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AGENDA ITEM: 2012 Regional Needs and Assets Reports

BACKGROUND: The purpose of the Regional Needs and Assets Reports is to identify assets, coordination opportunities, and unmet needs in early childhood development and health programs in each region. The needs and assets report is intended as the primary vehicle for the collection and analysis of all data available at the regional level, and informs the strategic planning of each regional partnership council.

Presented for the Board's consideration are 2 Regional Needs and Assets Reports submitted in fulfillment of Regional Partnership Council responsibilities under ARS Title 8, Chapter 13, Section 1161. Also included are two revised requests for extension.

RECOMMENDATION: The CEO recommends approval of the following Regional Needs and Assets Reports on behalf of the following Regional Councils:

- Northwest Maricopa
- Gila River Indian Community

The CEO recommends approval of two revised requests for extension for the following Regional Councils (expected dates for Board approval are also indicated):

- Navajo Nation (was January 2013, requests additional extension to April 2013)
- San Carlos Apache (was December 2012, requests additional extension to April 2013)

(Approval of extensions for the following Regional Councils was granted at the October 2012 Board meeting:

- Pascua Yaqui Tribe (TBD 2013)
- Tohono O'odham Nation (TBD)



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First Things First Regional Needs and Assets Reports Summary

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**Maricopa Regional Partnership Councils
Regional Needs and Assets Reports
Executive Summaries**

Northwest Maricopa

Executive Summary

The First Things First – Arizona Needs and Assets Report provides a portrait of the families and young children of the Northwest Maricopa Region. The report also identifies current resources used by families and childcare providers/teachers as well as the perceptions of families, providers and community leaders' on resources and supports needed by these families. The report may assist civic leaders and policy makers to identify target communities that need additional resources such as early childcare, early education, health and dental care, and insurance to better serve the needs of young children and their families. The report further identifies the resources that are not available or utilized and the effect of budget cuts on the families in the northwest Valley.

The Northwest Maricopa Region is comprised of the cities of Aguila, Glendale, El Mirage, Morristown, Peoria, Sun City, Surprise, Youngstown, Sun City West, Waddell, Wittmann, and Wickenburg and their respective zip codes. This year, the report includes information on all of the cities of Glendale and Peoria that will become part of the Northwest Maricopa Region. The communities represent urban, suburban, and rural complexities with each having its own history and stories.

The current population of the region is 697,630 persons, of whom 46,454 are under the age of five years. The region is large and encompasses 2,109 square miles on the northwestern end of Maricopa County.

There are many assets across the region, the greatest of which are the people committed to building the capacities of their respective communities. Other assets include Maricopa County Head Start Zero to Five Program and their delegate agency Westside Catholic Charities. Annually, their nationally recognized Program of Excellence serves 1300 children. There is an extensive network of childcare providers that includes many options for families including center-based, home-based and Kith & Kin, 61 of which are benefitting from Quality First. A major asset to the community is the network of public schools that have generally strong student performance, excellent graduation rates with high percentages of youth who graduate each year, and very low dropout rates indicating that high percentages of students that enroll or enter between 9th and 12th grade graduate within four years.

There is ample evidence of effective practices being implemented by First Things First grantees. In addition, there is a vibrant collection of colleges and universities within the region that support community-based early childhood and teacher preparation programs. All of these efforts contribute to a resilient region that has suffered during the recession but is rebounding with vigor.

The region also has significant needs; some of the most visible are large pockets of poverty among its growing communities, in which up to 30% of children are below the federal poverty level. Large numbers of children and families do not have health insurance and 30% report not having a primary care physician or medical home. Immunization rates of infants and toddlers are lower than the national average. Rates of tooth decay and dental care treatment for children is troublesome. Recently reported by the Annie E. Casey Foundation (2012), the lack of state funding for public preschools remains troubling. Almost 30% of care providers report

having active waiting lists of preschool age children and almost 25% maintain infant waiting lists; and many families report having no access to night or weekend childcare.

This report is designed to illustrate the strengths, highlight needs, and attempt to find the natural connections between the two.

Methodology

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

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

Key Elements of Strength-Based Approaches to Community Assessment

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

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

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

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

Data Collection

Primary Data Collection

Local regional data have been of the utmost importance to the success of this project. The team collected qualitative primary data to reflect the personal views of regional participants and the unique features of the region and quantitative data including incidence and frequency data from families and service providers on topics of interest to the Regional Council. An extensive family survey was developed that queries families on general demographics; access to and satisfaction with health care; family-understanding of the concepts of child development; and cultural competency of care in both health and childcare settings.

Four methods were used for primary data collection:

1. Face-to-face and mailed stakeholder surveys of families and providers
2. Telephone and/or face-to-face interviews with key informants
3. Family/stakeholder group meetings
4. Small focus groups of special interest groups

Secondary Data

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

1. 2010 U.S. Census data
2. Statewide reports provided by FTF including immunization, nativity and mortality, the AZ Health Survey, 2012 CCRR data, ECBG, 2010, ADE Student Demographics
3. US Census Bureau American Community Survey
4. Current Population Survey (CPS)
5. Bureau of Labor Statistics
6. Arizona Health Survey
7. Small Area Health Insurance Estimates (SAHIE)
8. National Immunization Survey (NIS)
9. American Academy of Pediatrics
10. Arizona Department of Health Services (AZDHS)
11. The National Survey of Children's Health
12. Oral Health Survey of Arizona Preschool Children, 2009
13. Arizona Healthy Bodies, Healthy Smiles Survey, 2010

14. National Survey of Children with Special Health Care Needs
15. WIC participation, Health Status and Vital Statistics Reports from the Arizona Department of Health Services
16. KIDSCOUNT
17. SWIFT Resources
18. Division of Developmental Disabilities (DDD)



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**Phoenix Regional Partnership Councils
Regional Needs and Assets Reports
Executive Summaries**

Gila River Indian Community

Executive Summary

The Gila River Indian Community is located on 372,000 acres of land in south-central Arizona just south of the cities of Phoenix, Tempe and Chandler. Tribal membership includes the Akimel O'otham (Pima) and Pee Posh (Maricopa) tribes. The Community is divided into seven districts with the central government seat in Sacaton, Arizona. Each district has its own jurisdiction and maintains one to four seats on the Tribal Council. Language and culture preservation is a priority within the Community, with many tribal programs integrating language and culture into their program planning and curriculum.

The population of the region is 11,712, according to the 2010 US Census. The number of children five years old or younger in the region increased by 7 percent between 2000 and 2010, growing from 1,429 to 1,530. There were 232 babies born to women living in the region in 2009, the most recent year for which detailed data were available. Most of these new mothers (94%) were unmarried. Births to teen mothers in the Gila River Indian Community Region represented over a quarter of the total births in the region, which was about twice the rate seen in the state as a whole in 2009 (12%) and six percent higher than the rate for all American Indian tribes across Arizona. A teen parent education program has been put in place in the region that services youth at both regional high schools; one of the high schools has an Early Head Start program that provides child care and parent education to help young parents stay in school.

The majority of the young children in the region (58%) do not live with either parent, but with another relative, such as a grandparent. The Census Bureau estimates that there are 781 grandparents in the region who have primary caretaking responsibility for their grandchildren under 18 years of age. Of these grandparents, 60 percent are women, 64 percent are working in the labor force, and 64 percent are living in poverty. This report includes data gathered from grandparents who describe some of the joys, challenges and supports needed for those who are raising their grandchildren.

Families in the region have been hit particularly hard by the economic down turn. The average unemployment rate in the region was 31 percent during 2011, three times the statewide rate (9%). The median family income in the region is about \$25,000, which is less than half of the statewide median (almost \$60,000). An estimated 48 percent of Gila River Indian Community residents (and 60% of young children) live in poverty.

Comprehensive health care services are available in the region at the facilities of the tribally-operated Gila River Health Care Corporation, including prenatal care through the Women's Health Center. Other programs such as Women, Infants and Children (WIC) and Genesis provide healthy nutrition and physical activity educational services to young children in the region. These are important services that address the obesity epidemic in the Community.

Among two- to four-year old children participating in the tribal Women, Infants and Children nutrition program, 33 percent were identified as obese, and an additional 19 percent as overweight. These rates far exceed the national rates (14% and 16%). In 2010, 85 percent of

mothers enrolled in the Gila River WIC program were overweight or obese before their pregnancy began.

A strength of the region is its diverse early childhood care and education system, including home-based childcare, school-based pre-kindergarten programs, an Early Education Childcare Center, Family and Child Education (FACE) programs, Head Start, and Early Head Start. A number of these programs put an emphasis on the Native cultures and languages of the area. Even so, the majority of children entering kindergarten (58%) had no early education experience, partly due to these programs operating at capacity. This suggests a need for expanding quality early childhood education.

Educational attainment is lower in the region than in the state as a whole. Nearly four out of ten adults 25 years of age or older in the region (37%) have less than a high school education, and nearly 60 percent of the births in the region are to mothers who do not finish high school or get a GED. Only three percent of adults in the region have bachelor's degrees, compared to 14 percent across all Arizona tribal reservation areas, and 26 percent statewide. An example of an innovative program in the community attempting to address this issue is The Vechij Himdag MashchamakuD high school (VHM). This school provides at-risk youth (including teen parents) with opportunities to continue with their education and receive job training so they can graduate and go to college with work experience and technical training. The school, in place in its current format since 2009, estimates an over 80 percent placement of its students in some post-secondary endeavor (college or employment).

Although the region faces a number of challenges, the VHM high school, early childhood education system and other innovative efforts show that the Gila River Indian Community is striving to support the health, welfare and development of the families and young children who live within the Community.



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Regional Partnership Councils Regional Needs and Assets Revised Requests for Extension

Navajo Nation San Carlos Apache



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November 30, 2012

Steven W. Lynn, Chairman
First Things First Board
4000 North Central Avenue, Suite 800
Phoenix, Arizona 85012

Dear Chairman Lynn:

The Navajo Nation Regional Partnership Council respectfully requests an amendment to the original time extension of January 31, 2013 to submit the 2012 Needs and Assets Report to April 15, 2013.

On November 13, 2012, the Navajo Nation Regional Partnership Council met, discussed, and approved amending the time extension, and took action to approve a contract with the University of Arizona, Norton School to perform additional work on the 2012 Needs and Asset Report. The Norton School will perform the following tasks in coordination with the Regional Director:

- Thoroughly review and edit to remove all primary data (documentation of appropriate and necessary approvals from the Navajo Nation Internal Review Board (IRB) were not received by FTF);
- Analyze, synthesize and summarize the existing material so that information is more accessible and interpretable for use in strategic planning;
- Incorporate additional analyses and data, including reporting on indicators related to maternal and child health in the Region.
- Finally, some demographic data will be re-analyzed and re-presented to assure consistency throughout the report.

Thank you for your consideration.

Sincerely,

Harry Martin, Chair
Navajo Nation Regional Partnership Council



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November 30, 2012

Steven W. Lynn, Chairman
First Things First Board
4000 North Central Avenue, Suite 800
Phoenix, Arizona 85012

Dear Chairman Lynn,

I am writing to request an additional extension for the submission of the Regional Needs and Assets Report to the First Things First Board.

The Needs & Assets Report has been completed; however, the Regional Council requests additional time for the San Carlos Apache Tribal Council review and approval for publication and dissemination. The Tribal approval process is as follows:

- First Things First submits the Needs & Assets final draft Report and Tribal Resolution to the Tribe's Education Committee and Attorney General.
- Upon approval from this Committee, the Needs & Assets Report and Tribal Resolution will go before the full Tribal Council for approval of the final draft report and Tribal Resolution.

Given the remaining steps, the Regional Council anticipates a state board submission deadline of April 1, 2013.

The Regional Council remains very excited about the data collection, reporting and drafting process and its ultimate benefit to the children and families of the San Carlos Apache Region. We appreciate in advance your consideration of the unique circumstances surrounding the request for an extension and look forward to your response. Thank you for your consideration.

Sincerely,

Delphine Rodriguez, Chair
San Carlos Apache Regional Partnership Council