

Smart Money, Smart Moves: New Mexico's Targeted Investments In Early Childhood



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Data... Insight... Impact

New Mexico's Targeted Investments In Early Childhood Education



Welcome To
Education Reform

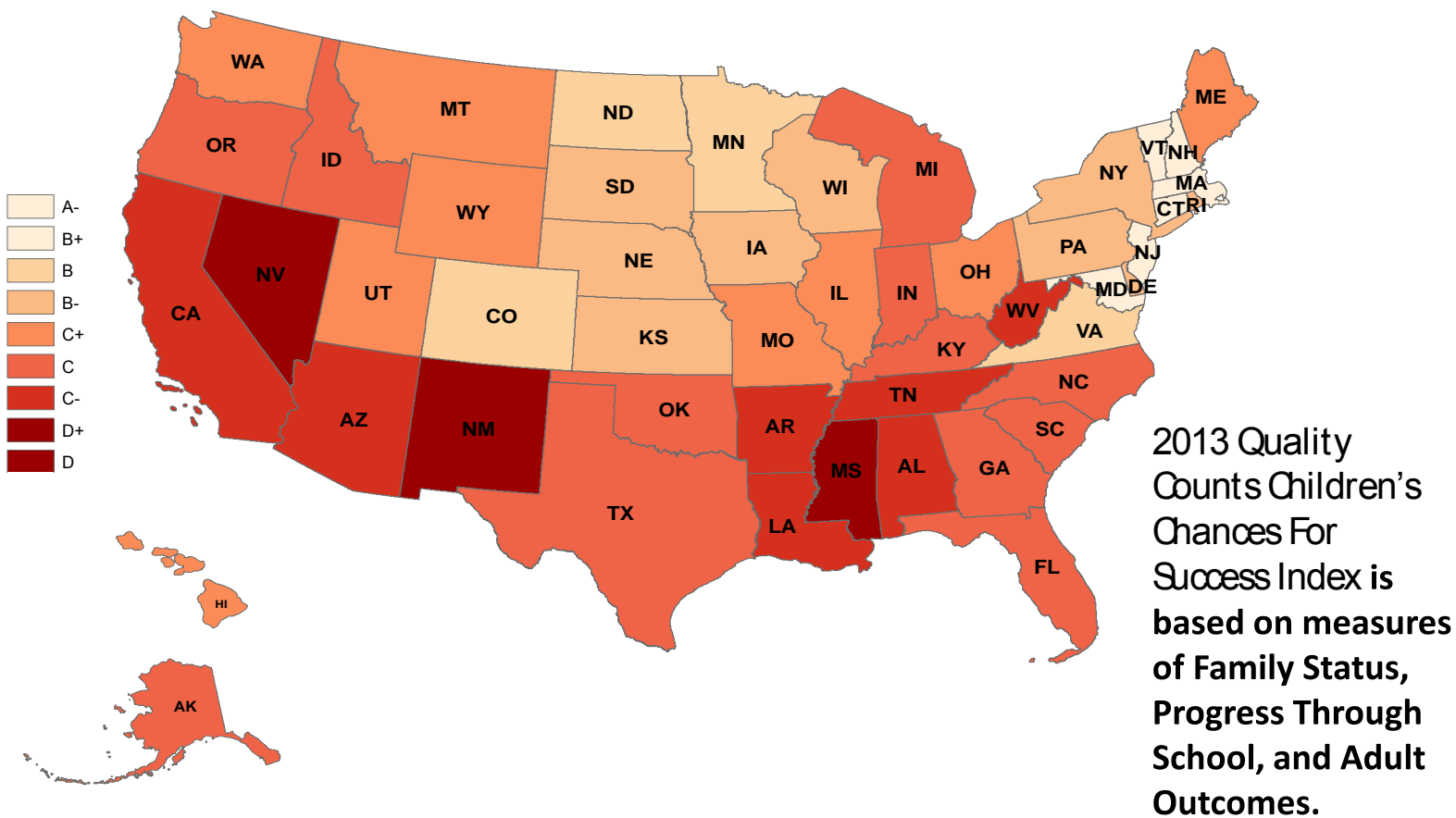


Early Childhood & The Importance Of Common Ground

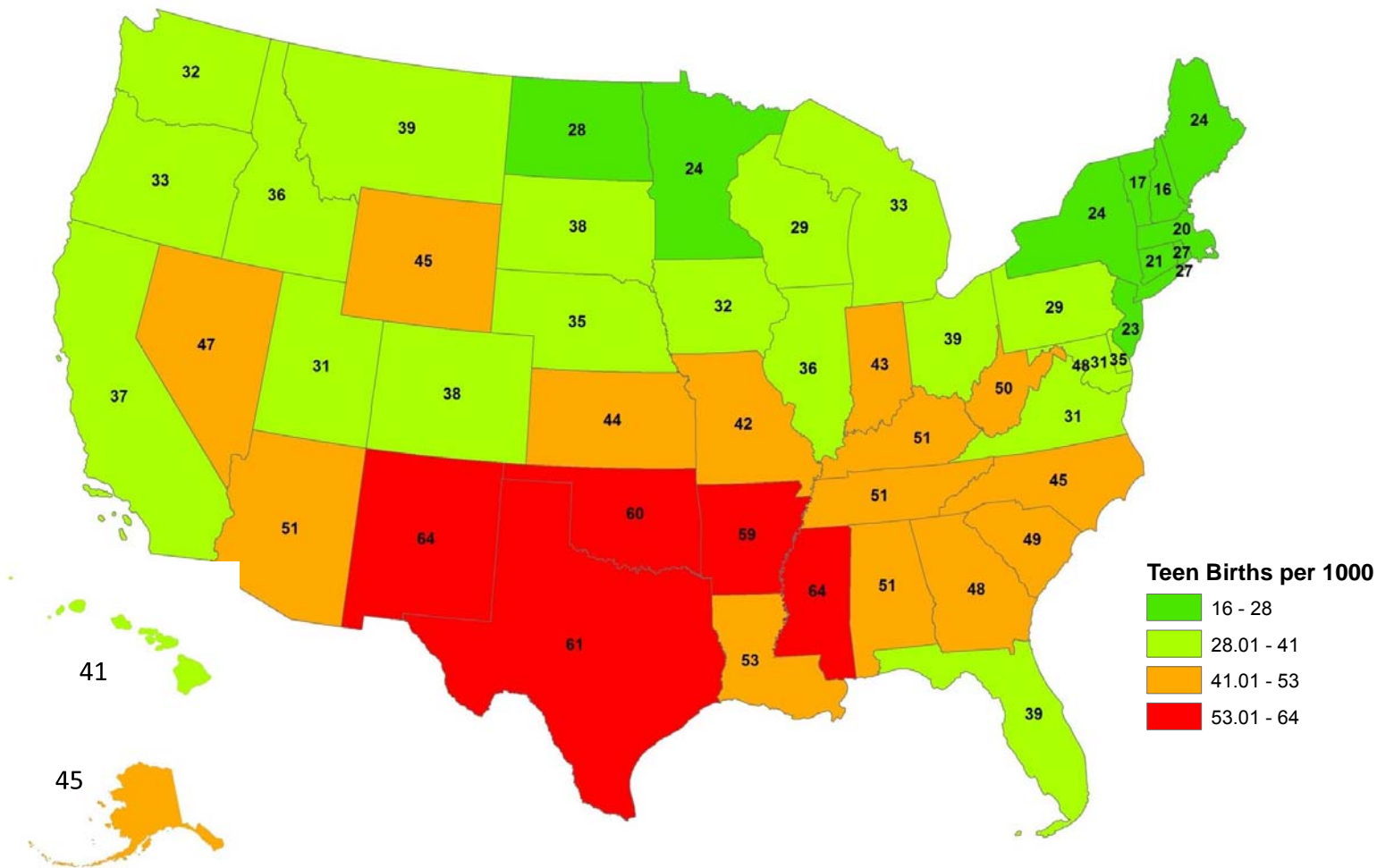
Good people from all sides of the political spectrum are concerned about poverty, inequality, and social mobility. There is agreement about the problem, and a real prospect of consensus around the importance of early childhood.

- Governor & Executive Branch (CYFD, DOH, PED)
- Legislature (Republicans & Democrats, House & Senate)
- EC Associations & Advocates
- Business & Community Leaders
- Families
- EC Providers
- Local Governments
- Universities
- Foundations
- Federal Government

New Mexico Children's Chances For Success Are Among The Worst In The Nation, 2013

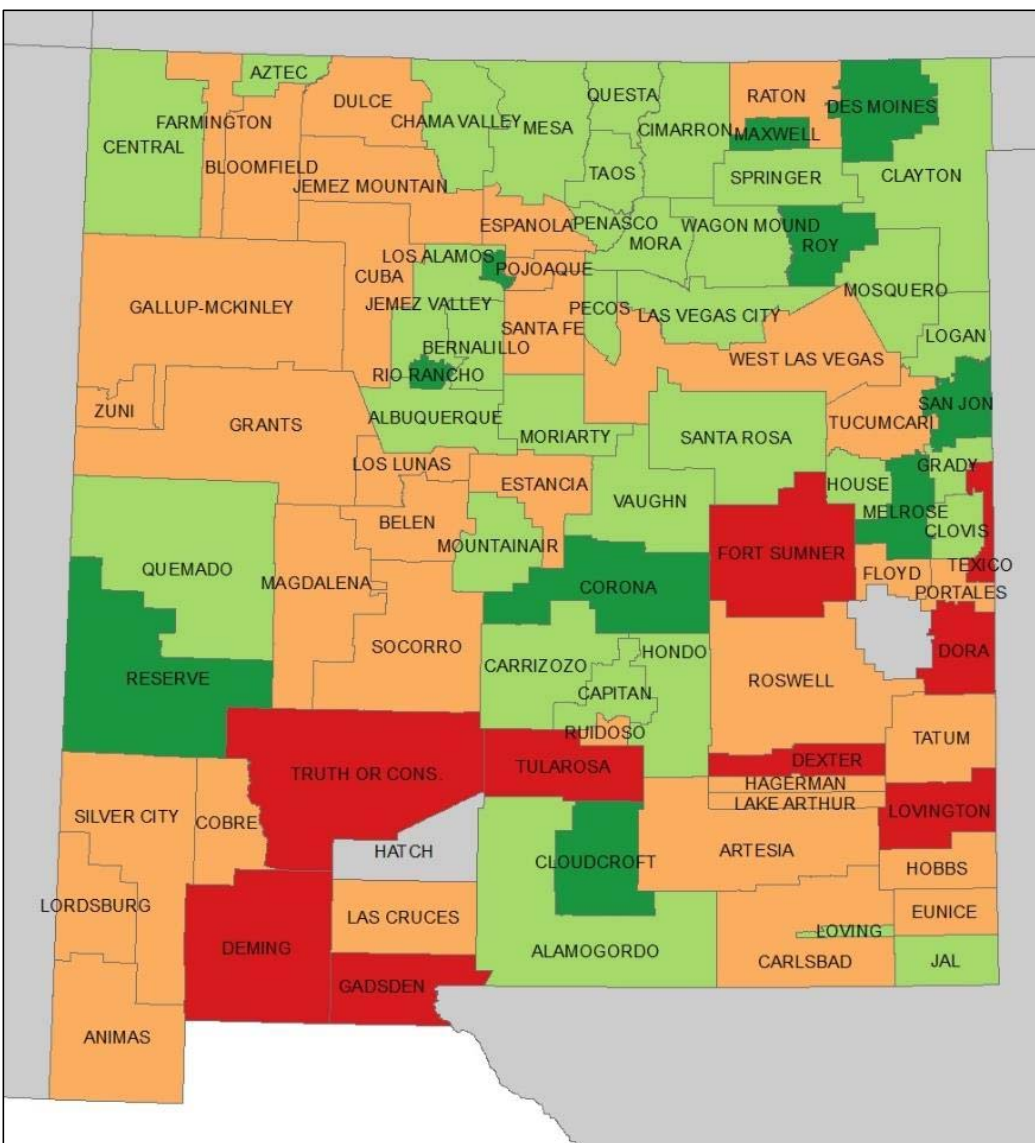
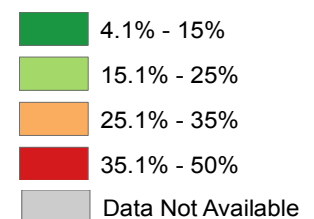


Early Foundations: Teen Births Per 1000, 2009



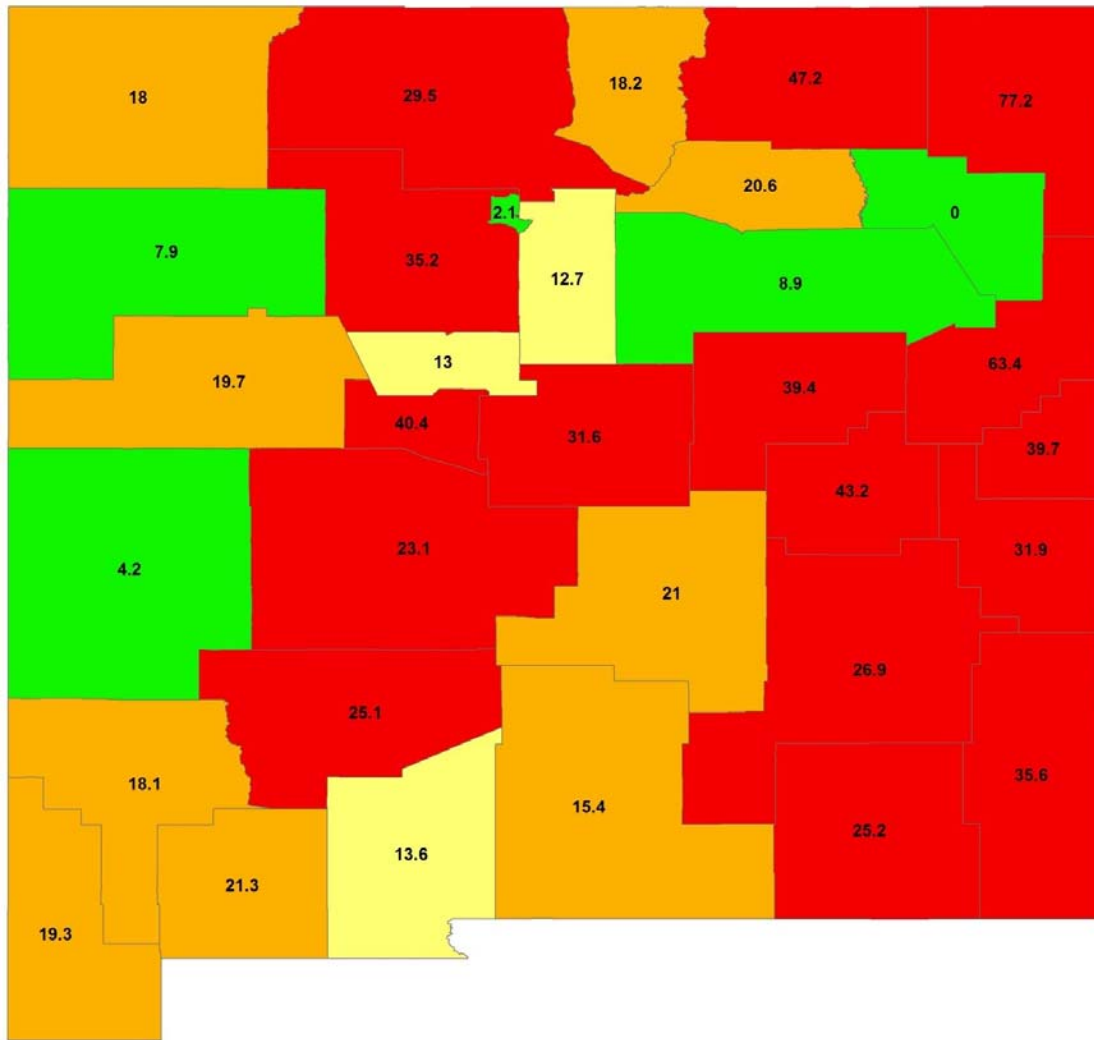
Percentage of Birth Mothers Without a High School Diploma, by New Mexico School District

Research has shown a link between parental education levels and child outcomes such as educational achievement and attainment.



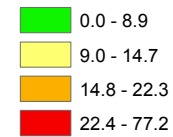
Source: New Mexico Birth Certificate Database, Bureau of Vital Records and Health Statistics, New Mexico Department of Health. Taken from New Mexico Community Data Collaborative. 2012.

Child Abuse Allegations Per 1,000 Children



Ratio of Total Substantiated Child Abuse Allegations per 1,000 Children in the Population by County, 2010. The state average is 18.5 with a lower and upper confidence level of 14.8 and 22.2, respectively.

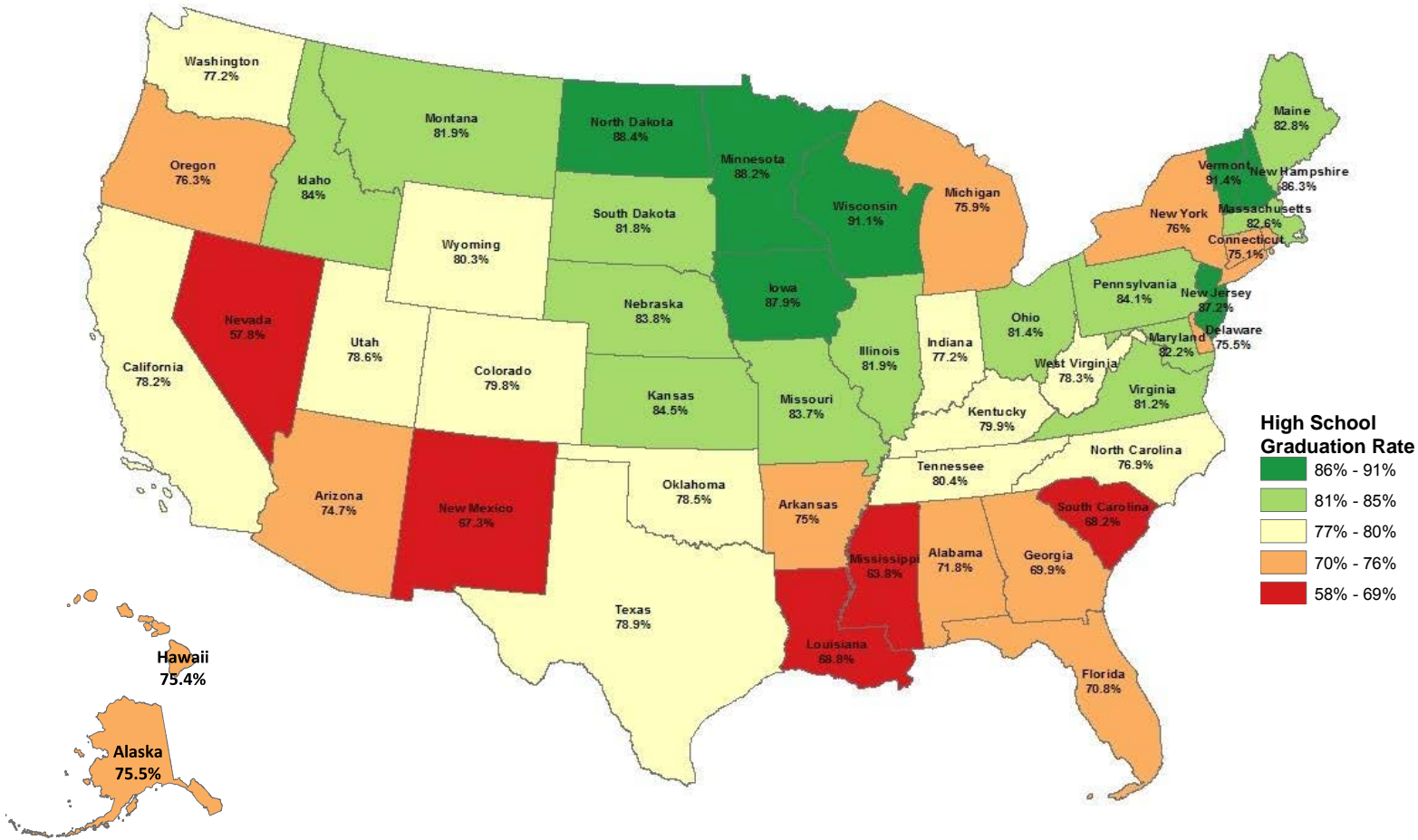
Child Abuse Allegations per 1,000 Children



Data Notes: It is possible that one investigated report may include multiple types of substantiated abuse of one or more children in a family. In addition, it is possible for an individual child to have more than one substantiated investigation of abuse or neglect for a single reporting period.

Source: New Mexico Department of Health Data IBIS
http://ibis.health.state.nm.us/indicator/view_numbers/ChildAbuse.Total.Cnty.html

School Years: High School Graduation Rates, By State 2009-2010









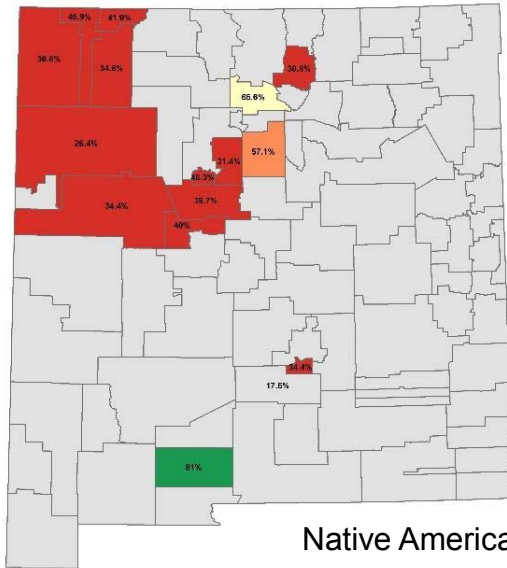
Source: National Center for Education Statistics, Public School Graduates and Dropouts from the Common Core of Data:
School Year 2009 – 2010

A map of the United States showing the percentage of the population that is Caucasian by county. The map uses a color scale from green (low percentage) to red (high percentage). The word "Caucasian" is written in large black letters at the bottom right of the map.

Map of the United States showing the percentage of the Hispanic population by state. The map uses a color scale from red (low percentage) to yellow (high percentage).

State	Percentage
Alabama	49.4%
Alaska	47.1%
Arizona	54%
Arkansas	44.7%
California	67.7%
Colorado	57.9%
Connecticut	59.1%
Delaware	44.7%
District of Columbia	67.7%
Florida	44.7%
Georgia	44.7%
Hawaii	44.7%
Idaho	44.7%
Illinois	44.7%
Indiana	44.7%
Iowa	44.7%
Kansas	44.7%
Kentucky	44.7%
Louisiana	44.7%
Maine	44.7%
Maryland	44.7%
Massachusetts	44.7%
Michigan	44.7%
Minnesota	44.7%
Mississippi	44.7%
Missouri	44.7%
Montana	44.7%
Nebraska	44.7%
Nevada	44.7%
New Hampshire	44.7%
New Jersey	44.7%
New Mexico	44.7%
New York	44.7%
North Carolina	44.7%
North Dakota	44.7%
Ohio	44.7%
Oklahoma	44.7%
Oregon	44.7%
Pennsylvania	44.7%
Rhode Island	44.7%
South Carolina	44.7%
South Dakota	44.7%
Tennessee	44.7%
Texas	44.7%
Utah	44.7%
Vermont	44.7%
Virginia	44.7%
Washington	44.7%
West Virginia	44.7%
Wisconsin	44.7%
Wyoming	44.7%

	80.1% - 90%
	70.1% - 80%
	60.1% - 70%
	50.1% - 60%
	Less Than 50%
	No Data



A map of the United States showing the percentage of the African American population in each state. The map uses a color scale from light yellow (low percentage) to dark red (high percentage). States with high percentages (above 20%) are highlighted in red or dark orange. States with percentages between 10% and 20% are highlighted in orange. States with percentages below 10% are highlighted in light yellow or green.

State	Percentage
Alabama	27.3%
Arkansas	20%
California	6.0%
Colorado	7.2%
Connecticut	10.9%
Delaware	20.3%
District of Columbia	68.1%
Florida	15.3%
Georgia	45.3%
Idaho	1.0%
Illinois	13.3%
Indiana	10.3%
Iowa	7.0%
Kansas	8.0%
Kentucky	10.0%
Louisiana	27.3%
Maine	1.0%
Maryland	27.3%
Massachusetts	10.9%
Michigan	13.3%
Minnesota	7.0%
Mississippi	27.3%
Missouri	10.3%
Montana	1.0%
Nebraska	7.0%
Nevada	1.0%
New Hampshire	1.0%
New Jersey	13.3%
New Mexico	1.0%
New York	19.1%
North Carolina	20.3%
North Dakota	1.0%
Ohio	13.3%
Oklahoma	10.3%
Oregon	1.0%
Pennsylvania	13.3%
Rhode Island	10.9%
South Carolina	27.3%
South Dakota	1.0%
Tennessee	10.3%
Texas	13.3%
Utah	1.0%
Vermont	1.0%
Virginia	10.3%
Washington	1.0%
West Virginia	10.3%
Wisconsin	7.0%
Wyoming	1.0%

Source: New Mexico Public Education Department, NMSBA Proficiencies By Grade, All Students, School Year 2011-2012.

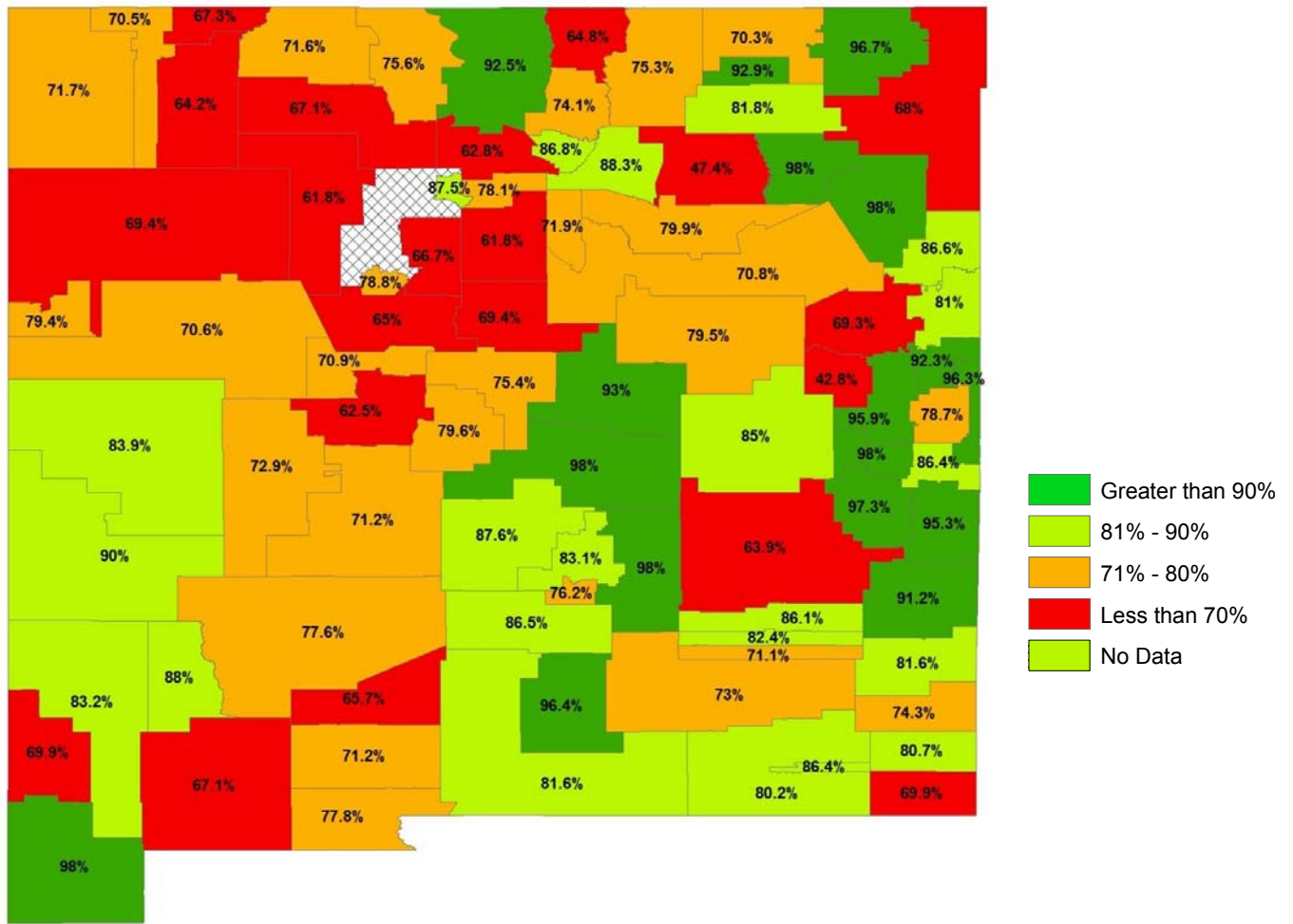
0.0% - 5.0%

5.1% - 10.0%

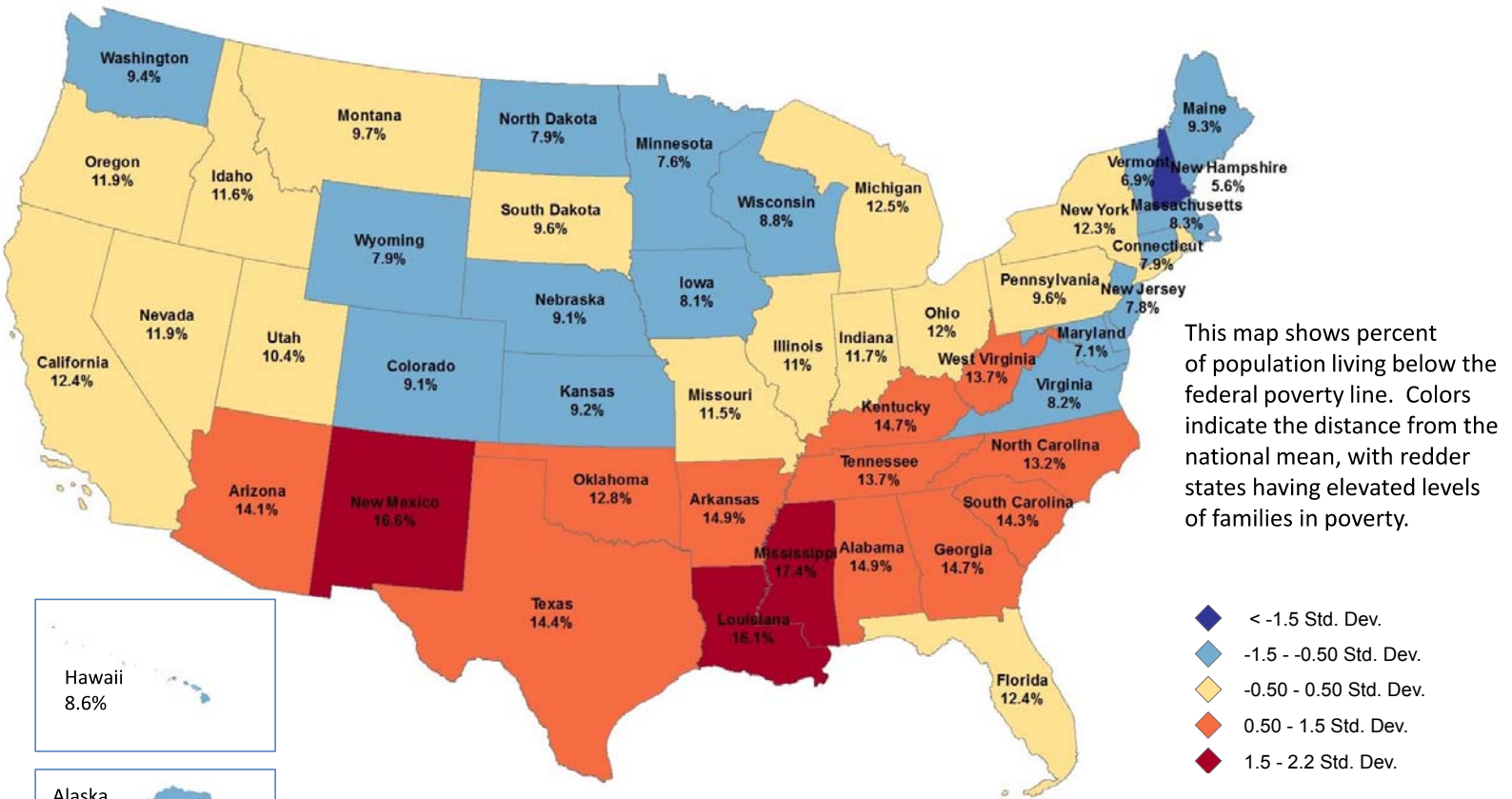
10.1% - 20.0%

Greater than 20.0%

4-Year High School Graduation Rate, All Students, By District, Class Of 2012



Families Living Below the Poverty Line

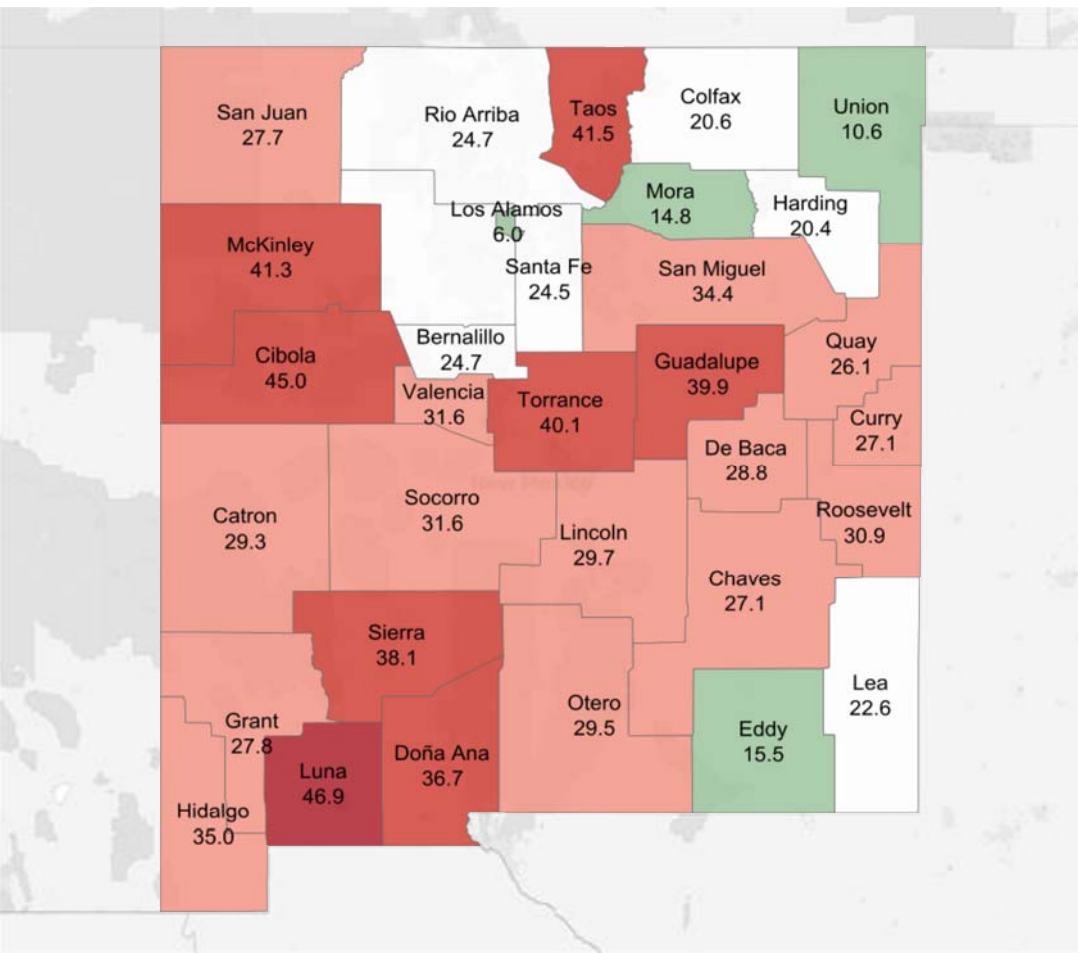


Source: U.S. Census Bureau, 2011 American Community Survey 1-Year Estimate.
Supporting documentation on code lists, subject definitions, data accuracy, and statistical testing can be found on the American Community Survey website in the Data and Documentation section.

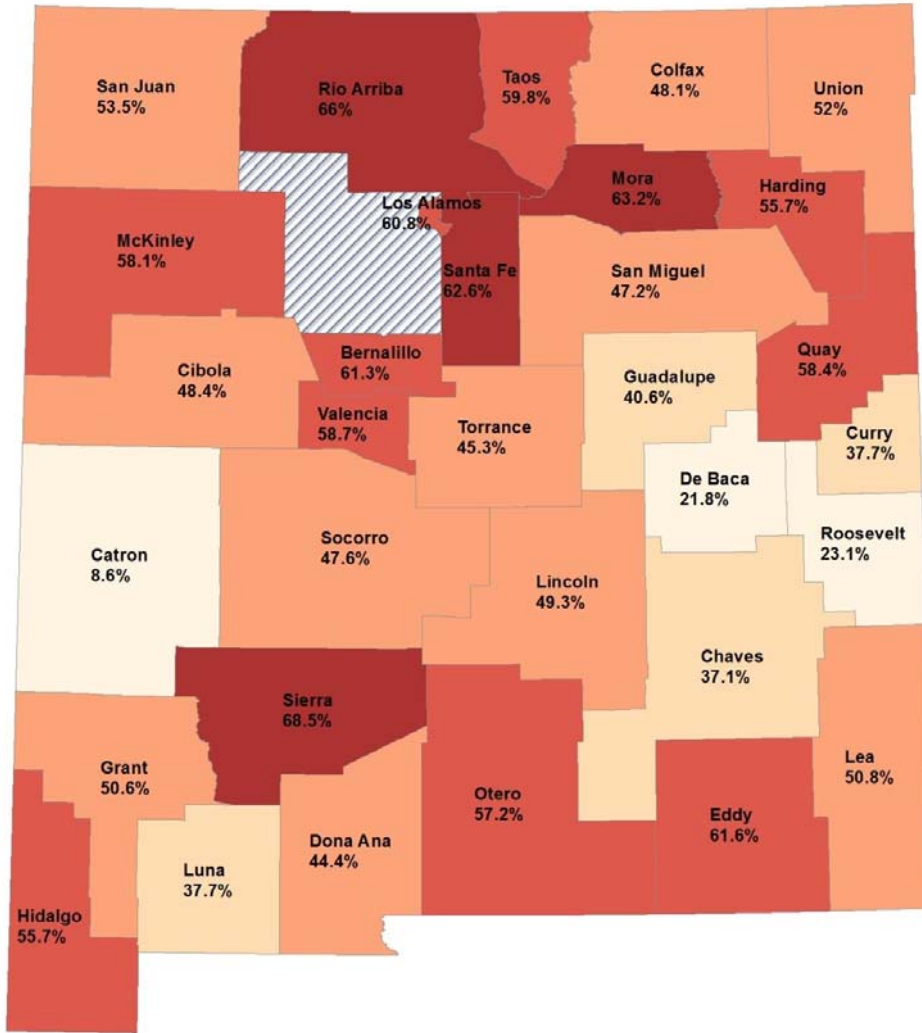
Percentage of Children Under 18 in Poverty, By County

US Average = 20.8%
New Mexico Average = 27.7%

Values in Red are Above National Average

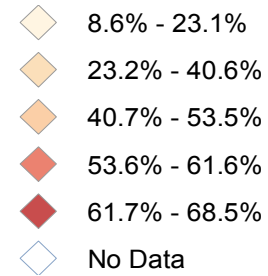


New Mexico High School Drug Abuse, 2009



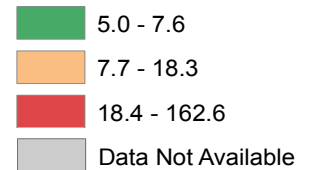
This map shows the percentage of New Mexico high school students reporting heroin, cocaine, methamphetamine, or marijuana use.

Percent of Students Reporting Drug Use

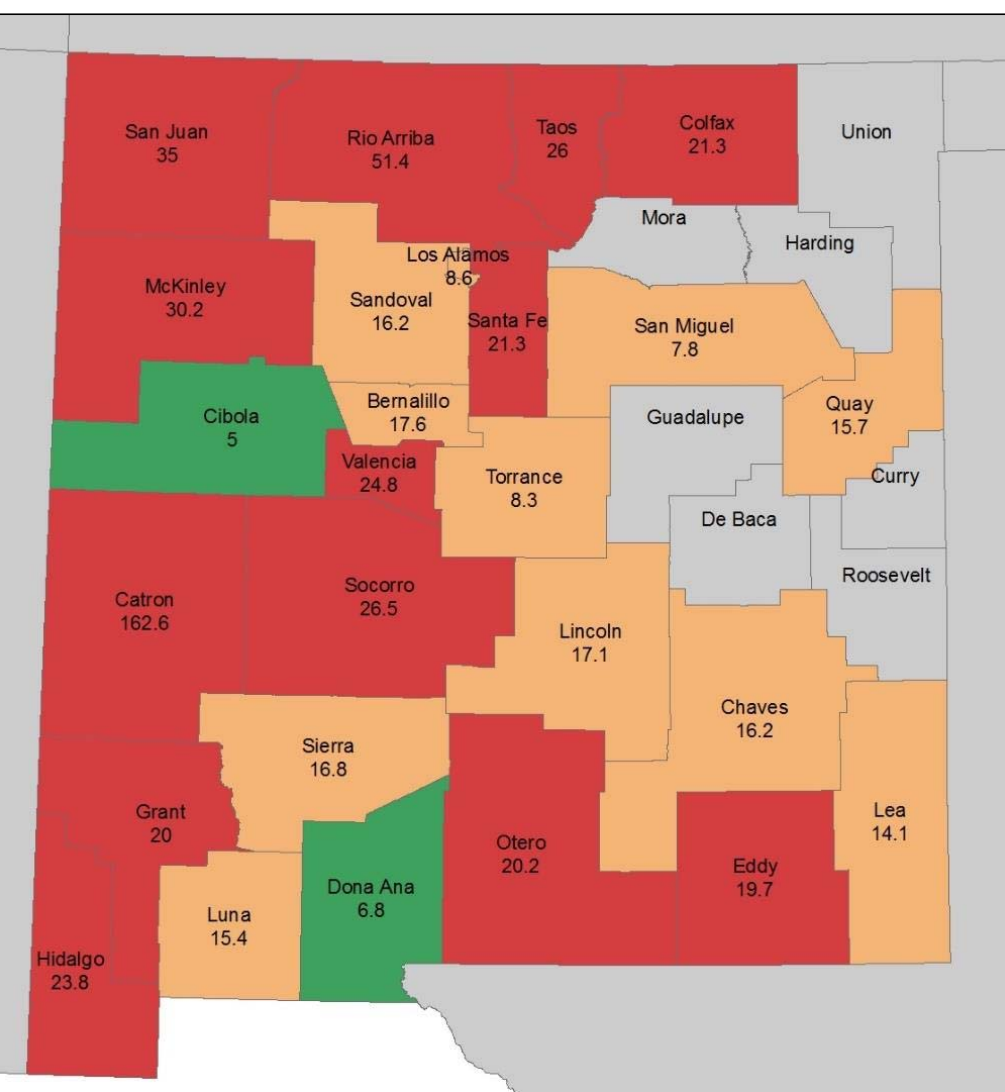


Youth Suicide Rate, 15-19 Years of Age, by County

Suicide Deaths Per 100,000
Population Ages 15-19

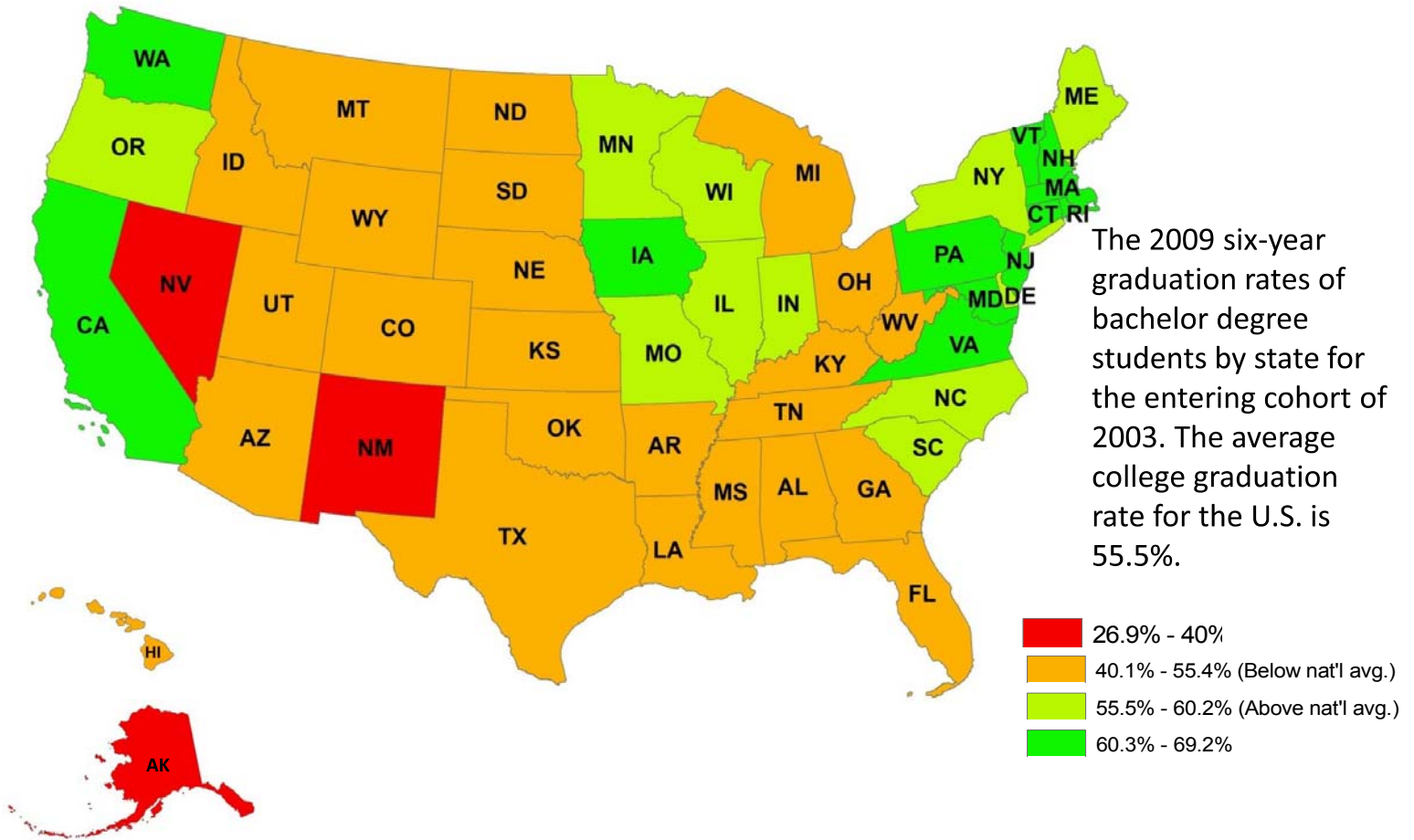


Counties shaded **green** have rates below the national average of 7.6. Counties shaded **orange** have rates above the national average but below the state average of 18.3. Counties shaded **red** have rates above both the state and national averages.

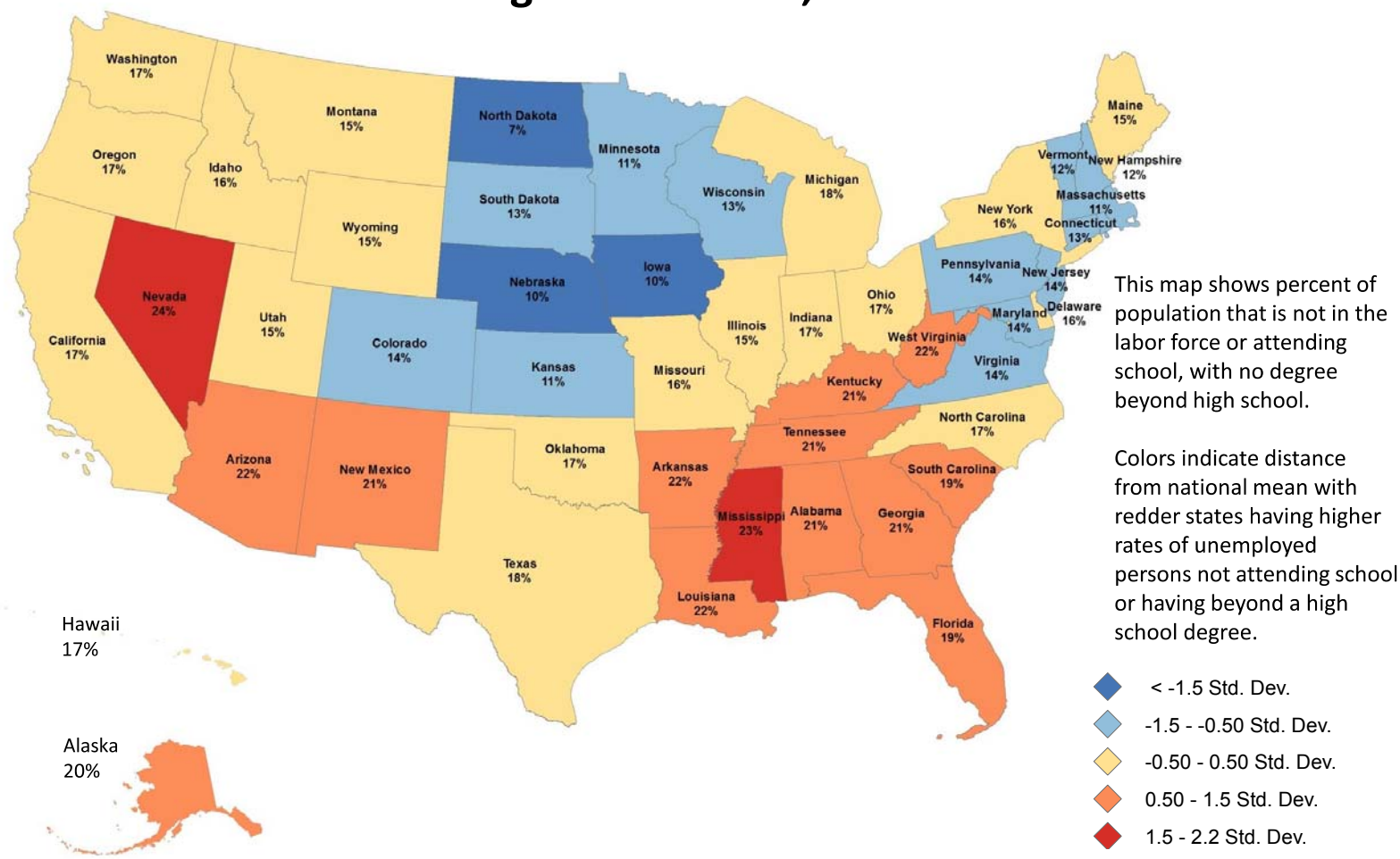


Source: New Death Certificate Database, Bureau of Vital Records and Health Statistics, New Mexico Department of Health. The suicide rate for each county is averaged over the time period 2003 to 2012 and includes all New Mexico residents, ages 15-19. The national average is based on data from the Centers for Disease Control and Prevention over the time period 1999 to 2007 and includes all youth, ages 15-19.

School Years: New Mexico's College Graduation Rates Are Among The Worst In The Nation

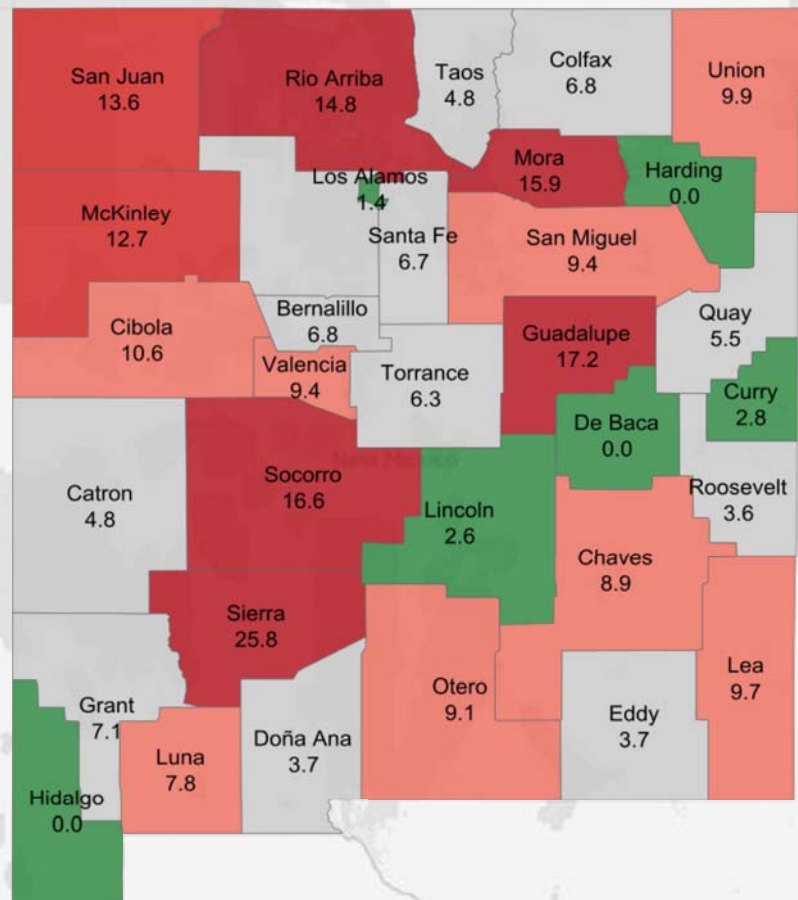


Adult Outcomes: Persons 18-24 Not In Labor Force Or School, No Degree Above HS, 2010

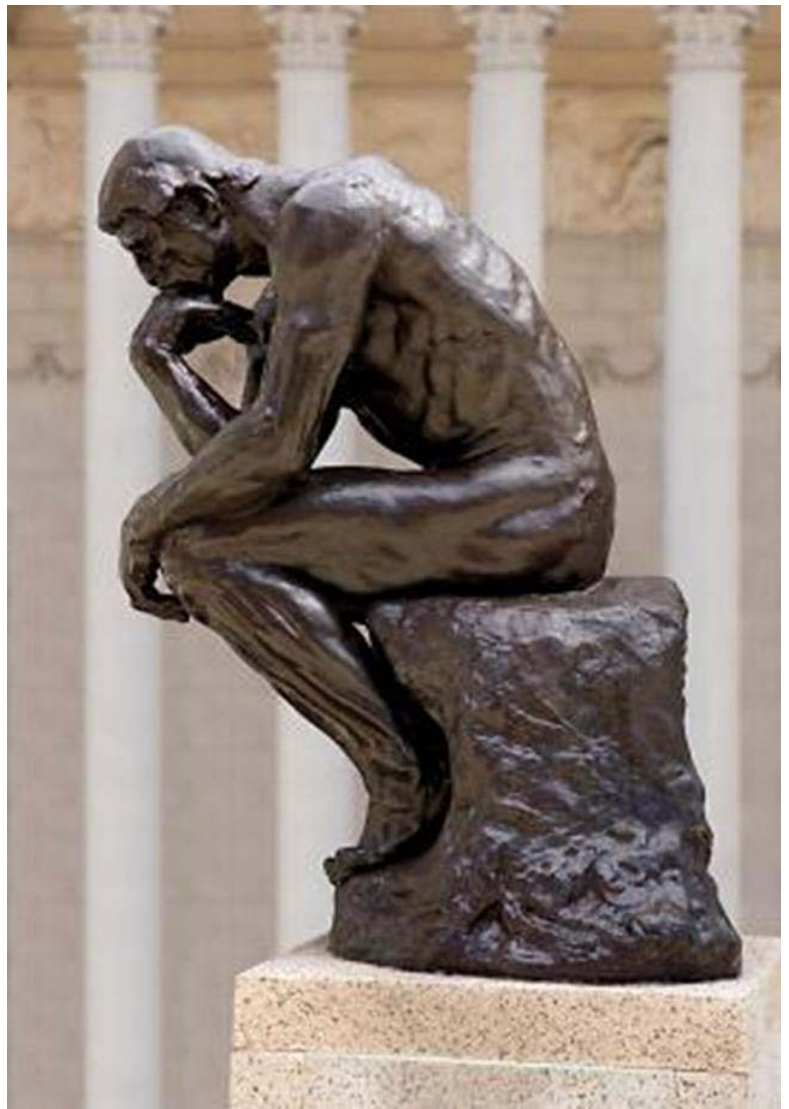


Percentage of 16-19 Year Olds Not in School or Labor Force, By County

US Average = 7.6%
New Mexico Average =
5.4%
Values in Red are Above
National Average



So Many Issues So Little Money

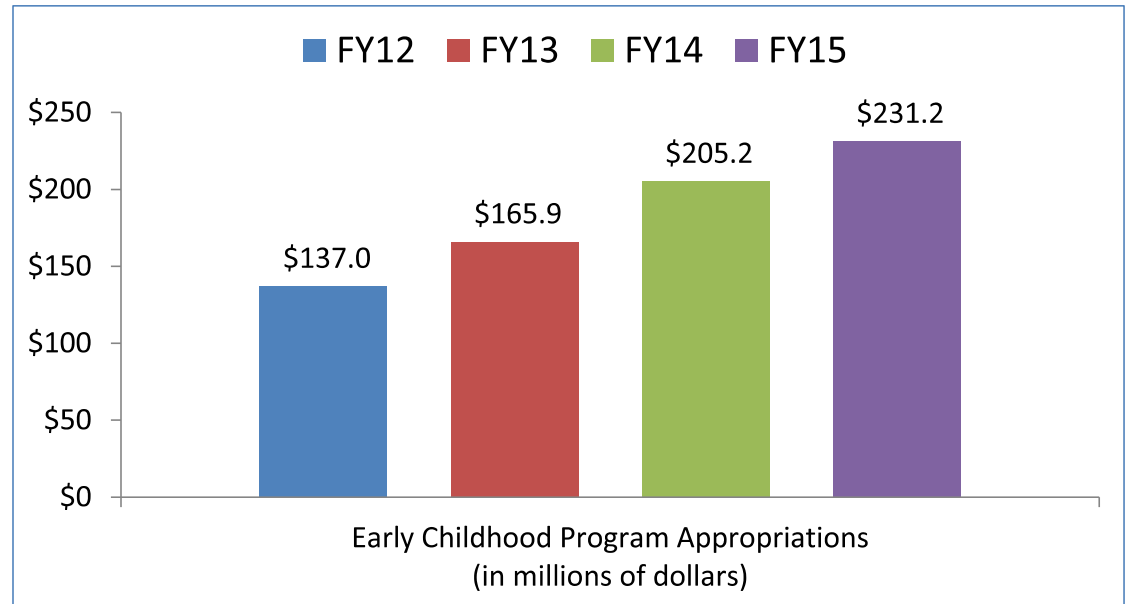


New Mexico Has Focused On Early Childhood Education

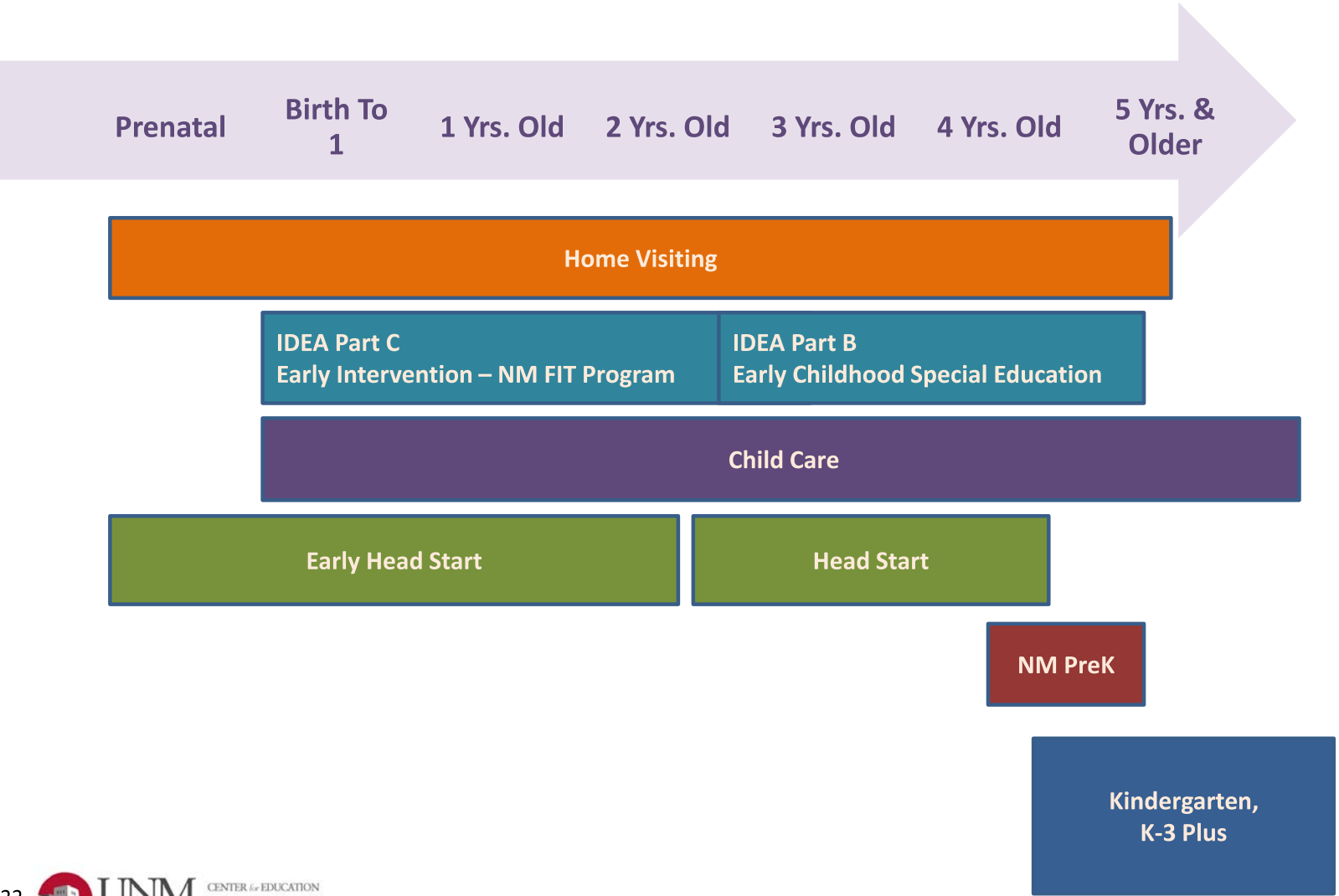
- 2000: Full Day Kindergarten
- 2005: The Prekindergarten Act
- 2011: The Early Childhood Care and Education Act
- 2013: The Home Visiting Accountability Act

In
Statute

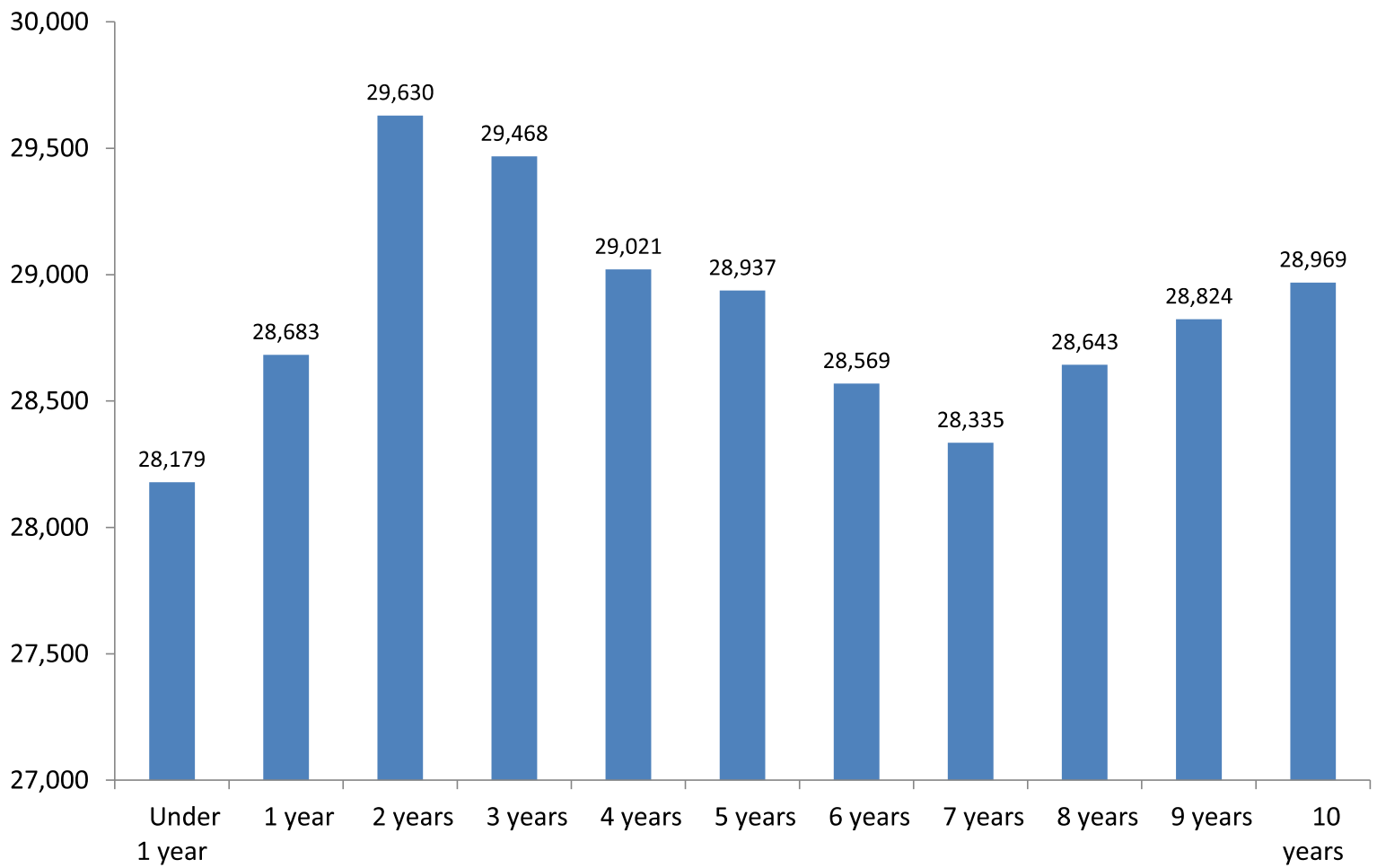
And In
Funding



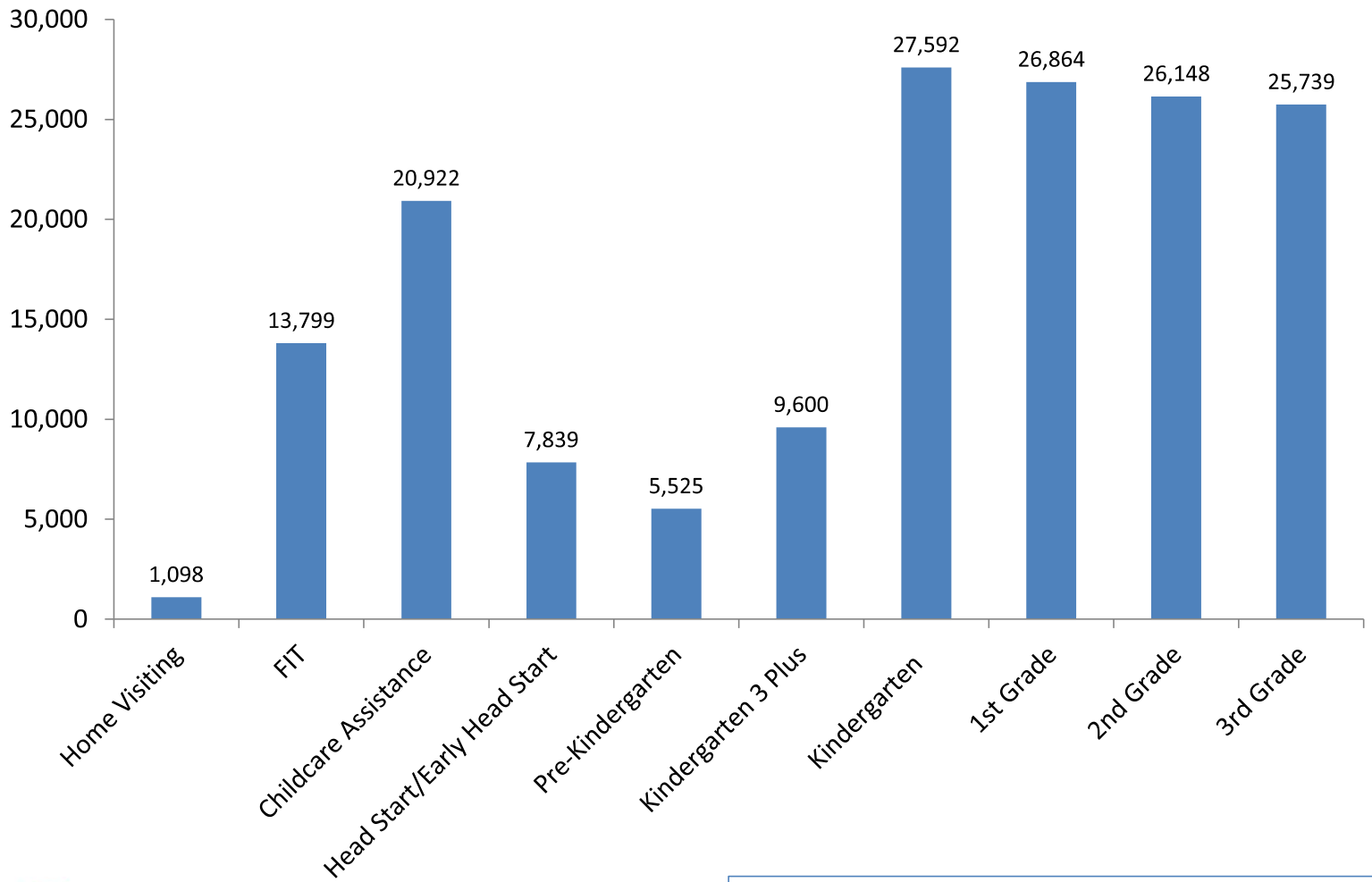
New Mexico’s Early Childhood Care and Education System



Number of Children In New Mexico By Age



Number of Clients/Children By Program And Grade FY13 & SY2012-2013

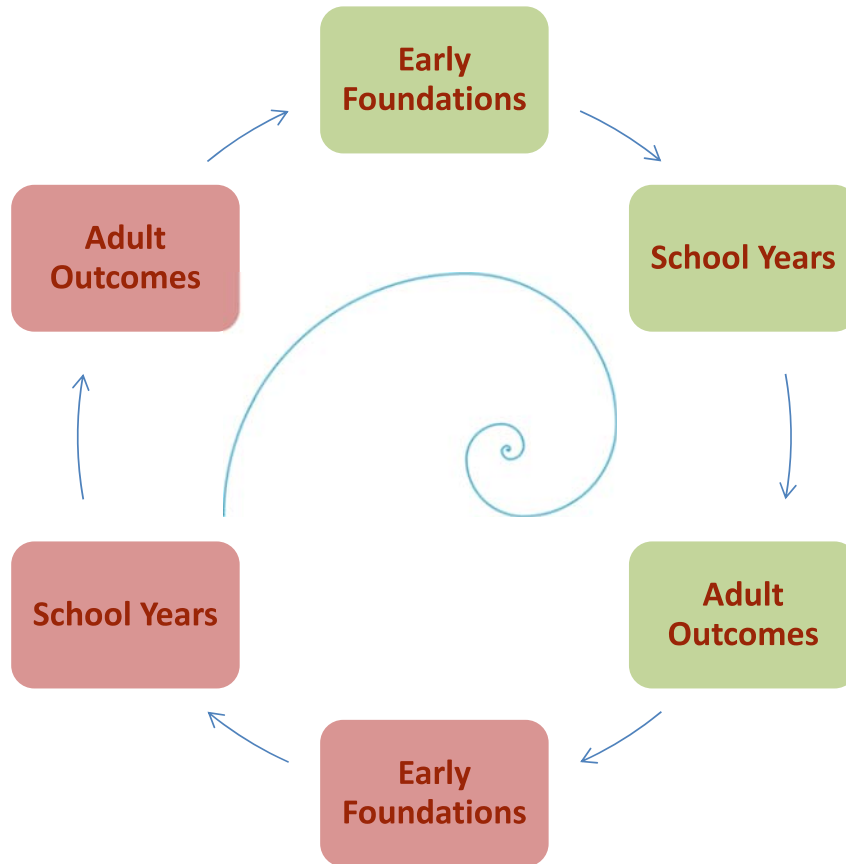


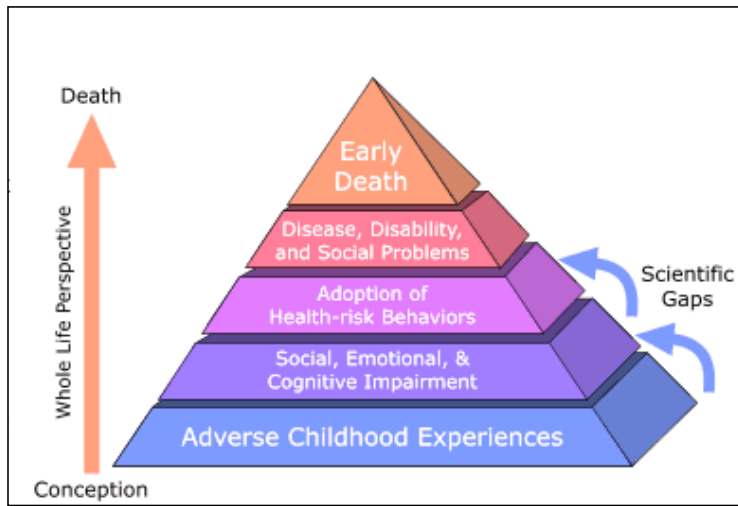
Sources: LFC, January 2014, Post Session Review; PED Dashboard

New Mexico's Targeted Investments

- **Early Childhood and The Developmental Cycle**
- **Investments In High-Need Communities**
- Investments in Time
- Investments In Scale
- Investments In Sustainability
- Investments In Impact and Accountability
- Investments In Quality
- Investments In The Workforce

Early Childhood And The Developmental Cycle





Major Findings

Childhood abuse, neglect, and exposure to other traumatic stressors which we term *adverse childhood experiences* (ACE) are common. Almost two-thirds of our study participants reported at least one ACE, and more than one of five reported three or more ACE. The short- and long-term outcomes of these childhood exposures include a multitude of health and social problems.

The ACE Study uses the ACE Score, which is a count of the total number of ACE respondents reported. The ACE Score is used to assess the total amount of stress during childhood and has demonstrated that as the number of ACE increase, the risk for the following health problems increases in a strong and graded fashion:

- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease (IHD)
- Liver disease
- Risk for intimate partner violence
- Multiple sexual partners
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking
- Early initiation of sexual activity
- Adolescent pregnancy

Adverse Childhood Experiences Last A Lifetime

Prevalence of Individual Adverse Childhood Experiences

Collected between 1995 and 1997, the prevalences (%) presented below are estimated from the entire ACE Study sample (n=17,337). Individual research papers that use only Wave 1 data or Wave 2 data will contain slightly but not significantly different prevalence estimates for individual ACE.

ACE Category*		Women (N = 9,367)	Men (N = 7,970)	Total (N = 17,337)
Abuse				
	Emotional Abuse	13.1	7.6	10.6
	Physical Abuse	27.0	29.9	28.3
	Sexual Abuse	24.7	16.0	20.7
Neglect				
	Emotional Neglect¹	16.7	12.4	14.8
	Physical Neglect¹	9.2	10.7	9.9
Household Dysfunction				
	Mother Treated Violently	13.7	11.5	12.7
	Household Substance Abuse	29.5	23.8	26.9
	Household Mental Illness	23.3	14.8	19.4
	Parental Separation or Divorce	24.5	21.8	23.3
	Incarcerated Household Member	5.2	4.1	4.7

Number of Adverse Childhood Experiences (ACE Score)	Women	Men	Total
0	34.5	38.0	36.1
1	24.5	27.9	26.0
2	15.5	16.4	15.9
3	10.3	8.6	9.5
4 or more	15.2	9.2	12.5

Early Childhood Investment Zones (ECIZ)

New Mexico's objective is to establish Early Childhood Investment Zones by identifying and prioritizing communities where:

1. Children are at the greatest risk of school failure, as determined by aggregating and ranking community adverse childhood experiences;
- And
2. The community demonstrates the greatest will and capacity for creating a continuum of high-quality early learning programs.

The goal is for these “ready communities” to establish community-specific capacity building, infrastructure development and comprehensive integrated early childhood care, health and education services in ways that can be used as models by other communities across the state.

Source: State of New Mexico Race To the Top Early Learning Challenge Application For Phase 2 Funding, 2012.

New Mexico's Early Childhood Investment Zones

A taskforce comprised of staff from the Children, Youth and Families Department (CYFD), the Department of Health (DOH), and the Public Education Department (PED) conducted a detailed analysis of risk factors at both the county level and school district level. These risk factors include:

Child Health (Counties):

- Premature Births
- Low Birth Weight Infants
- Infant Mortality
- Juvenile Arrests
- Child Maltreatment
- Domestic Violence
- Adolescent Births
- Failure to Graduate on Time
- Unemployment
- Poverty

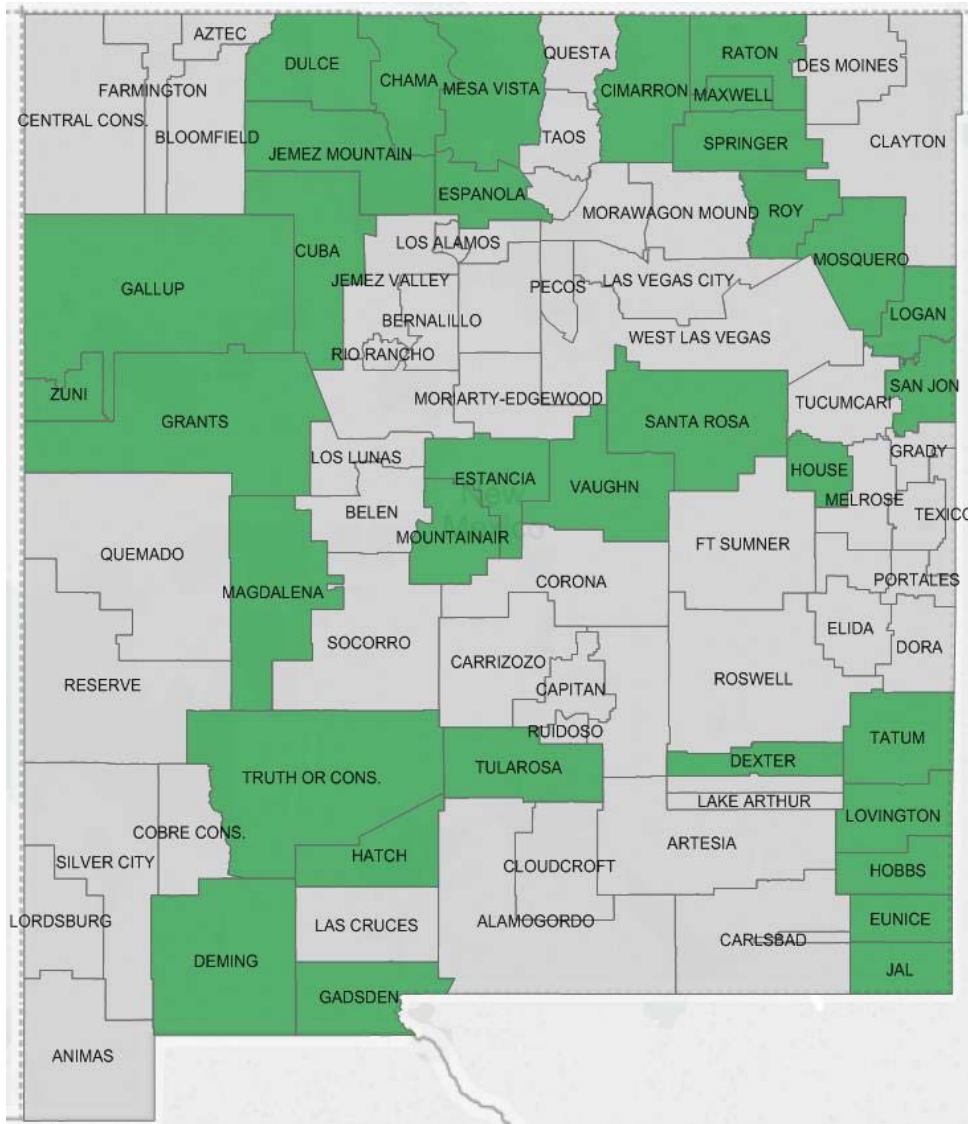
Education (School Districts):

- Not Proficient in Math & Reading
- Failure to Graduate On Time
- Population over 25 without HS or GED
- Schools without Health Centers
- Girls without Parenting Services
- Births to Mothers without HS or GED
- Title 1 (High Poverty) Schools
- Free or Reduced Price Meals
- Per Pupil Expenditures
- Schools Graded D or F

Source: Scharmen, T., New Mexico Department of Health; Haggard, D. and Rebolledo Rea, A., New Mexico Children, Youth and Families Department. New Mexico Early Childhood Data Warehouse: Community Assessment for Participatory Planning. Presented to the New Mexico Early Learning Advisory Council, July 2012.

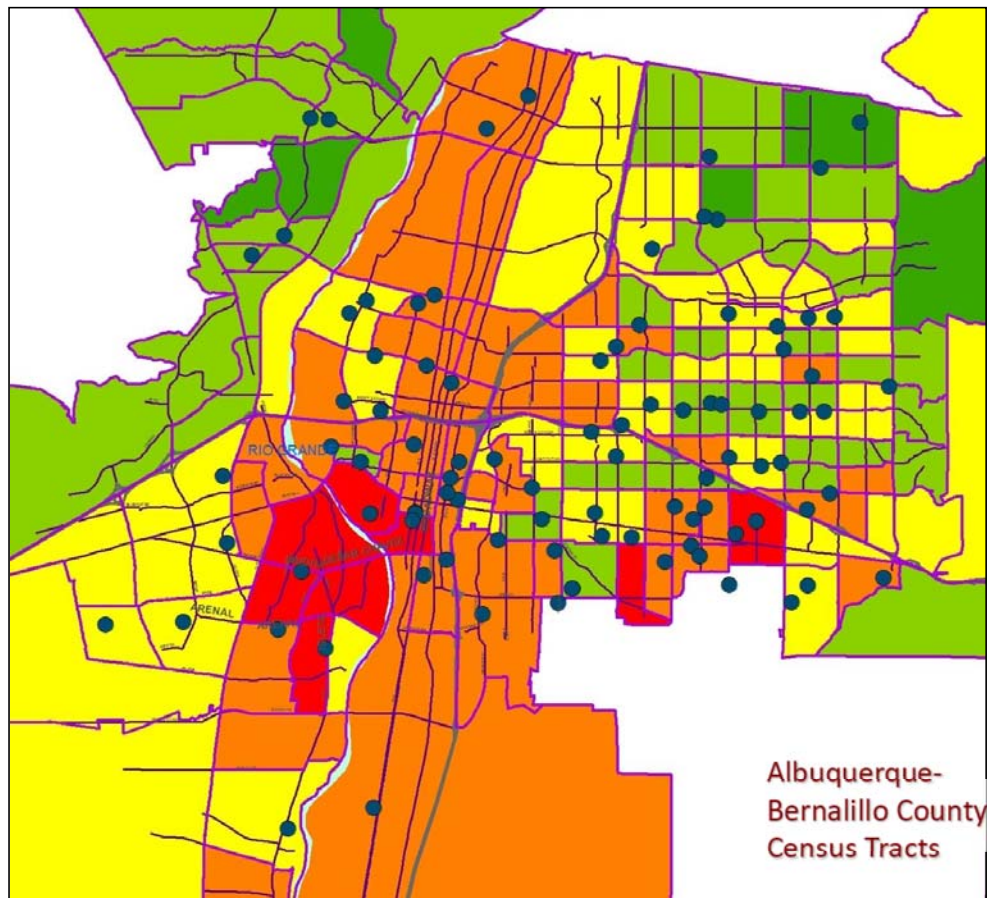
Potential Investment Zones

The NM Department of Health; the Children, Youth and Families Department and the Public Education Department collaborated to identify potential investment zones based on analysis of high-risk counties and high-risk school districts.



Source: State of New Mexico Race To the Top Early Learning Challenge Application For Phase 2 Funding, 2012.

The Importance Of Looking At Specific Communities



Combined Risk Factor Index

% Teen Births, % Late Pre-Natal Care,
% Low Birth Weight, % Low Income HHs

Lowest Risk

Lower Risk

Average Risk

Higher Risk

Highest Risk

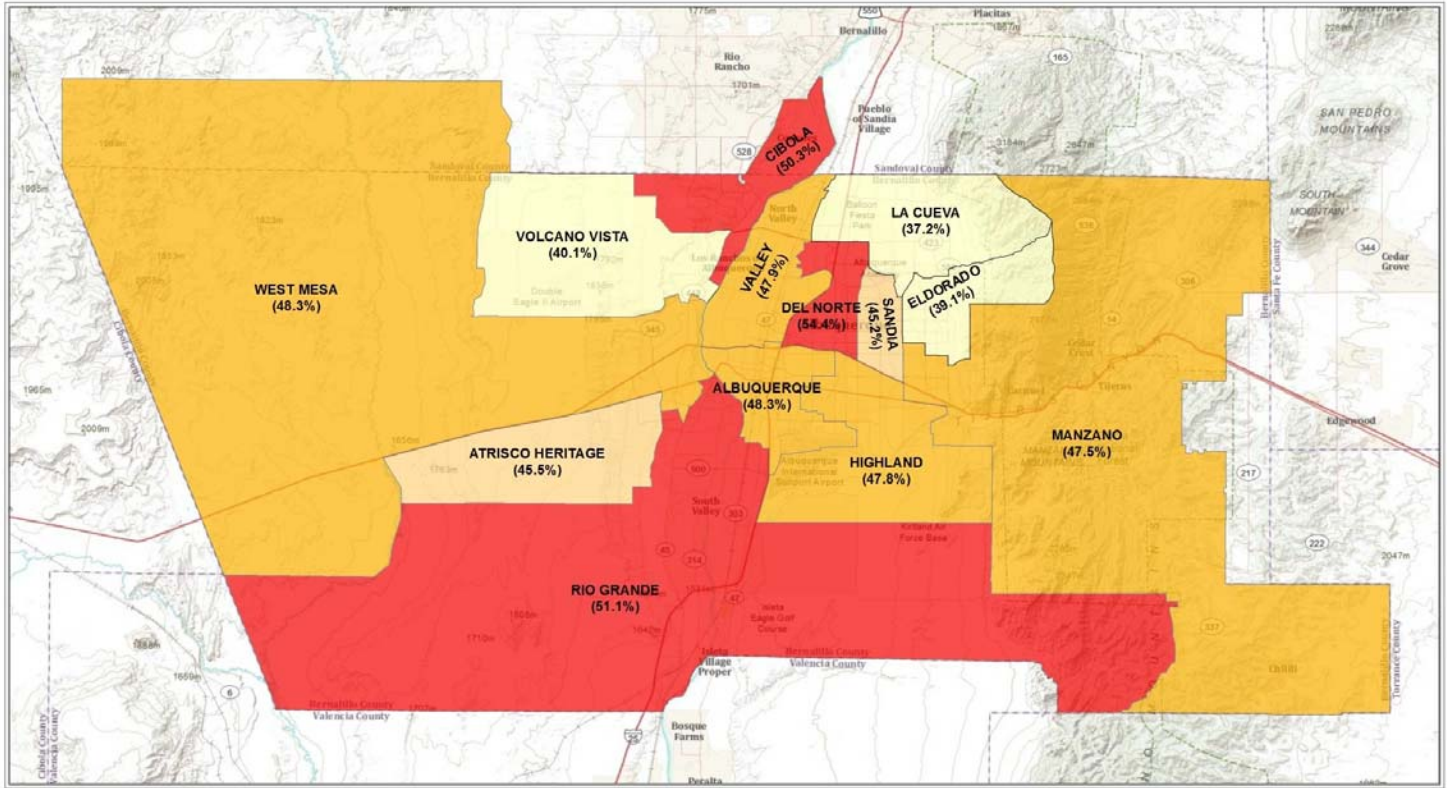
(4 & 5 Star Licensed
Child Care Facilities

The Albuquerque neighborhood of highest risk (with a population of 35,000) is served by 1 high quality child care program, 1 City of Albuquerque pre-school, and 4 Head Start programs.

- NM Department of Health, Public Health Division, ABC HEAT

Source: Tom Scharmen, NM Dept. of Health; Dan Haggard & Alejandra Rebolledo Rea, NM Children Youth and Families Dept.

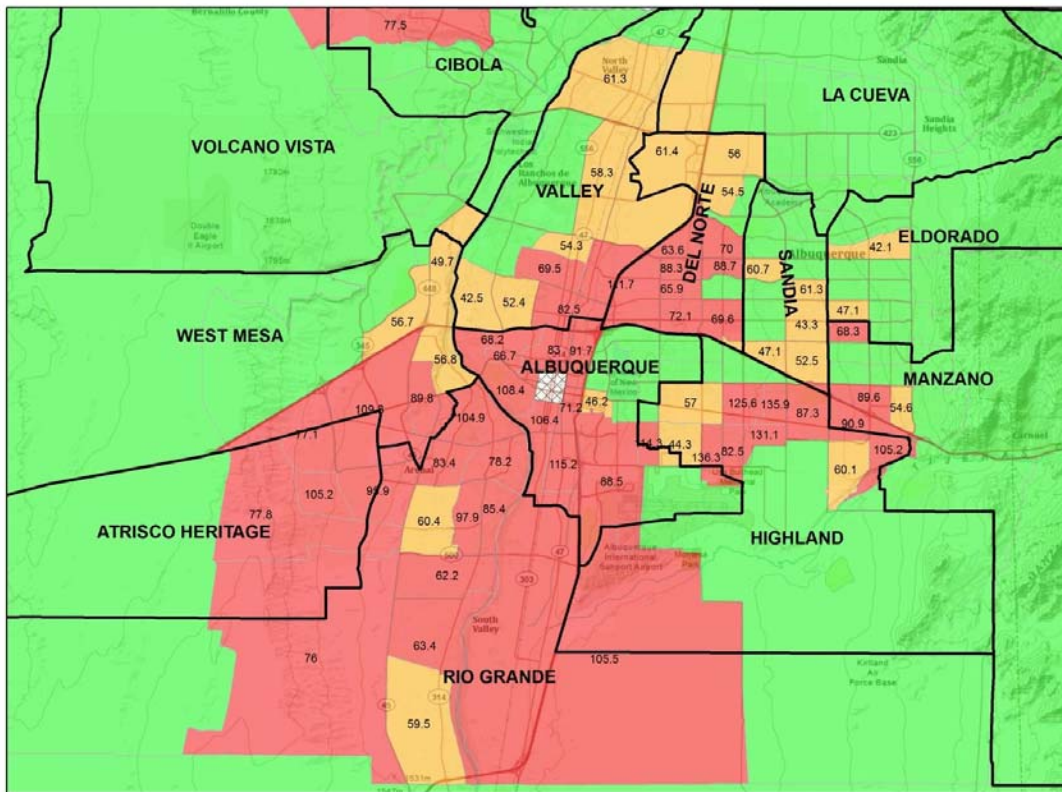
Percentage Of Albuquerque High School Students Who Have Had Sexual Intercourse



37.2 - 40.1%
 40.1 - 45.5%
 45.5 - 48.3%
 48.3% - 54.4%

Source: New Mexico Youth Risk and Resiliency Survey, 2009, New Mexico Departments of Health and Public Education and U.S. Centers for Disease Control and Prevention (CDC). Students were asked, "During your life, with how many people have you had sexual intercourse?" The percentage reported here reflects respondents who answered one or more people.

Teen Birth Rate In Albuquerque, Ages 15-19



■ Less than 40 per 1000 (below nat'l avg.)
 ■ 40 - 62 per 1000 (above nat'l avg.)
 ■ Greater than 62 per 1000 (above state & nat'l avg.)

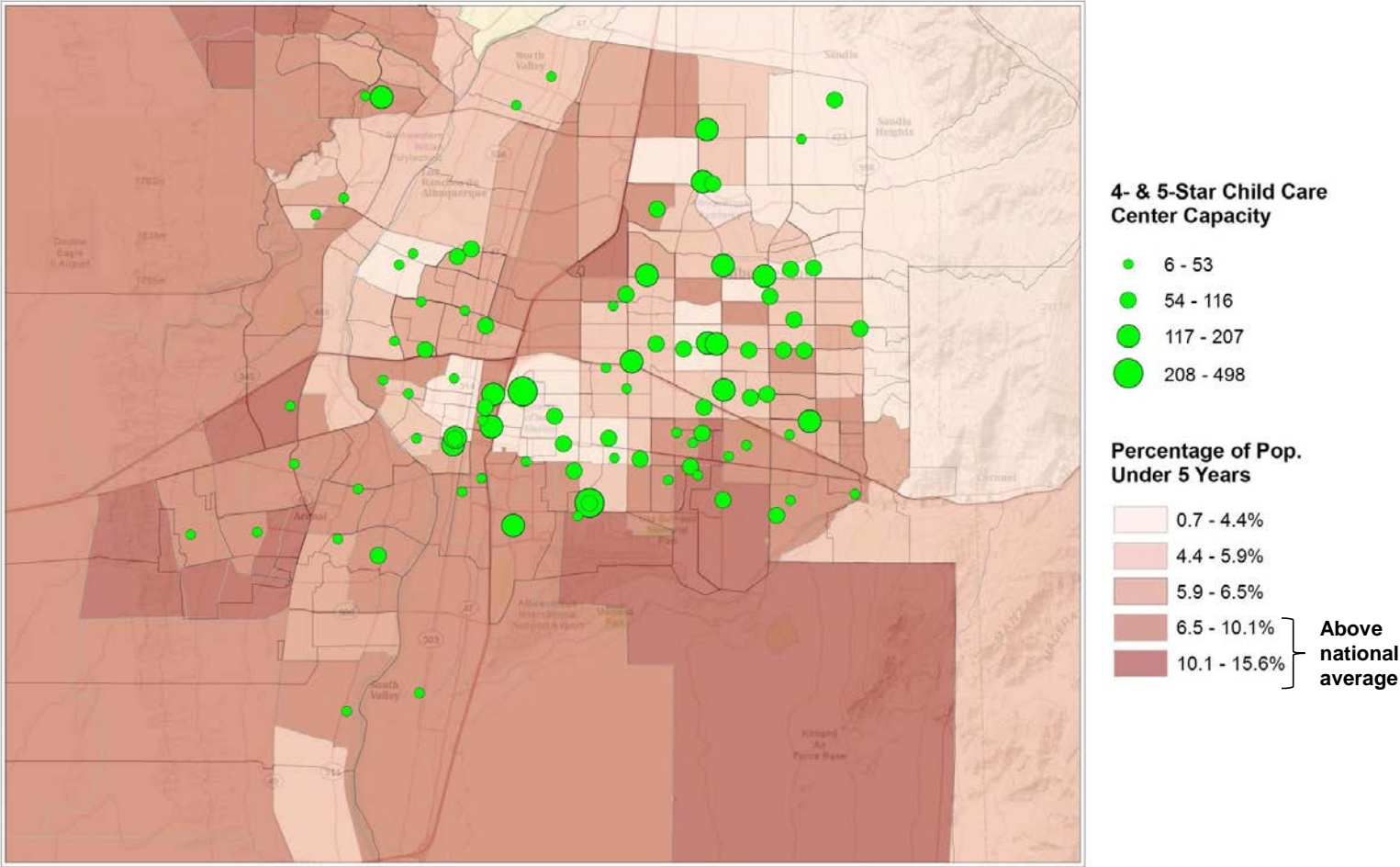
Poor Data Quality

The data point in each census tract represents the number of live births to teen women per 1000 teen women, over the period 2001-2005.

For example, the census tract in the center with a teen birth rate of 106.4 means that there were 106 live births to teen women for every 1000 teen women who live in the census tract.

Source: New Mexico Community Data Collaborative. The rates shown here reflects the average number of children per 1000 women born to teen mothers (ages 15-19) between 2001 and 2005. Rates are reported by census tract; high school boundaries are overlaid to provide perspective. In 2005, the statewide teen birth rate was 62 per 1000, and the nationwide rate was 40 per 1000 (Kids Count Data Center, <http://datacenter.kidscount.org>).

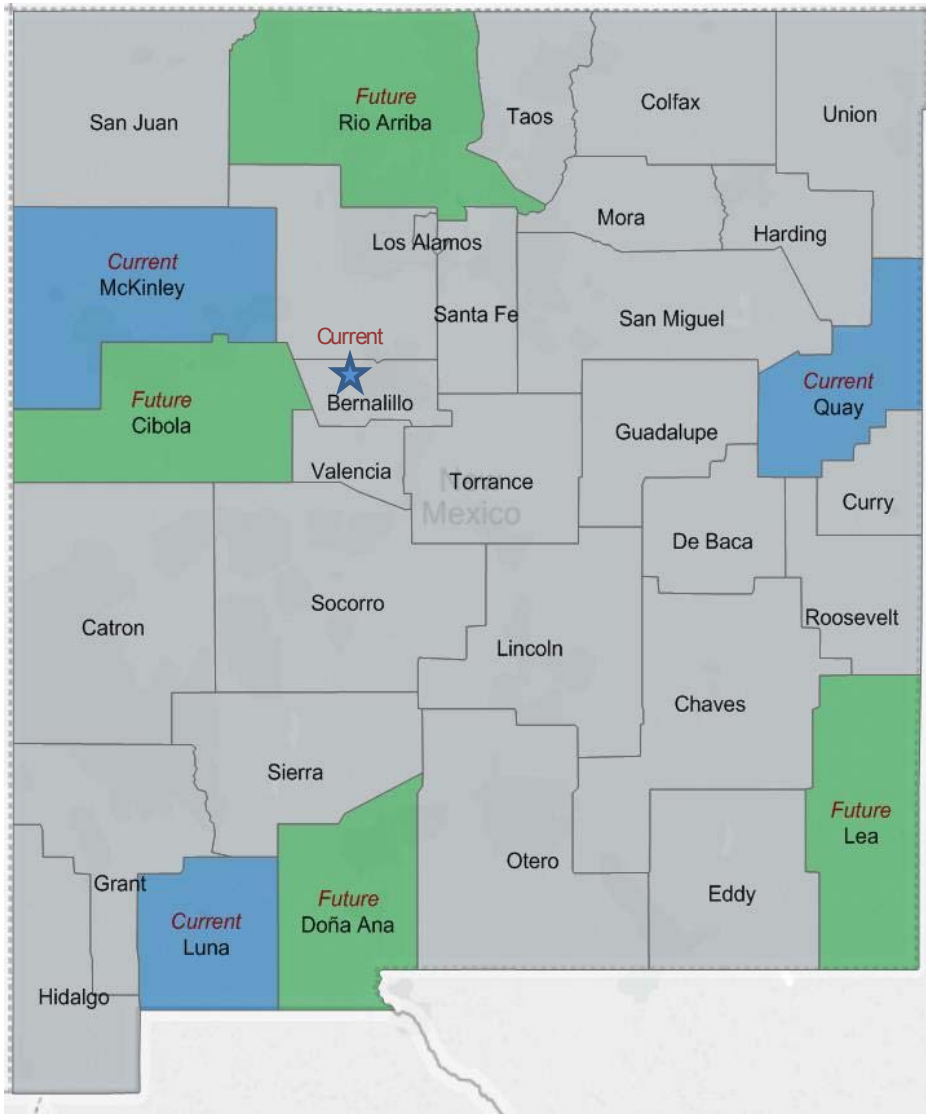
Capacity Of 4- And 5-Star Licensed Child Care Centers In Albuquerque



Source: New Mexico Community Data Collaborative, December 2010. Enrollment data are reported by program site. Elementary school boundaries are overlaid to provide perspective.

Current and Future Investment Zones

The NM Children, Youth and Families Department is currently working with communities in four sites: **McKinley, Luna, and Quay Counties, and Albuquerque's South Valley.** Future sites include communities in **Rio Arriba, Cibola, Doña Ana and Lea Counties**



Source: Dan Haggard & Jesse Leinfelder, CYFD; Michael Coop, Coop Consulting. Early Childhood Investment Zones New Mexico Children, Youth and Families Dept., Approach – Recommendations July 2014

Investment Zones: The Work to Date and Recommendations

The Work To Date:

- Worked toward system change by creating or strengthening local coalitions of EC stakeholders
- Developed and implemented strategic plans, owned by the coalitions and intended to:
 - improve the local continuum of family support services and
 - address weaknesses or gaps identified by data-informed planning

Recommendations:

- Fund a coordinator and create policy priorities in each IZ
- Realign & combine resources to fill gaps and maximize impact
- Develop cross-agency approaches to address locally identified issues and priorities including:
 - Teen pregnancy prevention and support to complete HS
 - Parenting skills training
 - Substance abuse treatment
 - Access to prenatal and well-baby care
 - Intervention resources for infant mental health needs
 - Access to high quality child care-early learning programs

Source: Dan Haggard & Jesse Leinfelder, CYFD; Michael Coop, Coop Consulting. Early Childhood Investment Zones New Mexico Children, Youth and Families Dept., Approach – Recommendations July 2014

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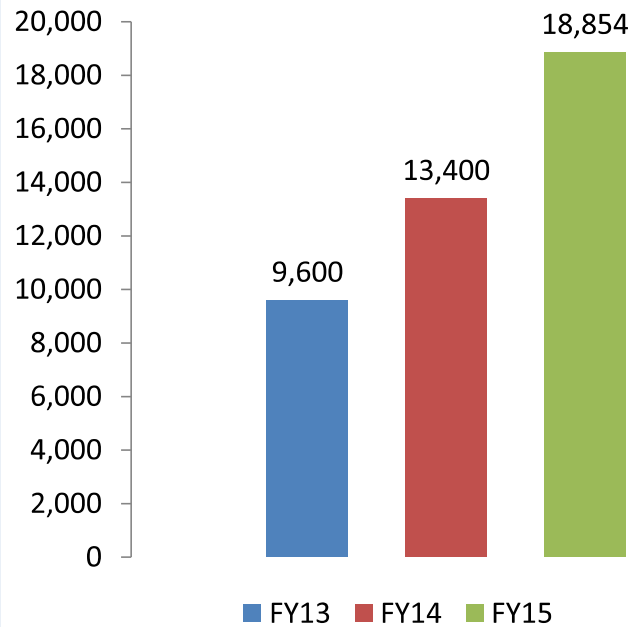
Investments In Time: New Mexico's K-3 Plus

K-3 Plus was originally developed in 2003 to narrow the achievement gap by extending the school year in high need schools with a focus on kindergarten to third grade. The main components include:

- A minimum of 25 additional full days
- Instruction focused on literacy, math, social skills, arts, and P.E.
- Provision of transportation, breakfast and lunch
- Professional development in literacy
- Parental involvement

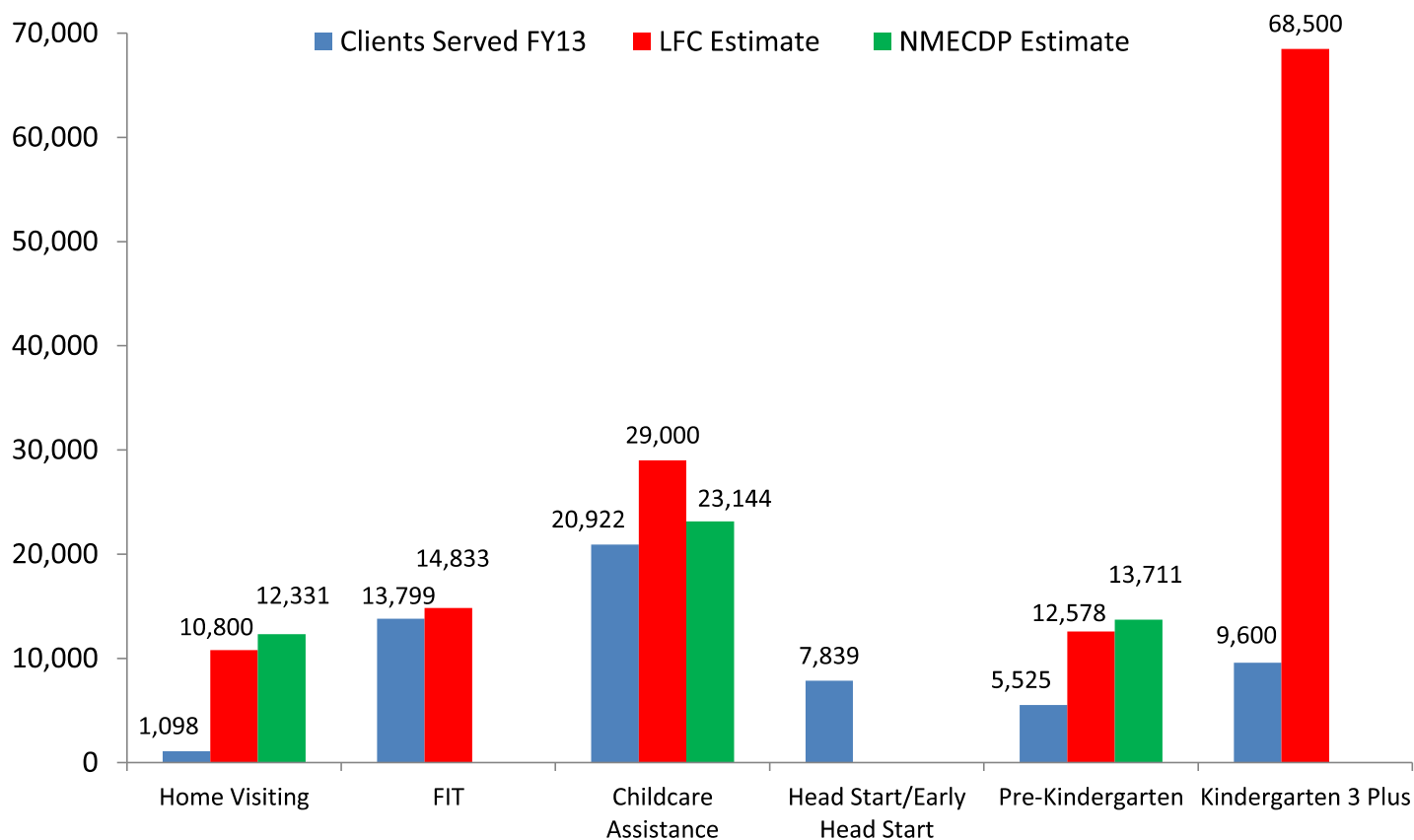
In summer of 2013, K-3 Plus was in about 75 schools in 20 districts across New Mexico. Early results are positive and \$15.3 million Investing In Innovation (I³) federal grant is currently underway to examine the effects of providing more school time to young children.

Estimated Number Of Students Enrolled In K-3 Plus



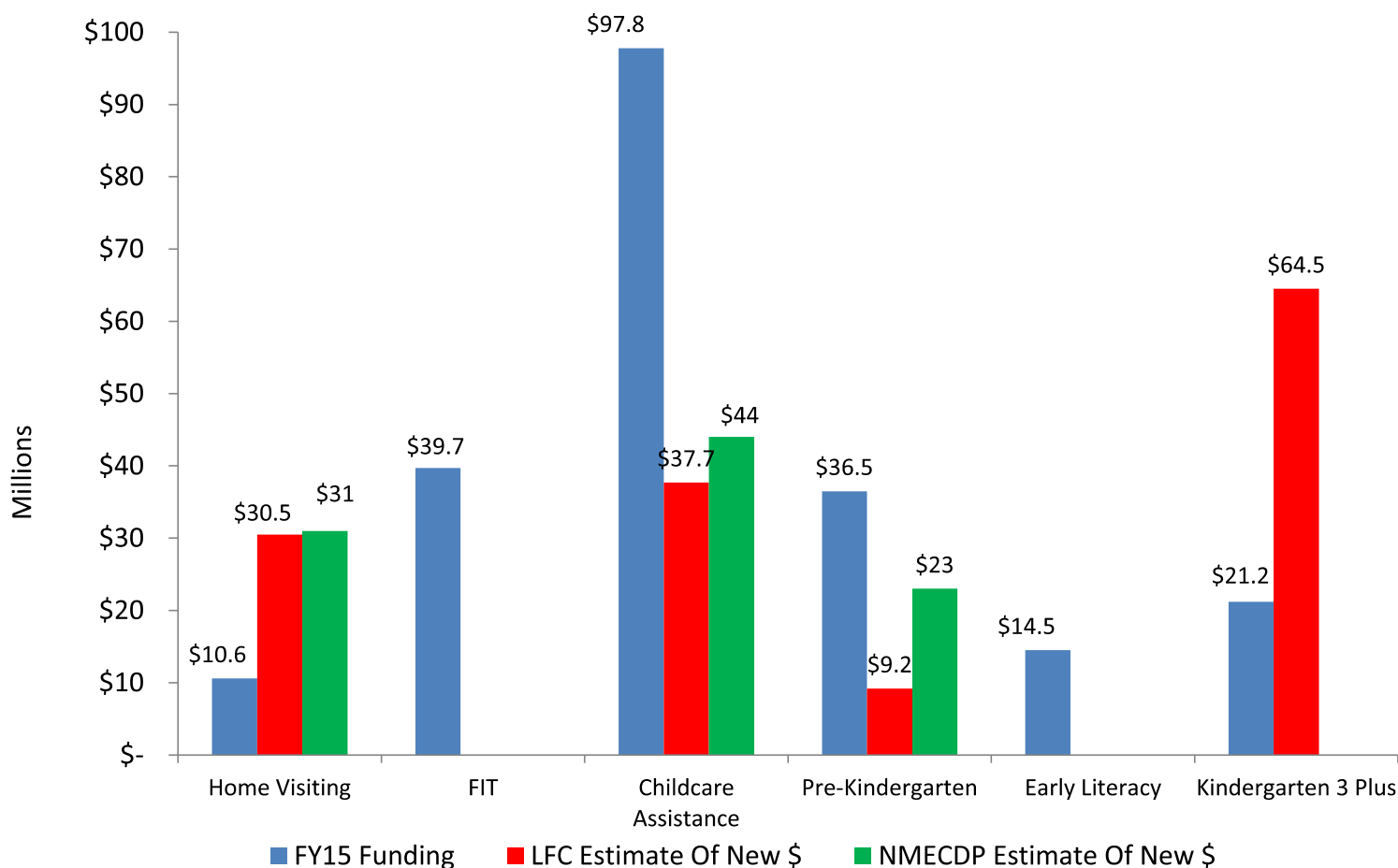
Source: LFC, January 2014, Post Session Review.

Clients Served In FY13 Compared To Estimates Of Total Eligible Clients



Sources: LFC, January 2014, Post Session Review; New Mexico Early Childhood Development Partnership Early Childhood Education Cost Analyses & Recommendations, December 2013

FY15 Appropriations And Estimated Funding Needed For Full Enrollment



Sources: LFC, January 2014, Post Session Review; New Mexico Early Childhood Development Partnership Early Childhood Education Cost Analyses & Recommendations, December 2013



New Mexico Home Visiting Annual Outcomes Report, Fiscal Year 2013

Prepared by the University of New Mexico Center for Education Policy Research and the Center for Rural and Community Behavioral Health for the New Mexico Children, Youth and Families Department

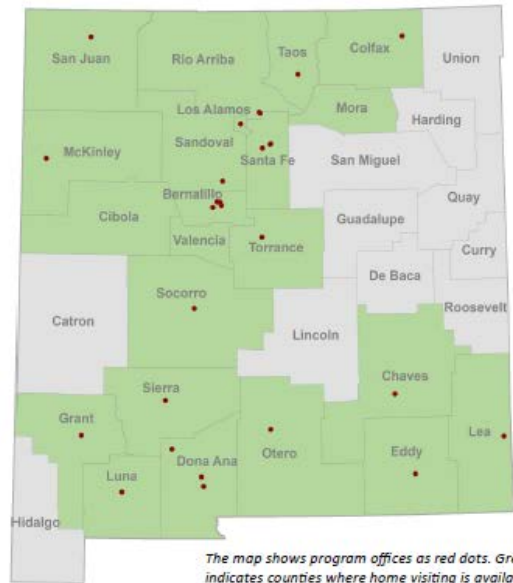
JANUARY 1, 2014

Introduction

This first Annual Home Visiting Outcomes Report presents aggregate data about the outcomes for all Children, Youth and Families Department (CYFD)-administered home visiting programs funded by the State of New Mexico in Fiscal Year 2013 (FY13). The report was prepared according to the requirements of NMSA 1978, Sections 32A-238-1 (2013), referred to here as the "Home Visiting Accountability Act," and is designed to inform policymakers and practitioners about the impact of the state's Home Visiting System on families and children in New Mexico.

New Mexico's Home Visiting System, FY13

New Mexico's 20 home visiting programs serve 22 of New Mexico's 33 counties.



The map shows program offices as red dots. Green indicates counties where home visiting is available.

Home Visiting in FY13, At a Glance:

Programs: 20

Counties Served: 22

Families Funded: 1,005

Home Visits: 20,224

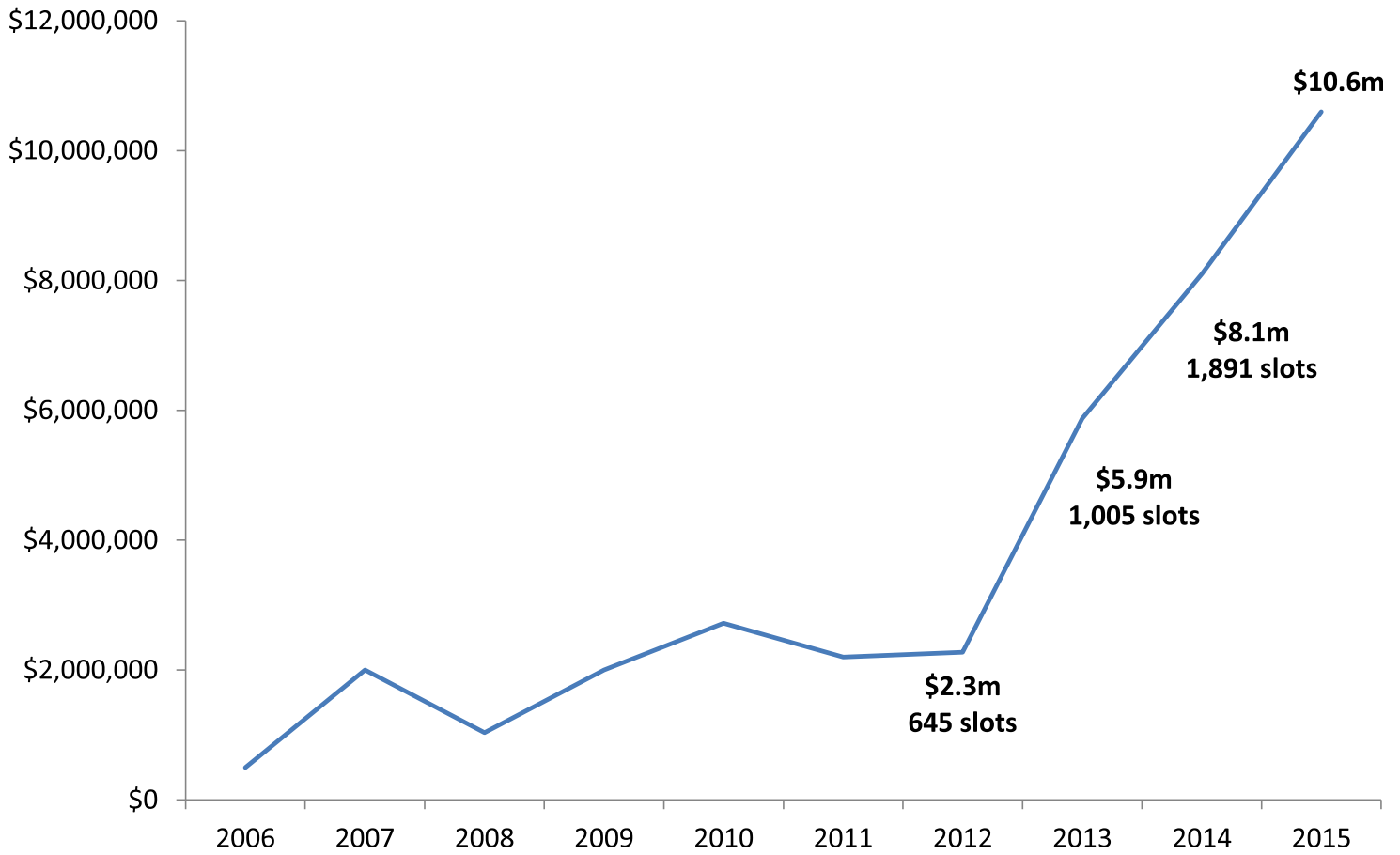
Home Visitors: 144



The First Annual New Mexico Home Visiting Annual Outcomes Report, Fiscal Year 2013

Prepared by the University of New Mexico's Center for Education Policy Research and Center for Rural and Community Behavioral Health

New Mexico's Investment In Home Visiting



Source: LFC post-session reviews and budget documents. Includes state and federal funding sources.

Summary of Findings: Home Visiting Goal Outcomes

Goal 1: Babies Are Born Healthy:

- Pregnant women in home visiting accessed prenatal care earlier and more often than pregnant women statewide.
- Research shows that children of depressed mothers face increased difficulties in health, cognition, and emotional development.
- In FY13, 75.3% of eligible mothers identified as having symptoms of postpartum depression were referred for services, where available, and more than half of those mothers engaged in referral supports.

Goal 2: Children Are Nurtured

- A new, research-validated tool was piloted for use in promoting and measuring nurturing parenting interactions in the Home Visiting System in FY13. All programs were trained, and full data is being collected for reporting in FY14.

Goal 3: Children Are Physically and Mentally Healthy

- 85% of eligible children who received at least five home visits were screened for potential delay in development using the Ages & Stages Questionnaire. Of the 16% identified as having possible characteristics of delay, 60% were referred to early intervention services. 68% of those referred are recorded as having engaged with services.

Summary of Findings: Home Visiting Goal Outcomes

Goal 4: Children Are Ready For School

- The existing ASQ screening and referral data show that crucial early connections were made between families of infants and young children and early intervention services.
- Tracking the impact of home visiting out to the point of school entry will require continued state development of a kindergarten readiness assessment and an effective system for tracking children through early childhood into K-12 education.

Goal 5: Children and Families Are Safe

- Domestic violence risk screens were administered to 1,092 caregivers. Of these, 9% scored at risk on the Woman Abuse Screening Tool (WAST). Of these, 26% were referred for services and 50% of these were recorded as engaging in services.
- Efforts to measure decreases in child maltreatment or abuse will require continued development of protocols for sharing data across state systems.

Goal 6: Families Are Connected To Formal And Informal Community Supports

- Key screens of potential risk to children and families guide home visitors to identify where additional supports may be needed. Those supports may be connections to formal social or clinical service agencies, where available in a given community. The highest rates of referral to available formal supports were to early intervention for infants and young children (59.8%) and postpartum depression services for mothers (75.3%).

New Mexico's Targeted Investments

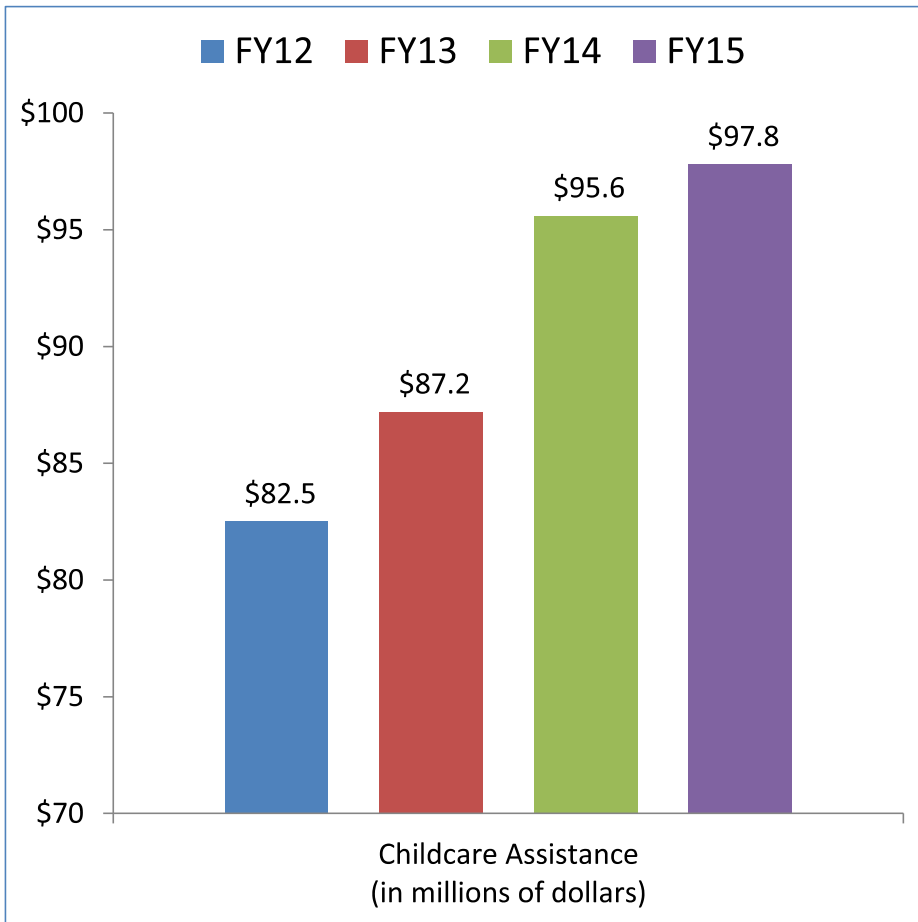
- Early Childhood and The Developmental Cycle
- Investments In High-Need Communities
- Investments in Time
- Investments In Scale
- Investments In Sustainability
- Investments In Impact and Accountability
- **Investments In Quality**
- **Investments In The Workforce**

How New Mexico Is Investing In Quality

New Mexico is rolling out its third generation of voluntary Tiered Quality Rating and Improvement Systems (TQRIS). All licensed childcare providers get support, but those with higher quality ratings get higher reimbursements:

- 1995-1998: Bronze, Silver, and Gold License Levels
- 1999 – 2017: Aim High
 - Five Star Levels (1 Star = program meets basic licensing requirements. 5 Stars = program has received national accreditation)
 - Registered Homes care for no more than 4 non-resident children in their own home
- Pilot In Process: FOCUS
 - 3, 4, and 5 Star designations
 - Providers can reach 5 Stars by achieving the FOCUS Star 5 Criteria OR by being accredited by one of the national accrediting bodies recognized by CYFD

New Mexico Has Invested Over \$363 Million In Funding For Childcare Assistance Over The Last 4 Years



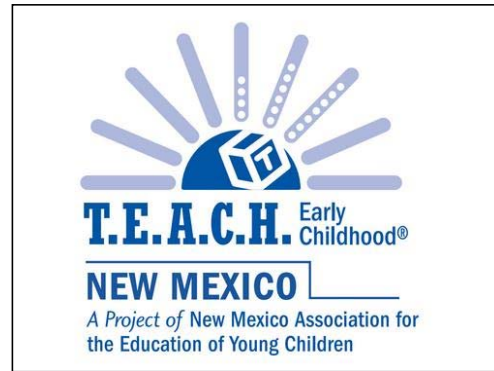
New Mexico has approximately 4,000 childcare providers :

- **About 25% of the providers are involved in the 1-5 star rating system.**
- **About 5% of the providers are accredited.**

How New Mexico Is Investing In The Early Childhood Workforce

A 2010 survey of child care workers found that:

- 97% of the teachers were female and 52% were Hispanic
- Average hourly wage was \$9.98 (about \$18,600 annually)
- 76% had completed some courses after high school but very few had a degree or certificate program in early childhood education
- 30% received financial assistance including TANF, child care, housing and food assistance



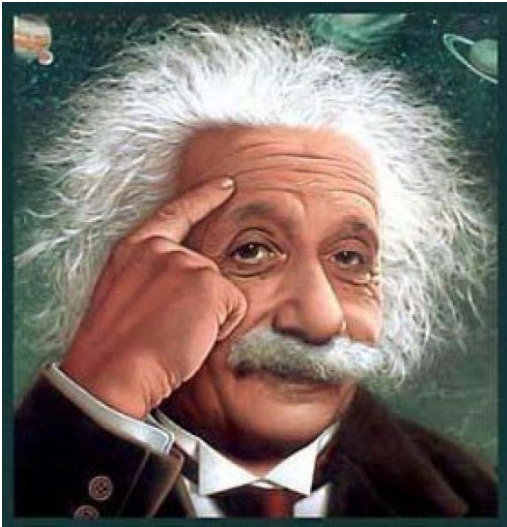
T.E.A.C.H. helps teachers working in early childhood programs get degrees (AA, BA, & MA) WHILE they are working. Since 2004, more than 217 EC degrees have been awarded.

Source: The Child Care Workforce In New Mexico. Krause, K. (2010) Prepared For the NM Children, Youth, and Families Department

Source: <http://www.nmaeyc.org/professional-development/teach>


Smart Money, Smart Moves

What Is The Answer
To New Mexico's
Official State
Question: Red Or
Green?



- **Early Childhood and The Developmental Cycle**
- **Investments In High-Need Communities**
- **Investments in Time**
- **Investments In The Workforce**
- **Investments In Quality**
- **Investments In Scale**
- **Investments In Sustainability**
- **Investments In Impact and Accountability**

UNM Center for Education Policy Research (CEPR)



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The vision of the Center for Education Policy Research is data informed policy change for excellence in education.

Our mission is to:

- Research education policy topics of interest in New Mexico;
- Communicate knowledge about education policy to diverse audiences;
- Collaborate with policy makers and other researchers on systemic policy change; and
- Educate researchers and policy makers about the value of data-driven policy making.

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