

Family Connection Discretionary Grants
ACF-OGM SF-PPR

Attachment B, Item B-05, Other Activities
Evaluation Activities

Child Welfare/TANF Collaboration in Kinship Navigation Program

Funding Recipient: Arizona’s Children Association

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City and State: Tucson, Arizona

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EVALUATION PROGRESS AND MODIFICATIONS

Evaluation Planning

In the past six months, we have successfully met the following milestones for the evaluation of the Arizona Kinship Support Services (AKSS) project.

- The evaluation team regularly consulted with the Program Director, program staff, and project partners on a monthly basis, at minimum.
- The evaluation team continued to **provide training and technical assistance to Navigators in data collection for the evaluation**, including collecting Initial Contact Form (ICF) data from clients, informed consent, and the Baseline Participant Survey, and utilizing the Access database that the evaluation team built.
- The evaluation team maintained a **program-wide Access database system** to assist in tracking client and child ICF data, referrals to resources and services, and client activities. The latest deployment of V4.2.1 of the Access database to Navigators' local computers took place in January through March 2015. LMA developed numerous reporting queries that are used by both the evaluation team and project staff. Aggregated data from the database were used to populate the data required for this report.
- The evaluation team **refined the ICF** and developed an accompanying **Data Dictionary** that clarifies data collection of the ICF paper form and entry of the ICF into the Access database. The latest version of the Access database mirrors the revised ICF fields.
- Navigator staff continued to **collect ICF data and administer the Baseline Participant Survey** (both on paper and online) **as part of their case opening process**. The Baseline Participant Survey was administered only with clients who completed the informed consent process. A total of 95 Baseline surveys have been completed, which is a 78% response rate of the 122 navigation cases that have been opened since the start of the grant (as of this reporting period, 48 cases are closed and 74 cases remain open). The baseline survey data collection was closed on March 31, 2015, to allow for up to six months of follow-up data collection.
- The evaluation team continued to collect **6 and 12 month follow-up survey data** through telephone interviews. To date, a total of 44 follow-up surveys have been completed, 31 completed one survey and 13 completed an additional follow-up survey.
- The evaluation team finalized the draft **Cost Study data collection** tool and provided training on this tool to two Navigators who were selected to pilot data collection. The Navigators piloted this tool from 12/15/2014 through 12/19/2014 and provided LMA with feedback in using the tool. This tool was finalized based on the pilot test. The cost study time log (Excel file) was provided to all participating staff. Staff were trained on



data collection through a group webinar and individual assistance. Sixteen staff members collected cost study data over a two week period, during the time from of 1/26/2015 to 3/31/2015.

- The evaluation team **coordinated with grant partners to collect data for this report**. Data was collected on outcomes of the Guardianship Clinics from Southern Arizona Legal Aid (SALA). Data was also solicited on the number of referrals made to AKSS from the Division of Aging and Adult Services' (DAAS) Caregiver Resource Line (CRL). Additionally, our Department of Economic Services (DES), Family Assistance Administration (FAA)/TANF grant partner provided us with information on AKSS client receipt of TANF benefits over the four 6-month reporting periods of the grant. Furthermore, our child welfare partner, DES Department of Child Safety (DCS) provided FAA/TANF with a list of kinship placements made through DCS, statewide, over the past two 6-month reporting periods. FAA/TANF then cross checked this list with TANF benefit receipt. These aggregated data are presented in this report in six month increments to document systems-level change in the DCS/TANF systems.
- The evaluation team developed and submitted an **annual report to our Department of Child Safety (DCS)** project partner summarizing key demographic and activities data for current DCS-involved families.
- The evaluation team performed **additional analyses on the matched TANF/DCS statewide dataset** to determine patterns and trends in TANF participation codes for DCS kinship placements (in six month, bi-annual increments) and shared preliminary results with the Project Director via email.
- The evaluation team developed and collected data from project partners on grant **collaboration and coordination** through an online survey collector. A total of 14 surveys were completed by 6 Navigators and 8 external partners.
- LMA collaborated with the Project Director to submit evaluation reports and the original grant proposal to Sharon McKinley, Program Manager of the **Child Welfare Information Gateway site visit team**, in preparation for our virtual site visit. LMA participated in the this virtual site visit via Go-to-Meeting on 3/18/2015, including developing the evaluation highlights power point slides.
- The following **article was published**: Treinen, J.R., Schmidt, M., & Espino, C. (2014). Arizona Kinship Support Services: A Program of Arizona's Children Association. In G. Wallace, L. Hernandez, & J. Treinen (Eds.), *Kinship Navigators: Profiles of Fostering Connections Projects from 2012 to 2015*. Washington, DC: Child Welfare League of America Press.



Evaluation Goals, Questions & Outcomes of Interest

The evaluation team continued to collect information from clients, staff, and project partners to inform our process and outcome evaluation questions.

Process Evaluation: The purpose of the process evaluation is to document how the AKSS program is implemented and the extent to which the program is reflective of the original goals, philosophies, and practices (i.e. examination of program fidelity). The guiding questions for the process evaluation align with four areas:

- 1) Examination and analysis of the AKSS program and processes at the Navigator and Systems Level.
 - a. What are the important features of the AKSS program at the Navigator and Systems level, in terms of services, processes, and collaborative efforts to serve kinship caregivers?
 - b. In what ways has the program improved or changed over time to better serve caregivers, such as the transfer of learning across the four KARE Center sites?
 - c. What aspects of the project are in need of improvement?
 - d. What are critical successes and challenges of the AKSS project, in terms of replicating and expanding AKSS of the KARE Center in Pima County to Maricopa, Cochise and Pinal Counties? This includes: the transfer of learning across four KARE Center sites; training of Navigator staff; implementing the toll-free hotline and program website; and collaborating with project partners to enhance kinship services.
 - e. What do staff, partners, and clients perceive as strengths of the program and barriers to program effectiveness at the Navigator and Systems level?
 - f. What barriers or gaps in services for kinship caregivers are identified and how are they addressed?
 - g. What do staff, project partners, and clients identify as best practices or lessons learned that may be used to inform program improvement and replication?



- 2) Examination of model fidelity at the Navigator and Systems Level.
 - a. To what extent has the AKSS program been implemented with fidelity to the intended model, in terms of:
 1. Replication of the KARE Center model of Pima County across three additional counties, including the transfer of learning and training of Navigator staff;
 2. Establishment of a toll-free phone number and grant website; and
 3. Improvement of statewide outreach to kinship caregivers?

- 3) Examination and analysis of Navigator Level activity.
 - a. How many and what type of participants are served by the four KARE Center sites?
 - b. What services are used by caregivers at the four KARE Center sites?
 - c. What types of referrals are made at the four KARE Center sites?
 - d. To what extent are AKSS clients satisfied with the services and referrals received? How does client satisfaction change over time?

- 4) Examination and analysis of Systems Level activity.
 - a. To what extent does AKSS identify, coordinate, and collaborate with kinship serving agencies (e.g., public, private, community, tribal, and faith-based agencies)?
 - b. To what extent does AKSS develop and implement a kinship care advocacy plan across kinship serving agencies?
 - c. To what extent does AKSS ensure that staff from the four KARE Center sites and partner agency staff are provided with training to better serve kinship caregivers?
 - d. To what extent does AKSS develop and implement systems and practices that encourage kinship caregivers to access (and navigate through) information and services that may aid them?

Outcome Evaluation: The outcome evaluation of AKSS will assess progress toward outcomes at both the Systems and Navigator Levels. The three overarching evaluation questions and outcome areas include:

- 1) Systems-Level: What systems changes occur as a result of the AKSS program across four systems-level outcomes?
 - a. Coordination/collaboration: Kinship serving agencies communicate/partner/collaborate with each other to serve kinship caregivers and families.
 - b. Advocacy: Kinship caregiver advocacy networks are strengthened.
 - c. Trainings/tools
 1. Kinship serving agencies hold cross-agency staff trainings regarding advocating



and serving kinship families.

2. Kinship serving agency staff have the knowledge necessary to better advocate for and serve kinship families.

d. Outreach

1. Community events, activities, and trainings are held by project partners for kinship caregivers and kinship serving agencies.
2. The AZ-Link hotline and website are developed and maintained through project partnerships.
3. The AZ-Link hotline and website are utilized by kinship caregivers to obtain information and services.

2) Navigator-Level: To what extent has the AKSS program increased caregiver knowledge of and access to supportive services? Due to partnerships formed and cross-agency training performed:

- a. Kinship caregivers access and use AKSS services that best meet their needs.
- b. Kinship families gain access to the benefits for which they are eligible (receipt or non-receipt of TANF by caregivers and family members is addressed by Navigators).
- c. Kinship families gain access to necessary legal and other advocacy services.
- d. Kinship caregivers report positive change in their self-efficacy and resourcefulness.

3) Navigator-Level: To what extent has the AKSS program provided services resulting in child safety, permanent living situations, continued family relationships, and enhanced capacity of kinship families?

- a. Kinship caregivers are able to meet their families' needs, as indicated by change in family needs scale scores, and access to education, health benefits, and health care.
- b. Kinship caregivers seeking to achieve a permanent relationship (including a legal relationship) with kinship children receive needed services.
- c. Youth in kinship care are maintained in safe and permanent living situations.
- d. Youth maintain relationships with their biological parents and siblings, when possible and appropriate.
- e. Kinship caregivers report positive change in their well-being, physical and mental health, and access to social supports.



Evaluation Design:

Our evaluation design includes process and outcome components and utilizes pre-post and longitudinal strategies. We are examining the population of AKSS clients in the following ways:

- Longitudinal examination of client data captured at intake and 6 and 12 months post intake over the course of the three year grant.
- Pre and post examination of participant outcomes at intake, 6 months, and 12 months. Data will be examined as a whole and by county and/or rural/urban site. Bi-variate and regression analyses will be conducted to determine impact of program dosage and client characteristics on client outcomes. Clients with open navigation cases will be invited to participate in the full evaluation and surveying. Clients who complete the ICF and receive less service intensity will be invited to complete a follow-up satisfaction and outcomes survey, which we hope to implement in the final reporting period.

Evaluation Participants:

We have six participant unit of analyses that are engaged in this study:

1. Kinship caregiving households are the primary service recipient for this project. Caregiving households may include family members, kin, fictive kin, foster parents, or other significant adults. Caregivers may or may not have a legal relationship established with the kinship child or children in their care. These caregivers have completed an Initial Contact Form (ICF) and primarily receive information and referral services.
2. Evaluation participants are a sub-group of #1 and include kinship caregiving households for which their Navigator opened a case file and the participant completed the informed consent process and baseline survey. Typically these clients have received two or more service types and receive a greater intensity of services that the general ICF population of #1.
3. Children in kinship care, defined as infants, children, or young adults up to age 18. The project tracks up to 10 kinship children per primary caregiver.
4. Project staff members, including the Project Director, Supervisors, and Navigation staff.
5. Project Partners, including Division of Child Safety (DCS); Department of Economic Security (DES) Family Assistance Administration (FAA); DES Division of Aging and Adult Services (DAAS); Southern Arizona Legal Aid (SALA); Children's Law Center (CLC); Arizona Grandparent's Ambassadors (AGA);
6. Attendees at advocacy events hosted by the AGA.

Primary and Secondary Data Sources:

Exhibit 1 shows the list of primary and secondary data sources used in this evaluation.



Exhibit 1 Evaluation Data Sources

	Treatment Group			
	Pre-test / intake data only	Post-test data only	Pre and post-test data	Pre / post-test + other data points
Child Measures				
Permanency Child well-being, physical and mental health, access to medical care Caregiver and child interactions Child and biological family member interactions/caregiver monitoring of relationships (adapted from Vandivere et al., 2012)				X
Parent Measures				
Caregiver well-being, physical and mental health, social supports Systems-level barriers Financial resources, public assistance/TANF, services and supports Supporting child's education (adapted from Vandivere et al., 2012)				X
Family Measures				
Engagement Scale (Mowbray, Cohen et al., 1993)				X
Family Needs Scale (Cohen et al, 2003; Dunst, Trivette, & Deal, 1988)				X
Self-efficacy Scale (Chen, Gully, & Eden, 2001; Sherer et al., 1982)				X
Family Satisfaction				X
Caregiver Satisfaction Survey		X		
Community Advocacy Event Survey		X		
Demographic Data				
Initial Contact Form			X	
Secondary Data				
Child welfare data sets			X	
TANF receipt data sets			X	
Organizational / Program Measures				
Systems Activity Log			X	
Outreach Events Log			X	
Client Activity Log - Access Database			X	
Attendance Log			X	
Document Review			X	
Meeting Minutes			X	
Project Action Plans			X	
Partner Collaboration Survey (Adapted from Center for the Advancement of Collaborative Strategies in Health, 2006; Mattessich, Murray-Close, & Monsey, 2001)			X	
Partner Interviews/Focus Groups			X	



Data Collection Procedures

Data collection procedures are outlined in Exhibit 2.

Exhibit 2 Data Collection Procedures

Instrument	Target Group	Frequency	Method	Collected by
Initial Contact Form	Caregivers	Once at intake, update form as needed	In-person/telephone interview, completed on paper or in database	Navigators
Baseline Participant Survey	Caregivers with open case files	Once at case opening	In-person/telephone interview, completed on paper or online	Navigators
6 and 12 Month Follow-up Participant Survey	Caregivers with open case files	6 and 12 months post completion of baseline survey	In-person/telephone interview, completed on paper or online	LeCroy & Milligan Associates
Community Advocacy Event Survey	Event attendees	Once at event	Self-administered paper survey	Event staff
Perception of Care (satisfaction) Survey	Caregivers	Semi-Annually	Self-administered paper survey	Navigators
Client Activity Log/Attendance Log	Activity participants	At time of event	Paper sign-in sheet/ Access database	Navigators/Event staff
Systems Activity Log	Project Partners/Director/Navigators	At time of event	Excel file	Project Partners/Director/Navigators
Outreach Event Log	Project Partners/Director/Navigators	At time of event	Excel file	Project Partners/Director/Navigators
Document Review	Project Partners/Director/Navigators	Ongoing	Electronic or paper records	Project Partners/Director/Navigators
Meeting Minute Review	Project Partners/Director/Navigators	Ongoing	Electronic or paper records	Project Partners/Director/Navigators
Action Plan Review	Project Partners/Director/Navigators	Quarterly	Electronic or paper records	Project Partners/Director/Navigators
Partner Collaboration Survey	Project Partners/Director/Navigators	Annually	Self-administered paper or online survey	LeCroy & Milligan Associates
Partner Interview/Focus Group Guide	Project Partners/Director/Navigators	Annually	In-person/telephone interview, completed on paper or online	LeCroy & Milligan Associates
Cost Analysis Tracking Log	All Staff	2 Week Time Frame	Excel File	Staff



Data Analysis

Quantitative data is analyzed using the Statistical Package of the Social Sciences (SPSS 22). Analysis of quantitative data will include the following, depending on variable and sample characteristics:

- Descriptive statistics, including percentages of categorical variables and measures of central tendencies for continuous variables.
- Cross tabulation and chi square test
- A means comparison and paired samples t-test
- Analysis of Variance
- Logistic and/or linear regression
- Results will be deemed significant if the p value is .10 or less, indicating that the possibility of the relationship occurring by chance is less than 10%.
- N values will always be presented.

Qualitative data is analyzed using a content and thematic analysis, using techniques associated with qualitative research (Glesne, 2010; Patton, 2005). Key concepts are coded based on the framework of the interview questions, themes from relevant literature, and patterns that emerge from the data. Depending on the extent of data collected, analysis may be performed in Excel or manipulation of a Word document. Verification of codes and common and divergent themes is achieved through investigator triangulation and repeated review of field notes. Two researchers code qualitative data independently and determine the most important themes based on compiled responses for each question asked and overall consistent or divergent findings. We will perform a “member check” by emailing informants preliminary findings to ensure the content accurately reflected their interviews. Additional members of the evaluation team then review the findings to verify the validity of the analysis.

Reporting and Dissemination

In addition to the semi-annual reporting, we have and will continue to produce reports for project staff and partners upon request, at monthly, quarterly, and ad hoc intervals. We have also attended staff and stakeholder meetings and provided updates on evaluation activities and results. We plan on presenting evaluation findings at local, statewide and/or national conferences or events in the remainder of FY3, as client outcomes and promising practices in kinship navigation are realized. The following article was published: Treinen, J.R., Schmidt, M., & Espino, C. (2014). Arizona Kinship Support Services: A Program of Arizona’s Children Association. In G. Wallace, L. Hernandez, & J. Treinen (Eds.), *Kinship Navigators: Profiles of Fostering Connections Projects from 2012 to 2015*. Washington, DC: Child Welfare League of America Press.



PROCESS EVALUATION

1. Participant Unit(s) of Analysis

- Kinship caregiving households are the primary service recipient for this project. Caregiving households may include family members, kin, fictive kin, foster parents, or other significant adults. Caregivers may or may not have a legal relationship established with the kinship child or children in their care. These caregivers have completed an Initial Contact Form (ICF) and primarily receive information and referral services.
- Evaluation participants are a sub-group of #1 and include kinship caregiving households for which their Navigator opened a case file and the participant completed the informed consent process and baseline survey. Typically these clients have received two or more service types and receive a greater intensity of services than the general ICF population of #1.
- Children in kinship care, defined as infants, children, or young adults up to age 18. The project tracks up to 10 kinship children per primary caregiver.
- Project staff members, including the Project Director, Supervisors, and Navigation staff.
- Project Partners, including Department of Economic Security (DES) Division of Children, Youth, and Families (DCYF); DES Family Assistance Administration (FAA); DES Division of Aging and Adult Services (DAAS); Southern Arizona Legal Aid (SALA); Children's Law Center (CLC); Arizona Grandparent's Ambassadors (AGA);
- Attendees at advocacy events hosted by the AGA who complete a survey.



2. Number of Participants Served

Exhibit 3 Number of Participants Served

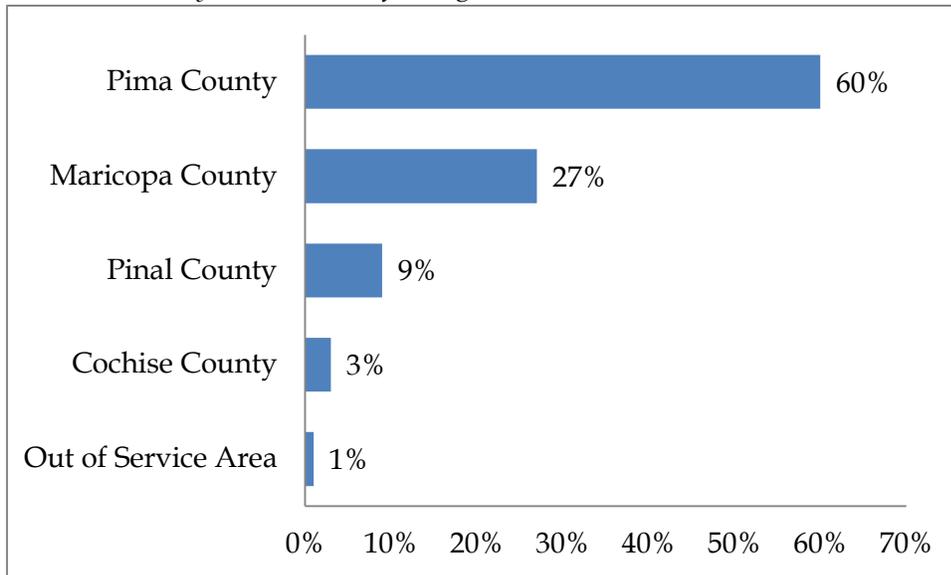
Timeframe	Participant Unit #1A Kinship Caregiving Households - ICF/Basic services and evaluation	Participant Unit #1B Kinship Caregiving Households - Intensive services, full evaluation (this count is included in 1A total)	Participant Unit #2 Children of families receiving KN-TANF services	Participant Unit #3 Agency Staff	Participant Unit #4 Project Partners	Participant Unit #5 Advocacy Event Attendees Surveyed
September 30, 2012 to September 29, 2013	1,571	21	2,418	13	7	59
September 30, 2013 to March 31, 2014	707	45	1,329	2	0	50
April 1, 2014 to September 29, 2014	915	16	1,241	2	1	0
September 30, 2014 to March 31, 2015	815	13	1,727	1	1	0
April 1, 2015 to September 29, 2015						
Total (unduplicated)	4,008	95	6,715	18	9	109

3. Demographics

The Arizona Kinship Support Services (AKSS) project served a total of 4,008 kinship caregivers across the four sites, since the start of the grant. These caregivers are caring for 6,715 kinship children. More than half of kinship families served (60%, n=2,420) reside in Pima County, the original location of the KARE Center upon which expanded services are based. Over a quarter (27%, n=1,068) of families live in Maricopa County, the site that was expanded with this grant funding. Pima and Maricopa County combined (87%, n=3,488) represent the urban counties served under this grant. The rural counties represent 12% (n=480) of all families served. A total of 9% (n=344) of clients served live in Pinal County and 3% (n=136) live in Cochise County. A very small portion of kinship families that received information and referral services only live outside of this service area (1%, n=40). Please note that throughout this report, percentages greater than 1% are rounded.



Exhibit 4 County Distribution of Caregivers



a. Adult-Level Demographics

Unless otherwise noted, N=4,008 adults, which includes participant units #1A and #1B.

Age

- Age range: 18 years to 92 years
- Average age: 50.5 years
- Median: 52 years
- Mode: 53 years
- N=3,980 (excluding 28 clients with missing date of birth data)

The majority of primary caregivers for whom demographic data was collected on the ICF are female (86%).

Exhibit 5 Gender of Caregivers

Gender	Percent	N
Female	86%	3459
Male	14%	549
Total	100%	4,008



Almost half of caregivers (48%, n=1923) identify as Hispanic/Latino ethnicity and over a third (35%, n=1416) identify as white/Caucasian. The percentages for Race/Ethnicity total over 100% because people could indicate multiple options.

Exhibit 6 Race/Ethnicity of Caregivers

Race/Ethnicity	Percent	N
Hispanic/Latino	48%	1923
White/Caucasian	35%	1416
African American/Black	9%	339
American Indian/Alaska Native	4%	174
Native Hawaiian/Pacific Islander	1%	33
Other, not specified	.4%	17
Multi-Race	.8%	31
Asian	.5%	21
Refused	.1%	3
Missing Data	3%	113
Total	100%	4,008

A total of 4% of caregivers (N=174) self-identified as Native American, of whom 157 provided a tribal affiliation. The percentages shown below, based on a total N of 123. Caregivers served by AKSS represent 33 different Native American Tribes. The three most prominent tribes are Tohono O’odham (28%, n=44), Pascua Yaqui (20%, n=32), and Navajo (13%, n=20).

Exhibit 7 Tribal Affiliation of Caregivers

Tribal Affiliation	Percent	N
Tohono O’Odham	28%	44
Pascua Yaqui	20%	32
Navajo	13%	20
Apache	4%	7
Pima	4%	7
Gila River	4%	6
Cherokee	3%	5
Hopi	3%	5
Creek Nation	1%	2
Oglala Lakota Sioux	1%	2
Pottawatomi	1%	2



Tribal Affiliation	Percent	N
Tigua	1%	2
Tohano	1%	2
White Mountain Apache	1%	2
Canada(Abenaki)	1%	1
Cheyenne River Sioux	1%	1
Dine	1%	1
Isleta del Sur Pueblo	1%	1
Kickapoo Tribe of OK	1%	1
Lakota Sioux / Navajo	1%	1
Little River Band Pomo Indians	1%	1
Marshall Islands	1%	1
Mohawk	1%	1
Ojibwa	1%	1
Pembina	1%	1
Quechan	1%	1
Rosebud Sioux (Lakota)	1%	1
S'Klallam	1%	1
Cree/kaineawa	1%	1
TimbiSha/Seneca	1%	1
Yankton Sioux	1%	1
Yavapai	1%	1
Zuni/Pueblo	1%	1
Total	100%	157



The primary language spoken by nearly three out of four caregivers is English. A total of 13% speak Spanish as their primary language and 12% classified themselves as bilingual speakers of English and Spanish.

Exhibit 8 Primary Language Spoken by Caregivers

Primary Language Spoken	Percent	N
English	73%	2949
Spanish	13%	538
Both English and Spanish	9%	378
Other: American Sign Language, Arabic, Chinese, Marshallese, Somali, Swahili, and Tagalog	.2%	10
Missing Data	3%	133
Total	100%	4008

A total of 14% (n=563) of AKSS caregivers indicated that they do not speak a secondary language (missing data n=2,946). Secondary languages spoken indicate that a person is proficient and/or fluent in the language, but it is not their primary language. Of those who provided a response to this question (n=499), 66% speak Spanish and 19% speak English as a secondary language. Given the notable percentage of Native American caregivers served, caregivers speak native languages of Tohono O'odham (2%), Marshallese (2%), Navajo (1%), and Pascua Yaqui (1%).

Exhibit 9 Secondary Language Spoken by Caregivers

Secondary Language Spoken	Percent	N
Spanish	66%	331
English	19%	96
Tohono O'odham	2%	11
Marshallese	2%	8
German	1%	7
American Sign Language	1%	5
Navajo	1%	4
Pascua Yaqui	1%	4
Other:		
Pilipino		3
Tongan		3
French		2
Korean		2



Secondary Language Spoken	Percent	N
Navajo		2
Tagalog		2
Pascua Yaqui		2
Swahili		1
Bulgarian		1
Chinese		1
Hebrew		1
Indic		1
Milanese		1
Pakistani		1
Total	100%	499

Caregivers' relationship to the kinship child or children in their care is reported as a percentage of the children served (n=6,715) because this grant collects data on up to 10 kinship children per family. Of the children in kinship care, 59% are with a grandparent, 18% are with an aunt or uncle, and 6% are with a non-relative.

Exhibit 10 Relationship of Caregiver to Child in Care

Caregiver's Relationship to Child in Care	Percent	N
Grandparent	59%	3975
Aunt/Uncle	18%	1231
Non-Relative	6%	385
Sibling/Step Sibling	3%	228
Great Grandparent	3%	196
Great Aunt/Uncle	2%	155
Cousin	2%	142
Biological Parent	1%	69
Step Parent	0.9%	58
Other (Adoptive Grandparent, In-law relative, God Parent/Fictive Kin, Other, etc.)	0.7%	51
Foster Parent	0.6%	43
Adoptive Parent	0.6%	41
Information not reported/child not yet in care	2%	141
Total	100%	6715



Likewise, caregivers' legal relationship at intake to the kinship child or children in their care is reported as a percentage of the children served (n=6,715) because this project collects data on up to 10 kinship children per family. Of the 6,715 children in kinship care, 34% of them did not have a legal relationship to the person caring for them at intake, 30% were DCS placements, and 7% had Title 14 Guardianship.

Exhibit 11 Legal Relationship to Child in Care at Intake

Legal Relationship to Child in Care (Intake)	Percent	N
None	34%	2303
DCS Placement, unlicensed	30%	1990
Title 14	7%	491
Adoption	5%	322
Licensed Foster Parent	5%	318
Power of Attorney	4%	250
Title 8	3%	182
Other	0.6%	41
Legal Custody	0.2%	16
Title 25	0.2%	13
Information not reported, child not yet in care, unknown status	12%	789
Total	100%	6715

A total of 84% (n=3,350) of caregivers had 1 to 12 kinship children living in their home at intake to the program, while 9% (n=340) did not have kinship children at home. Of those with kinship children, the average number of kinship children in care is 1.9, median and mode of 1, and range of 1 to 12 kinship children. AKSS tracks demographic information on up to 10 children in care.

Exhibit 12 Number of Kinship Children in the Household Under 18 Years of Age

Number of Kinship Children in Household <18 years	Percent	N
None	9%	340
1	42%	1683
2	22%	898
3	11%	446
4	5%	179
5	2%	89
6	.8%	32
7	.3%	14



Number of Kinship Children in Household <18 years	Percent	N
8	.1%	4
9	.1%	4
12	.0%	1
Information not reported at intake	8%	318
Total	100%	4008

Almost half of clients (49%, n=1,971) reported having a spouse or partner, while 44% (n=1,760) do not. The relationship status of 7% is unknown or not reported.

Exhibit 13 Relationship Status of Caregiver

Status	Percent	N
Spouse/Partner	49%	1971
None	44%	1760
Unknown/Not Reported	7%	277
Total	100%	4008

Data on education is only collected from clients during the participant baseline survey (N=95). Almost half (46%, n=44) of caregivers participating in the baseline survey have a high school education or less. The remaining 53% (n=50) have some college or more education. One person did not respond to this question.

Exhibit 14 Highest Level of Education Completed by Baseline Survey Respondents

Highest Level of Education	Percent	N
8th grade or less	10%	9
9th-12th grade no diploma	18%	17
High school graduate or GED	19%	18
Vocational, trade, or business program	8%	8
Some college credit but no degree	21%	20
Associate degree	16%	15
Bachelor's degree	4%	4
Master's degree	2%	2
Doctorate degree	1%	1
Not reported	1%	1
Total	100%	95



Caregiver employment data collected on the ICF shows that over a third of clients are employed full-time employed (34%, n=1374), followed by 11% (n=444) who are retired, and 10% (n=402) who work part-time. A total of 21% (n=820) are unemployed for various reasons.

Exhibit 15 Employment Status of Caregiver

Employment Status	Percent	N
Full-time 30+ hours/week	34%	1347
Retired	11%	444
Part-time <30 hours/week	10%	402
Unemployed, disabled	9%	377
Full-time caregiver	9%	367
Unemployed, looking for work	7%	291
Unemployed by choice	3%	132
Other, not specified	1%	41
Student	1%	35
Unemployed, volunteer	.5%	20
Missing	13%	1347
Refused	.1%	444
Total	100%	4008

More than half (57%, n=2287) of caregivers reported earning an annual household income of \$30,000 or less at intake. **A total of 70% (n=2,786) of caregivers have an income and family size that places them at or below 200% of the 2015 Federal Poverty Level.**

Exhibit 16 Annual Household Income of Caregiver

Annual Household Income	Percent	N
No Income	2%	93
< \$10,000	13%	505
\$10,001-\$20,000	24%	953
\$20,001-\$30,000	18%	736
\$30,001-\$40,000	11%	423
\$40,001-\$50,000	6%	254
\$50,001-\$60,000	4%	167
\$60,001-\$70,000	3%	115
\$70,001+	7%	259
Unsure	2%	69
Refused to report	11%	434
Total	100%	4008



The main benefits that AKSS kinship families reported receiving at intake are related to health insurance, various nutrition/meal programs, social security benefits, and TANF/Cash Assistance. **Regarding health insurance access, in general, 68% (n=2709) of caregivers reported having access to health insurance.**

Exhibit 17 Household Benefits Received

Benefits Received	Percent	N
AHCCCS/Medicaid	38%	1471
Free/Reduced Price Lunch	31%	1234
SNAP Nutrition Assistance	29%	1167
Social Security	14%	573
WIC	12%	472
TANF/TANF Child-only	8%	322
SSDI	6%	241
Unlicensed Foster Care Allowance	6%	239
SSI	5%	209
Foster Care Reimbursement	5%	181
Section 8/Housing Subsidy	4%	140
Veteran's Benefits	3%	120
Child Care Voucher	3%	111
Utility Assistance	2%	84
Adoption Subsidy	1%	48
DCS Subsidy	1%	46
Rental Assistance	1%	42
Head Start	1%	39
Title 8 Subsidy	.5%	19
AZ Grandparent's Stipend	.3%	12
Unemployment	.6%	8
Total	100%	4008

Almost a third (32%, n=30) of baseline survey respondents reported receiving TANF/Cash assistance. Caregivers receiving TANF heard about this resource from:

- Kinship Navigator (33%, n=10)
- DCS staff (33%, n=10)
- Friend/family word of mouth (17%, n=5)
- Other social service provider (10%, n=3)
- TANF staff (6%, n=2)
- Other government agency (.03%, n=1)



Over half of baseline survey respondents (56%, n=53) said they did not receive TANF/Cash Assistance. Reasons for not receiving TANF include:

- Over income eligibility (30%, n=16)
- Benefit capped family (21%, n=11)
- Not aware of this program (17%, n=9)
- Did not have someone to help me understand my eligibility (8%, n=4)
- Don't know (4%, n=2)
- Got discouraged/gave up (4%, n=2)
- Didn't want to require biological parent to (2%, n=1)
- Put on a wait list (2%, n=1)
- Caregiver is undocumented (2%, n=1)

It should be noted that the baseline survey is administered at intake by a Navigator. Therefore, those who were not aware of TANF or did not have someone to help them understand TANF were provided that information at the time of the baseline survey.

Housing data is collected only from respondents to the baseline survey. Nearly 60% (n=55) rent their apartment or house and 30% (n=28) own their own home.

Exhibit 18 Housing of Baseline Survey Respondents

Housing	Percent	N
Rent an apartment or house	58%	55
Own a house	30%	28
Live in a house or apartment owned by another family member	6%	6
Live with family or friends who rent, but caregiver does not contribute to rent	2%	2
Live in a shelter	2%	2
Not reported	2%	2
Total	100%	95



b. Child-Level Demographics

(N=6715)

Age

- Age range: < 1 year to 26 years of age
- Average age: 8.9 years
- Median age: 9 years
- Mode age: 7 years
- N=6451
- Missing data n=264

Kinship children are nearly split 50%/50% for males and females.

Exhibit 19 Gender of Kinship Children

Gender	Percent	N
Male	50.3%	3375
Female	49.7%	3339
Missing Data	0.0%	1
Total	100%	6715

The percentages for Race/Ethnicity do not total 100% because people could select all that apply. Similar to caregiver data, 44% (n=2950) of caregivers identified their kinship children as Hispanic/Latino ethnicity and a quarter identified them as white/Caucasian.

Exhibit 20 Race/Ethnicity of Kinship Children

Race/Ethnicity	Percent	N
Hispanic/Latino	44%	2950
White/Caucasian	25%	1645
African American/Black	8%	560
American Indian/Alaska Native	6%	416
Mixed Race	5%	314
Native Hawaiian/Pacific Islander	1%	54
Asian	.3%	23
Other, not specified	.4%	26
Refused	.1%	8
Not Reported/Missing Data	17%	1110
Total	100%	6715



A total of 6% of kinship children were identified by their caregiver as of American Indian/Alaska Native decent. These children represent **over 40 different Native American Tribes**. The three most prominent tribes are Tohono O’odham (33%, n=123), Pascua Yaqui (17%, n=63), and Navajo (15%, 56).

Exhibit 21 Race/Ethnicity of Kinship Children

Tribe	Percent	N
Tohono O'odham	33%	123
Pascua Yaqui	17%	63
Navajo	15%	56
Pima	6%	22
Gila River	5%	19
Hopi	3%	12
Choctaw	2%	9
Apache	2%	8
Lakota Sioux/Navajo	1%	5
Rosebud Sioux (Lakota)	1%	4
Creek Nation	1%	3
Eskimo	1%	3
Mohawk	1%	3
Quechan	1%	5
White Mountain Apache	1%	3
Cherokee	1%	2
Gila River/Omaha	1%	2
Isleta del Sur Pueblo	1%	2
Omaha	1%	2
Potawatomie	1%	2
Samish Indian	1%	2
Shoshoni	1%	2
Sioux	1%	2
Apache/Navajo	0%	1
Chippewa	0%	1
Hoa Indian -Ohio	0%	1
Iroquois-Seneca	0%	2
Lakota	0%	1
Marshallese	0%	1
Oglala Lakota Sioux	0%	1
Ojibwa	0%	1
Onita (Wisconsin)	0%	1
Pembina	0%	1
Pottawatomie & Ogallala Sioux	0%	1
Salt River	0%	1



Tribe	Percent	N
San Carlos Apache	0%	1
Samoa	0%	1
Yankton Sioux	0%	1
Total	100%	371

The population of kinship families with current DCS involvement (including those with both previous and current involvement) **increased from 38% in FY2 to 44% (N=2,939) for this current reporting period.** This increase is potentially due to the data sharing and outreach protocol set forth at the end of FY2 between DCS and Navigators.

Exhibit 22 DCS Involvement Status

DCS Involvement	Percent	N
Current only (formal)	39%	2626
Both previous and current (formal)	5%	313
Previous involvement only (informal)	17%	1117
DCS never involved (informal)	23%	1565
Unsure	2%	125
Missing Data	14%	969
Total	100%	6715

The primary reasons (reported by 10% or more) why biological parents are not the primary caregivers of children in kinship care include: DCS removal, drug and alcohol abuse, one or both parents uninvolved, incarceration, domestic violence, immigration/deportation of parents, and housing issues. Percentages do not total to 100% because caregivers could select all the options that apply to the children in their care.

Exhibit 23 Reasons why Parent is Not Primary Caregiver

Reasons	Percent	N
DCS Removal	45%	3007
Drugs/alcohol abuse	36%	2417
One or both parents are uninvolved	17%	1130
One or both parents incarcerated	13%	873
Domestic violence	12%	800
Immigration/deportation	10%	700
Housing issues	10%	657
Parent's mental health issues	8%	561



Reasons	Percent	N
One or both parents are deceased	8%	531
Abuse/neglect	8%	525
Parent's health issues	7%	495
Financial issues	7%	468
Other reasons:		
School location		
Parents out of state/country		
Legal problems		
Parent's choice		
Young parents		
Child's choice		
Cultural practice		
Bad familial relationship		
Divorce of parents		
Other primary caregiver is deceased		

Almost a third (31%) of kinship children have been in the care of their caregiver for more than one year; whereas, 28% have been in kinship care for six months or less. Data on the number of years in kinship care includes:

- Range of years: 1 year to 18 years
- Average years: 5.2 years
- Median years: 4 years
- Mode years: 2 years
- N=2234

Exhibit 24 Length of Time in Kinship Care

Length of Time	Percent	N
< 1 Month	12.6%	849
1-6 Months	27.6%	1852
7-12 Months	7.2%	483
More than 12 Months	31.0%	2081
Not applicable, not in care	3.2%	214
Unsure	0.6%	40
Missing Data	17.8%	1196
Total	100%	6715



A small portion of the children in kinship care have special education or chronic medical needs. Three quarters of children have access to health insurance.

Exhibit 25 Special Education, Chronic Medical Issues, and Access to Health Insurance

Health	Percent	N
Special Education Status	11%	709
Chronic Medical Issues	19%	1248
Access to Health Insurance	75%	5036

A total of 59% of kinship children are enrolled in school, while 29% are not, and 10% of caregivers did not report this information. The grades of children enrolled in school ranges from kindergarten to 12th grade.

Exhibit 26 School Enrollment Status

Status	Percent	N
Yes	58.8%	3950
No	29.1%	1955
Unsure	0.6%	37
Not Applicable	1.8%	121
Not Reported	9.7%	652
Total	100%	6715

Exhibit 27 Grade of Child at Initial Contact

Grade	Percent	N
Preschool	3.4%	226
Kindergarten	5.9%	395
1	6.2%	415
2	5.8%	392
3	5.6%	375
4	5.1%	346
5	4.5%	302
6	4.6%	303
7	4.9%	329
8	4.6%	314
9	4.6%	307
10	3.9%	259



Grade	Percent	N
11	2.4%	166
12	1.3%	84
Other (College, Vocational/Technical School, Other, etc.)	0.1%	8
Not Reported	19.9%	1333
Unsure	1.2%	80
NA, not in school	16.0%	1080
Total	100%	6715



4. Key Services Provided to Participants

A total of 766 client completed an ICF with a Navigator during the past six months and 1,222 received a total of 3,176 basic navigation services through in person (office or home visit), email, or telephone communication with a Navigator.

In this past six months, the most common service areas provided to clients include: legal services (n=167); support groups (n=163); Kinship Information Session (n=137); CIP programming (n=60 adults, 59 youth, and 33 teens); guardianship and adoption training (n=42); and KARE College (n=26). Kinship Information Sessions had a 73% increase in attendance from 79 in the past six month reporting period to 137 in the current reporting period, due to the addition of sessions held in Maricopa County.

Exhibit 28 Key Services Provided to Participants

Service	Intended Service Recipient	9/30/12 to 9/29/13			9/30/2013-3/31/2014			4/1/2014-9/29/2014			9/30/2014-3/31/2015		
		Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided	Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided	Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided	Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided
KARE College	Caregivers	77	77	27	43	38	8	60	56	6	29	26	6
Pre-Employment	Youth <15	-	-	-	98	19	11	142	18	21	89	11	10
Support/ Support Education Groups	Caregivers	1032	211	175	560	145	95	536	159	60	549	163	94
Special Events	All	100	99	11	117	116	5	298	264	3	191	168	8
Focus Groups with Kinship Caregivers	Caregivers	17	11	5	-	-	-	-	-	-	12	12	2



Service	Intended Service Recipient	9/30/12 to 9/29/13			9/30/2013-3/31/2014			4/1/2014-9/29/2014			9/30/2014-3/31/2015		
		Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided	Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided	Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided	Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided
Advocacy Events	All	65	65	4	50	50	1	0	0	0	12	12	5
Information and Resource Referrals	Caregivers	2318	1593	1593	1552	776	776	908	908	908	766	766	766
Navigation Services (other than initial information and referral)	Caregivers	2318	1593	1593	1713	489	213	2552	922	2299	3176	1222	2888
Legal Services													
Guardianship Clinic	Informal Caregivers	296	282	60	156	141	32	212	212	25	168	167	33
Legal Clinic	Caregivers	65	62	14	38	37	6	-	-	-	-	-	-
Services for Formal Kinship Families													
Guardianship and Adoption Training	Formal Caregivers	56	53	14	46	46	6	50	50	7	42	42	7
Kinship Information Session	Formal Caregivers	57	56	12	49	49	11	83	79	9	138	137	16
PS-MAPP	Formal Caregivers	428	66	40	129	19	20	127	31	22	16	14	3
Children of Incarcerated Parents programs*													
CIP Adult Group	Caregivers	222	35	24	101	37	13	155	48	11	120	60	15
CIP Prison Visitation Program	Families affected by parental incarceration	19	7	10	6	4	2	5	4	4	29	18	6



Service	Intended Service Recipient	9/30/12 to 9/29/13			9/30/2013-3/31/2014			4/1/2014-9/29/2014			9/30/2014-3/31/2015		
		Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided	Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided	Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided	Total # Attended (Dup.)	Total # Receiving Services (Undup.)	Total # of Times Service Was Provided
CIP Youth Group	Youth affected by parental incarceration	106	24	21	34	13	11	69	26	10	113	59	12
CIP Teen Group	Teens affected by parental incarceration	85	12	18	34	9	11	18	7	8	59	33	13

* Evidence based or promising practice



5. Additional Outputs

a. Outreach Activities

Please see the Excel file “Outreach and Systems Activity Log” for more detailed information on events.

Exhibit 29 Outreach Activities of Arizona Kinship Support Services

Outreach Activity	9/30/12 to 9/29/13			9/30/13 to 3/31/14			4/1/14 to 9/29/14			9/30/14 to 3/31/15			TOTAL to Date		
	# Held	# of attendees	# of Handouts Distributed	# Held	# of attendees	# of Handouts Distributed	# Held	# of attendees	# of Handouts Distributed	# Held	# of attendees	# of Handouts Distributed	# Held	# of attendees	# of Handouts Distributed
Education, Health and Resource Fairs	10	3180	1080	9	5480	1390	15	2541	1341	1503	995	39	1537	12196	3850
Special Events	4	1150	465	9	4297	2196	12	4617	1238	150	400	3	175	10464	3902
Conferences	2	450	90	8	2151	1450	5	1150	205	410	160	23	425	3911	1768
Community Organizations	0	0	0	12	56	555	4	0	60	1488	813	30.5	1504	869	645.5
Medical Services	0	0	0	3	0	150	3	0	50	0	0	0	6	0	200
Organizational Meetings	0	0	0	14	415	460	5	180	130	2430	1155	45.25	2449	1750	635.25
School Event	0	0	0	5	565	550	3	471	215	1	50	1	9	1086	766



b. Families linked to other social services

Exhibit 30. Referrals to Other Social Services

Referred Service	9/30/12 to 9/29/13	9/30/13 to 3/31/14	4/1/14 to 9/29/14	9/30/14 to 3/31/15	4/1/15 to 9/29/15	TOTAL to Date
Total Families Referred	1561	768	903	766		3,998
Legal Services (includes, referral to SALA, CLC, or private attorney, Title 14 Guardianship Clinic, Title 14 packet only, and Legal Clinic)	128	145	212	167		652
Title 8 Guardianship and Adoption Services	224	114	27	42		407
DES/FAA/TANF	46	87	97	36		266
Basic Needs (Includes WIC, food bank, clothing, diapers, housing support, and utility/rental assistance)	92	83	103	149		427
Services for Formal Families (includes referrals to Foster Care Licensing Agencies, PS-MAPP, KIS)	94	75	106	137		412
Health Care/Health Services for Adult and Child	73	20	29	8		130
AGA Summit/Advocacy	3	9	6	12		30
Respite, Child Care, Recreation, and Socialization	30	7	7	8		52
Casey Family Services	3	5	7	0		15
Caregiver Resource Line/Senior Aging Services	2	4	7	0		13
Caregiver Education	6	2	2	4		14
Education System for Child	3	0	1	4		8



c. Analytic Data on Arizona Kinship Support Services Website

In the past six months, utilization of the AKSS website has increased, compared to the previous six month reporting period. The AKSS website had an average of 460 unique visitors per month, an increase from 411 in the last six month reporting period. The website also had an average of 1,334 page views per month, an increase from 1,221 in the last reporting period. Visitors viewed the site for an average of about 2 minutes and 35 seconds, which is down from an average of 3 minutes reported in the last six months. The average percentage of new visitors is 78%, an increase from 74% in the previous reporting period, and returning visitors is 23%, a decrease from 26% in the previous reporting period.

Exhibit 31. Arizona Kinship Support Systems Website Analytics

Month and Year	Average Visit Duration	# of Unique Visitors	# of Page Views	% Returning Visitor	% New Visitor
August 2013	3:27	52	302	16%	84%
September 2013	1:42	3,707	13,534	19%	81%
October 2013	2:04	838	4,488	41%	59%
November 2013	2:16	792	2,625	50%	50%
December 2013	1:41	780	2,473	47%	53%
January 2014	2:29	582	2,241	40%	60%
February 2014	3:07	220	1,169	37%	66%
March 2014	2:40	300	949	28%	72%
April 2014	2:57	356	1100	32%	68%
May 2014	3:04	349	1045	26%	74%
June 2014	3:32	413	1396	24%	77%
July 2014	2:37	419	1165	24%	76%
August 2014	2:38	455	1276	30%	71%
September 2014	3:03	474	1347	23%	77%
October 2014	2:36	418	1245	18%	82%
November 2014	2:52	451	1320	22%	78%
December 2014	2:21	465	1262	26%	74%
January 2015	2:34	528	1545	27%	73%
February 2015	2:52	465	1383	21%	79%
March 2015	2:20	430	1251	21%	79%

d. Number of times other agencies contacted project staff regarding kinship families

This project is not tracking contacts from other agency staff.



e. Calls to Caregiver Resource Line toll free phone number

The kinship caregiver direct referral system through the DAAS’s Caregiver Resource Line (CRL) toll free phone number officially started in September 2013. Grant partners provided training to volunteer call staff on kinship caregiver issues in September and in early FY2. Exhibit 32 presents the number of calls from kinship caregivers that were referred to Navigators from September 2013 through the end of this reporting period. **During this current six month reporting period, the CRL received a total of 116 calls from kinship caregivers, for an average of 19 calls per month.** The overall total number of calls from kinship caregivers to the CRL since the start of the grant is 550, with an average of 29 calls per month.

Exhibit 32. Number of Calls Received by Navigators from the Caregiver Resource Line

9/1/2013 through 3/31/2014

	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14
Total calls from Kinship Caregivers, referred to Navigators	117	41	23	21	33	28	15

4/1/2014 through 9/29/2014

	Apr-14	May-14	Jun-14	July-14	Aug-14	Sept-14
Total calls from Kinship Caregivers, referred to Navigators	27	33	3	32	38	23

10/1/2014 through 3/31/2015

	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Total calls from Kinship Caregivers, referred to Navigators	33	26	29	16	5	7



6. Fidelity

a. List of fidelity instruments or data sources (e.g., interview protocol; checklist of tasks completed)

The attached Excel file, "Description of Kinship Support Services," served as our fidelity measure to ensure that services were replicated across sites. Necessary local modification, especially for rural areas are documented.

b. Timeframe for conducting fidelity (i.e., how often are you conducting fidelity assessments, and at what point in the case are you conducting these assessments)

Fidelity has been assessed by updating the Description of Kinship Support Services file every six months.

c. # of fidelity assessments conducted by instrument

Fidelity has been assessed by updating the Description of Kinship Support Services file every six months.

d. Average score by instrument, if applicable

Not applicable

e. Describe fidelity results

We have successfully replicated urban services between Pima County and Maricopa County. However service utilization continues to be lower than expected in Maricopa County, given the population base in Maricopa County. Modifications have been made in the rural counties to successfully replicate applicable services on an individual basis.

f. Describe identified barriers to fidelity

In rural areas, geographically dispersed clientele doesn't allow for services to be held in a class format in a specific population center. The KARE Center in Tucson has a long-standing relationship in Pima County that the other counties are developing. This barrier resulted in the delayed start-up of Kinship Information Sessions and Adoption and Guardianship Training in Maricopa County.

g. Describe strategies developed to address fidelity barriers

Services provided to rural areas are modified to meet the needs of geographically dispersed clientele. Services are provided individually, in-home and on-site; groups are held in multiple communities across the county. Vans were utilized as mobile offices.

We will continue to address the issue of service utilization in Maricopa County as one of scale and not fidelity to the intended model.



7. Cost Study

Cost study goals: We have performed a Cost Allocation Analysis of AKSS, which is the systematic collection, categorization, and analysis of service delivery costs. The goal of our cost study is to identify the cost of personnel and resources necessary to implement this project in both a rural and urban location. We are seeking to answer these primary questions:

- What is the percentage distribution of **staff time** by **position type**?
- What are the total **direct costs** to provide Navigation services in a rural location, urban location, and in total?
- What are the total **indirect costs** to provide Navigation services in a rural location, urban location, and in total?
- What is the **average cost per kinship caregiver household** for Navigation services in a rural location, urban location, and in total?

Data Collection:

Have you started to collect data for the cost study? Yes No

Please describe any challenges you have experienced collecting cost study data and how these challenges have been addressed.

The primary challenge experienced in cost study data collection was developing the instrument to adequately capture categories that are mutually exclusive. Once the tool was developed and piloted, and staff were trained, we experienced minimal issues with data collection.

Methods: Fourteen staff persons collected data for a two-week time frame of their choice (consecutive or non-consecutive), beginning on 1/26/2015 and ending 3/31/2015 (see Exhibit 33 for the cost study data collection schedule). Staff were provided a cost study time log using an Excel spreadsheet (see Exhibit 34 for a sample of the data collection log). This time log contains four tabs, including instructions for completed this tool; a sample activity log completed during the pilot test; and two blank activity logs for documenting weeks one and two. In the blank Activity Logs, staff were instructed to record their hours spent per day for each category, in no less than 15 minute increments. Staff used decimals to represent time that was less than a full hour (e.g., .25 = 15 minutes or .5 = 30 minutes). If an activity involved driving, staff included the driving time in the number of hours logged for that activity. Next to each daily column is a “notes” column and staff were asked to write a brief description in this column to help clarify tasks or specify “other” activities performed.



Variables: Exhibit 34 shows the variables collected for this cost study within a sample data collection log. Variables fall into four larger categories: (1) direct service activities; (2) indirect service activities; (3) administrative activities for service delivery; and (4) administrative activities for project management.

Analysis:

- What is your timeline for analyzing cost study data?
- When will you begin analyzing data?
- Who will primarily be responsible for cost study data analysis (provide name and role/title)?

Preliminary cost study analysis of staff time distribution by position is presented in this report. The evaluation team at LeCroy & Milligan Associates will work with the Project Director to determine cost of staff time using figures from the budget in the second half of FY3. This data will be presented in the final report. Preliminary results are show in Exhibits 35a-35g.



Exhibit 33. Cost Study Data Collection Schedule

Start Date	End Date	Project Director	Project Coordinator	Office Manager	Nav.	Project Support	Intern	Intern	Total Staff per Week						
1/26/2015	1/30/2015	x													1
2/2/2015	2/6/2015	x				x					x			x	4
2/9/2015	2/13/2015					x	x	x	x		x			x	6
2/16/2015	2/20/2015						x	x	x				x		4
2/23/2015	2/27/2015			x											1
3/2/2015	3/6/2015			x						x					2
3/9/2015	3/13/2015		x		x					x					3
3/16/2015	3/20/2015		x		x							x			3
3/23/2015	3/27/2015											x			1
Total Number of Tracking Weeks = 25		2	2	2	2	2	2	2	2	2	2	2	1	2	



Exhibit 34. Cost Study Variables Collected and Sample Data Collection Log

Staff Name:	Start Date:		End Date:												
	3/2/2015	through	3/8/2015												
ACTIVITY LIST	TOTAL	3/2/2015		3/3/2015		3/4/2015		3/5/2015		3/6/2015		3/7/2015		3/8/2015	
		Monday		Tuesday		Wed		Thursday		Friday		Saturday		Sunday	
		Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes
Direct Service Activities (performed with caregiver)															
Navigation Service: ICF Completion (includes I&R)	-														
Navigation Service: phone call or office visit (includes I&R)	-														
Navigation Service: home visit	-														
Case file opening/ 90-day review	-														
Complete baseline survey	-														
Attend a service with client (ex. CFT, court, etc.)	-														
Facilitate educational workshop or class (ex. KIS, KARE College)	-														
Facilitate a support group	-														
Facilitate CIP programming (adult, youth, and teens)	-														
Special event (e.g., holiday, family event, etc.)	-														
Other direct activities (specify in notes column)	-														
Total Direct Service	-														



Staff Name:	Start Date:		End Date:												
	3/2/2015	through	3/8/2015												
ACTIVITY LIST	TOTAL	3/2/2015		3/3/2015		3/4/2015		3/5/2015		3/6/2015		3/7/2015		3/8/2015	
		Monday		Tuesday		Wed		Thursday		Friday		Saturday		Sunday	
		Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes
Indirect Service Activities (performed without caregiver present, but on their behalf)															
Documentation/complete written materials (e.g. case notes)	-														
Research and prepare information on caregiver's case, pick up/drop off material needs	-														
Collaborate with external providers in relation to a caregiver (e.g. phone call, meeting)	-														
Consult with internal staff about case (e.g. staffing)	-														
Other indirect activities (specify in notes column)	-														
Total Indirect Service	-														
Administrative Activities: Service Delivery (activities related to implementing direct services)															
Attend an internal team/staff meeting	-														
Attend a grant partner meeting (with SALA, CLC, DCS, FAA, etc.)	-														
Attend a community partner meeting (e.g., board, alliance, coalitions)	-														



Staff Name:	Start Date:		End Date:												
Staff Position:	3/2/2015	through	3/8/2015												
ACTIVITY LIST	TOTAL	3/2/2015		3/3/2015		3/4/2015		3/5/2015		3/6/2015		3/7/2015		3/8/2015	
		Monday		Tuesday		Wed		Thursday		Friday		Saturday		Sunday	
		Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes
Attend a community event	-														
Attend training or professional development	-														
Provide training or mentoring to co-workers/interns	-														
Provide training to grant partners (e.g., SALA, CLC, DCS, FAA, etc.)	-														
Prepare for outreach, marketing, presentation, event or activities/debrief, clean-up	-														
Develop website content	-														
Conduct chart reviews	-														
Intake Day	-														
Other administrative activities (specify in notes column)	-														
Total Administrative Activities: Service Delivery	-														



Staff Name:	Start Date:		End Date:												
Staff Position:	3/2/2015	through	3/8/2015												
ACTIVITY LIST	TOTAL	3/2/2015		3/3/2015		3/4/2015		3/5/2015		3/6/2015		3/7/2015		3/8/2015	
		Monday		Tuesday		Wed		Thursday		Friday		Saturday		Sunday	
		Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes
Administrative Activities: Project Management (activities related to managing the project)															
Communicate with internal staff about project administration/prepare for or attend meetings that focus on administrative functions or program operations	-														
Communicate with external partners about project administration/prepare for or attend meetings that focus on administrative functions or program operations	-														
Enter data into Access database	-														
Receive supervision	-														
Supervise staff	-														
Attend training on agency policies, operations, and procedures/review policies	-														
Prepare reports or other grant-related materials	-														



Staff Name:	Start Date:		End Date:												
Staff Position:	3/2/2015	through	3/8/2015												
ACTIVITY LIST	TOTAL	3/2/2015		3/3/2015		3/4/2015		3/5/2015		3/6/2015		3/7/2015		3/8/2015	
		Monday		Tuesday		Wed		Thursday		Friday		Saturday		Sunday	
		Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes	Hours	Notes
Vacation or sick leave	-														
Holiday	-														
Documentation of schedule, hours log, etc.	-														
Other administrative activities (specify in notes column)	-														
Total Administrative Activities: Project Management	-														
GRAND TOTAL	-	-		-		-		-		-		-		-	

Preliminary Results:

Exhibits 35a-35g show the percentage of time allocation by staff position for all time categories collected and the four main categories. Color Key:

Direct Service Activities (performed with caregiver)
Indirect Service Activities (performed without caregiver present, but on their behalf)
Administrative Activities: Service Delivery (activities related to implementing direct services)
Administrative Activities: Project Management (activities related to managing the project)



Exhibit 35a. Navigator Time Allocation Chart (n=6)

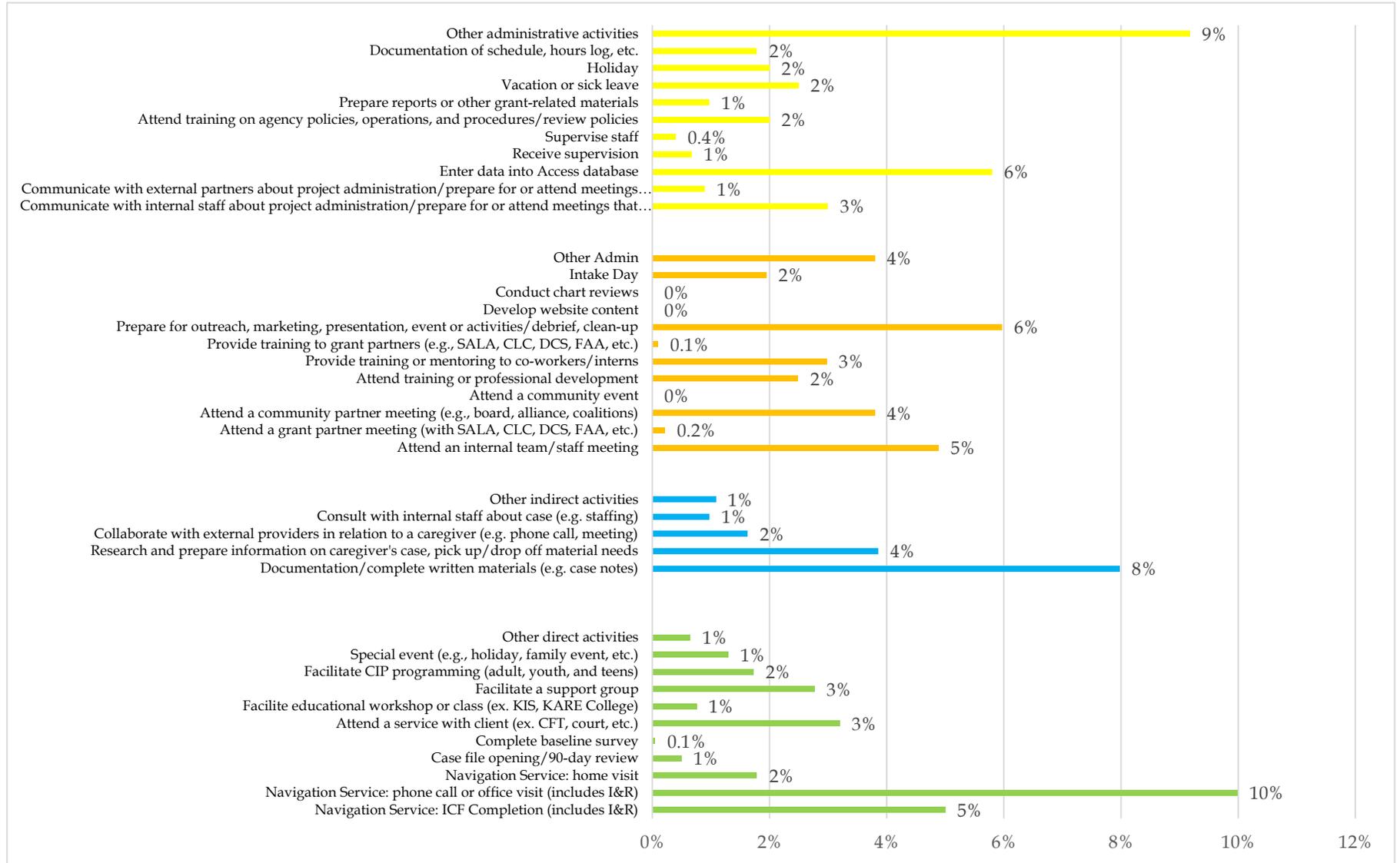
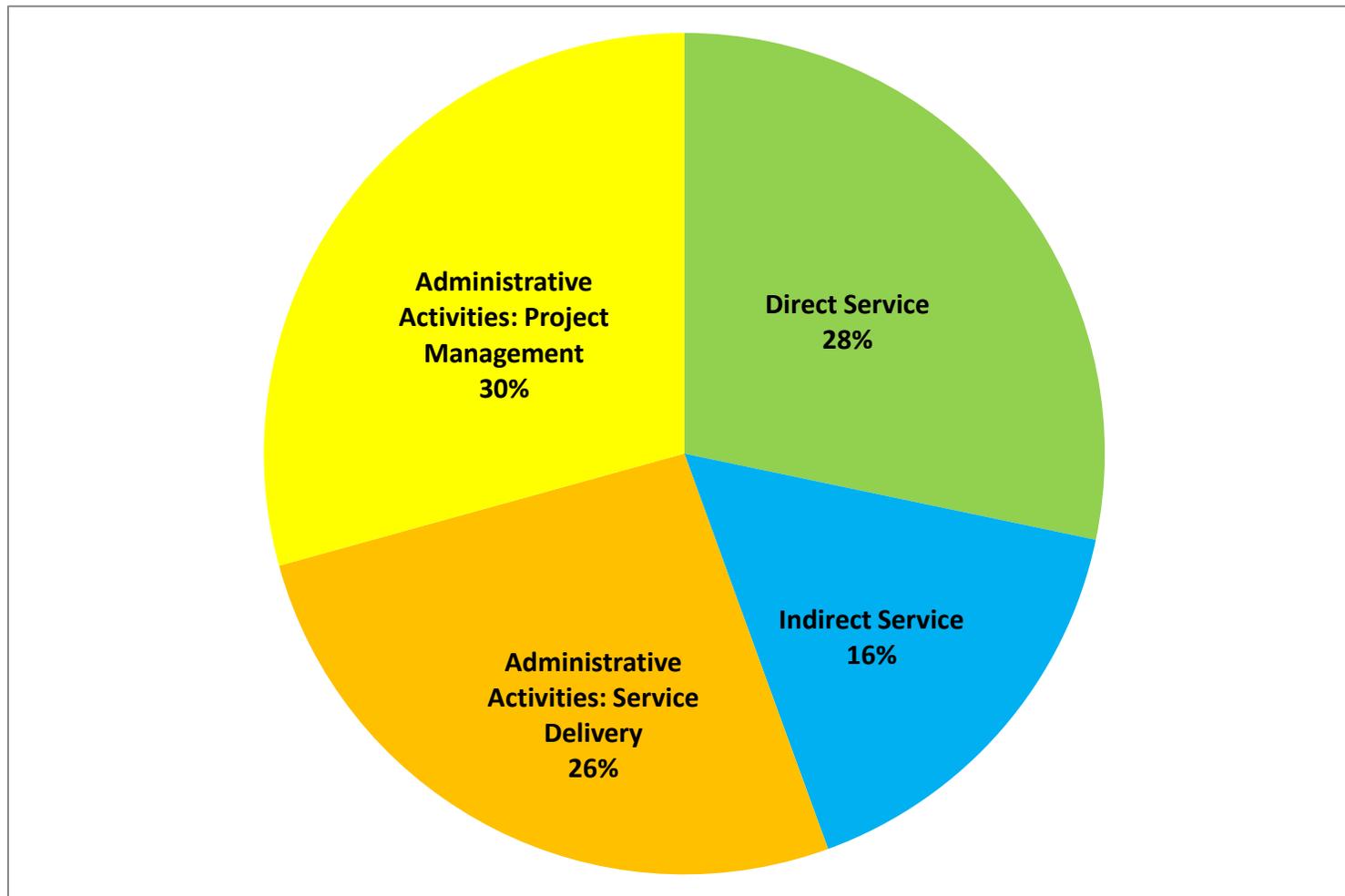


Exhibit 35b. Navigator Time Allocation Chart, Major Categories



N=6



Exhibit 35c. Project Director Time Allocation Chart (N=1)

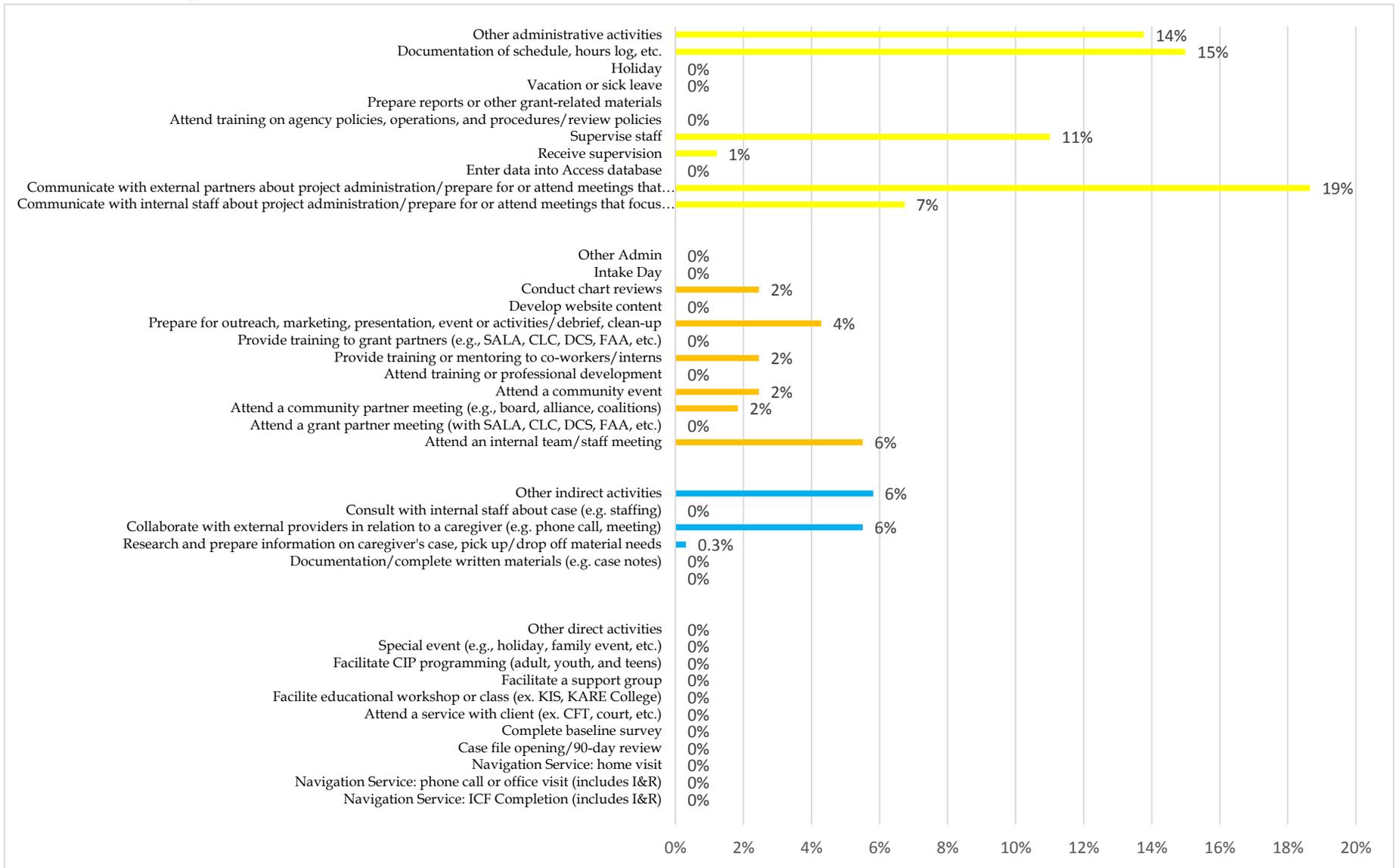
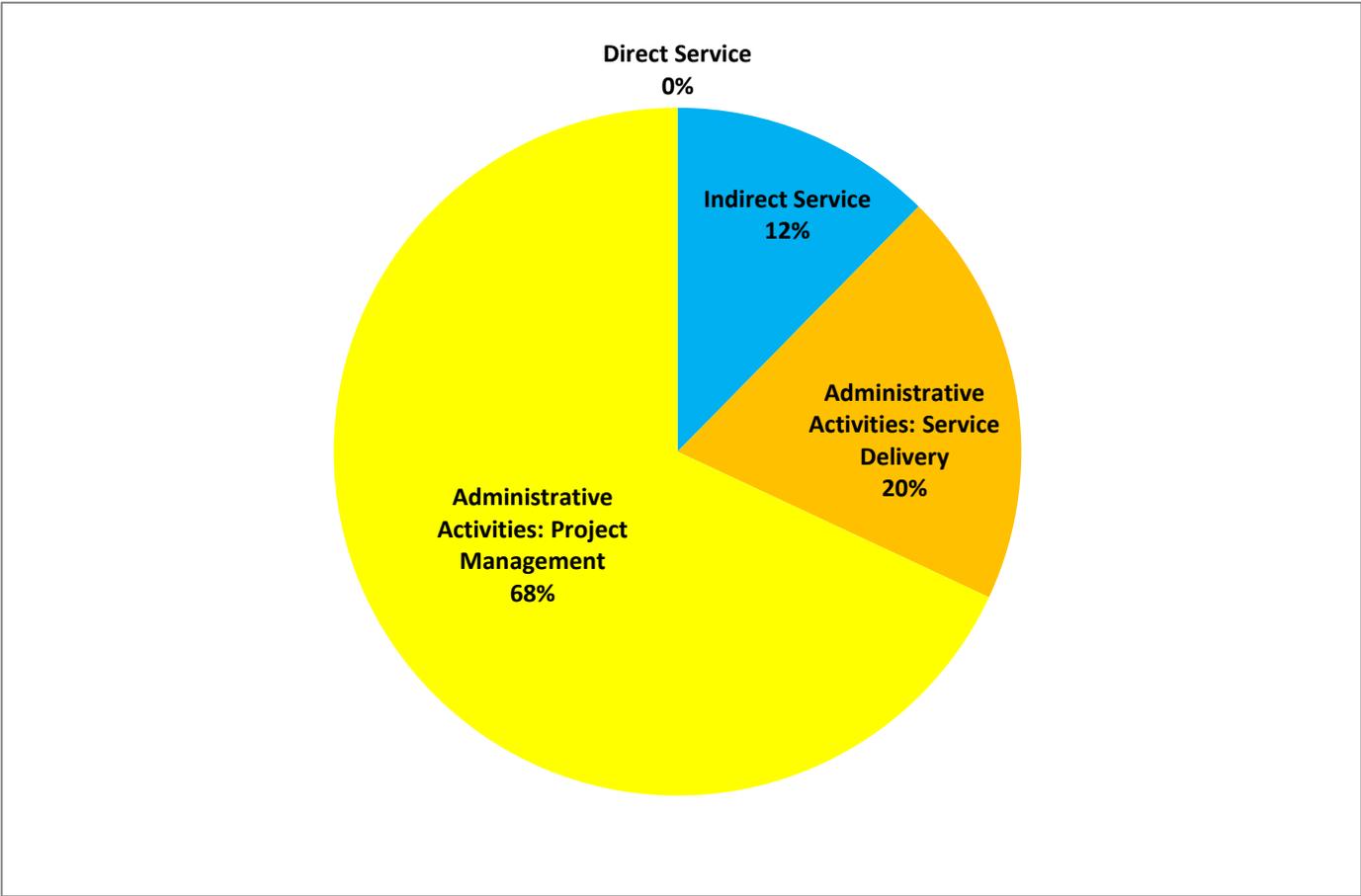


Exhibit 35d. Project Director Time Allocation Chart, Major Categories



N=1



Exhibit 35e. Intern Time Allocation Charts (N=2)

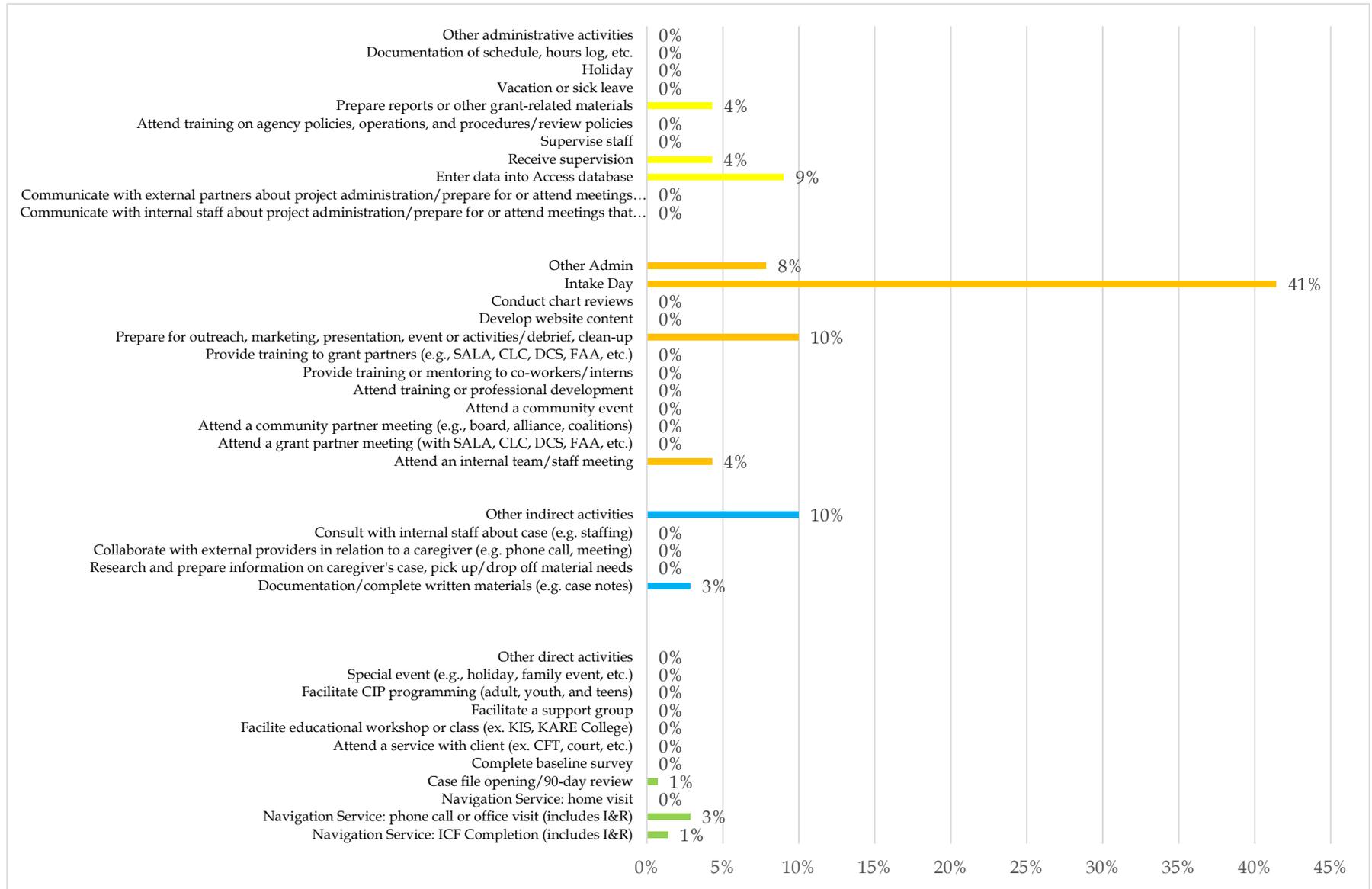
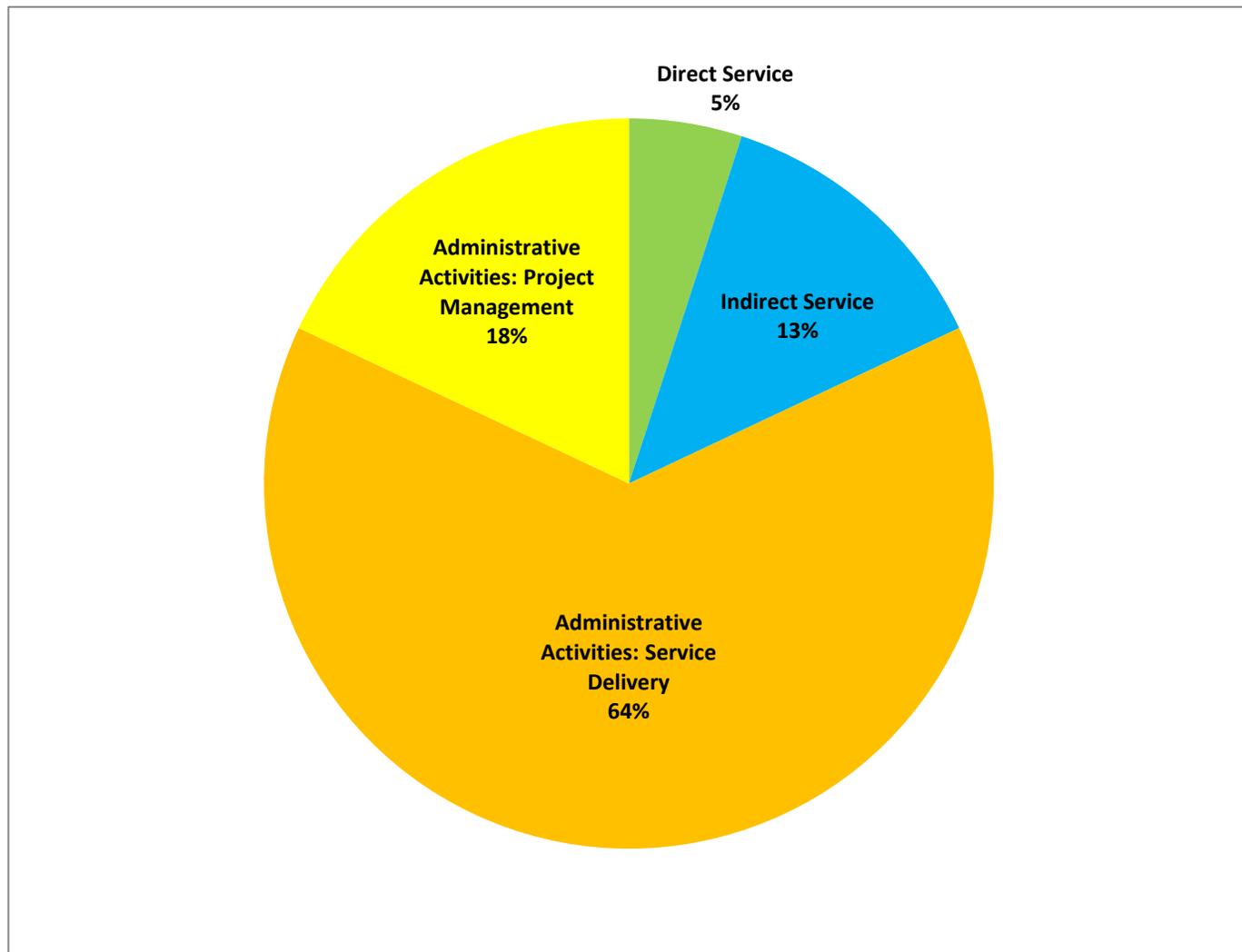


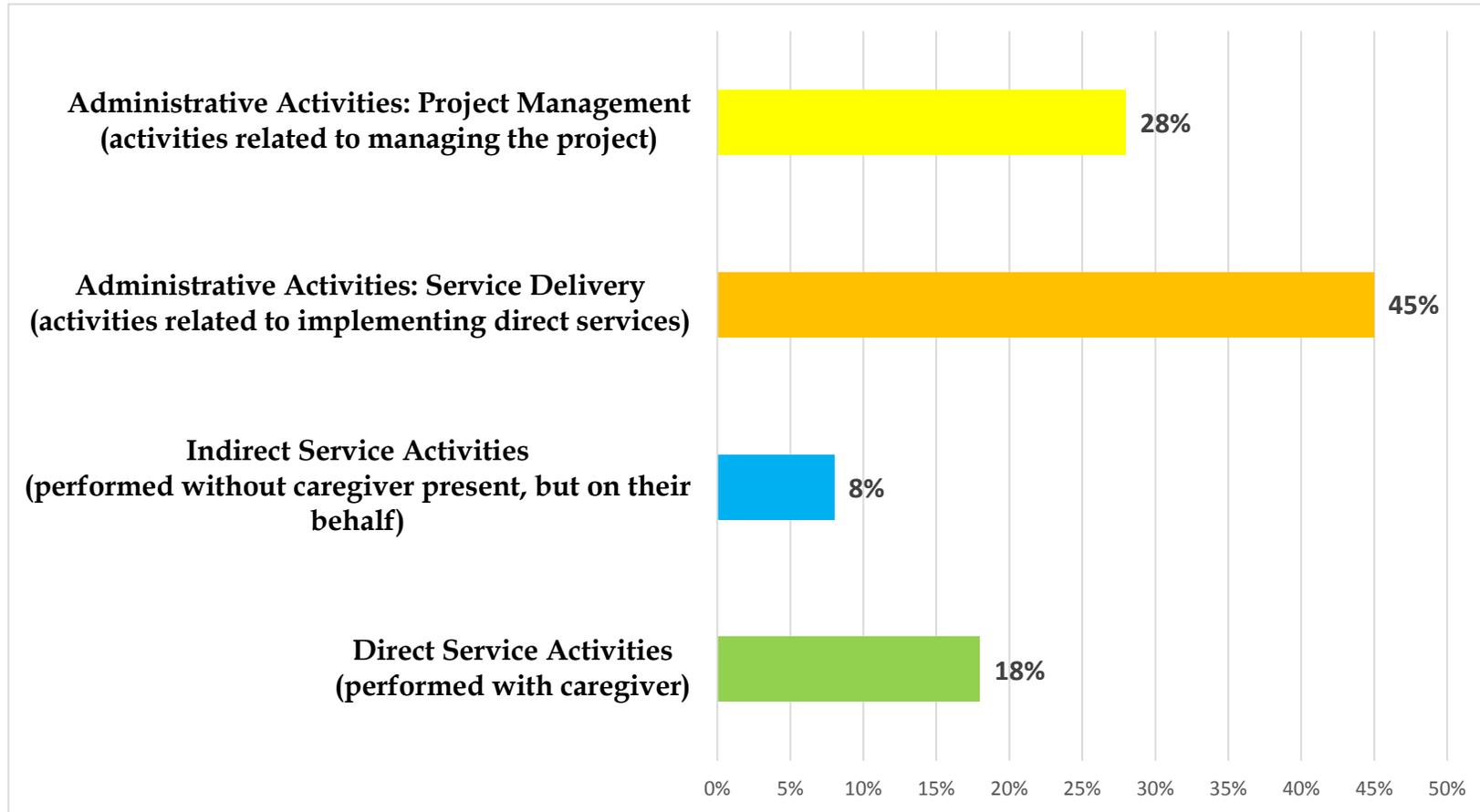
Exhibit 35f. Intern Time Allocation Chart, Major Categories



N=2



Exhibit 35g. Overall Time Allocation, Major Categories, All Staff Combined



(N=11) Includes: 6 Navigators, 1 Project Director, 2 Interns, 1 Office Manager (100% Administrative Activities/Service Delivery), and 1 Program Support Staff (14% Direct Service, 12% Administrative Activities/Service Delivery, 21% Administrative Activities/Project Management).



OUTCOME EVALUATION

Treatment Group Data

See Exhibit 1, Evaluation Data Sources, for intervals of data collection.

- a. Pre-test / intake data only
- b. Post-test data only
- c. Pre and post-test data
- d. Pre and post-test data, along with data at other intervals

Comparison Group Data

Not applicable

Organizational / Program Data

See Exhibit 1, Evaluation Data Sources, for data sources. See the attached Outreach and Systems Activities Log (Excel File) for a compilation of outreach and systems level data collected during this reporting period. See also the Description of Kinship Support Services (Excel File).

Results

Exhibit 36 presents the outcome measures for our project, as are measured by the instruments presented in Exhibit 1 in this report. The following narrative describes the preliminary findings for our outcome measures.

Exhibit 36. Outcome Measures

	Arizona's Children Association
Child Outcomes	
Children safely maintained in their homes	X
Families can meet their children's needs	X
Permanency and stability improve	X
Family/Caregiver Outcomes	
Access to community support systems	X
Access to needed legal services	X
Continuity of family relationships improves	X
Decreased family stress	X
Families are stronger	X
Organizational/Systems Outcomes	
Enhanced interagency coordination and responses for kinship families	X



a. Key Baseline and Follow-up Survey Results

A total of 95 Baseline surveys have been completed, which is a 78% response rate of the 122 navigation cases that have been opened since the start of the grant (as of this reporting period, 48 cases are closed and 74 cases remain open). The baseline survey data collection was closed on March 31, 2015, to allow for up to six months of follow-up data collection. A total of 44 follow-up surveys have been completed, 31 completed one survey and 13 completed an additional follow-up survey. Data from the 31 individuals (using the most recent survey data for those who completed two follow-up surveys) is presented in this section.

Outcomes Addressed:

- Children safely maintained in their homes
- Families can meet their children’s needs
- Permanency and stability improve
- Access to community support systems
- Access to needed legal services
- Continuity of family relationships improves
- Decreased family stress
- Families are stronger

Barriers to Formal and Informal Processes, Baseline Survey

The majority of caregivers surveyed did not face barriers in the process of seeking custody, guardianship, licensure, or adoption of the children in their care, or this question was not applicable to their situation. **Of those who faced barriers, common ones included: the process was too difficult; the caregiver had concerns over financial costs; the biological parent would not consent or discouraged it; and the attorney or social worker recommended against it (see Exhibit 37).**

Exhibit 37. Barriers in Seeking Custody, Guardianship, Licensure, or Adoption of Children in Care at Baseline

Barriers	Percent	N
None	39%	32
Process seemed too difficult	10%	8
Financial concerns	10%	8
Not applicable to case	9%	7
Biological parents will not consent	7%	6
Biological parents discouraged it	6%	5
Attorney or social worker recommended against it	5%	4

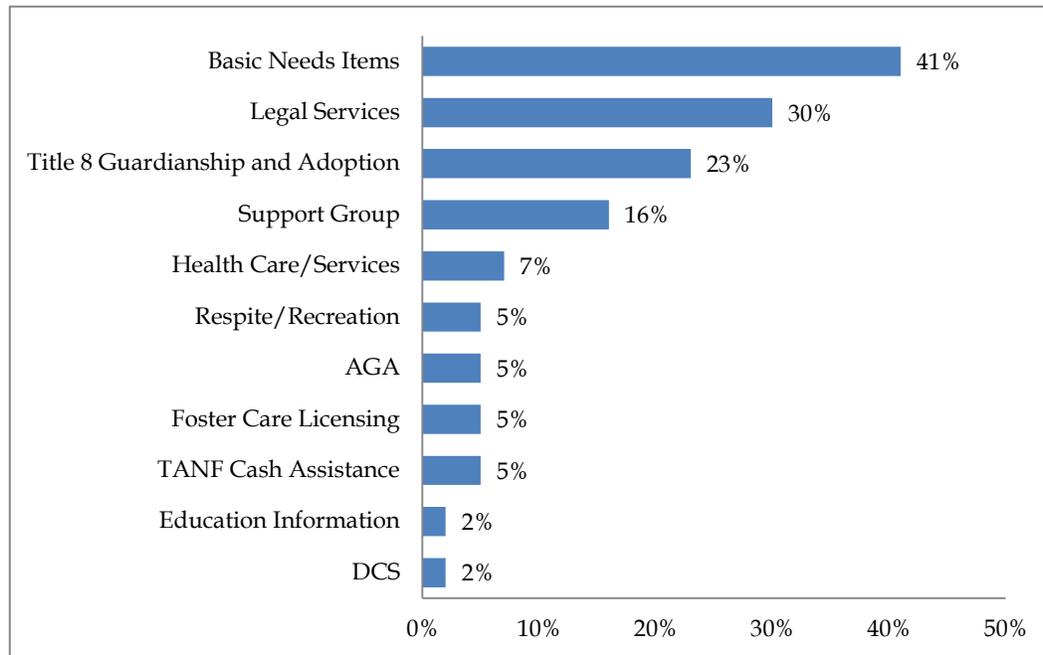


Caregiver has not completed foster parent training	4%	3
DCS/court refused to grant custody/guardianship	2%	2
Caregiver or family member is undocumented	1%	1
Problems between child and other people in home	1%	1
Pets in home needed shots/vaccinations	1%	1
Did not pass criminal background check	1%	1
DCS refused to approve the home/home not in compliance	1%	1
Other: Caregiver had to quit job to get kids; child traumatized; conflict of interest with legal aid clinic; returned to court several times because paperwork was not completed correctly; could not locate biological fathers; DCS gave the parents too many chances; did not have necessary paperwork to start the process; difficulties with bio mom; house is ok for DCS but not for licensure; problems with DCS case manager not listening; relationship with DCS was too difficult.	14%	12

Main Services used by Caregivers at Follow-up

Exhibit 38 shows that the top four services or resources utilized by AKSS clients who completed the follow-up survey include: basic needs and material resources, legal services, Title 8 Guardianship and adoption support, and attending an AKSS support group.

Exhibit 38. Services and Resources Utilized by Caregivers at Follow-up



(N=31)



Clients who sought services from Navigators in the areas shown in Exhibit 39 were asked to rate the helpfulness of Navigation services. The majority of caregivers rated Navigation services as somewhat to completely helping them to understand the services and benefits to which they are eligible, and understand the education system as it relates to their children.

Exhibit 39. Summary Survey Questions on Helpfulness of Navigation Services at Follow-up

To what extent has your Kinship Navigator helped you to:	Not at all	Somewhat	A Lot	Completely	N
Understand the services and benefits that you are eligible for as a kinship caregiver?	11% (2)	32% (6)	11% (2)	47% (9)	19
Understand the education system, as it relates to the kinship children in your care?	14% (2)	21% (3)	43% (6)	21% (3)	14

Family Needs, Baseline and Follow-up

The Family Needs Scale (FNS) is a 34-item scale collected at pre and post survey, using a 5-point rating scale from “Never a Need” (1) to “Always a Need” (5). A higher average score indicates that area is a greater need for the AKSS caregivers surveyed. The FNS demonstrated strong internal consistency, with a Cronbach Alpha score of .94 at pre and .87 at post. Exhibit 40 shows the top 10 family needs at baseline, according to the average score of each item. **Needs of caregivers at baseline revolve around (1) financial needs related to having and saving money, and paying for necessities and bills (gas, utilities, etc.); (2) having time to take care of oneself; (3) having short-term, emergency, and future care for their kinship children; (4) and obtaining employment.**

Exhibit 40. Primary Needs of Families at Baseline

Baseline Family Needs Scale	Average Score	N
Saving money for the future.	3.14	88
Having time to take care of yourself.	3.02	94
Having money to buy necessities and pay bills.	2.67	94
Paying for gas.	2.61	89
Getting short term/temporary relief from caring for your child.	2.60	87
Paying for utility bills like water, electricity, and AC/heat.	2.49	89



Baseline Family Needs Scale	Average Score	N
Finding future care for your child or children.	2.49	90
Getting a job.	2.48	48
Having emergency child care when you need it.	2.48	84

Exhibit 41 shows the results of a paired-samples t-test (2-tailed) for the Family Needs Scale (FNS), comparing average scores for each item at pre and post. Areas shown in bold and highlighted in gray indicate those with a significant change from pre to post survey.

Exhibit 41. Paired Samples t-test of Pre and Post Family Needs Scale Mean Scores

Item	Mean Pre	Mean Post	t	df	Sig. (2-tailed)
1. Having food for at least two meals for your family.	2.2	2.6	-1.333	24	.195
2. Finding time to cook healthy meals for your family.	2.2	2.2	0.000	24	1.000
3. Having enough food to feed your child or children.	2.0	2.3	-1.045	24	.306
4. Having clean water to drink.	1.7	1.5	.707	24	.486
5. Finding or keeping a place to live.	1.7	1.6	.405	24	.689
6. Paying for utility bills like water, electricity, and AC/heat.	2.7	2.3	1.219	22	.236
7. Completing chores, home repairs or improvements.	2.8	2.8	-.176	23	.862
8. Adapting your house to meet the needs of your child or children (e.g., handicapped accessible).	1.9	1.8	.149	18	.884
9. Having money to buy necessities and pay bills.	3.0	2.9	.431	25	.670
10. Budgeting the way you'll spend money.	2.1	2.1	0.000	25	1.000
11. Paying for any special needs of your child or children.	2.1	2.4	-1.508	18	.149
12. Saving money for the future.	3.0	3.5	-1.644	23	.114
13. Planning for a future job for your child or children.	2.2	2.7	-1.477	12	.165
14. Getting a job.	1.8	2.2	-1.000	11	.339
15. Having a job that you enjoy.	1.5	2.6	-2.797	10	.019
16. Getting where you need to go.	2.3	2.3	0.000	25	1.000
17. Transporting your child or children.	2.1	2.4	-.844	24	.407
18. Getting special travel equipment for your child or children (e.g., a car seat).	1.8	1.6	.940	17	.361



Item	Mean Pre	Mean Post	t	df	Sig. (2-tailed)
19. Paying for gas.	2.8	2.9	-.310	23	.759
20. Getting in touch with people that you need to talk to (e.g., a doctor, child's teacher, etc.).	2.2	2.3	-.527	25	.603
21. Having someone to talk to about your child or children (e.g., friend, counselor, religious leader, etc.).	2.0	2.5	-2.116	24	.045
22. Having someone to talk to, in general (e.g., friend, counselor, religious leader, etc.).	1.9	2.4	-2.409	25	.024
23. Having medical and dental care for your family.	2.0	2.2	-.681	23	.503
24. Finding special medical and dental care for your child or children.	1.8	1.7	.326	21	.747
25. Having time to take care of yourself.	3.4	2.8	1.893	25	.070
26. Having emergency health care.	1.6	1.7	-.894	24	.380
27. Planning for future health needs of you or your family.	2.2	2.3	-.421	24	.677
28. Managing the daily needs of your child or children.	2.4	2.3	.549	24	.588
29. Caring for your child or children during work hours.	2.1	2.1	0.000	14	1.000
30. Having emergency child care when you need it.	2.2	2.2	0.000	23	1.000
31. Getting short term or temporary relief (i.e. respite care) from caring for your child or children.	2.9	2.5	1.069	23	.296
32. Finding future care for your child or children.	2.7	2.2	1.172	21	.254
33. Getting special equipment or therapy for your child or children.	1.8	2.3	-1.861	15	.083
34. Having time to take your child or children to appointments.	1.7	2.0	-1.778	24	.088

Areas that showed a statistically significant increase in need at post include:

- Getting special equipment or therapy for your child or children;
- Having a job that you enjoy;
- Having someone to talk to about your child;
- Having someone to talk to, in general (e.g., friend, counselor, religious leader, etc.); and
- Having time to take your child or children to appointments.

This increase in needs may be a function of kinship caregivers recognizing the greater extent of their needs now that the children have been in their care for a longer period of time.

The one area that showed a statistically significant decrease in need at post includes:

- Having time to take care of yourself.



The one area that was a **high need at both pre and post** (no statistically significant change observed), with an average post score of 3.0 or higher includes:

- Saving money for the future

Areas that were **low needs at both pre and post** (no statistically significant change observed), with an average post score of 1.8 or lower include:

- Adapting your house to meet the needs of your child or children (e.g., handicapped accessible);
- Finding special medical and dental care for your child or children;
- Having emergency health care;
- Finding or keeping a place to live;
- Getting special travel equipment for your child or children (e.g., a car seat); and
- Having clean water to drink.

Caregiver Self-Efficacy, Baseline and Follow-up

The self-efficacy scale includes eight items that are rated on a 4-point scale from “not at all true” (1) to completely true (4). This scale showed strong internal consistency, with a Cronbach Alpha score of .85 at pre and .93 at post. Overall, Exhibit 42 shows that **AKSS clients have a strong baseline level of self-efficacy, with average post scores ranging from 2.8 to 3.2.** One area showed a statistically significant decrease in self-efficacy from pre to post is: “you can solve most problems if you invest the necessary effort.” This finding may be a function of caregivers feeling less effective at solving their problems the longer their kinship children are in their care.



Exhibit 42. Paired Samples t-test of Pre and Post Self-Efficacy Scale Averages

Item	Mean Pre	Mean Post	t	df	Sig. (2-tailed)
1. You can always manage to solve difficult problems if you try hard enough.	3.2	3.2	.214	25	.832
2. You can find the means and ways to get what you want.	2.7	2.8	-.647	25	.523
3. It is easy for you to accomplish your goals.	2.9	3.0	-.359	25	.723
4. You are confident that you can handle unexpected events well.	3.1	3.0	.319	25	.753
5. You can solve most problems if you invest the necessary effort.	3.4	3.0	2.368	25	.026
6. You can remain calm when facing difficulties because you can rely on your coping abilities.	2.8	3.0	-1.095	25	.284
7. When you are confronted with a problem, you can usually find a good solution.	3.3	3.1	1.281	24	.212
8. You can usually handle whatever comes your way.	3.2	3.0	1.225	23	.233

Permanency Goals at Follow-up

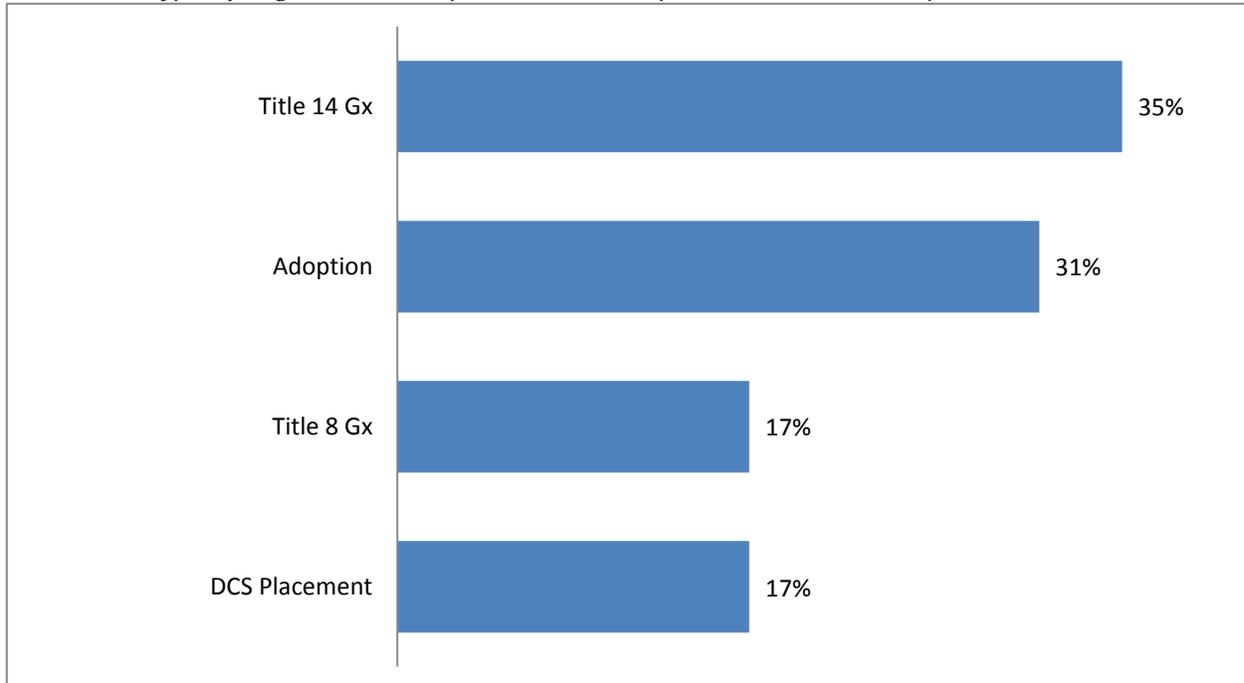
At the time of the follow-up survey, 61% (n=19) of caregivers still had kinship children living in their care. The number of kinship children in care ranged from one to five children, with an average and median of two children and mode of one child (37%, n=7). The number of kinship children in care is 41. Permanency data was gathered for each child. At the time of the follow-up survey:

- 46% (19) had maintained their baseline legal relationship;
- 24% (10) achieved a legal relationship since baseline;
- 24% (10) the legal relationship is in progress; and
- 5% (2) were no longer seeking legal relationship.



Types of legal relationships established or maintained with 29 children since the baseline survey are shown in Exhibit 43, with the most common being Title 14 Guardianship or adoption.

Exhibit 43. Types of Legal Relationships with 29 Kinship Children at Follow-up

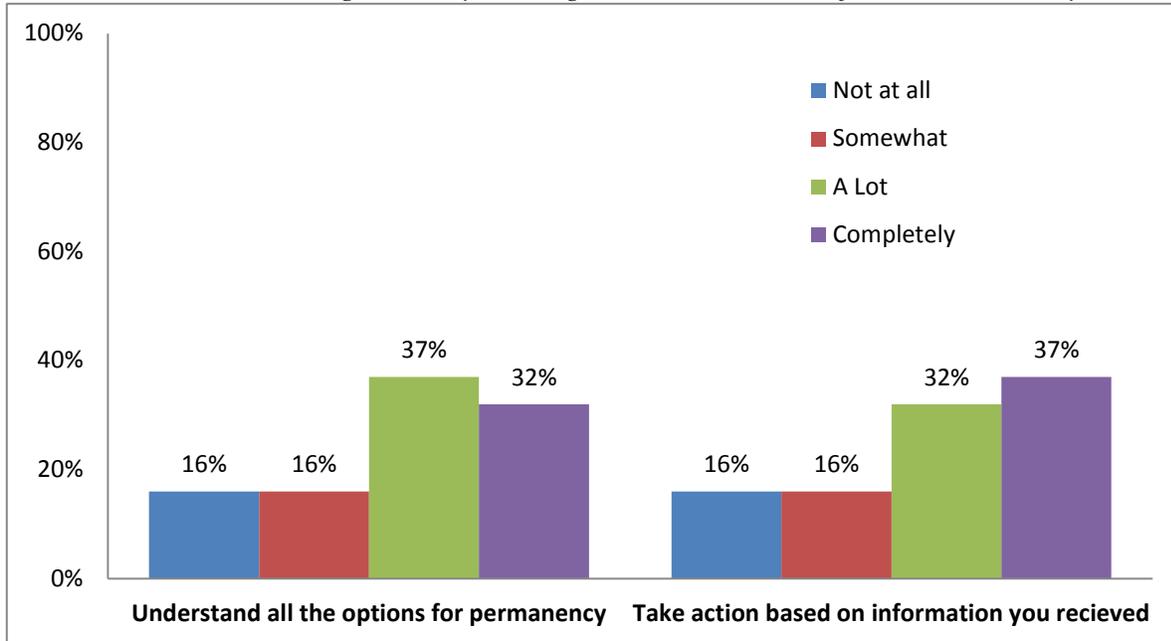


Of the 10 children with a legal relationship in progress, caregivers were seeking Title 8 Guardianship with five of them and adoption with five of them. Of the two children for whom caregivers are no longer seeking a legal relationship, one will turn 18 in the near future and the other will possibly reunify with their biological parents.



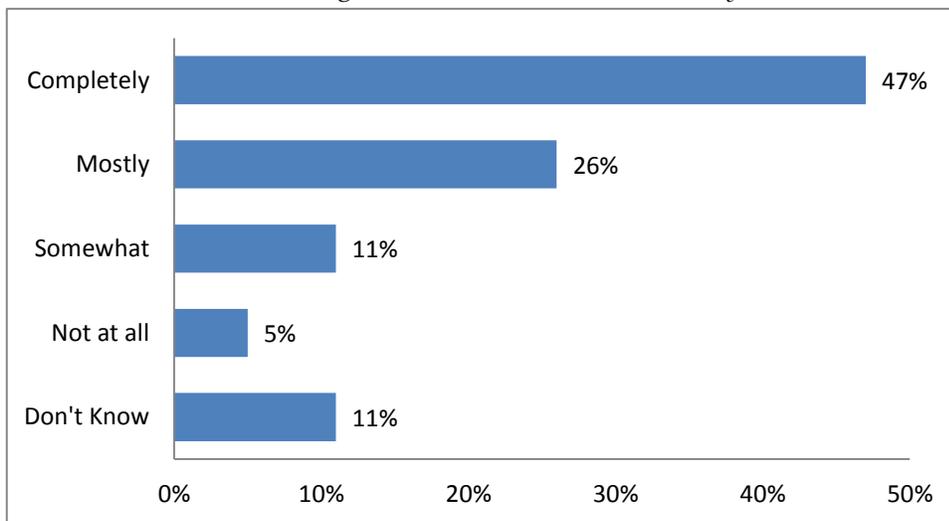
Nearly 70% (13) of caregivers surveyed at follow-up rated Navigators as helping them a lot to completely regarding permanency goals (N=19), including helping them to understand all the options for permanency and take action based on the information they received.

Exhibit 44. Extent that Navigators Helped Caregivers with Permanency Goals at Follow-up (N=19)



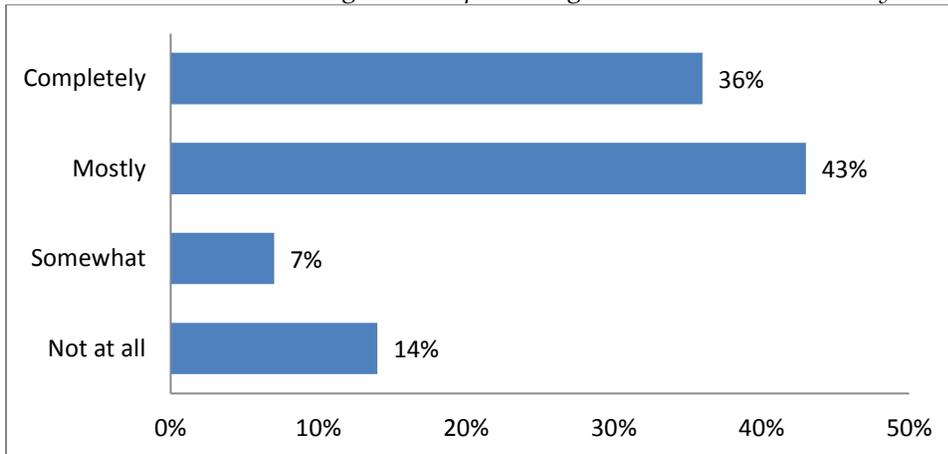
Nearly three quarters of caregivers surveyed at follow-up 73% (n=14) reported that they had mostly to completely achieved their permanency goals.

Exhibit 45. Extent that Caregivers Achieved their Permanency Goals at Follow-up (N=19)



Of the 14 caregivers that had mostly to completely reached their permanency goals at follow-up, 79% (n=11) rated their Navigator as having mostly to completely helped them achieve their goals. The two people (14%) who said “not at all” attributed their goal achievement to an AKSS support group and another social service provider.

Exhibit 46. Extent that Navigators Helped Caregivers Achieve Permanency Goals at Follow-up (N=14)



In general, resources that helped caregivers who mostly to completely achieved their permanency goals include:

- 86% (12) - AKSS Navigator
 - 21% (3) - DCS Caseworker
 - 14% (2) - Legal Services
 - 14% (2) - Kinship Support Group
 - 7% (1) - KIS
 - 7% (1) - Adoption and Guardianship Training
 - 7% (1) - Court/Judicial System
- (N=14)

Of the 12 caregivers (39%) surveyed at follow-up who no longer had the children in their care, the children are:

- 42% (5) reunited with their biological parent;
 - 17% (2) in other kinship care;
 - 17% (2) in foster care (non-relative);
 - 8% (1) are with a non-relative (fictive) kin; and
 - 17% (2) were not sure.
- (N=12)



b. Guardianship Data – Southern Arizona Legal Aid

Outcomes Addressed:

- Access to needed legal services
- Children safely maintained in their homes
- Permanency and stability improve

During this reporting period, the Volunteer Lawyer Program of Southern Arizona Legal Aid, a grant partner, opened 187 cases for clients seeking to obtain a minor guardianship during this period, of which 143 were scheduled for a clinic; 25 were conflicts for SALA and were referred to other legal services; 16 had no additional contact with SALA; and 3 cancelled prior to the clinic. A total of 90 people attended a clinic. Of those, 30 people filed with the Probate Court; 60 have not yet filed. Of the 30 that filed, 29 got a hearing and 17 were awarded guardianship.

c. Analysis of Formal and Informal Children Served: Evidence that AKSS Diverts High Risk Youth from DCS Involvement, with Potentially Significant Cost Savings

Outcomes Addressed:

- Children safely maintained in their homes
- Families can meet their children’s needs
- Permanency and stability improve
- Continuity of family relationships improves
- Families are stronger

The children served by AKSS are placed into kinship care for many reasons. AKSS serves formal (Department of Child Safety or DCS has custody of child) and informal kinship caregivers (no current DCS custody of child). In serving the informal families, the assumption is made that these supports prevent the child from entering the child welfare system. We have analyzed our data to test that assumption.

When caregivers contact AKSS for services we ask for the reason the kin caregivers is caring for the child rather than the parents. This question is asked specific to each child in the care of the family member. When completing an Initial Contact Form with a client, kinship Navigators document up to 15 reasons for why a child’s biological parent is not their primary caregiver (including: DCS removal; parental drug/alcohol abuse; parental abuse or neglect; parental mental health issue; parental physical health issue; incarceration of parent; domestic violence; parent deceased; parent unknown or uninvolved; parental financial issues; parental housing issues; immigration issues; and the options of don’t know, not applicable, and other, specify.)

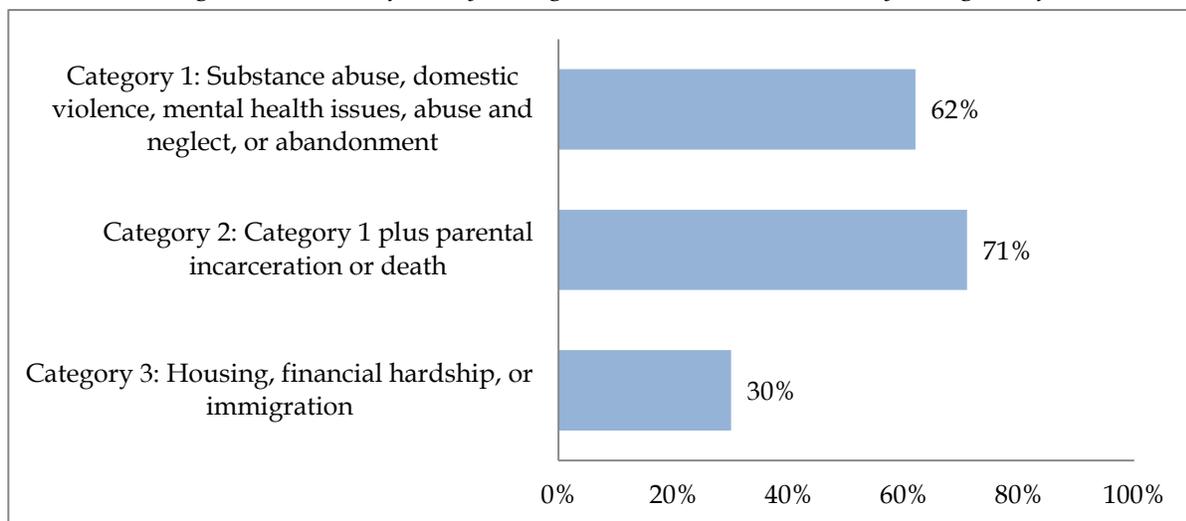


Formal caregivers may report the reason as DCS removal and decline to give the specific reason (i.e. abuse/neglect).

For analysis of our data, we grouped the reasons that would likely lead to imminent DCS involvement if supports for the family were not in place into **Category 1** – Critical DCS related reasons include: parental drug/alcohol abuse, parental abuse or neglect, parental mental health issue, domestic violence, or parent unknown or uninvolved. **Category 2** - Expanded DCS related reasons include all of the above and adds in parental incarceration or parental death, which may lead to DCS involvement. For clarity, Category 1 is a subset of Category 2. **Category 3** - Non-DCS related reasons are parental housing issues, parental financial issues, or immigration issues. It is assumed that DCS involvement due to these reasons is not likely.

Exhibit 47 shows the percentage of AKSS children served (N=6,715 as of 3/31/2015) that fall into each of the categories. It is important to note that the categories are not mutually exclusive because children are placed into kinship care for usually more than one reason. Therefore, the three categories do not total 100%. Exhibit 47 shows that almost two-thirds (62%, n=4,129) of children served by AKSS are no longer under the care of their biological parent for **Category 1** reasons, which are consistent with reasons for DCS intervention. Children with Category 1 reasons, plus an additional 9% (n=619) of those placed in kinship care due to parental death or incarceration, make up **Category 2**. Finally, 30% (n=2,015) fall into **Category 3**, which covers non-DCS related reasons for kinship care, including housing issues, financial hardship, or immigration issues.

Exhibit 47. Categorized Reasons for why Biological Parents are not Primary Caregiver of AKSS Children



Comparison of Kinship Placement Reasons by Informal or Formal Placement Status

Exhibits 48 through 50 compare each reason category by **kinship placement status - informal** (DCS is not involved) or **formal** (DCS is involved). Of the 5,621 children (84% of all children served) with a known status type, **52% (2,939) are in formal kinship care and 48% (2,682) are in informal kinship care.** (Note that the true breakdown for all 6,715 children served is 40% informal, 44% formal, and 16% missing a placement status. However, for the purpose of this analysis, those with a missing status are excluded).

Exhibit 48 shows that, as expected, formally placed children are significantly more likely to have been placed into kinship care for Category 1 reasons, compared to informal children. However, it is important to note that **58% of AKSS children in an informal arrangement were placed in kinship care for reasons that could potentially warrant a DCS investigation.** (Throughout this report, results are deemed statistically significant if $p \leq .10$). **By serving informal children with critical DCS-related needs, AKSS services is diverting 1,555 children away from involvement with DCS.**

Exhibit 48. Category 1 Reasons for Kinship Care by Informal and Formal Placement Status

Category 1 Reasons	Informal Status	Formal Status
Critical DCS-related reasons for kinship care (i.e., substance abuse, domestic violence, mental health, abuse/neglect, or abandonment)	58% (1,555)	71% (2,096)
All other reasons for kinship care	42% (1,127)	29% (843)
Total N	2,682	2,939

($\chi^2=109.585$, $p=.000$). Note: Category 1 does not include cases where the caregiver reported DCS removal as the reason for kinship care and no further information was captured.

Similarly, Exhibit 49 shows that formally placed children are significantly more likely to have been placed for Category 2 reasons, compared to informal children. However, **over two-thirds (68%) of informal AKSS children were in care for an expanded DCS-related reason.**

Exhibit 49. Category 2 Reasons for Kinship Care by Informal and Formal Placement Status

Category 2 Reasons	Informal Status	Formal Status
Expanded DCS-related reasons for kinship care (i.e., Category 1 reasons <u>plus</u> parental incarceration or parental death)	68% (1,820)	79% (2,318)
All other reasons for kinship care	32% (862)	21% (621)
Total N	2,682	2,939

($\chi^2=87.53$, $p=.000$)



Exhibit 50 shows that children in informal kinship care (37%) are significantly more likely to have been placed for Category 3 reasons, those not likely to be related a DCS investigation, compared to formal kinship placements (19%).

Exhibit 50. Category 3 Reasons for Kinship Care by Informal and Formal Placement Status

Category 3 Reasons	Informal Status	Formal Status
Non-DCS-related reasons for kinship care (i.e., housing, financial hardship, or immigration)	37% (998)	19% (564)
All other reasons	63% (1,684)	81% (2,375)
Total N	2,682	2,939

($\chi^2=226.946$, $p=.000$)

Comparison of Kinship Placement Reasons by Informal Status Type

Some of the informal kinship caregivers are caring for children who were previously involved with DCS. We assume these youth are at a higher risk of re-entering the child welfare system if kin caregiver supports are not in place. We compared informal families (with no current DCS custody) who had previous DCS involvement to those informal families who have never had DCS involvement. **Our data analysis shows that those youth with previous DCS involvement are more likely to be in Kinship care for the more serious Category 1 reasons. These youth are being effectively diverted from re-entering the DCS system.**

Exhibits 51 through 53 show the three categories of reasons why AKSS children are placed into kinship care, compared by the two categories of children who fall into the **AKSS informal population**: those with **previous DCS involvement** (42%, n=1,117) and those who **never had DCS involvement** (58%, n=1,565).

Exhibit 51 shows that **informal children with previous DCS involvement (68%)** are significantly more likely to have been placed in kinship care for **critical reasons** that could potentially warrant a subsequent DCS investigation and case opening, compared to children who never had DCS involvement (51%).



Exhibit 51. Category 1 Reasons for Kinship Care by Type of Informal Status (Previous DCS vs. Never)

Category 1 Reasons	Informal Status	
	Never Involved in DCS	Previous DCS Involvement
Critical DCS-related reasons for kinship care (i.e., substance abuse, domestic violence, mental health issues, abuse/neglect, or abandonment)	51% (801)	68% (754)
All other reasons for kinship care	49% (764)	32% (363)
Total N	1,565	1,117

($\chi^2=71.256$, $p=.000$). Note: Category 1 does not include cases where the caregiver reported DCS removal as the reason for kinship care and no further information was captured.

Similarly, Exhibit 52 shows that informal children with previous DCS involvement (78%) are significantly more likely to have a Category 2 reason for removal, compared to children with no previous DCS involvement (61%).

Exhibit 52. Category 2 Reasons for Kinship Care by Type of Informal Status (Previous DCS vs. Never)

Category 2 Reasons	Informal Status	
	Never Involved in DCS	Previous DCS Involvement
Expanded DCS-related reasons for kinship care (i.e., Category 1 reasons plus parental incarceration or parental death)	63% (978)	75% (842)
All other reasons for kinship care	38% (587)	25% (275)
Total N	1,565	1,117

($\chi^2=49.642$, $p=.000$). Note: Category 2 does not include cases where the caregiver reported DCS removal as the reason for kinship care and no further information was captured.

Exhibit 53 shows that informal children with no previous DCS involvement (42%) are significantly more likely to have been placed into kinship care for reasons related to **housing, financial hardship, or immigration**, compared to children with previous DCS involvement (30%).



Exhibit 53. Category 3 Reasons for Kinship Care by Type of Informal Status (Previous DCS vs. Never)

Category 3 Reasons	Informal Status	
	Never Involved in DCS	Previous DCS Involvement
Non-DCS-related reasons for kinship care (i.e., housing, financial hardship, or immigration)	42% (658)	30% (340)
All other reasons	58% (907)	70% (777)
Total N	1,565	1,117

($\chi^2=37.577$, $p=.000$).

Comparison of Child Age Ranges by Informal or Formal Placement Status

If we look at the ages of the children in informal care, we can see that the youth in informal care are older than those currently in formal care. **If these youth are not successfully diverted from DCS care (by supporting informal kinship care) the influx of older children into the child welfare system could potentially increase the number of older youth being placed in congregate care.** Exhibit 54 compares the placement status of AKSS children by age groups.

- Formal children served by AKSS, regardless of reason for kinship care, are significantly more likely to fall into the 0 to 4 year old age group (35%), compared to 17% of informal children in this age group.
- Informal children served by AKSS, regardless of reason for kinship care, are significantly more likely to be in the older age groups of 8 to 11 years old (27%) and 12 years old or older (38%), compared to formal children in these age groups (22% and 22%, respectively).

In total, AKSS served 1,609 older children (8 years of age or older) with an informal kinship care status, which is critical as these age groups would potentially otherwise be placed in group homes, if under DCS custody.



Exhibit 54. Age Ranges of AKSS Children by Informal and Formal Placement Status

Age Ranges of AKSS Children	Informal Status	Formal Status
0 to 4 years	17% (430)	35% (965)
5 to 7 years	18% (450)	21% (576)
8 to 11 years	27% (672)	22% (619)
12 years or older	38% (937)	22% (607)
Total N	2,489	2,767

($\chi^2=279.438$, $p=.000$)

Category 1 Reason Only: Comparison of Child Age Ranges by Informal and Formal Placement Status (Keeping High Risk Older Children out of Group Homes)

Exhibit 55 shows data for AKSS children served who have a Category 1 (i.e., a critical DCS-related reason) reason for kinship care, compared by formal or informal placement status.

- Of the children with a Category 1 reason for kinship care, formal children are significantly more likely to fall into the 0 to 4 year old age group (36%), compared to informal children in this age group (18%).
- Of the children with a Category 1 reason for kinship care, informal children are significantly more likely to be in the older age groups of 8 to 11 years old (28%) and 12 years old or older (33%), compared to formal children in these age groups (22% and 22%, respectively). Serving older children with an informal kinship care status is critical as these age groups would potentially otherwise be placed in group homes if they were under DCS custody.

In summary, **AKSS is working to keep 1,754 children who are 8 years of age or older with Category 1 reasons for kinship care out of group homes and in the care of a relative**. This figure includes 49% (856) formal cases and 51% (898) informal cases.



Exhibit 55. Age Range of AKSS Children with Category 1 Reasons for Kinship Care, by Informal and Formal Placement Status

Age Ranges of AKSS Children	AKSS Children with Category 1 Reason for Kinship Care	
	Informal Status	Formal Status
0 to 4 years	18% (267)	36% (716)
5 to 7 years	21% (302)	21% (417)
8 to 11 years	28% (417)	22% (428)
12 years or older	33% (481)	22% (428)
Total N	1,467	1,989

1,754 older children were kept out of group homes due to AKSS.

($\chi^2=151.323$, $p=.000$)

Exhibit 56 shows the estimated monthly cost savings that AKSS services yields by diverting youth with a Category 1 removal status from the DCS child welfare system and into the home of a relative.

Exhibit 56. Estimated Monthly Savings to Arizona Taxpayers because of AKSS Services

Cost Per Child*	# of AKSS Children	Cost Savings to AZ
DCS Case Management: \$203/month	x 1,555 Category 1 Informal Youth	= \$315,665
Congregate, residential, or group home: \$3,315/month	x 1,754 Youth Ages 8+ Years	= \$5,814,510
Family foster care: \$676/month	x 1,702 Youth Ages <8 Years	= \$1,150,552

*Data provided by DCS Grant Partner in March 2015.



d. Analysis of Statewide Department of Child Safety Kinship Placement and Family Assistance Administration TANF Data

This report presents statistics on statewide kinship placements made by the Department of Child Safety (DCS) in Arizona (including out of state and out of country placements) for fiscal years one and two of the AKSS grant funding (from 10/1/2012 to 9/30/2014), broken down by four semi-annual grant reporting periods (we will report on FY3 reporting periods at the final evaluation report). Additionally, the data on kinship placements was cross checked with the Department of Economic Security's Family Assistance Administration's (FAA) database on participation in Arizona's Cash Assistance program (the federal Temporary Assistance for Needy Families or TANF). Utilizing this cross-matched dataset, this report also presents statistics on DCS kinship placements and TANF participation status.

Exhibit 57 shows the percentage of DCS kinship placements that requested and received TANF benefits, by county and in total, over the four semi-annual grant reporting periods of FY1 and 2. This table is sorted in descending order by the average percentage column. Compared to the four AKSS counties, Cochise County has the highest percentage of kinship placements receiving TANF benefits, hovering between 44% and 52% across the four time points. Compared to the average rate of all 15 counties in Arizona, Cochise County ranks 2nd, following neighboring rural Graham County. Pima County has the second highest rate of TANF receipt of the four AKSS counties and is the only county served that experienced a 38% increase in kin placements receiving TANF over the course of the grant, from a low of 29% during the first six months of FY1 to a high of 40% in the first six months of FY2. Pima County ranks 5th in average TANF receipt rate compared to all counties. Pinal and Maricopa Counties show lower TANF receipt rates of kinship placements, with percentages ranging from the high teens to the low 20s. Pinal is ranked 10th and Maricopa is ranked 12th in comparison to average ratings of all 15 counties.



Exhibit 57. DCS Kinship Placements that Receive TANF Benefits, by County and Total

% of DCS Kinship Placements that Receive TANF Benefits						
Rank (Based on Average %)	County	FY1-1 10/1/2012- 3/31/2013	FY1-2 4/1/2013 - 9/30/2013	FY2-1 10/1/2013- 3/31/2014	FY2-2 4/1/2014- 9/30/2014	Average %
1	Graham	35%	45%	60%	66%	51.5%
2	Cochise	44%	51%	52%	44%	47.8%
3	Greenlee	47%	21%	50%	50%	42.0%
4	Santa Cruz	37%	30%	41%	43%	37.8%
5	Pima	29%	37%	40%	36%	35.5%
6	Yavapai	33%	28%	29%	28%	29.5%
7	Gila	18%	26%	35%	28%	26.8%
8	Coconino	20%	33%	42%	6%	25.3%
9	La Paz	39%	36%	0%	0%	25.0%
10	Pinal	24%	23%	23%	18%	22.0%
11	Yuma	13%	18%	26%	22%	19.8%
12	Maricopa	21%	20%	19%	18%	19.5%
12	Mohave	25%	25%	12%	16%	19.5%
13	Navajo	13%	17%	10%	13%	13.3%
14	Apache	5%	0%	31%	14%	12.5%
	Total	23%	24%	24%	23%	23.5%

Exhibit 58 shows the percentage of DCS kinship placements that do not receive TANF benefits due to a benefit cap, by county and in total, over the four semi-annual grant reporting periods. This table is sorted in descending order by the average percentage. Comparing the four AKSS counties, while Cochise County has the highest percentage of kinship placements receiving TANF, this county also has the highest rates of benefit capped children, ranging from a low of 5% to a high of 9% across the four time points. Compared to the average rate of all 15 counties in Arizona, Cochise County ranks 4th. Pima, Maricopa, and Pinal Counties have similar benefit cap rates ranging from 3% to 5% and are ranked 7th, 8th, and 9th, respectively, compared to all other county average ratings.



Exhibit 58. DCS Kinship Placements with a Benefit Capped Child, by County and Total

% of DCS Kinship Placements with a Benefit Capped Child						
Rank (Based on Average %)	County	FY1-1 10/1/2012- 3/31/2013	FY1-2 4/1/2013 - 9/30/2013	FY2-1 10/1/2013- 3/31/2014	FY2-2 4/1/2014- 9/30/2014	Average %
1	Santa Cruz	22%	15%	11%	10%	14.5%
2	Greenlee	11%	14%	17%	13%	13.8%
3	Graham	13%	16%	11%	10%	12.5%
4	Cochise	8%	9%	9%	5%	7.8%
5	Coconino	0%	8%	12%	2%	7.3%
6	Gila	7%	9%	7%	5%	7.0%
7	Mohave	5%	6%	3%	4%	4.5%
7	Pima	4%	5%	5%	4%	4.5%
8	Maricopa	4%	4%	4%	4%	4.0%
9	Pinal	3%	4%	4%	3%	3.5%
10	Yuma	1%	2%	4%	5%	3.0%
11	Yavapai	2%	2%	3%	3%	2.5%
12	La Paz	6%	0%	0%	0%	2.0%
13	Apache	0%	0%	0%	0%	0.3%
14	Navajo	1%	0%	0%	0%	0.0%
	Total	4%	5%	4%	4%	4%

Exhibit 59 shows the percentage of DCS kinship placements that are not in the TANF system, by county and total, for the four grant time periods. The rows are sorted in descending order of the average percentages. Converse to the trends of TANF receipt observed in the four AKSS counties, Maricopa County has the highest average percentage with 75% of DCS kinship placements not known to the TANF system. Pinal County has an average percentage of 73%, Pima County has an average of 59%, and Cochise County has the lowest average of 44%.



Exhibit 59. DCS Kinship Placements Not in TANF System, by County and Total

County	% of DCS Kinship Placements Not in TANF System				
	FY1-1 10/1/2012- 3/31/2013	FY1-2 4/1/2013 - 9/30/2013	FY2-1 10/1/2013- 3/31/2014	FY2-2 4/1/2014- 9/30/2014	Average %
Apache	85%	100%	69%	86%	85%
Navajo	81%	84%	89%	87%	85%
La Paz	50%	64%	100%	100%	79%
Maricopa	73%	74%	75%	76%	75%
Yuma	82%	78%	67%	73%	75%
Mohave	64%	66%	84%	78%	73%
Pinal	71%	70%	71%	78%	73%
Coconino	77%	56%	46%	92%	68%
Yavapai	64%	78%	65%	66%	68%
Gila	74%	66%	57%	67%	66%
Pima	65%	56%	54%	59%	59%
Cochise	48%	39%	39%	50%	44%
Santa Cruz	37%	48%	46%	45%	44%
Greenlee	42%	64%	17%	38%	40%
Graham	50%	38%	29%	24%	35%
Total	71%	69%	70%	72%	71%



e. Analysis of AKSS Clients and Family Assistance Administration TANF Data

Outcomes Addressed:

- Families can meet their children’s needs
- Children are safely maintained in their homes
- Access to community support systems
- Enhanced interagency coordination and responses for kinship families

A total of 437 AKSS caregivers matched FAA data for having a TANF participation code. These caregivers are caring for 887 kinship children. Exhibit 60 shows the percentage breakdown of TANF participation codes. Over three quarters (76%, n=663) of AKSS children known to the TANF system are receiving TANF child-only benefits. A total of 13% (116) of children were benefitted capped due to Arizona’s legislation. **Out of all AKSS children served (N=6715), the percentage of TANF child-only recipients is approximately 10% (n=663).**

Exhibit 60. AKSS Caregivers’ TANF Participation Codes from FAA Data

