25-YEAR impact report
The growth and prosperity of our state is deeply rooted in our communities and the health and productivity of the children and families within them. But across Georgia, hard-working families struggle for a variety of reasons to become—and remain—healthy and self-sufficient.

Our most vulnerable Georgians often get lost in the complexities of a disconnected and overly stressed system, and efforts to meet their needs are sometimes fragmented, missing, or unnecessarily duplicated.

In both the private and public sectors, it’s not enough to work hard for our children and families. We must work for them together.
Georgia Family Connection was established to meet the desperate need for a statewide organization to disentangle the mess of barriers, service gaps, and inefficiencies obscuring progress and positive community outcomes.

With 25 years of experience sorting complex issues and achieving lasting impact, we foster relationships between community leaders, investors, and lawmakers advocating for systems changes.

As the only statewide organization of its kind in the nation—with partners in all 159 counties—we have a unique vantage point that allows us to see the big picture, while operating effectively at a local level.

Our powerful network of Collaboratives crafts local solutions based on local decisions. Every day we tackle the challenging work necessary to realize sustained improvement in the conditions, prospects, and outcomes for our local children and families.

In this vast web of people and services, every relationship matters, and every connection holds possibility. We leverage disciplined collaboration to yield a measurable collective impact across five key result areas, none of which can be considered without the others.

We envision a Georgia where all children are healthy, primed for school, and succeed when they get there; and where strong families contribute to vibrant, robust communities that thrive.

This Impact Report provides stories and trend data that demonstrate our commitment to our vision—and the difference our network is making in children’s and families' lives by allowing the data to guide our disciplined approach to collaboration. We hope this report will ignite ideas and dialogue, and that it will help inform your work.

Together, we can forge lasting, positive change for children and families. Together, we can ensure a bright future for Georgia. And together starts with a conversation.

So, let's talk.
“Georgia Family Connection understands the needs of our families and communities—from the local level to the state level. We applaud the individual efforts each of you puts forth as you work to ensure that all Georgia citizens have the opportunity to become productive and successful individuals. Your efforts help us to address the vital issues facing Georgia’s families, and allow us to uncover solutions for local needs. Together we will continue to make Georgia the best place to call home.”
—Gov. Nathan Deal and First Lady Sandra Deal

“Georgia Family Connection Partnership has been a constant crusader in the field—ever improving its model, refining its theory of change, and practically inventing the phrase, ‘continuous learning.’ I’ve never worked with, nor seen, an organization so committed to learning, and to using its learning to help make a meaningful difference in the lives of children. The efforts you have made on behalf of Georgia’s children have left a stunning impact over these first 25 years. Frankly, there’s no telling how far we can go over the next 25.”
—Stan Schneider, Founder and President, METIS Associates, New York

“The Annie E. Casey Foundation is about creating a brighter future for all children in our country. Thirteen years ago we saw an opportunity to make that brighter future possible by partnering with Georgia Family Connection Partnership, because you have the relationships with government, the public and private sectors, and communities, including faith-based groups, which are all key ingredients to any successful endeavor in community change. We commit to serving you over the next 25 years in making your hopes, dreams, and aspirations become a reality.”
—Dennis Campa, National KIDS COUNT Director, Annie E. Casey Foundation

“Georgia is a better state now—and will be a better state in the future—if Georgia Family Connection stays the course. If we’re going to be competitive in this state, in this country, and in this world, we’ve got to increase the quality and quantity of our workforce. We’re not going to meet our goals if kids and families don’t continue their education. It’s a mathematical impossibility. Let’s continue to work together, so tomorrow will be a better day, not just for the children and families, but also for all of Georgia.”
—Hank Huckaby, Chancellor, Board of Regents of the University System of Georgia; Former Director, Governor’s Office of Planning and Budget
"Georgia Family Connection is a reflection of Gov. Zell Miller’s commitment, tenacity, and vision to get Georgia out of the cellar—to not be viewed as just another backward southern state, but a player on the national field. That’s what we’re doing today, and it wouldn’t have happened without Georgia Family Connection. That tenacity, that Georgia can-do spirit is reflected in 25 years of working to bring change and create bright futures for Georgia’s families. You carry the torch today for the next—not 25—but 50 years."
—Nan Orrock, Georgia State Senator

"When I was born in 1964, 23 percent of children lived in poverty. Fifty years later, 22 percent of children are still in poverty. I see in Georgia Family Connection an opportunity for every child in every family to thrive. You expose barriers and inefficiencies standing in the way of positive outcomes, you connect people, you give children and families a safe place, and you help them achieve their best life. The challenge is huge, but you have the solutions. Let’s make sure all children have a strong foundation to not just survive—but thrive."
—Fran Gary, CEO, Amerigroup Georgia

"Georgia Family Connection has what no one else has—a network that connects every county in the state with your five result areas as your compass. A compass can show you where you are, and it can show you where you want to go. But a compass does little for you unless you move. We must continue to move toward our vision so all children will be healthy, primed for school, and succeed when they get there; and so strong families will contribute to vibrant communities that thrive."
—Albert Wright, Retired Vice President, United Parcel Service; Founding Board Chair, Georgia Family Connection Partnership
WE ENVISION A GEORGIA WHERE ALL CHILDREN ARE HEALTHY, PRIMED FOR SCHOOL, AND SUCCEED WHEN THEY GET THERE; AND WHERE STRONG FAMILIES CONTRIBUTE TO VIBRANT, ROBUST COMMUNITIES THAT THRIVE
The health of a community begins with its children. If we want to predict the health and prosperity of any community—and our state—we might simply begin by asking, “How are the children?” The health and well-being of Georgia’s children have shown real progress over the past 25 years, but we still have a long way to go. We want all of Georgia’s children to begin life at a healthy weight, with access to quality care and healthy food, and on a path to success.
## Georgia Kids Count: Healthy Children

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Base Rate</th>
<th>Current Rate</th>
<th>Base Number</th>
<th>Current Number</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>8.6%</td>
<td>9.5%</td>
<td>9,570</td>
<td>12,489</td>
<td></td>
</tr>
<tr>
<td>Infant mortality (per 1,000)</td>
<td>1994</td>
<td>2015</td>
<td>1994</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>10.1</td>
<td>7.8</td>
<td>1,125</td>
<td>1,023</td>
<td></td>
</tr>
<tr>
<td>Children receiving public health insurance</td>
<td>2009-2013</td>
<td>2010-2014</td>
<td>2009-2013</td>
<td>2010-2014</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>37.9%</td>
<td>39.3%</td>
<td>942,539</td>
<td>976,926</td>
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</tr>
<tr>
<td>Children without health insurance</td>
<td>2009-2013</td>
<td>2010-2014</td>
<td>2009-2013</td>
<td>2010-2014</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>9.6%</td>
<td>8.9%</td>
<td>238,594</td>
<td>221,128</td>
<td></td>
</tr>
<tr>
<td>Children birth through 4, enrolled in WIC program</td>
<td>2000</td>
<td>2012</td>
<td></td>
<td></td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>NA</td>
<td>NA</td>
<td>225,309</td>
<td>345,448</td>
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<tr>
<td>Child deaths, ages 1 – 14 (per 100,000)</td>
<td>1994</td>
<td>2015</td>
<td>1994</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>32.1</td>
<td>19.6</td>
<td>480</td>
<td>381</td>
<td></td>
</tr>
<tr>
<td>Teen pregnancies, ages 15 – 17 (per 1,000)</td>
<td>1994</td>
<td>2015</td>
<td>1994</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>68.3</td>
<td>15.6</td>
<td>9,918</td>
<td>3,205</td>
<td></td>
</tr>
<tr>
<td>Teen births, ages 15 – 19 (per 1,000)</td>
<td>1994</td>
<td>2015</td>
<td>1994</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>70.6</td>
<td>25.5</td>
<td>17,328</td>
<td>8,810</td>
<td></td>
</tr>
<tr>
<td>Teen mothers giving birth to another child before age 20</td>
<td>1994</td>
<td>2015</td>
<td>1994</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td>(ages 15 – 19)</td>
<td>24%</td>
<td>17.2%</td>
<td>4,122</td>
<td>1,502</td>
<td></td>
</tr>
<tr>
<td>STD incidence for youth, ages 15 – 19 (per 1,000)</td>
<td>1998</td>
<td>2014</td>
<td>1998</td>
<td>2014</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>26.7</td>
<td>25.9</td>
<td>15,444</td>
<td>18,054</td>
<td></td>
</tr>
<tr>
<td>Teen deaths, ages 15 – 19 (per 100,000)</td>
<td>1994</td>
<td>2015</td>
<td>1994</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>88.7</td>
<td>55.8</td>
<td>449</td>
<td>395</td>
<td></td>
</tr>
<tr>
<td>Teen deaths, ages 15 – 19 by homicide, suicide, and accident</td>
<td>1994</td>
<td>2015</td>
<td>1994</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td>(per 100,000)</td>
<td>73.3</td>
<td>41.3</td>
<td>371</td>
<td>292</td>
<td></td>
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</table>
LOW-BIRTHWEIGHT BIRTHS AND INFANT MORTALITY

Infant birthweight is driven by a complex combination of factors, including maternal nutrition and health status, maternal smoking, gestational age, and other biological factors. Low-birthweight (LBW) infants are far more likely to die in the first year of life. The leading causes of infant deaths in Georgia are disorders related to preterm births and low birthweight. Being born at a low birthweight increases a child’s risk of chronic morbidity, developmental delays, intellectual deficits, and academic difficulties. Low birthweight and infant deaths, before the age 1, are leading indicators of maternal and child health in any community.

The rate of LBW births in Georgia has increased dramatically since the 1994 rate of 8.6 percent to 9.5 percent in 2015. The highest rate was in 2010 when 13,052 children were born weighing less than 5 1/2 lbs. Although we have seen a decrease from the 2010 rate of 9.8 to 9.5 percent in 2015, there were still 12,489 children born LBW.

While LBW rates have increased since 1994, Georgia’s rate of infant mortality has decreased, moving from 10.1 per 1,000 live births to 7.8 per 1,000 in 2015. This improvement is primarily related to improved medical care for fragile newborns and improved access to high-quality prenatal care and birth practices in Georgia’s birthing hospitals and perinatal centers.

Given the complexities of the causes of LBW and infant mortality, it will take a multifaceted approach to address the biological, social, and environmental determinants—most importantly, maternal health and wellness. Improving nutrition, increasing access to quality prenatal and health care, increasing birth spacing, avoiding tobacco and alcohol, and decreasing unintended pregnancies are strategies that measurably reduce the LBW rate.
CHILD AND TEEN DEATHS

Premature deaths create a loss for families and for a community, and early deaths are related to medical conditions, unsafe environments, and risky behaviors.

Both child and teen death rates have significantly declined in Georgia since 1994. The rate of child deaths, ages 1 – 14, fell from 32.1 in 1994 to 19.6 in 2015. Regardless of cause, the rate of death for black children remains higher than the rate for white children, and in 2015 was 26.2 compared to 17.4 per 100,000 for white children.

The rate of teen deaths, ages 15 – 19, fell from 88.7 in 1994 to 55.8 in 2015. Regardless of cause, the rate of death for black teens remains significantly higher than the rate for white children, and in 2015 was 69.8 compared to 51.2 per 100,000 for white children.

at a glance

LOW BIRTHWEIGHT BIRTHS

12,489

INFANT MORTALITY RATE

7.8 PER 1,000

LOW BIRTHWEIGHT AND INFANT DEATHS, BEFORE AGE 1, ARE LEADING INDICATORS OF MATERNAL AND CHILD HEALTH IN ANY COMMUNITY.

CHILD MORTALITY RATE

19.6 PER 100,000
TAKING A HOLISTIC APPROACH TO IMPROVING LIVES IN AUGUSTA-RICHMOND COUNTY

In 2009, Avis was unemployed, living with her mother, pregnant with her fourth child, and battling addiction. She said she had “checked out of life.” Then she joined Healthy Start, a local infant mortality reduction project spearheaded by the Augusta Partnership for Children (APC) in Augusta-Richmond County.

Avis received health education, case management services, and referrals for counseling, stable housing, and baby items for two years—and APC continued to support her after she completed the program. Today she has a steady job, custody of her children, and a desire to give back.

APC has been advocating for youth since the mid-1980s and takes a holistic approach in working to improve the lives of infants and their families through Healthy Start. The project addresses disparities in perinatal health via the use of community-based strategies to accomplish them.

“We determined early on that children’s health was of the utmost importance and the first major issue to be undertaken would be infant mortality,” said APC Executive Director Robetta McKenzie. “If our children were born healthy and remained so, all other issues would be successfully addressed.”

In addition to using data and research-based information showing the strategies and actions that a community could take to intervene, APC organized focus groups and collaborative discussions.

“If our children were born healthy and remained so, all other issues would be successfully addressed.”
—ROBETTA MCKENZIE, AUGUSTA PARTNERSHIP FOR CHILDREN EXECUTIVE DIRECTOR
“This dialogue highlighted the fragmented services and the low number of providers offering access to psycho-social supports and addressing psycho-social issues that affected pregnancy and birth outcomes for patients,” McKenzie said.

Partners asked APC to serve as the lead agency in implementing Healthy Start because of its role in the community as a coalition builder with a strong consortium in place and a history of collaboration—including the ability to work with neutrality across all sectors.

“Although collaboration was the key to making the project work, no agency would lose its identity,” said McKenzie. “APC was not trying to take over anyone’s clients or patients. All collaborators would be recognized for their efforts.”

Augusta University, East Central Health District, Richmond County School System, State Title V staff, medical and health education providers, social service agencies, and other partners came together to lend support offering technical assistance and training, direct services, in-kind and financial resources, and program referrals.

“All things can be overcome with a lot of effort and community support,” said McKenzie, who also noted the importance of inviting families to the table.

APC implemented a pilot Centering Pregnancy program for teens in 2007. All births were full term, and all mothers remained in school with no repeat pregnancies. The Collaborative also formed a strategy team to address poverty, which was identified as the undergirding factor for issues associated with infant mortality and disparities in perinatal health.

“APC will lead you to the water and teach you how to drink it—but it’s up to you to actually take that drink,” said Avis. “APC helped me get back into life, and now I’m trying to help people who are going through the same battles I went through.”

OUR VALUES IN ACTION:
We believe in the power of connection—convening, collaborating, being inclusive, and bringing the right people with the right resources to the table for a common goal.
# CHILDREN PRIMED FOR SCHOOL

## GEORGIA KIDS COUNT: CHILDREN READY TO START SCHOOL

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>BASE RATE</th>
<th>CURRENT RATE</th>
<th>BASE NUMBER</th>
<th>CURRENT NUMBER</th>
<th>CHANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children enrolled in the Georgia Pre-K program</td>
<td>2004</td>
<td>2015</td>
<td>2008</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>57%</td>
<td>58.8%</td>
<td>76,491</td>
<td>80,430</td>
<td></td>
</tr>
<tr>
<td>Children from low-income families enrolled in the Georgia Pre-K program</td>
<td>2004</td>
<td>2015</td>
<td>2004</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>50.2%</td>
<td>53.3%</td>
<td>34,191</td>
<td>42,829</td>
<td></td>
</tr>
<tr>
<td></td>
<td>49.6%</td>
<td>50.6%</td>
<td>145,479</td>
<td>143,178</td>
<td></td>
</tr>
<tr>
<td>Centers and family child care homes participating in Quality Rated</td>
<td>2014</td>
<td>2015</td>
<td>2014</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>28%</td>
<td>40%</td>
<td>1,779</td>
<td>2,443</td>
<td></td>
</tr>
<tr>
<td>Babies born to mothers with less than 12 years of education</td>
<td>1994</td>
<td>2015</td>
<td>1994</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>23.4%</td>
<td>15.3%</td>
<td>26,008</td>
<td>19,799</td>
<td></td>
</tr>
</tbody>
</table>
Getting ahead or falling behind in school can begin in the first days of life. Rapid changes occur in early childhood as a child’s brain forms a complex network of connections among neurons. These connections are shaped by early child care and the family and community environments, making these early years a critical time to lay the groundwork for a child’s future success.
CHILDREN ENROLLED IN GEORGIA PRE-K PROGRAM

Children with access to high-quality early learning opportunities exhibit better language, cognitive, and social skills. Programs that address families’ needs and connect them to community resources help to strengthen their relationship with their children and their community. The Georgia Pre-K programs and Quality Rated child care programs provide high-quality care and family support.

The Georgia Pre-K universal program, the first of its kind in the nation, has continued to expand since its inception in 1992, serving more than 80,000 children across the state in 2015. The number of low-income children served has also increased from slightly over 34,000 in 2004 to over 47,000 in 2015 and has consistently been at least 50 percent of all eligible low-income children.
CENTERS AND FAMILY CHILD CARE HOMES PARTICIPATING IN QUALITY RATED

Quality Rated, Georgia’s quality rating and improvement system, is working to improve quality in all child care centers and family-care homes across the state. There are now 2,443 centers and homes, 40 percent of licensed facilities are participating in Quality Rated, and more than 1,000 have been rated.

The educational attainment of mothers is one of the leading predictors of child development, school readiness, and school performance of young children.

Many Georgia families and communities continue to struggle with economic well-being, but investing in early care and learning offers the potential for tremendous return on investment in years to come.

BABIES BORN TO MOTHERS WITH LESS THAN 12 YEARS OF EDUCATION

- 25.0%
- 18.8%
- 12.5%
- 6.3%
- 0.0%

When Polk Family Connection discovered that too many high-school students in the county were dropping out, the Collaborative committed to improving graduation rates. They quickly learned that improving high-school graduation outcomes begins with a solid foundation of education, starting with the youngest members of its communities.

“We realized that if we wanted to improve high-school graduation rates, we needed to start much earlier,” said Rhonda Heuer, coordinator for Polk Family Connection, “because improving education starts at birth and even prenatally.”

The Collaborative was ignited when it heard about the Get Georgia Reading Campaign for Grade-Level Reading, which was beginning to change long-term outcomes by looking at early brain development, the power of verbal interactions with infants and toddlers, and school attendance.

“We joined the Campaign, because part of our strategy was to reduce the barriers to quality child care and early education that families were up against,” said Heuer, a Campaign Cabinet member.

Soon after that, when Polk Medical Center moved to a new facility, the vacant building it left behind in the heart of downtown Cedartown presented a new opportunity. Polk Family Connection collaborated
with the City of Cedartown, Floyd Medical Center, Primary Healthcare Centers, Cedartown-Polk County Hospital Authority, and Highland Rivers Health to establish the One Door Polk Network, a groundbreaking concept that offers a full spectrum of health care, social services, and economic development under one roof. Polk Family Connection—which has leveraged more than $3.5 million in investments over 18 years—is bringing together strategic partners to provide some of those social services, including a community resource library and thrift store.

“One Door Polk has poised our county and the City of Cedartown to become a national model,” said Heuer. “An essential area for our Collaborative is the Reading Oasis room, where local families without internet access can come to read thousands of digital books with their children, and where we can educate parents on how to use technology to model reading for their children and help them with homework.”

The community is learning the value of early education, and multiple groups are stepping up to read, tell stories, tutor, and play with children at the center. Ferst Foundation has made more than 2,500 books available for young children, and the local Head Start, health department, and other agencies are helping to get those books into the hands of families as they talk to parents about the importance of reading to their children. There are also Talk With Me Baby programs, and the Reach Out and Read initiative happening throughout the community, and the juvenile court recently installed a reading nook in the courthouse so young siblings can read while they wait with their families.

“We want every family that comes to One Door Polk for health care, mental health, juvenile justice, CASA, Medicaid, and other services to take advantage of the Reading Oasis room and other early education resources,” said Heuer. “We know we’ll see the positive impact of this for years to come.”

OUR VALUES IN ACTION:
We believe that lasting change is local—lending support, knowledge, and partnerships to craft local solutions to local challenges.
Doing well in school has lifelong implications for children and youth. School absences, falling behind on grades and standardized assessments, and disciplinary problems place youth at risk for dropping out of school. The lifelong value of a high-school diploma has been well-documented, and earnings potential and likelihood of employment increase with levels of education. Students who drop out, also known as disconnected youth, face steep challenges in the job market.
## Georgia Kids Count: Children Succeeding in School

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Base Rate</th>
<th>Current Rate</th>
<th>Base Number</th>
<th>Current Number</th>
<th>Change</th>
</tr>
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<tbody>
<tr>
<td>Children absent &gt;15 days from school</td>
<td>2003</td>
<td>2014</td>
<td>2003</td>
<td>2014</td>
<td>Better</td>
</tr>
<tr>
<td></td>
<td>13.8%</td>
<td>8.2%</td>
<td>226,791</td>
<td>151,946</td>
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<td>3rd-grade students achieving developing learner or above on Milestones assessment in ELA</td>
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<td>2015</td>
<td>NA</td>
<td>2015</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>NA</td>
<td>67%</td>
<td>NA</td>
<td>88,044</td>
<td></td>
</tr>
<tr>
<td>5th-grade students achieving developing learner or above on Milestones assessment in ELA</td>
<td>NA</td>
<td>2015</td>
<td>NA</td>
<td>2015</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>NA</td>
<td>73.1%</td>
<td>NA</td>
<td>93,167</td>
<td></td>
</tr>
<tr>
<td>5th-grade students achieving developing learner or above on Milestones assessment in Math</td>
<td>NA</td>
<td>2015</td>
<td>NA</td>
<td>2015</td>
<td>NA</td>
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<td></td>
<td>NA</td>
<td>74.8%</td>
<td>NA</td>
<td>95,616</td>
<td></td>
</tr>
<tr>
<td>8th-grade students achieving developing learner or above on Milestones assessment in ELA</td>
<td>NA</td>
<td>2015</td>
<td>NA</td>
<td>2015</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>NA</td>
<td>76%</td>
<td>NA</td>
<td>98,593</td>
<td></td>
</tr>
<tr>
<td>8th-grade students achieving developing learner or above on Milestones assessment in Math</td>
<td>NA</td>
<td>2015</td>
<td>NA</td>
<td>2015</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>NA</td>
<td>75.4%</td>
<td>NA</td>
<td>98,026</td>
<td></td>
</tr>
<tr>
<td>Students who graduate from high school on time</td>
<td>2011</td>
<td>2015</td>
<td>2011</td>
<td>2015</td>
<td>Better</td>
</tr>
<tr>
<td></td>
<td>67.5%</td>
<td>78.8%</td>
<td>88,391</td>
<td>98,465</td>
<td></td>
</tr>
<tr>
<td>Teens who are high-school dropouts (ages 16 – 19)</td>
<td>2005-09</td>
<td>2010-14</td>
<td>2005-09</td>
<td>2010-14</td>
<td>Better</td>
</tr>
<tr>
<td></td>
<td>8.8%</td>
<td>6.1%</td>
<td>49,438</td>
<td>34,986</td>
<td></td>
</tr>
<tr>
<td>Teens ages 16 – 19 not in school and not working</td>
<td>2005-09</td>
<td>2010-14</td>
<td>2005-09</td>
<td>2010-14</td>
<td>Better</td>
</tr>
<tr>
<td></td>
<td>10.6%</td>
<td>10.4%</td>
<td>59,304</td>
<td>59,380</td>
<td></td>
</tr>
</tbody>
</table>
Seat time matters. Chronic absenteeism, defined as missing more than 10 percent—or 15 days—of the school year, has profound effects on student achievement. A Georgia Department of Education study found that students who miss more school are less likely to graduate on time.

Economically disadvantaged students miss school at almost double the rate of students who are not economically disadvantaged.

**CHRONIC ABSENTEEISM:**

More than 186,000 students missed at least 10% of school in 2015.
TEST SCORES

The National Assessment of Educational Progress (NAEP) assesses students in multiple subjects at periodic intervals in the fourth and eighth grade, across all states. Georgia students have improved their scores in the past 20 years, but a persistent achievement gap remains for low-income, black, and Hispanic students.

Georgia fourth-grade students scored slightly above national averages in reading proficiency in 2015. More than four in 10 Georgia students scored at the Proficient level or higher. Black and Hispanic student scores have improved slightly over the past 23 years but a 20-point gap persists between students of color and white students. Students from low-income families scored 25 points lower than students from higher-income families.

Georgia fourth-grade students have long lagged national math scores, but now match the national average for proficiency. Four in 10 Georgia fourth-grade students scored at the Proficient level or higher in 2015. Students from lower-income families scored more than 20 points lower than students from higher-income families. The achievement gap between black students and other students is persistent.
TEST SCORES, CONTINUED

Georgia eighth-grade students scored slightly below the national reading average.

The percent of Georgia students at Proficient level or above has improved and is now just below the national average. Black students continue to lag their peers on reading. Students from low-income families scored 24 points lower than students from higher income families.

8TH-GRADE NAEP READING PROFICIENCY IMPROVES

Georgia eighth-grade students scored slightly below the national average on math, but the long-term trend shows improvement. The achievement gap persists for students of color and low-income students.

More than one-third of Georgia students scored at the Proficient level or above in 2015. Black student scores lag behind White students by 27 points in the most recent assessment. Hispanic student scores have declined over the past four years and lag white students by 20 points. Students from low-income families score more than 30 points lower than students from higher-income families.

8TH-GRADE NAEP MATH SCORES IMPROVE
GRADUATION RATES

Graduation rates improved 17 percent over the past five years, from 2011 to 2015. Policy changes enacted in 2015 removed the Georgia High-School Graduation Test requirement. Consequently, graduation rates improved nearly 9 percent from 2014 to 2015. Most states do not have a graduation test, and the upward trend in Georgia high-school graduation rates is giving more youth a chance for future success in work, higher education, and the military.

- Graduation rates have slowly increased; 78.8 percent of students graduated on time in 2015 compared to 67.5 percent in 2011, a 17-percent improvement in rates.
- Even with improved rates, more than 26,000 students did not graduate on time in 2015.
- The gap between students of color and white and Asian students has narrowed in the past five years, but still persists.

DISCONNECTED YOUTH

Youth who aren’t working or aren’t in school, also known as disconnected youth, face economic and personal challenges that are difficult to overcome. Poverty contributes to disconnectedness and is a consequence.

- Although unemployment has been declining and high-school graduation rates improving, there are 25 Georgia counties where more than one in five youth are idle and rates are more than double the state average.
- The idle youth rate is higher than the state rate of 10.4 percent in a majority of Georgia counties.
- However, the overall rate is at its lowest level in six years.

GEORGIA HIGH-SCHOOL GRADUATION RATE

DISCONNECTED YOUTH
CONNECTING COMMUNITY CONCERNS IN COOK COUNTY TO HELP CHILDREN GROW AND THRIVE

During a Cook County Family Connection Health Matters Seminar, a youth leader distributed sunflower seeds and flowerpots to demonstrate how communities must create fertile soil in which youth can take root, flourish, and blossom. Months later, photos of thriving sunflowers sprang up on social media.

“The bright yellow blooms became a powerful collaborative message about the future of our youth,” said Zoe Myers, the Collaborative coordinator in Cook County, where intergenerational poverty; health disparities; economic decline; and social risk factors that affect children’s health, safety, and academic success have historically been a struggle.

“STUDYING DATA TRENDS AND RISK FACTORS HAS HELPED PARTNERS UNDERSTAND THE INTERCONNECTEDNESS OF COMMUNITY CONCERNS. WE NOW REALIZE ISSUES CANNOT BE ADDRESSED IN SILO.”
—ZOE MYERS, COOK COUNTY FAMILY CONNECTION COORDINATOR

The Collaborative is facilitating a community-driven effort to improve youth health by expanding opportunities around healthy nutrition, active lifestyles, alcohol prevention, child abuse and neglect prevention, health care initiatives, and early child development.

“Studying data trends and risk factors has helped partners understand the interconnectedness of community concerns,” said Myers. “We now realize issues cannot be addressed in silo. We cannot focus on a child’s academic success without also addressing whether that child is hungry or malnourished, living in abject poverty, struggling with medical or dental problems, living in neglectful or abusive environments, or lacking access to strong protective factors.”
The Collaborative produces an annual Community Health Assessment and Environmental Scan and shares it with hundreds of stakeholders. “The report serves as our battle cry for community change, while attracting and motivating partners,” said Myers. Local partners range from volunteers who run food programs, to university professors who direct assessment and evaluation processes, to elected officials who speak for Family Connection within peer networks.

“Our fantastic team has a firm pulse on the community,” said Collaborative member Col. Ron Mitchell of the local Chamber. “We can always count on Family Connection to provide the facts that help our community boards and authorities make the right decisions to move us forward.”

The Collaborative has secured nearly $7 million over the past 20 years by following a sustainability plan that outlines steps to expand human, social, and material resources. The Collaborative has built two playgrounds, organized a summer recreation program, negotiated joint use agreements with local agencies to share access to play and recreation facilities, spearheaded nutrition and physical activity policies at the local Boys & Girls Club, and promoted access to healthy foods through community gardens and mobile produce deliveries.

Beyond that, emerging partnerships include local farmers, who are donating surplus food for a mobile produce truck, and the State Office of Rural Health funding, which is building a cross-county rural health network.

Recent data show Cook County youth are exercising and eating more fruit than the state and national averages. They’re also thriving academically, with 75 percent of children enrolled in Pre-K and an 80-percent high-school graduation rate—both higher than the state averages.

“We envision a community where all children can grow, play, and learn free from the risks of poor health, addiction, abuse, or violence,” said Myers. “And, of course, children who are healthy and safe are much more likely to succeed academically.”

OUR VALUES IN ACTION:
We believe all people have the ability to become productive citizens—helping people reach their potential by empowering the children and families of our communities, and the partners and stakeholders who support them.
GEORGIA KIDS COUNT: STABLE, SELF-SUFFICIENT FAMILIES

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>BASE RATE</th>
<th>CURRENT RATE</th>
<th>BASE NUMBER</th>
<th>CURRENT NUMBER</th>
<th>CHANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>First birth to mothers age 20 and older with 12 years of education</td>
<td>1994</td>
<td>2015</td>
<td>1994</td>
<td>2015</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>66.2%</td>
<td>79.2%</td>
<td>31,304</td>
<td>35,990</td>
<td></td>
</tr>
<tr>
<td></td>
<td>31.9%</td>
<td>34.2%</td>
<td>699,597</td>
<td>740,291</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8.1%</td>
<td>8.7%</td>
<td>189,534</td>
<td>204,341</td>
<td></td>
</tr>
<tr>
<td>Households, with children, receiving food stamps (number)</td>
<td>2003</td>
<td>2013</td>
<td>2003</td>
<td>2013</td>
<td>WORSE</td>
</tr>
<tr>
<td></td>
<td>NA</td>
<td>NA</td>
<td>183,305</td>
<td>426,660</td>
<td></td>
</tr>
<tr>
<td>Children with a substantiated incident (per 1,000):</td>
<td>2009</td>
<td>2014</td>
<td>2009</td>
<td>2014</td>
<td>WORSE</td>
</tr>
<tr>
<td>Abuse and/or neglect</td>
<td>8.9</td>
<td>10.2</td>
<td>22,120</td>
<td>25,350</td>
<td></td>
</tr>
<tr>
<td>Abuse</td>
<td>2.9</td>
<td>3.6</td>
<td>7,250</td>
<td>8,917</td>
<td></td>
</tr>
<tr>
<td>Neglect</td>
<td>6.7</td>
<td>7.6</td>
<td>16,678</td>
<td>18,950</td>
<td></td>
</tr>
<tr>
<td>Children leaving foster care who are reunified with their families or placed with a relative within 12 months of entering foster care</td>
<td>2007</td>
<td>2013</td>
<td>2007</td>
<td>2013</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>67.2%</td>
<td>72.1%</td>
<td>4,862</td>
<td>2,960</td>
<td></td>
</tr>
</tbody>
</table>
A stable family structure is critical to the future success of children and the strength of any community.

Low-income and single-parent families can face challenges in providing the basic necessities of life for their children. Children whose families face economic difficulties are at higher risk of living in poverty, of experiencing child abuse and neglect, and may lack access to quality health care and benefits. Under-education, under-employment, unemployment, and the need for public assistance also threaten family independence and self-sufficiency.

A community’s development, along with its sustainable, long-term economic strength, depends on stable families who have abundant opportunities to afford healthy food, become gainfully employed, and access the necessary supports to become self-sufficient and contribute to their community.
FIRST BIRTH TO MOTHERS AGE 20 OR OLDER WITH 12 YEARS OF EDUCATION

Delaying childbirth until age 20 and completing high school before giving birth benefits both mother and baby. Mothers who delay childbirth beyond their teen years are more likely to attain higher levels of education and earn higher wages to better support their families. They also tend to receive prenatal care and give birth to infants with fewer health problems from birth through age 17. Their children are more frequently in early-learning programs and home literacy activities, enter school with a higher level of academic skills, and earn higher average reading and math test scores.

This trend has been improving steadily since 2000, and by 2015 the rate of first birth to mothers age 20 or older with a high-school education had improved to 79.2 percent, a 19.6-percent increase.

CHILDREN LIVING IN FAMILIES WHERE NO PARENT IS IN THE LABOR FORCE

Secure parental employment increases family income and reduces poverty. Children with parents who have steady employment are more likely to have access to health care.

Economic pressures often lead to negative effects, including parental conflict and an increased likelihood of separation and divorce. Children with unemployed parents are at increased risk for homelessness, child abuse or neglect, and failure to finish high school or college.

In 2008 the rate of children in Georgia whose parents lack secure employment and have no parent in the labor force working at least 35 hours per week for at least 50 weeks in the 12 months prior to the survey was 8.1 percent, but by 2014, the rate had risen to 8.7 percent.
According to the National Center for Children in Poverty (NCCP), the data show that when looking at parental employment by income level in Georgia:

- 30 percent of children in poor families have at least one parent who is employed full time, year-round compared to 84 percent of children in non-poor families.
- 31 percent of children in poor families do not have an employed parent compared to 4 percent of children in non-poor families.

CHILDREN WHOSE FAMILIES FACE ECONOMIC DIFFICULTIES ARE AT HIGHER RISK OF LIVING IN POVERTY, OF EXPERIENCING CHILD ABUSE AND NEGLECT, AND MAY LACK ACCESS TO QUALITY HEALTH CARE AND BENEFITS.

CHILDREN WHOSE FAMILIES FACE ECONOMIC DIFFICULTIES
79.2%
FIRST-TIME BIRTHS TO MOTHERS OVER AGE 20 WITH A HIGH-SCHOOL EDUCATION

CHILDREN WHOSE FAMILIES
8.7%
CHILDREN LIVED IN FAMILIES WITHOUT FULL-TIME, YEAR-ROUND EMPLOYMENT

650,970 FOOD-INSECURE CHILDREN, A RATE OF 26.1%
Program, also known as the Supplemental Nutrition Assistance Program (SNAP), provides a temporary safety net of monthly benefits to eligible Georgia households with a gross income below 130 percent of the federal poverty level and limited resources.

This anti-hunger program helps individuals and families purchase food when they have limited income, face unemployment or reduced work hours, or experience a short-term economic crisis. SNAP also provides nutrition education to promote healthy eating and healthy lifestyles, and offers employment and training opportunities for single, childless adults.

Feeding America shows that Georgia has 650,970 food insecure children, a rate of 26.1 percent.

Food nutrition programs are critical weapons in the fight against child and family hunger. The federally funded Georgia Food Stamp Program helps children grow healthy and strong.
FOSTER CARE REUNIFICATION

Children enter foster care when it is determined that it is unsafe for them to remain at home.

Placement in foster care can be a traumatic experience. Multiple, prolonged, or unstable out-of-home placements can have a negative impact on children’s behavioral and emotional well-being.

When in the best interest of the child, timely reunification with family is essential for stability. There is evidence suggesting that children placed into kinship care have fewer behavioral problems than children in other types of foster care. However, their caregivers may be less likely to receive the same level of support services as non-relative foster parents.

SUBSTANTIATED INCIDENTS OF CHILD ABUSE AND/OR NEGLECT

Young children who suffer maltreatment are at increased risk as adults for adverse health effects and behaviors, including substance abuse, eating disorders and obesity, depression, suicide, sexual promiscuity, and certain chronic diseases.

Early experiences shape the developing brain, laying the foundation for future learning and lifelong physical and emotional health. Victims of early maltreatment—abuse or neglect—may experience toxic stress, which disrupts normal development of crucial regions of the brain and may result in life-long problems.

Georgia’s rate of substantiated incidents of child abuse and/or neglect has increased from 8.9 per 1,000 in 2009 to 10.2 per 1,000 in 2014.
EARLY COUNTY FAMILY CONNECTION—
NURTURING THE COMMUNITY’S MOST
VALUABLE RESOURCE—YOUTH AND FAMILIES

“We approach young people too often as a set of problems to solve, rather than as a set of resources to develop,” said Gwen Houston, Early County Family Connection coordinator.

Reversing that approach is how the Collaborative is transforming the culture in Early, one of the largest land counties in Georgia with only 12,000 residents and among the poorest in the state. Growing up in those demographics, the average teenager has little to do outside of school and church—so they turn to tobacco and drug use, and sexual activity. To compound matters, Early County has been identified as a high contributor in alcohol-related youth arrests in Georgia.

“People who live in rural, poverty-stricken communities like ours just accept that there’s nothing else for teenagers to do on weekends except drink, and adults are willing to provide the alcohol,” said Houston. “And it’s OK if you drop out or get pregnant, because that’s the way it’s always been. Our Collaborative is changing those community norms.”

Early County Family Connection committed to reducing risky youth behaviors in 2009 in response to alarming student health and community survey data, police reports, focus groups, and town-hall meetings, with help from a grant through the Georgia Department of Behavioral Health and Developmental Disabilities Office of Prevention.

“We’ve braided our efforts to establish a strong prevention framework,” said Houston. “One strategy team may be addressing teen pregnancy and another underage drinking, but they’re still working together to focus attention, resources, and community supports to provide families with what they need to succeed.”

After assessing youth arrests for alcohol possession, along with other variables that were contributing to those arrests, the Collaborative engaged additional partners, devised strategies to increase youth and adult awareness about the dangers of underage drinking, and informed adults about the legal consequences of providing alcohol to minors.

“One of our Collaborative’s guiding principles is to help young people grow in social, emotional, physical, civic, and cultural ways within
“THE COLLABORATIVE IS THE ONLY PREVENTION SYSTEM IN PLACE FOR COMMUNITY MEMBERS TO WORK TOGETHER EFFICIENTLY AND STRATEGICALLY TO PROMOTE POSITIVE YOUTH DEVELOPMENT, AND TO REDUCE PROBLEM BEHAVIORS.”

a family and community that values them,” said Houston. “The Collaborative is the only prevention system in place for community members to work together efficiently and strategically to promote positive youth development, and to reduce problem behaviors.”

Strong partnerships with the local Board of Commissioners, and public and private partners are evidence of that collaboration. But those critical relationships did not come easily.

“We’ve spent every day building trust—and keeping it,” said Houston. “We’re successful today because this community knows Family Connection has only one purpose—to help children and families succeed.”

And succeeding they are.

“Through Early County Family Connection, I learned more about myself and how to make better choices,” said John Walker, a young adult who grew up participating in Family Connection events and programs. “The Abstinence program instilled in me leadership skills and showed me how to say no to sex, drugs, and alcohol, and I made lasting positive friendships. The staff treated me like family and was there for me and for my own family during difficult times.”

OUR VALUES IN ACTION:
We believe in accountability—making things measurably better by forging relationships in trust, by learning from our successes and our missteps, and by being loyal stewards of our resources.
COMMUNITIES THAT THRIVE

We know that healthy, vibrant people help create strong communities, but the inverse is also true: healthy communities can help foster and protect happy, healthy residents. When a community thrives and its members participate in civic life, crime rates go down, public health outcomes improve, and employment is more resilient. This is why understanding what makes a strong community and how to track those factors is so key to building a stronger Georgia.

Many of Georgia KIDS COUNT’s strong community indicators are worse than they were 10, 15, or 20 years ago, specifically those relating to poverty and unemployment. These indicators—and our communities—were deeply affected by the economic recession. While the numbers have begun to level off and even improve over the past two years, Georgia still has a long way to go to reach pre-recession levels.

To address these declines, Georgia Family Connection Partnership published a report examining civic health in 2013—and in 2015, Georgia Family Connection began work across the state to gather and analyze civic health data and develop strategies to improve the strength of our communities.
<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>BASE RATE</th>
<th>CURRENT RATE</th>
<th>BASE NUMBER</th>
<th>CURRENT NUMBER</th>
<th>CHANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>High-School Graduate or Higher</td>
<td>2005-09</td>
<td>2010-14</td>
<td>2005-09</td>
<td>2010-14</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>82.9%</td>
<td>85%</td>
<td>5,002,579</td>
<td>5,451,046</td>
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<tr>
<td>Bachelor’s Degree or Higher</td>
<td>2005-09</td>
<td>2010-14</td>
<td>2005-09</td>
<td>2010-14</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>27.1%</td>
<td>28.3%</td>
<td>1,635,481</td>
<td>1,814,893</td>
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<tr>
<td>GED Graduates</td>
<td>2008</td>
<td>2014</td>
<td>2008</td>
<td>2014</td>
<td>WORSE</td>
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<tr>
<td></td>
<td>NA</td>
<td>NA</td>
<td>19,696</td>
<td>3,223</td>
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<tr>
<td></td>
<td>3.6%</td>
<td>5.9%</td>
<td>150,696</td>
<td>279,942</td>
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</tr>
<tr>
<td></td>
<td>18%</td>
<td>24%</td>
<td>389,000</td>
<td>603,000</td>
<td></td>
</tr>
<tr>
<td>Families, with Children, with Annual Incomes &lt; 150% Federal Poverty Level</td>
<td>2005-09</td>
<td>2010-14</td>
<td>2005-09</td>
<td>2010-14</td>
<td>WORSE</td>
</tr>
<tr>
<td></td>
<td>27.3%</td>
<td>32.7%</td>
<td>340,003</td>
<td>405,742</td>
<td></td>
</tr>
<tr>
<td>Children Living in High-Poverty Areas</td>
<td>2005-09</td>
<td>2010-14</td>
<td>2005-09</td>
<td>2010-14</td>
<td>WORSE</td>
</tr>
<tr>
<td></td>
<td>9.1%</td>
<td>16.9%</td>
<td>277,558</td>
<td>421,813</td>
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<tr>
<td>Homeownership</td>
<td>2005-09</td>
<td>2010-14</td>
<td>2005-09</td>
<td>2010-14</td>
<td>WORSE</td>
</tr>
<tr>
<td></td>
<td>67.5%</td>
<td>64.2%</td>
<td>2,307,248</td>
<td>2,272,001</td>
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</tr>
<tr>
<td>Violent Crime (per 1,000)</td>
<td>2001</td>
<td>2014</td>
<td>2001</td>
<td>2014</td>
<td>BETTER</td>
</tr>
<tr>
<td></td>
<td>14.6</td>
<td>7.1</td>
<td>91,455</td>
<td>54,929</td>
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</tr>
<tr>
<td>Other Crime (per 1,000)</td>
<td>2001</td>
<td>2014</td>
<td>2001</td>
<td>2014</td>
<td>BETTER</td>
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<tr>
<td></td>
<td>88.2</td>
<td>32.8</td>
<td>554,093</td>
<td>252,852</td>
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</tr>
<tr>
<td>Voter Participation (Presidential)</td>
<td>2004</td>
<td>2014</td>
<td>2004</td>
<td>2014</td>
<td>WORSE</td>
</tr>
<tr>
<td></td>
<td>77%</td>
<td>72%</td>
<td>3,285,140</td>
<td>3,919,355</td>
<td></td>
</tr>
</tbody>
</table>
CRIME

Crime rates have decreased since 2001, and have stabilized over the past several years.

ADULT EDUCATIONAL ATTAINMENT

Across the board, adult educational attainment has increased. Between 2005-09 and 2010-14, the number of adults who had a high-school diploma or higher jumped by almost 450,000 people. Graduating from high school makes it easier to access post-secondary education, easier to find a job, and makes it less likely that someone will end up in poverty or involved with the justice system.
UNEMPLOYMENT

Georgia’s unemployment rate is higher than it was at the start of the millennium, but has improved significantly from its peak of 10.5 percent in 2010. Though still not back to pre-recession levels, the unemployment rate has dropped by more than 40 percent during the past five years. Higher rates of employment and full-time employment, solidifies much more than a community’s economic base.

GEORGIA’S UNEMPLOYMENT RATE, 2000-2015

at a glance

450,000 🎓 INCREASE IN NUMBER OF HIGH-SCHOOL DIPLOMAS BETWEEN 2005-09 AND 2010-14

IN LAST 5 YEARS, DECREASE IN UNEMPLOYMENT MORE THAN 40%

WE KNOW THAT HEALTHY, VIBRANT PEOPLE HELP CREATE STRONG COMMUNITIES, BUT THE INVERSE IS ALSO TRUE: HEALTHY COMMUNITIES CAN HELP FOSTER AND PROTECT HAPPY, HEALTHY RESIDENTS.
COMMUNITIES THAT THRIVE

BALDWIN COUNTY FAMILY CONNECTION—RESTORING HEALTH AND VIBRANCY TO A LOCAL COMMUNITY

The great recession of 2007 had a profound effect on Baldwin County, and especially on Harrisburg, a neighborhood outside Milledgeville—a once-thriving community that had fallen into decline. Baldwin County was facing an unemployment rate of 16.5 percent in 2011, but in the Harrisburg neighborhood, that rate was nearly 25 percent.

Baldwin County Family Connection and its local partners figured out how to revitalize a county still reeling from the worst financial crisis since the Great Depression by focusing their efforts on the Harrisburg neighborhood—and on gardening.

“WE HAVE A COMMUNITY OF PARTNERS WHO ARE WILLING TO WORK TOGETHER AND SHARE RESOURCES. THAT HAS MADE US ATTRACTIVE TO INVESTORS.”
—JANET CAVIN, BALDWIN COUNTY FAMILY CONNECTION COORDINATOR

“Conversations turned into planning, which got the wheels in motion to obtain grants and put those plans into action,” said Collaborative coordinator Janet Cavin. “We have a community of partners who are willing to work together and share resources. That has made us attractive to investors.”

The Collaborative built on the Milledgeville Garden Association’s work to secure funding for a community garden, walking trail, and pavilion. Thanks to a $40,000 grant from the Knight Foundation, that project evolved into an assembly of community partners exploring strategies to significantly improve the lives of residents and families. Located on the grounds of an abandoned school building, part of which has been converted into a community center, the garden project took root and began to spread.
The Collaborative also formed relationships with Baldwin County Parks and Recreation Department, Georgia College and State University, Habitat for Humanity, the local hospital, and several local churches and businesses. Another strong partnership that emerged from this work was with Live Healthy Baldwin, a community-wide initiative with a goal to reverse the childhood obesity epidemic among at-risk children.

“They had already been working on improving healthy lifestyles within the county for three years,” said Cavin. “That gave the effort momentum and connection to volunteers, new partners, and community leaders. We leveraged these partnerships to secure resources, training, and funding through the Georgia Family Connection Obesity Cohort.”

The Collaborative’s work gained attention from Habitat for Humanity International, which chose Milledgeville to host its 2016 Southeastern Summit, because of the strong community partner relationships and their willingness to develop a comprehensive plan.

“Partnerships are the hallmark of success,” said Murali Thirumal, Habitat for Humanity executive director. “Working with Family Connection, which already had a vested interest in Harrisburg, certainly helped elevate our mission to a new threshold.”

Residents of the Harrisburg neighborhood are already seeing results. Bicycle events are popping up, there are three new after-school programs and a new summer program, 33 families are growing their own vegetables, kids are playing, and families are exercising. There also are opportunities for families to learn how to choose, and buy, fresh fruits and vegetables—and gain information on obesity prevention.

“City and county governments also have begun to make policy changes that will build on our work, like 60 minutes of physical activity built into the school day, and upgrading streets to accommodate pedestrians and bicyclists,” said Cavin. “The relationships we’ve built, crossing racial, socio-economic, cultural, and educational lines, could have benefits for years to come.”

OUR VALUES IN ACTION:
We believe that by working together we can nurture children and families who thrive in vibrant communities—everywhere.
Georgia Family Connection knows the significance of counting, connecting, and collaborating. These are the strands in our statewide network’s DNA that set us apart as a national model.

We count what matters. Corporations have long known this, and we who care about Georgia’s children, families, and communities know it too. With a quarter century of tracking measures, disseminating data, and watching trends, our experience informing local decision-making and seeking solutions through collaboration have started to pay off for our most vulnerable Georgians.

This report is more than a celebration of individual examples of collective impact we’ve achieved over the past 25 years. It demonstrates how our disciplined approach to collaboration—when applied and sustained over time—can make a real and lasting difference for our communities.
Our journey shows that true collaboration is hard work—made successful by leaders dedicated to building trust and local solutions and by partners willing to forge open, honest relationships with their community peers. That’s why accountability is one of our core values. But back in the 1990s, we abandoned a rigid approach to accountability, and instead adopted flexibility, adaptability, and individuality. That’s where we discovered innovation.

Every success and every failure we’ve encountered has presented learning opportunities that we’ve seized to better understand collaboration. We must always keep these lessons at the forefront of our work.

In the coming years, we will continue to address early childhood health and education and low birthweight, because these are primary predictors of how well our children will fare down the road.

But our work also must strive to achieve race equity, so all children have the same opportunity to reach the potential we know they have, and civic health, because communities where people are well-connected and trust each other are stronger and more successful—both for individual families and as a whole.

Georgia is poised to do tremendous things in the coming years to ensure that this state remains a great place both to raise children and to do business. And, in the end, it’s really all the same thing.

I was born, raised, and educated in this state, and I care deeply about the success of my fellow Georgians. While we do have a lot to celebrate, we still have a lot of work to do. And tomorrow’s work must begin where our work always has—with data and a conversation. I hope this book will assist you with both as we journey into this next era of work—together.

Sincerely,

Gaye Smith
Executive Director
WE ENVISION A GEORGIA WHERE ALL CHILDREN ARE HEALTHY, PRIMED FOR SCHOOL, AND SUCCEED WHEN THEY GET THERE; AND WHERE STRONG FAMILIES CONTRIBUTE TO VIBRANT, ROBUST COMMUNITIES THAT THRIVE