Healthy Families Arizona Annual Evaluation Report FY2013

July 2012 - June 2013





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Executive Summary

According to the 2013 KIDS COUNT Data Book put out by the Annie E. Casey Foundation, Arizona has dropped from a ranking of 46th down to 47th in the nation in terms of child well-being. This indicates that children in Arizona are more at risk for poor outcomes both in childhood as well as when they transition to adults. The Healthy Families Arizona program serves families with multiple stressors and risk factors that can increase the likelihood that their children may suffer from abuse, neglect, or other poor outcomes.

The Healthy Families program model is designed to help expectant and new parents get their children off to a healthy start. Families are screened according to specific criteria and participate *voluntarily* in the program. Families that choose to participate receive home visits and referrals from trained staff. By providing services to underresourced, stressed, and overburdened families, the Healthy Families Arizona program fits into a continuum of services provided to Arizona families.

The Healthy Families Arizona Program

Healthy Families Arizona is in its twenty-second year, and is modeled after and accredited with the Healthy Families America initiative under the auspices of Prevent Child Abuse America. In State Fiscal Year 2013, with combined funding from the Arizona Department of Economic Security (DES), First Things First (FTF), and the Maternal Infant Early Childhood Home Visitation (MIECHV) funding, Healthy Families Arizona provided services to families in 13 counties through 12 sites and 38 teams.

Who Does Healthy Families Arizona Serve?

A total of 4,046 families had data submitted for evaluation purposes during the current study year from July 1, 2012 through June 30, 2013. The evaluation of the statewide Healthy Families Arizona system covers only families with children that are 24 months old or younger (n=3,195). In order to have a meaningful evaluation of the program effects, only the families that receive at least a minimal amount of program exposure are included. This further restricts our dataset to 2,837 families that have received at least four home visits. Approximately, one-fourth of the families enter in the prenatal period and the average length of time in the program is just under 12 months.



Healthy Families Arizona program families have a significant number of maternal and infant risk factors at entry into the program compared to the overall state rates. The mothers enrolled into Healthy Families Arizona are more likely to be single parents, unemployed, undereducated, living in poverty, and receiving AHCCCS. The infants are also more likely to suffer from birth defects, be of low birth weight, be born preterm, and have positive alcohol or drug screens at birth than for Arizona as a whole as reported in state and federal data.

Risk Factors of Mothers	Prenatal Families	Postnatal Families	Arizona State Rates
Teen Births (19 years or less)	16.5%	11.7%	9.5%
Births to Single Parents	77.3%	71.8%	45.2%
Less Than High School Education	41.3%	41.3%	19.7%
Not Employed	76.3%	80.7%	48.6%
No Health Insurance	5.8%	5.2%	3.5%
Receives AHCCCS	87.5%	86.1%	53.0%
Late or No Prenatal Care	27.2%	34.6%	17.8%
Median Yearly Income	\$9,600	\$10,800	\$50,752
Risk Factors for Infants	Prenatal Families	Postnatal Families	Arizona State Rates
Born < 37 weeks gestation	10.1%	14.9%	9.3%
Birth Defects	1.7 %	1.3%	1.1%
Low Birth Weight	9.1%	11.9%	6.9%
Positive Alcohol/Drug Screen	1.3%	8.6%	0.5%

Sources: 2011 and 2012 data from the Arizona Department of Health Services Vital Statistics records, and the U.S. Census Bureau, American Community Survey, 2012

Outcomes for Families and Children Participating in Healthy Families

The Healthy Families Parenting Inventory (HFPI) revealed statistically significant improvement on all subscales at 6 months and all but social support at 12 months. This indicated that Healthy Families Arizona participants are continuing to see reductions in their risk factors related to child abuse and neglect.

Parents in Healthy Families report significant changes in:

- Increased social support
- Increased problem solving
- Increased personal care
- Improved mobilization of resources
- Increased parenting role satisfaction
- Improved parent/child interaction
- Improved home environment
- Improved parenting efficacy
- Decreased depression



Child Development and Wellness

Timely immunizations remain an important component for positive child health and development outcomes. The immunization rate for the children of Healthy Families Arizona participants by 24 months was 69.4% compared to a 66.5% immunization rate for 2 year-olds in the state of Arizona as a whole. Healthy Families Arizona also educates families on home safety practices. Results indicate that families who have been in the program for 12 months: 99.7% of participants are using car seats, 96.6% have poisons locked, and 89.8% have working smoke alarms. Developmental delays are screened for at regular intervals in the Healthy Families Arizona program to assure that children who need further services are referred appropriately. The statewide performance measure goal of 85% of two year-old children screened for developmental delays was exceeded this year.

Child Abuse and Neglect

Records of child abuse and neglect incidents (substantiated) were examined for program participants who had received services for at least six months. The statewide program performance measure goal is for 99.7% of families to have no substantiated reports to child protective services. This year the percent of families with no child abuse or neglect incidences was 97.1%, and did not meet the performance measure goal. A total of 60 Healthy Families Arizona families had a substantiated case of child abuse and/or neglect out of 2,075 families that had participated in the program for at least 6 months. Healthy Families Arizona teams also provided home visitation services to 575 families that were involved with Child Protective Services.

Mothers' Health, Education, and Employment

Healthy Families Arizona also seeks to improve the health, education, and employment outcomes among mothers so that they are better equipped to meet their families' needs. Research shows that spacing pregnancies at least 24 months apart has positive health benefits for the mother. This year less than 1% of mothers with a subsequent pregnancy waited over 24 months before they got pregnant with their next child. The number of mothers enrolled in school has continued to decrease in recent years, with 16.4% enrolled at 1 year of program participation, and 12.8% at 2 years. The home visitors also complete screenings and provide referrals for substance abuse problems. Substance abuse continues to be a difficult problem for families. Approximately 44% of the participants were screened as having a history of substance abuse problems at intake, with 12% continuing to have problems after six months in the program.



Introduction

Healthy Families Arizona is in its twenty-second year after its establishment as a home visitation service for at-risk families initiative of the Arizona Department of Economic Security (DES) in 1991. The Healthy Families Arizona program is modeled after the Healthy Families America initiative and is accredited by Prevent Child Abuse America. Healthy Families America began under the auspices of Prevent Child Abuse America (formerly known as the National Committee to Prevent Child Abuse) in partnership with the Ronald McDonald House Charities and was designed to promote positive parenting, enhance child health and development, and prevent child abuse and neglect. Healthy Families America has 539 affiliated program sites in 40 States, the District of Columbia, and all five US territories. Healthy Families America is approved as an "evidence-based early childhood home visiting service delivery model" by the US Department of Health and Human Services.

The Healthy Families program model is designed to help expectant and new parents get their children off to a healthy start. Families are screened according to specific criteria and participate *voluntarily* in the program. Families that choose to participate receive home visits and referrals from trained staff. By providing services to underresourced, stressed, and overburdened families, the Healthy Families Arizona program fits into a continuum of services provided to Arizona families.

Healthy Families Arizona Statewide System

Healthy Families Arizona is established as a statewide system. The Office of Prevention and Family Support under the Arizona Department of Economic Security is designated as the Central Administration for all accredited Healthy Families Arizona sites. Central Administration performs a variety of functions designed to support the multi-site system including quality assurance, evaluation, training and technical assistance, system-wide policy development, and administration. Each of these functions covers a set of activities and tasks that guide operations at the Central Administration level as well as at program level. The funding structure for the Healthy Families Arizona Program is supported by three state agencies: the Arizona Department of Economic Security, First Thing First, and the Arizona Department of Health Services. The DES Central Administration supports collaboration with the three state agencies in a fully integrated system to enhance the quality of Healthy Families Services.



In State Fiscal Year 2013, funding for the statewide system included \$6,570,540 from DES, \$5,597,047 from FTF, and \$2,009,985 from MIECHV. This represents a \$1.8 million increase in funding from the previous year. The combined funding of \$14,177,572 from DES, FTF, and MIECHV allows the Healthy Families Arizona sites and teams to provide services to families living in 13 counties and 231 zip code areas around Arizona. For the 2013 state fiscal year, there were 12 sites and 38 home visitor teams (15 DES funded, 9 FTF funded, 6 MIECHV funded, and 8 receiving funding from more than one source). See Exhibit 1 for a list of teams funded in fiscal year 2013.

Exhibit 1. Healthy Families Arizona Program Sites as of June 2013

Site	Number of Teams
Cochise/Santa Cruz County	2
Coconino County	3
Graham/Greenlee County	1
Lake Havasu (Mohave and La Paz Counties)	1
Maricopa County	14
Mohave County	2
Navajo County	2
Pima County	6
Pinal County	3
Verde Valley (in Yavapai County)	1
Yavapai County	1
Yuma County	2

KIDS COUNT: The Status of Children Nationally and in Arizona

Since 1990, the Annie E. Casey Foundation, a private national philanthropy, has compiled and published an annual *KIDS COUNT Data Book* (available at http://datacenter.kidscount.org/publications/databook/2013). The purpose of KIDS COUNT is to provide national and state level data on the well-being of children living in the United States. The KIDS COUNT indicators are collected across all states at least biannually for children from birth through high school. The 2013 *KIDS COUNT Data Book* consists of 16 indicators within four domains. The four domains with their indicators are:

- Economic Well-Being
 - Children in poverty
 - Children whose parents lack secure employment
 - o Children living in households with a high housing cost burden
 - Teens not in school and not working
- Education
 - Children not attending preschool
 - Fourth graders not proficient in reading
 - Eighth graders not proficient in math
 - High school students not graduating on time
- Health
 - Low-birth weight babies
 - Children without health insurance
 - o Child and teen deaths per 100,000
 - Teens who abuse alcohol or drugs
- Family and Community
 - o Children in single-parent families
 - Children in families where the household head lacks a high school diploma
 - Children living in high-poverty areas
 - o Teen births per 1,000

At the national level, the long-term changes in policy in education, health, and safety have led to improvements in the categories of Education and Health according to the *KIDS COUNT Data Book*. More children have health insurance due to the Children's Health Insurance Program (CHIP) and it's reauthorization in 2009 (CHIPRA) which provides health insurance to low-income children who do not meet the eligibility requirements for Medicaid. However, 7% of children still lack health insurance.



Nationally, in the Family and Community domain, fewer children live with parents who do not have a high school diploma (15%), and the rate of teen births has dropped to 34 per 1000 births. However, more children are living in single-parent households (35%), and more are living in high-poverty areas (12%). In Arizona these rates are higher with 18% of parents lacking a high school diploma, 42 teen births per 1000, 40% of children living in single-parent households, and 19% of children living in high-poverty areas.

The Economic Well-Being status of children has continued to worsen nationally. More children are living in poverty (23%), more parents lack secure employment (32%), and more children live in households with high housing costs (40%) than in 2005. The 2013 *KIDS COUNT Data Book* notes that even though the national unemployment rate has declined, the number of poor children has continued to rise. An estimated 45% of all children live in households below 200% of the federal poverty level.

The National indicators are used to show trends over time in child well-being. For states, the most currently available data is collected and states are ranked within each category based on the indicators and given an overall ranking. Arizona is ranked 47 overall, which is a drop from 46 in last year's ranking. Arizona is also ranked 47 in the Economic Well-Being domain. For Education, and Family and Community rankings, Arizona is ranked 46. Arizona saw a large drop in the category of Health, coming in at rank of 45 compared to last year's 36 ranking. Overall, Arizona ranked worse than the national trend in 15 of the 16 indicators. The percentage of low birth weight babies at 7.1% was the only indicator better than the national average of 8.1%. In summary, Arizona does not score well in the realm of child well-being. This indicates that children in Arizona are more at risk for poor outcomes both in childhood as well as when they transition to adulthood.

Patrick McCarthy, the president and CEO of The Annie E. Casey Foundation, stresses the importance of two-generation strategies in the introduction of the 2013 *KIDS COUNT Data Book*:

"Although we need to invest more in early childhood, we should focus our resources on strategies with evidence of high returns in child well-being and healthy development. For example, we should weave together existing programs that support new parents – such as home visiting programs and programs that help parents fulfill their roles as their children's first and most important teachers – with high-quality early childhood and prekindergarten programs, to ensure that every child enters school ready to learn"

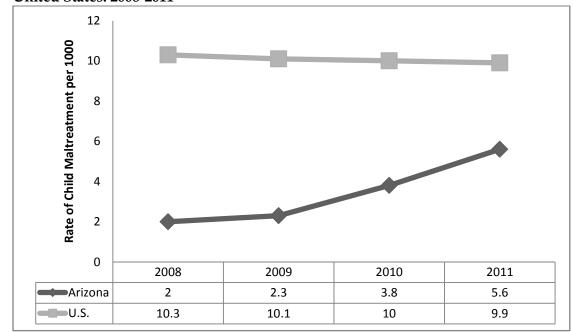


Child Welfare

In 2012, the Children's Bureau within the U.S. Department of Health and Human Services provided a report to Congress, *Child Welfare Outcomes* 2008-2011. Data in this report is provided from the National Child Abuse and Neglect Data System (NCANDS) and the Adoption and Foster Care Analysis and Reporting System (AFCARS).

In 2011, there were approximately 742,000 confirmed child maltreatment incidents in the United States. This translates to 9.9 child victims per 1,000 children. In Arizona there were a total of 9,146 child maltreatment victims in 2011. This translated to a rate of 5.6 per 1,000. While the Arizona rate is lower than the national rates, the rates in Arizona have increased since 2008, while the national rates have decreased. As Exhibit 2 shows, the child maltreatment victim rate in Arizona has more than doubled since 2008.

Exhibit 2. Child Maltreatment Victim Rate per 1000 Children in Arizona and the United States: 2008-2011



The *State Fiscal Year* 2012 *Annual Welfare Reform Report* from the Arizona Department of Economic Security provides even more details. In 2011 there were 34,904 reports of child maltreatment received. This increased 16% to 40,524 in 2012. The average monthly number of families that were receiving comprehensive in-home services from Child Protective Services was 5,506 in 2012, up from 5,332 in 2011.

The Healthy Families Arizona Program collaborates with Child Protective Services in a variety of family support services including serving families in Substance Exposed Newborns Safe Environment Program (SENSE). Infants who have been exposed in utero to illegal substances are at a high risk of neglect; both physically and emotionally. Other common factors may be low birth weight and premature birth. Additionally there is a strong potential for developmental delays and medical problems that may arise from the prenatal drug exposure.

In state fiscal year 2013, Healthy Families Arizona served 575 families statewide that had some level of involvement with Child Protective Services including SENSE cases. Healthy Families Arizona services included participating in staffing with Child Protective Services with parents' permission, and offering support and connection to vital services including health care, child care, housing, educational and employment services. Furthermore, Healthy Families Arizona provided education on child development, nutrition, safety, parent-child interactions, and discipline.

The increase in child maltreatment victims in Arizona is indicative of a greater need for prevention services. One of the primary goals of the Healthy Families Arizona program is the reduction of child abuse and neglect. Since its inception, Healthy Families Arizona has sought to provide a continuum of services for children and families, so that families are served appropriately as their needs increase or decrease. Although the goal of Healthy Families Arizona is to prevent abuse and limit the need for Child Protective Services, the program provides an opportunity for observation and monitoring of families that can bring safety to a child when needed.



In this Report

The purpose of the 2013 Healthy Families Arizona Annual Evaluation Report is to provide information on families' outcomes, program performance measures, process and implementation information, and evaluation information that can be used to guide program improvement. This report covers the state fiscal year 2013 from July 1, 2012 to June 30, 2013.

The evaluation of Healthy Families Arizona includes both process and outcome evaluation. The process evaluation includes an update of statewide implementation, describes the characteristics of families participating in the program and provides narratives from families participating in the program. The outcome evaluation examines program outcomes and looks at the program's impact across a number of measures, with comparisons to previous years when appropriate and available. Detailed appendices provide specific site data on process and outcome variables. The description of evaluation methodology outlines the methods used for each part of the report.

The 2013 Annual Evaluation Report has been designed to provide critical information and reporting of yearly data for basic accountability and credentialing and is limited to only those families within 24 months of the birth of the infant. Currently, the Healthy Families Arizona evaluation also includes the creation and distribution of quarterly cumulative performance reports for ongoing program monitoring. These reports are used during quality assurance and technical assistance site visits to review and assess progress on key program activities, including administration rates for developmental screenings and parenting skills inventories, attainment of immunization data, and substance abuse screening.

Evaluation Methodology

The Healthy Families Arizona evaluation includes both a basic process evaluation component and an outcome evaluation component. The primary questions for the process evaluation are: Who participates in the program and what are the services provided? The primary question for the outcome evaluation is: What are the short and long term outcomes for families in the program?



The goal of the process component of the evaluation is to describe the participants involved in the Healthy Families Arizona program and document the services they receive. In the process evaluation, the program "inputs" such as numbers served, participant characteristics, and services received are described.

Also, information relative to Critical Elements and expected standards from Healthy Families America is provided as a benchmark for assessing some aspects of the implementation. The primary data for the process evaluation comes from the management information system developed to process data for Healthy Families Arizona. Sites are required to submit data that captures enrollment statistics, number of home visits, administration of assessment and outcome forms, descriptions of program participants, types of services provided, etc.

The overall aim for the outcome study is to examine program effects and outputs, at both the parent and child level on a number of different outcomes. The evaluation team has worked together with program staff to develop and select key program measures that are used to provide feedback and to measure the program's ability to achieve specific outcomes. The primary activities of the outcome evaluation are to: examine the extent to which the program is achieving its overarching goals, examine the program's effect on short term goals, and examine the extent to which participant characteristics, program characteristics, or community characteristics moderate the attainment of the program's outcomes. For most of the outcome measures, Healthy Families home visitors collect baseline (pretest) data and follow-up data at different time points of program participation: 6 months, 12 months, 18 months, and 24 months. The outcome evaluation also includes examination of substantiated cases of child abuse and neglect obtained through the Department of Economic Security's CHILDS database.

The process and outcome components of the evaluation were developed and guided by the logic models for both the prenatal and postnatal programs. Logic models for the prenatal and postnatal components of Healthy Families Arizona are presented in the Appendices.



Program Updates

Expansion of the Quality Assurance and Training Assistance Team

Within the first quarter of state fiscal year 2013, two Additional Quality Assurance and Training Assistance (QA/TA) coordinators were hired to expand the quality assurance and training assistance team within DES Central Administration. Both positions were made possible thanks to the Maternal Infant, Early Childhood Home Visiting Competitive Grant. The QA/TA team is formed of four members who participate in the annual site visits to review the standards of best practice and provide technical assistance based on the site's needs and issues. With the expansion of the QA/TA team, the Department of Economic Security (DES) Central Administration re-structured the roles and responsibilities of the QA team to increase leadership and overview of various program components.

Training and Professional Development Opportunities

Several professional development opportunities have been made possible during state fiscal year 2013 for Healthy Families Arizona staff.

- In September, 2012 a webinar on the Protective Factors Approach was offered to all Healthy Families staff. The webinar included a broad overview of the protective factors and practical application of the Factors in child abuse prevention and intervention.
- In September, 2012 a few Healthy Families staff participated in the first Arizona Home Visitors Conference sponsored by the U.S. Department of Health and Human Services through the MIECHV grant. The conference was organized by Strong Families Arizona. Strong Families Arizona is Arizona's home visiting alliance focusing on collaboration among providers to maximize resources, build local capacity and improve accessibility for families to the services they need. The conference provided a wide variety of workshops and presentations on prevention and intervention related topics.
- In November, 2012 DES Central Administration staff and several program supervisors and managers attended the ASQ-3 & ASQSE Train-the-Trainer. The training provided in-depth, step-by-step seminar on the implementation of the screening tools including scoring, interpretation, discussion of tools' results with families, and identification referral considerations, etc.



- In February, 2013 DES Central Administration and a few Healthy Families
 Arizona staff were able to participate in the third annual National Summit on
 Quality in Home Visiting Programs in Washington, D.C. The conference
 offered a forum to learn about the latest developments in the field and how
 evidence-based models are supported by strong policies and practices in early
 childhood systems.
- In April 2013, DES Central Administration and two staff from the Winslow Site attended the annual Community Based Child Abuse Prevention conference held in Alexandria, Virginia. The conference included a variety of topics such as Social Capital, the Adverse Childhood Experiences Study, and Promoting the Protective Factor Framework.

Program Affiliation in Pinal County

On March 22, 2013, the DES Central Administration office of the Healthy Families Arizona Program granted official affiliation to Healthy Families Pinal County, comprised of three teams, to the State system. As an affiliated program, the Pinal County Healthy Families program became an active participant in all aspects of the Healthy Families Arizona multi-site system to satisfy all of the requirements of Healthy Families America accreditation process.

Program Affiliation in Yavapai County- Verde Valley

On April 15, 2013, a new program was initiated in Yavapai County – Verde Valley. Currently, the new Verde Valley site is completing the steps and requirements to become an affiliated site to the HFAz multi-site system. DES Central Administration provides technical assistance and guidance as the series of steps and requirements are completed.

MIECHV Grant

Throughout state fiscal year 2013, the program continued expanding services to communities within the designated MIECHV Community Health Analysis Areas (CHAA). As a result of expansion, new staff in sites funded by MIECHV were provided with data collection training on data and forms integration. Additionally, the QA/TA team provided any additional technical assistance required by MIECHV funded sites as they built their teams and caseloads.



Collaboration between First Things First and Arizona Department of Health Services

DES Central Administration maintains strong relationships with First Thing First and the Arizona Department of Health Services related to Healthy Families Arizona program's evaluation, training, quality assurance, technical assistance, program development, and any other program related activity.

Arizona was awarded both MIECHV formula and expansion funding from the Health Resources and Services Administration (HRSA) to implement evidence based home visiting, through a collaboration of state agencies and community based partners, to create a statewide system of early childhood home visiting. When the Affordable Care Act statute was passed, the Arizona Department of Health Services (ADHS) convened the state agencies that provide early childhood home visiting to begin work on the grant opportunity. Included in this group were representation from the Title V agency and the state's Single State Agency for Substance Abuse which are housed within the Arizona Department of Health Services, the state's Head Start Collaboration Director which is housed in the Arizona Department of Education, the state's Title II agency, the Arizona Department of Economic Security (ADES), the Intertribal Council of Arizona and Arizona's Early Childhood Development and Health Board. The approach was founded on a commitment to make decisions together that guided the needs assessment process and built on the earlier plan for early childhood home visiting in a concerted effort to best serve the most at risk families of Arizona. The group, called the Inter Agency Leadership Team (IALT) determined the units of analysis, data needs and sources, evaluation criteria for communities at risk and examined evaluation criteria for evidence based models.

Through this collective impact effort, Arizona has begun to change the way we as a community understand early brain development, the critical time of the early childhood years, the importance of the environment our children grow up in and the importance of parents and caregivers understanding what constitutes nurturing behavior. By supporting policies that strengthen families, these efforts will change the norms in the community about acceptable parenting behaviors and set Arizona on the journey to decrease child maltreatments and improve the lives of Arizona's children and families.



Healthy Families Arizona Participant Characteristics

A total of 4,046 families had data submitted for evaluation purposes during the current study year from July 1, 2012 through June 30, 2013. A total of 1,970 were funded through the Department of Economic Security; 1,378 through First Things First; and 698 through MIECHV. The evaluation of the statewide Healthy Families Arizona system covers only families with children that are 24 months old or younger (n=3,195).

In order to have a meaningful evaluation of the program effects only the families that receive at least a minimal amount of program exposure are included. This further restricts our dataset to include only those families where we have full data showing that they have received at least four home visits. A total of 2,837 families are included in this report. Thus, the data for this report focuses on families who were within the first 24 months after the birth of the infant and "actively engaged" (received four or more home visits) in the Healthy Families program regardless of when they entered the program.

Just under a quarter (24.9%) of the families enter the program in the prenatal period (prenatal participants) and about three quarters (75.1%) of the families enter the program after the birth of the child (postnatal participants). For the July 2012 to June 2013 evaluation cohort, there were 702 prenatal and 2,135 postnatal families. Exhibit 3 presents the total numbers of prenatal and postnatal families actively engaged from July 2012 to June 2013.



Exhibit 3. Participants Included in the Evaluation for State Fiscal Year 2013

County	Site	Prenatal	Postnatal	Total			
Cochise	Douglas/ Sierra Vista Team # 12	10	43	53			
Coconino	Flagstaff Team # 18	37	28	65			
	Flagstaff Team # 50	12	9	21			
	Page Team # 7	5	8	13			
	Tuba City Team # 13	20	42	62			
Graham/	Safford Team # 28	20	67	96			
Greenlee	29 67						
Maricopa	Central Phoenix Team # 2	18	70	88			
•	Maryvale Team # 3	14	92	106			
	East Valley Team # 5	35	82	117			
	Sunnyslope Team # 19	15	74	89			
	Mesa Team # 23	23	109	132			
	West Phoenix Team # 48	20	76	96			
	Central Phoenix Team # 61	26	62	88			
	Central Phoenix Team # 62	34	85	119			
	SE/NE Maricopa Team #64	28	96	124			
	Combination Phoenix Team # 65	32	84	116			
	Southeast Maricopa Team # 68	23	73	96			
	MIECHV Phoenix Team # 80	27	70	97			
	MIECHV Maryvale Team # 83	15	48	63			
	MIECHV N Mountain Team # 84	16	30	46			
Mohave	Bullhead City Team # 43	25	49	74			
	Kingman Team # 33	39	28	67			
	Lake Havasu City Team # 17	13	48	61			
Navajo	Winslow Team #	21	34	55			
Pima	Pima Team # 8	22	77	99			
	Pima Team # 9	22	55	77			
	Pima Team # 10	17	50	67			
	Pima Team # 11	15	71	86			
	Pima Team # 27	17	52	69			
	Pima Team # 81	16	42	58			
Pinal	MIECHV Casa Grande/Coolidge Team	4	47	51			
	# 82 Pinal – FTF San Tan/Florence Team	3	19	22			
	#85						
	MIECHV Apache Junction Team # 86	2	5	7			
Santa Cruz	Nogales Team # 6	18	66	84			
Yavapai	Prescott Team # 21	7	88	95			
Yuma	Yuma Team # 15	16	62	78			
	Yuma Team # 70	6	94	100			
Total		702	2135	2837			



Length of Time in Program and Reasons for Termination

In State Fiscal Year 2013, a total of 971 families closed. Fewer families closed this year compared to last year (1036 in fiscal year 2012). However, the length of time in the program for closed families was lower than last year. For all families (N=971) who closed in State Fiscal Year 2013:

- The median number of days in the program was 263 days (as compared to 290 in 2012, 257 in 2011, and 305 in 2010);
- The average length of time in the program was 346 days (as compared to 352 in 2012, 317 in 2011, and 385 in 2010); and
- Thirty-seven percent of families were in the program one year or longer (as compared to 38% in 2012, 30% in 2011, and 40% in 2010).

Exhibit 4 shows the most frequent reasons families (5% or more) left the program during this year. A breakout by site is presented in Appendix A.

Exhibit 4. Most Frequent Reasons for Termination State Fiscal Year 2013

Reason	Prenatal	Postnatal	Overall
Family refused further services	20.9%	25.3%	24.1%
Moved away	22.0%	19.0%	19.8%
Did not respond to outreach efforts	16.9%	15.6%	16.0%
Self-sufficiency	11.4%	13.0%	12.6%
Unable to contact	8.3%	7.5%	7.7%
Refused worker change	4.7%	7.1%	6.5%
No longer has custody	5.9%	6.3%	6.2%

Maternal Risk Factors

Upon enrollment into Healthy Families Arizona, both prenatal and postnatal mothers have certain risk factors that are higher than the average rates for all mothers in the State of Arizona. The percentage of Healthy Families Arizona mothers who are teenagers is nearly equivalent to last year. In 2013, 16.5% of prenatal mothers and 11.7% of postnatal mothers enrolled are teens compared to 16.9% and 11.4% respectively in 2012. Nearly three –fourths (73.2%) of all mothers are single parents at enrollment. Mothers enrolled in Healthy Families Arizona are twice as likely to have less than a high school education (41.3%) compared to all mothers in the State (19.7%). Four out of five (79.6%) of Healthy Families Arizona mothers are unemployed and 86.4% are receiving AHCCCS at enrollment. The median income is well below the poverty level indicating that many participants are living in poverty. In relation to the state and national rates, these data confirm that Healthy Families



Arizona participants do represent an "at-risk" group of mothers and that the program has been successful in recruiting families with multiple risk factors associated with child abuse and neglect and poor child health and developmental outcomes. Exhibit 5 presents selected risk factors for both prenatal and postnatal mothers at intake compared with state rates.

Exhibit 5. Selected Risk Factors for Mothers at Intake State Fiscal Year 2013

Risk Factors of Mothers	Prenatal Families	Postnatal Families	Arizona state Rates
Teen Births (19 years or less)	16.5%	11.7%	9.5%*
Births to Single Parents	77.3%	71.8%	45.2%*
Less Than High School Education	41.3%	41.3%	19.7%**
Not Employed	76.3%	80.7%	48.6%***
No Health Insurance	5.8%	5.2%	3.5%*
Receives AHCCCS	87.5%	86.1%	53.0%*
Late or No Prenatal Care	27.2%	34.6%	17.8%*
Median Yearly Income	\$9,600	\$10,800	\$50,752 ***

Percent does not include "unknown."

Note: Percentages for the combined total for prenatal and postnatal families can be found in Appendix A.

Infant Characteristics

In addition to mother risk factors, information about infant risk factors is collected at intake for postnatal families and at birth for prenatal families. This information helps to indicate the level of need of the families served by the program. The following exhibit displays the high-risk characteristics of the newborns that entered prenatally and postnatally.

Exhibit 6. Risk Factors for Infants - State Fiscal Year 2013

Risk Factors for Infants	Prenatal Families*	Postnatal Families**	Arizona State percent
Born < 37 weeks gestation	10.1%	14.9%	9.3%***
Birth Defects	1.7 %	1.3%	1.1%***
Low Birth Weight	9.1%	11.9%	6.9%***
Positive Alcohol/Drug Screen	1.3%	8.6%	0.5%***

^{*}The Family Support Specialist collects this information either from the family or from a CPS referral form for prenatal families.



^{*}Source: 2012 data from the Arizona Department of Health Services Vital Statistics records.

^{**}Source: 2011 data from the Arizona Department of Health Services Vital Statistics records.

^{***}U.S. Census Bureau, American Community Survey, 2011

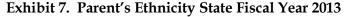
^{**}Family Assessment Workers collect this information from hospital records for postnatal families.

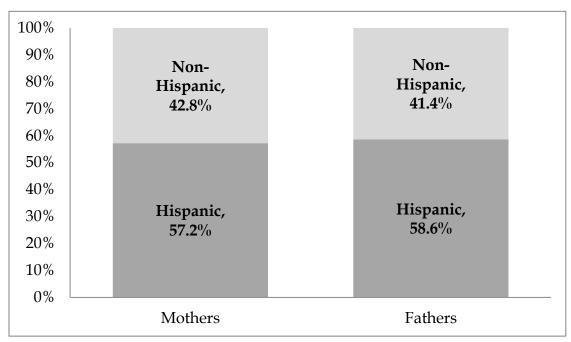
^{***2012} data from the Arizona Department of Health Services Vital Statistics records.

The overall risk factors for infants are similar to prior years. The percentage of postnatal Healthy Families Arizona program infants born early (less than 37 weeks gestation) remains higher than the overall state rate, suggesting that the families being identified for service have a significant level of need. The percentage of low birth weight infants in the program also remains high in comparison to the state rate.

Race and Ethnicity

The Healthy Families Arizona program serves a culturally diverse population. In the following exhibits, ethnicity and race are examined for all mothers and fathers based on information gathered at enrollment. Starting on July 1, 2012, race and ethnicity (Hispanic/Non-Hispanic) were collected as two separate variables. Similar to 2012, more than half of mothers (57.2%) and fathers (58.6%) enrolled in the program are Hispanic (see Exhibit 7). Exhibits 8 and 9 display mothers and fathers race according to the new definitions. Site level data for race and ethnicity are available in Appendix A.





African American
6.5%
7.2%
Other/Mixed
6.9%
Asian American
1.0%

White/Caucasian
78.4%

Exhibit 8. Mother's Race* (N=2871) State Fiscal Year 2013

^{*}This includes all mothers who entered the program either prenatally or postnatally.

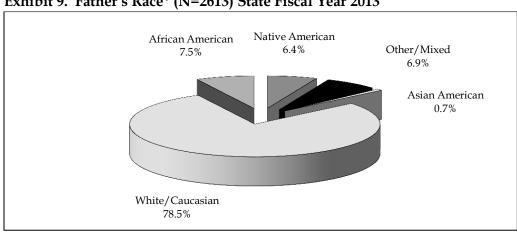


Exhibit 9. Father's Race* (N=2613) State Fiscal Year 2013

Assessment of Risk Factors

Both mothers and fathers are assessed at intake using an interview with the Parent Survey¹. The Parent Survey helps the program learn about the family's circumstances and life events that place them at risk for child maltreatment and other adverse outcomes. During the intake process, the Family Assessment Worker evaluates each family across the 10 domains of the Parent Survey. The survey is administered in an interview format and the items are then rated by the worker according to level of severity.

¹ Previously known as The Family Stress Checklist, it was renamed the Parent Survey based on revisions to focus on a more strength based perspective; however, the rating scale remains unchanged. More information on this instrument is provided in Appendix C.



^{*}This includes all fathers who entered the program either prenatally or postnatally.

The percentage of parents scoring *severe* on each of the scales is presented for prenatal mothers and fathers and for postnatal mothers and fathers in Exhibits 10 and 11.

Exhibit 10. Percentage of Parents Rated Severe on Parent Survey Items PRENATAL (N=702)

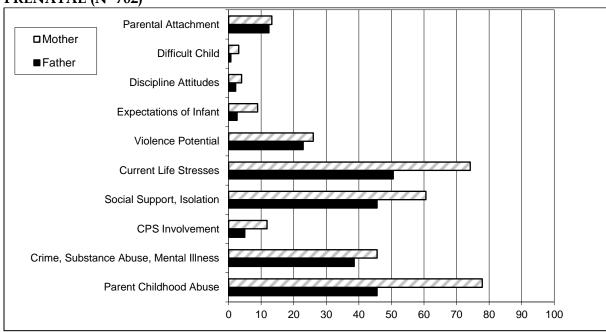
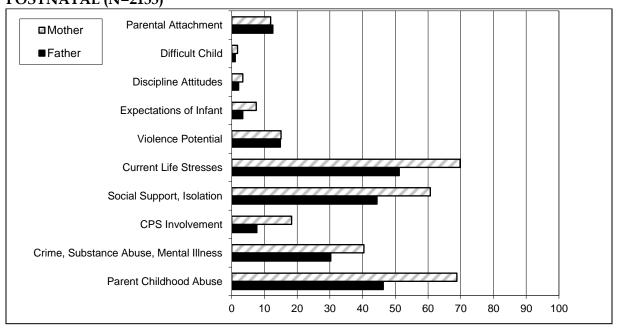


Exhibit 11. Percentage of Parents Rated Severe on Parent Survey Items POSTNATAL (N=2135)



Consistent with previous years' data, the four factors rated most severe by both mothers and fathers are: history of childhood abuse (for the parent); current life stressors; social support and isolation; and a history of crime, substance abuse, or mental illness. A higher percentage of prenatal mothers had severe scores on history of childhood abuse (77.9%) and history of crime, substance abuse, or mental illness (45.6%) than postnatal mothers at 68.8% and 40.4% respectively.

Summary

The process evaluation for fiscal year 2013 suggests that the Healthy Families Arizona program continues to effectively reach parents and infants with high risks for child maltreatment and other unhealthy outcomes. Overall, the Healthy Families Arizona program is reaching families that are impoverished, stressed, socially disadvantaged, and lacking in resources to manage the demands of parenting. The population that Healthy Families Arizona is serving has greater risks than the state or national population as a whole. Families that enter during the prenatal period have slightly higher risks than families that enter after birth. However, the risk factors of low birth weight babies and preterm birth are lower for those families participating in Healthy Families Arizona prenatally than for those that enter in the postnatal period. This suggests that these high risk families benefit from the early support that is offered in the home visitation program.



Key Healthy Families Arizona Services

The primary goals of reducing child abuse and neglect and improving child well-being are only attainable when families stay engaged in the program and receive the services and resources they need. One important aspect of the Healthy Families program model is linking families with needed community resources. Home visitors provide not only assistance and guidance in the home, but they also connect families with education, employment, and training resources, counseling and support services, public assistance and health care services.

Developmental Screens and Referrals for Children

Developmental screens are used to measure a child's developmental progress and to identify potential developmental delays requiring specialist intervention. The home visitor administers the Ages and Stages Questionnaire, Third Edition (ASQ-3) to help parents assess the developmental status of their child across five areas: communication, gross motor, fine motor, problem solving, and personal-social.

The Healthy Families Arizona program administers the ASQ-3 at 4, 6, 9, and 12 months in the first year of the infant's life and then every six months until the child is three years of age and then yearly at age 4 and 5. The statewide program performance goal for screening in year two is to screen at least 85% of the children in the program. As Exhibit 12 shows, the number of children receiving the ASQ-3 at each interval is exceeding 90% in the time periods up to 18 months, and the 24-month ASQ-3 rate is close at 89.4%. This is a great improvement (3 – 9%) over the last several years. More children ages 9 months through 24 months are being identified as delayed through the screenings. This may be due to improved screening, or other factors that should be further examined by program staff.

Exhibit 12. ASQ-3 Screening State Fiscal Year 2013

Interval ASQ-3 Screening	Percent of children Screened with ASQ-3	Percent screened as delayed
4-month	96.9%	2.3%
6-month	94.8%	2.4%
9-month	97.7%	4.0%
12-month	94.5%	3.9%
18-month	94.0%	6.5%
24-month	89.4%	7.9%



Healthy Families Arizona works to ensure that children who may have developmental delays obtain needed interventions. Program data tracks what happens after a family's ASQ-3 is scored as follows: 1) the child is screened as having no delays, 2) the child is referred for further assessment and is determined to have no delays upon a more extensive assessment, 3) families are referred to different services such as the Arizona Early Intervention Program (AzEIP) or other early intervention or therapy, or 4) the home visitor may provide developmental intervention or education to the family.

Although 2% to 8% of children (depending on their age) are initially screened as delayed in their development, up to 7.7% of the children who initially screen as delayed on the ASQ-3 in the early months of their life are determined to be "not delayed" upon further assessment (see Exhibit 13 below). For example, of the children at 4 months who screened as delayed on the ASQ-3 and were referred for more assessment, 1 child showed no delay, 23 were referred to the AzEIP, 2 were referred to an early intervention program, 34 received developmental interventions, 3 were referred to specialized therapy, and 6 families declined further referral. The ASQ-3 screening provides a valuable service to families because it enables them to access appropriate services to meet their child's particular needs. This practice is consistent with the American Academy of Pediatrics strategic plan to promote developmental screening and establish a medical home when needed (Tait, 2009). There is a national effort to increase early developmental screening after studies found that up to 70% of developmental problems were not identified until school entry (e.g., see Glascoe & Dworkin, 1993). The following exhibit shows the outcome of these follow-up assessments that are completed with families at the different time intervals.

Exhibit 13. ASQ-3 Follow-up Services State Fiscal Year 2013

Screening Interval	Continued Assessment shows "no delay" % (n)	Referred to AzEIP % (n)	Referred to other Early Intervention % (n)	Provided Developmental Intervention % (n)	Referred to Therapy % (n)	Parent Declined Referral % (n)
4-month	2.3% (1)	52.3% (23)	4.5% (2)	77.3% (34)	6.8% (3)	13.6% (6)
6-month	2.4% (1)	43.9% (18)	7.3% (3)	63.4% (26)	4.9% (2)	14.6% (6)
9-month	2.4% (1)	46.3% (19)	7.3% (3)	80.5% (33)	2.4% (1)	19.5% (8)
12-month	7.7% (3)	38.5% (15)	12.8% (5)	79.5% (31)	12.8% (5)	12.8% (5)
18-month	2.4% (1)	36.6% (15)	12.2% (5)	80.5% (33)	2.4% (1)	22.0% (9)
24-month	4.0% (1)	44.0% (11)	4.0% (1)	64.0% (16)	8.0% (2)	8.0% (2)

Note: Percentages do not equal 100% as multiple referrals can happen for a single child.



Outcomes for Families

The Healthy Families Arizona program focuses the outcomes evaluation on the following primary indicators:

- Parent outcomes
- Child development and wellness
- Mother's health, education, and employment
- Child abuse and neglect

Parent outcomes

One of the primary intermediate goals of the Healthy Families Arizona program is to have a positive influence on parenting attitudes and behaviors. While reducing child abuse and neglect is the ultimate outcome, intermediate objectives such as changes in parenting behaviors can inform us about progress toward the ultimate goal. The intermediate goals of the Healthy Families program revolve around a few key factors known to be critical in protecting children from maltreatment (Jacobs, 2005):

- providing support for the family;
- having a positive influence on parent-child interactions;
- improving parenting skills and abilities and sense of confidence; and
- promoting the parents' healthy functioning.

Recent research from a randomized clinical trial of the Healthy Families Arizona program (LeCroy & Krysik, 2011) supports the finding that the program can produce positive change favoring the experimental group in contrast to the control group across multiple outcome domains such as violent parenting behavior, parenting attitudes and practices, parenting support, mental health and coping, and maternal outcomes.

Healthy Families Parenting Inventory Reveals Positive Parent Change

In order to evaluate critical goals of the Healthy Families program, the evaluation team developed the Healthy Families Parenting Inventory (HFPI) in 2004 (LeCroy, Krysik, & Milligan, 2007). This instrument was developed, in part, because of measurement difficulties identified in the literature (See LeCroy & Krysik, 2010). The development of the HFPI was guided by several perspectives and sources: the experience of the home visitors in the Healthy Families Arizona program; data gathered directly from home visitors, supervisors, and experts; information obtained



from previous studies of the Healthy Families program; and examination of other similar measures. The process included focus groups with home visitors, the development of a logic model, and a review of relevant literature. In an initial validation study the pattern of inter-item and item-to-subscale correlations as well as an exploratory factor analysis and sensitivity to change analysis supported the nine-factor model of the HFPI. This work was recently published in the journal *Infant Mental Health* (Krysik & LeCroy, 2012). The final instrument includes 9 scales: Social Support, Problem-solving, Depression, Personal Care, Mobilizing Resources, Role Satisfaction, Parent/Child Interaction, Home Environment and Parenting Efficacy.

The following section describes the results obtained for each subscale of the HFPI. The level of significance is reported along with the *effect size*. An effect size gives a sense of how large the change or improvement is from baseline to 6 months or 12 months. Effect sizes below 0.20 are considered small changes, and those between 0.20 and 0.50 are considered small to medium changes. These findings are based on data reported from the sites and represent participants who completed both instruments at the baseline and 6 month intervals (n=1424) and participants who also had matched instruments at the 12 month interval (n=917).

Healthy Families Parent Inventory (HFPI) Subscales

Exhibit 14. Change in Subscales of the HFPI

Sub- scale	Significant improvement from baseline to 6 months	Significance	Effect size	Significant improvement from baseline to 12 months	Significance	Effect size
Social Support	✓	0.017	(0.05)	None	0.386	(0.03)
Problem- solving	✓	0.000	(0.23)	✓	0.000	(0.27)
Depression	✓	0.000	(0.16)	✓	0.000	(0.18)
Personal care	✓	0.000	(0.24)	✓	0.000	(0.23)
Mobilizing resources	✓	0.000	(0.36)	✓	0.000	(0.45)
Commitment To Parent Role	✓	0.000	(0.17)	✓	0.000	(0.17)
Parent/Child Behavior	✓	0.000	(0.27)	✓	0.000	(0.18)
Home Environment	✓	0.000	(0.38)	✓	0.000	(0.50)
Parenting Efficacy	✓	0.000	(0.25)	✓	0.000	(0.20)



From baseline to 6 months, there were statistically significant changes in all subscales. Continuing the trend from the last few years, significant gains were lost in the area of social support at 12 months. The largest improvements (as shown by the effect sizes) at 6 months after entering the program are in the categories of home environment (0.38), mobilizing resources (0.36), parent/child behavior (0.27), parenting efficacy (0.25), personal care (0.24), and problem solving (0.23) scales. At 12 months the largest improvements are in home environment (0.50), mobilizing resources (0.45), problem solving (0.27), personal care (0.23), and parenting efficacy (0.20). This indicates that the Healthy Families Arizona sites are effective at connecting parents to resources, improving the atmosphere of the home, improving parents' problem solving skills, emphasizing the importance of good self-care, and increasing the parent's self-assessment of parenting efficacy.

Total Change Score on the HFPI

In order to provide a more comprehensive understanding of outcomes in parenting observed during participation in the Healthy Families program, it is also useful to examine the total score on the Healthy Families Parenting Inventory and overall significance of change. As Exhibit 15 below shows, there were significant changes from baseline to 6 months and from baseline to 12 months on the HFPI total scale. This finding supports the conclusion that program participants changed during the course of the program. Overall, approximately two-thirds of parents had positive changes on the total score from baseline to 6 months (66.4%) and from baseline to 12 months (66.6%).

Exhibit 15. Overall Change in Healthy Families Parenting Inventory Outcomes

Sub- scale	Significant improvement from baseline to 6 months	Significance	Effect size	Significant improvement from baseline to 12 months	Significance	Effect size
Total Scale	✓	.000	(0.34)	✓	.000	(0.36)

Child Abuse and Neglect

One of the main goals of Healthy Families Arizona is to reduce the incidence of child maltreatment and abuse. In order to look at child abuse and neglect directly, data from CHILDS, the Arizona Department of Economic Security Child Protective Services data system is used to determine the rates of child abuse and neglect for Healthy Families Arizona participants. It is important to acknowledge that using official child abuse data as an indicator of program success is complex and is unlikely to fully answer the question about the effectiveness of Healthy Families Arizona in preventing child abuse. The shortcomings in using official child abuse rates to assess the effectiveness of home visiting programs have been discussed in numerous journal articles (see for example, *The Future of Children*, 2009).

There are several reasons the use of child abuse data is believed to have limitations. First, child abuse is an event that occurs infrequently and, therefore, changes are difficult to detect with statistical methods. Second, using official incidents of child abuse and neglect does not necessarily reflect actual behavior – there are many variations in what constitutes abuse and neglect and using only reported and substantiated incidents of abuse captures incidents that rise to that level of severity. Some incidents of child abuse or neglect are undetected or may not meet some definitional standard minimizing the accuracy of the count. Third, using official data requires a process whereby cases are "matched" on available information such as mother's name, social security number, and date of child's birth. When any of this information is missing, the accuracy of the match decreases. Finally, because home visitors are trained in the warning signs of abuse and neglect and are required to report abuse or neglect when it is observed, there is a "surveillance" effect – what might have gone unreported had there been no home visitor shows up in the official data.

In order to best represent families that have received a significant impact from the Healthy Families Arizona program, only families that have been in the program for at least six months are analyzed to determine if they have a substantiated report of child abuse or neglect. This year, 97.1% of the Healthy Families Arizona eligible families (2,015 out of 2,075) were without a substantiated report, as can be seen in Exhibit 16. This is short of achieving the performance measure goal of 99.7%. A total of 60 cases were determined to be substantiated reports. A substantiated finding means that "Child Protective Services has concluded that the evidence supports that an incident of abuse or neglect occurred based upon a probable cause standard" (see DES substantiation guidelines for further detail).



Exhibit 16. Percent of Families Showing No Child Abuse and Neglect Incidences

Group	2010-2011	2011-2012	2012-2013
	(n = 1,874)	(n=2,099)	(n=2,075)
All Families with at least 6 months in the program	99.98%	97.9%	97.1%

Collaboration with Child Protective Services

Healthy Families Arizona provides supportive services for families involved with Child Protective Services (CPS). In state fiscal year 2013, 575 Healthy Families Arizona families had some level of involvement with CPS. Healthy Families Arizona supportive services included:

- acceptance of referrals from CPS;
- providing screening and assessment for parent(s) if the parent(s) wished to determine eligibility to receive program services;
- attending CPS staffing;
- utilizing best practices and a family-centered approach when working with families; and
- coordinating with CPS staff to identify service needs and development of family and child goals.

It is hoped that the collaboration between Healthy Families Arizona and Child Protective Services will assist those families that may be at highest risk for child maltreatment.

Child Development and Wellness

While it is challenging to find ways to accurately measure child abuse and neglect, researchers do point to the benefits and impact that home visitors and home visiting can have on promoting optimal child growth and development in the families served. Home visitors are in a strategic position to help families obtain access to health resources and promote wellness. Immunizations and safety practices in the home are two indicators of child development and wellness reported this year.



Immunizations

The Healthy People 2020 goal is to have at least 90% of all children immunized with 4 doses of DTaP; 3 doses of IPV; one dose of MMR; 3 or more doses of Hib; 3 or more doses of Hep B vaccine; and 1 dose of Varicella vaccine by 2 years of age. This is referred to as the 4:3:1:3:3:1 immunization standard. For calendar year 2012, the Arizona immunization rate for 24 month olds was 66.5%, and the U.S. rate was 68.1% (www.cdc.gov).

The Healthy Families Arizona program supports children obtaining all their necessary immunizations as a key step in preventing debilitating diseases. The home visitors encourage the families to follow through on completing their child's immunizations and ask to check the family's immunization booklet to record the dates of immunizations and assess completion. However, recently some families do not have booklets and say it is only recorded electronically. Due to this, some families may not know the immunization status of their child and assume that they are up to date when they may not be. Some families with a regular primary care doctor may receive electronic printouts from their doctor regarding timelines for immunizations. However, due to the fact that few doctors are providing a printout of electronic records, and many families are receiving immunization at clinics this is not a reliable method of educating families on when immunizations are due.

Exhibit 17 presents full immunization data at 12 months and 24 months, based on the recommended schedule of immunizations to meet Arizona state compliance of the 4:3:1:3:3:1 standard. In previous years, the immunization rates were calculated based solely on the immunization recommendation timeline and showed high compliance with immunizations at 2 months (90% or more) but declined by 18 months (68% to 80%). Based on these new calculations, it is not recommended to compare previous immunization rates with this year's rate. Healthy Families Arizona families are slightly higher than both the state and national immunization rates for 2-year olds. The rate for 2-year olds is, however, much lower than expected based on the percentage seen at 1 year. This may be due to an increased emphasis on immunizations in the Healthy Families Arizona program in the past year, or there may be other unknown factors that lead to families not following the recommended immunization schedule.



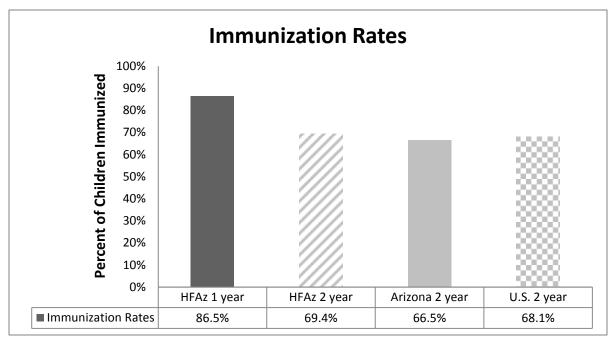


Exhibit 17. Immunization Rate of Healthy Families Arizona Children

*Source: 2012 data from the CDC National Immunization Survey.

Safety Practices in the Home

A recent study released by the Centers for Disease Control and Prevention (MMWR 2012) states that even though injury death for children have decreased from 15.5 to 11.0 per 100,000 population from 2000 to 2009, they continue to be the leading cause of death for children over the age of 1. Unintentional injuries are also the fifth leading cause of death for newborns and infants under the age of 1. A report in 2004, *Home visiting and childhood injuries*, concluded that home visits can reduce the risk of accidental injuries in the home by approximately 26 percent.

The Healthy Families Arizona home visitors both assess and promote safe environments for children. The home visitors provide education about safety practices and monitoring safety in the home through the completion of the safety checklist with the family. Exhibit 18 reports the use of four key safety practices across five time points for postnatal participants. Families that continue to participate in Healthy Families Arizona see increased safety practices and reach high rates. The National Highway Traffic Safety Administration in 2009 estimated the rate of child seat use for children under the age of 1 as 98%. The national rate for children between the ages of 1 to 3 however is estimated to be 96%. The families participating in Healthy Families Arizona maintain their high use of car seats overtime (99% or

more), indicating that the message of child safety in cars has been well received. The National Fire Protection Association reports that smoke detectors were present in only 72% of all reported home fires and operated in only 51% of home fires. Healthy Families Arizona households with working smoke alarms range from 85% to 90%, improving the safety of the household environment for these families. Families also obtain relatively high rates of covered outlets and poisons locked adding to the overall safety being maintained.

Exhibit 18. Percent of all Families Implementing Safety Practices

	2-Month (n = 2555)	6-Month (n = 1868)	12-Month (n = 1168)	18-Month (n = 793)	24-Month (n = 453)
Outlets Covered	41.4%	54.6%	72.3%	73.3%	74.6%
Poisons Locked	86.1%	92.0%	96.6%	98.0%	97.6%
Smoke Alarms	85.4%	88.1%	89.8%	88.7%	89.4%
Car Seats	99.6%	99.6%	99.7%	100%	98.9%

Mothers' Health, Education, and Employment

The Healthy Families Arizona program also attempts to influence maternal life course outcomes. The home visitors encourage families to seek new educational opportunities, complete their high school education, obtain greater economic self-sufficiency, and obtain better paying and better quality jobs. Information is also provided to mothers regarding the positive health impacts of delaying subsequent pregnancies to at least 24 months.

Subsequent Pregnancies and Birth Spacing

Multiple births for some families can lead to increased stress and parenting difficulties, especially if the birth is unwanted or unplanned. Mothers with greater birth spacing have fewer pregnancy complications and are less likely to give birth to low birth weight or premature babies (Kallan, 1997). The home visitors emphasize the benefits of delaying repeat pregnancies and promote longer birth spacing for the mothers in the program. Exhibit 19 shows that the percent of Healthy Families Arizona mothers who reported subsequent pregnancies has decreased slightly in 2013 (7.6%) from the 2012 of 7.9%.



Exhibit 19. Percentage of Mothers who Reported Subsequent Pregnancies State Fiscal Year 2013

	2010	2011	2012	2013
Percent of mothers with subsequent pregnancies	7.1%	4.9%	7.9%	7.6%

For mothers in the Healthy Families Arizona program who have a subsequent pregnancy, there is a decrease in the percentage of women waiting at least two years. The Healthy People 2020 goal is to reduce the proportion of pregnancies conceived within 18 months of a previous birth down to 29.8%. Exhibit 20 below shows the length of time to subsequent pregnancy for those mothers who do have subsequent births. The low percentage of mothers that wait at least 2 years between subsequent births indicates that the message of delaying subsequent pregnancies is either not being received or embraced. It would be beneficial for program staff to follow-up with families regarding the short birth spacing.

Exhibit 20. Length of Time to Subsequent Pregnancy for Those Families with Subsequent Births

Length of Time to Subsequent Pregnancy	2010 Percent of Mothers	2011 Percent of Mothers	2012 Percent of Mothers	2013 Percent of Mothers		
1 to 12 mos.	54.1%	65.1%	59.9%	59.4%		
13 to 24 mos.	42.6%	31.0%	37.4%	40.1%		
Over 24 mos.	3.3%	3.9%	2.7%	0.5%		

School, Educational Enrollment, and Employment

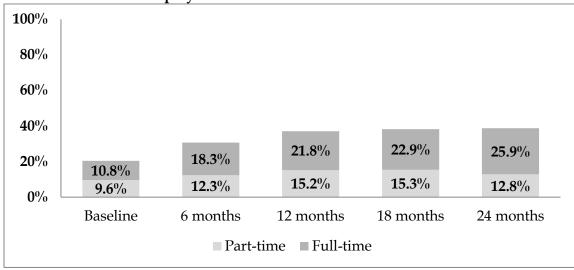
Continued educational obtainment and increased employment are also important to consider when examining the program's potential impact on maternal life course outcomes. Increased education is associated with better overall well-being and greater family stability. Exhibit 21 shows a continuing trend of decreased enrollment at each interval. In fiscal year 2013, 12-15% of the mothers are enrolled in school either full- or part-time, this is a decrease from 15-17% in fiscal year 2012, and 17-22% in fiscal year 2011. The extended weakened economy may be a relevant factor in the small number enrolled in the past few years. Parents may have additional challenges in accessing or affording childcare, affording school, or having the time available away from work (or seeking employment) to attend school.

Exhibit 21. Percent of Mothers Enrolled in School - State Fiscal Year 2013

	Percent enrolled part-time (2012 prior report)	Percent enrolled full-time (2012 prior report)	Percent enrolled part-time (2013)	Percent enrolled full-time (2013)
6 month	5.5%	11.0%	5.1%	9.6%
12 month	6.5%	9.9%	6.4%	8.0%
18 month	7.2%	9.6%	5.0%	7.3%
24 month	5.3%	9.3%	6.5%	6.3%

Maternal employment shows an increasing rate over time. Thirty-seven percent of Healthy Families Arizona mothers are employed at 12 months, and approximately 39% at 24 months. According to the most recent Bureau of Labor Statistics report for 2012, 57% of mothers with children less than 1 year of age, and 61% of mothers with children less than 3 years of age participate in the labor force. While increasing employment and income is fundamental for family well-being there are complex realities facing families as they begin to increase their earnings. The importance of home visitors working with families in obtaining quality child care is critical given the limited child care options currently available for families with low incomes.

Exhibit 22. Mother's Employment Status



Substance Abuse Screening

The relationship between substance abuse and the potential for child maltreatment is strong and well known (Pan, et al., 1994; Windom, 1992; Wolfe, 1998). When parents or caretakers are abusing substances, children may not be adequately cared for or supervised. While successful substance abuse treatment often requires intensive inpatient or outpatient treatment and counseling, home visitors can still play a critical role in screening for substance abuse, educating families about the effects of substance abuse on their health and the health of their children, and in making referrals for treatment services.

Healthy Families Arizona uses the CRAFFT as a method of screening for substance use and abuse. The CRAFFT is a short screening tool for adults and adolescents to assess high risk drug and alcohol use disorders developed by the Center for Adolescent Substance Abuse Research (CeASAR), at the Children's Hospital of Boston. A positive screen occurs if there are two or more "yes" answers out of six questions and indicates that further assessment and or referrals are recommended.

Exhibit 23 presents data on the percent of families screened with the CRAFFT substance abuse screening tool and the percent of those families who screened positive for drug use. Nearly 44% of families screened at intake assessed positive for a history of substance use putting them at potential risk. The number of families with positive substance abuse screens drops dramatically at 6 months (12%) and continues to drop at 12 months (9%).

Exhibit 23. Percent Screened and Assessed Positive on the CRAFFT

Time at assessment	Percent Screened	Percent Assessed Positive				
2 months (lifetime)	94.3%	43.6%				
6 months	91.4%	11.6%				
12 months	92.4%	9.1%				

Note: The 2 month screen asks lifetime substance use; later screens cover the past 6 months.



2013 Participant Satisfaction Survey

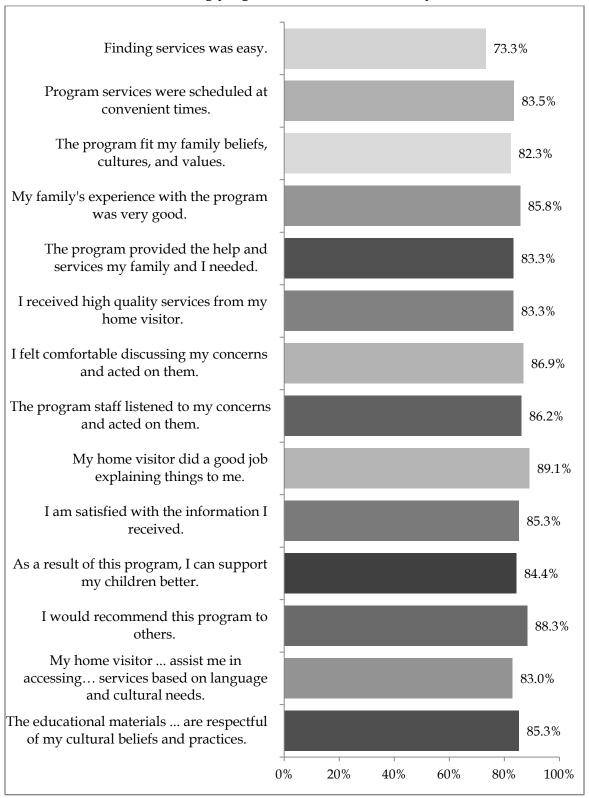
The Healthy Families Arizona participant satisfaction survey provides valuable information for program staff, and an opportunity for participants to reflect on their experiences. If participants are satisfied with the program and the work of the home visitor, they are more likely to benefit from the program. The following data summarizes the responses of participants who took the Healthy Families Arizona participant satisfaction survey in Spring 2013.

The survey is distributed to all current participants in the program and returned by mail. A total of 1542 surveys were returned. The ethnic breakdown of these participants was similar to past years and is representative of the populations served by Healthy Families Arizona, with 58% Hispanic, 24% White, 6% American Indian, 6% African American, 4% Two or More Races, 1% Asian, less than 1% Hawaiian/Pacific Islander, and less than 1% Other.

Exhibit 24 below shows key highlights from participant satisfaction survey responses. The exhibit presents the items which received the highest percent of strongly agree responses from participants and the items receiving the lowest percent of strongly agree. Based on the results of the survey it appears that participants feel they have good communication with their home visitors. Fewer Healthy Families Arizona participants (73.3%) agree strongly that finding services was easy compared to the responses for other questions. For the remaining statements in the satisfaction survey, more than 80% of the respondents strongly agreed. This is similar to the 2012 survey results and indicates a strong satisfaction level with the program.



Exhibit 24. Percent Who Strongly Agreed on Satisfaction Survey Statements 2013



Conclusions and Recommendations

The 2013 state fiscal year has been productive for Healthy Families Arizona. The combined funding from the Department of Economic Security (DES), First Things First (FTF), and the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) grant has increased the number of families receiving services in more locations throughout the state. The Healthy Families Arizona evaluation report focuses on the following primary outcome indicators: parent outcomes, child health and wellness, and child abuse and neglect. The results from the Healthy Families Parenting Inventory, participant tracking data sheets, safety checklists, screening tools, child abuse and neglect rates, and immunization rates all suggest that the Healthy Families Arizona program continues to address and reach most of its goals.

The Healthy Families Arizona program uses evidence-based methods to guide the practice of home visitation. In order to continue to see successful outcomes and to improve other outcomes, the Healthy Families Arizona program needs to rigorously investigate the program at least annually and use evidence for program improvement.

Recommendations for this year are focused on ways the program can continue to emphasize quality programming, provide the most critical services to the highest risk families, and improve parent and child outcomes.

- Develop or enforce strategies to increase retention. The average length of stay in the program is less than a year with only 37% of families remaining in the program for more than a year. While nothing can be done to retain families that move into areas not served by Healthy Families Arizona, other reasons for termination such as family refusal of services, and not responding to outreach should be reviewed. The home visitors and their supervisors should use this information to develop creative retention strategies for families in their programs.
- Direct additional efforts toward increasing the time between births. This continues to be a concern for the health of the mothers in the Healthy Families Arizona program. There was a significant increase in the percentage of subsequent pregnancies that are happening within 24 months after a prior birth. Additional training for Family Support Specialists and creative strategies to educate parents on the benefits of delayed pregnancy should be undertaken. Information regarding the health implications should be shared with home



- visitors by their supervisors through shared educational material, stand-alone trainings, or as part of their initial training. This as an objective of Healthy People 2020, so there may be additional resources available for education.
- Review and update the program logic models to align with the Healthy
 Families America Best Practice Standards. The new Best Practice Standards
 from Healthy Families America go into effect in January 2014. Healthy Families
 Arizona can use this opportunity to review and update the program logic models
 to match the new critical elements outlined in the Best Practice Standards.
 Although many of the critical elements remain unchanged or similar, it would be
 useful to re-examine if the logic models are depicting the program as currently
 implemented. These logic models can be distributed and used by all program
 staff to maintain focus on key aspects of the intervention model. Training for
 program staff can support the use of the logic model to maintain sharp focus on
 fidelity to the model.
- Consider alternative methods of collecting immunization data and educating families on the importance of timely and full immunization. The change away from immunization booklets to electronic records may potentially impact the ability of home visitors to verify the immunization dates for a child. Central Administration and the sites need to work together to develop alternative methods of obtaining immunization data. The home visitors may need to place more emphasis on the importance of immunizations for families who are late in receiving immunizations, and may need to make additional referrals to local immunization clinics.
- Continue to develop the Healthy Families system using "evidence-based" strategies to improve outcomes. Ongoing training and quality assurance efforts for Healthy Families should focus on using strategies that are evidence-based. Further, ongoing data collection, for example with the HFPI should be used for data-based decision making by selecting interventions and curriculum activities based on information obtained from assessment instruments like the HFPI. Ongoing use of evidence-based protocols can increase the effectiveness of the program.



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Appendix A. Team Level Data

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Age of Child at Entry by Team- 2013 (Age in Days)

/8	Mean		Standard	
Team	(Age in Days)	Number	Deviation	
Team 2 - Central Phoenix	44.36	70	24.59	
Team 3 - Maryvale	42.66	92	25.63	
Team 5 - East Valley	42.76	82	25.57	
Team 6 - Nogales	14.85	66	19.08	
Team 7 - Page	20.56	8	23.13	
Team 8 - Pima	26.32	77	23.61	
Team 9 - Pima	25.16	55	22.02	
Team 10 - Pima	28.68	50	23.33	
Team 11 - Pima	28.36	71	21.34	
Team 12 - Douglas / Sierra Vista	30.13	43	30.59	
Team 13 - Tuba City	17.50	42	24.83	
Team 15 - Yuma	16.45	62	15.57	
Team 17 - Lake Havasu	22.92	48	24.50	
Team 18 - Flagstaff	42.16	28	31.73	
Team 19 - Sunnyslope	48.21	74	26.44	
Team 21 - Prescott	19.43	88	15.61	
Team 23 - Mesa	43.65	109	22.95	
Team 27 - Pima	22.51	52	18.09	
Team 28 - Safford	18.21	67	18.87	
Team 32 - Winslow	14.09	34	25.15	
Team 33 - Kingman	28.75	28	21.73	
Team 43 - Bullhead City	30.25	49	33.97	
Team 48 - West Phoenix	39.66	76	26.14	
Team 50 - Flagstaff	34.22	9	38.66	
Team 61 - Central Phoenix #1	33.73	62	23.73	
Team 62 - Central Phoenix #2	34.85	85	24.68	
Team 64 - SE/NE Maricopa	35.36	96	21.61	
Team 65 - Combo Phoenix	40.38	84	27.12	
Team 68 - Queen Creek	34.00	73	23.73	
Team 70 - Yuma	21.38	94	22.60	
Team 80 - MIECHV Phoenix	38.24	70	24.16	
Team 81 - MIECHV Tucson	23.50	42	23.30	
Team 82 - MIECHV Casa Grande	9.57	47	18.74	
Team 83 - MIECHV Maryvale	27.17	48	21.67	
Team 84 - MIECHV N. Mountain	37.03	30	26.24	
Team 85 - San Tan/Florence	10.25	19	20.00	
Team 86 - MIECHV Apache Junction	28.00	5	21.06	
Total	30.79	2135	25.66	

Note: Total does not include data for families that enrolled in the prenatal period including those that did not receive prenatal services.



Days to Program Exit by Team – 2013 (For families who left the program)

		Prena	tal	uiii)		Postna	Postnatal				
Team	Median	Mean	St. Dev.	#	Median	Mean	St. Dev.	#			
Team 2 - Central Phoenix	485.00	463.56	201.81	9	282.00	341.94	235.55	16			
Team 3 - Maryvale	323.00	423.13	402.00	8	278.00	299.88	183.21	33			
Team 5 - East Valley	286.00	331.08	174.86	12	227.00	367.53	308.14	34			
Team 6 - Nogales	345.00	384.33	253.30	3	171.00	265.40	210.11	20			
Team 7 - Page	283.00	283.00	-	1	191.00	332.00	379.72	5			
Team 8 - Pima	287.50	293.67	175.96	6	298.00	441.35	285.54	20			
Team 9 - Pima	591.00	486.71	272.58	7	419.00	444.00	257.66	18			
Team 10 - Pima	515.50	488.50	149.93	4	351.50	384.93	226.35	14			
Team 11 - Pima	428.00	364.33	175.98	6	512.00	522.61	225.24	28			
Team 12 - Douglas / Sierra Vista	297.00	253.40	120.40	5	291.00	419.58	238.17	19			
Team 13 - Tuba City	326.00	445.56	283.60	9	346.00	370.69	278.93	13			
Team 15 - Yuma	846.00	675.67	538.11	3	203.00	299.45	315.63	11			
Team 17 - Lake Havasu	369.00	483.40	390.02	5	316.00	310.94	194.72	16			
Team 18 - Flagstaff	161.50	295.67	353.22	12	282.00	299.70	139.61	10			
Team 19 - Sunnyslope	258.00	232.50	106.06	6	425.00	453.88	258.79	40			
Team 21 - Prescott	479.00	486.75	408.10	4	260.50	365.66	284.41	38			
Team 23 - Mesa	391.00	432.00	104.55	7	259.50	352.84	255.72	50			
Team 27 - Pima	217.00	254.71	125.32	7	219.50	230.67	98.27	12			
Team 28 - Safford	261.50	346.20	286.16	10	207.00	334.12	279.69	25			
Team 32 - Winslow	210.00	329.00	307.17	13	222.00	379.23	250.52	13			
Team 33 - Kingman	223.50	278.75	181.71	12	287.00	299.85	154.77	13			
Team 43 - Bullhead City	487.50	490.80	332.27	10	343.50	368.06	231.43	16			
Team 48 - West Phoenix	366.00	385.00	210.32	7	252.00	317.16	207.34	25			
Team 50 - Flagstaff #2	331.00	369.75	294.13	4	396.00	396.00	-	1			
Team 61 - Central Phoenix #1	365.00	390.00	224.14	10	205.00	255.47	155.85	19			
Team 62 - Central Phoenix #2	308.00	341.00	198.85	13	365.50	390.32	267.32	38			
Team 64 - SE/NE Maricopa	360.00	349.27	176.66	11	182.00	289.17	265.44	23			
Team 65 - Combo Phoenix	278.00	425.55	337.50	11	235.50	317.61	238.46	28			
Team 68 - Queen Creek	513.00	516.86	317.45	14	339.00	448.92	321.44	24			
Team 70 - Yuma	671.00	671.00	-	1	293.00	362.19	213.32	16			
Team 80 - MIECHV Phoenix	167.00	192.75	103.20	12	148.00	163.00	92.94	22			
Team 81 - MIECHV Tucson	256.00	249.80	48.26	5	187.50	193.33	81.51	18			
Team 82 - MIECHV Casa Grande	186.00	186.00	-	1	168.50	176.56	77.16	16			
Team 83 - MIECHV Maryvale	100.50	103.50	47.98	4	99.00	93.44	44.28	9			
Team 84 - MIECHV N. Mountain	84.00	84.00	-	1	69.50	93.50	57.12	8			
Team 85 - San Tan/Florence	-	-	-	0	117.00	125.75	47.34	4			
Team 86 - MIECHV Apache Junction	79.00	79.00	-	1	190.50	190.50	13.44	2			
Total	295.00	365.93	259.80	254	254.00	339.95	248.04	717			

Note: St. Dev = Standard Deviation, # = Number of Families

Top Four Reasons for Program Exit by Team - 2013 Percent and Number within Team

refeent			all (Pren		Postnata	ıl Combi	ined)	
Team	#1 Family Refused Further Services		#2 Moved Away		#3 Did Not Respond to Outreach Efforts		#4 Self Sufficiency	
	%	n	%	n	%	n	%	n
Team 2 - Central Phoenix	4.0	1	20.0	5	32.0	8	20.0	5
Team 3 - Maryvale	43.9	18	12.2	5	12.2	5	14.6	6
Team 5 - East Valley	10.9	5	23.9	11	10.9	5	17.4	8
Team 6 - Nogales	47.8	11	30.4	7	0.0	0	0.0	0
Team 7 - Page	33.3	2	33.3	2	0.0	0	0.0	0
Team 8 - Pima	19.2	5	7.7	2	30.8	8	15.4	4
Team 9 - Pima	20.0	5	16.0	4	28.0	7	4.0	1
Team 10 - Pima	11.1	2	22.2	4	11.1	2	27.8	5
Team 11 - Pima	29.4	10	17.6	6	11.8	4	5.9	2
Team 12 - Douglas / Sierra Vista	8.3	2	12.5	3	29.2	7	0.0	0
Team 13 - Tuba City	13.6	3	40.9	9	9.1	2	4.5	1
Team 15 - Yuma	7.1	1	64.3	9	0.0	0	7.1	1
Team 17 - Lake Havasu	19.0	4	33.3	7	0.0	0	38.1	8
Team 18 - Flagstaff	22.7	5	22.7	5	9.1	2	0.0	0
Team 19 - Sunnyslope	6.5	3	15.2	7	21.7	10	32.6	15
Team 21 - Prescott	31.0	13	16.7	7	2.4	1	11.9	5
Team 23 - Mesa	26.3	15	10.5	6	29.8	17	3.5	2
Team 27 - Pima	26.3	5	10.5	2	36.8	7	10.5	2
Team 28 - Safford	40.0	14	22.9	8	0.0	0	0.0	0
Team 32 - Winslow	0.0	0	30.8	8	15.4	4	38.5	10
Team 33 - Kingman	16.0	4	28.0	7	12.0	3	24.0	6
Team 43 - Bullhead City	11.5	3	30.8	8	7.7	2	3.8	1
Team 48 - West Phoenix	19.4	6	25.8	8	9.7	3	12.9	4
Team 50 - Flagstaff #2	0.0	0	40.0	2	0.0	0	0.0	0
Team 61 - Central Phoenix #1	34.5	10	20.7	6	10.3	3	6.9	2
Team 62 - Central Phoenix #2	27.5	14	13.7	7	23.5	12	9.8	5
Team 64 - SE/NE Maricopa	23.5	8	14.7	5	20.6	7	23.5	8
Team 65 - Combo Phoenix	25.6	10	10.3	4	20.5	8	12.8	5
Team 68 - Queen Creek	36.8	14	7.9	3	18.4	7	10.5	4
Team 70 - Yuma	5.9	1	41.2	7	5.9	1	17.6	3
Team 80 - MIECHV Phoenix	35.3	12	14.7	5	17.6	6	8.8	3
Team 81 - MIECHV Tucson	26.1	6	8.7	2	30.4	7	26.1	6
Team 82 - MIECHV Casa Grande	47.1	8	17.6	3	23.5	4	0.0	0
Team 83 - MIECHV Maryvale	38.5	5	30.8	4	7.7	1	0.0	0
Team 84 - MIECHV North Mountain	88.9	8	0.0	0	11.1	1	0.0	0
Team 85 - San Tan/Florence	25.0	1	25.0	1	25.0	1	0.0	0
Team 86 - MIECHV Apache Junction	0.0	0	100.0	3	0.0	0	0.0	0
Total	24.1	234	19.8	192	16.0	155	12.6	122



Health Insurance at Intake by Team - 2013 Percent and number within Team *

	PRENATAL POSTNATAL											
Team	No	ne	AHCO	CCS	Priv	ate	No	ne	AHC	CCS	Priv	ate
	%	n	%	n	%	n	%	n	%	n	%	n
Team 2 - Central Phoenix	11.1	2	88.8	16	0.0	0	5.7	4	91.4	64	2.9	2
Team 3 - Maryvale	7.1	1	71.4	10	21.4	3	7.6	7	84.8	78	5.4	5
Team 5 - East Valley	2.9	1	91.4	32	2.9	1	7.2	6	89.2	74	2.4	2
Team 6 - Nogales	11.1	2	83.3	15	0.0	0	3.0	2	93.9	62	3.0	2
Team 7 - Page	0.0	0	100	5	0.0	0	12.5	1	87.5	7	0.0	0
Team 8 - Pima	0.0	0	90.9	20	9.1	2	0.0	0	85.5	65	11.8	9
Team 9 - Pima	4.5	1	77.3	17	9.1	2	3.7	2	79.6	43	16.7	9
Team 10 - Pima	0.0	0	93.3	14	6.7	1	2.0	1	91.8	45	6.1	3
Team 11 - Pima	6.7	1	86.7	13	6.7	1	0.0	0	81.7	58	18.3	13
Team 12 - Douglas / Sierra	0.0	0	100	10	0.0	0	0.0	0	92.7	26	16.2	7
Vista	0.0	U	100	10	0.0	0	0.0	U	83.7	36	16.3	/
Team 13 - Tuba City	0.0	0	94.4	17	0.0	0	0.0	0	97.6	41	2.4	1
Team 15 - Yuma	6.2	1	81.3	13	12.5	2	0.0	0	95.0	57	5.0	3
Team 17 - Lake Havasu	0.0	0	100	13	0.0	0	2.1	1	89.4	42	8.5	4
Team 18 - Flagstaff	13.5	5	78.4	29	8.1	3	10.7	3	85.7	24	3.6	1
Team 19 - Sunnyslope	0.0	0	93.3	14	6.7	1	9.5	7	85.1	63	5.4	4
Team 21 - Prescott	50.0	3	50.0	3	0.0	0	6.8	6	77.3	68	14.8	13
Team 23 - Mesa	4.3	1	95.7	22	0.0	0	7.4	8	87.0	94	5.6	6
Team 27 - Pima	0.0	0	88.2	15	11.8	2	1.9	1	82.7	43	13.5	7
Team 28 - Safford	3.4	1	72.4	21	24.1	7	3.0	2	74.6	50	22.4	15
Team 32 - Winslow	15.0	3	85.0	17	0.0	0	0.0	0	97.1	33	2.9	1
Team 33 - Kingman	7.9	3	73.7	28	18.4	7	7.4	2	85.2	23	7.4	2
Team 43 - Bullhead City	12.5	3	83.3	20	4.2	1	6.1	3	87.8	43	6.1	3
Team 48 - West Phoenix	0.0	0	90.5	19	4.8	1	8.0	6	82.7	62	9.3	7
Team 50 - Flagstaff #2	0.0	0	91.7	11	8.3	1	11.1	1	88.9	8	0.0	0
Team 61 - Central Phoenix #1	3.8	1	96.2	25	0.0	0	8.1	5	85.5	53	4.8	3
Team 62 - Central Phoenix #2	5.9	2	88.2	30	2.9	1	9.4	8	85.9	73	4.7	4
Team 64 - SE/NE Maricopa	7.1	2	92.9	26	0.0	0	6.3	6	85.4	82	8.3	8
Team 65 - Combo Phoenix	6.3	2	90.6	29	0.0	0	3.4	3	88.5	77	6.9	6
Team 68 - Queen Creek	4.3	1	95.7	22	0.0	0	6.8	5	86.3	63	6.8	5
Team 70 - Yuma	0.0	0	100	6	0.0	0	4.3	4	88.2	82	6.5	6
Team 80 - MIECHV Phoenix	3.7	1	92.6	25	3.7	1	14.3	10	77.1	54	8.6	6
Team 81 - MIECHV Tucson	12.5	2	87.5	14	0.0	0	0.0	0	85.7	36	14.3	6
Team 82 - MIECHV Casa	0.0	0	100	4	0.0	0	4.3	2	89.4	42	6.4	3
Grande	0.0	U	100	4	0.0	U	4.3		09.4	42	0.4	3
Team 83 - MIECHV	6.7	1	80.0	12	13.3	2	8.3	4	83.3	40	8.3	4
Maryvale	0.7	1	00.0	14	13.3		0.5	4	03.3	40	0.5	*
Team 84 - MIECHV North	0.0	0	100	16	0.0	0	6.7	2	90.0	27	3.3	1
Mountain												
Team 85 - San Tan/Florence	0.0	0	100	3	0.0	0	0.0	0	89.5	17	10.5	2
Team 86 - MIECHV Apache	50.0	1	50.0	1	0.0	0	0.0	0	100	4	0.0	0
Junction						_						
*"Other" insurance percentages are not	5.8	41	86.5	607	5.5	39	5.2	112	85.9	1833	8.1	173

^{*&}quot;Other" insurance percentages are not listed in this table but can be estimated by subtracting the sum of the other insurance categories from 100.



Late or No Prenatal Care or Poor Compliance at <u>Intake</u> 2013 by Site

Percent and number () within Team

Did the mother have late or no prenatal care or poor compliance with prenatal care?

Team	•	PRENATAL			POSTNATAI	
1 eani	Yes	No	Unknown	Yes	No	Unknown
Team 2 - Central Phoenix	33.3% (6)	66.7% (12)	0.0% (0)	50.0% (35)	48.5% (34)	1.4% (1)
Team 3 - Maryvale	35.7% (5)	64.3% (9)	0.0% (0)	40.2% (37)	59.8% (55)	0.0% (0)
Team 5 - East Valley	40.0% (14)	60.0% (21)	0.0% (0)	42.7% (35)	57.3% (47)	0.0% (0)
Team 6 - Nogales	16.7% (3)	83.3% (15)	0.0% (0)	39.4% (26)	56.1% (37)	4.5% (3)
Team 7 - Page	0.0% (0)	100% (5)	0.0% (0)	25.0% (2)	75.0% (6)	0.0% (0)
Team 8 - Pima	22.7% (5)	77.3% (17)	0.0% (0)	24.7% (19)	75.3% (58)	0.0% (0)
Team 9 - Pima	22.7% (5)	77.3% (17)	0.0% (0)	27.8% (15)	72.2% (39)	0.0% (0)
Team 10 - Pima	17.6% (3)	82.4% (14)	0.0% (0)	20.0% (10)	80.0% (40)	0.0% (0)
Team 11 - Pima	33.3% (5)	66.7% (10)	0.0% (0)	21.1% (15)	78.9% (56)	0.0% (0)
Team 12 - Douglas / Sierra Vista	60.0% (6)	40.0% (4)	0.0% (0)	34.9% (15)	65.1% (28)	0.0% (0)
Team 13 - Tuba City	35.0% (7)	65.0% (13)	0.0% (0)	23.8% (10)	73.8% (31)	2.4% (1)
Team 15 - Yuma	37.5% (6)	62.5% (10)	0.0% (0)	40.3% (25)	59.7% (37)	0.0% (0)
Team 17 - Lake Havasu	15.4% (2)	84.6% (11)	0.0% (0)	18.8% (9)	66.7% (32)	14.6% (7)
Team 18 - Flagstaff	29.7% (11)	70.3% (26)	0.0% (0)	17.9% (5)	78.6% (22)	3.6% (1)
Team 19 - Sunnyslope	33.3% (5)	66.7% (10)	0.0% (0)	41.9% (31)	58.1% (43)	0.0% (0)
Team 21 - Prescott	33.3% (2)	50.0% (3)	16.7% (1)	55.7% (49)	43.2% (38)	1.1% (1)
Team 23 - Mesa	26.1% (6)	69.6% (16)	4.3% (1)	41.3% (45)	57.8% (63)	0.9% (1)
Team 27 - Pima	23.5% (4)	76.5% (13)	0.0% (0)	25.0% (13)	75.0% (39)	0.0% (0)
Team 28 - Safford	20.7% (6)	79.3% (23)	0.0% (0)	13.4% (9)	77.6% (52)	9.0% (6)
Team 32 - Winslow	23.8% (5)	76.2% (16)	0.0% (0)	26.5% (9)	70.6% (24)	2.9% (1)
Team 33 - Kingman	15.4% (6)	82.1% (32)	2.6% (1)	28.6% (8)	71.4% (20)	0.0% (0)
Team 43 - Bullhead City	43.5% (10)	52.2% (12)	4.3% (1)	44.9% (22)	53.1% (26)	2.0% (1)
Team 48 - West Phoenix	20.0% (4)	75.0% (15)	5.0% (1)	32.9% (25)	67.1% (51)	0.0% (0)
Team 50 - Flagstaff #2	8.3% (1)	91.7% (11)	0.0% (0)	11.1% (1)	88.9% (8)	0.0% (0)
Team 61 - Central Phoenix #1	15.4% (4)	84.6% (22)	0.0% (0)	45.2% (28)	54.8% (34)	0.0% (0)
Team 62 - Central Phoenix #2	26.5% (9)	73.5% (25)	0.0% (0)	41.2% (35)	57.6% (49)	1.2% (1)
Team 64 - SE/NE Maricopa	35.7% (10)	64.3% (18)	0.0% (0)	38.5% (37)	61.5% (59)	0.0% (0)
Team 65 - Combo Phoenix	32.3% (10)	67.7% (21)	0.0% (0)	38.1% (32)	60.7% (51)	1.2% (1)
Team 68 - Queen Creek	40.9% (9)	59.1% (13)	0.0% (0)	45.2% (33)	53.4% (39)	1.4% (1)
Team 70 - Yuma	16.7% (1)	83.3% (5)	0.0% (0)	31.9% (30)	68.1% (64)	0.0% (0)
Team 80 - MIECHV Phoenix	33.3% (9)	66.7% (18)	0.0% (0)	34.3% (24)	64.3% (45)	1.4% (1)
Team 81 - MIECHV Tucson	18.8% (3)	81.3% (13)	0.0% (0)	21.4% (9)	78.6% (33)	0.0% (0)
Team 82 - MIECHV Casa Grande	50.0% (2)	50.0% (2)	0.0% (0)	19.6% (9)	80.4% (37)	0.0% (0)
Team 83 - MIECHV Maryvale	33.3% (5)	66.7% (10)	0.0% (0)	43.8% (21)	56.3% (27)	0.0% (0)
Team 84 - MIECHV North Mountain	25.0% (4)	75.0% (12)	0.0% (0)	46.7 (14)	53.3% (16)	0.0% (0)
Team 85 - San Tan/Florence	0.0% (0)	100% (3)	0.0% (0)	26.3% (5)	73.7% (14)	0.0% (0)
Team 86 - MIECHV Apache Junction	50.0% (1)	50.0% (1)	0.0% (0)	60.0% (3)	40.0% (2)	0.0% (0)
Total	27.9% (194)	71.4% (497)	0.7% (5)	35.1% (750)	63.6% (1358)	1.3% (27)



Race of Mother by Site <u>PRENATAL</u> - 2013 Percent and number within Team

Team	lit allu			ican	As	ian	Nat	tive	Mix	æd/
	Cauc	Caucasian American				rican		rican	Otl	•
	%	n	%	n	%	n	%	n	%	n
Team 2 - Central Phoenix	77.8	14	11.1	2	5.6	1	0.0	0	5.6	1
Team 3 - Maryvale	85.7	12	7.1	1	7.1	1	0.0	0	0.0	0
Team 5 - East Valley	91.4	32	2.9	1	0.0	0	5.7	2	0.0	0
Team 6 - Nogales	100	18	0.0	0	0.0	0	0.0	0	0.0	0
Team 7 - Page	0.0	0	0.0	0	0.0	0	100	5	0.0	0
Team 8 - Pima	86.3	19	4.5	1	0.0	0	4.5	1	4.5	1
Team 9 - Pima	81.8	18	4.5	1	4.5	1	9.1	2	0.0	0
Team 10 - Pima	82.3	14	5.9	1	0.0	0	5.9	1	5.9	1
Team 11 - Pima	86.6	13	6.7	1	6.7	1	0.0	0	0.0	0
Team 12 - Douglas / Sierra Vista	70.0	7	10.0	1	0.0	0	0.0	0	10.0	1
Team 13 - Tuba City	0.0	0	0.0	0	0.0	0	100	20	0.0	0
Team 15 - Yuma	81.3	13	0.0	0	0.0	0	6.3	1	12.5	2
Team 17 - Lake Havasu	92.3	12	0.0	0	0.0	0	7.7	1	0.0	0
Team 18 - Flagstaff	62.2	23	2.7	1	0.0	0	16.2	6	18.9	7
Team 19 - Sunnyslope	80.0	12	0.0	0	6.7	1	0.0	0	12.5	2
Team 21 - Prescott	100	7	0.0	0	0.0	0	0.0	0	0.0	0
Team 23 - Mesa	86.4	19	4.5	1	0.0	0	0.0	0	9.1	2
Team 27 - Pima	88.2	15	5.9	1	0.0	0	5.9	1	0.0	0
Team 28 - Safford	86.2	25	0.0	0	0.0	0	6.9	2	6.9	2
Team 32 - Winslow	28.6	6	0.0	0	0.0	0	42.9	9	9.5	2
Team 33 - Kingman	85.7	30	0.0	0	0.0	0	0.0	0	8.6	3
Team 43 - Bullhead City	68.0	17	4.0	1	0.0	0	0.0	0	8.0	2
Team 48 - West Phoenix	80.0	16	10.0	2	5.0	1	0.0	0	5.0	1
Team 50 - Flagstaff #2	50.0	6	0.0	0	0.0	0	50.0	6	0.0	0
Team 61 - Central Phoenix #1	69.2	18	26.9	7	0.0	0	0.0	0	3.8	1
Team 62 - Central Phoenix #2	70.6	24	20.6	7	2.9	1	2.9	1	2.9	1
Team 64 - SE/NE Maricopa	78.6	22	7.1	2	0.0	0	3.6	1	10.7	3
Team 65 - Combo Phoenix	51.6	16	29.0	9	0.0	0	6.5	2	12.9	4
Team 68 - Queen Creek	91.3	21	4.3	1	0.0	0	4.3	1	0.0	0
Team 70 - Yuma	66.7	4	0.0	0	0.0	0	0.0	0	33.3	2
Team 80 - MIECHV Phoenix	63.0	17	14.8	4	0.0	0	7.4	2	14.8	4
Team 81 - MIECHV Tucson	68.8	11	18.8	3	0.0	0	12.5	2	0.0	0
Team 82 - MIECHV Casa Grande	100	4	0.0	0	0.0	0	0.0	0	0.0	0
Team 83 - MIECHV Maryvale	80.0	12	20.0	3	0.0	0	0.0	0	0.0	0
Team 84 - MIECHV N Mountain	75.1	12	18.8	3	0.0	0	0.0	0	6.3	1
Team 85 - San Tan/Florence	100	3	0.0	0	0.0	0	0.0	0	0.0	0
Team 86 - MIECHV Apache Junction	50.0	1	0.0	0	0.0	0	0.0	0	50.0	1
Total	75.0	513	7.9	54	1.0	7	9.6	66	6.4	44



Race of Mother by Site <u>POSTNATAL</u> - 2013 Percent and number within Team

Team		u mumi		ican		ian	Nat	tive	Mix	ced/
Team	Cau	casian		rican	Ame			rican	Otl	•
	%	n	%	n	%	n	%	n	%	n
Team 2 - Central Phoenix	87.1	61	10.0	7	0.0	0	1.4	1	1.4	1
Team 3 - Maryvale	88.0	81	4.3	4	1.1	1	0.0	0	6.5	6
Team 5 - East Valley	82.9	68	9.8	8	1.2	1	4.9	4	1.2	1
Team 6 - Nogales	98.5	65	0.0	0	0.0	0	0.0	0	1.5	1
Team 7 - Page	0.0	0	0.0	0	0.0	0	100	8	0.0	0
Team 8 - Pima	91.0	70	2.6	2	0.0	0	0.0	0	6.4	5
Team 9 - Pima	83.3	45	3.7	2	1.9	1	7.4	4	3.7	2
Team 10 - Pima	81.7	40	4.1	2	2.0	1	6.1	3	6.1	3
Team 11 - Pima	80.0	56	7.1	5	5.7	4	2.9	2	4.3	3
Team 12 - Douglas / Sierra Vista	76.7	33	2.3	1	4.7	2	2.3	1	14.0	6
Team 13 - Tuba City	0.0	0	0.0	0	0.0	0	92.9	39	7.1	3
Team 15 - Yuma	72.6	45	0.0	0	0.0	0	0.0	0	27.4	17
Team 17 - Lake Havasu	83.3	40	2.1	1	0.0	0	4.2	2	10.4	5
Team 18 - Flagstaff	50.0	14	3.6	1	3.6	1	14.3	4	28.6	8
Team 19 - Sunnyslope	79.7	59	9.5	7	1.4	1	5.4	4	4.1	3
Team 21 - Prescott	93.1	81	2.3	2	1.1	1	0.0	0	3.4	3
Team 23 - Mesa	80.6	87	8.3	9	0.9	1	6.5	7	3.7	4
Team 27 - Pima	82.7	43	1.9	1	1.9	1	5.8	3	7.7	4
Team 28 - Safford	95.5	64	1.5	1	0.0	0	1.5	1	1.5	1
Team 32 - Winslow	26.4	9	0.0	0	0.0	0	67.6	23	5.9	2
Team 33 - Kingman	100	26	0.0	0	0.0	0	0.0	0	0.0	0
Team 43 - Bullhead City	89.8	44	2.0	1	0.0	0	0.0	0	8.2	4
Team 48 - West Phoenix	90.8	69	5.3	4	0.0	0	2.6	2	1.3	1
Team 50 - Flagstaff #2	44.4	4	0.0	0	0.0	0	44.4	4	11.1	1
Team 61 - Central Phoenix #1	81.9	50	8.2	5	0.0	0	1.6	1	8.2	5
Team 62 - Central Phoenix #2	71.8	61	16.5	14	0.0	0	7.1	6	4.8	4
Team 64 - SE/NE Maricopa	87.5	84	8.3	8	1.0	1	2.1	2	1.0	1
Team 65 - Combo Phoenix	75.0	63	10.7	9	2.4	2	7.0	6	4.7	4
Team 68 - Queen Creek	94.5	69	2.7	2	0.0	0	1.4	1	1.4	1
Team 70 - Yuma	61.7	58	3.2	3	1.1	1	0.0	0	34.0	32
Team 80 - MIECHV Phoenix	84.3	59	11.4	8	0.0	0	1.4	1	2.8	2
Team 81 - MIECHV Tucson	87.8	36	12.2	5	0.0	0	0.0	0	0.0	0
Team 82 - MIECHV Casa Grande	58.6	27	6.5	3	2.2	1	13.0	6	19.6	9
Team 83 - MIECHV Maryvale	87.5	42	6.3	3	2.1	1	2.1	1	2.1	1
Team 84 - MIECHV N Mountain	83.3	25	13.3	4	0.0	0	0.0	0	3.3	1
Team 85 - San Tan/Florence	47.4	9	10.5	2	0.0	0	10.5	2	31.6	6
Team 86 - MIECHV Apache Junction	100	5	0.0	0	0.0	0	0.0	0	0.0	0
Total	79.6	1692	5.8	124	1.0	21	6.5	138	7.1	150



Hispanic Ethnicity of Mother by Team-2013

Hispanic Ethnicity of Mother by Team - 2015									
Toom	Percent	Percent	Percent						
Team	Hispanic Prenatal	Hispanic Postnatal	Hispanic Total						
Team 2 - Central Phoenix	70.0%	74.7%	73.7%						
Team 3 - Maryvale	66.7%	77.9%	76.4%						
Team 5 - East Valley	39.5%	57.8%	52.1%						
Team 6 - Nogales	94.4%	100.0%	98.8%						
Team 7 - Page	0.0%	0.0%	0.0%						
Team 8 - Pima	77.3%	82.1%	81.0%						
Team 9 - Pima	45.5%	58.2%	54.5%						
Team 10 - Pima	82.4%	72.0%	74.6%						
Team 11 - Pima	60.0%	52.8%	54.0%						
Team 12 - Douglas / Sierra Vista	41.7%	46.8%	45.8%						
Team 13 - Tuba City	0.0%	6.8%	4.7%						
Team 15 - Yuma	83.3%	98.4%	95.0%						
Team 17 - Lake Havasu	7.7%	31.3%	26.2%						
Team 18 - Flagstaff	55.3%	58.1%	56.5%						
Team 19 - Sunnyslope	25.0%	42.3%	39.4%						
Team 21 - Prescott	57.1%	31.5%	33.3%						
Team 23 - Mesa	60.9%	52.3%	53.8%						
Team 27 - Pima	66.7%	66.0%	66.2%						
Team 28 - Safford	50.0%	44.1%	45.9%						
Team 32 - Winslow	38.1%	5.9%	18.2%						
Team 33 - Kingman	12.8%	3.6%	9.0%						
Team 43 - Bullhead City	36.0%	27.5%	30.3%						
Team 48 - West Phoenix	61.9%	68.8%	67.3%						
Team 50 - Flagstaff	33.3%	22.2%	28.6%						
Team 61 - Central Phoenix #1	55.6%	74.2%	68.5%						
Team 62 - Central Phoenix #2	54.3%	57.5%	56.6%						
Team 64 - SE/NE Maricopa	48.3%	57.1%	55.1%						
Team 65 - Combo Phoenix	31.3%	47.1%	42.9%						
Team 68 - Queen Creek	69.6%	60.3%	62.5%						
Team 70 - Yuma	100.0%	75.8%	77.2%						
Team 80 - MIECHV Phoenix	63.0%	67.6%	66.3%						
Team 81 - MIECHV Tucson	50.0%	50.0%	50.0%						
Team 82 - MIECHV Casa Grande	100.0%	72.3%	74.5%						
Team 83 - MIECHV Maryvale	80.0%	77.1%	77.8%						
Team 84 - MIECHV N. Mountain	62.5%	60.0%	60.9%						
Team 85 – San Tan/Florence	66.7%	55.0%	56.5%						
Team 86 - MIECHV Apache Junction	100.0%	40.0%	57.1%						
Total	51.5%	58.3%	56.6%						



Gestational Age by Team - 2013 (Number and Percent within Team)

Was the gestational age less than 37 weeks?

		PREN	ATAL			POSTN	JATAL	
Team	N	О	Y	es	N	lo	Y	es
	%	n	%	n	%	n	%	n
Team 2 - Central Phoenix	69.2	9	30.8	4	77.1	54	22.9	16
Team 3 - Maryvale	75.0	9	25.0	3	82.6	76	17.4	16
Team 5 - East Valley	93.1	27	6.9	2	82.9	68	17.1	14
Team 6 - Nogales	100	13	0.0	0	89.4	59	10.6	7
Team 7 - Page	100	4	0.0	0	87.5	7	12.5	1
Team 8 - Pima	88.9	16	11.1	2	84.6	66	15.4	12
Team 9 - Pima	87.5	14	12.5	2	88.9	48	11.1	6
Team 10 - Pima	81.8	9	18.2	2	88.0	44	12.0	6
Team 11 - Pima	88.9	8	11.1	1	87.3	62	12.7	9
Team 12 - Douglas / Sierra Vista	100	3	0.0	0	90.7	39	9.3	4
Team 13 - Tuba City	93.3	14	6.7	1	92.3	36	7.7	3
Team 15 - Yuma	86.7	13	13.3	2	96.8	60	3.2	2
Team 17 - Lake Havasu	100	10	0.0	0	91.5	43	8.5	4
Team 18 - Flagstaff	87.5	28	12.5	4	74.1	20	25.9	7
Team 19 - Sunnyslope	92.9	13	7.1	1	75.7	56	24.3	18
Team 21 - Prescott	75.0	3	25.0	1	95.5	84	4.5	4
Team 23 - Mesa	92.3	12	7.7	1	86.1	93	13.9	15
Team 27 - Pima	100.0	14	0.0	0	90.4	47	9.4	5
Team 28 - Safford	95.2	20	4.8	1	91.0	61	9.0	6
Team 32 - Winslow	92.3	12	7.7	1	94.1	32	5.9	2
Team 33 - Kingman	95.5	21	4.5	1	91.7	22	8.3	2
Team 43 - Bullhead City	82.4	14	17.6	3	85.7	42	14.3	7
Team 48 - West Phoenix	100	16	0.0	0	81.6	62	18.4	14
Team 50 - Flagstaff #2	100	10	0.0	0	66.7	6	33.3	3
Team 61 - Central Phoenix #1	85.0	17	15.0	3	87.1	54	12.9	8
Team 62 - Central Phoenix #2	95.8	23	4.2	1	78.8	67	21.2	18
Team 64 - SE/NE Maricopa	77.8	21	22.2	6	83.3	80	16.7	16
Team 65 - Combo Phoenix	95.2	20	4.8	1	82.1	69	17.9	15
Team 68 - Queen Creek	95.0	19	5.0	1	88.7	63	11.3	8
Team 70 - Yuma	60.0	3	40.0	2	87.2	82	12.8	12
Team 80 - MIECHV Phoenix	90.9	20	9.1	2	82.9	58	17.1	12
Team 81 - MIECHV Tucson	75.0	6	25.0	2	82.9	34	17.1	7
Team 82 - MIECHV Casa Grande	100	2	0.0	0	87.0	40	13.0	6
Team 83 - MIECHV Maryvale	87.5	7	12.5	1	85.1	40	14.9	7
Team 84 - MIECHV North Mountain	90.0	9	10.0	1	70.0	21	30.0	9
Team 85 - San Tan/Florence	100	2	0.0	0	100	19	0.0	0
Team 86 - MIECHV Apache Junction	100	1	0.0	0	80.0	4	20.0	1
Total	89.9	462	10.1	52	85.8	1818	14.2	302



Low Birth Weight by Team - 2013 (Number and Percent within Team)

Did the child have low birth weight? (less than 2500 grams, 88 ounces, or 5.5 pounds)

(tess than 250			ATAL	рошин		POSTN	VATAL	
Team	N	О	Y	es	N	О	Y	es
	%	n	%	n	%	n	%	n
Team 2 - Central Phoenix	66.7	8	33.3	4	75.7	53	24.3	17
Team 3 - Maryvale	81.8	9	18.2	2	85.4	76	14.6	13
Team 5 - East Valley	88.9	24	11.1	3	86.1	68	13.9	11
Team 6 - Nogales	100	8	0.0	0	90.3	56	9.7	6
Team 7 - Page	100	3	0.0	0	75.0	6	25.0	2
Team 8 - Pima	94.1	16	5.9	1	88.7	63	11.3	8
Team 9 - Pima	100	14	0.0	0	87.8	43	12.2	6
Team 10 - Pima	88.9	8	11.1	1	100	48	0.0	0
Team 11 - Pima	88.9	8	11.1	1	91.4	64	8.6	6
Team 12 - Douglas / Sierra Vista	0.0	0	0.0	0	87.8	36	12.2	5
Team 13 - Tuba City	100	13	0.0	0	92.9	39	7.1	3
Team 15 - Yuma	93.8	15	6.3	1	98.2	55	1.8	1
Team 17 - Lake Havasu	100	9	0.0	0	91.3	42	8.7	4
Team 18 - Flagstaff	89.7	26	10.3	3	75.0	21	25.0	7
Team 19 - Sunnyslope	100	10	0.0	0	80.6	58	19.4	14
Team 21 - Prescott	100	3	0.0	0	94.3	82	5.7	5
Team 23 - Mesa	90.0	9	10.0	1	92.4	97	7.6	8
Team 27 - Pima	66.7	2	33.3	1	95.9	47	4.1	2
Team 28 - Safford	94.7	18	5.3	1	92.3	60	7.7	5
Team 32 - Winslow	90.9	10	9.1	1	96.9	31	3.1	1
Team 33 - Kingman	90.9	20	9.1	2	96.3	26	3.7	1
Team 43 - Bullhead City	100	15	0.0	0	89.8	44	10.2	5
Team 48 - West Phoenix	90.9	10	9.1	1	87.5	63	12.5	9
Team 50 - Flagstaff #2	77.8	7	22.2	2	88.9	8	11.1	1
Team 61 - Central Phoenix #1	88.9	16	11.1	2	89.7	52	10.3	6
Team 62 - Central Phoenix #2	94.1	16	5.9	1	85.4	70	14.6	12
Team 64 - SE/NE Maricopa	88.0	22	12.0	3	81.1	77	18.9	18
Team 65 - Combo Phoenix	100	20	0.0	0	85.5	71	14.5	12
Team 68 - Queen Creek	89.5	17	10.5	2	88.2	60	11.8	8
Team 70 - Yuma	75.0	3	25.0	1	93.1	81	6.9	6
Team 80 - MIECHV Phoenix	94.4	17	5.6	1	87.0	60	13.0	9
Team 81 - MIECHV Tucson	66.7	4	33.3	2	83.8	31	16.2	6
Team 82 - MIECHV Casa Grande	100	2	0.0	0	88.6	39	11.4	5
Team 83 - MIECHV Maryvale	75.0	3	25.0	1	84.1	37	15.9	7
Team 84 - MIECHV North Mountain	75.0	3	25.0	1	85.2	23	14.8	4
Team 85 - San Tan/Florence	100	1	0.0	0	94.7	18	5.3	1
Team 86 - MIECHV Apache Junction	100	1	0.0	0	100	3	0.0	0
Total	90.9	390	9.1	39	88.1	1809	11.9	245



Yearly Income by Team - 2013

Yearly Income by Team - 2013 PRENATAL POSTNATAL											
		AL									
Team	Median	Number	Median	Number							
	Yearly Income	1 (0.2212 02	Yearly Income								
Team 2 - Central Phoenix	\$4,728	18	\$12,000	70							
Team 3 - Maryvale	\$15,360	14	\$11,440	92							
Team 5 - East Valley	\$0	35	\$9,600	82							
Team 6 - Nogales	\$10,440	18	\$10,000	66							
Team 7 - Page	\$0	5	\$12,000	8							
Team 8 - Pima	\$2,400	22	\$2,100	77							
Team 9 - Pima	\$1,449	22	\$8,748	55							
Team 10 - Pima	\$2,640	17	\$9,060	50							
Team 11 - Pima	\$0	15	\$9,600	71							
Team 12 - Douglas / Sierra Vista	\$7,650	10	\$14,400	43							
Team 13 - Tuba City	\$10,800	20	\$6,240	42							
Team 15 - Yuma	\$7,740	16	\$7,200	62							
Team 17 - Lake Havasu	\$11,000	13	\$15,800	48							
Team 18 - Flagstaff	\$13,200	37	\$9,600	28							
Team 19 - Sunnyslope	\$10,800	15	\$11,400	74							
Team 21 - Prescott	\$0	7	\$0	88							
Team 23 - Mesa	\$14,400	23	\$12,000	109							
Team 27 - Pima	\$14,700	17	\$12,000	52							
Team 28 - Safford	\$14,700	29	\$13,500	67							
Team 32 - Winslow	\$6,312	21	\$6,360	34							
Team 33 - Kingman	\$12,000	39	\$9,660	28							
Team 43 - Bullhead City	\$9,600	25	\$10,800	49							
Team 48 - West Phoenix	\$9,600	20	\$13,920	76							
Team 50 - Flagstaff #2	\$12,600	12	\$13,200	9							
Team 61 - Central Phoenix #1	\$6,804	26	\$13,800	62							
Team 62 - Central Phoenix #2	\$4,800	34	\$10,800	85							
Team 64 - SE/NE Maricopa	\$12,000	28	\$12,000	96							
Team 65 - Combo Phoenix	\$10,600	32	\$12,000	84							
Team 68 - Queen Creek	\$7,200	23	\$10,800	73							
Team 70 - Yuma	\$1,920	6	\$11,760	94							
Team 80 - MIECHV Phoenix	\$9,600	27	\$12,000	70							
Team 81 - MIECHV Tucson	\$4,848	16	\$8,388	42							
Team 82 - MIECHV Casa Grande	\$6,000	4	\$14,400	47							
Team 83 - MIECHV Maryvale	\$12,000	15	\$10,560	48							
Team 84 - MIECHV North Mountain	\$9,600	16	\$15,600	30							
Team 85 - San Tan/Florence	\$22,000	3	\$0	19							
Team 86 - MIECHV Apache Junction	\$6,000	2	\$0	5							
Total	\$9,600	702	\$10,800	2135							



Mother's Parent Survey Score by Team - 2013

	douner s		ATAL	.ore by i	POSTNATAL					
Team	0 - 20	25 - 40	45 - 65	70+	0 - 20	25 - 40	45 - 65	70+		
Team 2 - Central Phoenix	5.0%	25.0%	60.0%	10.0%	0.0%	26.7%	65.3%	8.0%		
Team 3 - Maryvale	0.0%	40.0%	40.0%	20.0%	1.1%	30.5%	64.2%	4.2%		
Team 5 - East Valley	0.0%	21.1%	73.7%	5.3%	0.0%	22.9%	66.3%	10.8%		
Team 6 - Nogales	16.7%	66.7%	16.7%	0.0%	13.4%	80.6%	6.0%	0.0%		
Team 7 - Page	0.0%	0.0%	80.0%	20.0%	0.0%	55.6%	44.4%	0.0%		
Team 8 – Pima	4.5%	54.5%	36.4%	4.5%	3.8%	70.5%	24.4%	1.3%		
Team 9 - Pima	0.0%	45.5%	45.5%	9.1%	5.5%	47.3%	47.3%	0.0%		
Team 10 - Pima	5.9%	35.3%	41.2%	17.6%	10.0%	64.0%	24.0%	2.0%		
Team 11 - Pima	6.7%	33.3%	60.0%	0.0%	6.9%	66.7%	23.6%	2.8%		
Team 12 - Douglas / Sierra Vista	0.0%	0.0%	83.3%	16.7%	2.1%	46.8%	42.6%	8.5%		
Team 13 - Tuba City	15.0%	60.0%	25.0%	0.0%	4.5%	75.0%	18.2%	2.3%		
Team 15 - Yuma	22.2%	44.4%	27.8%	5.6%	11.3%	71.0%	16.1%	1.6%		
Team 17 - Lake Havasu	7.7%	46.2%	46.2%	0.0%	2.1%	60.4%	35.4%	2.1%		
Team 18 - Flagstaff	5.3%	55.3%	39.5%	0.0%	3.2%	61.3%	32.3%	3.2%		
Team 19 - Sunnyslope	0.0%	18.8%	62.5%	18.8%	0.0%	25.6%	61.5%	12.8%		
Team 21 - Prescott	0.0%	71.4%	28.6%	0.0%	0.0%	69.7%	29.2%	1.1%		
Team 23 - Mesa	4.3%	34.8%	56.5%	4.3%	0.9%	20.2%	67.0%	11.9%		
Team 27 - Pima	0.0%	38.9%	61.1%	0.0%	5.7%	54.7%	35.8%	3.8%		
Team 28 - Safford	0.0%	80.0%	20.0%	0.0%	5.9%	66.2%	26.5%	1.5%		
Team 32 - Winslow	0.0%	19.0%	52.4%	28.6%	2.9%	35.3%	52.9%	8.8%		
Team 33 - Kingman	0.0%	33.3%	53.8%	12.8%	7.1%	25.0%	46.4%	21.4%		
Team 43 - Bullhead City	0.0%	32.0%	52.0%	16.0%	2.0%	47.1%	45.1%	5.9%		
Team 48 - West Phoenix	0.0%	57.1%	33.3%	9.5%	0.0%	48.1%	46.8%	5.2%		
Team 50 - Flagstaff #2	0.0%	58.3%	41.7%	0.0%	0.0%	44.4%	55.6%	0.0%		
Team 61 - Central Phoenix #1	0.0%	25.9%	63.0%	11.1%	0.0%	30.6%	59.7%	9.7%		
Team 62 - Central Phoenix #2	2.9%	28.6%	54.3%	14.3%	0.0%	24.1%	65.5%	10.3%		
Team 64 - SE/NE Maricopa	0.0%	20.7%	69.0%	10.3%	1.0%	33.7%	51.0%	14.3%		
Team 65 - Combo Phoenix	0.0%	40.6%	53.1%	6.3%	3.4%	23.0%	64.4%	9.2%		
Team 68 - Queen Creek	0.0%	21.7%	60.9%	17.4%	0.0%	32.9%	60.3%	6.8%		
Team 70 - Yuma	16.7%	66.7%	16.7%	0.0%	7.4%	60.0%	32.6%	0.0%		
Team 80 - MIECHV Phoenix	0.0%	18.5%	66.7%	14.8%	0.0%	32.4%	56.3%	11.3%		
Team 81 - MIECHV Tucson	0.0%	31.3%	68.8%	0.0%	7.1%	47.6%	45.2%	0.0%		
Team 82 - MIECHV Casa Grande	0.0%	75.0%	25.0%	0.0%	6.4%	70.2%	23.4%	0.0%		
Team 83 - MIECHV Maryvale	6.7%	53.3%	33.3%	6.7%	2.1%	29.2%	60.4%	8.3%		
Team 84 - MIECHV North Mountain	0.0%	25.0%	68.8%	6.3%	6.7%	30.0%	60.0%	3.3%		
Team 85 - San Tan/Florence	0.0%	66.7%	33.3%	0.0%	10.0%	45.0%	45.0%	0.0%		
Team 86 - MIECHV Apache Junction	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%		
Total	2.9%	38.1%	50.6%	8.5%	3.3%	45.2%	45.6%	5.9%		



Trimester of Enrollment into Prenatal Program by Team - 2013

Trimester of Enrollment into Prenatal Program by Team - 2013													
	1st Trin	mostor	2	nd	3	3 rd		er/	Total				
Team	15 1111	nester	Trin	Trimester		nester	Unknown		Total				
	#	%	#	%	#	%	#	%	#				
Team 2 - Central Phoenix	1	5.6	5	27.8	11	61.1	1	5.6	18				
Team 3 - Maryvale	2	14.3	3	21.4	9	64.3	0	0.0	14				
Team 5 - East Valley	0	0.0	7	20.0	28	80.0	0	0.0	35				
Team 6 - Nogales	3	16.7	10	55.6	5	27.8	0	0.0	18				
Team 7 - Page	3	60.0	1	20.0	1	20.0	0	0.0	5				
Team 8 - Pima	5	22.7	6	27.3	11	50.0	0	0.0	22				
Team 9 - Pima	2	9.1	9	40.9	11	50.0	0	0.0	22				
Team 10 - Pima	4	23.5	5	29.4	8	47.1	0	0.0	17				
Team 11 - Pima	2	13.3	8	53.3	4	26.7	1	6.7	15				
Team 12 - Douglas / Sierra Vista	1	10.0	3	30.0	6	60.0	0	0.0	10				
Team 13 - Tuba City	3	15.0	8	40.0	9	45.0	0	0.0	20				
Team 15 - Yuma	0	0.0	6	37.5	10	62.5	0	0.0	16				
Team 17 - Lake Havasu	1	7.7	5	38.5	6	46.2	1	7.7	13				
Team 18 - Flagstaff	3	8.1	13	35.1	20	54.1	1	2.7	37				
Team 19 - Sunnyslope	2	13.3	5	33.3	8	53.3	0	0.0	15				
Team 21 - Prescott	2	28.6	4	57.1	1	14.3	0	0.0	7				
Team 23 - Mesa	2	8.7	9	39.1	12	52.2	0	0.0	23				
Team 27 - Pima	0	0.0	7	41.2	10	58.8	0	0.0	17				
Team 28 - Safford	4	13.8	10	34.5	15	51.7	0	0.0	29				
Team 32 - Winslow	3	14.3	8	38.1	9	42.9	1	4.8	21				
Team 33 - Kingman	20	51.3	12	30.8	7	17.9	0	0.0	39				
Team 43 - Bullhead City	2	8.0	9	36.0	13	52.0	1	4.0	25				
Team 48 - West Phoenix	0	0.0	7	35.0	13	65.0	0	0.0	20				
Team 50 - Flagstaff #2	1	8.3	5	41.7	6	50.0	0	0.0	12				
Team 61 - Central Phoenix #1	3	11.5	6	23.1	17	65.4	0	0.0	26				
Team 62 - Central Phoenix #2	4	11.8	18	52.9	12	35.3	0	0.0	34				
Team 64 - SE/NE Maricopa	2	7.1	7	25.0	19	67.9	0	0.0	28				
Team 65 - Combo Phoenix	3	9.4	13	40.6	16	50.0	0	0.0	32				
Team 68 - Queen Creek	3	13.0	4	17.4	16	69.6	0	0.0	23				
Team 70 - Yuma	1	16.7	1	16.7	4	66.7	0	0.0	6				
Team 80 - MIECHV Phoenix	0	0.0	10	37.0	17	63.0	0	0.0	27				
Team 81 - MIECHV Tucson	1	6.3	5	31.3	8	50.0	2	12.5	16				
Team 82 - MIECHV Casa Grande	1	25.0	0	0.0	3	75.0	0	0.0	4				
Team 83 - MIECHV Maryvale	2	13.3	7	46.7	6	40.0	0	0.0	15				
Team 84 - MIECHV North	5	21.2	F	21.2	-	27 5	0	0.0	16				
Mountain	5	31.3	5	31.3	6	37.5	0	0.0	16				
Team 85 - San Tan/Florence	0	0.0	1	33.3	2	66.7	0	0.0	3				
Team 86 - MIECHV Apache	0	0.0	0	0.0	1	50.0	1	50.0	2				
Junction					1				2				
Total	91	12.9	242	34.5	360	51.3	9	1.3	702				



Engaged Prenatal Families that Exited Before Baby's Birth By Team - 2013

Engaged Prenatal Families that Ex	Total	# Closed	% Closed
Team	Families	Before birth	Before birth
Team 2 - Central Phoenix	18	1	5.6
Team 3 - Maryvale	14	0	0.0
Team 5 - East Valley	35	0	0.0
Team 6 - Nogales	18	1	5.6
Team 7 - Page	5	0	0.0
Team 8 - Pima	22	0	0.0
Team 9 - Pima	22	0	0.0
Team 10 - Pima	17	0	0.0
Team 11 - Pima	15	0	0.0
Team 12 - Douglas / Sierra Vista	10	0	0.0
Team 13 - Tuba City	20	0	0.0
Team 15 - Yuma	17	0	0.0
Team 17 - Lake Havasu	13	1	7.7
Team 18 - Flagstaff	37	1	2.7
Team 19 - Sunnyslope	15	1	6.7
Team 21 - Prescott	7	1	14.3
Team 23 - Mesa	23	0	0.0
Team 27 - Pima	17	0	0.0
Team 28 - Safford	29	1	3.4
Team 32 - Winslow	21	2	9.5
Team 33 - Kingman	39	4	10.3
Team 43 - Bullhead City	25	1	4.0
Team 48 - West Phoenix	20	0	0.0
Team 50 - Flagstaff #2	12	0	0.0
Team 61 - Central Phoenix #1	26	1	3.8
Team 62 - Central Phoenix #2	34	2	5.9
Team 64 - SE/NE Maricopa	28	0	0.0
Team 65 - Combo Phoenix	32	1	3.1
Team 68 - Queen Creek	23	0	0.0
Team 70 - Yuma	6	0	0.0
Team 80 - MIECHV Phoenix	27	0	0.0
Team 81 - MIECHV Tucson	16	0	0.0
Team 82 - MIECHV Casa Grande	4	0	0.0
Team 83 - MIECHV Maryvale	15	2	13.3
Team 84 - MIECHV North Mountain	16	0	0.0
Team 85 - San Tan/Florence	3	0	0.0
Team 86 - MIECHV Apache Junction	2	0	0.0
Total	702	20	2.8

Appendix B. Healthy Families Arizona Steering Committee Members

Jenna Shroyer

Betsy Long

Department of Economic Security,

Healthy Families Arizona

Central Administration

K Vilay

First Things First

Craig LeCroy

Kerry Milligan

Michel Lahti

Darlene Lopez

LeCroy & Milligan Associates

Ginger Ward

Suzanne Schunk

Southwest Human Development

Eric Schindler

Ellie Jimenez

Child and Family Resources

Julie Rosen

Parenting Arizona

Becky Ruffner

Prevent Child Abuse Arizona

Committee Chairperson

Mary Warren

Prevent Child Abuse Arizona

Beth Rosenberg

Children's Action Alliance

Judy Krysik

Arizona State University

Joanne M. Karolzak

Casa de los Niños

Mary Ellen Cunningham

Jessica Stewart

Department of Health Service,

Bureau of Women's and Children's

Health



Appendix C. Parent Survey

Parent Survey*

Problem Areas and Interpretation (Mother & Father)

Toblem Areas and interpretation (Mother C		
Areas (Scales)	Range	Interpretation/ Administration
Parent Childhood Experiences (e.g., Childhood history of physical abuse and deprivation)	0, 5, or 10	The <i>Parent Survey</i> comprises a 10-item rating scale. A score of 0 represents normal, 5
2. Lifestyle, Behaviors and Mental Health (e.g., substance abuse, mental illness, or criminal history)	0, 5, or 10	represents a mild degree of the problem and a 10 represents severe for both the Mother and Father Parent Survey Checklist items. The <i>Parent Survey</i> is an assessment tool and
3. Parenting Experiences (e.g., Previous or current CPS involvement)	0, 5, or 10	is administered to the mother and father prior to enrollment through an interview by a
4. Coping Skills and Support Systems (e.g., Selfesteem, available lifelines, possible depression)	0, 5, or 10	Family Assessment Worker from the Healthy Families Arizona Program. A family is
5. Stresses (e.g., Stresses, concerns, domestic violence)	0, 5, or 10	considered eligible to receive the Healthy Families Arizona program if either parent
6. Anger Management Skills (e.g., Potential for violence)	0, 5, or 10	scores 25 or higher.
7. Expectations of Infant's Developmental Milestones and Behaviors	0, 5, or 10	
8. Plans for Discipline (e.g., infant, toddler, and child)	0, 5, or 10	
9. Perception of New Infant	0, 5, or 10	
10. Bonding/Attachment Issues	0, 5, or 10	
Total Score	0 - 100	A score over 25 is considered medium risk for child abuse and neglect, and a score over 40 is considered high-risk for child abuse.

^{*} Modified from the Family Stress Checklist



Appendix D. Healthy Families Arizona Prenatal Logic Model

Long Term Outco	omes				Program Resources				
€ Reduced child abu ∉ Increased child we ∠ Strengthened family u ® Reduced abuse of	ellness and developn ily relations unity	nent		Family Support Specialists; Family Assessment Workers; Clinical consultants; Qualit Assurance/Training/Evaluation; Funding; Community based services, e.g., prenatal support & education programs, hospital programs, nutrition services, translation & transportation services, mental health, domestic violence, substance abuse services					es, e.g., prenatal es, translation &
Neduced abase of	arags and alconor		Pren	atal Prog	ıran	n Objectives			
Increase the family's support network	Improve mother's mental health	Increase parents' health behaviors	Increase the family members' problem solving skills	Improve nutrition	е	Increase empathy for the unborn baby	Increase father involvement	Increase safety in the home environment	Increase the delivery of healthy babies, free from birth complications
				m Activit	ies	and Strategies			
Assess family's support systems Model relationship skills Foster connections to positive support sources	Identify signs and history of depression, abuse, mental illness, substance abuse Review history of birthing Encourage medical assessment, referral and treatment if needed Encourage exercise, personal care, rest Educate on post partum depression	Assess personal risk behaviors Educate on risk behaviors, lifestyle choices, community resources, affect of drugs, medicines on fetus Explore domestic violence, form safety plan Encourage help seeking and adoption of healthy	Identify major life stressors Educate on problem-solving, goal setting. Use IFSP to review progress Educate on access to community resources, how to reach out Make referrals as needed for anger and stress management Teach stress reduction	provide materials on nutrition during pregnancy, buying and choosing healthy foods, and requiremer for healthy fetal developme Provide referrals to WIC, other resources Encourage healthy celebration	on , , , , , , , , , , , , , , , , , , ,	Explore and assess issues around pregnancy, relationships, hopes, fears Discuss and educate about changes in body, sexuality during pregnancy Share developmental information about stages of development of fetus Encourage pre- birth bonding and stimulation exercises (reading, touch, etc)	Explore father's feelings, childhood experiences, expectations, hopes and fears about baby and goals for fatherhood Educate about changes in intimacy, ways father can support mother Encourage supportive relationships for father Educate on father's legal rights and responsibilities	Assess, encourage and guide family in making needed safety arrangements, e.g. crib safety, car seat, pets, SIDS, child care, feeding Educate on baby temperaments, how to calm baby, Shaken Baby Syndrome, medical concerns Refer to parenting workshops Explore cultural beliefs about discipline	Connect mother to prenatal care and encourage compliance with visits Encourage STD testing Educate on symptoms requiring medical attention Promote breastfeeding and refer to resources
		behaviors	Outco	me Fyalı	uati	ion Measures			
		1	Juico	ine Evall	ual		HFPIP; FSS-23;		
H.F. Parenting Inventor Prenatal (HFPIP); FSS-2		HFPIP; FSS- 23; CRAFFT	HFPIP; FSS-23	HFPIP; FSS	6-23	HFPIP; FSS-23	father involvement scale	HFPIP; FSS-23; Safety checklist	HFPIP; FSS-23; FSS20P



Appendix E. Healthy Families Arizona Postnatal Logic Model

						izona i ostn			
	Long	Term Outcom	nes				Program Re		
∉ Increased child ∠ Strengthened ∇ Enhanced fam		velopment			Family Support Specialists; Family Assessment Workers; Clinical consultants; Quality Assurance/Training/Evaluation; Funding; Community based services, e.g., parenting support & education programs, nutrition services, translation & transportation services, mental health, domestic violence, substance abuse services				
			Pos	tnatal Pro	graı	m Objectives		T	
Increase the family's support network	Improve mother's mental health	Increase parents' health behaviors	Increase the family members' problem solving skills	Improve far stability		Increase parental competence	Increase positive parent-child interaction	Improve child health <u>and</u> Optimize child development	Prevent child abuse and neglect
	T = 1 -14 ·	T				and Strategies	T =	T =	T
Assess family's support systems Model relationship skills Foster connections to positive support sources Educate on communication skills	Identify signs and history of depression, abuse, mental illness, substance abuse Address issues of grief and loss Encourage medical assessment, referral and treatment if needed Encourage/coa ch on exercise, personal care, rest Educate on post- partum depression	Assess personal risk behaviors; Educate on dangers of specific risk behaviors Support family in making lifestyle changes and adopting healthy behaviors Educate on community resources Explore domestic violence, create safety plan	Identify major life stressors Educate on problem-solving, goal setting. Use IFSP to review progress Educate on access to community resources, how to reach out Make referrals as needed for anger and stress management Educate about effect of stress on child	Assess basic living skills and needs; help for access housing education, job and budget management services. Coach parent set and evaluate goals; teach be living skills Promote used community resources for sufficiency Explore family planning decises	d amily g, g, c,	Provide empathy and support to parent in parenting role Teach child development, early brain development, temperament Address parental expectations of child Educate about importance of routines and rules Refer to parenting groups and classes	Promote and teach developmentally appropriate stimulation activities Educate about rhythm and reciprocity, reading baby's cues Promote reading, bonding during feeding Encourage family activities, celebrations Coach on father involvement	complete developmental assessments and make referrals Address medical screenings, support well child checks, immunizations, and good nutrition habits Promote play, reading; provide links to early childhood programs Assess and Guide family in making safety arrangements, e.g., home and car safety	Assess risk of child abuse and neglect Coach and guide in choices for child care Educate about consequences of child abuse and neglect
			Out	come Eval	uati	ion Measures			
Healthy Families Parenting Inventor (HFPI); FSS-23	y HFPI; FSS-23	HFPI; FSS-23; CRAFFT	HFPI; FSS-23	HFPI; FSS-	-23	HFPI; FSS-23	HFPI; FSS-23; father involvement scale	HFPI; FSS-23; Safety checklist; ASQ	HFPI; FSS-23; FSS20

