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Head Start Performance Standards

1302.11 Determining community strengths, needs, and resources

https://eclkc.ohs.acf.hhs.gov/policy/45-cfr-chap-xiii/1302-11-determining-community-strengths-needs-resources

- (b) Community wide strategic planning and needs assessment). (1) To design a program that meets community needs, and builds on strengths and resources, a program must conduct a community assessment at least once over the five-year grant period. The community assessment must use data that describes community strengths, needs, and resources and include, at a minimum:
- (i) The number of eligible infants, toddlers, preschool age children, and expectant mothers, including their geographic location, race, ethnicity, and languages they speak, including:
- (A) Children experiencing homelessness in collaboration with, to the extent possible, McKinney-Vento Local Education Agency Liaisons (42 U.S.C. 11432 (6)(A));
- (B) Children in foster care; and
- (C) Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies;
- (ii) The education, health, nutrition and social service needs of eligible children and their families, including prevalent social or economic factors that impact their well-being;
- (iii) Typical work, school, and training schedules of parents with eligible children;
- (iv) Other child development, child care centers, and family child care programs that serve eligible children, including home visiting, publicly funded state and local preschools, and the approximate number of eligible children served;
- (v) Resources that are available in the community to address the needs of eligible children and their families; and,
- (vi) Strengths of the community.
- (2) A program must annually review and update the community assessment to reflect any significant changes including increased availability of publicly-funded pre-kindergarten-(including an assessment of how the pre-kindergarten available in the community meets the needs of the parents and children served by the program, and whether it is offered for a full school day), rates of family and child homelessness, and significant shifts in community demographics and resources.
- (3) A program must consider whether the characteristics of the community allow it to include children from diverse economic backgrounds that would be supported by other funding sources, including private pay, in addition to the program's eligible funded enrollment. A program must not enroll children from diverse economic backgrounds if it would result in a program serving less than its eligible funded enrollment.

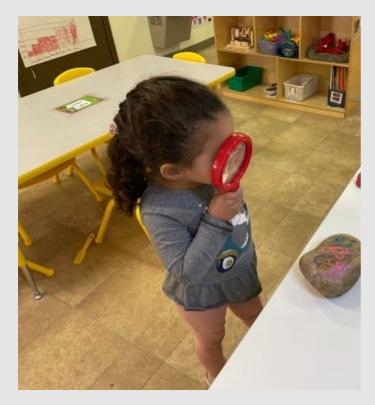
Executive Summary-Overview

A complete in-depth Community Assessment (CA) is required by Head Start Performance Standards 1302.11 (b). The CA is to be performed on a 5 year cycle with updates to the assessment completed in the off years. The overall purpose of the CA is to gather data regarding services that are available to children and families in the communities, determine gaps in services, and provide guidance for program planning. Once gathered, the information is then utilized to determine appropriate operation of the Head Start Program and it is included in the grant application (ACYF-IM-HS-00-12). This is an annual update to the Community Assessment.

Based upon our surveys and statistical data we have determined the following issues to be of the greatest need or have found them to be an on-going concern and have developed plans to address each point:

- 1. Data shows there is a continuous need for affordable, quality infant/toddler care. This is also supported by the high rate of teen pregnancies in the service area.
- 2. Our families have many needs that we will continue to address. Those needs are education/training on employment skills, financial planning, language barriers, mental health/ medical/dental care support. The program Family Service Specialists work closely with the families, through individual interactions, Family Progress Meetings, and Parent Cafe's. During the COVID pandemic they also communicated using ZOOM, Class DOJO, and e-mail to ensure training, education, and support was provided to help families achieve their goals. If families need additional information, referrals are made or partnerships with other community agencies are provided to for skill development, training, and classes. Some of the training we provide, but are not limited to are:
- -Advocacy/Transitioning
- -Medical/Dental
- -Mental Health
- -Parenting
- -Personal Growth

Family Resource Agency of North Georgia-National Goals and Objectives



Parent, Family, Community Engagement: Family goals are categorized into 7 family outcomes identified by the Parent, Family, Community Engagement Framework:

- 1. Family Well Being
- 2. Positive Parent-Child Relationships
- 3. Families as Lifelong Learners
- 4. Families as Learners
- 5. Family Engagement in Transition
- 6. Family Connections to Peers and Community
- 7. Families as Advocates and Learners

Successful Family Outcomes support each child's school readiness. Family Service Specialists engage parents in ways that assist them in achieving their goals and outcomes. The program reviews progress of goals and outcomes 3 times per year.

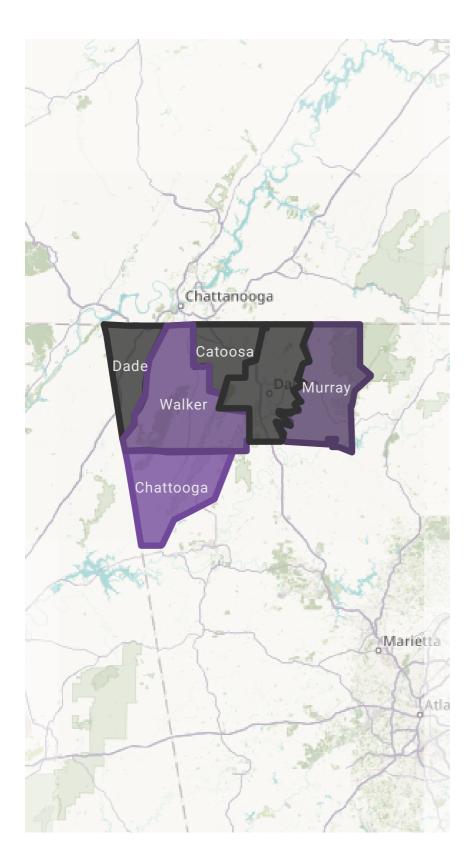


Teaching Staff Education Mandates-Supporting staff in completing degrees and meeting mandates ensures the program meets education requirements.

School Readiness: The Head Start Early
Learning Outcomes Framework, Parent- FamilyCommunity Engagement Framework, Georgia
Early Learning and Development Standards
(GELDS), and requirements/expectations of local
schools were used to guide our program
curriculum implementation, ongoing assessment
of children's progress, and preparation for school
success. We have adopted the following as our
definition for school readiness:

School Readiness means that each child will enter school ready to learn based on early learning experiences received in Head Start/Early Head Start/Pre-K that best promotes each child's success in all areas of development as identified in the Head Start Early Learning Outcomes Framework.

Service Area



Family Resource Agency of North Georgia is funded to provide Head Start, Pre-K, Early Head Start, and Childcare Partnership services to 941 children and their families in the six northwest counties of Georgia. These counties are in the extreme northwest corner of the state and are bordered by Tennessee to the north and Alabama to the west (See Service Area Map-page 5). Geographically, the counties cover an area of 1,725.1 square miles of rural and mountainous (Chattahoochee National Forest) terrain.

The service counties consist of small towns and villages. Dalton, within Whitfield County had a 2021 population of 33,921 and the combined Rossville-Fort Oglethorpe areas of Catoosa and Walker Counties had a 2021 estimated population of 13,941.

The largest populations are in Trenton of Dade County with 2,159; Summerville of Chattooga County with 4,159; and Chatsworth of Murray County with a population of 4,264.

Our six county service area is also home to many undocumented children and families who may live in the metropolitan areas. The counties have a total population of 322,970.

County Characteristics

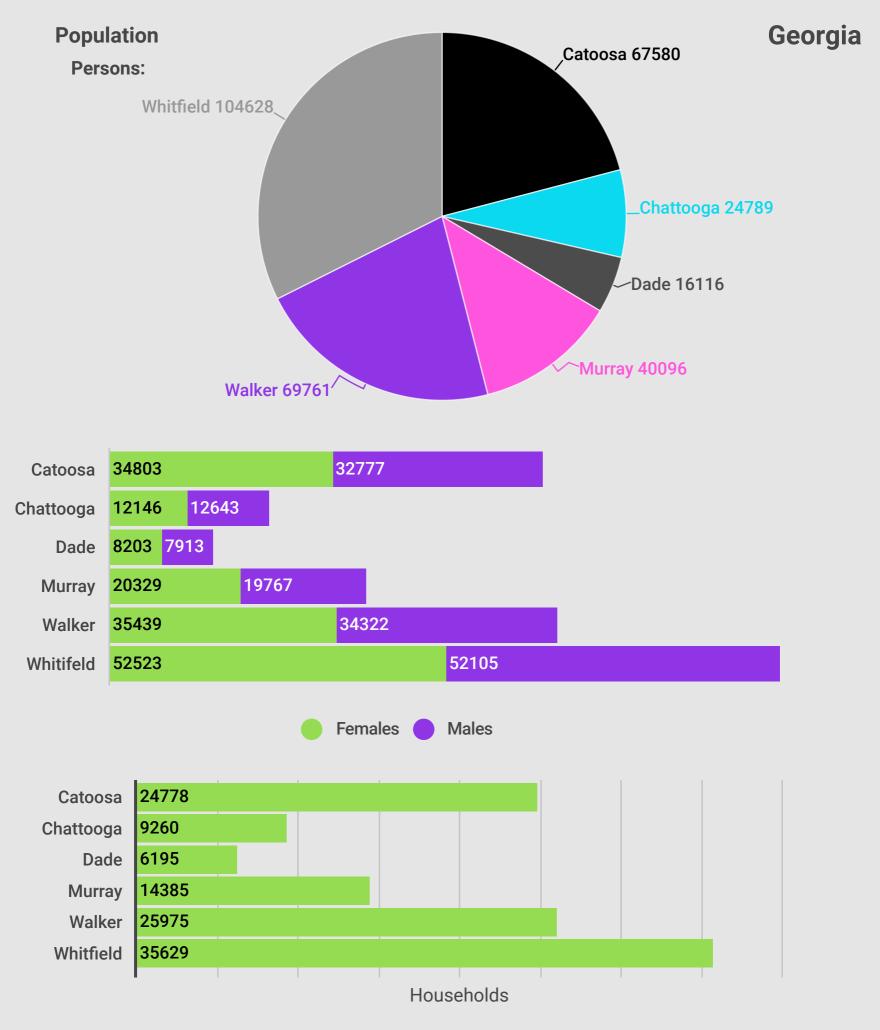
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County	Square Miles	Distinguishing Characteristics
Catoosa	162.7	Is in the northern sector of the service area and borders the State of Tennessee to the north, Walker County to the south and west, and Whitfield County to the south and east. This county is the smallest geographically, covering only 162.7 square miles. 49% of the land is forest land (Chattahoochie National Forest).
Chattooga	314.0	Located in the southern-most sector of the service area. Borders the state of Alabama to the west, Walker County on the north, and Floyd County to the south. Third largest geographically, covering 314 square miles. 71.7% of the county is forest land (Chattahoochie National Forest.
Dade	174.1	Located in the northwestern most sector of the service area. Borders the state of Alabama to the west, the state of Tennessee to the north, and Walker County on the east. Second smallest geographically, covering only 174.1 square miles. Bordered on both the east and west by mountains-Lookout on the east and Sand on the west. 70.1% of the county is forest land.
Murray	336.9	Second largest of our counties with 336.9 square miles. Located in the northeastern most sector of the service area. Borders the state of Tennessee to the north, Whitfield County to the west, Fannin and Gilmer Counties to the east, and Gordon County to the south. Very mountainous and contains the western edge of the Chattahoochie National Forest-Blue Ridge Mountain Area. 73.9% of the county is forest land.
Walker	446.7	Largest county in our service region with a total of 446.7 square miles. Borders the state of Tennessee to the north, Dade County to the west; Catoosa and Whitfield Counties to the east, and Chattooga County to the south. At the very southeast tip, Walker County also intersects with Floyd and Gordan counties. Characterized by rural and rural mountain areas and encompasses a portion of the Chattahoochie National Forest and is 64.6% forest land.
Whitfield	290.7	Mountainous county that borders the state of Tennessee to the north, Murray County to the east; Catoosa and Walker Counties to the west, and Gordon County to the south. Ranked fourth in size with 290.7 square miles. Chattahoochie National Forest covers much of the county and is 53.4% forest land.

County Governing Authorities

County	Governing Authority
Catoosa	County operates under a 5 member Board of Commissioners that are elected by the voters. Commissioners are elected by specific districts and the chairman is elected at-large. The Board, as the county's governing authority, is responsible for establishing policy for county operations, enacting ordinances and resolutions to promote the county's health, safety, and welfare (www.catoosa.com).
Chattooga	County operates under a Sole Commissioner. The Sole Commissioner is the chief legislative and executive government officer in the county. The Commissioner's office handles roads and revenue, and is available to answer citizen's concerns on a host of county government issues. The commissioner is not chief of all other local government offices. The commissioner works in close collaboration with other governmental agencies and community groups to ensure a safe and prosperous county (chattoogacounty.org).
Dade	County operates under a 5 member Board of Commissioners. The Board has the power to adopt ordinances, resolutions, or regulations relating to county property, county affairs, and the operation of local government. Constitutional officers also have governing powers; these positions include the: sheriff, tax commissioner, Clerk of the Superior Court, and the Probate Court (dadecounty-ga-gov).
Murray	County is led by a sole commissioner who holds all the legislative and executive powers (and responsibilities) in the county and who oversees a county staff of employees charged with providing services to the the citizens of Murray County (murraycountychamber.org).
Walker	County is led by a Sole Commissioner. The commissioner is responsible for public works, finance, administration, purchasing, fire, rescue, emergency management, planning, economic development, and public health and welfare. The commissioner's staff help carry out these functions (walkercountyga.gov).
Whitfield	The Whitifeld County Commissioner makes policy for Dalton, including setting long-term goals and evaluating outcomes. He adapts Dalton budgets, approves taxation and financial decisions, adopts ordinances, and makes land use decisions. Commissioners play multiple roles in Dalton and Whitfield County government (whitfieldcountyga.com).

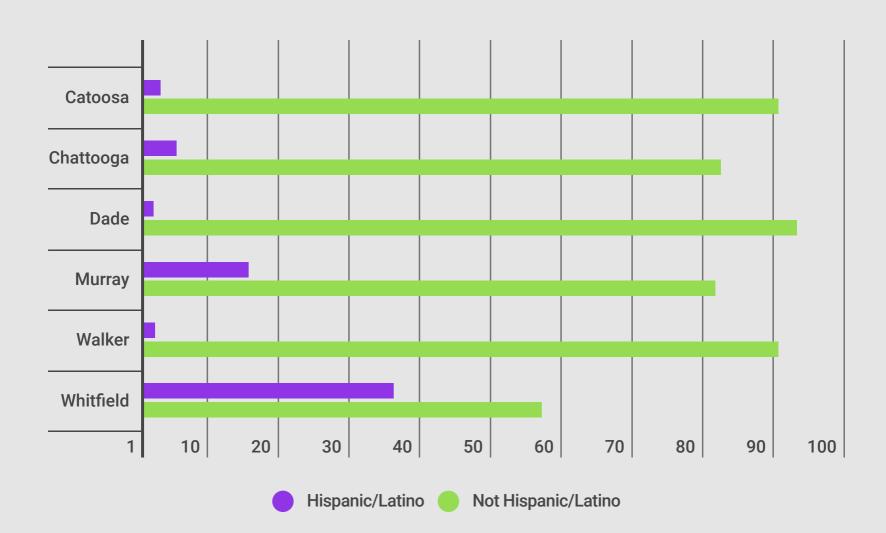




Racial and Ethnic Composition

Racial make-up of County-wide Population, Percentages

	Asian	Bi-racial	Black	Caucasian	Hispanic/Latino	Other
United States	5.9	2.8	13.4	60.1	18.5	1.5
Georgia	4.4	2.2	32.6	52	9.9	0.6
Catoosa County			2.9	90.5	3.2	0.6
Chattooga County	0.6	2.1	9.8	82.5	5.5	0.8
Dade County	1.1	1.5	1.4	93.3	2.3	0.7
Murray County	0.5	1.3	1.2	81.8	15.7	1.3
Walker County	0.8	1.7	4.4	90.5	2.5	4.5
Whitfield County	1.6	1.7	4.4	90.6	36.3	1.6
*Service Area Avg.	1.0	2.70	4.02	92.37	10.92	1.87
*Service Area %	1	2	4	82	10	2



Languages Spoken

	English	Spanish	Other-Indo-European	Asian & Pacific Island	Other
Catoosa					
Chattooga	95.1%	4.1%	0.5%	0.1%	0.1%
Dade	96.4%	2.0%	1.2%	0.4%	0
Murray	88.1%	11.4%	0.2%	0.3%	0
Walker	97.7%	1.4%	0.4%	0.6%	0
Whitfield	68.4%	30%	0.9%	0.5%	0.2%
Total for Service Area	90.13%	8.83%	0.62%	0.20%	0.5%

Of service area residents 90.13% speak English only. The non-English language spoken by the largest group is Spanish which is spoken by 8.83% of the service area. In Whitfield County there is a high concentration, 30% that speak Spanish. The public schools in Whitfield County indicate that as many as 44.1% of school age children are of Hispanic/Latino origin.

Data obtained from American Community Surveys 2015-2019

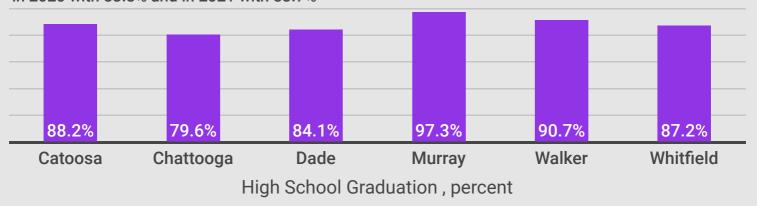


Socioeconomic Status

Education

High School

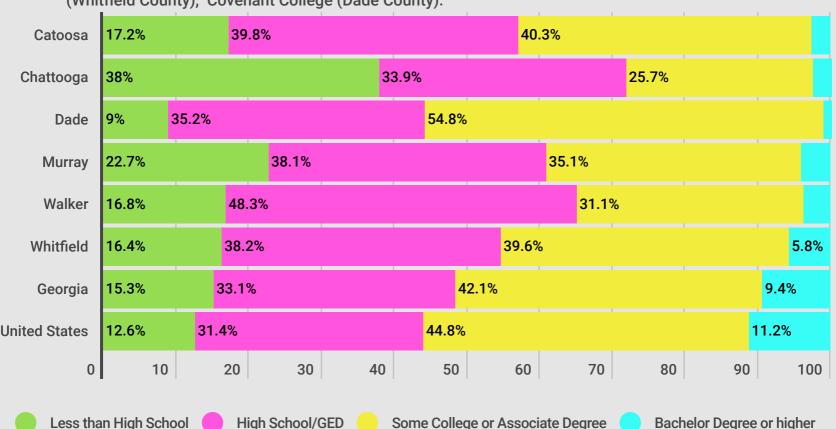
"Given the impacts of the COVID-19 pandemic, I am pleased to see Georgia's graduation rate holding steady," State School Superintendent Richard Woods said. Teachers and students have continued to succeed in the face of challenging circumstances. Graduation rates stayed consistent in 2020 with 83.8% and in 2021 with 83.7%



Data obtained from the Georgia Department of Education, 2021 Graduation Rate Report by county and state-accessed Feb. 2022

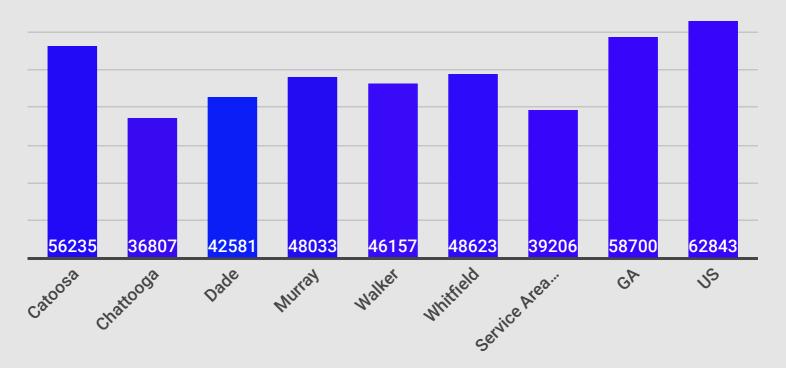
College

Degree attainment: 37.77% of the population 18-24 years old within the service area have some college or an associate degree, which is lower than the GA average of 42.1% and the national average of 44.8%. Populations within the service area having a bachelor degree or higher are 3.33% percent which is lower than the GA average of 9.4% and the national average of 11.2%. Colleges available in the service areas are: Georgia Northwestern Technical College (Catoosa, Walker, Whitfield-Murray Counties), Dalton State College (Whitfield County), Covenant College (Dade County).

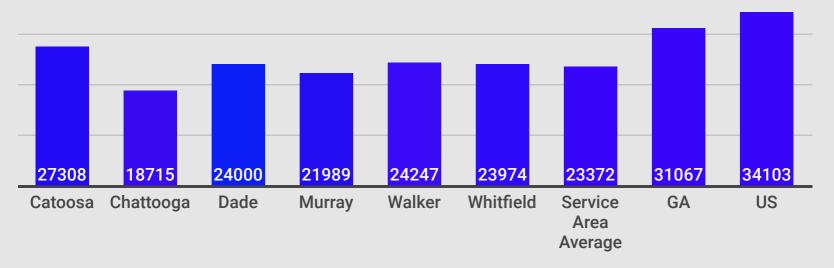


Income and Poverty

Average Median Household Income: amount that divides the income distribution into two equal groups, half having income above the amount, and half having income below the amount: The Average Median Income in the service area is \$39,206 which is lower than the GA median income of \$58,700 and also lower than national median income of \$62, 843.

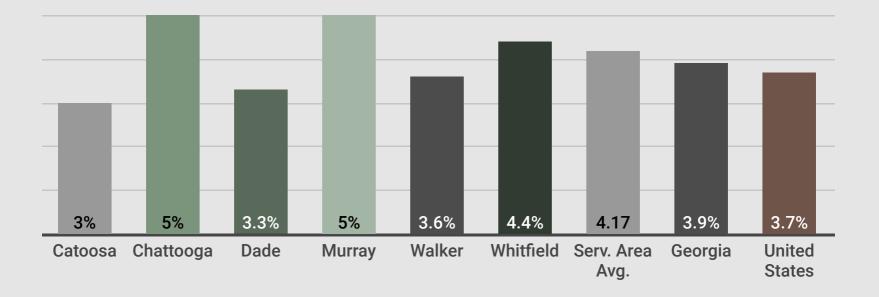


Per Capita Income/Average income earned per person: average income per person in each county of the service area ranges from \$18,715 to \$27,308. The average per-capita income for the service area is \$23,372 and is lower than the Georgia per capita income of \$31,067 and the national per capita income of \$34,103.



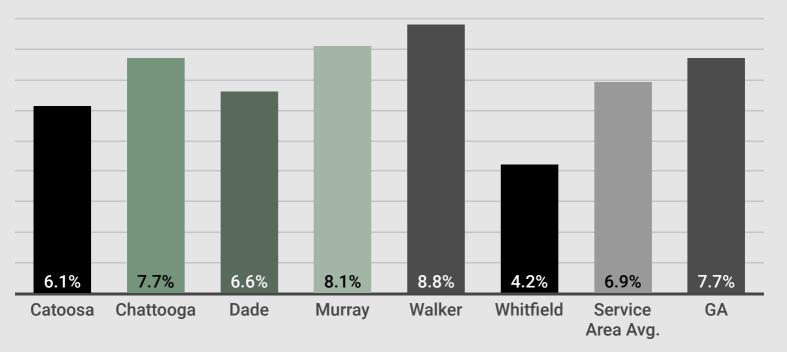
Unemployment

Georgia Kid's Count Data Center reports unemployment rates that vary from 3% (Catoosa) to 5% (Murray) in the counties served. Our 6 county service area has an average unemployment rate of 4.17% which is higher than the 3.9% unemployment rate for Georgia and higher than the national rate of 3.7%



Children Whose Parents Lack Secure Employment

Ranges from 4.2% (Whitfield) to 8.8% (Walker). The service area average is 6.9% which is lower than the Georgia average of 7.7%



Poverty

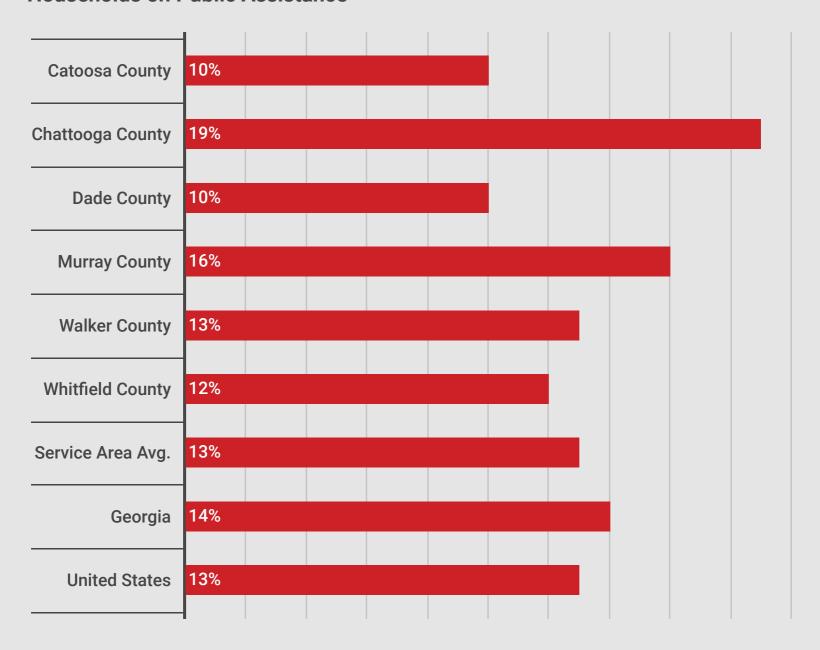
The poverty rate in the service area ranges from 10% to 18.8%. The average poverty rate for the service area is 14.13% which is slightly higher than the GA poverty rate of 14% and higher than the national poverty rate of 11.4%



Data obtained from US Census Quick Facts -accessed Jan. 2022

Children under 6 Years Old: below:	100% Poverty	150% Poverty
Catoosa	813 or 18%	1,510 or 34%
Chattooga	489 or 29%	886 or 52%
Dade	104 or 12%	357 or 41%
Murray	646 or 23%	1,221 or 43%
Walker	1,024 or 23%	1,887 or 42%
Whitfield	2,247 or 27%	3,581 or 43%
Georgia	24%	37%

Households on Public Assistance



Households on public assistance include federal aid such as Temporary Assistance for Needy Families (TANF), Supplemental Security Income (SSI), Medicaid, PeachCare, Supplemental Nutrition Assistance Program (SNAP), Supplemental Nutrition Program for Woman, Infants, and Children (WIC), and public housing assistance. Percentages range from 10% to 19% of households in the service area. The service area average of 13% is sightly lower than the Georgia percentage of 14% and equal to the United States percentage of 13%.

Eligible Infants/Toddlers/Preschool Age children

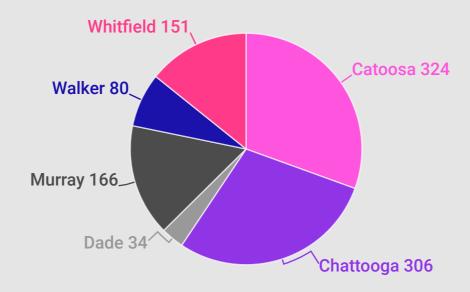
Estimate of Eligible Children	Catoosa	Chattooga	Dade	Murray	Walker	Whitifled
# of 0-5 year old children	3.801	1,436	776	2,500	3,872	6,951
X Poverty Rate	10.1%	18.8%	13%	15.9%	14.1%	13%
Number in Poverty	383	270	101	398	546	904
Divided by # of age groups (1-5 yrs. old)	5	5	5	5	5	5
# eligible by age group	77	54	20	80	109	181
X # of age groups served (3 and 4 yrs)	2	2	2	2	2	2
# 3 and 4 year old's eligible for HS	154	108	40	160	218	362
3 and 4 year olds children served by HS and Pre-K at Family Resource Agency of N. GA	121	34	34	34	125	185
Eligible children not served by FRA HS	33	74	6	126	93	177
X # of age groups served (1, 2, and 3 years)	3	3	3	3	3	3
# 0-3 year old's eligible for EHS	231	162	60	240	327	543
0-3 year olds children served by EHS and CCP at Family Resource Agency of N. GA	56	56	32	88	80	144
Eligible children not served by FRA EHS	175	106	25	152	247	399

Data Obtained from US Census Quick Facts July 1, 2019-accessed February 2022

Housing and Homelessness In Service Area

Homeless Children Under 18 Years Old in Georgia

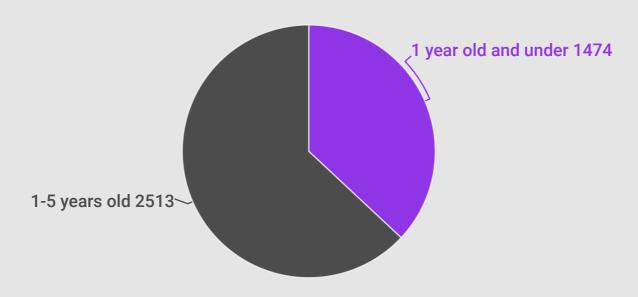
Total Number of Homeless Children in the Service Area counties vary in the number and range from 34 homeless children in Dade County to 324 homeless children in Catoosa County per the definition provided in the McKinney-Vento Homeless Assistance Act.



https://www.gadoe.org/School-Improvement/Federal-Programs/Documents/McKinney-Vento/2019EHCY_DataReport.pdf

Foster Children in Georgia

There are a total of 8,082 foster children in Georgia. 3,987 foster children are under 5 years old.



Health, Dental, Mental Health in Service Area

Health

Georgia has over 300 hospitals/medical centers throughout the state. There are seven hospitals located within our six-county service area, with four of those in Whitifeld County, two in Murray County, and one in Catoosa County. In addition, there are several hospitals located in the Chattanooga, Tennessee area that are within 50 miles of our furthest county and within 10 miles of our closest county; this includes T.C. Thompson Children's Hospital which is well known in the area.

Within our service area, over 600 doctors accept Medicaid and PeachCare for kids. The largest concentration of doctors is located in Whitfield with over 300 and Catoosa with over 22, these range from general and family practitioners to Specialists. In addition, each of our six counties has a local health department. This information would indicate that there are sufficient medical resources available to our families within close proximity. According to the 2019 America's Health Ratings from the United Health Foundation, Georgia is 40th in overall health rankings (1=best/50=worst). The analysis shows that Georgia's challenges are: low percentages of prenatal care before the 3rd trimester and high numbers of uninsured woman. Access to secure and affordable housing, safe neighborhoods, good paying jobs and quality early childhood education are examples of important factors that can put people on a path to a healthier life.

The Georgia Department of Public Health website states "Asthma is a high priority health condition among Georgia children. Nearly 9% of Georgia's children have asthma, and many more are not diagnosed. Asthma is found often among children who live in households with lower incomes. Many of the triggers that cause asthma are found in older housing.

In 2017, there were 2,614 asthma-related hospitalizations among children 0-17 years of age in Georgia. The total cost of asthma-related hospitalizations among Georgia children amounted to \$37.4 million.

Dental

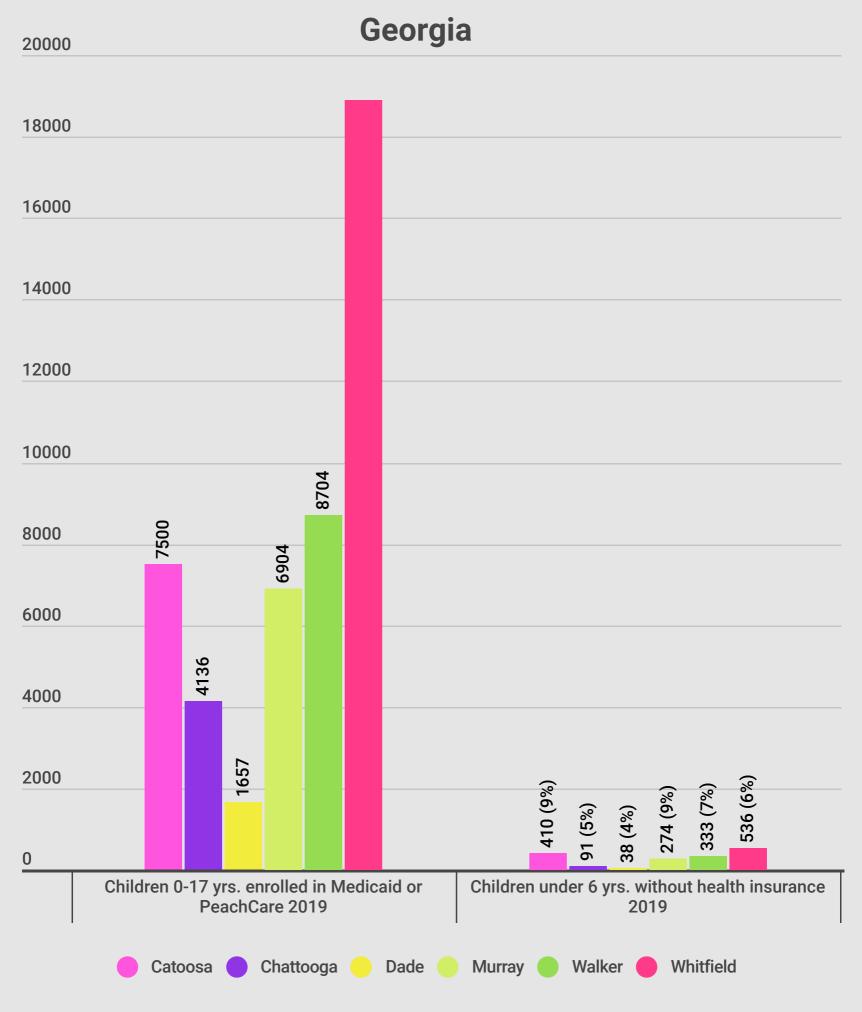
Service area has over 40 dentists available. There has been an increase in the total number of dentists as well as, those who accept Medicaid and PeachCare. In addition, more dentists are seeing children under age 3.

County	# of Dentists	Medicaid or PeachCare accepted	Head Start Payment Accepted	Accepts Children under age 3	Accepts Children under age 5	Accepts Pregnant Moms
Catoosa	7	1	1	1	4	6
Chattooga	8	5	4	1	6	7
Dade	2	2	2	0	2	2
Murray	2	2	2	0	2	2
Walker	4	2	4	0	4	4
Whitfield	22	3	3	4	16	18
Totals	45	15	16	6	34	39

Mental Health

Our six counties are supported by the Region One Mental Health, Developmental Disabilities and Addictive Diseases (MHDDAD) Office. THE MHDDAD Office plans and oversees a network of public mental health, developmental disabilities, addictive disease and prevention services for 25 counties. There is a regional office contact and then all six counties have access to 24 hour emergency assistance. They provide a Georgia Crisis and Access Line, a non-emergency mental health and addictive diseases service line, and a non-emergency developmental disabilities services line. In addition, locally there are 7 other agencies who will provide mental health services. We currently contract with Georgia HOPE and Sharen Narey, Mental Health Consultant, to provide services to our children, families, and staff.

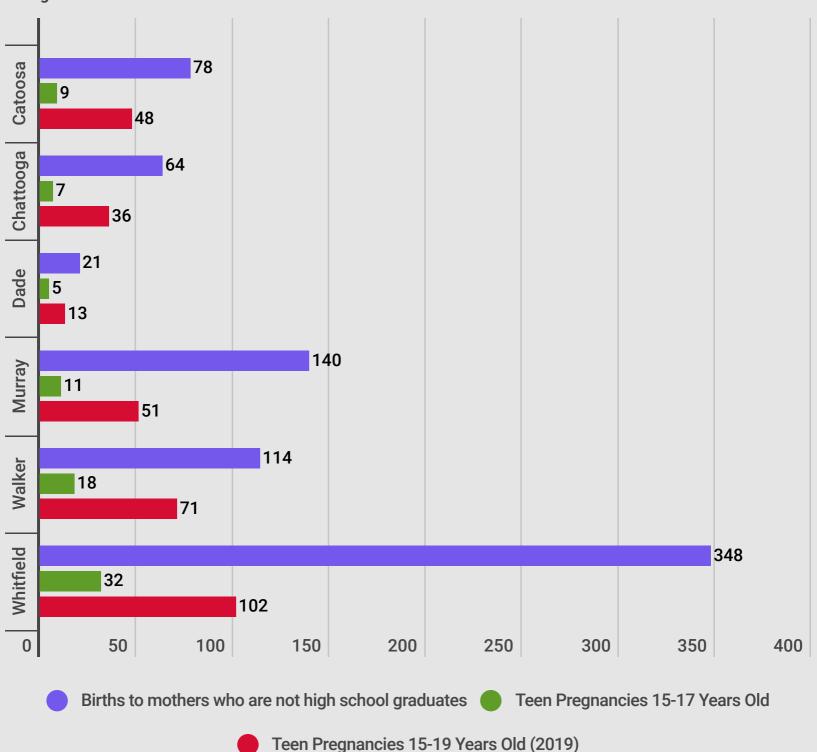




Teen Pregnancy in Service Area Counties

Teen Pregnancy in Service Area Counties

The state percentage of teen pregnancies ages 15-17 years old is 28% Murray County is above the state average whereas other counties we serve are below or equal to the state average. The state percentage of teen pregnancies ages 15-19 is 23%; Chattooga, Murray, Walker, and Whitfield counties are above the state average. According to the National Center for Health Statistics, Georgia's national teen pregnancy rating was 17 in 2021.



Pregnant Moms Served in 2020-2021

Enrolled 1st Trimester	1
Enrolled 2nd Trimester	9
Enrolled 3rd Trimester	10
Received Pre-Natal Health Care	20
Recieved Postpartum Health Care	20
Infant Enrolled in Early Head Start after Birth	18
Infant Not enrolled in Early Head Start after Birth	2

Childplus PIR report 9900 (20-21) accessed Feb. 22









Service Area

Service Area

Currently the program is funded to provide Childcare Partnerships, Early Head Start, Head Start, and Blended Pre-K/Head Start services to 941 children and families in the six northwest counties of Georgia. Currently the program operates 82 classrooms in 26 centers located in 6 counties. The current 941 total funded enrollment slots are divided between 4 separate programs: Head Start (HS) with 453 slots, Blended Pre-K/Head Start with 80 slots, Early Head Start (EHS) with 312 slots, and Childcare Partnerships (CCP) with 96 slots. The slots are divided into the 6 counties as shown in the table below:

	Total Slots	CCP Slots	EHS Slots	HS Slots	Blended Pre- K/HS Slots
Catoosa	177	16	40	101	20
Chattooga	90	0	56	34	0
Dade	66	16	16	34	0
Murray	74	16	24	34	0
Walker	205	16	64	85	40
Whitifeld	329	32	112	165	20
Total Children	941	96	312	453	80
Total Classes	82	12	39	27	4
Total Staff 260					

Childplus Report 2001 (grp. by all/region/site/summery)-accessed Feb. 2022

Georgia Program Enrollment in Service Area

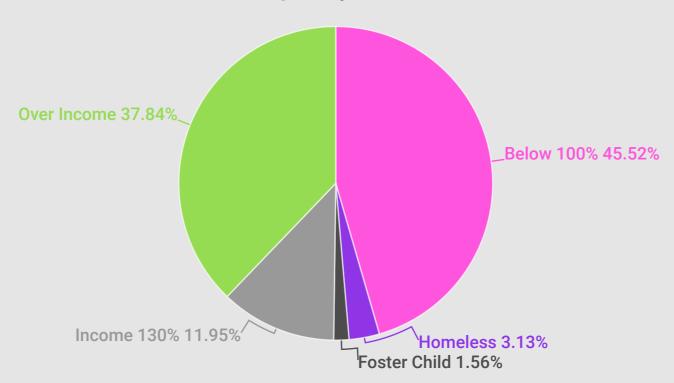
	Georgia Pre-K enrollment	At-risk Served by Pre-K	Head Start/Early Head Start Enrollment
Catoosa	468	37%	177
Chattooga	231	51%	90
Dade	98	49%	66
Murray	292	52%	74
Walker	429	54%	205
Whitfield	868	50%	329

Number of Children and Pregnant Moms on Waiting Lists by County/Age

	Under 1 yr. old	1 yr. olds	2 yr. olds	3 yr. olds	4 yrs. olds	5 yr. olds	Pregnant Moms
Catoosa	27	6	20	28	16	3	0
Chattooga	3	14	28	26	38	1	0
Dade	2	6	28	6	5	1	1
Murray	1	2	10	11	8	0	0
Walker	4	7	31	23	17	2	1
Whitifeld	11	11	52	55	24	3	7

Data Obtained from 2021-22 ChildPlus Report 2250-Enrollment and Waitlist Charts (by region, site, and age)-accessed Feb. 22





Data Obtained from 2021-22 ChildPlus Report 2250-Enrollment and Waitlist Charts (by region, site, and income status)-Feb. 22

Centers and Family Care Homes in Service Area

County	Total Providers	Child Care Centers	Serves Infants	Serves Toddlers	Serves Preschoolers	Family Child Care	Other
Catoosa	24	18	56%	61%	100%	0	6
Chattooga	11	6	67%	67%	100%	1	4
Dade	7	3	100%	100%	100%	2	2
Murray	6	4	100%	100%	100%	1	1
Walker	22	12	100%	100%	100%	1	9
Whitfield	40	18	78%	83%	100%	6	16

Program Enrollment in Service Area

	Kindergarten	Lottery Funded Pre-K	-At Risk Served by Pre-K	Head Start/Early Head Start
Catoosa	749	468	37%	177
Chattooga	285	231	51%	90
Dade	152	98	49%	66
Murray	480	292	52%	74
Walker	764	429	54%	205
Whitfield	1,544	868	50%	347

Licensed Capacity in Service Area

	Total Licensed Capacity/Slots	Learning Center Slots	Family Childcare Slots
Catoosa	2,138	2,138	0
Chattooga	414	408	6
Dade	261	249	12
Murray	380	374	6
Walker	1,439	1,433	6
Whitfield	2,107	2,071	36

Race and Ethnicity

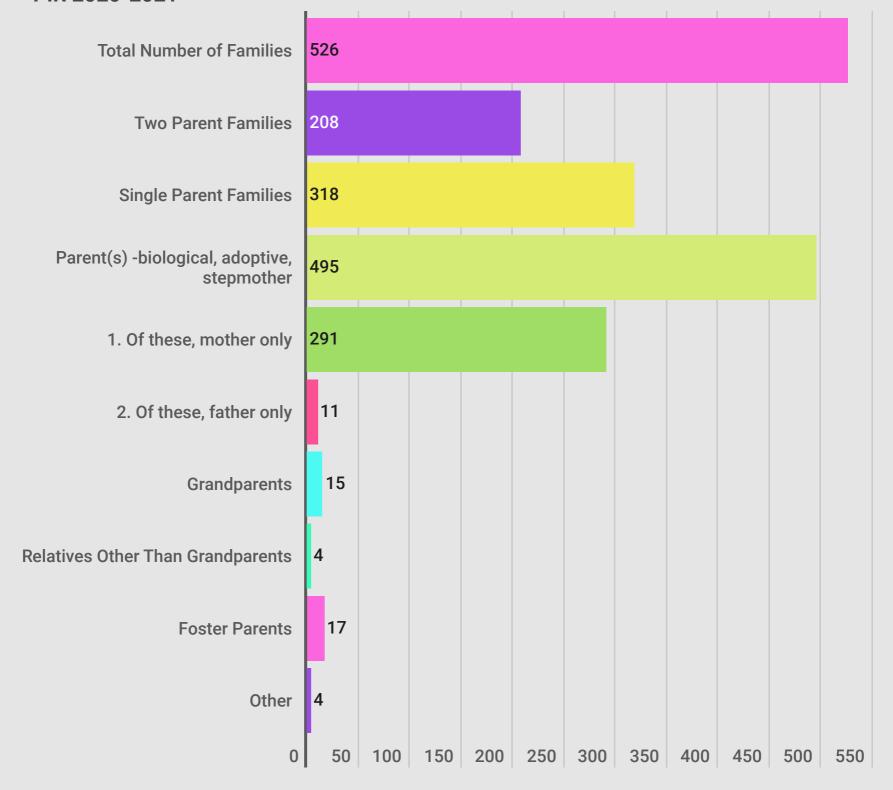
PIR 2020-21	HS (cumulative enrollment= 571)	EHS (cumulative enrollment=384)	CCP (cumulative enrollment=126)	Average
American Indian/Alaska Native	0.52%	0	0	0.17%
Asian	1.23%	0	0	0.41%
Black or African American	5.95%	7.03%	2.38%	5.12%
Native Hawaiian/Pacific Islander	0.18%	0.26%	0	0.15%
White	81.09%	78.39%	91.27%	83.58%
Bi-racial or Multi- racial	11.03%	14.32%	6.35%	11.27%
Other Race	0	0	0	0
Total	100	100	100	100
Hispanic/Latino	24%	21.5%	19.84%	21.78%
Non- Hispanic/Latino	76%	78.5%	80.16%	78.22%
Total	100	100	100	100

Data Obtained from ChildPlus Archives Report 9900/Accessed Feb. 2022



Head Start-Families by Type

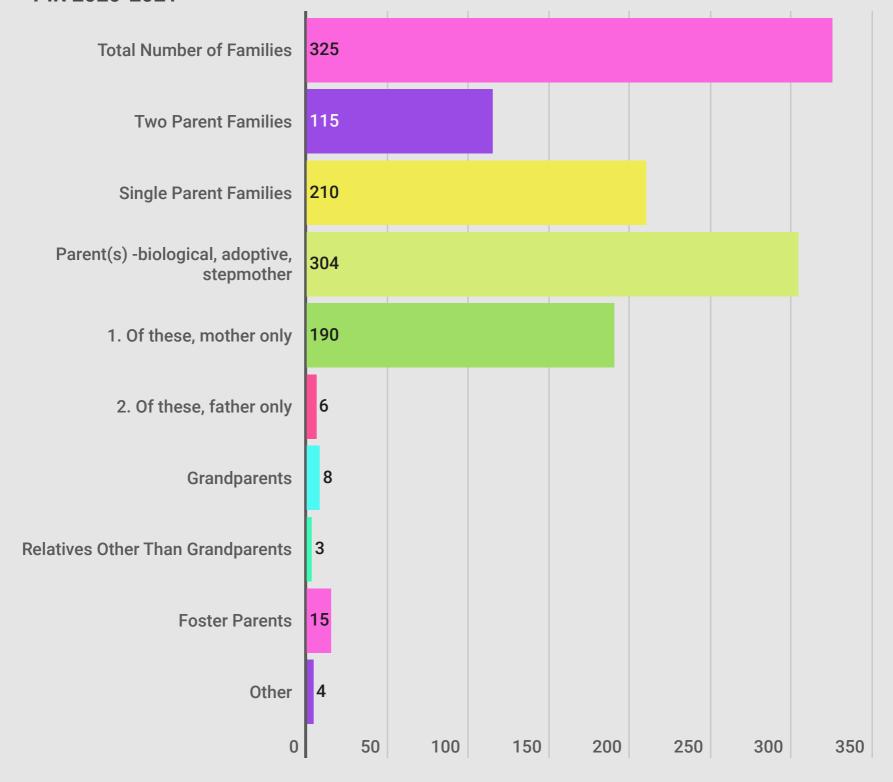
PIR 2020-2021



Data Obtained from Childplus 2020-2021 PIR Report 9900(detail)

Early Head Start-Families by Type

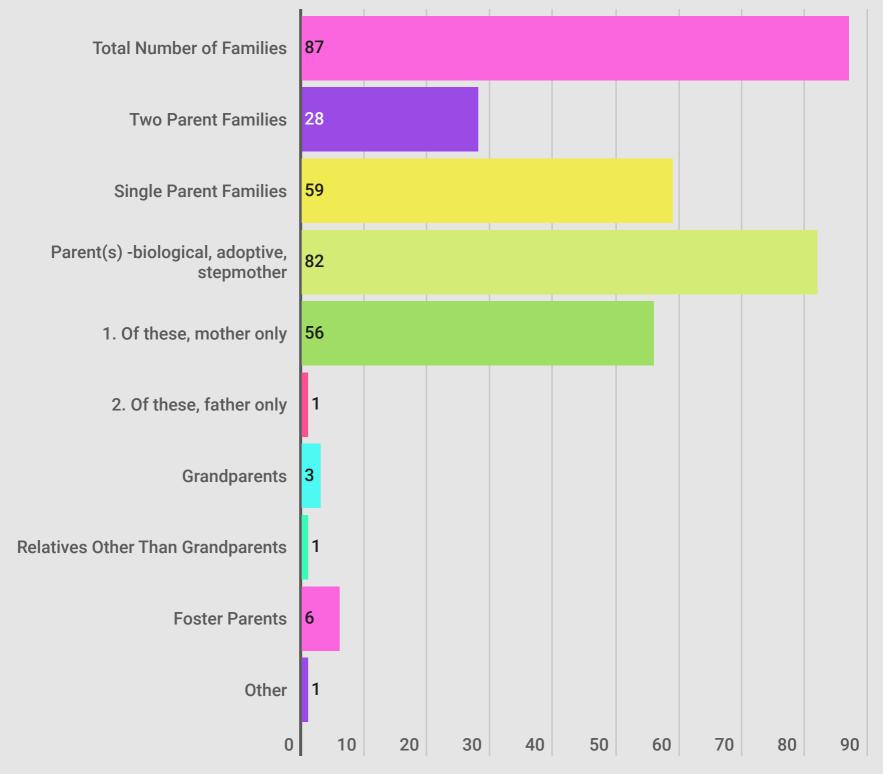
PIR 2020-2021



Data Obtained from Childplus 2020-2021 PIR Report 9900(detail)

Childcare Partnerships (CCP)-Families by Type

PIR 2020-2021



Data Obtained from Childplus 2020-2021 PIR Report 9900(detail)

Early Head Start Eligible Families Demographic Data

PIR 2019-2020

Percent of Children by Parent's Work Status	Number of families	Average
2 Parent Families in which both parents work	36	34%
2 Parent Families in which only one parent works	59	56%
2 Parent Families in which neither parent works	11	10%
Total	106	100%

Percent of Children by Parent's Work Status	Number of Families	Average
1 Parent Families in which the parent works	117	53%
1 Parent Families in which the parent does not work	104	47%
Total	221	100%

	Number of Families	Average
Total Number of Families Enrolled in Early Head Start	327	100%

The economy had moderate impact on the percentage of adults who worked in the service region as indicated by the PIR 2019-2020 data and is shown in the data table above. The percentage of Early Head Start two parent families in which both parents worked is 34%, two parent families in which one parent worked is 56%, and the percentage in which neither parent worked is 10%. For single parent families, the PIR indicates that 53% of Head Start single parents were employed and 47% were not.



Childcare Partnership Eligible Families Demographic Data PIR 2019-2020

Percent of Children by Parent's Work Status	Number of families	Average
2 Parent Families in which both parents work	18	19%
2 Parent Families in which only one parent works	17	18%
2 Parent Families in which neither parent works	1	.01%
Total	36	38%

Percent of Children by Parent's Work Status	Number of Families	Average
1 Parent Families in which the parent works	43	47%
1 Parent Families in which the parent does not work	14	15%
Total	57	62%

	Number of Families	Average
Total Number of Families Enrolled in CCP	93	100%



The economy had moderate impact on the percentage of adults who worked in the service region as indicated by the PIR 2019-2020 data and is shown in the data table above. The percentage of CCP two parent families in which both parents worked is 19%, two parent families in which one parent worked is 18%, and two parent families in which neither parent worked is less than 1%. For single parent families, the PIR report indicates that 47% of Head Start single parents were employed and 15% were not.

Parent Education Level-HS, EHS, and CCP

Job Training/School at Enrollment	Head Start-526 families	Early Head Start-325 families	Childcare Partnerships- 109 families
Less than High School	117	75	20
High School Graduate/GED	311	203	66
Associate/Vocational/Some College	80	44	22
Advanced or BA Degree	18	3	1

Employment/Job Training/School at End of Enrollment

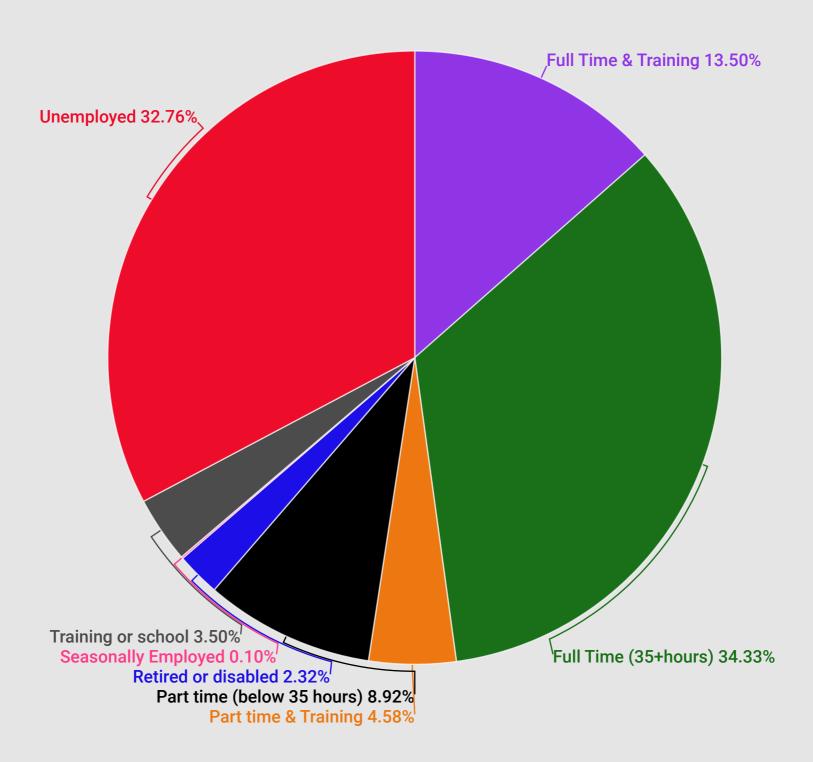
	Head Start	Early Head Start	Child Care Partnerships
Parent/guardian employed	383	206	85
Parent/guardian in job training	134	96	27
Parent/guardian in school (Associate, Bachelor)	15	24	2
Parent/guardian not employed (retired, disabled, unemployed, job trng./school	132	90	22

Employment

	Head Start	Early Head Start	Child Care Partnerships
Maintained Employment	149	108	40
Unemployed, now employed	13	7	3
Unemployed	364	210	66
Employed, now unemployed	245	140	47
Maintained unemployment	119	70	19

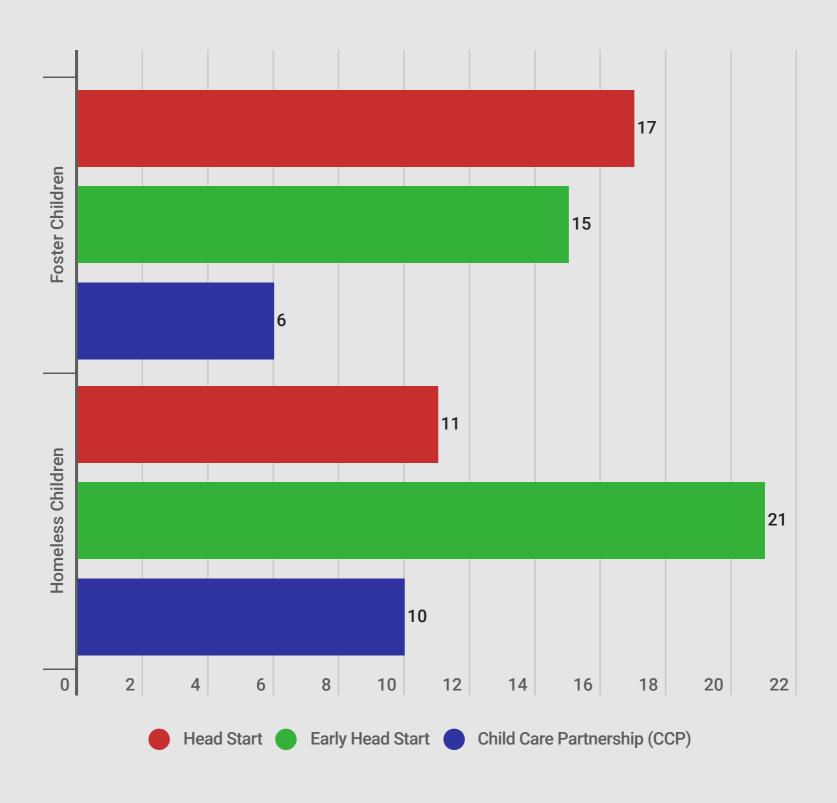
Families' Work, School, Training Schedules

Work, School, and Training Schedules of Parents



Homeless and Foster Children Served

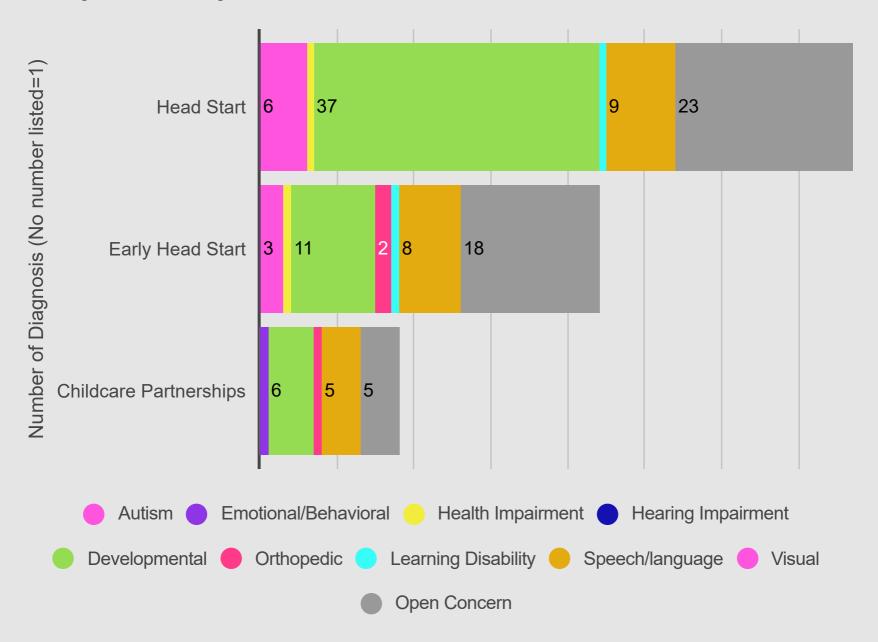
Homeless and Foster Children Served

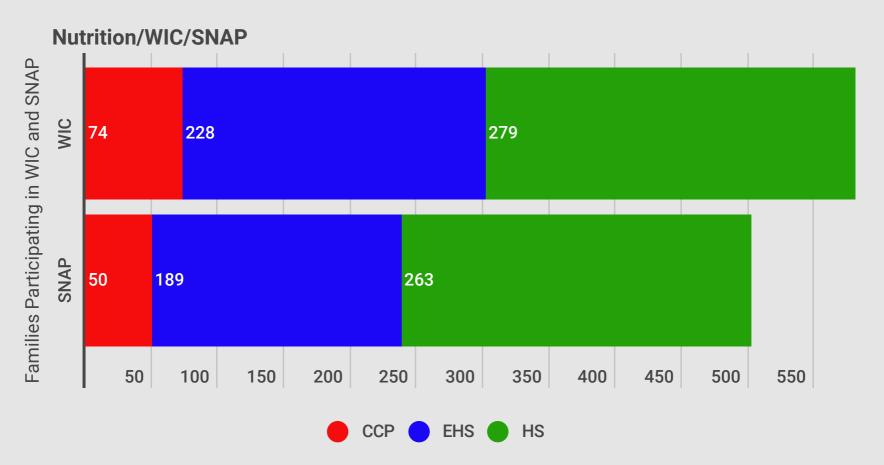


Disabilities

The program has made a strong commitment to children with special needs. The agency has exceeded the requirement to have at least 10% of enrollment with a diagnosis at some point during the year. During the 2020-2021 year, we had an annual total of 572 enrolled in Head Start and 68 or 11.8% with a diagnosis. In Early Head Start, the agency had an annual total of 400 enrolled and of those 57 or 14.3% had a diagnosis. In our CCP classes the agency had an annual total of 126 enrolled and 19 or 15% with a diagnosis. The program wide total of enrolled children with a diagnosis was 13.7%. Recruitment efforts with our local school systems and Babies Can't Wait have been outstanding at welcoming and providing services to children with disabilities.

The state of Georgia also develops a plan for services to undiagnosed children, aged 3 years old and older, potentially needing a diagnosis. This is labeled "Response to Intervention" and they determine if a child is disabled or just needing enrichment through those interventions, evaluations, and services.





The chart above shows the number of families of children attending the program who receive WIC and/or SNAP. In an effort to educate families about the importance of nutrition, a newsletter developed by Primary Healthcare titled "Nutrition and You" is shared with staff and families. The newsletter covers a variety of nutrition topics, healthy tips, and recipes. Information/Links are provided on the agency web page at https://www.fragahs.com/ that parents can use as a resource: "Fruit & Veggies Matter" sponsored by Produce for Better Health includes recipes that are child and budget friendly. "My Plate" sponsored by the USDA has healthy recipes, calorie counters, food information, daily food planning, dietary guidelines, and eating healthy on a budget. The classrooms utilizes nutrition resources such as "I am Moving, I am Learning" and implements nutrition activities into lesson plans/classroom activities.



Staff and Family Survey Results















Family Surveys

















Family Survey Results

Participating Families:

-1% newspaper, radio, tv

Survey Monkey Surveys were used to gather information from families about our program. 850 surveys were distributed and 860 responses were received. The families are given the opportunity to express opinions in a variety of areas that help to improve the services we provide.

In the 2021-2022 school year, the majority of surveys indicated the services provided are excellent or satisfactory. The highest score for an area needing improvement was, How did parent cafe's meet your interest? 93.02% scored this as excellent or satisfactory.

The main results were:
*Question-Regarding the process for enrolling your child in this program, how would you rate your experience?
99.41%scored this as excellent or satisfactory.
*Question-Regarding what is the program's reputation in the community?
96.63%scored this as excellent or satisfactory.
*Question-Our goal is to provide a safe and learning filled classroom environment with staff who are concerned about each child. Tell us how well you
think we did on accomplishing that goal?
99.65%scored this as excellent or satisfactory.
*Question-Regarding the quality of other staff, besides the classroom staff, that families have dealt with this year?
98.72%scored this as excellent or satisfactory.
* Question-Regarding the communication between staff and parents?
99.19% scored this as excellent or satisfactory.

*Question-"Regarding how well the class schedule meets families' needs?
95%scored this as excellent or satisfactory.
* Question-In regard to how much learning or progress child has made this year in the program?
99.19% scored this as excellent or satisfactory.
socied and do excellent of outstactory.
* Question-Regarding overall experience with the program?
99.42% scored this as excellent or satisfactory.
scored this as executent of satisfactory.
*Question-Regarding how families learned about the program?
-70% friends or family
-16% other Babies Can't Wait, Online, Previous Student, School systems, Therapists, Daycares, DFCS, Previous employee, GED teacher, Health
Department
-5% posters
o posters

















Program Staff Surveys













Program Staff Survey Results:

Microsoft Forms Surveys were used to gather information from program staff. Family Service Specialists (FSS) work with families throughout the year as they develop Family Partnership Agreements, assist parents in meeting their personal, family goals, and make referrals for other needed services; they can gain a good perspective of the needs of our families and communities. In addition, the Center Managers (CM) and Center Supervisors (CS) often build strong relationships with families. Therefore, we requested information from Family Service Specialists, Center Managers, and Center Supervisors in a variety of areas.

The main results were:

Communities with Head Start eligible children that are underserved:

Catoosa County-Downtown Ringgold; Dade County-Sand Mountain, Wildwood; Walker County-Naomi, Villanow, Kensington, Fairview, Rising Fawn, Catlett, Rossville, apartment communities; Whitfield County-South end of the county, Westside, Tunnel Hill.

What are ways that Head Start services to families could be improved?

In-person services, staffing, after school program transportation/services, transportation to and from sites, extended hours, mobile health units, CPR/1st aid training for families, offer food/clothes pantry at sites, gas fund for families, continue to provide meals/pre-packaged snacks throughout distance learning (pick up with distance learning bags), libraries at sites for families to check out children's books (especially during distance learning).

Challenges for families:

Transportation, hours of service not meeting working parent's needs.

COVID Pandemic (sickness, unemployment, needed childcare due to closures/distance learning/short staff-many lost jobs; child attendance; financial issues due to the rising cost of basic necessities such as gas, food, utilities, families struggling to meet basic needs; COVID positive/quarantine-loss of work/income.

What are strong points of Head Start services provided?

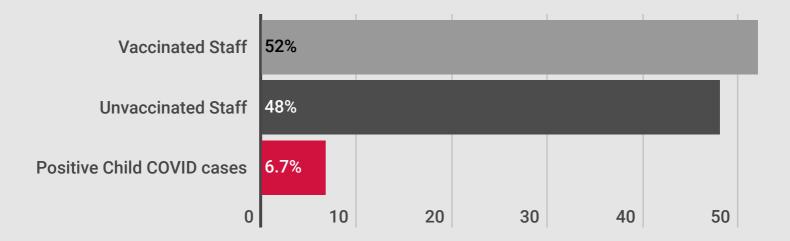
Food, diapers, wipes, formula provided to families during COVID pandemic (continue this), ensuring health needs are met, certified/degreed teachers, support the whole family, employment opportunities for families, Ready Rosie Parent Curriculum, health & nutrition advocacy, school readiness.

What are strong points of families receiving Head Start services?

Resilient, flexible, communication, cooperative with distance learning/school closures, participating in distance learning and doing the activities with their children, eager to learn, involved in their child's education, attending school, working, setting goals for themselves for the future.

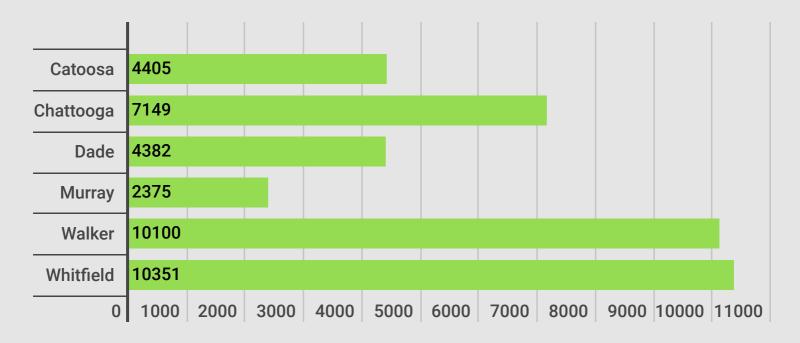
COVID 19 Pandemic Data

Family Resource Agency-Covid 19 Data



Meals Served during Pandemic Closures

The total meals served to children and families during pandemic closures was <u>38,762.</u>
Chattooga, Walker, and Whitfield counties picked meals up from center kitchens and children in Catoosa, Dade, and Murray counties picked meals up from the public schools.



Meals Served during Pandemic Closures

Diapers and wipes were also provided to families as needed.

Analysis

The information gathered from this community assessment is analyzed in order to:

- identify community needs and make decisions regarding services provided by Head Start and Early Head Start.
- determine where services for Head Start and Early Head Start should be located and model options that would best serve the needs of the families.
- identify service gaps in the communities.
- identify issues that can be addressed in other groups, such as the County Collaborative Councils.

This process has allowed Family Resource Agency of North Georgia to reflect and re-examine purpose and goals to insure services provided meet the needs of children and families in the communities. In conclusion:

1. Head Start families have many needs that the program will continue to address. These needs are education, employment skills, setting and achieving goals, and quality childcare so parents/guardians can attend school, job training, or work.

Additionally, in order to provide services to Spanish-speaking families, Family Resource Agency will continue to give priority in hiring practices to bilingual staff. Hiring bilingual staff ensures that children's developmental screenings and assessments are completed in the native language as needed. Families also receive assistance, as necessary, when communicating with other community agencies and service providers. Bilingual classroom staff support children transitioning to English-speaking environments without eliminating the children's native language.

2. In some of the counties, data indicates close to 100% of eligible children are being served through HS and Pre-K. There is no need to expand Head Start services in these areas. However, additional services are needed for pregnant woman, teen moms, and infants/toddlers (birth-3) as there are eligible infants/toddlers not receiving services and high pregnancy rates in those who are not high school graduates and 15-19 year old's.

In addition, childcare costs for very young children are out of financial reach of many families in the service areas. Family Resource Agency will continue to work with the public school system, collaborative agencies, and other community partners to determine available funding sources and programs designed to assist young children.

3. Based on information from the program staff and families there is a need for extended hours, staff (consistent teachers), in person/5 days, transportation.

Resources:

CDC https://www.cdc.gov/

US Census Bureau Quick Facts https://www.census.gov/

American Community Surveys https://www.census.gov/programs-surveys/acs/

Kid's Count Data Center https://datacenter.kidscount.org/data/#USA/1/0/char/0

ECLKC https://eclkc.ohs.acf.hhs.gov/

Georgia Early Education Alliance for Ready Students (GEEARS) http://arcgis.com/

Georgia Department of Public Health https://dph.georgia.gov/

Georgia Department of Education http://www.gadoe.org/

https://www.gadoe.org/School-Improvement/Federal-Programs/Documents/McKinney-Vento/2019EHCY_DataReport.pdf

GEEARS: Georgia Early Education Alliance for Ready Students, http://geears.org/

infogram

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