



FIRST THINGS FIRST

Building on Success for Arizona Kids & Families

STATE FISCAL YEAR 2022 ANNUAL REPORT

Dear Fellow Arizonans:

Parents, pediatricians and others caring for young children breathed a collective sigh of relief when babies, toddlers and preschoolers seemed to have been largely spared during the height of the COVID-19 pandemic. Now, as both cases and deaths are, thankfully, becoming more rare, we see another disturbing trend beginning to emerge.

Researchers are raising concerns that there may be an increase in developmental delays among babies born during the pandemic. Stressors associated with disease, loss of employment and isolation may have impacted how parents and caregivers were able to interact with their young children. And, for kids in early education settings, their routines, relationships with teachers and classmates, and their learning were significantly disrupted.

For a state like Arizona — where children faced considerable challenges *before* the pandemic and the resources available to meet those needs are diminishing (Page 36) — the researchers' warnings are particularly concerning.

But, Arizona has a few things in its favor. We have state agencies (like First Things First), advocates, professionals and community leaders dedicated to improving the lives of young children. We have proven programs that strengthen families in their role as their child's first teachers and enhance young children's health and learning. And, we have a booming economy that is generating historic revenues that can be invested in those programs.

Within these pages, you will read about the impactful work First Things First is doing in collaboration with partners statewide. You will read about home-based support that kept families engaged in their child's health and education during the pandemic (Page 28). You will read about efforts to support child care and preschool programs, so that they could keep young kids learning (Page 13). And, you will read about how some local governments are investing to build upon our collective successes to improve outcomes for babies, toddlers and preschoolers in their communities (Page 13).

While we may not yet know the total impact of the pandemic on Arizona's young children, we do know what it takes to help kids arrive at kindergarten healthy and ready to succeed. All we need is the will to work even more closely together; to realize the responsibility we all share for children's well-being; and to make the investments necessary to put kids on a trajectory to success.

Over the next year, we look forward to engaging even more closely with community leaders and policymakers to make the case for early childhood investments and to secure commitments at all levels of our community to support babies, toddlers and preschoolers with the programs so crucial to their future success — and ours. As always, we appreciate your partnership in those efforts and look forward to the day when we realize our collective vision: that all children in Arizona are ready for school and set for life.



Gerald Szostak
Board Chair

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Melinda Morrison Gulick
Chief Executive Officer

A handwritten signature in black ink, appearing to read "Melinda Gulick".

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About First Things First

Created by a 2006 citizen's initiative, First Things First (FTF) is one of the critical partners in building a family-centered, comprehensive, collaborative and high-quality early childhood system that supports the development, health and early education of Arizona children from birth to age 5. FTF's work focuses on seven main areas, including:

Quality Child Care and Preschool

Children with access to quality early learning do better in school and are more likely to graduate from high school. FTF funds research-based quality improvement supports that help children thrive, including healthy and safe learning environments that help children develop emotionally, physically, socially and academically; coaching for early learning professionals to better engage young learners; and developmentally appropriate learning materials. Scholarships also are funded to help more babies, toddlers and preschoolers access quality early 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 hubs where families can access parenting classes, information and referrals to voluntary, evidence-based home visitation programs delivered in the home from a nurse or parent educator to address a variety of parenting situations, like grandparents raising grandchildren, parenting children with special needs or families with multiple births. Literacy approaches include providing information to families and caregivers about the importance of language and literacy development, as well as access to books and opportunities for families to engage in language and literacy workshops.

Preventive Health

Undetected or untreated health issues in the early years can impact learning later on. Left unaddressed, developmental delays and chronic medical conditions can become serious learning problems that require 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. FTF also funds oral health screenings and application of fluoride varnish to prevent tooth decay and subsequent dental issues that are a leading cause of school absence later on. In addition, FTF funds strategies to connect families to health care options in their communities, as well as efforts to coordinate the services children receive for maximum benefit.

Teacher/Workforce Training and Development

Children's relationships with teachers and caregivers impact whether their brains 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 college scholarships and other professional development support to expand the knowledge and skills of professionals working with infants, toddlers and preschoolers. In addition, FTF funds a variety of evidence-based consulting models to help early childhood educators improve health practices in early care settings, better support children's mental and behavioral health, and provide more inclusive settings in which all children can participate.

System Coordination

Collaboration among system partners maximizes resources and effectiveness. At the state and regional levels, FTF works with early childhood system partners — like state agencies, tribal governments, philanthropic organizations, businesses and providers of services to kids and families — to maximize funding, reduce duplication and ultimately improve outcomes for young children. These collaborations also promote the ongoing development and continuous quality improvement of a statewide early childhood system that supports the health and development of all young children in Arizona.

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 through research studies and grant or system partners are used to inform decision-making, monitor FTF-funded grant partner performance, enhance program effectiveness and measure the impact of FTF-funded strategies or the collective investments of Arizona's early childhood system.



First Things First Welcomes New CEO

On March 7, First Things First welcomed seasoned business leader and education advocate Melinda Morrison Gulick as the organization's new Chief Executive Officer. Read on to learn more about what drew Melinda to FTF and her insights after four months running Arizona's early childhood agency.

Q: Where does your passion for early childhood come from?

A: My passion for early childhood started when I worked for Southwest Human Development. There were so many people in our community unaware of the importance of early childhood and the value of investing in families with young children. I was so honored to help grow that awareness and secure investments that benefitted the most vulnerable children in our communities. My passion for early childhood grew tenfold when I became the mother of two young boys. Navigating parenthood, with all its twists and turns, reinforced how much support both children and families need to thrive and how much I want to do my part to make that happen.

Q: After four months on the job, what has impressed you most about FTF?

A: As a parent and education advocate, I was, of course, familiar with First Things First and its mission to support school readiness for young kids. As I worked side-by-side with our staff, regional councils and system stakeholders, I was astounded by the breadth and depth of that work. From strengthening families in the role as their child's first teachers to improving early education and promoting preventive screening, FTF is improving the lives of thousands of Arizona babies, toddlers and preschoolers every year. At the same time, it doesn't have nearly the resources it needs and too few champions among the decision-makers in our communities. I am excited to change that.

Q: What is the first step in moving the early childhood system forward?

A: Relationships are key, especially with those outside the early childhood system in a position to make a difference. Our staff, regional councils, grant partners and system stakeholders already are doing amazing work to support school readiness for young children. But babies, toddlers and preschoolers need support beyond their families and those who serve them.

Our business leaders and policymakers need to be more aware and engaged when it comes to young children. When we all understand each other, and see both the challenges and value in each other's work, we are in the position to work together toward common goals. By establishing, nurturing and leveraging relationships, I believe we can make huge strides toward realizing our vision of school readiness for all children.



Q: What is the greatest misperception about early childhood programs?

A: As short-sighted as it is, the greatest misperception is that they cost too much. As communities, we are paying more for not investing in young children — more for remediation and special education, and then, when failing students become struggling adults, more for social welfare and corrections. The key is helping decision-makers see how early childhood ties to all their priorities — high achieving students, vibrant communities and a thriving economy. Then it's not an expense; it's a smart investment.

Q: What are the greatest challenges facing young children and their families today?

A: The greatest challenge facing young children is the lack of access to the resources that will put them on a trajectory to success. Many babies, toddlers and preschoolers do not get the routine screenings and vaccinations they need to be healthy and identify potential learning challenges early on. Too many kids don't go to preschool and many of their caregivers don't have access to the information they need to support their child's health and learning. Supporting young kids' learning is often seen as a family responsibility, but really it is a community responsibility. Because we all benefit when young kids arrive at kindergarten prepared to be successful.

Q. How can the community support young children?

A: Community members can work to build awareness among their personal and professional networks about the importance of supporting young kids. They can donate time, talent and financial resources to organizations serving young children. They also can vote for individuals committed to investing in young children and convey to their existing local, state and national leaders the expectation that babies, toddlers and preschoolers will be at the top of their agendas. Beyond their parents and caregivers, our communities are the biggest champions our youngest kids can have!



Our Impact At-A-Glance

The data below detail the number of young children, families and early childhood professionals who had access to programs and services as a result of FTF investments in State Fiscal Year (SFY) 22. Decisions about which programs to fund are informed by recommendations from volunteer regional councils after thorough study of the needs in their communities. As such, not all FTF programs are available in every region. The numbers below reflect the impact of various programs across all the regions that fund those strategies. The reach of some of these programs has decreased due to the fact that providers of early childhood programs and services — like many Arizona businesses emerging from the pandemic — struggled to recruit and retain staff to maximize program delivery. In addition, some locations where providers reached families may have had sustained closures or limited access due to ongoing COVID-19 mitigation efforts. Despite these challenges, First Things First grant partners were able to reach thousands of families and professionals statewide with quality programs that will give the young children in their care the opportunity to start school healthy and ready to succeed!

Early Learning

1,137

Child care and preschool providers were committed to continuous quality improvement of their early learning programs through Quality First.

6,687

Quality First scholarships helped the families of 6,687 babies, toddlers and preschoolers afford a quality early education for their kids.

737

Early childhood educators received college scholarships to expand their knowledge and improve their qualifications for working with young children.

1,354

Relatives and other community caregivers attended educational sessions and received coaching to increase their understanding of children's development and strategies to support young children's health and learning.

Family Support

18,002 Families attended parenting activities or received referrals to needed services through family resource centers.

7,282 Families participated in activities to increase their awareness of core areas of family functioning and children's development.

4,280 Families with young children participated in voluntary home visiting programs proven to reduce parental stress levels, increase connections to community supports, and improve children's cognitive, motor, behavioral and socio-emotional development. In addition, 412 families successfully graduated from home visiting programs.

47,894 Kits containing important information, resources and tools for families of newborns were distributed to hospitals to help families support their child's health and learning.

1,260 Parents and other caregivers participated in evidence-based trainings designed to improve knowledge of effective parenting practices and children's development.

Health

18,018 Children received screenings to detect vision, hearing and developmental issues and prevent learning challenges later on.

5,139 Children received referrals to further assess for developmental delays/sensory issues and possible treatment or early intervention services.

15,767 Children received a screening to detect tooth decay which left undetected and untreated could cause damage to permanent teeth, impaired speech development and failure to thrive.

9,547 Children received fluoride varnish applications to protect against early childhood tooth decay.

350 Child care and preschool providers received mental health consultation proven to enhance teachers' confidence in dealing with students' socio-emotional needs, improve teacher-child relationships and prevent expulsions.

47 Referrals were given to children for services to address their mental/behavioral health needs.

991 Child care and preschool providers received child care health consultation or support in maintaining health and safety standards in early learning settings, a crucial support throughout the pandemic.



State & Local Governments Expand Early Learning by Investing in Quality First

Research from the past 40 years shows that kids with access to quality early learning are more prepared for kindergarten, do better in school and are more likely to graduate. As adults, they tend to be healthier and less likely to be involved with the criminal justice or social welfare systems.

“Knowledgeable and skilled teachers in quality early learning programs engage young learners through interactions with the environment and with others,” explained Ginger Sandweg, Senior Director of Early Learning at First Things First. “These teachers intentionally set up learning experiences that support the development of language and literacy, social, emotional and cognitive skills to ensure that babies, toddlers and preschoolers thrive.”

Other hallmarks of quality programs include: predictable and balanced daily schedules and routines; evidence-based, culturally responsive and relevant activities and intentional instruction; regular monitoring of kids’ progress to inform teaching; and ample opportunities for family involvement in their child’s education.

“Achieving quality in child care and preschool settings isn’t easy,” Sandweg said, adding that this is the reason First Things First created Quality First, Arizona’s Quality Improvement and Rating System. Quality First provides a unified, measurable standard of care and informs parents of how their local providers rate on those standards. Participating

providers receive support to improve the quality of their programs and embed a continuous quality improvement process to sustain quality. This support may include: individualized coaching and specifically targeted technical assistance; grants to make improvements to their classrooms, play spaces or retain qualified staff; and college scholarships so staff can expand their skills in engaging young learners.

Pre-pandemic data showed that Quality First significantly improved the quality of early learning options available to Arizona’s families. When programs were first rated (2013), 25% of 857 participating rated providers met or exceeded quality standards

(3- to 5-star rated). Over the course of the next seven years, enrollment increased and quality levels improved among providers participating in Quality First. In 2020, 79% of 1,016 participating rated providers met or exceeded quality standards.

The pandemic and its after-effects have dramatically impacted Arizona's child care providers.

"Although most providers remained open during the pandemic, or have since re-opened, many continue to struggle to serve children at pre-pandemic levels, largely due to a workforce shortage," Sandweg explained. "At the same time, parents looking for child care may not be able to find or afford it."

Significant federal resources to address the effects of the pandemic were made available to communities through city, county and state governments. As policymakers at all three levels looked at ways to support working families, they turned to successful programs already in place at First Things First. Examples of those partnerships include:

Expanding Quality Early Learning Options

Although FTF spends about \$20.8M to support approximately 900 providers in 25 regions statewide through Quality First, these resources are not sufficient to give all providers access to quality improvement support. When the Arizona Department of Economic Security (DES) was looking to use federal COVID relief dollars to expand children's access to quality child care, they turned to Quality First. Through Federal Fiscal Year 2024, DES will invest \$74 million to expand Quality First to an additional

800 providers. In the first six months of the program expansion, almost 300 additional providers have been engaged in Quality First. Of the 141 expansion programs who have been assessed and rated, almost 80% have met or exceeded quality standards. This will give families looking for quality care in their communities more options. Providers caring for kids in the state's child care subsidy program also can be paid 35% more for the care they provide, if they participate in Quality First and meet or exceed the program's quality standards. All expansion providers also have access to technical support in early childhood mental health — to help their teachers improve their classroom climate, enhance child-teacher relationships, support children exhibiting challenging behaviors and encourage the social-emotional development of every child.

For Mary Barcena, who launched her own early program, Casa De Montessori, in an abandoned child care center mid-pandemic, the Quality First expansion program has been a source of support.

A home-based provider whose program outgrew her home, Barcena wanted a way to let families know that she offered quality care.

"Of course, I had heard about First Things First when I was the parent of a young child, and I had heard a little bit about Quality First from a friend who worked at a center," Barcena said. "But it wasn't until I was a director and saw an ad pop up on social media that I started to look further into what it could do for my program."

And, she is so glad she did!

“The process took a few months and was seamless,” Barcena said. “My coach was super-thorough. She was constantly following up with me, letting me know she was here to help with anything I needed. She even called me back on evenings or weekends, which as a teacher and a director, I really appreciated.”

Working through the information provided by the Quality First assessment has given Barcena confidence that she is providing a quality program, and has helped identify areas where she wants to improve.

“My scores have shown me that our emphasis on keeping our teacher-child ratios and group sizes small is allowing for the types of high quality interactions kids need,” she said. “Some of the settings I worked at before, the number of students made it really difficult to develop relationships with children and their families.”

Barcena, whose program earned a 4-star rating on their first assessment, said she plans to keep working with her coach and is open to learning about additional ways to improve or expand her program.

Helping More Working Families Access Quality Care

Parents and other caregivers need child care to return to work, but many cannot afford it. Recent analysis by the Economic Policy Institute showed that an Arizona family earning the state median income would spend 25% of their income on child care for an infant; a single worker earning minimum wage would need to spend 44% of their income on infant care. Some local governments are helping working families with the high costs of child care through First Things First.

Through a \$10 million investment, the Pima County Board of Supervisors created the Pima Early Education Program Scholarships (PEEPS). PEEPS will give up to 1,200 children ages 3 to 5 years old access to preschool through 170 Quality First providers countywide. Families earning up to 200% of the Federal Poverty Level (about \$53,000 for a family of four) can qualify for the scholarships. In SFY22, PEEPS — in partnership with FTF — helped 513 Pima preschoolers access quality early learning. When the Pima County Board of Supervisors voted June 21, 2022 to continue the program for two more years, Supervisor Rex Scott called the vote “the most important vote the Board will take (today).”



Keeping Sky Harbor Flying

The City of Phoenix is taking an innovative approach to addressing the workforce shortages that plague the airline industry and its airports, including Phoenix Sky Harbor, the nation's eighth largest. Leveraging \$4 million in COVID relief dollars, the program will provide child care scholarships that can be used at any Quality First provider in Maricopa County. Any airport worker, including city of Phoenix employees, airline and concessions employees and contractors who work in Sky Harbor are eligible for the program, which was approved in April 2022 and launched in July.

"As a parent I know how challenging it can be to balance work with child care, but with the addition of this scholarship program we have a new opportunity to invest in the community and ensure that working at Sky Harbor isn't only one option among many, but rather an employment center of choice for our frontline workers," said District 8 Phoenix Councilmember Carlos Garcia, who represents the district where Phoenix Sky Harbor is located. "That is one of the best things we as a city can do."

FTF CEO Melinda Gulick lauded the partnerships as examples of how public investments can benefit communities at various levels.

By investing in early childhood education, governments can keep Arizonans working, while at the same time, giving their children a smart start to their education.

"Studies have shown that Arizona parents are missing work or quitting jobs due to unstable child care arrangements," Gulick said. "Employers then lose money as productivity decreases or they have to recruit and train new workers. The state loses money when unemployed individuals don't have the resources to purchase goods and services that are taxed."

"I applaud the policymakers who have had the foresight to make these investments in their children and communities," Gulick said. "We need more communities stepping up to do the same, and partnerships that also address other systemic issues, like the lack of providers in many areas of the state or the child care workforce shortage."



“Brilliant” Training Platform Supports New Child Care Staff

Like other states across the nation, Arizona is suffering a child care workforce shortage. When child care providers are able to hire new staff, they often lose them quickly to other jobs. In an effort to help, First Things First is offering free unlimited access to online early childhood training courses. The coursework includes classes to help new staff understand what quality early learning means and help center directors deliver onboarding training faster to those new staff members.

“What we know is that providers are having a hard time finding staff,” said Ginger Sandweg, FTF senior director for early learning. “Many times, when providers hire new staff, they’re busy doing many of the fill-in jobs that they don’t have staff for and they don’t have time to do the training. This should help ease that burden.”

Lack of proper training in early childhood sometimes creates an immediate gap in the content knowledge for those new to the early childhood field, which in turn frustrates the new employee and may cause them to quickly leave the job.

Starting in October 2021, FTF started funding up to 15,000 subscribers to have access to the entire ChildCare Education Institute (CCEI) training catalog. The catalog includes more than 200 early childhood courses applicable to people working with infants, toddlers and preschoolers. The trainings are self-paced and can be accessed from any computer at any time, to offer flexibility for child care workers.

Cindy Unwin, Director of Opportunities for Small Miracles, now uses the CCEI system exclusively to onboard staff at 15 child care settings in Phoenix and Tucson and called the system “brilliant.”

Before CCEI, the organization had an on-boarding training regimen put together from classes in the community or online. Staff would need to work evenings or on weekends — after they had been with children all day or all week. Now, Small Miracles can require staff to complete 23 hours of training before they enter the classroom, and thanks to CCEI, they can do that within 3 to 5 days.

“They are fantastic courses; very well put together,” Unwin said, adding that staff in particular enjoy classes that focus on brain growth, developmental stages, child psychology and redirecting challenging behaviors.

“The breadth of information is like a college course, but the platform makes it fun and interesting,” Unwin said. “It also tests your knowledge throughout, and if you get something wrong, it makes you go back until you learn it. Teachers are going into the classroom so much better informed.”

FTF partnered with the Arizona Department of Education, the DES Child Care Administration and Arizona Department of Health Services Bureau of Child Care Licensing to ensure the coursework would also help providers remain in compliance with state partners’ training requirements.

Since October, almost 6,000 child care staff have subscribed, with the number growing at about 5% weekly. Collectively, they have completed 39,000 hours of training.

The three-year pilot program will give FTF and partners an opportunity to understand who accesses online learning and which content areas are popular with practitioners. The subscriptions allow for administrators to see how many courses are attempted and completed, who completed the new employee pathway and what parts of the state are using the online coursework.

“Some in the younger generation, they’ve grown up getting content online,” Sandweg said. “It’s a good pilot to see how this works and who benefits the most from it.”

Unwin believes everyone in the child care system can benefit from it.

“(Before CCEI), we would piece together trainings from a variety of sources. Many times, trainings weren’t offered when our staff needed them, or the platforms they were on were difficult to use,” she said. “Now, the struggle is over.”



FTF Investments Help Preserve Half a Billion Dollars in Federal Child Care Funds

FTF's ongoing investments in quality improvement also will continue to ensure that Arizona is able to make full use of all available federal child care funds.

In Arizona, many children access early learning through federal Child Care Development Fund (CCDF) dollars. CCDF funds are administered by DES, which uses the funds to provide child care subsidies for a number of purposes.

Although the amount of child care subsidy funds available for Arizona to support struggling families has increased dramatically over the past couple of years, one thing stayed the same: Arizona cannot claim a \$48.5 million portion of the total CCDF grant (\$208.1 million) unless the State expends \$30 million in non-federal dollars on child care-related activities.

Historically the State met this requirement with State General Fund dollars appropriated by the Legislature to DES. State funds approved by the legislature for child care subsidies reached a high point of \$69.1 million in fiscal year 2008. Those funds were reduced during the Great Recession, then eliminated in 2012, resulting in the State's inability to meet the CCDF's requirements and threatening the loss of tens of millions of dollars for child care vouchers annually.

Although some funding has since been restored (the SFY22 state General Fund contribution for child care subsidies was \$7 million to the Arizona Department of Child

Safety), this amount cannot be used as even a partial match for federal child care funds, since it is being used as a match for federal child welfare funds.

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 Agreement (MOA) to count FTF investments as the required 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 educators to expand their skills working with young children — as well as Quality First scholarships to allow young children to access quality programs.

Throughout the 13 years this MOA has been in place (see *Table 1*), Arizona has been able to leverage more than half a billion dollars in federal child care funds that otherwise would have been lost. By ensuring that Arizona is able to draw down all available CCDF funds, working to improve the quality of care in licensed and certified child care and preschool settings and providing access to care through scholarships, FTF is helping to ensure today's parents can keep working and tomorrow's students arrive at kindergarten prepared to succeed.

Table 1.

Federal Fiscal Year	FTF Match Provided	Federal Child Care Subsidy Dollars Drawn Down as Result of FTF-DES MOA
2011	\$10 M	\$40.5 M
2012	\$30 M	\$37.9 M
2013	\$30 M	\$37.6 M
2014	\$30 M	\$37.5 M
2015	\$34 M	\$37.8 M
2016	\$30 M	\$37.6 M
2017	\$30 M	\$37.4 M
2018	\$30 M	\$38.1 M
2019	\$30 M	\$37.9 M
2020	\$30 M	\$36.9 M
2021	\$30 M	\$37 M
2022	\$30 M	*\$48.5 M
2023	*\$30 M	*\$48.5 M
Total	\$374 M	\$513.2 M

*projected

Source: Arizona Department of Economic Security, Child Care Administration



Oral Health Gets a Boost from Inclusion in Medical Visits

Tooth decay — the single most common chronic childhood disease — can cause lasting harm to a child’s health and impact their cognitive and social development. As a child enters school, it can lead to missed school days, inability to focus, anxiety and other factors that affect academic success. For pregnant women, lack of good oral hygiene and health care in pregnancy can lead to inflammation of gums, gum disease and is correlated with premature birth and low birth weight.

For young children, regular oral health screenings and application of fluoride varnish can help prevent or reduce tooth decay. For expectant mothers, screening is a good way to identify women with or at high risk of developing oral diseases. Through the Oral Health strategy, FTF works to reach children and expectant mothers at greater risk for poor oral health outcomes due to various socioeconomic factors.

Analysis of SFY21 data showed the FTF Oral Health strategy continued to be successful at reaching many children and adults at risk for poor oral health outcomes, despite the fact that the pandemic affected the workforce, outreach efforts and service delivery.

“In the midst of a medical crisis, oral health care kind of went by the wayside for many families,” said Vince Torres, First Things First Senior Director for Children’s Health. “Many dental providers were closed due to

staff shortages or a lack of appointments. The staff in many health care occupations, including those that worked in our oral health programs, also were being asked to support COVID response efforts.”

Grant partners supporting oral health care also faced another challenge — decreased access to young children and expectant mothers.

“Many screening events were usually held at child care centers or other locations where kids and moms might be together, like WIC clinics,” Torres said. “When these offices closed or restricted access, our oral health grant partners lost their ability to engage young children and their families. So, they adjusted and focused on reaching children in different ways, like partnering with pediatric settings. It’s amazing what they were able to do, given pandemic restrictions.”

FTF Oral Health Services Reaching At-Risk Children

In SFY21, 8,791 young children received screenings through the Oral Health strategy. Data show that FTF grant partners are reaching children at risk for poor oral health outcomes — those who need these services the most. Of all children screened during their first screening:

- 43% of children reached were in families living at or below 130% of the federal poverty level (compared to 34% of young children in the regions served).
- 10% of children did not have medical insurance at the time of the screening; 17% did not have dental insurance.
- Children of color were generally reached in higher numbers than the regional population (4% versus 3% Native American; 12% versus 6% African American; and 68% versus 47% Latino).
- 21% had tooth decay (15% had untreated decay).
- 12% of children had only white spots on their teeth without any decay (meaning they were in the very early stages of decay, where screening and fluoride varnish can be most impactful).
- 54% had high risk scores (making them ideal to receive information related to good oral health habits that can prevent tooth decay).
- 15% were in early need of dental care

(cavity formation without pain, infection or swelling), while 1% had an urgent need of dental care (signs or symptoms that include pain, infection, or swelling, which requires immediate attention).

- The prevalence of untreated decay and need for urgent care was higher for preschoolers screened in SFY21, highlighting the importance of early detection of oral health risk and for oral health education, which are key elements of the strategy.
- For children 1 year of age and older screened, only 58% of children had been to the dentist in the past year and 31% of children had never been to the dentist. These percentages are similar for the population of children who had untreated decay at the time of the screening.
- 92% of caregivers whose children were considered high risk received information and guidance on how to better care for their children's teeth.
- Grant partners are required to contact the caregivers to determine if the child attended a dental appointment following the screening. For households that grant partners were able to contact, 32% of children attended a dental appointment at the time of the follow-up phone call. It is also possible that children visited the dentist after the time of the follow-up calls.

FTF Oral Health Services Reaching At-Risk Expectant Mothers

Restrictions in health and community settings, along with the potential fear of pregnant women being exposed to COVID-19, posed challenges to screening expectant mothers in SFY21. However, 360 expectant mothers were still served through the FTF Oral Health strategy. While this may seem like a low number, it is still significant given the challenges with access to care posed by the pandemic.

Demographic data available on 360 expectant mothers suggests that the FTF strategy is reaching a proportion of mothers at-risk for not receiving dental care during pregnancy, for example:

- 60% of expectant mothers served were 30 years old or younger (compared to 57% in the regional population).
- 50% of mothers served had a high school education or less (compared with 44% of the regional population).
- 18% of expectant mothers did not have medical insurance at the time of the screening; 38% did not have dental insurance.
- 81% of mothers screened had tooth decay (including 42% of mothers with untreated tooth decay).

- 67% of mothers had high risk scores at their first screening and 39% were in early need of dental care (cavity formation without pain, infection or swelling). Further, 9% had an urgent need of dental care (signs or symptoms that include pain, infection, or swelling, which requires immediate attention).
- All expectant mothers who were high risk received information and resources to support good oral hygiene.
- Of expectant mothers who grant partners were able to contact following the screening and who were determined to be high risk or did not have a dental home, 27% had attended a dental appointment at the time of the phone call. It is possible that mothers visited the dentist after the phone calls were made.



Future Efforts to Focus on Embedding Oral Health with Other Systems of Care

Community-based efforts to promote screening for both children and expectant moms, as well as fluoride application for children, are crucial due to the barriers at-risk families face when accessing care, said Juan Aristizábal, an FTF East Maricopa Regional Council member, who also works at Molina HealthCare, an AHCCCS health plan.

“Working two jobs to make ends meet, lack of transportation, lack of insurance and a shortage of dental providers in many communities makes it difficult for many expectant moms and kids to access care,” Aristizábal said. “Until systems can minimize those barriers, our best chance to ensure they receive preventive care is to provide it in convenient settings, like child care centers and WIC clinics.”

He said six FTF regional councils in Maricopa County are working with Federally Qualified Health Centers — where many at-risk families access medical care — to incorporate oral health care into their visits. The FTF Board has prioritized this type of system building work as part of its SFY24-27 Strategic Plan, especially for programs or services already offered through other state agencies.

A similar effort has already yielded great results in the FTF Cochise Region.

Dr. Brianna Hillier, Director of Dental Services at Chiracahua Community Health Centers, described how a simple change in policy helped the centers increase oral health screenings by more than 500% from 2019 to 2021, despite the challenges posed by the pandemic. (See *Table 2*.)

Table 2.

Age	2017	2018	2019	2020	2021	2022
9 months	–	–	–	–	3	3
10 months	–	–	–	–	6	6
11 months	–	–	–	–	11	11
2 years old	–	–	20	206	148	374
3 years old	–	27	45	142	113	327
4 years old	40	78	28	109	96	351
5 years old	113	66	26	85	96	386
Totals	153	171	119	703	760	1906

Note: Dashes indicate that data is not available.

The Chiracahua Health Centers include seven brick-and-mortar clinics in Cochise County, three of which include dental clinics. Despite being co-located, services between the medical and dental were not coordinated, and the limited efforts to engage families in oral health care during medical appointments were rarely accepted.

“The pandemic changed things for our staff and for our families,” Hillier said. “The medical staff were really open to maximizing the child’s visits, and so were families.”

Hillier said pre-pandemic, affiliated practice dental hygienists working in the dental clinics only periodically participated on the medical side. Now, they are there every day, doing as many as two dozen oral health screenings

for young children. The hygienists can apply fluoride varnishes to prevent cavities, talk to the families about good nutrition or how to care for young children’s teeth (depending on age), and in cases where dental care is needed, can refer families to the clinic.

“The staff really appreciate each other’s work and are proud of the service we are providing to kids and families,” Hillier said. “Now, when we see families in the community, they ask the hygienists if they will be there at the child’s next medical visit because it’s time for the child’s dental check up.”



Despite Workforce Shortages, Crucial Support Reaching Arizona's Struggling Families

Tanya* enrolled in the Healthy Families program at the height of the pandemic, needing support for herself and her newborn son, Hugh. Despite the fact that home visits had to be conducted virtually, she quickly built a trusting relationship with her family support specialist, Nicole. Every month, Nicole would drop off crafts and activities Tanya could do with baby Hugh, including some they could all do together during virtual visits. Nicole helped Tanya expand her views of what play can look like with a young child — including the fact that it is often messy! Now, Tanya enjoys letting Hugh play with paint, as well as kicking and throwing balls, because she understands the skills he is building through those fun activities. Tanya appreciated the time and care it took for Nicole to stop by her house with those materials. She also loved the videos, articles, resources, and other information Nicole would share via text, email or in their visits. During a particularly rough time financially, Nicole was able to link Tanya to rental assistance available in her community. Two years into the program, Tanya marvels at how helpful and supportive Healthy Families has been to her and Hugh. She considers the time spent with Nicole during home visits almost therapeutic, referring to it as her “personal mom time.”

Janet* joined Healthy Families when her oldest son, Renato, was a preschooler and her youngest, Hector, was just a baby. Janet, who suffers from anxiety, felt completely isolated when she was confined to her home due to the pandemic. The fear of illness paralyzed her. Virtual visits with her Family Support specialists — Jasmine and Amy — became her only connection to the outside world. Jasmine and Amy helped Janet set goals that helped her spend more time outside and further from home - first a walk to her front yard, then to the end of the road, then around the block, and beyond. With time and patience, Janet began to take Renato and Hector with her on the walks; eventually, she was able to allow Renato to return to school in person. She even attended a drive through event sponsored by Healthy Families, where educational materials and other supportive information were distributed. Because of the trust Janet developed with Jasmine and Amy, she was able to let them into her home when Healthy Families returned to in-person services, even though the threat of COVID still loomed large in Arizona communities.

* Only first names are used in these stories to preserve the family's privacy.

These are just two examples of the thousands of families across Arizona who have benefited from FTF-funded home visitation models. There are three models funded: Healthy Families (HF), Nurse Family Partnership (NFP) and Parents as Teachers (PAT). These three models have been evaluated nationally, and each has been proven to significantly improve child and family outcomes¹ (see *Table 3*).

Table 3.

	Improved Outcome	HF	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	

FTF’s home visitation programs provide personalized support for expectant parents and parenting families with children from birth to age 5, not yet in kindergarten, who face a variety of risk factors. Services are voluntary, free and primarily provided in the families’ home. Although the models vary, each involves regular home visits administered by trained professionals such as nurses, social workers, early childhood specialists or paraprofessionals.

While many families could benefit from home visitation, research shows the families who benefit most are those with infants and toddlers who are facing adverse or challenging circumstances. Families prioritized for enrollment in home visitation programs include those who, for example:

- ✓ Are pregnant or who have an infant
- ✓ Earn less than the federal poverty threshold
- ✓ Are parents under 21
- ✓ Are single parents
- ✓ Have less than a high school education

¹ US Department of Health and Human Services, Home Visiting Evidence of Effectiveness. Retrieved from <https://homvee.acf.hhs.gov/>

Table 4.

Risk Factor	Arizona	Healthy Families	Nurse Family Partnership	Parents as Teachers
Teen Parent	5%	11%	28%	2%
Single Parent	37%	33%	50%	13%
Less than a high school education	13%	27%	27%	16%
Low-income (150% FPL or less)	35%	77%	76%	51%

Data collected in SFY21 shows that FTF-funded programs are consistently reaching at-risk families at levels that mirror Arizona’s population, and oftentimes, greatly exceed those levels. (See Table 4.)

Home visitation programs also are reaching a diverse group of families, with participants’ racial makeup largely mirroring the state’s diverse population. All three program models also continually reach a similar or larger percentage of Hispanic, African American and Native American families than reflected in the general population (African American, 3-10% depending on program model, compared to 5% statewide; Hispanic, 56-64%, compared to 31% statewide; and Native American, 3-6%, compared to 5% statewide).

This is significant because ethnic families in Arizona are disproportionately poor, which places them at higher risk for poor health and education outcomes.

In addition to enrolling the families most in need, research suggests various factors that promote positive outcomes for families, and each program model has established guidelines in these areas, including screening and referral, and retention of families in the program. SFY21 data show that FTF program models are performing well in these areas, too.

Home visitors provide developmental screenings to all participating children at regular intervals (a minimum of one screening per program year after the child reaches 2 months of age is required), and they may provide mental health screenings to participating caregivers, based on the specific needs and circumstances of the family. In addition to providing developmental screenings, home visitors offer equipment-based hearing and vision screenings to children. Access to regular screenings allows for the early detection of children's developmental, vision and hearing impairments, and may help identify resources and supports that could benefit overall family well being.

In FY21, 12,433 screenings were conducted on children across all three program models.

- 793 young children with significant developmental concerns were identified.
- 785 young children received referrals for additional supportive services.

Depression screening also was conducted for 1,953 caregivers (40%) during the program year across models.

- 9-26% of caregivers showed indications of concern, depending on the program model.
- 49-95% of those were referred for additional services.

In order for families to optimally benefit from home visiting, they need to participate in services for the desired length of time, as articulated by the program model and national research. The attrition rate varied across models: 40% in HF, 22% in NFP and 27% in PAT.

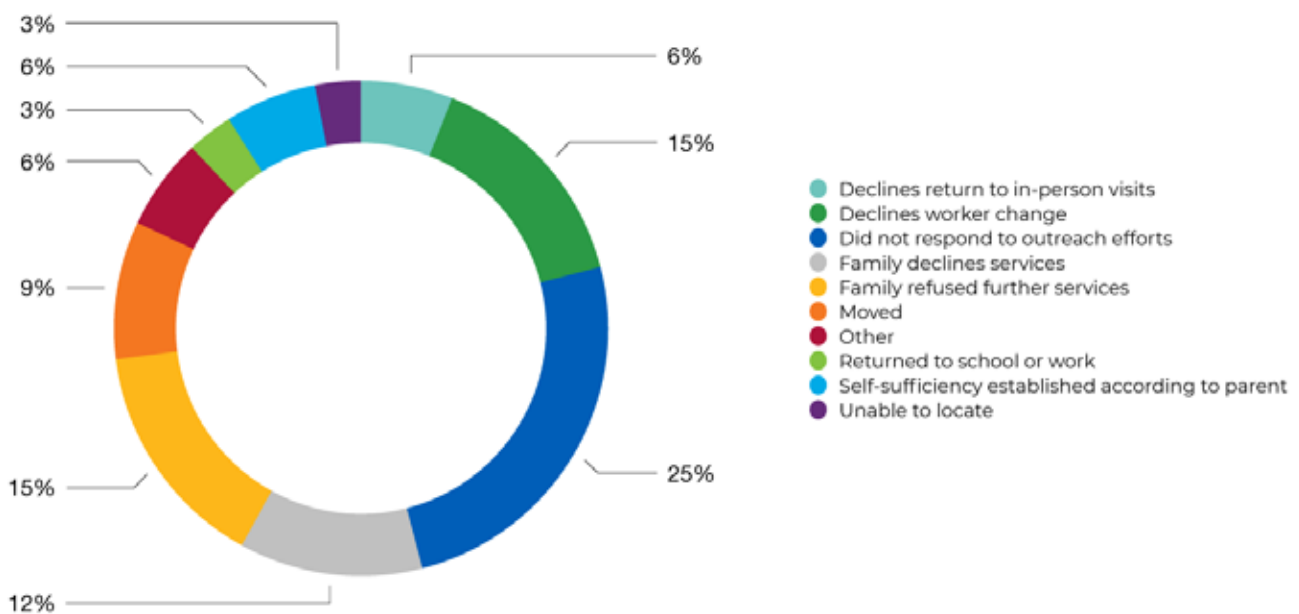
While low attrition rates are always strived for, the observed attrition rates seem to be in alignment with national research that are reflective of the on-the-ground reality of program implementation with vulnerable families. In a landmark issue of the *Future of Children*, a scholarly journal that provides research and analysis to promote effective policies and programs for children, national research across home visitation models showed that families' attrition rates can vary from 20-67%. More recently, researchers examining the Nurse Family Partnership program specifically noted that approximately 35% of families participating in the program go on to complete the 2.5 year program nationwide while in another study that included HF, NFP and PAT programs, researchers found that 42% of families exited within a year of enrollment.

What is critical to understanding family attrition from services further is to investigate why families disengage from services. One key area FTF explored in SFY21 was staff turnover and its contribution to family disengagement from home visiting.

Staff Turnover - SFY21

The relationship between a home visitor and the families they serve is a vital component for successful home visiting programs. When programs experience high staff turnover, this can be costly to programs financially, as well as having an impact on a family's retention in services. When reasons for a family's disenrollment from services are examined for home visiting programs when a family exits services, reasons like "the family declined a worker change," "the family refused further services," "the family did not respond to outreach efforts" tend to rise to the top of the list, especially if that family's home visitor leaves the program, as was observed in our recent analysis of our funded HF and NFP home visitation programs.

Reasons for Leaving Services within 3 months of Home Visitor Attrition
(N=33 Families)



FTF took a deeper look at staff turnover within their funded Nurse Family Partnership and Healthy Families Arizona home visiting programs and observed a home visitor staff attrition rate of 20% for Healthy Families and 10% for Nurse Family Partnership during SFY21. Staff attrition did vary by FTF region within the program model ranging from no staff turnover in some regions to as high as 60% within the Healthy Families program and between zero (no) staff turnover to a high of 20% attrition for nurse home visitors in the NFP program.



One example of an FTF grant partner who took the data a step further is the United Way of Tucson and Southern Arizona (UWTSA) and its Family Support Alliance (FSA) collaboration. UWTSA provides home visitation services throughout Pima County by partnering with school districts and other non-profit organizations. Their work involves over 60 employees across all three program models funded by FTF, the Arizona Department of Health Services, the Arizona Departments of Child Safety and federal Title I dollars. UWTSA conducted an extensive staff survey and discovered that most home visitors who considered leaving their jobs did so because they felt their pay wasn't commensurate with the amount of hours the work requires and the intensity of services and emotional burden that come with serving vulnerable families during the pandemic. In addition, they found that home visitors were feeling increasingly disconnected from their colleagues and team members.

The survey also highlighted the value and impact that skilled and supportive supervisors have on their teams. This was one of the main retention factors the FSA collaboration brought to the forefront. When supervisors provide support to their home visitors, the home visitors, in turn, support parents and caregivers who then model the same support and nurturing for their young children.

Another discovery was the strong connection between home visitors and parents and caregivers they support when they share the same language and culture. Not only does this improve family retention, it increases job satisfaction for home visitors.

Cholpon Rosengren, UWTSA Senior Director of Family Support, said the survey information was shared over the course of multiple meetings with supervisors from all the partner agencies who made changes in their respective programs based on the data gathered through home visitor surveys. Some examples of these changes include:

- Revamped job postings to better describe expectations and responsibilities and to address challenges with hiring and retention by going upstream and selecting candidates who are the best fit for their program;
- Changing the format of job interviews to include experienced home visitors in interview panels to provide their perspective and feedback on potential candidates;
- Required job shadowing with a home visitor before a prospective employee can accept a home visitor position; and,
- Creating and formalizing mentoring programs to pair new hires with veteran home visitors for an extended period of time to provide peer support in addition to regular supervision.

Rosengren said supervisors took the data to heart, as well, and have changed the way they interact with their staff.

“During the pandemic, all supervision went virtual,” Rosengren said. “But it can be difficult to form strong relationships and do the type of reflection and coaching our home visitors need via computer.”

So now, all FSA programs are making a transition to making all supervisory sessions in person and are much more intentional about adding self-care and relationship-building to team meetings to maximize their time together.

“At first, some folks struggled with this transition, but they quickly saw the value and how much better and more impactful the switch to in-person interactions was” Rosengren said. She added that supervisors have started having in-person staff meetings again and allowing time within those meetings for a little fun, a little creativity and a lot of team building.

“In our regular meetings, supervisors are sharing that these changes really mean a lot to the staff,” Rosengren said. “Most of the people who do this work do it because they are so much about children and families; sometimes, the helpers need care as well.”

The results of the UWTS survey were recently shared with the Inter-Agency Leadership Team (IALT), a group of leaders from the major entities funding home visitation in Arizona. The IALT works to improve home visitation in Arizona through coordination, collaboration and data-driven decision making. The team is reviewing and analyzing national and local research and data; holding discussion forums with implementers to share strategies and challenges; and exploring best practices and policies at the implementer and funder level that promote workforce recruitment and retention.



Tough Choices Ahead as Tobacco Funding for Early Childhood Continues to Decline

Most public revenue sources fluctuate from year to year and are impacted by a variety of factors, including economic conditions, state and federal policy decisions, and changes in consumer spending. Tobacco revenue — the primary source of funding for FTF’s early childhood investments — is a great example of this. Over the past 15 years, FTF revenue has decreased dramatically due to a variety of factors, including the Great Recession, declines in the number of people smoking, and the advent of smoking alternatives, including e-cigarettes (for which FTF receives no revenue). As a result, the resources available to FTF to fulfill its critical mission are about \$48M less per year than in 2008. (See *Table 5*.)

The latest estimates from the Seidman Research Institute at Arizona State University show that, although the rate of decline will slow slightly, the decrease in revenue will continue over the next decade. The Institute compiles regular tobacco revenue estimates for FTF to assist the state Board with fiscal management and strategic planning. Historically, FTF revenues have fallen close to the expected levels in ASU’s estimates; accordingly, revenue is expected to decline

Tobacco Tax is Primary Source of Early Childhood Funds

First Things First is the only state funding source dedicated exclusively to the beginning of the education continuum, from birth to age 5. Emphasis is placed on getting services directly to children, families and professionals through a network of community providers. In State Fiscal Year 2022 (SFY22), First Things First received approximately \$129,069,621 in revenue, with tobacco tax revenues accounting for approximately \$116,456,931. Additionally, FTF received \$4,337,430 from investment earnings and \$8,275,260 from gifts, grants and donations. 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 SFY2022. Administrative expenses remain low at 7%.

Table 5: Tobacco Revenue for Early Childhood Declines Over Time

State Fiscal Year	FTF Tobacco Revenue Collections	+/- Change from Prior Year	% Difference from Baseline	\$ Change from Baseline
2008	\$164,805,113			
2009	\$159,974,131	Decrease	-2.9%	-\$4.8 million
2010	\$132,269,028	Decrease	-19.7%	-\$32.5 million
2011	\$130,701,444	Decrease	-20.7%	-\$34.1 million
2012	\$128,314,293	Decrease	-22.1%	-\$36.5 million
2013	\$125,768,040	Decrease	-23.7%	-\$39.0 million
2014	\$124,621,734	Decrease	-24.4%	-\$40.2 million
2015	\$122,115,615	Decrease	-25.9%	-\$42.7 million
2016	\$125,856,241	Increase	-23.6%	-\$38.9 million
2017	\$125,338,281	Decrease	-23.9%	-\$39.5 million
2018	\$121,746,973	Decrease	-26.1%	-\$43.1 million
2019	\$115,337,473	Decrease	-30%	-\$49.5 million
2020	\$120,672,218	Increase	-26.8%	-\$44.1 million
2021	\$118,117,184	Decrease	-28.3%	-\$46.7 million
2022	\$116,456,931	Decrease	-29.3%	-\$48.3 million
2023 Projected	\$113,259,557	Decrease	-31.3%	-\$51.5 million

by an additional 1.7% by 2032. If that occurs, over the next decade, FTF will have almost \$52 million less per year to invest in programs that strengthen families, improve the quality of and access to early learning and promote healthy child development than when it started (See Table 5).

The FTF state Board has been strategic and intentional in its efforts to ensure the sustainability of its current early childhood investments by commissioning the aforementioned revenue projections; continuing its successful investment strategy; monitoring and revising its adopted sustainability plan, as needed; and working with both public and private entities to leverage funds and maximize the resources available for early childhood programs. This

proactive and conservative approach to sustainability earned the Board high marks from state auditors in a 2017 report.

For the past eight years, the FTF Board has been able to backfill the revenue shortfalls and keep spending stable by utilizing its sustainability fund. However, due to the expected ongoing decrease in tobacco revenue, the Board cannot maintain historical spending levels without steering communities toward a significant fiscal cliff in the next four to eight years.

The Board’s Finance Committee — composed of Board and regional council members, as well as community experts in public financing — has reviewed historical spending,

as well as the latest revenue projections, and has recommended that the Board reduce program spending to \$116.6 million per year for the SFY24–27 funding cycle. This will mean that communities will have less to spend on programs for young children. Although this means tough decisions for FTF regional councils statewide, it ensures FTF will, once again, be able to keep funding levels stable for communities and families for the next eight years.

The Board also has worked to maximize impact despite these declining revenues, by prioritizing work in six major areas and encouraging regional councils statewide to fund strategies within those areas. (See *Strategic Plan section on Page 51.*)

In the meantime, FTF will continue seeking public and private investments in early childhood by sharing the success of its funded programs and providing opportunities for businesses, philanthropy and policymakers to leverage this infrastructure to quickly and efficiently expand services to babies, toddlers and preschoolers. SFY22 provided several examples of how these collaborations can be achieved, including:

- A partnership with the Arizona Department of Economic Security is expanding quality early learning options statewide. (See *Page 14.*)
- Collaboration with Pima County has provided access to quality early learning for almost 600 young children, with room for growth over the next few years. (See *Page 15.*)

- A recently approved agreement with the City of Phoenix will support greater stability in the workforce at Phoenix Sky Harbor Airport — the 8th busiest airport in the nation and the 11th busiest in the world — by providing child care scholarships for qualified airport workers with young children. (See *Page 16.*)
- And, an ongoing partnership with the United Way of Graham and Greenlee Counties provides teachers with much-needed support in dealing with the social, emotional and behavioral needs of young children.

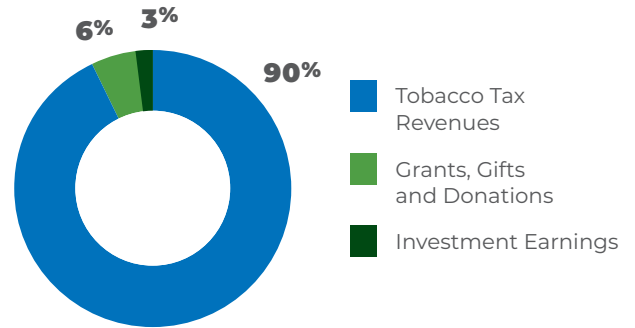
The courage and foresight of local leaders and organizations is helping to expand access to quality early childhood programs throughout the state. But with current revenues totaling just \$205 per young child, and the needs of babies, toddlers and preschoolers increasing, it is going to take significant investment from all sectors to ensure that Arizona is able to realize its vision of ensuring all kids are prepared for success in kindergarten and beyond!

Statewide and Regional Expenditures



SFY22 Revenue by Source

Tobacco Tax Revenues	\$116,456,931
Investment Earnings	\$4,337,430*
Grants, Gifts and Donations	\$8,275,260
TOTAL	\$129,069,621

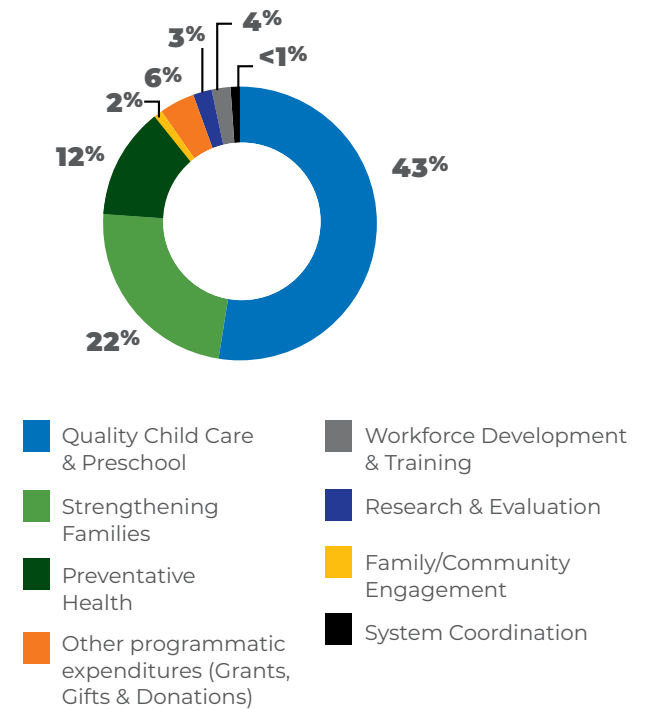


Note: Financial data presented are based on a modified accrual accounting methodology and are unaudited at time of publication and, as such, are subject to change.

* Does not include unrealized gain/loss on endowment account investment of \$40 million.

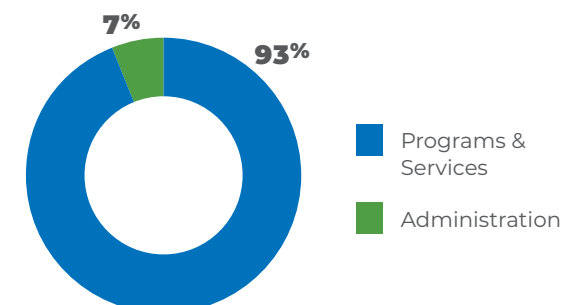
SFY22 Expenditures

Programs and Services	
Quality Child Care & Preschool	\$59,582,865
Strengthening Families	\$30,523,809
Preventative Health	\$16,568,045
Other programmatic expenditures (Grants, Gifts & Donations)	\$8,089,811
Workforce Development & Training	\$5,937,581
Research & Evaluation	\$3,543,956
Family/Community Engagement	\$2,563,515
System Coordination	\$1,060,429
Support Activity	
Administration & General	\$10,254,565

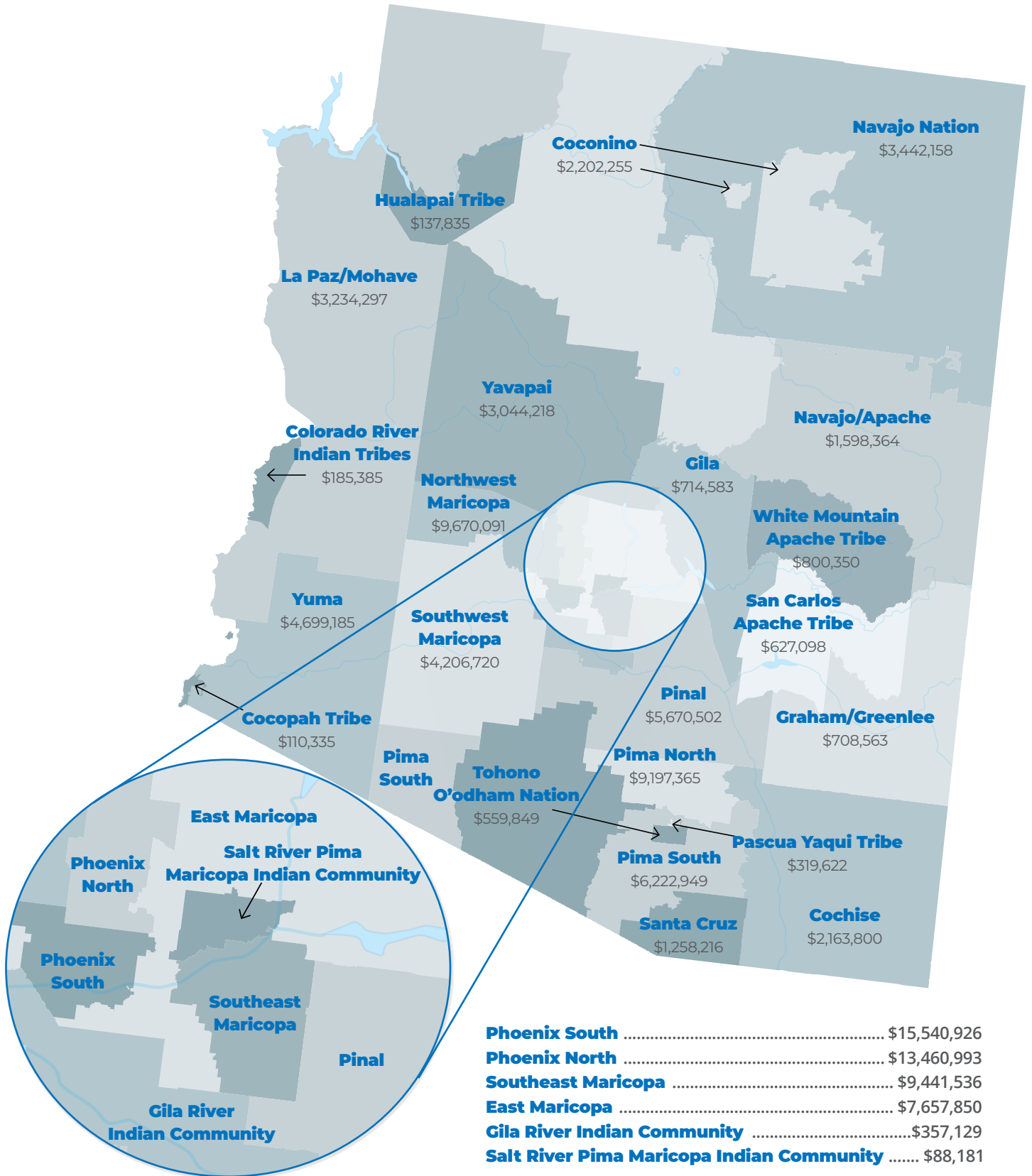


SFY22 Expenses by Category

Programs & Services	\$ 127,870,011
Administration	\$10,254,565
TOTAL	\$138,124,577

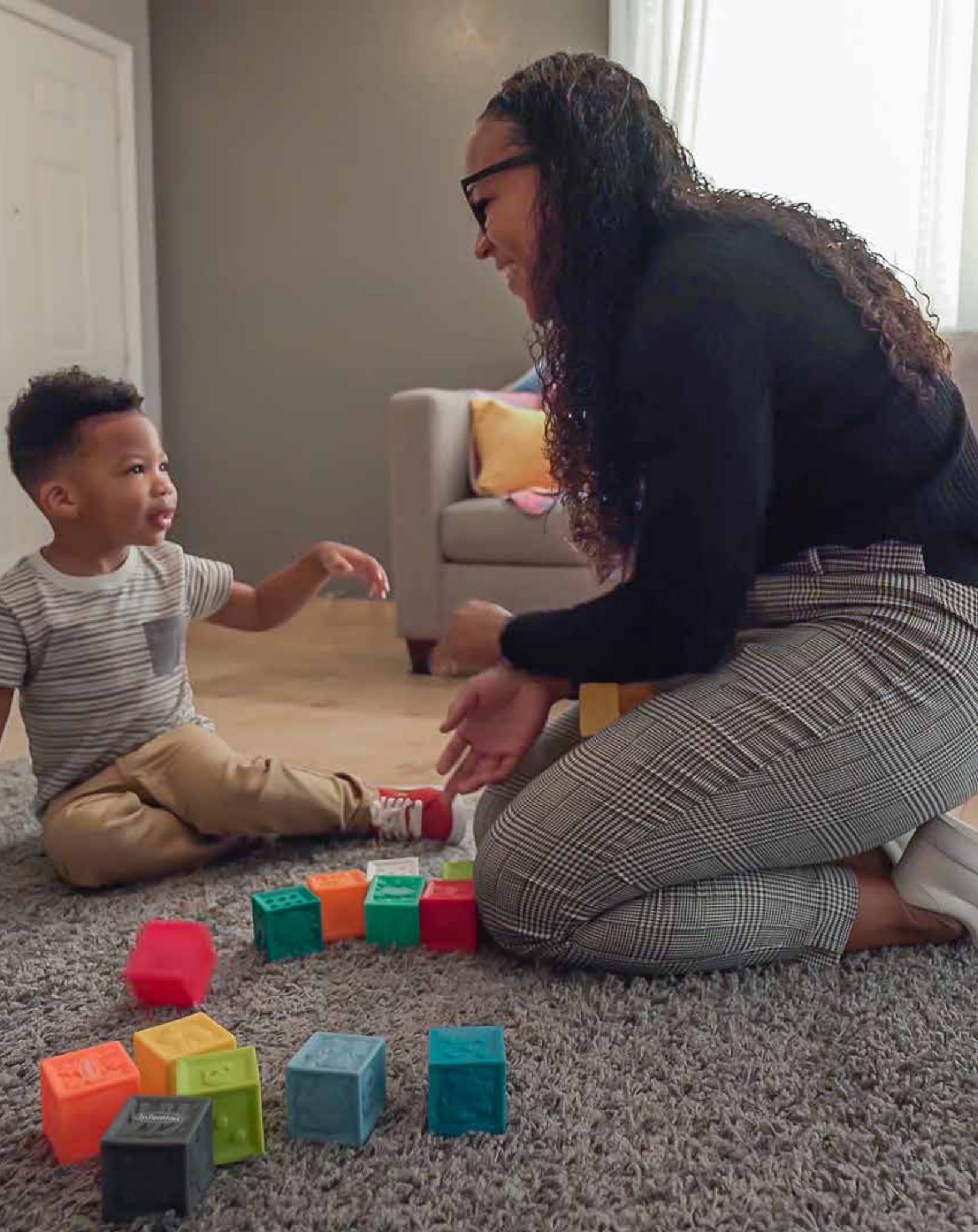


SFY22 Investments Across Arizona



Phoenix South	.....	\$15,540,926
Phoenix North	.....	\$13,460,993
Southeast Maricopa	.....	\$9,441,536
East Maricopa	.....	\$7,657,850
Gila River Indian Community	.....	\$357,129
Salt River Pima Maricopa Indian Community	.....	\$88,181

*This does not include \$8,667,060 in statewide programmatic expenditures.



Celebrating a Decade of Service to Arizona's Young Children

At FTF, decisions about which early childhood programs are funded locally are informed by recommendations to the state Board from volunteer regional partnership councils. These dedicated citizens represent the many facets of our community that have a stake in our young children's success, including parents, educators, child care professionals, health care providers, tribal communities, faith representatives, business leaders and philanthropists. Each member dedicates an estimated 120 hours each year to study the needs of their communities and work with local stakeholders to identify priorities for funding.

However, being a regional council member goes beyond the work done in meeting rooms. Each member, in their professional and personal lives, works to connect others in their community with the work of FTF, whether building awareness of the importance of early childhood among audiences ranging from families to policymakers, or establishing community partnerships that help to expand or enhance the local support for young children or their families. Although members serve staggered four-year terms, many individuals apply for and are selected to serve additional terms.

In SFY22, there were 14 individuals statewide who celebrated 10 years of service to young children in their communities. They join 78 individuals acknowledged for this milestone since 2018. This year, FTF thanks and celebrates the following 10-year champions for children and asked them to share their insight on what they appreciated most about serving on the regional council and why they would recommend council participation to others in their community. Below are a few of their answers.

Kameron Bachert, At-Large Representative
FTF Pinal Region

Dr. Lyn Bailey, School Administrator Representative
FTF Phoenix North Region

Jandi Craig, Business Representative
FTF White Mountain Apache Tribe Region

Rhonda Etsitty, At-Large Representative
FTF Navajo Nation Region

The Honorable Kami Hart, At-Large Representative
FTF Gila River Indian Community Region

Jessica Jarvi, Business Representative
FTF Phoenix South Region

Nolita April Noline, Child Care Representative
FTF San Carlos Apache Tribe Region

Susan Norton, Educator Representative
FTF Graham/Greenlee Region

Fernando Shipley, Business Representative
FTF Gila Region

Karen Stewart, Faith Representative
FTF Phoenix South Region

Flora Talas, Educator Representative
FTF San Carlos Apache Tribe Region

Mary Beth Turner, At-Large Representative
FTF Yuma Region

Kimulet Winzer, Health Representative
FTF Phoenix South Region

Jeremy Wood, Parent Representative
FTF Phoenix South Region

Kameron Bachert At-Large Representative, FTF Pinal Region

- The most rewarding part of serving on the regional council is being a voice for our community. Working with families, hearing their needs and then taking those needs to our council and making change. Having a voice in and of itself is amazing; when you can add change, positive effective change, well, that's immeasurable.
- Social media has given everyone the ability to have a voice. When you take that voice and positively collaborate with others, you create opportunities to better your community. Serving on the regional council allows that to happen and you see the change you make in real time.

Dr. Lyn Bailey

School Administrator Representative, FTF Phoenix North Region

- The most rewarding aspect of serving on a regional council has been the focused vision/mission that drives all the members of the council to set a specific purpose. The commitment and passion of not only the regional council members, but also FTF staff and grantees has shown that through a combined effort that we can and have made a difference for our birth to 5 year old future leaders. The results of our commitment is apparent in every meeting, including the data, both qualitative and quantitative, that supports our goals. But it is in the stories of our parents and children that really validates that we are making a positive difference.
- I would definitely recommend regional council service to those who are committed to working and collaborating with others who also have a passion for early childhood. If one becomes involved in a council, they will be supported by FTF assisting and supporting the council members. The fact that the council members have various perspectives lends to a truly collaborative decision making process. If one becomes involved, they will be part of a positive and productive statewide organization that has produced a significant effect on the physical, social, emotional and cognitive growth in our youngest population.

Jandi Craig

Business Representative, FTF White Mountain Apache Tribe Region

- As a member of the White Mountain Apache Tribe, I know firsthand what it means to come from a collective society, and I find it absolutely rewarding to know that our decisions on the regional council directly affect the children and families I love, know and am related to. I appreciate knowing there are resources for our families, and I feel inspired to continue building quality programs and opportunities for our little ones, because they deserve only the best. I also appreciate learning from my experience so that I can work on breaking generational cycles and be a better parent to my babies.
- I always say that as Apaches, we are the experts of what we need in our communities. I encourage anyone and everyone who is part of a young child's life to serve on the regional council, to help form and guide the future for our little ones.

Rhonda Etsitty

At-Large Representative, FTF Navajo Nation Region

- The most rewarding part about being on the FTF Navajo Nation Regional Council is the opportunity to collaborate with a great leadership team with a common goal to provide and support our young children and their families.
- Participating on the regional council provides the opportunity to voice concerns and share the needs of young children and their families so they have access to support systems needed to have a healthy life.

The Honorable Kami Hart

At-Large Representative, FTF Gila River Indian Community Region

- I enjoy seeing the updates from the programs we fund and support, especially seeing the good work they are doing in the community for GRIC families.
- Serving on the regional council has allowed me to be a part of the programs and services that are offered for children under 5 years old and the family members caring for them. I am able to serve the Gila River Indian Community with more knowledge on ways to help families and young children thrive.

Jessica Jarvi

Business Representative, FTF Phoenix South Region

- The most rewarding aspect of serving on the regional council is the ability to innovate and invest in the lives of young children, and to see the positive outcomes of those initiatives. The work being done at FTF to connect and build the early childhood system is without question an investment in a brighter future for our region and our state.
- As a regional council member, I am able to come to the table with people from different fields and backgrounds who are willing to spend dedicated time thinking critically about how best to address the needs of young children. The quality and impact of the work done at the regional council level is truly significant.

Nolita April Noline

Child Care Representative, FTF San Carlos Apache Tribe Region

- Most rewarding for me is knowing that I am helping my people in our community by bringing programs that will help educate and support the parents and children. Putting family first is crucial, and helping our families understand this is important to me.
- People should serve on a regional council because it's an opportunity for them to help their community - to be a voice for our children.

Susan Norton

Educator Representative, FTF Graham/Greenlee Region

- Serving on the council is a wonderful opportunity to collaborate with others in the community to address the needs of children and families in our area. Our council feels like a united team, focused upon the mission of FTF and serving families in Graham and Greenlee counties. It's amazing to see what can happen when a group of individuals combine their efforts to address the needs of our region. I consider it a great privilege to serve with council members and FTF leaders. One of my favorite parts of the year is when we receive our impact report. Each of those numbers represent individual children and families that have benefitted from the work of our FTF regional council. It is rewarding to see the ways that our efforts have been a positive influence in the lives of our region's families!
- Joining forces with others in the community enables our First Things First regional council to accomplish what an individual entity could not accomplish on their own. The diversity of council members' backgrounds and the reach of their influence combine in a beautiful way to identify, address and meet the needs of young children in our area. I consider my work on the regional council one of my most influential opportunities. Providing a child with a solid foundation will contribute to their school readiness and success in life. Serving on the FTF regional council not only has an impact upon today's world, but it can truly make the future brighter for children, families and our society as a whole!

Fernando Shipley

Business Representative, FTF Gila Region

- I am no expert on early childhood development and wondered how much I could really contribute to our regional council. However, owning my own business and my network of contacts has brought value to our discussions and decisions. I may not know everything but I do know that helping kids prosper and thrive is worth every minute of work we put into it.
- If you have a passion for helping kids then I would recommend you consider serving on a regional council. We help to identify the most important needs affecting our youth and are able to fund strategies to address those needs. It's your chance to be a strong voice for them.

Karen Stewart

Faith Representative, FTF Phoenix South Region

- What I find most rewarding is seeing the results of FTF's work with children and their families. This was specially reinforced as our work continued during the pandemic. FTF ensured that our grantees could pivot to meet the demands of the pandemic. And the funding ensured that staff was retained. Serving on the regional council ensured I had a voice for our community's children. Their services had a minimal interruption. Working with an organization on our regional council that values these things as much as I do is the reward.
- I recommend the regional council to others because it provides those interested in investing in the youngest members of our community an opportunity to serve! It gives you a seat at the table with an organization that is facilitating change through programs and services through our grantees and ensuring community partners and larger agencies are living up to helping all preschoolers have a step up in their education.

Flora Talas

Educator Representative, FTF San Carlos Apache Tribe Region

- I particularly enjoy the opportunity to celebrate community successes, provide leadership and see the results of our hard work throughout the community.
- The most rewarding aspect of regional council service is the interaction with people. The relationships we develop during the course of the work are extremely gratifying.

Mary Beth Turner

At-Large Representative, FTF Yuma Region

- Serving on the FTF Yuma Regional Partnership Council has been one of the most rewarding phases in my life. The people that I have met and the opportunities that I have been given to learn and grow in my understanding of young children and their families have helped me both personally and professionally. The FTF leadership has always had a “North Star” that I agree with and they have always shared that vision with professionalism and creativity.
- I would recommend serving on regional councils to others who have a vested interest in bettering the lives of children and families in their communities. Sometimes change is slow and the work is challenging, but when creative minds with a shared purpose come together, great things can happen.

Kimulet Winzer

Health Representative, FTF Phoenix South Region

- There were many rewarding moments serving on the regional council, not the least of which is serving with other Arizonans with a commitment to improving the lives of others. The most rewarding was helping parents find resources that were immediately impactful to their lives and their child’s development - particularly focusing on playtime doubling as development time.
- Regional council service serves to provide leadership development opportunities for the individual committing time to be of service, allows an individual to make a difference in the lives of a vulnerable population, and helps to make our future state more resilient through our investment in early childhood education.

Jeremy Wood

Parent Representative, FTF Phoenix South Region

- The FTF regional council is a great group of diverse people all coming together to help young children in the community. It has been rewarding to be on such a team that after many hours of discussion always tends to land in agreement on how to best move the work forward.
- Serving on a regional council is an eye opening experience of all that goes into making Arizona a better place for kids to grow up.

In Memoriam

In January, the Gila River Indian Community lost a long-time champion of young children — Priscilla Antone. Her community service included representing her people on the Gila River Indian Community Tribal Council, as well as serving for more than 11 years on the local First Things First regional council.

“My mother, Priscilla Antone, was excited to be on the First Things First regional council,” said her son, Michael Cross. “This committee enlightened her mind to the importance of early childhood development and she would often comment, ‘It all starts in the home,’ meaning that a child learns first what they see in the home.”

Cross added that his mother’s focus was always on education and health care.

“She has left an imprint on many lives and definitely did her part in helping and encouraging her community and her family,” he said.

That is certainly true for those whom she worked with on the FTF Gila River Indian Community Regional Council. FTF regional council Chair Sandra Nasewytewa, who served on the regional council with Antone for eight years, said her wealth of knowledge and dedication are missed by her colleagues.

“Her greatest contribution was her unwavering representation of the children - they were always foremost in her mind,” Nasewytewa said. “She was a pillar of the community; a woman grounded in her faith and family, which included her biological relatives, fellow church members, co-workers, co-volunteers, contemporaries and friends. Her passing has acutely impacted many lives.”

One of those impacted is FTF Regional Director Joshua Billison, who started working with the regional council three years ago.

“Priscilla had a very warming presence; she made you feel included in everything she did and had a story to tell every time I talked to her,” Billison said. “Even though we didn’t get to work with one another as much as we would’ve liked, she made me feel included in Community work. She embraced me and introduced me to people I work with regularly today. I appreciate her for supporting me as I was new to the Community.”

The two worked in person together only about six months before the pandemic forced all work to go online.

“She had a very strong mindset and attitude that assured me things were going to be ok. She simplified our plans and always allowed for conversation,” Billison said, adding that the logistics of online meetings brought out another aspect of Antone’s personality — her sense of humor.

“Priscilla would have me on the phone and the computer at the same time; she’d laugh because she’d be talking into both but I still couldn’t hear her,” Billison recalled. “Then when we’d figure it out, she would joke with me and laugh. Those were good times and I miss her.”



The More
Mammals
You Meet!

Bill Martin Jr. / Eric Carle

Brown Bear,
Brown Bear,
What Do You See?

New Strategic Plan Focuses on Achieving Maximum Impact

For First Things First, much of State Fiscal Year 2022 was spent planning for the future. With tobacco revenue continuing to decline (*see Page 36*), the Board was determined to focus on maximizing FTF's impact, despite diminishing resources, while still honoring the local flexibility and decision-making that has been the hallmark of FTF's governance structure.

Almost 250 Arizonans participated in the two-year, in-depth planning process, including the FTF Board and its Strategic Planning Committee; FTF regional council members representing Arizona's rural, urban and tribal communities; as well as state and regional partners with expertise across early childhood programs.

The most intensive phase of strategic planning was the work of 13 Strategy Area Review groups that worked for nine months to complete detailed analyses of FTF's efforts. The groups included members of all the stakeholders noted in the previous paragraph and their review included:

- work being done at the statewide and regional levels, including implementation challenges;
- the impact and effectiveness of that work;
- the alignment of that work with state laws governing FTF;
- others entities' responsibilities and authority in the current work, as well as partners' efforts; and
- potential innovative practices and alternative approaches.

After this extensive analysis, as well as review and feedback from regional council leaders and opportunities for public comment, the Board decided the majority of FTF's work moving forward (SFY24 and beyond) should occur in six prioritized areas:

1. Educating families and caregivers;
2. Helping families navigate and connect to resources;
3. Improving the quality of early learning;
4. Expanding access to quality care;
5. Professional development for early childhood educators; and
6. Building awareness of the importance of early childhood development and health.

These six areas currently account for 85% of FTF funding statewide and include 27 programmatic strategies. In the future, the Board recommended regional councils target 80% of funding to the prioritized areas. The Board appreciates the need to maintain flexibility for individual FTF regions to address unique local considerations. Accordingly, strategies in non-prioritized areas may still be funded, as long as certain conditions are met, including:

- no demonstrated need for the prioritized strategies in the region;
- lack of capacity in the region to implement the prioritized strategies;
- presentation of regional data to support funding less than the 80% recommended amount in the prioritized areas (i.e. to spend more than 20% of funding in the non-prioritized areas);
- and, if the proposed work outside the prioritized areas is the primary responsibility of other system partners, the region will need to demonstrate how FTF's work is non-duplicative and how those partners will be engaged in FTF's efforts to increase coordination, collaboration and accountability.

FTF regional councils statewide will use this guidance to develop their local funding plans, which will be presented to the Board in January 2023. Central to these efforts will be ensuring the plan promotes equity and supports under-resourced and underserved children and their families. The Board established guiding principles that will shape the implementation of the SFY24-27 Strategic Plan. These are listed below, as is FTF's Equity Vision Statement.

Strategic Plan Guiding Principles

1. With an emphasis on the whole child, FTF will serve Arizona's children:
 - birth to age 5, and their families and caregivers;
 - across diverse socio-economic, geographic, cultural, and educational backgrounds;
 - with a priority on lower socio-economic, at-risk children and their families; and
 - a focus on the cognitive, physical, health, and social and emotional well-being of each child.

2. FTF's Board in conjunction with Regional Partnership Councils will continue to partner to:
 - equitably and effectively serve both urban and rural communities;
 - collaborate with state agencies and tribal nations; and
 - foster public/private collaboration and collective impact.

3. FTF will continue to lead the early childhood system, with a focus to:
 - leverage its subject matter expertise across the state;
 - convene and align stakeholder partners; and
 - position for sustainable equitable statewide future funding

4. FTF will foster a data-informed approach, that:
 - continuously improves programs and strategies; and
 - actively promotes a more vibrant data sharing network amongst our partners.

First Things First Equity Vision Statement

Advancing equity is essential to First Things First's mission and we aspire to embody our vision for diversity, equity and inclusion through all facets of our work.

To be effective partners and contribute to a world in which Arizona's children birth to age 5 of all backgrounds have access to high-quality early childhood experiences, we must create and maintain an equitable workplace, work in partnership with the communities we serve and ensure that our funding practices align with our equity-centered values, particularly focusing on those who are most in need.

First Things First recognizes the pervasive inequities historically and currently faced by the Black, Indigenous and Latino communities and all people of color, and we strive for a world in which they will thrive. We also recognize that individuals and groups have been marginalized due to factors such as race, sex, sexual orientation, gender identity, age, mental and physical ability, national origin, income, language and religious affiliation and that people of color are particularly affected across these factors. We commit to increasing our understanding about these and all matters that create inequities and to bettering our actions internally and among the communities we serve.

This important work starts from within. As such, we strive to cultivate and maintain a workplace that:

- Reflects the diversity of our state within all levels of the organization (i.e., staff, leadership, regional partnership councils and state Board)
- Cultivates a community in which all members are welcome, seen, heard and valued
- Supports and expects each individual to engage in candid, introspective learning about equity and inclusion
- Engages an intentionally diverse, representative set of voices in key decision-making, centering on the voices of families and the community whenever possible
- Employs equitable workplace practices that yield high satisfaction, morale and career success consistently across all demographic groups
- Responds swiftly to address workplace inequities
- Ensures that our work as a funding organization – from planning to implementation to assessment – reflects our commitment to equity

Through our DEI strategic priorities and individual growth, we will be better able to meet the needs of Arizona's youngest children, serve as a trusted ally for equity and fulfill our vision that all Arizona's children are ready to succeed in school and in life.

The FTF SFY24–27 Strategic Plan focuses on FTF’s unique role in achieving outcomes that have a positive impact on Arizona’s youngest children, as well as the families, caregivers and professionals who support them. But, one organization cannot do this alone. FTF remains committed to collaborate with partners — including state agency partners, philanthropy, businesses, faith communities and policymakers — to ensure the equitable and effective support of the cognitive, physical, social and emotional well-being of all young children.

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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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