School readiness means more than knowing your ABCs; it means that a child is academically, physically, emotionally, and socially prepared to enter kindergarten and succeed in school. For many children in Arizona, one of the threats to their academic success may not be a lack of knowledge, but a lack of good oral health.

Now the most common disease faced by young children, early childhood caries (a rapid form of tooth decay) can cause lasting harm to a child's oral and general health, as well as impact their intellectual and social development.

## EARLY CHILDHOOD CARIES (ECC), CAN LEAD TO:

- Pain
- Damaged permanent teeth
- Increased vulnerability to infections
- Impaired speech development
- Failure to thrive
- Reduced self-esteem

## AS THE CHILD ENTERS SCHOOL, THESE ISSUES IN TURN CAN LEAD TO:

- Distraction from play and learning
- Inability to focus on school work
- Anxiety
- Depression/withdrawal from activities
- Decreased completion of school work
- Increased absenteeism

In fact, one study estimates oral disease nationally causes kids to miss 51 million school hours per year.<sup>14</sup> There are additional costs of tooth decay for families and society. Treatment of severe ECC can initially cost \$6,000 to \$12,000, especially if children need to be hospitalized and treated under general anesthesia. On the other hand, the cost of a preventive dental visit is less than \$200.<sup>15</sup>

Given the link among early oral health, child well-being, school readiness, and academic performance, First Things First and early childhood stakeholders statewide set a collective goal of reducing the percentage of children age 5 with untreated tooth decay to 32% by 2020.

Since fiscal year 2010, First Things First has invested almost \$23 million in efforts to prevent ECC and promote positive oral health practices in families and communities. This includes providing a total of 226,430

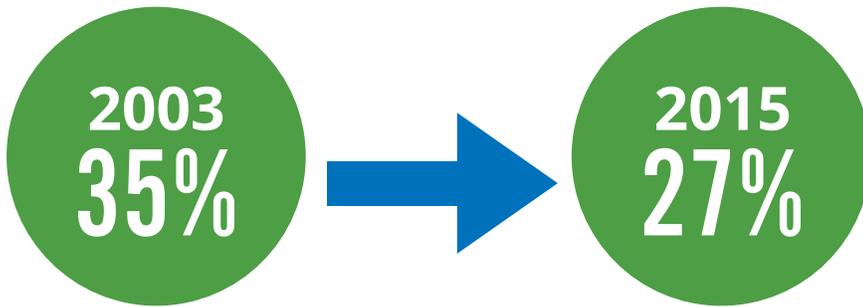
oral health screenings and 204,045 fluoride varnishes to children birth to 5 years old through fiscal year 2016.

As an early childhood system partner, First Things First also must ensure that its investments contribute toward systemic progress in young children's oral health. To that end, First Things First partnered with the Arizona Department of Health Services in 2014 to coordinate a statewide oral health survey. A total of 3,630 kindergarten children received a dental screening at 84 schools during the 2014-2015 school year. This survey collected information on the prevalence and severity of tooth decay in kindergarten children. The First Things First report, *Taking a Bite Out of School Absences: Children's Oral Health Report 2016*, presents the findings of this joint survey, including comparisons to previous statewide surveys and, where possible, national benchmarks.

# SOMETHING TO SMILE ABOUT

As described above and noted below, the study showed that First Thing First and its early childhood system partners' prevention efforts are paying off. <sup>16</sup>

## FEWER AZ KINDERGARTENERS HAVE UNTREATED TOOTH DECAY.



SINCE 2003, THE PERCENTAGE OF KINDERGARTEN CHILDREN SITTING IN A CLASSROOM WITH DENTAL PAIN HAS DECREASED FROM 7% TO LESS THAN 2%



THE PERCENTAGE OF ARIZONA'S KINDERGARTEN CHILDREN WITH A DENTAL VISIT IN THE LAST YEAR INCREASED FROM 54% TO 77%.

In addition, the percentage of young children who had never been to a dentist was cut by more than half, dropping from 25% to 10%.



AZ KINDERGARTENERS WHO HAVE NEVER BEEN TO A DENTIST

HAS DECREASED FROM 25% IN 2003 TO 10% IN 2015

## MAKING AN IMPACT

As a part of Arizona's early childhood system, First Things First has made strategic investments in efforts to prevent early childhood tooth decay and promote oral health for Arizona children birth to age 5 and their families.



**\$23** MILLION  
INVESTED



**226,430** ORAL HEALTH  
SCREENINGS



**204,045** FLUORIDE  
VARNISHES

## SOMETHING TO CHEW ON

While these successes are very encouraging, the statewide oral health survey also showed that challenges remain in young children's oral health.

### THOSE CHALLENGES INCLUDE:

- Too many children in Arizona experience tooth decay. More than half of Arizona's kindergarten children (52%) have decay experience, a level higher than the national average for 5-year-olds (36%).
- Some groups of young children have very high levels of dental disease. Children from low-income households and some racial and ethnic groups have higher levels of dental disease, suggesting particular vulnerability for certain populations of young children.
- Many parents are unaware that their health insurance coverage includes dental benefits. The Arizona Health Care Cost Containment System (AHCCCS) – the state's Medicaid program – includes dental benefits. Yet, about 1 in 5 (22%) of parents surveyed who reported their child had AHCCCS insurance also said they had no dental coverage.

# CHALLENGES REMAIN

Too many young children in AZ experience tooth decay.

## AZ kindergarteners



52%

## US 5-year-olds



36%



Children from low-income households and some racial and ethnic groups have higher levels of dental disease.

22%

Many AZ parents do not know that their child's AHCCCS (Medicaid) coverage includes dental care benefits.

## STRATEGIES TO GET ARIZONA KIDS SMILING ALL THE WAY TO SCHOOL

The Taking a Bite Out of School Absences: Children's Oral Health Report 2016 shows that investing in prevention and early intervention can significantly improve oral health for Arizona's youngest children, thus reducing the likelihood that oral health problems will impact their school attendance or performance. As one of the principle funders of oral health prevention and early intervention for children birth to 5, First Things First's investments in communities statewide clearly have contributed to this marked improvement.

While more children in Arizona are receiving dental services and fewer have untreated tooth decay, more work needs to be done. To reduce the percentage of children with decay experience, Arizona must expand access to preventive dental services and parent/caregiver education, with an emphasis on reaching

the youngest and most vulnerable children. To reduce the percentage of children with untreated decay, early childhood system partners must work collectively to increase access to dental care by educating parents, caregivers, and early care providers on the importance of early dental visits, developing systems that support early screening and referral, and expanding the workforce providing dental care to Arizona's youngest children. The results shared in Taking a Bite Out of School Absences: Children's Oral Health Report 2016 should form the foundation for on-going community discussion on how early childhood partners leverage successes and resources of individual communities to overcome the on-going challenges that threaten the oral health of Arizona's youngest children.

# STRENGTHENING FAMILIES IN THEIR ROLE AS THEIR CHILD'S FIRST TEACHER LEVERAGING EVIDENCE-BASED PROGRAM MODELS

Strong families are the building blocks of strong communities. Turns out, they hold one of the keys to their child's academic success, as well. Relationships established with adults in early childhood are important for brain development. How, exactly, do nurturing relationships affect brain growth?

According to the Center on the Developing Child at Harvard University, the key process that helps build strong brain architecture is known as Serve and Return.<sup>17</sup> New neural connections form in the infant's developing brain as children "serve up" opportunities for interaction through babbling, facial expressions and gestures with their caregivers. Adults "return" the serve by responding in a directed, meaningful way. This interaction forms the foundation of brain architecture upon which all future development will be built.<sup>17</sup>

There is no question that when children experience abuse or neglect, family violence, poor nutrition, housing instability and infrequent health care, their ability to learn and succeed is severely compromised. Families dealing with these issues often experience high levels of stress, and high-stress environments can substantially impact early development. According to Harvard University's Center on the Developing Child, research on the biology of stress shows that major adversity can weaken developing brain architecture and permanently set the body's stress response system on high alert. Science also shows that providing stable, responsive environments for children in the earliest years of life can prevent or reverse these conditions, with lifelong consequences for learning, behavior and health.<sup>17</sup>

The data on pages in the State of Arizona's Children section demonstrate that many Arizona families

continue to struggle with situations that can cause stress for parents and compromise children's healthy development. In addition, parents and caregivers often are not aware of the importance and long-term impact of daily interactions on children's early learning, brain development and future academic success.

It is important to recognize that many parents are able to meet their need for parenting information and support through formal or informal networks, including extended family members, faith communities, friends and neighbors. However, there are other families – like teen parents, grandparents raising grandchildren, and families parenting children with special needs, caring for foster children, or dealing with multiple births – who may need or want more formal or targeted interventions, and accessing these is essential for their child's success.

First Things First funds voluntary home visitation programs, which have been shown to be an effective way to improve outcomes for families and children experiencing various risk factors.<sup>17</sup> Although Home Visitation models vary, all programs are designed to improve the lives of at-risk children and families through regular home visits administered by trained providers such as nurses, mental health professionals, social workers, or paraprofessionals. Comprehensive home visitation programs provide participating families of infants and toddlers with information and education on parenting, child development and health topics while assisting with connections to other resources or programs as needed. Home visitors deliver one-on-one coaching and interaction tailored to the needs of individual families.

In FY 2016, a number of different evidence-based models were being implemented in 21 regions statewide. Three of the most widely implemented FTF funded evidence-based home visitation program models are Healthy Families, Nurse Family Partnership and Parents As Teachers. These three program models have been widely implemented and evaluated. Evidence demonstrates each of these models significantly improve child and family outcomes (see Table 1). Specifically, in randomized control trials or quasi-experimental studies with adequate sample sizes and low attrition, evaluations have found that:

## HEALTHY FAMILIES PARTICIPANTS DEMONSTRATED:

- better birth outcomes with fewer birth complications, fewer infants with low birth rate, and more mothers breastfeeding;
- better child cognitive skills with higher scores on the Bayley Scales of Infant Development and the ASQ;
- parents felt more supported by informal and formal organizations;
- improved parenting attitudes and home environment (e.g., positive parent-child interactions, academic toys and materials);
- less frequent family violence and fewer incidents of child abuse and maltreatment (see review by Harding, Galano, Martin, Huntington, & Schellenbach, 2007). <sup>18</sup>

## NURSE FAMILY PARTNERSHIP PARTICIPANTS DEMONSTRATED:

- fewer child behavior problems;
- higher child arithmetic and reading scores and better receptive vocabulary;
- fewer child injuries;
- better infant emotional development;
- more stable employment and less dependence on public assistance (Olds et al., 2004; Olds, 2006). <sup>19,20</sup>

## PARENTS AS TEACHERS PARTICIPANTS DEMONSTRATED:

- gains in child cognitive and social skills as well as more self-sufficiency, especially for Latino children;
- improvements in teen mothers life course (e.g., employment, education);
- more developmental advantages for children, especially those whose families received more visits (Wagner & Clayton, 1999). <sup>21</sup>

In addition, the U.S. Department of Health and Human Services (HHS) and Mathematica Policy Research have endorsed these three programs because of the strong and high quality evidence in support of improved outcomes for children and families who participate in these programs.

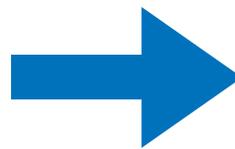
**Table 1. Evidence-based outcomes in high-quality research trials**

As described above and noted below, the study showed that First Things First and its early childhood system partners' prevention efforts are paying off.

|                       | Improved Outcome  | HFAz | NFP | PAT |
|-----------------------|---|------|-----|-----|
| SHORT-TERM OUTCOMES   | Child cognitive, motor, behavioral, socio-emotional development | x    | x   | x   |
|                       | Maternal mental health and depression                           | x    | x   |     |
|                       | Parenting stress levels   | x    | x   | x   |
| INTERMEDIATE OUTCOMES | Connection to community supports                                | x    | x   | x   |
|                       | Home environment  | x    | x   | x   |
|                       | Mother employment   | x    | x   |     |
| LONG-TERM OUTCOMES    | Reduced child maltreatment                                      | x    | x   | x   |
|                       | Economic self-sufficiency                                       |      | x   | x   |
|                       | Decreased substance abuse                                       | x    | x   |     |

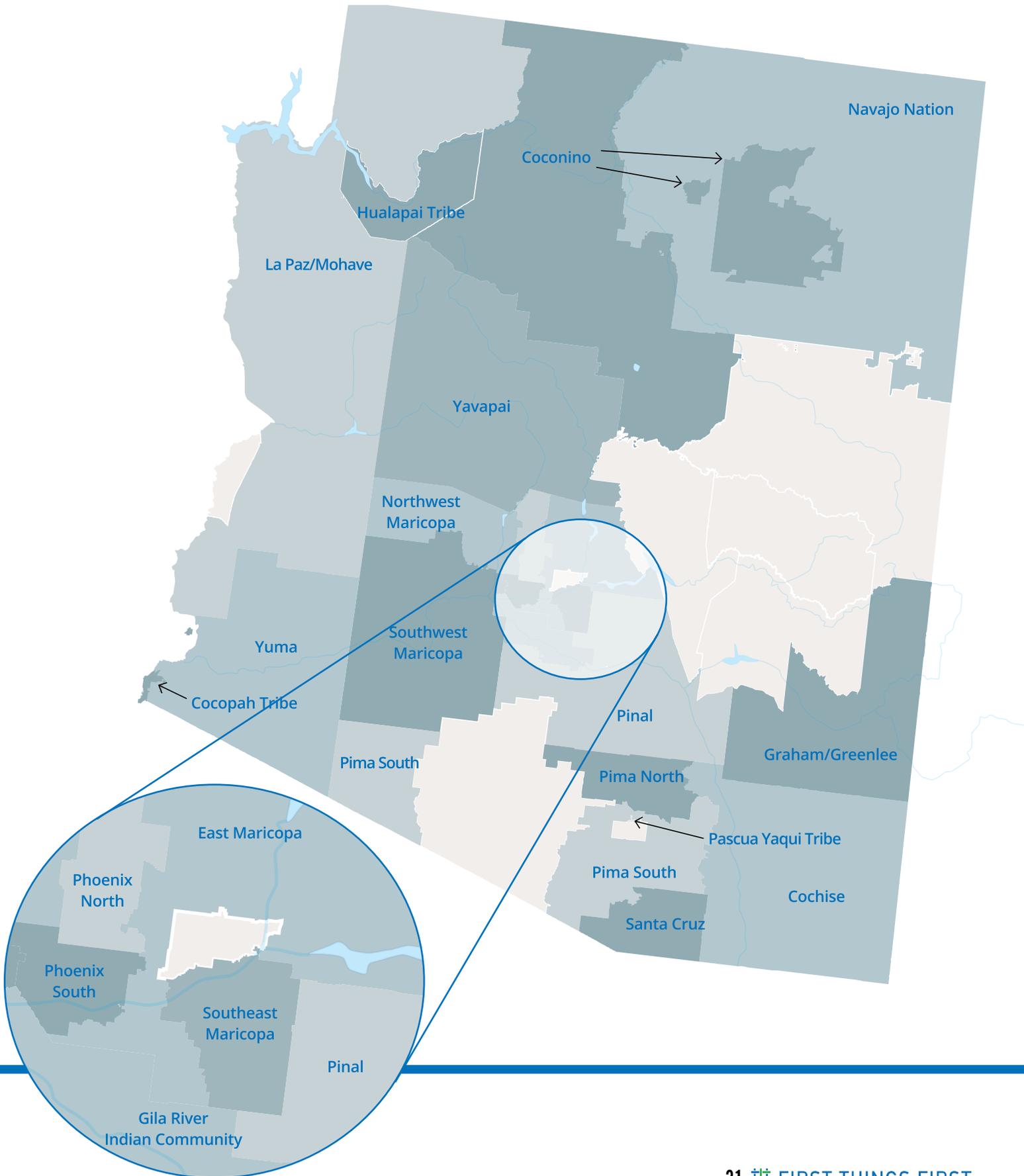
In FY2016, First Things First provided access to evidence-based home visitation programs to

**6,121**  
FAMILIES STATEWIDE



impacting  
**25,743**  
young children

# FTF REGIONS FUNDING HOME VISITATION IN FY16



Because of the wealth of evidence that already exists on the positive outcomes achieved by each of these program models, the experts of the National Advisory Panel recommended that FTF focus research efforts and spending on continuous quality improvement of home visitation programs and services as well as to consider using research evidence and population level findings as proxy measures for interim and long term outcomes. As demonstrated above, FTF funds evidence-based home visitation models, which have demonstrated their success in achieving desired outcomes. Grantees are required to 1) maintain fidelity to the home visitation model, 2) maintain good standing and current affiliation with their national office or institution, and 3) participate in FTF's Quality Assurance program. Requiring grantees to use evidence-based programs and maintain fidelity to the model supports programs in achieving the desired and intended outcomes for families and children.

Families throughout Arizona have access to home visitation programs to support their child's development, address and meet their needs and provide a nurturing and stimulating home environment. FTF is one of several lead state agency partners funding home visitation in Arizona. To leverage funding and coordinate the delivery of home visitation the Strong Families Alliance- a consortium of

agencies statewide whose work with families includes the funding and implementation of home visitation – was developed. The Alliance works to strengthen the home visiting system in Arizona and promote collaboration and the sharing of resources and best practices. The Strong Families Alliance includes an Inter-agency Leadership Team that includes FTF, the Department of Child Safety, the Department of Health Services, the Arizona Department of Education, the Department of Economic Security – Arizona Early Intervention Program and the Arizona Health Care Cost Containment System – identify ways to strengthen the system. Areas of focus include increased collaboration across the agencies such as working together on a model of coordinated outreach and referral in communities across Arizona; implementation of a comprehensive plan for professional development for home visitors; review of data on home visiting benchmarks; addressing barriers and challenges identified by home visitation programs; and, addressing performance issues and ensuring fidelity to the evidenced based models using a CQI approach. The leadership team is committed to on-going collaboration to identify any additional opportunities that may exist for the expansion of these programs to serve more at-risk children and their families throughout Arizona.



## SOUTHEAST MARICOPA REGION

For Scott and Pat Hall of Gilbert, their adopted son Ethan was a miracle. Born seven weeks early and weighing only 4 pounds, the medical crises with the baby never seemed to stop.

Early on, Pat noticed that Ethan struggled to sit up and had difficulty holding down food. As Ethan approached his first birthday, he still couldn't stand or crawl, couldn't swallow and wasn't sleeping through the night. Pat turned to Parents as Teachers program, which provided voluntary coaching and in-home support for families. The program was housed under Child Crisis Arizona and funded by the First Things First Southeast Maricopa region.

"It was a godsend," said Pat, as she recalled the techniques she learned to use with Ethan to help him develop his motor skills. Patti Watts, the family's parent educator, provided coaching, parenting information and connections to other community resources.

Once a week, Watts would visit the family, work on an activity and leave additional ones for the family to do together.

For example, when Ethan turned 2, the focus was on Ethan's hand coordination. Ethan struggled to pick up objects, especially small ones, so Watts showed Pat how putting small objects in an ice cube tray encouraged the boy to use his fingers to get the object out.

Many times, Watts served as a sounding board for the parents when they struggled to understand their son's delays.

"We learned many valuable tips on how to teach my kids," Pat said.

Ethan recently started kindergarten and he was ready, Pat said. "Without the program, Ethan would probably be in a special education classroom. The program helped a lot with his language development and motor skills."



# COURTING BETTER OUTCOMES FOR YOUNG KIDS IN FOSTER CARE: SUPPORTING THE DEVELOPMENTAL NEEDS OF MALTREATED INFANTS AND TODDLERS

When young children experience abuse or neglect such as, family violence, poor nutrition, housing instability and infrequent health care, their ability to learn and succeed can be compromised (see review by Cicchetti & Toth, 1995).<sup>22</sup> According to Harvard University's Center on the Developing Child, research demonstrates that chronic stress, often induced by abuse and neglect, can have adverse effects on neurobiology, some of which hinder cognitive development as well as setting the autonomic nervous system on high alert causing poor responses to normal environmental cues (also see review by Glaser, 2000).<sup>23</sup>

Studies have shown that stable, responsive environments for children can help ameliorate the consequences of abuse and neglect, and improve learning, behavior and health outcomes later on in life (see review by Cicchetti & Toth, 1995).<sup>22</sup> Infants are the largest group of children to enter, remain and re-enter the child welfare system (U.S. DHHS, 2016).<sup>24</sup> While child abuse and neglect in infancy and toddler-hood can negatively impact development (Trickett & McBride-Chang, 1995),<sup>25</sup> research suggests that the early years present an unparalleled window of opportunity to intervene (Bronfenbrenner, 1974).<sup>26</sup> Effective and developmentally appropriate interventions and services can improve outcomes for children. Juvenile and Family Court judges are faced with making difficult decisions, especially those regarding maltreated infants and toddlers, that may have long-term implications for children's emotional, developmental and physical health.

From 2010 through 2014, there was a 55% increase in the number of children birth to 3 years old entering foster care Arizona, primarily due to neglect.<sup>27</sup> The age distribution of infants and toddlers in out of home care has remained fairly consistent over the years, with

about half of the children entering foster care being less than 1 year old.

First Things First's Court Team strategy is intended to improve outcomes for infants, toddlers and their families in the child welfare system. Through increased knowledge about appropriate developmental practices, training, shared planning, systems improvement, and regular consultation with child and family agencies, local communities can better support infants, toddlers and their families in the Juvenile Court system.

Court Teams focus on improving communication and collaboration amongst the courts, child welfare, and other child serving organizations to allow them to more easily share information, expedite services and provide developmentally appropriate solutions for infants and toddlers. Court Teams are led by a judge who specializes in child welfare cases and is uniquely positioned to bring stakeholders – including families, child welfare officials and community providers – together to focus on protecting children from further harm.



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## COURT TEAM GOALS ARE ACHIEVED BY DEVELOPING COURT-COMMUNITY TEAMS TO:

- Raise awareness of the developmental needs of maltreated infants and toddlers;
- Ensure that case plans support the developmental needs of the youngest children;
- Promote a permanency plan that results in stable placements for the youngest children with foster families, relatives, or other caretakers; and,
- Ensure that there is a continuing focus on child well-being when young children are returned to parents, relatives or other caretakers.

## RESEARCH ON THE OUTCOMES FOR YOUNG CHILDREN UNDER THE JURISDICTION OF JUVENILE COURTS THAT UTILIZE COURT TEAMS HAS SHOWN:<sup>28</sup>

- A significant increase in the services provided to eligible children and their parents, particularly in access to health care and early intervention services;
- Decrease in the number of foster home moves for infants and toddlers;
- An increase in parent-child visits; and,
- An increase in relative/kinship placements

There are Court Teams operating at various levels in all 15 Arizona counties. Much of the success of Court Teams depends on having the resources necessary to promote ongoing collaboration and learning. Currently, FTF supports Court Teams in the La Paz/Mohave, Yavapai, and Phoenix North and South regions. In addition, FTF supports community collaborations that support Court Teams in the Colorado River Indian Tribes and Gila River Indian Community regions of First Things First. In FY16, the collaboration between FTF and these specific Court Teams impacted 15,958 infants and toddlers involved in the child welfare system. In addition, trainings provided by Court Teams supported 1,561 professionals including early childhood/early intervention system partners as well as Court Appointed Special Advocates and Baby Court Appointed Special Advocates. In SFY17, FTF will expand its support to the Court Teams in Yuma and Navajo/Apache regions.

Research, funded by FTF, recently completed by Arizona State University's Center for Child Well-Being demonstrates that the FTF-supported Court Team model implemented in Maricopa County, also known as Cradle to Crayons (C2C), has had a positive impact on infants and toddlers in the child welfare system. The research focused specifically on the Court Teams operated by the Maricopa County Juvenile Court in collaboration with and partially funded by the First Things First Phoenix North and Phoenix South Regional Partnership Councils.

## ACCORDING TO THE REPORT: <sup>27</sup>

Quantitative data from the Department of Child Services automated information system was used to describe the 8,398 infants and toddlers who were removed from their parents and caretakers from January 2010 through December 2014. The data was used to examine outcomes on time to permanency, safety, and stability in relation to a comparison group of children who entered out of home care 18 months prior to C2C implementation. Findings on time to permanency, re-reports, and reentries suggest an increasing positive program impact in each outcome area over time. It is important to note that C2C program implementation has continuously changed since its launch in 2011, so it is difficult to determine if outcomes are due to the implementation of specific model components.

### PARTICULARLY NOTABLE ARE THE FOLLOWING FINDINGS:

- 1** Despite a 55% increase in the number of infants and toddlers entering out of home care, there was a significant decrease in time to permanency associated with C2C, specifically a median reduction of 48 days from 2010 to 2013 for children who were removed for more than 8 days before permanency placement.
- 2** For rapid remove and return children, who were removed and achieved permanency in 8 or fewer days, 12-month post permanency re-reports and reentry rates show a consistent pattern of improvement associated with C2C implementation and are substantially lower than in the period prior to C2C. The 2012 group of children who were removed and achieved permanency in 8 or fewer days had lower re-report (7.5%) and reentry (29.7%) rates than the 2010 pre-C2C group (13.3% and 35.7%, respectively).
- 3** These positive findings point to improved lifetime outcomes for the most vulnerable and at risk children in the child welfare system, and to substantial immediate and long-term cost savings.



# CLOSING THE WORD GAP

Reading is an essential skill that enables children to succeed in school and beyond. New policies in Arizona have made reading achievement critical to children's attainment in school as well as their progression through early and continued education. Arizona law, A.R.S. §15-701, child's advancement to the fourth grade if his or her reading scores are "far below the third-grade level" on the state reading test. Thus, it is critically important to support families in helping their children to learn how to read. Research has demonstrated that early language and literacy skills are the foundation for later reading achievement (Lonigan, Burgess, & Anthony, 2000; Snow, 1983) <sup>29,30</sup> and that these skills can be bolstered if the early home literacy environment (e.g., exposure to reading materials, shared reading experiences) supports the development of language and literacy skills (Burgess, Hecht, & Lonigan, 2002). <sup>31</sup>

Only 40% of Arizona third-graders passed the 2015-2016 school year AzMerit English Language Arts assessment. Stakeholders are concerned as to how well Arizona students will match up with the national standards, as measured by the National Assessment of

Educational Progress (NAEP). For example, in the 2015-2016 school year, 62% of Arizona fourth graders scored at or above a basic reading assessment level, and of those, only 30% scored at or above a proficient reading assessment level on the NAEP test, leaving Arizona in the bottom ten of all states. <sup>32,33,34</sup>

Primary school reading interventions are not always effective in remediating poor literacy. Above and beyond limitations of low socioeconomic status, quantity and quality of parents' verbal communication with and around children can have a significant impact on the development of literacy skills (Risley, 2005). <sup>35,36</sup> Research findings demonstrate that by age 3, children whose parents exhibit a high frequency of verbal communication know 1,100 words, while children whose parents exhibit lower frequency of verbal communication know about 500 words. At school entry, these disparities become readily apparent and are one of the factors perpetuating the achievement gap (Hart & Risley, 2003). <sup>36</sup>

Gaps in children's vocabulary start to appear as early as

**18 MONTHS**

By the time children are

**3&4 YEARS OLD**

their vocabulary, attention and general knowledge are predictors of

**3RD & 4TH GRADE**

reading comprehension.

**THIRD GRADE**

reading ability is one of the best predictors of

**HIGH SCHOOL GRADUATION**

Researchers have found that parents who read to their children in an engaging way, facilitate children's ability to recognize language rhythms and sounds, and expose them to print materials early are three practices that improve preschool language and literacy skills.<sup>37</sup> Scholar <sup>37</sup> have also found that literacy-enriched play settings help to increase early literacy skills among young children. <sup>30</sup> These results demonstrate that parents are key players in their child's development of literacy skills.

First Things First makes early literacy a funding priority because the development of these skills in children ages birth to 5 is important for early and continued school success.

First Things First supports numerous programs to bolster children's literacy development early on in life. The Arizona Parent Kit is offered to the parents of every newborn before they leave the hospital. Each kit contains a Resource Guide with information on the importance of reading with babies, and a developmentally appropriate board book. More than 72,000 kits were distributed in the 2016 fiscal year.

Child care and early education centers are also optimal places where young children can develop language and literacy skills. In 2010, 60% of Arizona children lived in homes where all of the adults worked,<sup>38</sup> meaning many Arizona children spend all or part of their day in early learning environments. Quality First, FTF's statewide quality rating and improvement system, helps to promote early literacy in early learning programs by supporting centers and homes that use an early literacy curriculum, trains teachers to support children's language and literacy development, and have classrooms rich with developmentally appropriate materials, especially books. There are currently nearly 1,000 providers enrolled in Quality First, impacting more than 51,000 children throughout Arizona. In addition, First Things First funds expansion programs and scholarships to help more children throughout Arizona access early learning environments. These supports helped 9,250 Arizona kids access early learning opportunities statewide in the past year.

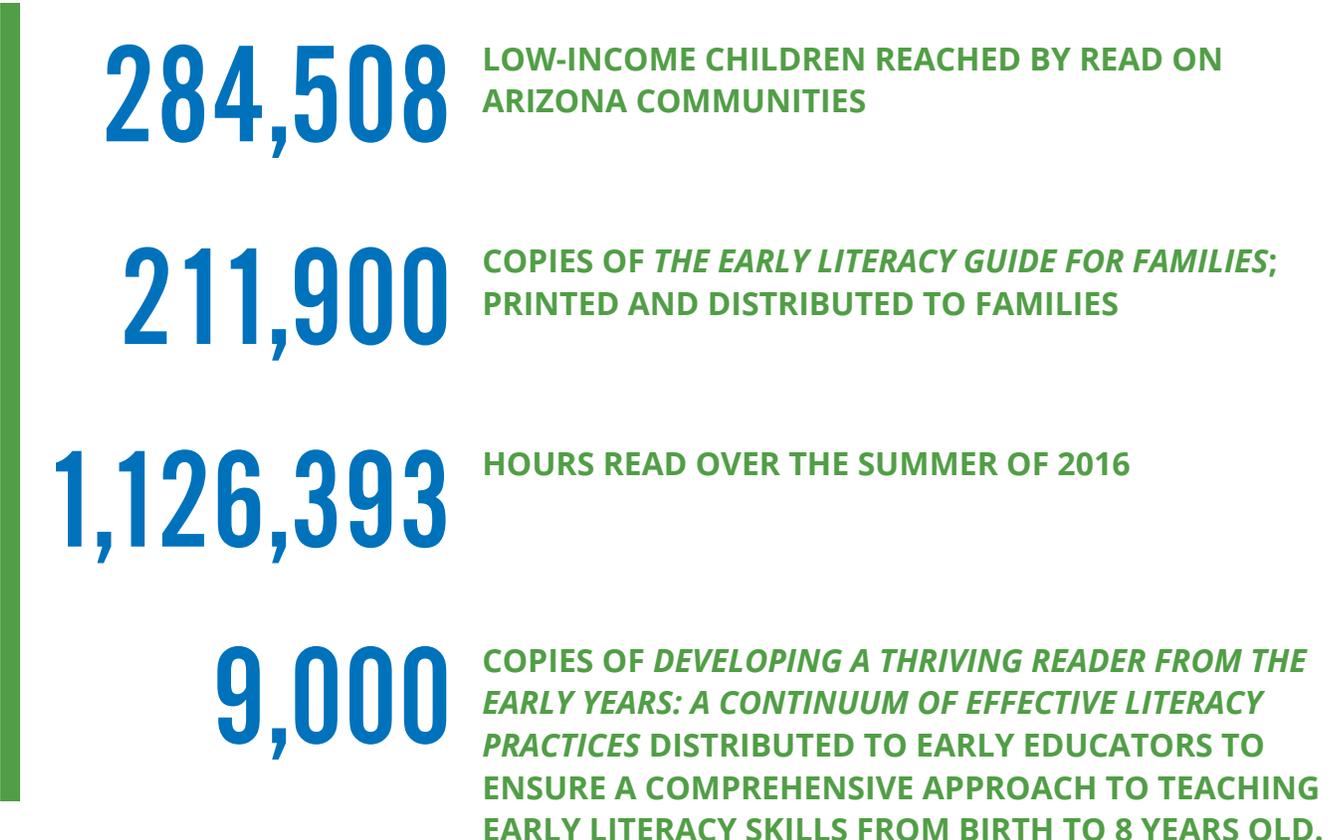
In addition to supporting early literacy in homes and in child care settings, First Things First also funds a number of community-based parent education and family literacy programs. More than 3,700 parents and caregivers completed a voluntary series of community-based classes on topics like parenting skills, brain development, early literacy, and nutrition in fiscal year 2016. A sample of these programs includes:

- First Things First partners with various organizations, such as municipal governments, family support providers and non-profit agencies, to establish family resource centers that offer parent education courses and other resources to help families nurture early literacy skills in their young children.

- First Things First sponsors numerous community- and library-based programs, as well –such as the Safford City-Graham County Library's Imagination Library program, a free service where books are mailed monthly to the homes of children ages birth to 5. Parents register, online or in person, and books arrive at the child's home. Free books are especially important to young families in Arizona's rural areas, where the nearest library could be far away, or families may lack the transportation to reach it.

In addition, as a founding partner in Read On Arizona, FTF has helped expand early learning opportunities statewide. First Things First is part of all 24 Read On Arizona Communities statewide; in many cases, volunteers or staff from FTF lead the collaborations in their area. Through Read On Arizona, stakeholders working with children from birth to 8 years old come together to build awareness of the importance of

early literacy, expand literacy opportunities and interventions available in their area and ensure families have access to information and resources to support early literacy and language development with their children. As a leader in Read On collaborations statewide, FTF contributed to the following outcomes in FY16:



**284,508**

**LOW-INCOME CHILDREN REACHED BY READ ON ARIZONA COMMUNITIES**

**211,900**

**COPIES OF *THE EARLY LITERACY GUIDE FOR FAMILIES*; PRINTED AND DISTRIBUTED TO FAMILIES**

**1,126,393**

**HOURS READ OVER THE SUMMER OF 2016**

**9,000**

**COPIES OF *DEVELOPING A THRIVING READER FROM THE EARLY YEARS: A CONTINUUM OF EFFECTIVE LITERACY PRACTICES* DISTRIBUTED TO EARLY EDUCATORS TO ENSURE A COMPREHENSIVE APPROACH TO TEACHING EARLY LITERACY SKILLS FROM BIRTH TO 8 YEARS OLD.**

Learning and literacy begin at birth. Research demonstrates that reading, singing and talking with infants, toddlers and preschoolers supports early and lifelong reading success.<sup>39</sup> If we wait until kindergarten to introduce the foundations of reading and writing, our children may never reach their fullest potential. In Arizona, the stakes are especially high. The mandatory retention of third graders who do not read

to grade-level should further compel Arizonans to start supporting the development of literacy skills in early childhood. By supporting kids birth to 5 with literacy rich environments, creative programs and activities that foster pre-literacy skills, we give children the tools to achieve in school and in life; enhancing their future and ours.

## PIMA SOUTH

Miguel Cortez has three sons, twins who are in sixth grade, and Christopher, who started kindergarten this fall. Although all of his children participated in the Parents as Teachers program, Cortez said it was different with Christopher.

“Their mom was the one who participated in the program with the twins, but now we have separated and I have the kids,” he said.

Cortez and Christopher, who live in Tucson, enrolled in Dad and Me, when the boy was 3. The set of dad-based parenting classes is organized by Parents as Teachers and funded by First Things First.

“I learned how to better interact with my kids and to be interested in what they are interested in,” Cortez said. As he noticed Christopher getting more into books, colors and letters, the PAT coordinator made suggestions of things Cortez could do with his son.

For example, if they were at the grocery store, Cortez would have his son help put together the grocery list. Once they arrived, Cortez would ask his son questions as they shopped. “What letter was that?” He’d say as he pointed to a box of cereal.

The Dad and Me program also had a profound effect on how Cortez viewed his role as a father.

“The class is just for dads; moms can come, but they sit along the side,” Cortez said. It was different than the culture that Cortez grew up in, where the father worked and the mother took care of the children.

“I got more involved because of PAT,” Cortez said. “Work used to come first for me, then my kids, but now my kids always come first. The program confirms family, that we are better together.”

Cortez credits PAT with instilling his children’s love of reading, knowing how to behave in school and helping them develop self-control.

When Christopher started kindergarten he could count from 1- 100 all by himself. He was one of only three children in his class who could do it.

“The program taught me to tell Christopher, ‘Keep counting!’” Cortez said.



# GRAHAM GREENLEE

Stacy Broman-McAdams was new to the Safford community when she first saw an ad for Toddler Story Time at the Safford Library.

Broman-McAdams, an experienced elementary school teacher, knew the importance of early care and education and thought this would be an ideal opportunity for socialization for herself and for her baby Rylee.

“We made it our routine,” Broman-McAdams said. “She loved her weekly crafts. Then, we’d venture into the library to check out books. Reading at home became a family affair.”

Rylee attended Toddler Time and, eventually, Preschool Story Time on a regular basis until it was time to enter kindergarten. The story times typically included reading a children’s book out loud and working on an activity, such as an art project or putting together a puzzle. These activities helped the toddler develop fine and gross motor skills, learn songs and the alphabet and develop her counting skills.

Rylee’s home library was expanded through an additional FTF-funded program, Dolly Parton’s Imagination Library, which mails a developmentally appropriate children’s book to the home each month until the child turns 6.

“This was the beginning of our children’s home library,” Broman-McAdams said.

Now in kindergarten, Rylee’s teacher confirmed what the family had planned.

“Rylee is beyond ready,” said her teacher Mrs. Evans. “She is already a reader. You can tell her parents were active in her preschool education. She knows her colors and sight words. She always finishes her lessons early. I need some early finisher tubs for her. She is also very social and enjoys helping others.”



# CONTINUOUS QUALITY IMPROVEMENT

When the First Things First Board and regional partnership councils began their work, they recognized that Arizona parents' greatest need was information on the importance of early childhood experiences and how they could enhance those experiences to support their child's healthy development and learning. FTF soon learned that the Virginia G. Piper Charitable Trust – in partnership with Maricopa County birthing hospitals – was implementing the Arizona Parent Kit, a program modeled after the Kit for New Parents implemented by First 5 California's Children and Families Commission. Each Arizona Parent Kit contained six DVDs with information to help parents support their child's learning, a guide listing local resources for young children and their families, and a board book. Compared to more intensive interventions, the Parent Kit was designed as a relatively inexpensive way to get early childhood and parenting information to families.

Research demonstrates that the First 5 Kit was useful to parents. Of the mothers who received the Kit, 87% reported using the Kit (i.e., watching the videos, reading the materials) within two months of receiving the Kit and 94% said the Kit was helpful. At the 14 month follow-up, 60% of mothers reported using the Kit and found it helpful in areas such as child safety practices, infant learning, feeding solid food, breastfeeding, smoking, health care, and child care (Neuhauser et al., 2007).<sup>40</sup> In addition, mothers who received and used the Kit showed significantly greater knowledge gains than those in the comparison group. Interestingly, the intervention was two times as effective for Spanish-speaking mothers and the knowledge gap between English- and Spanish-speaking mothers was reduced by 40% for intervention participants (Neuhauser et al., 2007).<sup>40</sup>



The Piper Charitable Trust funded its own study to assess the impact of the Parent Kit program in Arizona. Researchers measured mothers' knowledge of appropriate parenting behavior prenatally and before mothers were given their parent kit (i.e., baseline; N = 400) and again two months after their due date (N = 200). The Piper Charitable Trust study as well as information from a University of Berkley study indicated that the Arizona Parent Kit improved mothers' knowledge. Mothers with parent kits were more likely to report putting their babies to sleep on their backs, increasing their use and duration of breast feeding, reading to their babies, increasing the amount of time adults played with their baby, appropriate practices for handling infant behavior and correct use of car seats. <sup>41</sup>

**Based in part on this evidence of effectiveness, First Things First agreed to expand distribution of the Arizona Parent Kit to parents of newborns through birthing hospitals outside of Maricopa County. Per the original agreement with the Piper Charitable Trust, FTF assumed the cost of statewide distribution of the AZ Kit in 2009. Since then 505,512 Arizona Parent Kits have been distributed statewide, including 72,058 in FY16.**

Throughout the past seven years, FTF has continued to collaborate with the originators of the California kit to provide informal, on-going information regarding the kits. In 2013-2014, FTF Family Support program staff partnered with Parents Action for Children to include Arizona early childhood stakeholders and parents in research being conducted the University of California, Berkeley. The study had three components: A review of the scientific literature, parent focus groups, and in-depth interviews with experts, service providers and others. This study was intended to inform the development of new videos and other parenting education initiatives. The study showed

that both parents and providers felt that educational materials were valuable, but that they could be updated, provided in shorter, more visual formats, and be available online.

Although the final study was not completed until mid-2015, FTF received preliminary information and reviewed report drafts earlier in the year. The insight gained in that process informed FTF's successful application to the W.K. Kellogg Foundation in early 2015 for resources to support the development of more robust online and digital content to inform and engage parents.

**A REVIEW OF RELEVANT LITERATURE AND ARIZONA-SPECIFIC RESEARCH SUPPORTED THIS APPROACH. <sup>42</sup> FOR EXAMPLE:**

- Ninety percent of new parents are millennials, who also are digital natives. This means they have been brought up during the age of digital technology and therefore became familiar with computers and the Internet from an early age.
- Millennials are more likely to work outside the home; today, 64% of mothers of children 5 and younger work outside the home, twice as many as the previous generation.
- Millennials are more likely to be parenting on their own and facing both economic and time challenges as they attempt to parent on their own.
- Millennials are the most connected generation; 96% of 18-29-year-olds are online and regularly turn to digital sources for parenting content (particularly on mobile devices).
- Usage of mobile devices almost triples after individuals become parents due to convenience and the need for information in the moment.



20-year #research study shows why #brain development during age 4 is so critical: [bit.ly/28YcqoC](#) #ece



Insight and feedback gained through the development and implementation of those online and digital resources (fall/winter 2016), will be used to revise the scope of work for the Parent Kit strategy in early 2017. The revised strategy will be implemented in FY18 and will reflect the various ways that today's parents access information.



# STATEWIDE FINANCIAL REPORT

First Things First is the only public funding source dedicated exclusively to the beginning of the education continuum. Emphasis is placed on getting resources directly to children and families through a network of community providers.

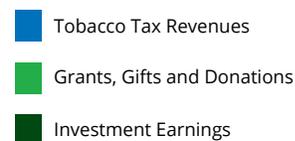
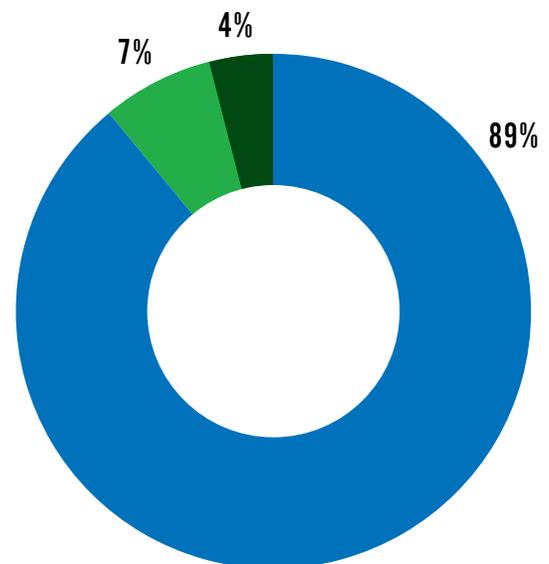
In Fiscal Year 2016, First Things First received approximately \$133,736,646 in revenue, with tobacco tax revenues accounting for approximately \$118,782,961 of this total, or 89% of total revenues. Additionally, FTF received approximately \$5,313,393 from investment earnings and \$9,640,292 from gifts, grants and donations.

Tobacco revenue has decreased 27.9% since the inception of First Things First. The First Things First Board has strategically planned to ensure the sustainability of FTF's early childhood investments by commissioning independent projections of tobacco revenue, adopting a sustainability plan, and working with both public and private entities to leverage funds and maximize the resources available for early childhood programs.

Investments in early childhood development and health programs and services that help prepare children for success in kindergarten and beyond constituted approximately 93% of spending in FY2016. Administrative expenses are kept low – approximately 7% in FY16.

## FY2016 Revenue by Source

|                             |                      |
|-----------------------------|----------------------|
| Tobacco Tax Revenues        | <b>\$118,782,961</b> |
| Grants, Gifts and Donations | <b>\$9,640,292</b>   |
| Investment Earnings         | <b>\$5,313,393</b>   |
| <b>TOTAL</b>                | <b>\$133,736,646</b> |



## FY2016<sup>6</sup> Expenditures

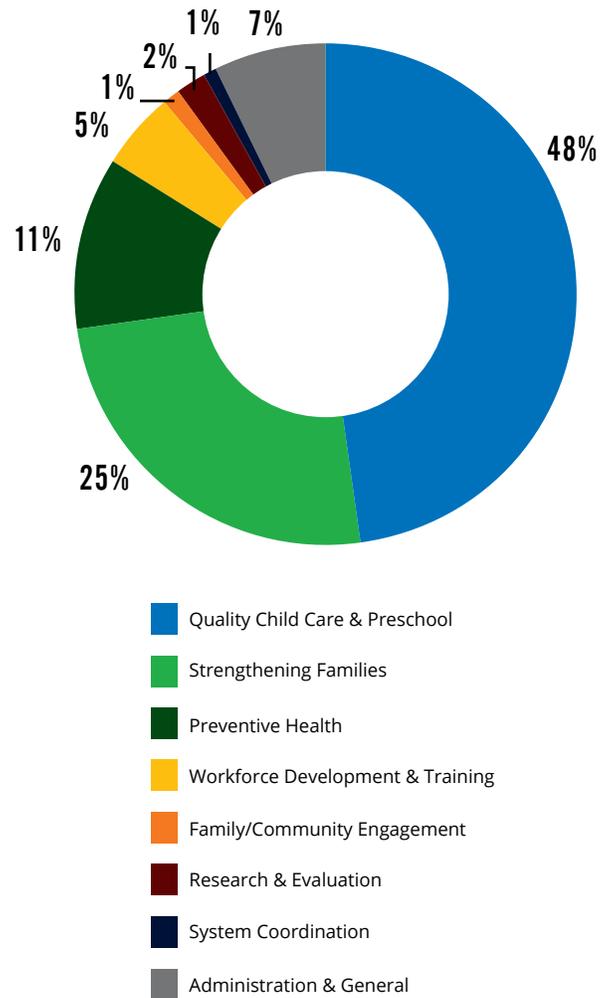
### Programs and Services

|                                  |              |
|----------------------------------|--------------|
| Quality Child Care & Preschool   | \$59,731,221 |
| Strengthening Families           | \$30,650,437 |
| Preventive Health                | \$13,647,219 |
| Workforce Development & Training | \$5,700,436  |
| Family/Community Engagement      | \$1,779,576  |
| Research & Evaluation            | \$2,794,115  |
| System Coordination              | \$825,135    |

### Support Activity

|                          |             |
|--------------------------|-------------|
| Administration & General | \$9,222,516 |
|--------------------------|-------------|

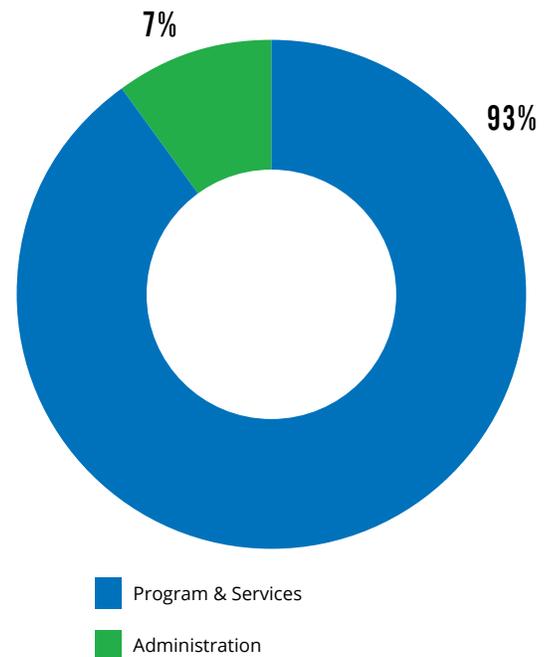
**TOTAL** \$124,350,655



## FY2016 Expenses by Category

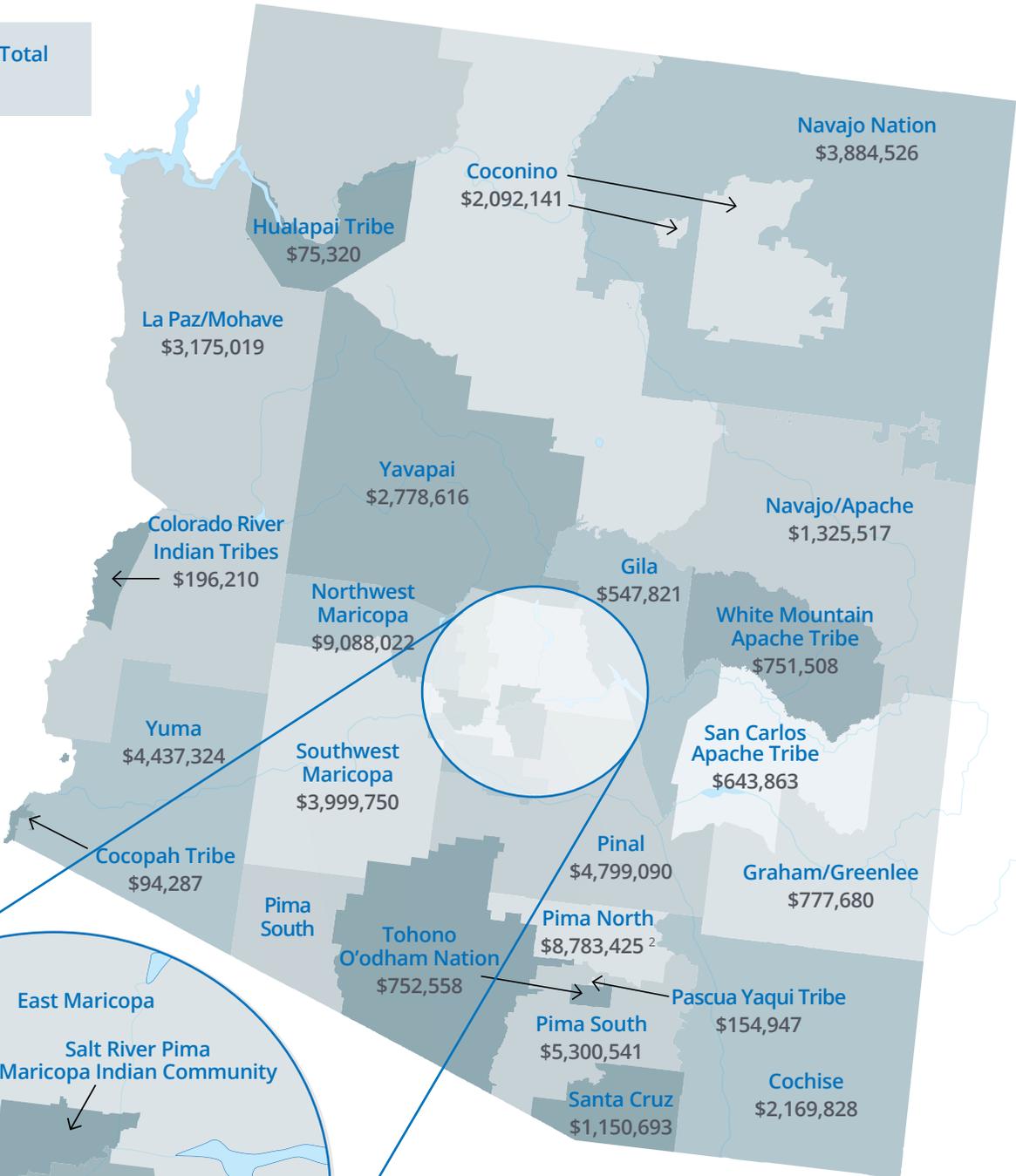
|                     |               |
|---------------------|---------------|
| Programs & Services | \$115,128,139 |
| Administration      | \$9,222,516   |

**TOTAL** \$124,350,655



# FY16 INVESTMENTS ACROSS ARIZONA

State Funding Plan Total  
\$8,911,565 <sup>1</sup>



|   |                           |
|---|---------------------------|
| Phoenix South .....                             | \$15,158,936              |
| Phoenix North .....                             | \$13,080,886 <sup>3</sup> |
| Southeast Maricopa .....                        | \$9,386,302 <sup>4</sup>  |
| East Maricopa .....                             | \$7,164,904               |
| Gila River Indian Community .....               | \$545,352                 |
| Salt River Pima Maricopa Indian Community ..... | \$179,849                 |

<sup>1</sup> \$6,410,757 of this was expended from the Administrative Account Fund  
<sup>2</sup> \$5,191,511 of this was expended from the Administrative Account Fund  
<sup>3</sup> \$5,465,361 of this was expended from the Administrative Account Fund  
<sup>4</sup> \$994,155 of this was expended from the Administrative Account Fund

# APPENDIX

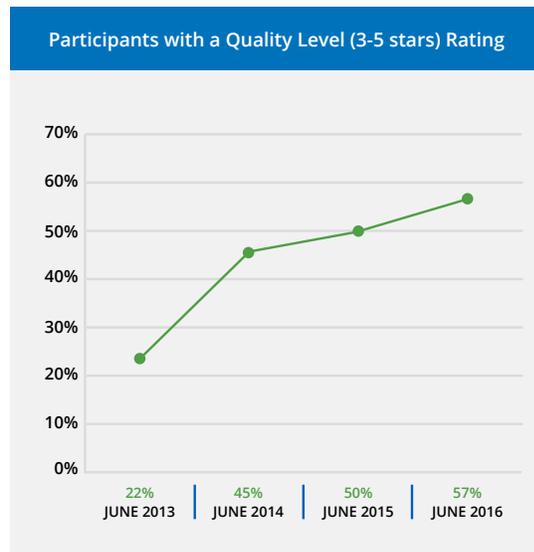
Information is not provided for regions where either a) the regional council does not participate in Quality First, or b) the regional councils' provider ratings are suppressed for confidentiality reasons, as the regional area has less than five total providers enrolled. This is consistent with progress data reported monthly to the First Things First Board.

## Regional Profiles: Quality Improvement and Rating System Progress and Outcomes

### COCHISE



### COCONINO



### EAST MARICOPA

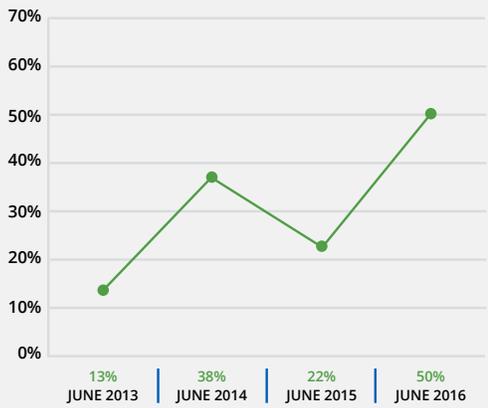


### GILA



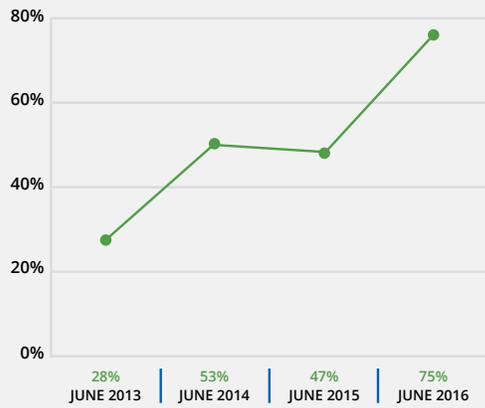
## GRAHAM-GREENLEE

Participants with a Quality Level (3-5 stars) Rating



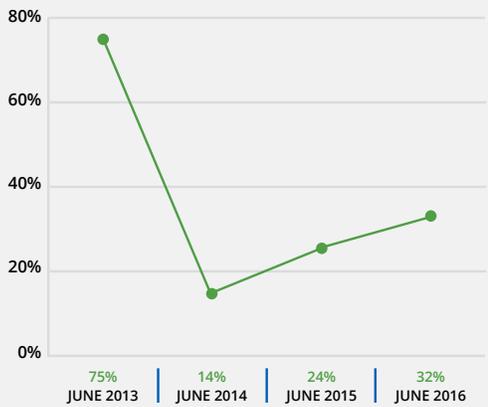
## LA PAZ-MOHAVE

Participants with a Quality Level (3-5 stars) Rating



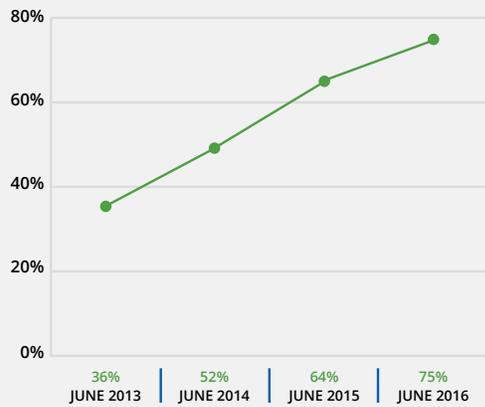
## NAVAJO NATION

Participants with a Quality Level (3-5 stars) Rating



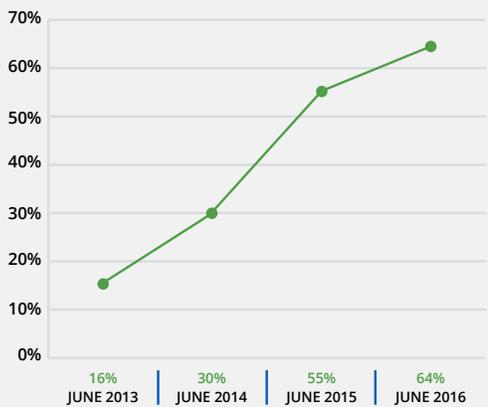
## NORTHWEST MARICOPA

Participants with a Quality Level (3-5 stars) Rating



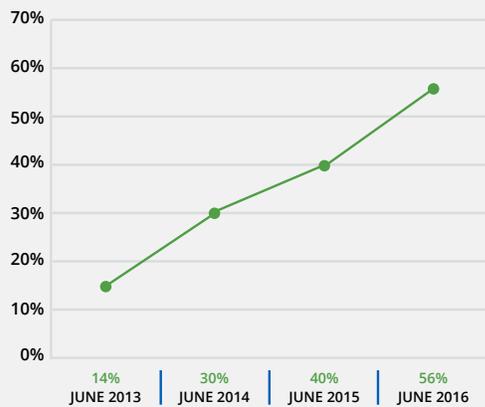
## PHOENIX NORTH

Participants with a Quality Level (3-5 stars) Rating



## PHOENIX SOUTH

Participants with a Quality Level (3-5 stars) Rating



## PIMA NORTH



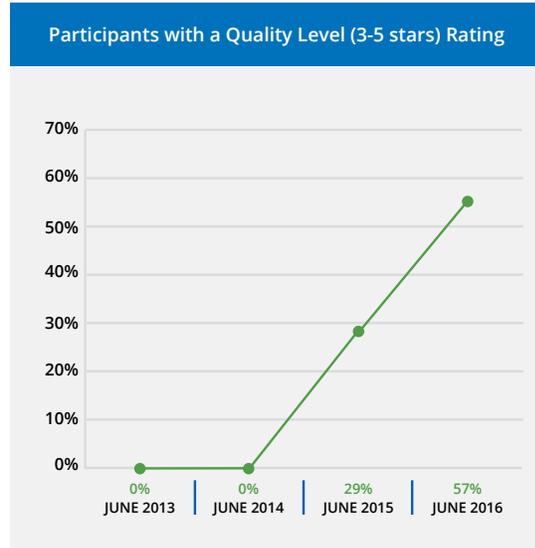
## PIMA SOUTH



## PINAL



## SAN CARLOS APACHE



## SANTA CRUZ

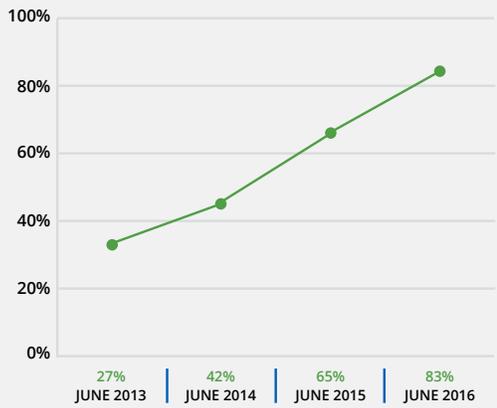


## SOUTHEAST MARICOPA



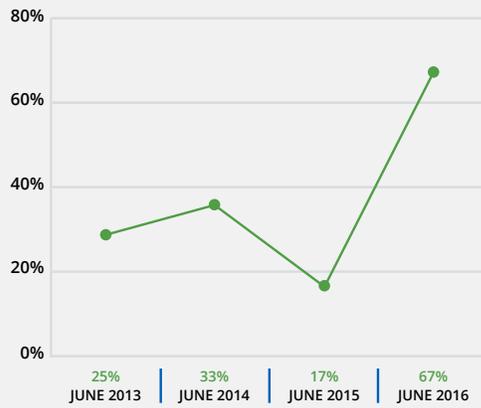
## SOUTHWEST MARICOPA

Participants with a Quality Level (3-5 stars) Rating



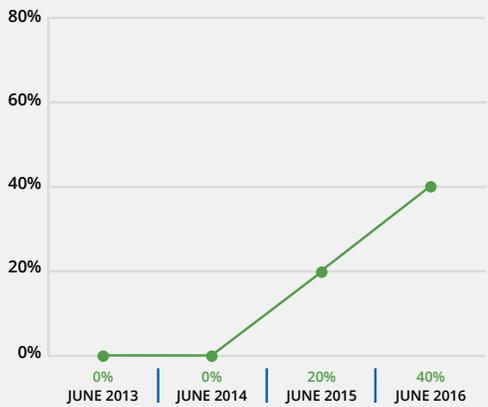
## TOHONO O'ODHAM NATION

Participants with a Quality Level (3-5 stars) Rating



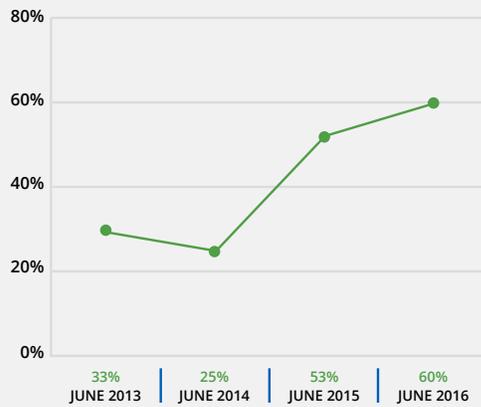
## WHITE MOUNTAIN APACHE TRIBE

Participants with a Quality Level (3-5 stars) Rating



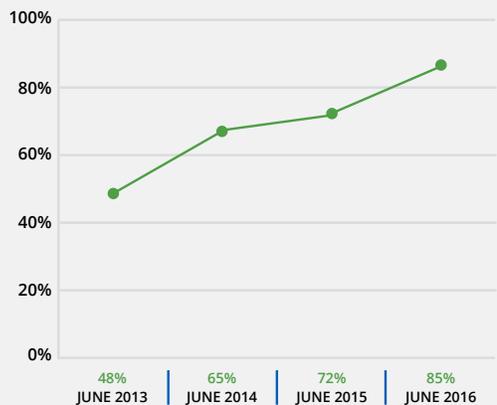
## YAVAPAI

Participants with a Quality Level (3-5 stars) Rating



## YUMA

Participants with a Quality Level (3-5 stars) Rating



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First Things First partners with parents and communities to strengthen families and give all Arizona children the opportunity to arrive at kindergarten healthy and ready to succeed.

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