

Family Resource Agency of North Georgia Community Assessment 2026



Mission: "To impact our communities through education, advocacy, and care."

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1302.11 Determining community strengths, needs, and resources:

(b) Community wide strategic planning and needs assessment (community assessment).

(1) A program must conduct a comprehensive community assessment at least once over the five-year grant period and annually review and update if any significant changes are needed as described in paragraph (b)(5) of this section to:

(i) Identify populations most in need of services including prevalent social or economic factors, challenges, and barriers experienced by families and children;

(ii) Inform the program's design and to ensure equitable, inclusive, and accessible service delivery that reflect needs and diversity of the community;

(iii) Inform the enrollment, recruitment, and selection process to prioritize the enrollment of those populations with relevant circumstances identified under paragraph (b)(1)(i) of this section;

(iv) Identify strengths and resources in the community that can be leveraged for service delivery, coordination, and partnership efforts for education, health, nutrition, and referrals to social services to eligible children and families; and,

(v) Identify the communication methods and modalities available to the program that best engage with prospective and enrolled families in accessible ways.

(2) In conducting the community assessment, the program must collect and utilize data that describes community strengths, needs, and resources and include, at a minimum:

(i) Relevant demographic data about eligible children and expectant mothers, including:

(A) Race and ethnicity; (B) Children living in poverty; (C) Children experiencing homelessness in collaboration with, to the extent possible, McKinney-Vento Local Education Agency Liaisons (42 U.S.C. 11432 (6)(A)); (D) Children in foster care; (E) Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies; and (F) Geographic location and languages they speak.

(ii) The education, health, nutrition and social service needs of eligible children and their families, including prevalent social or economic factors, challenges, and barriers to program participation such as transportation needs; (iii) Typical work, school, and training schedules of parents with eligible children; (iv) Other child development, child care centers, and family child care programs that serve eligible children, including home visiting, publicly funded State and local preschools, and the approximate number of eligible children served and their ages;

(v) Resources that are available in the community to address the needs of eligible children and their families, especially transportation resources, and culturally appropriate and responsive supports; (vi) Strengths of the community; and, (vii) Gaps in community resources in areas relevant to addressing the needs of eligible children and their families such as gaps in health and human services, housing assistance, food assistance, employment assistance, early childhood development, and social services.

(3) Programs should have a strategic approach:

(i) To determine what data to acquire to reach goals in paragraph (b)(1) of this section prior to conducting the community assessment; and

(ii) For how to use the data acquired to reach goals in paragraph (b)(1) of this section after conducting the community assessment.

(4) When determining what data to acquire under paragraph (b)(2) of this section programs should consider what information is most relevant to inform services for families most in need. Data gathering should be informed by the program's understanding of the community and be intentionally designed to help the program identify community strengths, needs and resources, and plan the program accordingly. Programs are not required to collect all information themselves; rather programs should utilize community partners and utilize existing available data sources relevant to the local community.

(5) A program must annually review and, where needed, update the community assessment to identify any significant shifts in community demographics, needs, and resources that may impact program design and service delivery. As described in paragraph (b)(4) of this section, programs should consider results from their self-assessment as required in subpart J of this part (§§ 1302.101 through 1302.103) and their annual funding application to inform this process. The annual update review must consider at a minimum: changes related to children and families experiencing homelessness; how the program addresses equity, accessibility, and inclusiveness in its provision of services; and changes to the availability of publicly-funded pre-kindergarten and whether it meets the needs of families. Programs must consider how the annual review and update can inform and support management approaches for continuous quality improvement, program goals, and ongoing oversight.

(6) A program must consider whether the characteristics of the community allow it to include children from diverse economic backgrounds that would be supported by other funding sources, including private pay, in addition to the program's eligible funded enrollment. A program must not enroll children from diverse economic backgrounds if it would result in a program serving less than its eligible funded enrollment.

Executive Summary

The Community Assessment identifies three critical focus areas impacting program effectiveness and long-term family outcomes: chronic child absenteeism, low adult educational attainment (GED needs), and targeted recruitment of underserved populations. These factors are interconnected and directly influence school readiness, family stability, and program reach.

1. Child Attendance: Chronic Absenteeism as a Barrier to School Readiness

Chronic absenteeism is a significant concern across the six-county service area. Program data show absenteeism rates as high as:

Similar patterns are seen in local kindergarten populations, confirming that attendance challenges begin early and persist into formal schooling.

Key contributing factors include:

- Transportation barriers in rural areas
- Seasonal illness and limited healthcare access
- Family instability (employment, housing, scheduling challenges)

Implication: Inconsistent attendance disrupts early learning, weakens school readiness outcomes, and increases the risk of long-term academic challenges.

2. GED and Adult Education Needs: A Critical Family Stability Factor:

The service area demonstrates low higher education attainment (20.7%), significantly below state and national averages. In addition, data on teen pregnancy and births to mothers without a high school diploma—particularly in Whitfield, Walker, and Murray counties—highlight a continued need for adult education and GED support.

Key challenges include:

- Limited access to postsecondary education pathways
- Intergenerational cycles of low educational attainment
- Economic barriers that prevent parents from continuing education

Implication: Parents without a high school diploma or GED often face reduced employment opportunities, directly impacting family income, stability, and children's educational outcomes.

3. Recruitment Priorities: Targeting Underserved and High-Need Populations:

The assessment reveals substantial gaps between eligible children and those currently served. Recruitment must prioritize populations with the highest unmet need:

Priority recruitment areas include:

- Whitfield County: Highest population, largest number of unserved eligible children
- Walker and Catoosa Counties: High numbers of eligible children with service gaps
- Chattooga County: Highest poverty rate (20.7%) but low utilization of services

Priority populations:

- Infants and toddlers (largest Early Head Start gaps)
- Children in poverty or near-poverty households
- Homeless and foster children (categorically eligible)
- Dual language learners (especially Spanish-speaking families)

Family Resource Agency of North Georgia-National Goals and Objectives



Parent, Family, and Community Engagement:

Our program follows the Parent, Family, and Community Engagement (PFCE) Framework, which categorizes family goals into seven key outcomes:

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

Strong family outcomes directly support children's school readiness. Family Service Advocates actively engage parents, providing guidance and resources to help them achieve their goals. To track progress, our program assesses Family Outcomes three times per year—Fall, Winter, and Spring.



School Readiness Statement:

Our program is guided by the Head Start Early Learning Outcomes Framework, Parent-Family-Community Engagement Framework, Georgia Early Learning and Development Standards (GELDS), and the requirements and expectations of local schools. These frameworks shape our curriculum implementation, ongoing assessment of children's progress, and overall preparation for school success. We define School Readiness as ensuring that every child enters school prepared to learn, building on early learning experiences in Head Start, Early Head Start, and Pre-K that foster success in all areas of development, as outlined in the Head Start Early Learning Outcomes Framework. To monitor progress, our program evaluates Child Outcomes three times per year—in the Fall, Winter, and Spring.

Service Area-County Characteristics & Map

Family Resource Agency of North Georgia (FRA) provides Head Start, Pre-K, Early Head Start, and Childcare Partnership services to children and families across a six-county service area located in the northwestern corner of Georgia. This region borders Tennessee to the north and Alabama to the west and encompasses approximately 1,725 square miles.

The service area is largely rural, characterized by mountainous terrain, including areas within the Chattahoochee National Forest. Communities throughout the region are primarily composed of small towns and rural villages, which can present geographic and transportation challenges for families accessing services.

County characteristics include:

- Walker County (446.7 square miles) is the largest county in the service area and includes sections of the Chattahoochee National Forest.
- Murray County (336.9 square miles) is the second largest county, includes portions of the Blue Ridge Mountain area, and borders Tennessee.
- Chattooga County (314.0 square miles) is the third largest county and borders Alabama.
- Whitfield County (290.7 square miles) is the fourth largest county, features mountainous terrain, and borders Tennessee.
- Dade County (174.1 square miles) is the second smallest county, flanked by Lookout Mountain and Sand Mountain, and borders both Alabama and Tennessee.
- Catoosa County (162.7 square miles) is the smallest county in the service area and borders Tennessee.

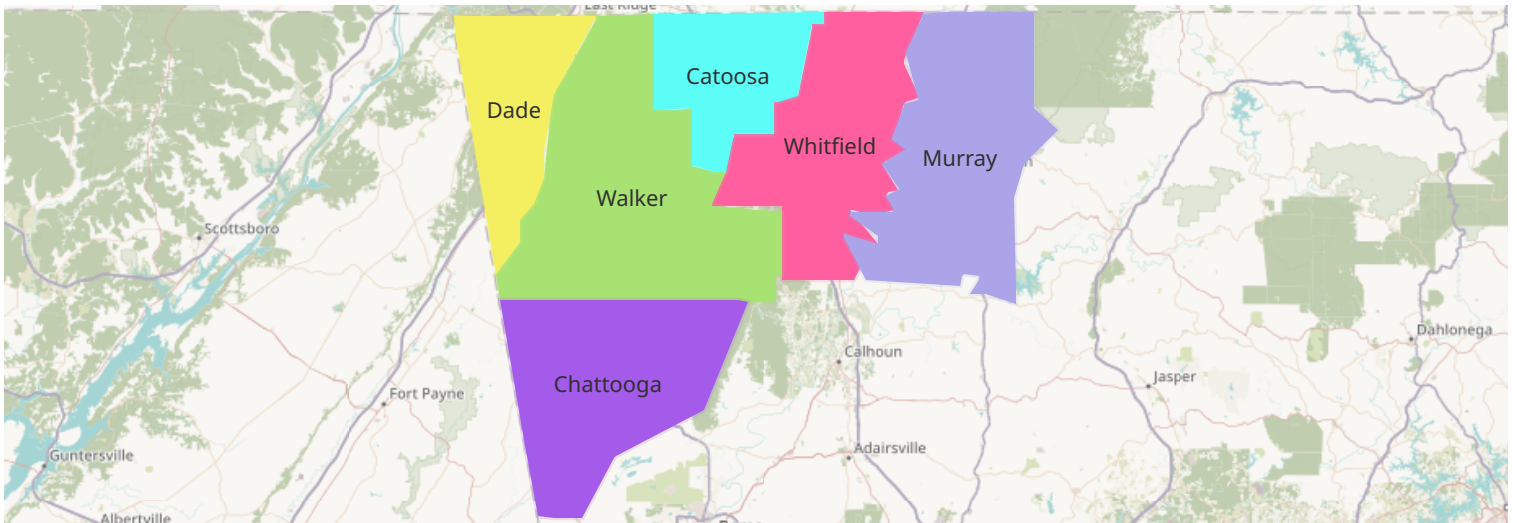
The six-county service area—comprised of Catoosa, Chattooga, Dade, Murray, Walker, and Whitfield counties—has an estimated total population of approximately 326,000 residents based on the most recent available data (2026 estimates).

Dalton, located in Whitfield County, is the largest city within the service area, with an estimated population of approximately 35,200 residents, and serves as the primary population and economic center for the region. Fort Oglethorpe, spanning Catoosa and Walker counties, is the second-largest city, with an estimated population of approximately 10,600 residents.

Other municipalities in the service area are smaller in size and include:

- Ringgold (Catoosa County): approximately 3,400 residents
- Rossville (Walker County): approximately 3,900 residents
- Chickamauga (Walker County): approximately 3,000 residents
- Trenton (Dade County): approximately 2,200 residents
- The region is characterized by a mix of small cities and rural communities, with population density concentrated primarily in and around Dalton and surrounding areas of Whitfield, Catoosa, and Walker counties.

U.S. Census Bureau. (2024). QuickFacts: Georgia counties.
<https://www.census.gov/quickfacts> Jan. 2026

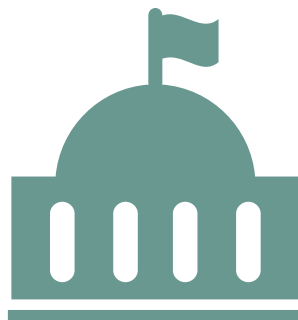


● Catoosa ● Chattooga ● Dade ● Murray ● Walker ● Whitfield

County Government-Service Area

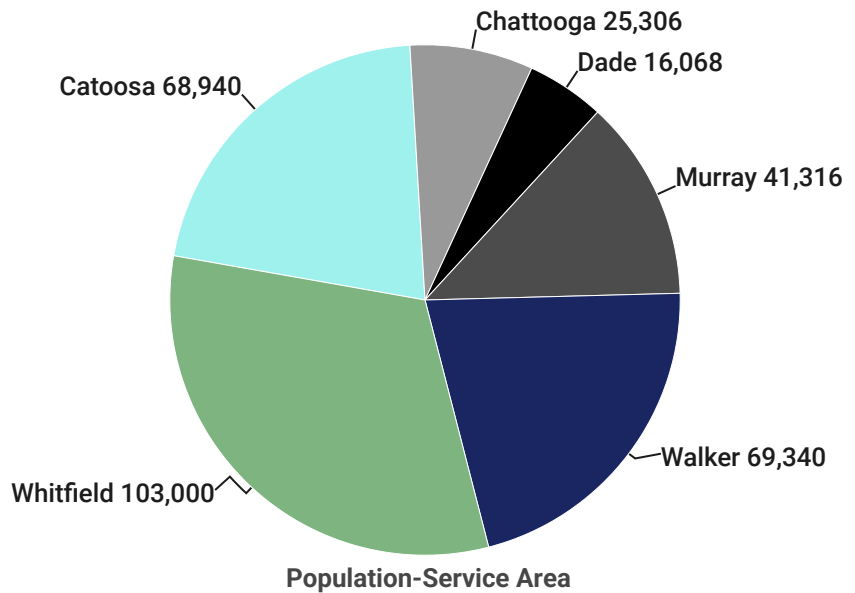
These governance structures reflect the diverse approaches to local administration in Northwest Georgia, with some counties maintaining Sole Commissioner systems and others operating under Boards of Commissioners.

County	Governing Authority
Catoosa	Governed by a five-member Board of Commissioners, with members elected by district and the chairman elected at-large. The Board sets policies, enacts ordinances, and oversees county operations.
Chattooga	Operates under a Sole Commissioner system, where a single official holds both legislative and executive authority, managing county affairs and collaborating with other agencies.
Dade	Transitioned from a Sole Commissioner to a Board of Commissioners structure, comprising multiple members who share legislative and executive responsibilities.
Murray	Utilizes a Sole Commissioner form of government, with one official overseeing all legislative and executive functions
Walker	Formerly under a Sole Commissioner system, it transitioned to a five-member Board of Commissioners in 2021. This board consists of four district-elected commissioners and a chairperson elected at-large, collectively managing county operations.
Whitfield	Governed by a five-member Board of Commissioners, with each member elected from one of five districts. The Board is responsible for setting policies, managing finances, adopting ordinances, and overseeing land use decisions.



Population-Service Area Counties

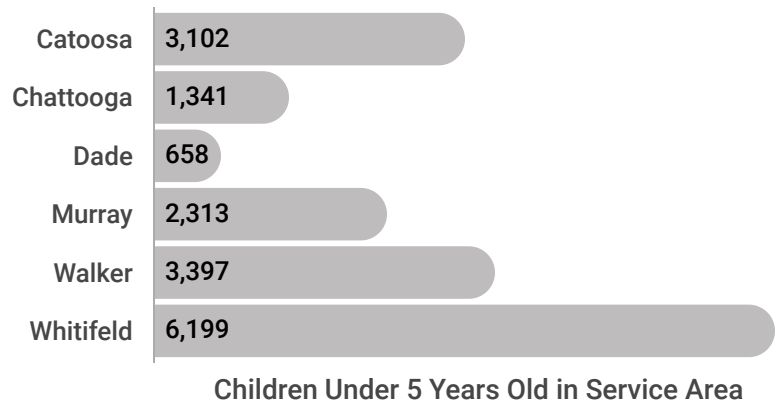
- Whitfield County has the largest population among the six counties, with over 103,000 residents.
- Catoosa County and Walker County have similar population sizes, both around 68,000-69,000.
- Murray County has a moderate population size of about 41,000.
- Chattooga County and Dade County have the smallest populations, with approximately 25,000 and 16,000 residents.



Head Start Service Need:

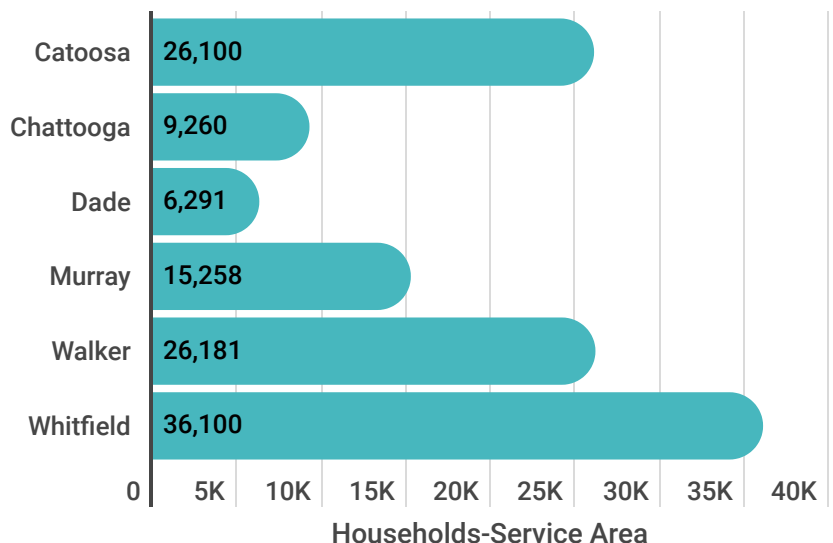
The six-county region has a notable population of children under age five who may be eligible for Head Start and Early Head Start services.

Whitfield County shows the greatest potential demand with 6,199 children, followed by Walker (3,397), Catoosa (3,102), and Murray (2,313). While Chattooga (1,341) and Dade (658) counties have smaller populations, continued Head Start outreach is essential to reach eligible families in rural and underserved communities. These figures support the ongoing need for accessible, adequately funded Head Start services across the region.



Community Demographics and Head Start Need:

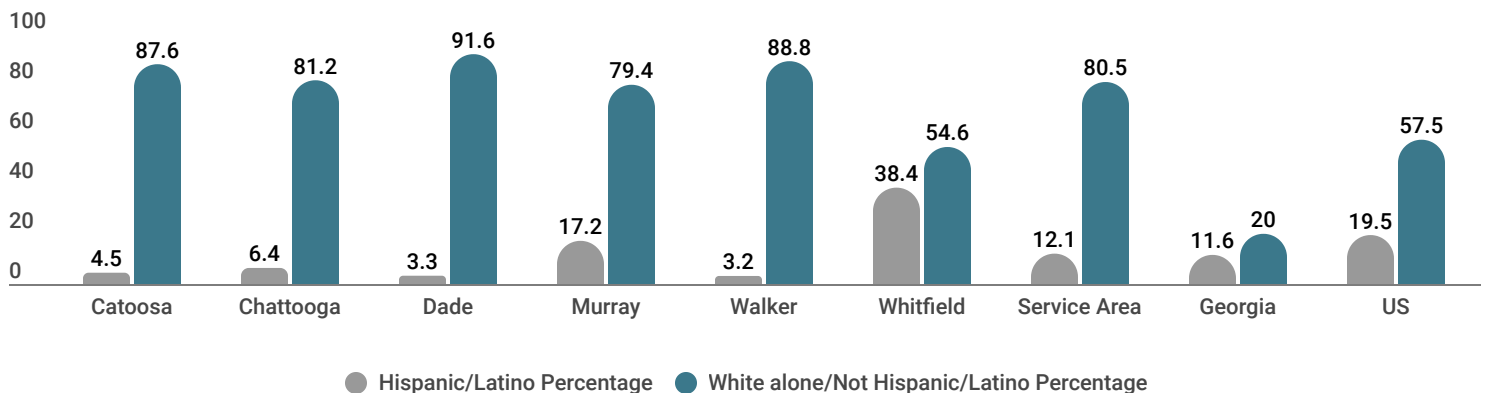
Across the six-county region, children under age five make up a meaningful share of households. Whitfield County has the highest concentration, with children under five representing approximately 17% of households, indicating substantial demand for early childhood education and family support. Murray (15%) and Chattooga (15%) counties also show relatively high proportions of young children, while Walker (13%) and Catoosa (12%) reflect moderate but significant need. Dade County has a smaller population overall, with children under five accounting for about 11% of households, yet access challenges in this more rural area highlight the importance of targeted outreach. Overall, these ratios support continued investment in accessible Head Start services.



Race and Ethnicity-Service Area

This table presents racial and ethnic demographic percentages for the service area counties, Georgia, and the United States. It includes percentages of populations identifying as White, Black or African American, American Indian/Alaska Native, Asian, Native Hawaiian/Other, and Two or More Races.

	White	Black or African American	American Indian/Alaska Native	Asian	Native Hawaiian/Other	Two or More Races
Catoosa County	91.4	3.8	0.6	1.7	0.2	2.4
Chattooga County	85.8	9.9	0.8	0.7	0.4	2.6
Dade County	94.4	1.9	0.7	1.0	0.1	1.9
Murray County	94.6	1.7	1.0	0.7	0.3	1.6
Walker County	91.4	5.0	0.5	0.7	0.1	2.1
Whitfield County	89.5	4.5	2.0	1.9	0.2	1.8
Service Area	91.1%	4.5%	0.93%	1.11%	0.22%	2.06%
Georgia	58.3	33.1	0.7	5.2	0.1	2.6
United States	74.8	13.7	1.4	6.7	0.3	3.1



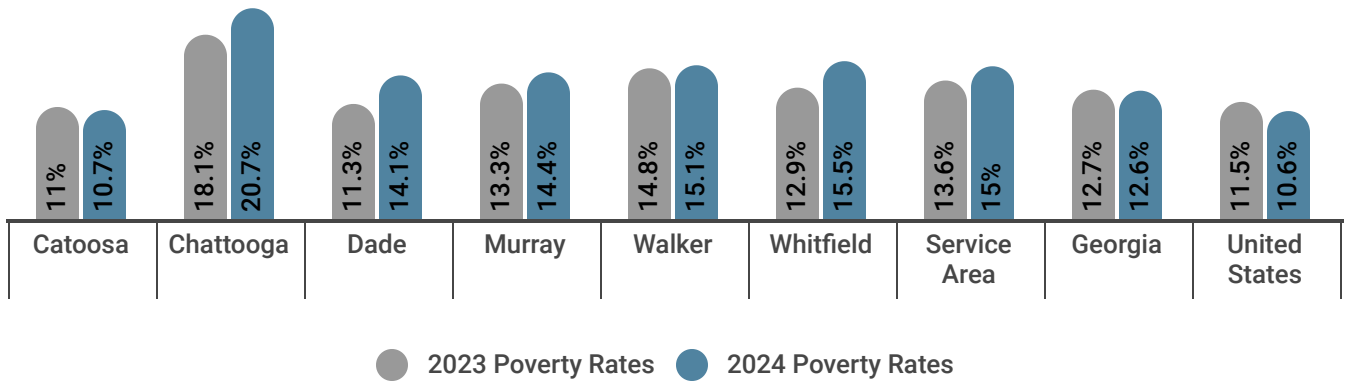
The service area population is primarily White, non-Hispanic, with variation in racial and ethnic composition across counties. Hispanic/Latino populations are concentrated in specific areas, most notably Whitfield County, where approximately 38% of residents identify as Hispanic/Latino, exceeding state and national averages. Murray County also has a higher proportion of Hispanic/Latino residents compared to other counties in the service area.

Across the service area, smaller percentages of the population identify as Black or African American, Asian, American Indian/Alaska Native, Native Hawaiian/Other, or two or more races. Compared to Georgia overall, the service area reflects a higher percentage of White residents and a lower percentage of Black or African American residents.

Children Living in Poverty-Service Area

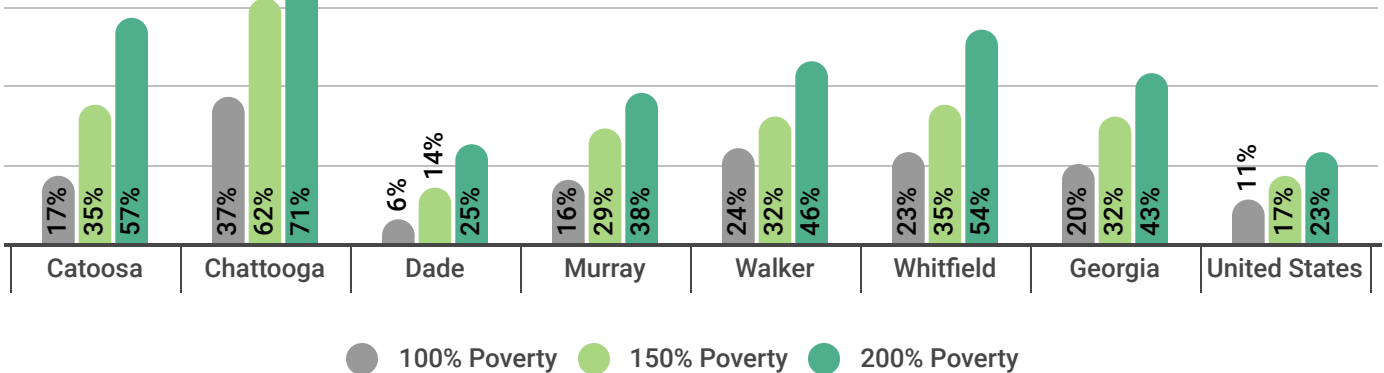
In 2024, poverty rates in the service area ranged from 10.7% in Catoosa County to a high of 20.7% in Chattooga County, reflecting significant economic disparities across the region. The average 2024 poverty rate for the service area was 15%, which exceeded both the Georgia state average of 12.6% and the national average of 10.6%. This marked an increase from the 13.6% service area poverty rate reported in 2023.

The rise in poverty rates highlights ongoing challenges for many families, including limited access to stable employment, affordable childcare, and adequate healthcare.



US Census Bureau Quick Facts 2024 (data accessed Jan. 2026.)

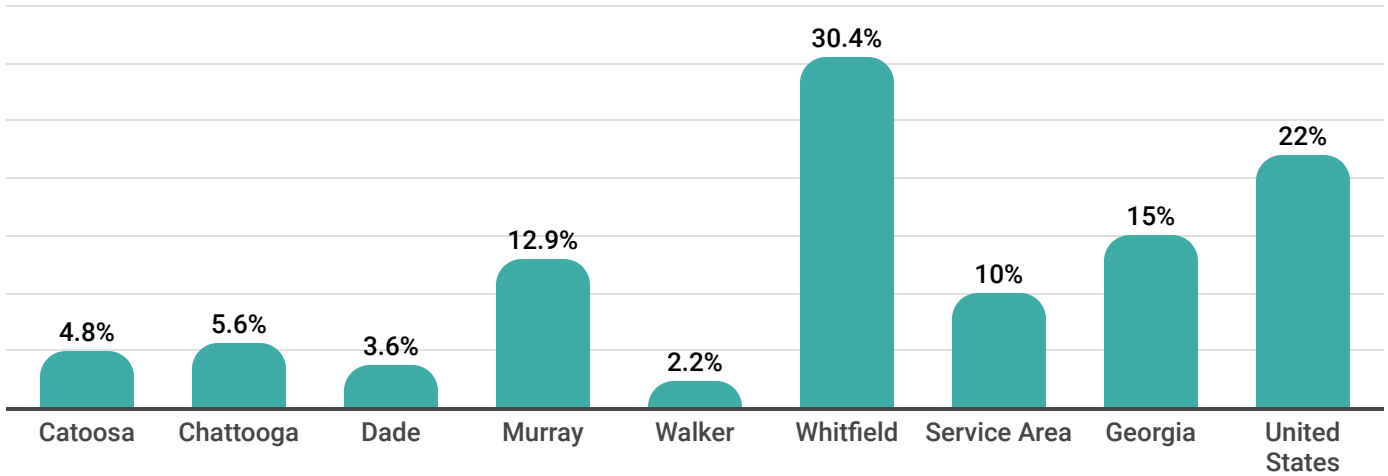
Number of Children Under 6 Years Old Living in Poverty



Poverty among children under age six is prevalent across the region, with several counties exceeding Georgia and U.S. averages. Chattooga County shows the highest level of need, followed by Walker, Whitfield, and Catoosa Counties, where a large share of young children live at or below 200% of the federal poverty level. Murray County aligns more closely with state averages, while Dade County reports the lowest poverty levels. Overall, these data demonstrate a significant need for Head Start and Early Head Start services to support vulnerable young children and their families, particularly in counties with the greatest economic hardship.

GEEARS: Georgia Early Education Alliance for Ready Students 2024 (accessed Jan 2026)

Languages Spoken-Service Area



Language Other Than English Spoken in the Home-Percent of Persons

Data from the U.S. Census Bureau American Community Survey (2019–2023) shows that a significant portion of families in the Head Start service area speak a language other than English at home. Across the counties served—Catoosa, Chattooga, Dade, Murray, Walker, and Whitfield—the percentage of residents who speak a language other than English ranges from 2.2% to 30.4%, with Whitfield County showing the highest concentration at 30.4%. Other counties also reflect meaningful multilingual populations, including Murray County (12.9%) and Walker County (10%), compared to 5.6% statewide and 22% nationally.

These findings highlight a clear need for culturally and linguistically responsive Head Start services in the community. The high proportion of households speaking languages other than English—particularly in Whitfield and Murray Counties—indicates that many families may face language barriers when accessing early childhood education, health services, and family support programs.

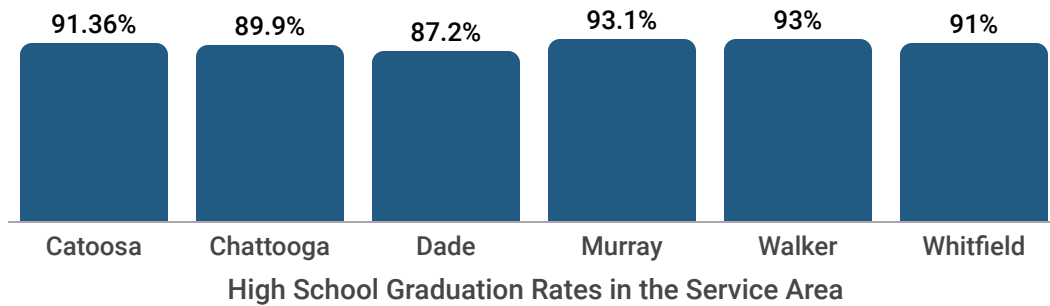


Education-Service Area

Georgia's high-school seniors recorded another all-time-high graduation rate – and significant year-over-year improvement – in 2025. The four-year graduation rate rose to 87.2% – up from 85.4% in 2024, and an all-time high since the state began using the adjusted cohort calculation first required in 2011 by federal law.

A total of 134 Georgia school districts recorded graduation rates at or above 90%, and 60 districts recorded rates at or above 95%. Georgia's statewide graduation rate has increased by 19.8 percentage points since 2011.

"I am so proud of Georgia's class of 2025 and the teachers, staff, and families who supported them," State School Superintendent Richard Woods said. "Seeing this increase in a single year is a strong indicator of the work Georgia's schools and districts are doing to keep students engaged in their education and prepare them for successful lives after high school. While more work remains to be done, more Georgia students are graduating than ever before – and they're doing so prepared to pursue futures full of opportunity."



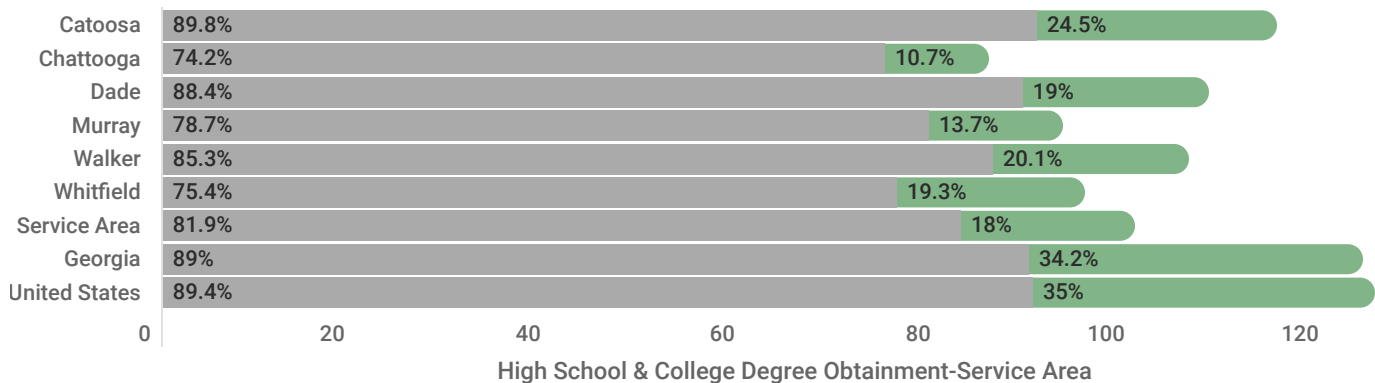
Data obtained from the Georgia Department of Education, 2025 Graduation Rate Report by county and state-accessed Jan. 2026

Degree Attainment-Service Area Counties:

Nationally, 35% of adults aged 25 and older hold a bachelor's degree or higher. In Georgia, this rate is slightly lower at 34.2%. However, within the FRAGA service area, the percentage drops significantly to 20.7%, highlighting a critical gap in higher education attainment.

To bridge this gap and expand access to higher education, the region is served by several institutions, including:

- Georgia Northwestern Technical College (serving Catoosa, Walker, and Whitfield-Murray counties)
- Dalton State College (located in Whitfield County)
- Covenant College (based in Dade County)
- Expanding awareness of and access to these institutions is essential to improving degree attainment rates.

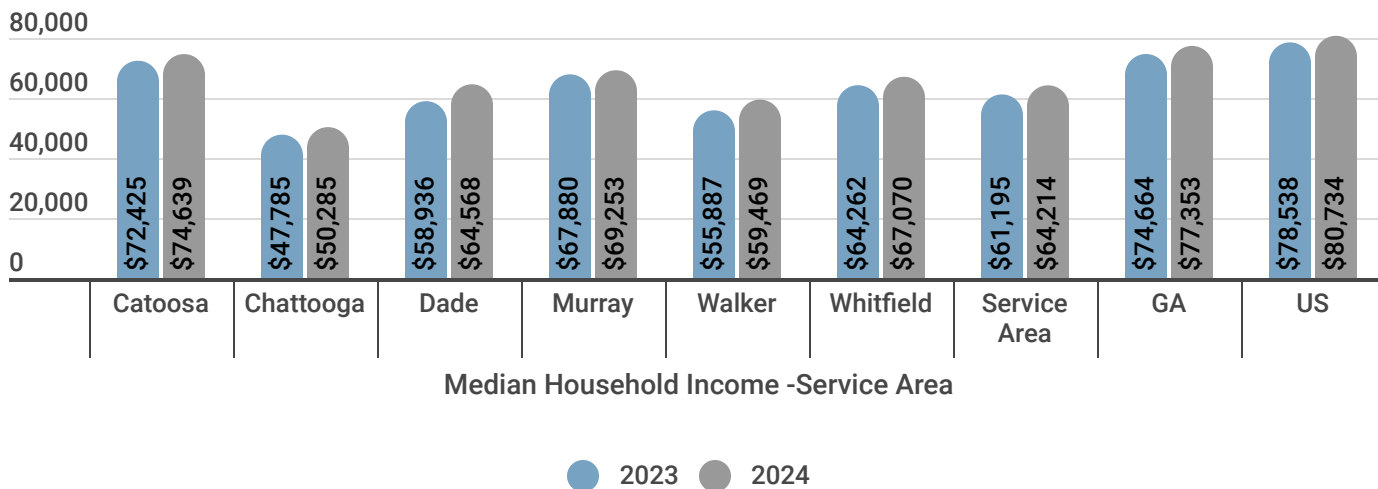


● High School Graduate or Higher ● Bachelor's Degree or Higher

Income Rates-Service Area

Median Household Income Analysis:

Median household income across the service area counties (Catoosa, Chattooga, Dade, Murray, Walker, and Whitfield) remains consistently below both state and national benchmarks. In 2024, the service area’s median household income averaged \$64,214, compared to \$77,353 for Georgia and \$80,734 nationally. While the chart shows an upward trend from 2023 to 2024 (increasing from \$61,195 to \$64,214, approximately 4.93%), the persistent gap highlights ongoing economic disparities. This pattern indicates that, despite growth, many families in the service area may continue to face financial challenges, reinforcing the importance of Head Start services.

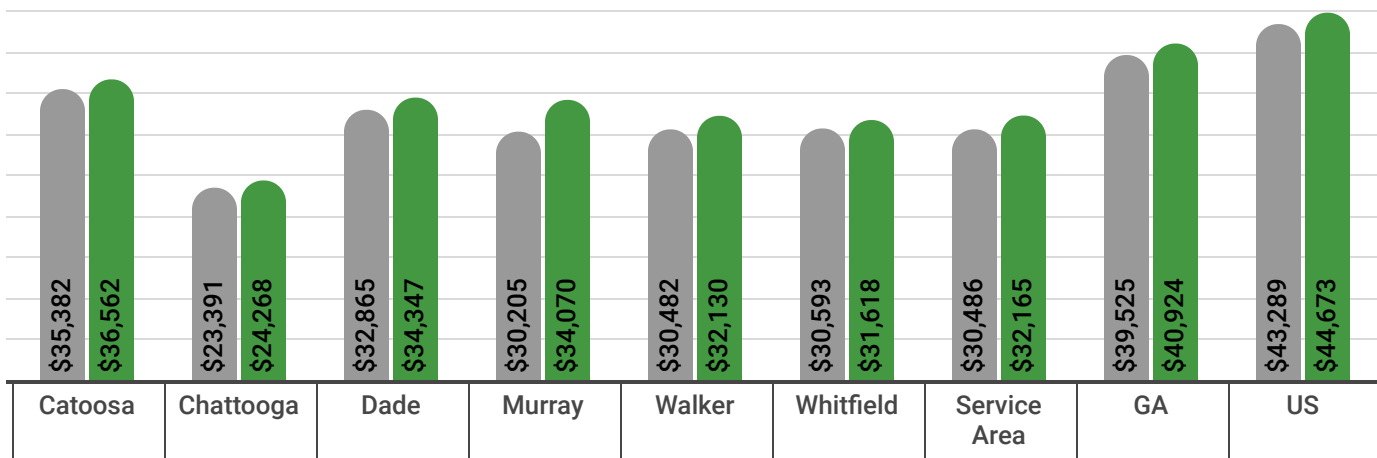


Median Household Income -Service Area

● 2023 ● 2024

Per Capita Income Analysis:

The chart below further demonstrates disparities in per capita income across the service area. In 2024, county-level per capita income ranged from \$24,268 in Chattooga County to \$36,562 in Catoosa County, with a service area average of \$32,165. This is significantly lower than both the Georgia average of \$40,924 and the national average of \$44,673, as shown in the comparison bars. Per Capita income increased from \$30,486 in 2023 to \$32,165 in 2024, representing a 5.51% increase. This suggests modest economic growth and improved earning potential among residents.



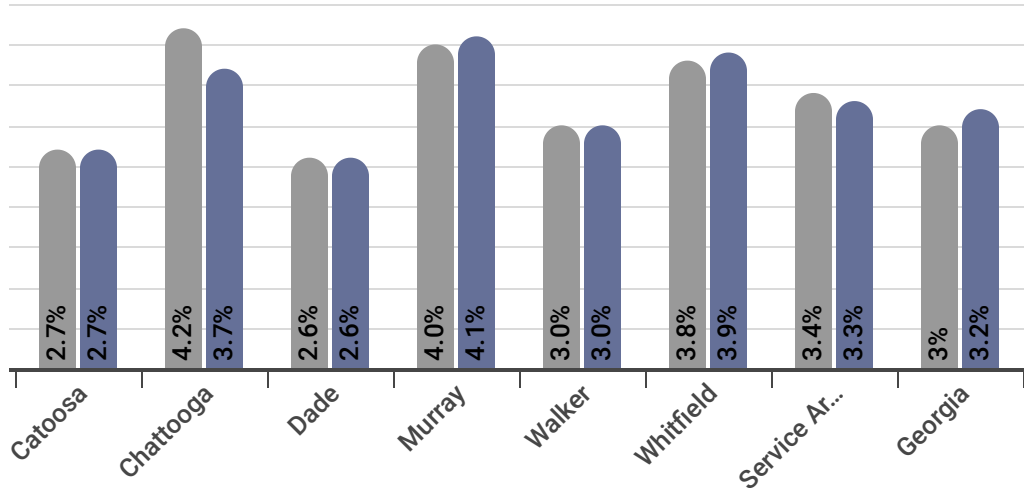
Per Capita Income-Service Area

● 2023 ● 2024

Unemployment/Lack Secure Employment-Service Area

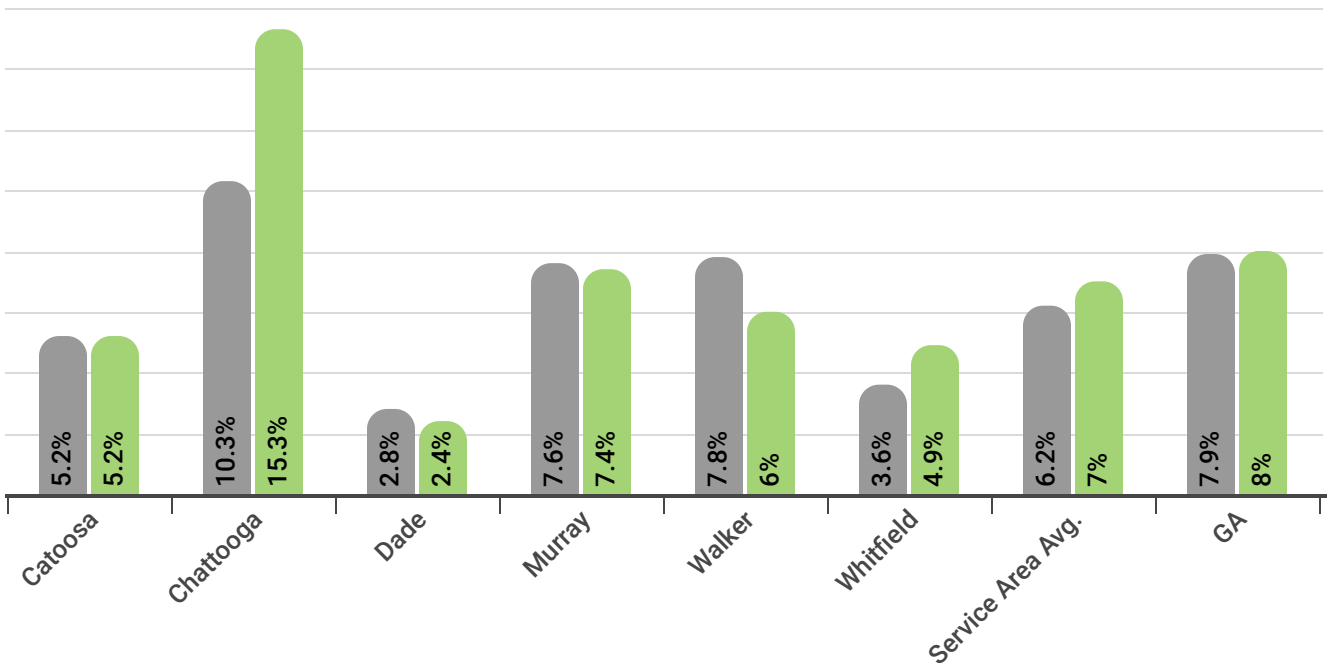
Unemployment rates across the service area remain relatively low and stable, with a 2024 average of 3.3%, only slightly higher than Georgia's 3.2% and down from 3.4% in 2023. County-level rates from 2024 range from 2.6% in Dade County to 4.2% in Chattooga County, suggesting generally steady labor market conditions. However, these figures alone do not fully reflect the economic realities facing families with young children.

In contrast, the percentage of children whose parents lack secure employment increased across the service area from 6.2% in 2023 to 7% in 2024, even as overall unemployment declined. In 2024, rates ranged widely from 2.4% in Dade County to 15.3% in Chattooga County, indicating significant disparities in family economic stability. This pattern suggests that many parents are working but remain economically vulnerable due to low wages, part-time or seasonal employment, inconsistent hours, or lack of benefits.



Unemployment Rates-Service Area

● 2023 ● 2024



Parents Lacking Secure Employment-Service Area

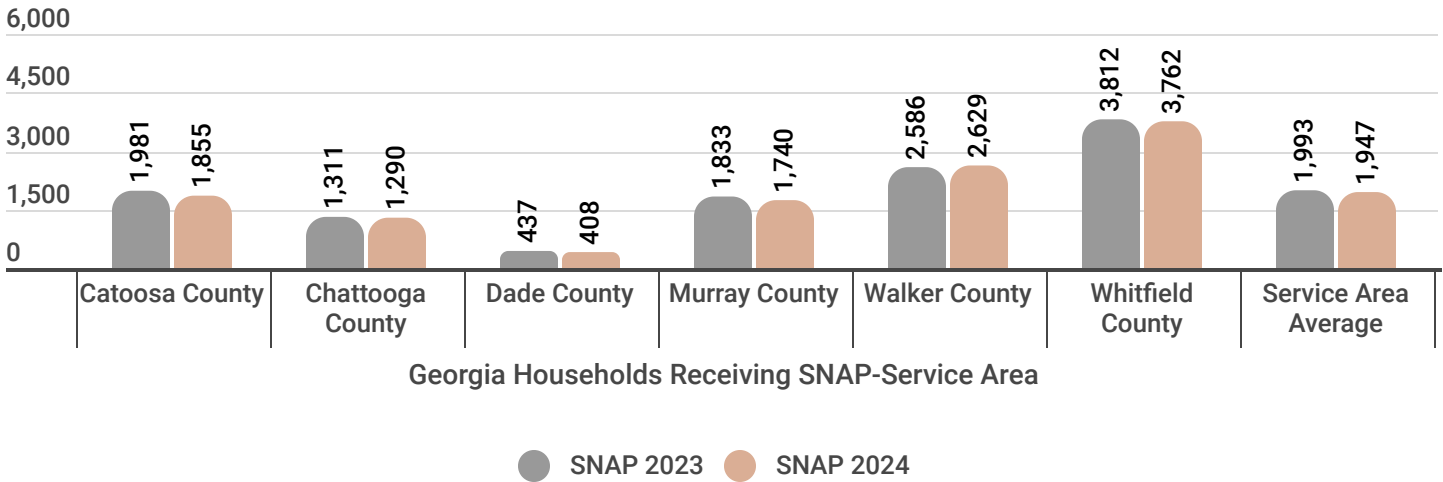
● 2023 ● 2024

Georgia Households Receiving SNAP/WIC-Service Area

The data table below indicates a general decline in SNAP participation across the service area counties. This may suggest slight economic improvements, more stringent eligibility requirements, or a reduction in participation due to barriers in accessing benefits.

In contrast to the poverty rates shown on the previous page 14, the continuous reliance on SNAP highlights ongoing economic hardship. High poverty rates, especially in counties like Walker and Whitfield, are reflected in the sustained need for food assistance programs. The county-level participation rates in Catoosa, Dade, and Whitfield are notably lower than both state and national averages, suggesting these counties have fewer individuals relying on SNAP benefits. Chattooga and Murray counties exhibit higher participation rates, indicating a greater proportion of residents facing economic challenges.

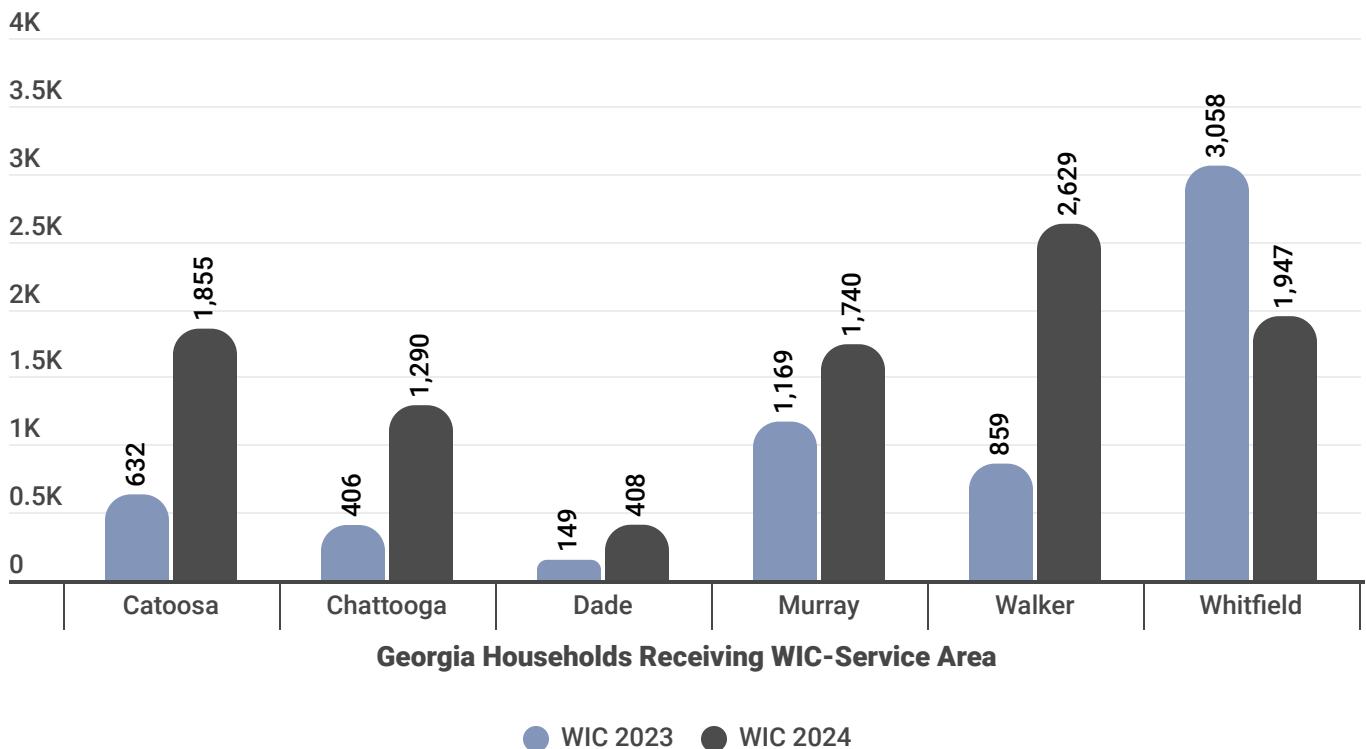
These variations may result from differences in local economic conditions, employment opportunities, and access to assistance programs.



Most service area counties show a significant increase in participation from 2023 to 2024, indicating a growing need or increased outreach efforts for the WIC program.

Whitfield County is an exception, where the number of participants decreased from 3,058 in 2023 to 1,947 in 2024. This could be due to various factors such as changes in population, program funding, or local economic conditions.

The data suggests that the WIC program is expanding its reach in most counties, which could lead to better health outcomes for women, infants, and children in these areas:



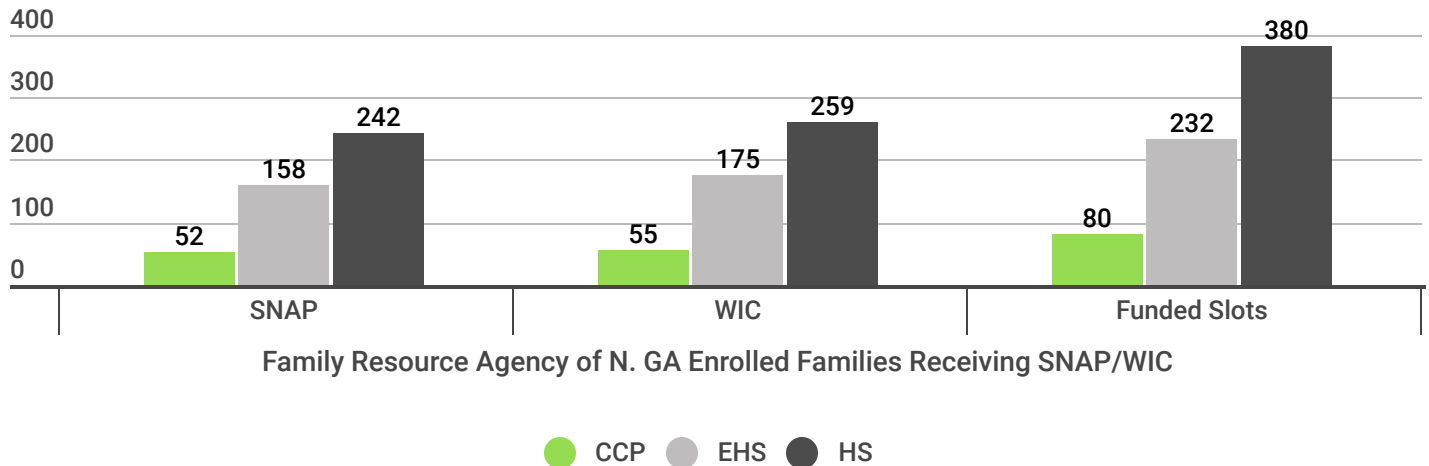
Family Resource Agency of N. GA Families Receiving SNAP/WIC

The chart below illustrates the number of families with children enrolled in Family Resource Agency of North Georgia who receive benefits through the Supplemental Nutrition Assistance Program (SNAP) and/or the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). This data highlights the continued need for comprehensive nutrition education and food security supports among enrolled families.

To strengthen nutrition education and promote healthy family practices, Primary Healthcare has developed a newsletter titled Nutrition and You, which is distributed to both staff and families. The newsletter addresses a broad range of topics, including evidence-based nutrition guidance, healthy lifestyle tips, and simple, budget-friendly recipes designed to meet the needs of families with young children.

In alignment with current USDA guidance, the agency's website also provides a direct link to the MyPlate resource (<https://www.myplate.gov>), which replaced the former Food Pyramid model. MyPlate offers families access to healthy recipes, calorie and nutrient tracking tools, food group education, daily meal planning resources, dietary guidelines, and cost-conscious eating strategies.

Additionally, classrooms integrate nutrition education through the I Am Moving, I Am Learning (IMIL) program, which promotes healthy habits by embedding nutrition-focused activities into lesson plans and daily classroom routines. This approach supports children's physical development while reinforcing healthy food choices and active living in a developmentally appropriate, culturally responsive manner.



Eligible Infants/Toddlers/Preschool Children-Service Area

Estimate of Eligible Children	Catoosa	Chattooga	Dade	Murray	Walker	Whitfield
# of 0-5 year old children	3,446	1,362	727	2,339	3,613	6,118
X Poverty Rate	10.7%	20.7%	14.1%	14.4%	15.1%	15.5%
Number in Poverty	371	282	103	337	546	948
Divided by # of age groups (1-5 yrs. old)	5	5	5	5	5	5
# eligible by age group	74	56	21	67	109	190
X # of age groups served (3 and 4 yrs)	2	2	2	2	2	2
3 and 4 year old's eligible for HS	148	112	42	134	218	380
3 and 4 year old children served by HS and Pre-K at Family Resource Agency of N. GA	37	17	16	34	122	155
Eligible children 3-4's not served by FRA HS	111	95	26	100	96	225
X # of age groups served (1, 2, and 3 years)	3	3	3	3	3	3
# 0-3 year old's eligible for EHS	222	168	63	201	327	570
0-3 year old children served by EHS and CCP at Family Resource Agency of N. GA	32	40	24	24	56	137
Eligible children 0-3 not served by FRA EHS	190	128	39	177	271	433

This table provides an estimate of eligible children for Early Head Start (EHS) and Head Start (HS) programs across six counties in North Georgia: Catoosa, Chattooga, Dade, Murray, Walker, and Whitfield. Below is a summary of key findings:

Total number of children aged 0-5 years varies across counties, with Whitfield having the highest (6,118) and Dade the lowest (727). Poverty rates are highest in Chattooga (20.7%) and lowest in Catoosa (10.7%).

Head Start (HS) Eligibility (Ages 3-4):

The estimated number of 3- and 4-year-olds eligible for HS is highest in Whitfield (380) and lowest in Dade (42).

The number of children served by HS and Pre-K programs is significantly lower than those eligible. Whitfield, for example, has 380 eligible children but only 155 served, leaving 225 children unserved.

Other counties show similar gaps, with Chattooga having the highest proportion of unserved eligible children (95 out of 112 eligible, or ~85%).

Early Head Start (EHS) Eligibility (Ages 0-3):

Whitfield again has the most EHS-eligible children (570), while Dade has the least (63).

Served children in EHS and CCP (Child Care Partnerships) are far fewer than eligible children, with large service gaps in all counties:

Whitfield: 570 eligible, but only 137 served (433 unserved).

Walker: 327 eligible, only 56 served (271 unserved).

Catoosa: 222 eligible, only 32 served (190 unserved).

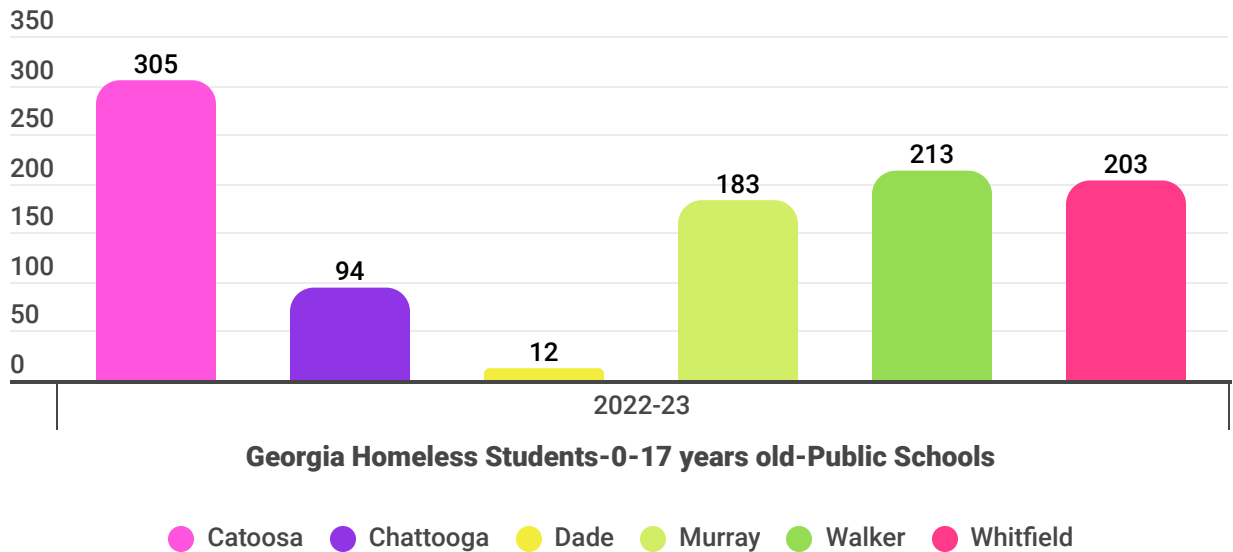
There is a significant gap between the number of eligible children and those being served, particularly in Early Head Start (EHS).

Whitfield County has the largest need across all categories, given its high population and poverty rate.

Chattooga has the highest poverty rate (20.7%) but serves a very small percentage of its eligible children.

Homelessness-Service Area

During the 2024–2025 school year, 1,010 students across Catoosa (305), Chattooga (94), Dade (12), Murray (183), Walker (213), and Whitfield (203) counties were identified as experiencing homelessness under the federal McKinney-Vento Act. These figures reflect broader regional challenges, including limited affordable housing, rising rents, and persistent child poverty, which often force families into doubled-up living arrangements, motels, or other unstable housing. Housing insecurity is closely linked to higher chronic absenteeism, school mobility, and learning loss, particularly for young children whose early development depends on consistent routines and stable learning environments. This has direct implications for Head Start and Early Head Start, as children experiencing homelessness are categorically eligible for enrollment and require additional supports such as transportation, family advocacy, developmental screenings, and connections to housing and social services.

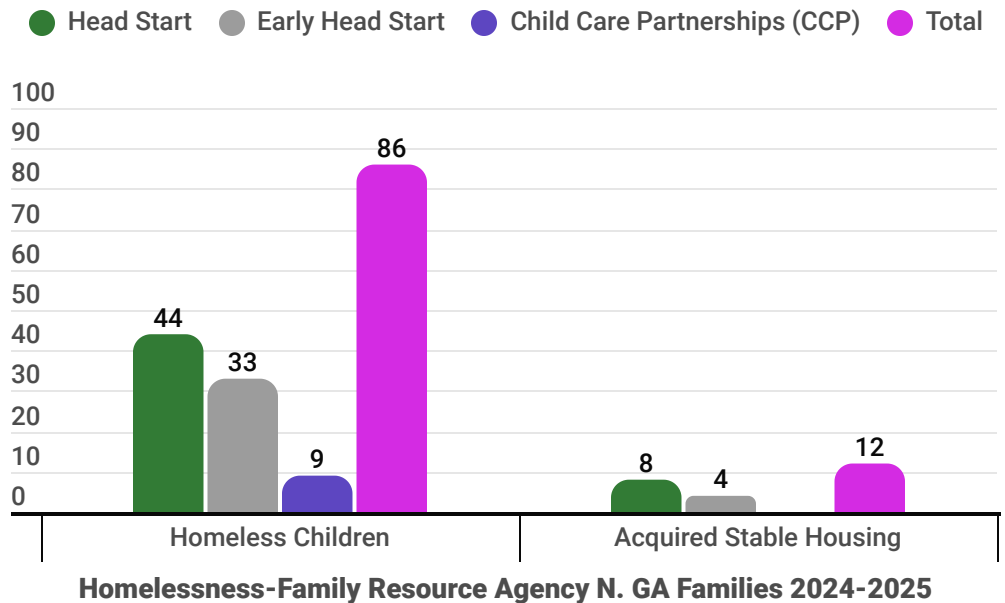


<https://eddataexpress.ed.gov/dashboard/homeless/> accessed January 2026

During the 2024-25 school year, Family Resource Agency of North Georgia provided support to 86 homeless children, ensuring access to education and essential services. Of these, 44 children were enrolled in Head Start, 33 in Early Head Start, and 9 in the Childcare Partnership Program (CCP).

12 homeless families successfully transitioned into stable housing—4 families in Early Head Start and 8 in Head Start.

Family Resource Agency will continue to prioritize the needs of homeless children and their families with a goal to ensure every child has the opportunity to thrive in a safe and stable environment.



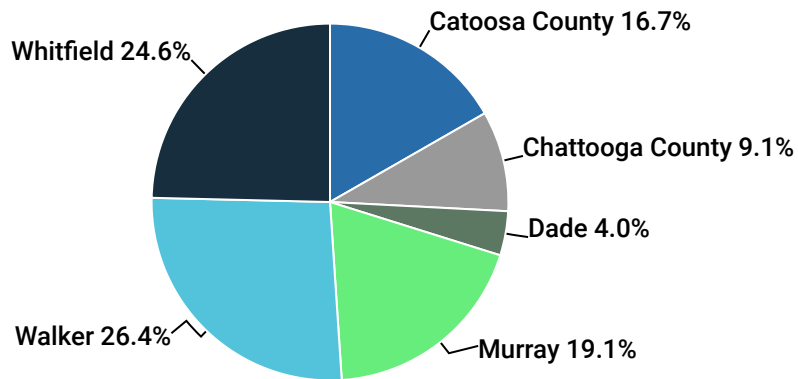
Foster Children -Service Area

The pie chart below represents the number of foster children in the service area counties October 2024-Sept. 2025. Here is the breakdown:

- Catoosa County: 55 foster children (16.7%)
- Chattooga County: 30 foster children (9.1%)
- Dade: 13 foster children (4.0%)
- Murray: 63 foster children (19.1%)
- Walker: 87 foster children (26.4%)
- Whitfield: 81 foster children (24.6%)

Summary:

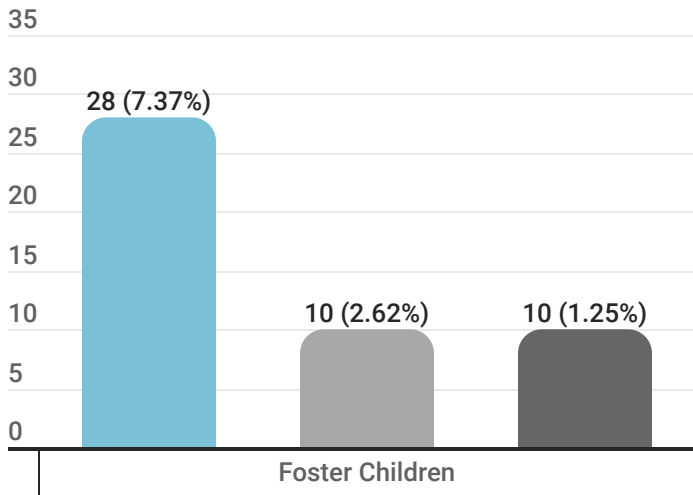
The pie chart illustrates the distribution of foster children across six counties. The total number of foster children is 750. Whitfield County had the highest number of foster children, followed by Walker and Murray counties. Dade County has the lowest number of foster children.



Foster Children Percentage In Service Area

Fostering Court Improvement <https://fosteringcourtimprovement.org> accessed January 2026

- Head Start
- Early Head Start
- Child Care Partnerships (CCP)



Foster Children at Family Resource Agency of N. GA

Head Start Program Benefits for Foster Children:

School Readiness: Provides early childhood education to develop cognitive and social-emotional skills.

Individualized Learning: Tailors learning plans to meet each child's unique needs.

Comprehensive Care: Offers screenings, dental checkups, mental health services, nutrition education, and healthy meals.

Social Skills: Improves social skills, impulse control, and addresses behavioral issues.

Family Engagement: Encourages foster parents' involvement and connects families with community resources.

Long-Term Benefits: Reduces foster care placement and has lifelong positive impacts on academic performance, social skills, and health outcomes.

Overall, Head Start supports foster children holistically, helping them build a strong foundation for future success.

Pediatric Health-Service Area

Family Resource Agency of North Georgia's six-county service area has 21 pediatricians that accept Medicaid; 5 pediatricians in Catoosa County, 2 in Chattooga County, 1 in Dade County, 3 in Murray County, 4 in Walker County and 6 in Whitfield County. There are 8 hospitals located within the service area, with 3 hospitals in Whitfield County and 1 hospital in Catoosa, Chattooga, Dade, Murray and Walker counties. In addition, there are 5 hospitals located in Chattanooga, Tennessee that are within 10-50 miles of service area counties; this includes T.C. Thompson Children's Hospital. Within the service area, around 100 pediatricians accept Medicaid and Peach Care. Each of the six service area counties have a local health department that offers immunizations for children and adults; Women, Infants, and Children (WIC) Program: Nutritional support for pregnant women, new mothers, and young children; Family Planning: Services including birth control, pregnancy testing, and counseling.

Primary Health Care Centers in Chattooga, Dade, and Walker counties provide primary healthcare services regardless of the ability to pay and serve patients from all areas, regardless of address. The Child services provided include but are not limited to: acute care visits for sudden unexpected illnesses (colds, flu, allergies, rashes etc.), well-child check-ups, immunizations, and general dentistry.

<https://findaprovider.pshpgeorgia.com/search-results>

According to the 2025 America's Health Ratings from the United Health Foundation, Georgia is ranked 38-a 4 point increase from a ranking of 33 in 2024; (1=best/50=worst).

In 2024, children aged 0-5 in North Georgia faced several health challenges:

1. **Access to Healthcare:** Limited access to pediatric care, especially in rural areas, made it difficult for families to receive timely medical attention.
2. **Nutrition and Obesity:** Poor nutrition and high rates of childhood obesity were significant concerns, contributing to long-term health issues.
3. **Mental Health:** Early childhood mental health issues, including developmental delays and behavioral problems, were prevalent.
4. **Socioeconomic Factors:** High levels of poverty and economic hardship impacted children's overall well-being and access to resources.

Data analysis from 2024 reflects that North Georgia's highest child health challenges are:

- High percentage of low birthweight infants (*a baby weighing less than 5.5 lbs.*)
- Low WIC coverage (*Supplemental Nutrition program for woman and children*) among eligible children ages 0-4.
- Low percentage of infants exclusively breastfed for six months.

In 2024, an additional high-priority health condition for children aged 0-5 in North Georgia is childhood obesity. This condition is particularly concerning due to its long-term health implications, including an increased risk of developing chronic diseases such as diabetes and heart disease.

As of 2024, approximately 12.7% of children aged 2-5 in the United States are considered obese. National statistics provide a general idea of the prevalence of obesity in young children in the region. From 2017 to 2020, the prevalence of obesity among U.S. children and adolescents was 19.7%. This means that approximately 14.7 million U.S. youths aged 2-19 years have obesity. For children, obesity is defined as having a body mass index (BMI) at or above the 95th percentile for age and sex.

Efforts to address childhood obesity focus on improving nutrition, increasing physical activity, and providing education to families about healthy lifestyle choices. To enhance nutritional education among these families, Primary Healthcare has developed a newsletter titled "Nutrition and You," which is distributed to both staff and families. This newsletter encompasses a wide range of topics, including nutritional advice, healthy living tips, and recipes. Additionally, the agency's website provides a link to the USDA-sponsored "My Plate" resource (<https://www.myplate.gov/>), which offers healthy recipes, calorie counters, food information, daily meal planning tools, dietary guidelines, and budget-friendly eating tips. Furthermore, classrooms incorporate nutrition resources such as the "I am Moving, I am Learning" program, integrating nutrition-focused activities into lesson plans and daily classroom activities. Family Resource Agency uses the I'm Moving, I'm Learning

[https://www.americashealthrankings.org/explore/measures/Overall/GA-\(accessed January 2026\)](https://www.americashealthrankings.org/explore/measures/Overall/GA-(accessed January 2026))

<https://www.americashealthrankings.org/learn/reports/2024-health-of-women-and-children-report/state-summaries-georgia> (accessed January 2026)

<https://www.cdc.gov/obesity/childhood-obesity-facts/childhood-obesity-facts.html> (accessed January 2026).

<https://oasis.state.ga.us/trendingtool/InfantMort> (accessed January 2026).

Dental Resources

The service area has over 95 dentists available that accept Medicaid/Peach Care and see children birth-5 years of age. There has been an increase in the total number of pediatric dentists who accept Medicaid and Peach Care. In North Georgia service area counties, there are challenges meeting the dental needs of children birth-5, particularly in the rural areas.

Primary Health Care Centers in Chattooga, Dade, and Walker counties provide healthcare services regardless of the ability to pay and serve patients from all areas, regardless of address and provide general dentistry for children.

While there are dental providers available, the distribution is uneven, and some areas face shortages of pediatric dentists:

1. Dental Health Provider Shortage Areas: Many rural parts of North Georgia are designated as Dental Health Provider Shortage Areas (DHPSAs), indicating a lack of sufficient dental professionals to meet the population's needs.
2. Access to Care: Limited access to pediatric dental care can result in unmet dental needs for young children, leading to issues such as untreated cavities and other oral health problems.
3. Family Resource Agency of N. GA is working to identify pediatric dentists that accept Medicaid/Peach Care or offer no cost, low cost, and sliding scale fees, partnerships, on-site visits, and mobile pediatric dentists.

Available Dentists in Service Area



County	Dentists-Medicaid and Peach Care Accepted	Serves Birth-Five Year Old Children	Access to Primary Healthcare Dentists
Catoosa	20	20	Yes
Chattooga	10	10	Yes
Dade	5 (Chatt, TN)	5	Yes
Murray	24	24	Yes
Walker	15	15	Yes
Whitfield	24	24	Yes
Totals	95	95	Yes

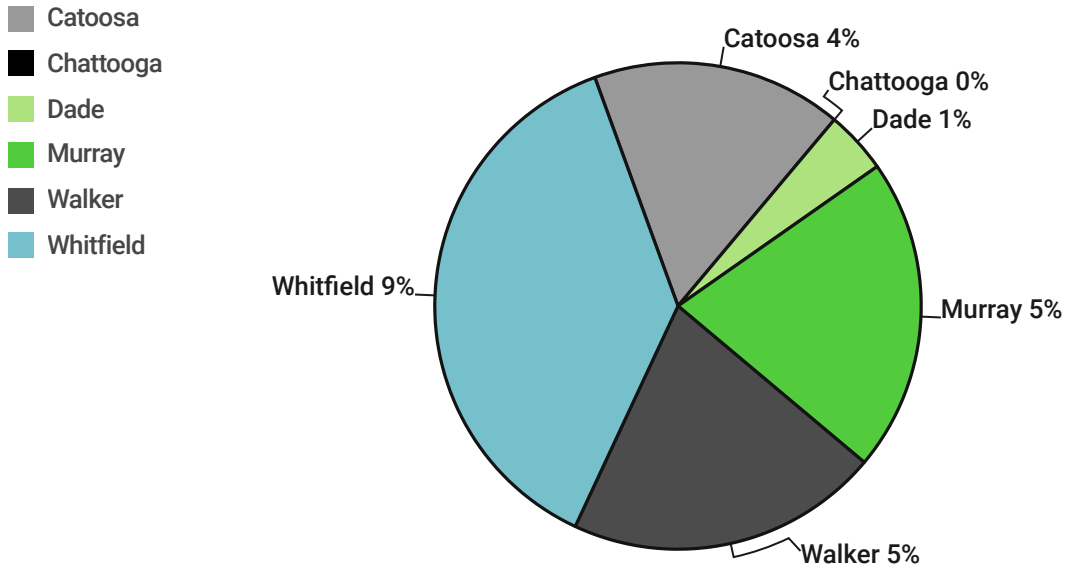
<https://findaprovider.pshpgeorgia.com/search-results>

Mental Health Resources

The six service area counties are supported by the Region One Mental Health, Developmental Disabilities, and Addictive Diseases (MHDDAD) Office. The MHDDAD Office is responsible for planning and overseeing a comprehensive network of public mental health, developmental disabilities, addictive disease, and prevention services across 25 counties. A regional office contact is available, and counties have access to 24-hour emergency assistance. This includes a Georgia Crisis and Access Line, a non-emergency service line for mental health and addictive diseases, as well as a non-emergency line for developmental disabilities services. Additionally, there are seven other local agencies that provide mental health services. Currently, we have a contract with Georgia HOPE to deliver services to our children and families.

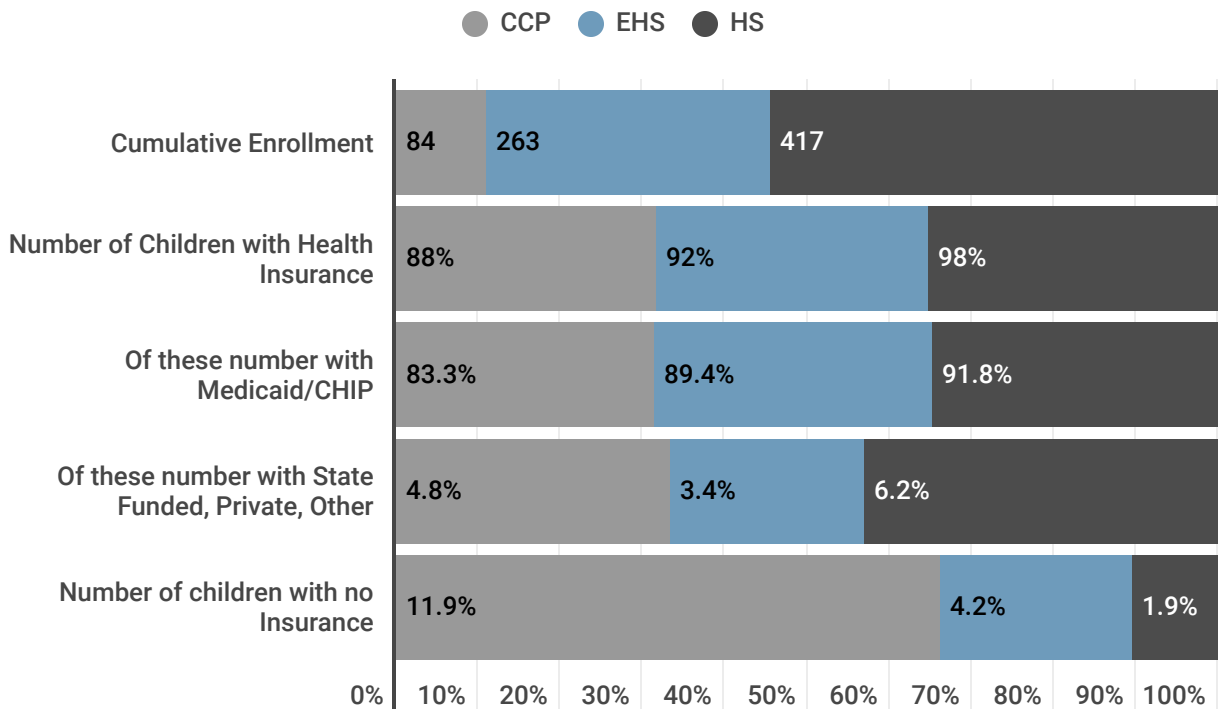
Child-Health Insurance-Service Area

Children Under Age 6 Without Insurance by County



Data Obtained from GEEARS County Profiles-accessed Jan.2026

Insurance-Children Attending CCP, Early Head Start, and Head Start at Family Resource Agency of N. GA 2025-2026



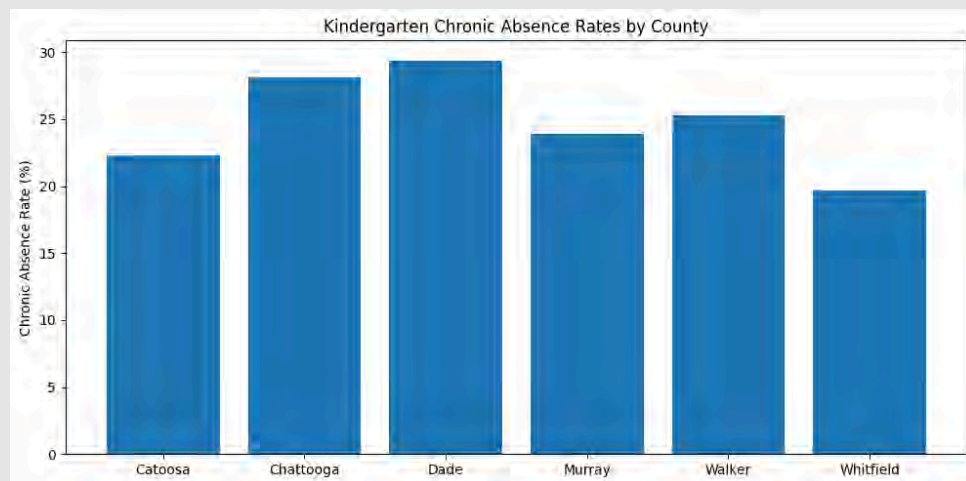
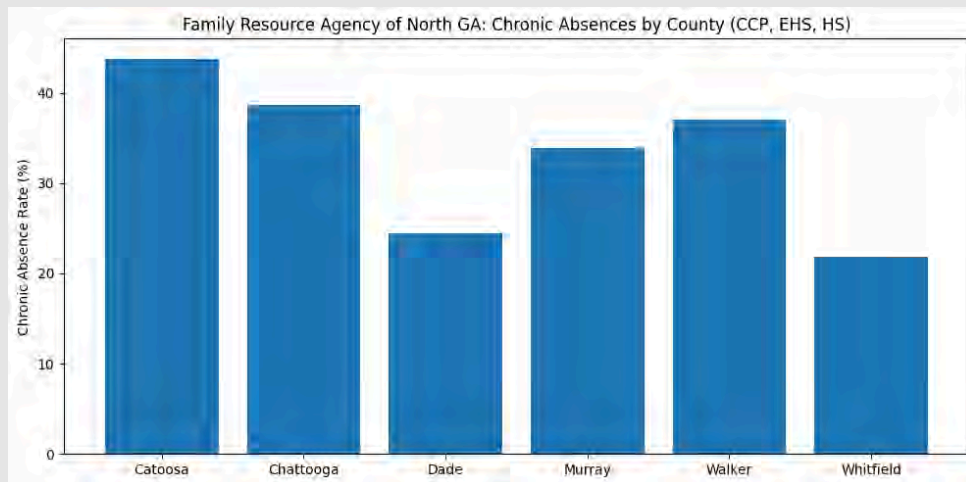
ChildPlus PIR Report #9900-accessed Jan. 2026

Chronic Absenteeism in Early Childhood Programs and Local Kindergarten Classrooms

Family Resource Agency of N. GA attendance data indicate that chronic absenteeism is a significant concern across the service area, which includes Catoosa, Chattooga, Dade, Murray, Walker, and Whitfield counties. Program data combining CCP, Early Head Start, and Head Start show chronic absence rates of 43.8% in Catoosa County, 38.6% in Chattooga County, 24.4% in Dade County, 33.9% in Murray County, 37% in Walker County, and 21.8% in Whitfield County. These findings show that attendance challenges are present across the service area, with the highest rates occurring in Catoosa and Chattooga counties.

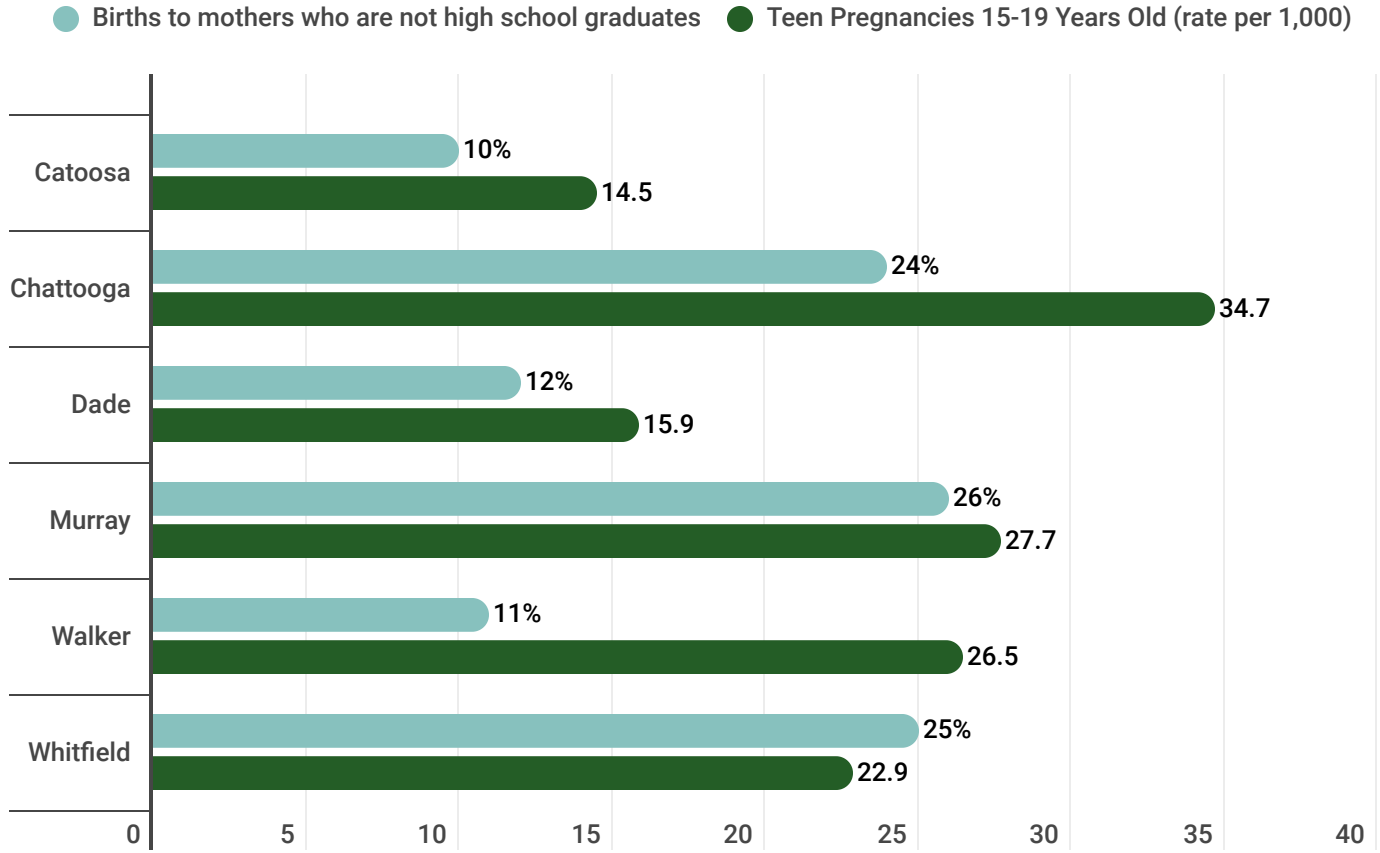
Local school system data show similar attendance patterns among kindergarten students. Chronic absenteeism rates among kindergarten students are 22.3% in Catoosa County, 28.1% in Chattooga County, 29.4% in Dade County, 23.9% in Murray County, 25.3% in Walker County, and 19.7% in Whitfield County. Although kindergarten absenteeism rates are lower than those observed within the program, the data indicate that attendance challenges begin prior to kindergarten and continue as children transition into the public school system.

Several factors identified in the Community Assessment may contribute to these attendance patterns, including transportation limitations, seasonal illness, and family circumstances such as unemployment, work schedules, or housing instability. These findings highlight the importance of supporting families in establishing consistent attendance habits early in a child's educational experience. In response, the program has established a five-year goal to decrease chronic child absences through ongoing monitoring of attendance data, family engagement efforts, and strategies designed to address barriers that affect consistent participation in early childhood education programs.



Teen Pregnancy-Service Area

GEEARS data indicates that in 2024 Whitfield County had the highest number of teen pregnancies and births to mothers without a high school diploma, with Walker and Murray counties also showing elevated levels. These trends highlight a need for Head Start services that support early childhood development, family education, and school readiness, particularly in communities with higher rates of young and less-educated parents.



GEEARS-Counties 2024/accessed Jan. 2026

Total Pregnant Moms Served at Family Resource Agency of North Georgia in 2024-2025	11
Pregnant Moms with High Risk Pregnancy	1
Received Prenatal Health Care	11
Received Postpartum Health Care	8
Received Education on Fetal Development	10
Received Education on the Benefits of Breast Feeding	10
Received Education on the Importance of Nutrition	10
Received Education on Infant Care and Safe Sleep Practices	10
Received Education on the risks of Alcohol, Drugs, and Smoking	10
Facilitated Access to Substance Abuse Treatment	4

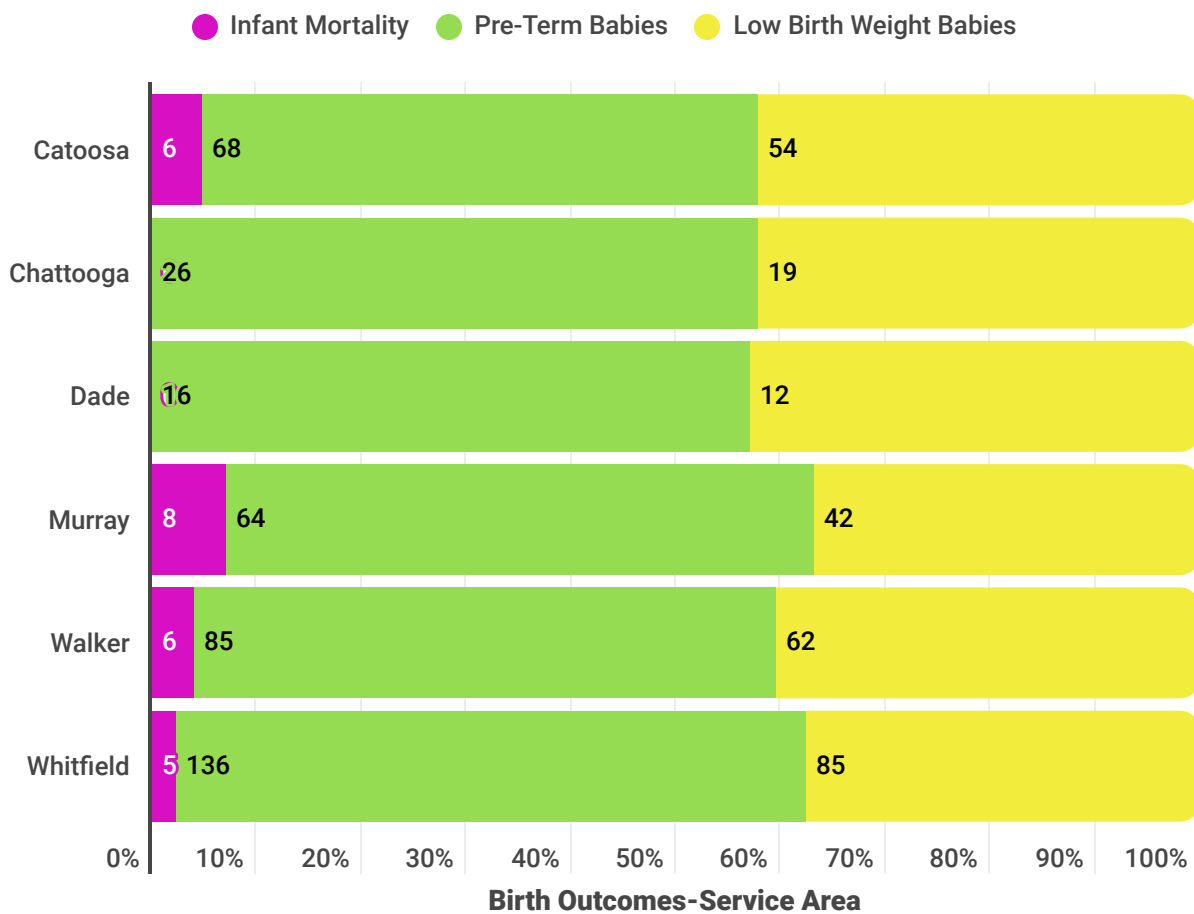
Birth Outcomes-Service Area

Local birth outcome data indicates disparities across the service area, with Whitfield County reporting the highest numbers of low birth weight and pre-term births, followed by Walker and Murray counties. Catoosa, Chattooga, and Dade counties report lower counts across these indicators. Low birth weight, pre-term birth, and infant mortality are significant risk factors for adverse developmental, health, and school readiness outcomes, particularly during the first years of life.

In comparison to national benchmarks, Georgia's infant health outcomes are less favorable. Georgia's infant mortality rate is approximately 7.0 deaths per 1,000 live births, exceeding the U.S. rate of 5.6 per 1,000 live births. Similarly, Georgia's pre-term birth rate (approximately 11.8%) and low birth weight rate (approximately 10.2%) are higher than national averages of 10.4% and 8.6%, respectively. These comparisons suggest that families within the service area may experience heightened health risks relative to national trends.

These findings demonstrate the ongoing need for Head Start and Early Head Start programs to provide comprehensive, coordinated health services. This includes timely health screenings, developmental outcomes, nutrition services, family education, and training/support/referrals to prenatal and postnatal care.

Additionally, the identified disparities support program planning by informing targeted recruitment and outreach in counties with elevated adverse birth outcomes.



Funded Slots-Family Resource Agency of North Georgia

Family Resource Agency of North Georgia currently operates a program, funded to serve 692 children across six northwest counties: Catoosa, Chattooga, Dade, Murray, Walker, and Whitfield. The program offers Childcare Partnerships, Early Head Start, Head Start, and Blended Pre-K/Head Start. The agency operates 61 classrooms across 16 centers.

Current funded enrollment slots are distributed as follows:

- Head Start (HS): 300 slots, offering preschool education for children ages 3 to 5, emphasizing school readiness through early learning experiences.
- Blended Pre-K/Head Start: 80 slots, combining state-funded Pre-K with Head Start services to provide comprehensive educational support while meeting the unique needs of low-income families.
- Early Head Start (EHS): 232 slots, designed for infants, toddlers, and pregnant women, providing early developmental support, parent education, and family engagement opportunities.
- Childcare Partnerships (CCP): 80 slots, expanding access to Early Head Start services through partnerships with local childcare providers, enhancing the quality of care and education for young children.

	Total Slots	HS Slots	Blended HS/Pre-K Slots	EHS Slots	CCP Slots
Catoosa	69	17	20	16	16
Chattooga	57	17	0	40	0
Dade	40	16	0	24	0
Murray	58	34	0	24	0
Walker	178	82	40	56	0
Whitfield	290	134	20	72	64
Total Slots	692	300	80	232	80

Family Resource Agency of N. GA Funded Slots

Childplus Report 2001 (grp. by all/region/site/summery) -accessed Feb. 2026

Eligible Children-Service Area

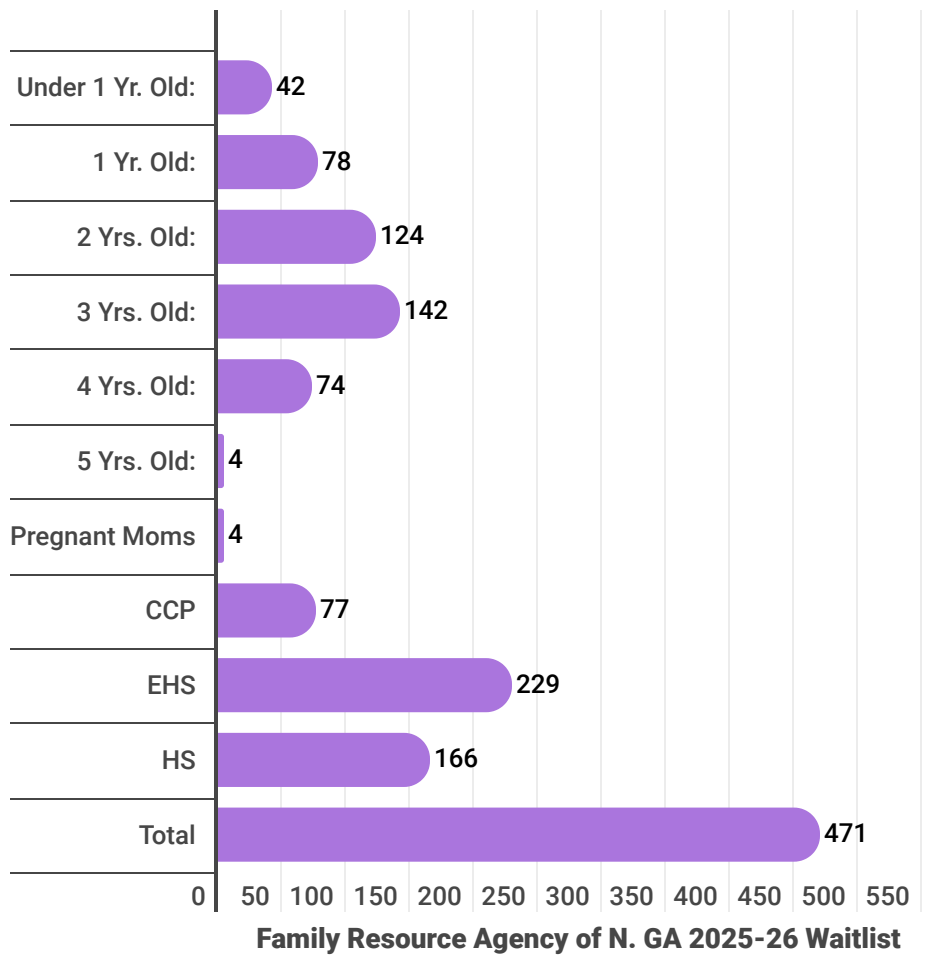
County	Children Ages Birth-5 Living Below 100% Poverty	FRAGA HS and Pre-K enrollment	FRAGA EHS/CCP enrollment	Georgia Pre-K enrollment-low income families	Eligible Children Birth-5 not Served by Head Start or Pre-K
Catoosa	757	37	32	181	507
Chattooga	673	17	40	127	489
Dade	54	16	24	72	0
Murray	428	34	24	160	210
Walker	1,057	122	56	218	661
Whitfield	1,864	154	136	525	1,049

GEEARS Early Childhood Profiles 2025 (arcgis.com) accessed Feb. 2026

Family Resource Agency of North Georgia-Waitlist

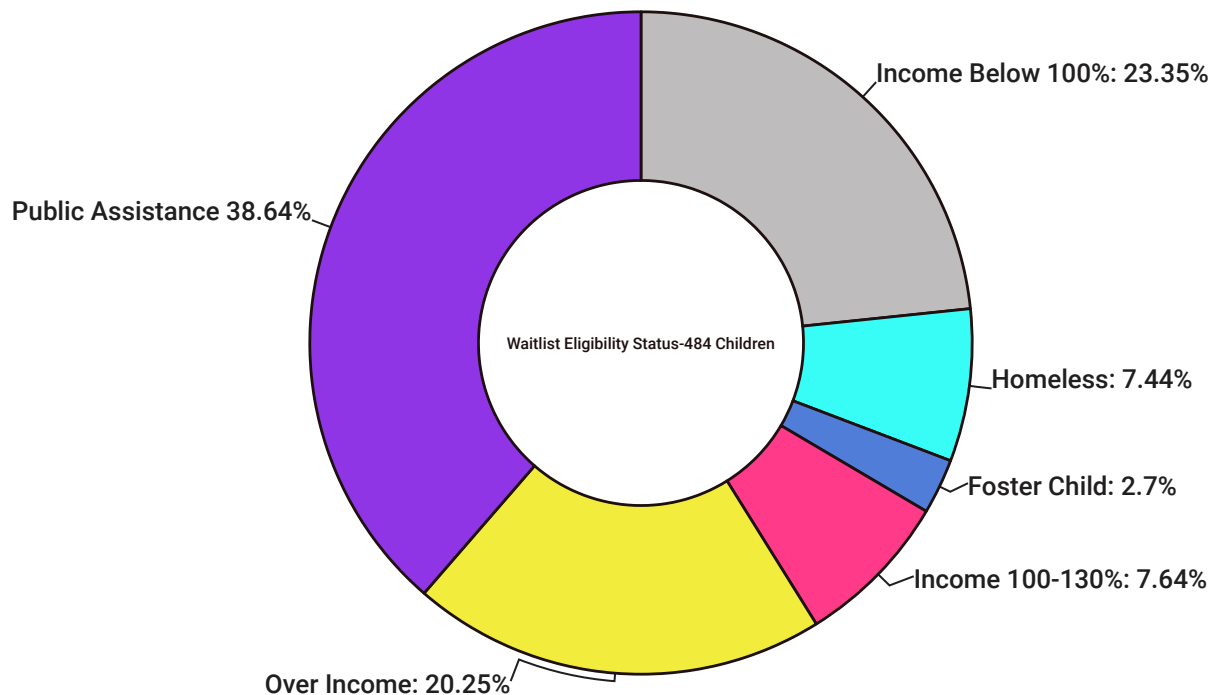
Current waitlist data indicates a continued high demand for Early Head Start and Head Start services within the Family Resource Agency of North Georgia service area. A total of 471 children and pregnant women are currently awaiting enrollment, with the greatest unmet need among preschool-aged children, including 74 four-year-olds and 124 two-year-olds. Significant demand is also present for Early Head Start services, with 78 one-year-olds, 42 infants under one year, and 4 pregnant women on the waitlist.

This bar graph reflects ongoing service gaps for low-income families with young children and align with the requirements of the Head Start Program Performance Standards, which require programs to use community assessment data to identify unmet needs and ensure services are responsive to community demand (§1302.11). The waitlist trends support the need for expanded enrollment capacity, particularly for toddlers and preschool-aged children, to promote school readiness, healthy development, and family well-being.



ChildPlus Report 2250-Waitlist by Age-accessed Feb. 2026

Childplus Report 2025/complete and verified/oldest first-accessed Feb. 2026



ChildPlus Report 2250-Waitlist by Income Status-Feb. 2026

Community Need and Service Gaps

Data from the six-county service area (Catoosa, Chattooga, Dade, Murray, Walker, and Whitfield) demonstrate a continued unmet need for Early Head Start and Head Start services. While licensed child care capacity exists across all counties, access to publicly funded early childhood programs remains limited, particularly for infants, toddlers, and low-income families requiring comprehensive services. In 2024, 699 children were served through Head Start/Early Head Start, with the highest enrollment in Whitfield and Walker counties..

These findings support the continued and expanded need for Head Start and Early Head Start services to address gaps in access, promote school readiness, and respond to the evolving needs of children and families within the service area.

Centers and Family Care Homes in Service Area Counties

2024	Total Providers	Child Care Centers	Serves Infants	Serves Toddlers	Serves Preschoolers	Family Child Care	Other Providers
Catoosa	24	17	65%	76%	100%	0	7
Chattooga	11	6	67%	67%	100%	1	4
Dade	6	3	100%	100%	100%	1	2
Murray	7	5	80%	80%	100%	1	1
Walker	17	8	100%	100%	100%	0	9
Whitfield	36	15	87%	93%	100%	5	16

Enrollment in Service Area Counties

2024	Kindergarten	Lottery Funded Pre-K	-At Risk Served by Pre-K	Head Start/Early Head Start
Catoosa	676	456	181	71
Chattooga	285	214	127	58
Dade	150	103	69	41
Murray	427	280	72	58
Walker	699	421	160	179
Whitfield	1,331	807	525	292

Licensed Capacity in Service Area Counties

2024	Total Licensed Capacity/Slots	Learning Center Slots	Family Childcare Slots
Catoosa	2,043	2,043	0
Chattooga	458	452	6
Dade	272	266	6
Murray	378	372	6
Walker	1,132	1,132	0
Whitfield	2,281	2,251	48

Family Resource Agency of North Georgia

Child & Family Data



Community Demographic Summary (PIR 2024–2025)

PIR 2024-25	Head Start		Early Head Start		Child Care Partners	
	Hispanic/Latino	Non-Hispanic	Hispanic/Latino	Non-Hispanic	Hispanic/Latino	Non-Hispanic
American Indian/Alaska Native	0	3	1	0	2	0
Asian	1	1	0	0	0	0
Black or African American	2	24	2	16	0	9
Native Hawaiian/Pacific Islander	0	0	0	0	0	0
White	88	251	60	152	26	40
Bi-racial or Multi-racial	12	45	8	38	2	5
Other Race	7	1	0	0	4	0
Total Enrollment	110	325	71	206	34	54

ChildPlus Report 9900-2024-25-accessed Feb. 2026

Enrollment data for the 2024–2025 program year indicate that children served across Head Start, Early Head Start, and Child Care Partnerships represent a diverse racial and ethnic composition. The largest proportion of enrolled children identify as White, with both Hispanic/Latino and Non-Hispanic representation across all program options. White children account for the majority of enrollment in each service category, particularly within Head Start and Early Head Start programs.

Children identifying as Bi-racial or Multi-racial represent the second-largest racial group served, demonstrating increasing diversity within the service area. Black or African American children also make up a notable portion of enrollment, primarily within non-Hispanic categories, while Hispanic/Latino representation is present across all racial groups.

Smaller numbers of children identify as American Indian/Alaska Native, Asian, or Other Race, and there is no reported enrollment of children identifying as Native Hawaiian or Pacific Islander during this program year. Overall enrollment totals reflect consistent participation across program types, with Head Start serving the largest number of children, followed by Early Head Start and Child Care Partners.

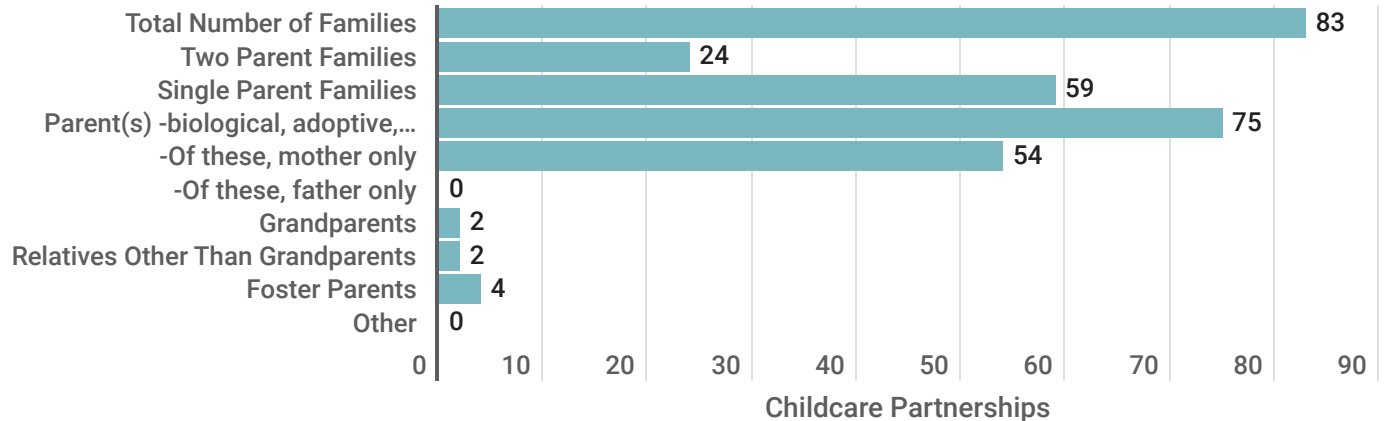
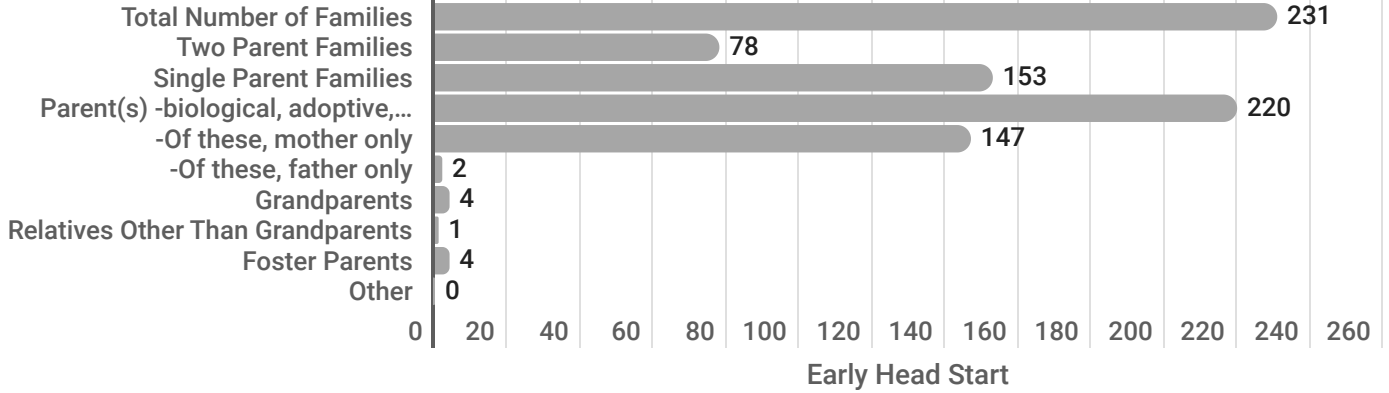
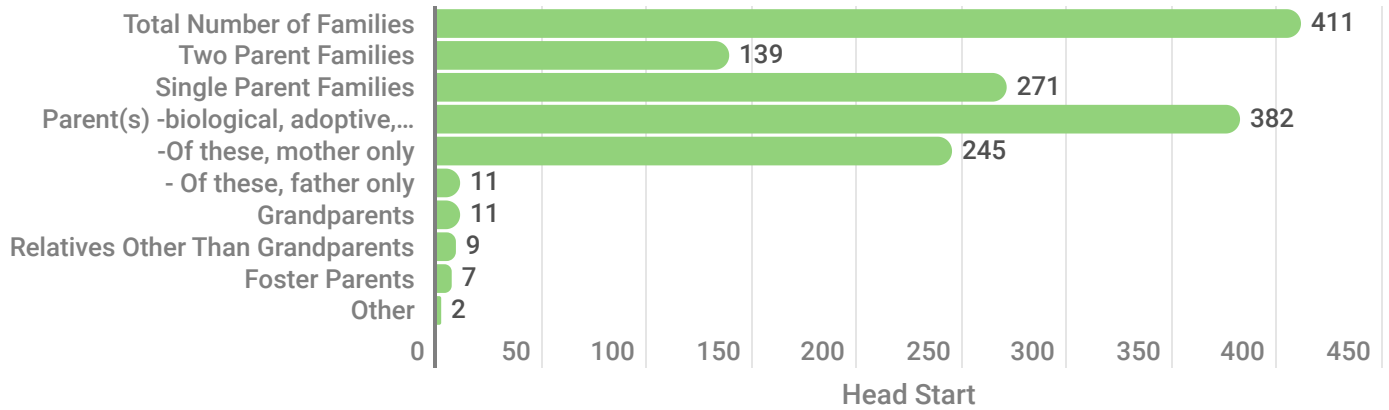


Family Types Served at Family Resource Agency of N. GA PIR 2024-25

Data from the 2024–2025 PIR Report shows that most families served by Head Start and related programs are single-parent households. In Head Start, 271 of 411 families are single-parent, with similar trends in Early Head Start and Childcare Partnerships.

Most children live with biological or adoptive parents, with many in mother-only households. A smaller number are cared for by grandparents, relatives, or foster parents.

These trends highlight the need for continued support for single-parent families and additional resources for kinship and non-traditional caregivers.



Parent/Guardian Education-Family Resource Agency of N. GA-PIR

Family Education 2024-2025	Head Start	Early Head Start	Childcare Partnerships (CCP)
Total Number of Families	411	231	83
Less than High School	83	55	16
High School Graduate/GED	273	139	52
Associate/Vocational/Some College	39	29	13
Advanced or BA Degree	16	8	2

The Program Information Report (PIR) for the 2024–2025 program year reflect 725 enrolled families across Head Start, Early Head Start, and Childcare Partnerships. Most parents/guardians report a High School diploma or GED (464 families; ~64%), with smaller percentages reporting some college or vocational training (81 families; ~11%) or an advanced or bachelor’s degree (26 families; ~4%). A total of 154 families (approximately 21%) include a parent/guardian with less than a high school education, with the highest proportion identified in Early Head Start.

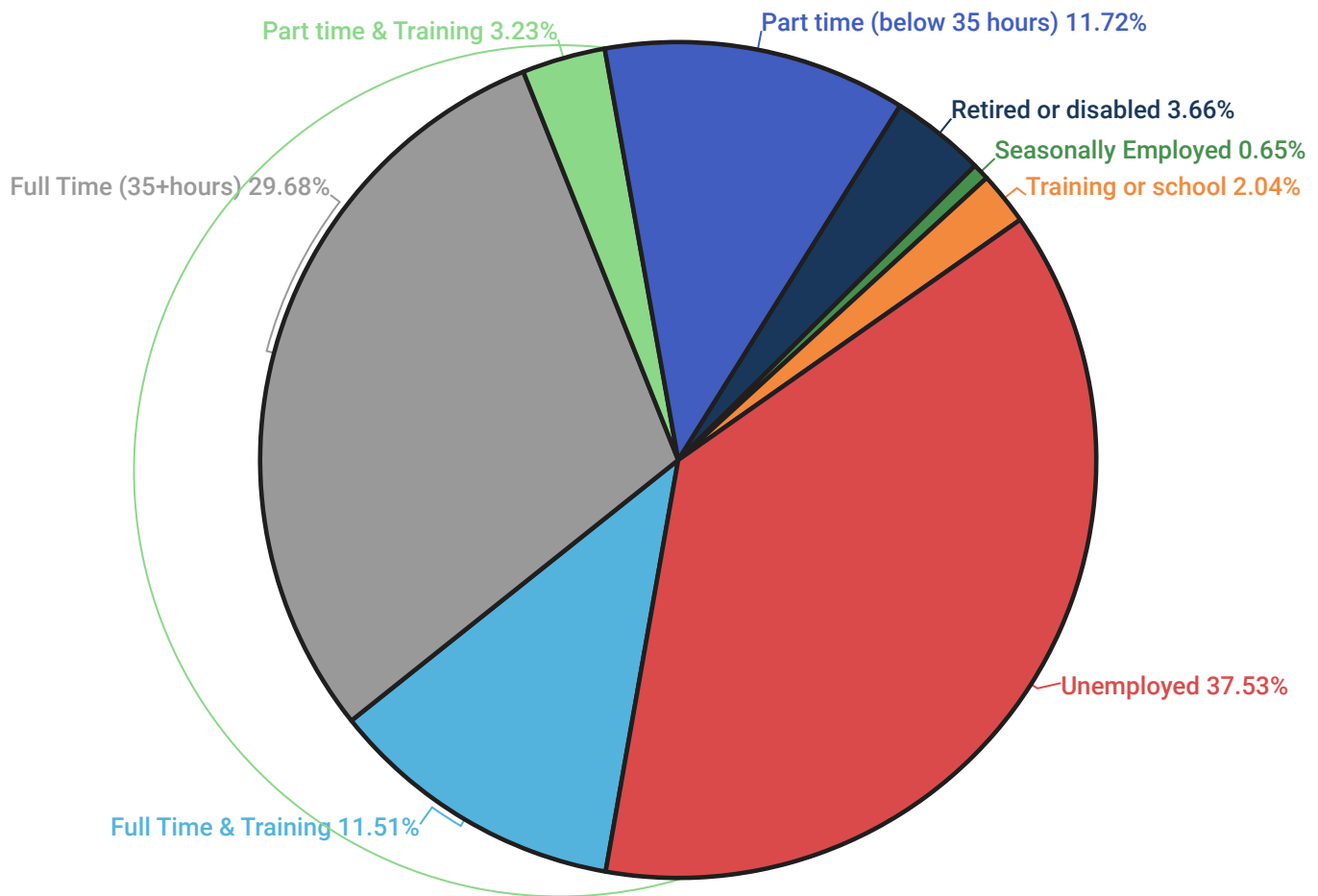
The program used community assessment data to identify this population as experiencing a prevalent educational barrier. In response, the program will use family partnership services to identify family strengths and needs and support goal setting related to adult education and literacy, and will maintain community partnerships to facilitate access to adult education, GED, and literacy resources. The program has established a 5-year goal to decrease the number of enrolled parents/guardians with less than a high school education.

Parent Employment/Job Training/School-Family Resource Agency of N. GA-PIR

Parent Employment, Job training, or in School 2024-2025	Head Start	Early Head Start	Child Care Partnerships
Total Cumulative Number of Families	411	231	83
At least 1 parent/guardian is employed, in job training, or in school:	304	207	67
Of these families, the number in which one or more parent/guardian is employed:	299	187	65
Of these families, the number in which on or more parent/guardian is in job training (job training program, professional certificate, apprenticeship, or occupational license):	87	60	18
Of these families, the number in which one or more parent/guardian is in school (GED, associate, bachelor, or advanced degree):	12	22	4
Neither/no parent/guardian is employed , in job training, or school (unemployed, retired, disabled):	103	72	26

Data from the 2024–2025 Program Information Report (PIR) show that most families had at least one parent or guardian who was employed, participating in job training, or enrolled in school, with employment being the most common activity across all program options. Participation in job training programs and school enrollment, including GED and postsecondary education, was present among enrolled families, particularly in Early Head Start, indicating active efforts by some parents/guardians to increase educational attainment. However, a consistent portion of families reported no parent/guardian engaged in employment, job training, or schooling, highlighting an ongoing need for targeted supports and referrals, including access to GED and adult education pathways.

Parent /Guardian Schedules-Education, Employment and Job Training-Family Resource Agency of N. GA PIR



Data from the 2025–2026 PIR Report indicates that many families served experience economic challenges. While some parents are employed full-time (276) or part-time (109), a significant number are unemployed (349). Others are balancing employment with training or education programs, including 107 in full-time work and training and 30 in part-time work and training.

A smaller portion of caregivers are retired, disabled, seasonally employed, or solely engaged in school or training.

These trends highlight a strong need for employment support, job training, education opportunities, and stable childcare services to help families achieve economic stability.

Disabilities-Family Resource Agency of N. GA-PIR

The program remains dedicated to supporting children with special needs, consistently exceeding the requirement to have at least 10% of funded enrollment comprised of children with disabilities.

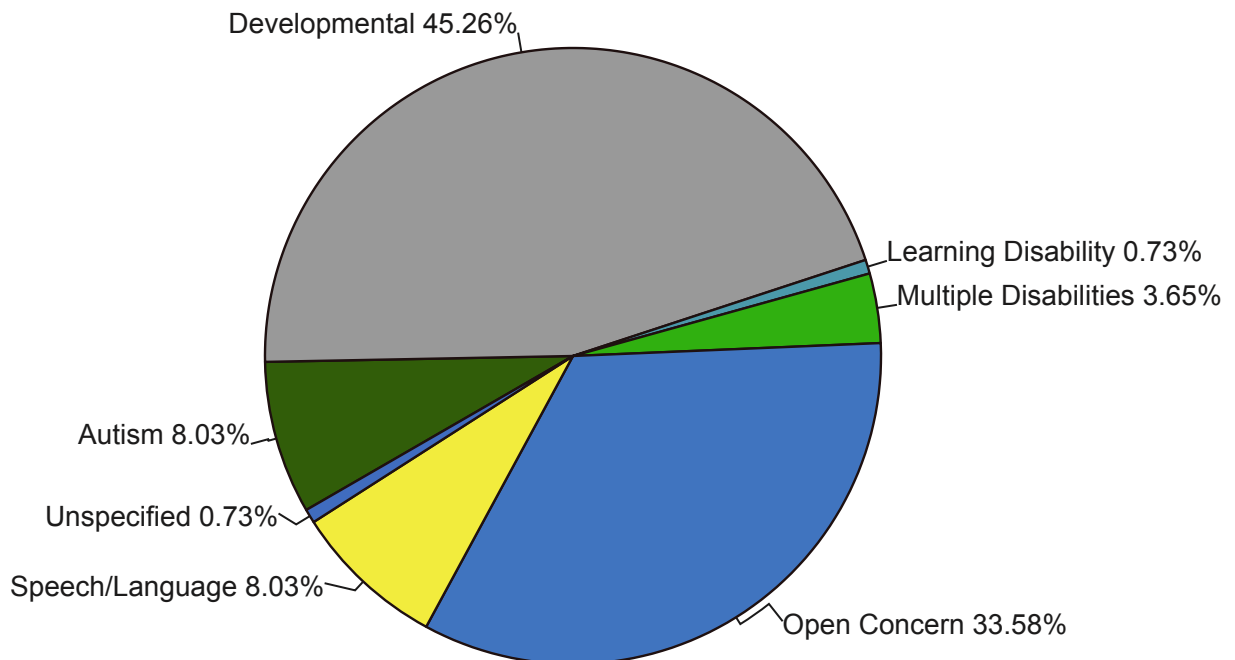
"During the 2024-2025 school year, the agency was funded for 380 Head Start children, with an annual cumulative enrollment of 458. Among these, 89 children were identified with a diagnosed disability, representing 23.4% of the funded enrollment. In Early Head Start, the agency was funded for 232 children, with a total cumulative enrollment of 298 children enrolled throughout the year. Of these, 31 children had a diagnosed disability, making up 13.3% of the funded enrollment. Additionally, in our CCP classes, the agency was funded for 80 children and enrolled 96 children over the school year. Among these children, 16 were diagnosed with a disability, accounting for 20% of the funded enrollment. Overall, 19.7% of all enrolled children across the programs had a diagnosed disability.

Collaborative recruitment efforts with local school systems and Babies Can't Wait have proven successful. Both Part B and Part C providers have played a pivotal role in welcoming and providing essential services to children with disabilities.

In Georgia, the state offers additional support for undiagnosed children aged 3 and older through the "Response to Intervention" (RTI) plan. This approach provides targeted enrichment interventions to gather further data, helping determine whether a child requires an Individualized Education Program (IEP).

The agency's unwavering commitment to children with special needs remains evident as we continue to exceed expectations and ensure all children receive the support and services they need to thrive".

Program Wide Disability Counts 2024-2025



Family Resource Agency of N. GA Head Start, Early HS, and Pre-K

Customer Survey Results

721 Responses

Question 1: Which program is your child in?

Head Start (331) | Early HS (302) | Pre-K (82) | CCP (6)

Question 2: Which classroom is your child in?

Multiple centers and classrooms represented.

Question 3: How long has your family been in the program?

<6 mo (46) | 6–12 mo (295) | 1–2 yrs (223) | 2+ yrs (157)

Question 4: I am happy with the services my family receives. – 98% scored as Strongly Agree or Agree

Question 5: The program helps my child learn and grow. – 98% scored as Strongly Agree or Agree

Question 6: I feel welcome and respected at the program. – 98% scored as Strongly Agree or Agree

Question 7: The program meets my family's needs. – 98% scored as Strongly Agree or Agree

Question 8: Staff keep me informed about my child. – 97% scored as Strongly Agree or Agree

Question 9: I get information when I need it. – 98% scored as Strongly Agree or Agree

Question 10: I know who to contact if I have a question or problem. – 99% scored as Strongly Agree or Agree

Question 11: What is the primary way you usually receive information?

Text messages (298) | Talking in person (262) | Phone calls (113) | Email (24) | Paper notes (24)

Question 12: How effective is that method for you? – 98% scored as Strongly Agree or Agree

Question 13: My child's teacher treats my child with care. – 98% scored as Strongly Agree or Agree

Question 14: I feel welcomed and respected by the teacher and staff. – 98% scored as Strongly Agree or Agree

Question 15: Staff listen to my questions and concerns in a respectful way. – 99% scored as Strongly Agree or Agree

Question 16: My child feels safe at the program. – 99% scored as Strongly Agree or Agree

Question 17: My child likes coming to the program. – 98% scored as Strongly Agree or Agree

Question 18: I feel like my child has learned from this experience. – 99% scored as Strongly Agree or Agree

Question 19: The program helps connect my family to needed resources. – 97% scored as Strongly Agree or Agree

Question 20: Being in the program has helped me feel more confident as a parent or caregiver. – 97% scored as Strongly Agree or Agree

Question 21: Program hours work well for my family. – 93% scored as Strongly Agree or Agree

Question 22: Drop-off and pick-up are easy for my family. – 94% scored as Strongly Agree or Agree

Question 23: Program rules are clear and easy to understand. – 98% scored as Strongly Agree or Agree

Overall Summary:

Survey results show very high family satisfaction across all areas of the program, with 97%–99% of respondents agreeing that services are supportive, respectful, and beneficial for their children. Families report strong communication, positive relationships with staff, and meaningful learning experiences. While program hours and drop-off/pick-up received slightly lower ratings, they still reflect strong positive feedback (over 90%). Overall, the program is effectively meeting the needs of children and families.

Family Advocate-Survey Results 2025-2026

County	Service Gaps	Improvements	Program Strengths	Family Strengths	Challenges	Partners	Transportation
Walker	Early Head Start slots, Legal aid, Therapy services, Medical access	Additional EHS slots, Gas cards, Resource awareness	Curriculum, Teachers, Educational support, Parent engagement	Involved fathers, Family bonding, Community events	Transportation, Unemployment, Financial hardship	Walker County Schools, The Haven, Medical providers	Carpooling, Transportation services
Catoosa	Legal aid, Childcare access, Classroom availability	Resource awareness, Classroom expansion, Special services support	Education services, Parent Cafés, Family programs	Family bonding, Goal setting, Community activities	Financial hardship, Transportation, Attendance	Family Connection, Schools, Medical providers	Vehicle repair support, Carpooling
Chattooga	Legal aid, Therapy access, SNAP access	School partnerships, Resource awareness, Benefit access	Nutrition support, Parent programs, Child services	Community support, Family bonding, Meal support	Transportation, Financial hardship, Substance use	Family Connection, Resource Center, Food banks	Vehicle repair support, Transit
Dade	Legal aid, Pediatric care, Dental care	Resource awareness, DFCS access, School coordination	Health services, Community health support	Working families, Family bonding	Financial hardship, Dental access, Family time	Family Connection, Health Department, Primary Health Care	Carpooling
Murray	Legal aid, Limited adult dental services	Resource awareness, Adult dental services	Utility support, Food assistance	Family bonding, Resource awareness	Transportation, Financial hardship	DFCS, Community services	Family transportation support
Whitfield	Transportation barriers, Housing, Legal aid	Parent training, Resource awareness, Community communication	Whole-family services, Health screenings, Parent involvement	Family involvement, Extended family support	Transportation, Financial hardship, Limited family time	Health Department, Schools, Dental clinics	Carpooling, Vehicle repair support

Preferred Communication Methods Between Family Advocates and Families

County	Primary Method	Secondary Method
Walker	Text	Face-to-Face
Catoosa	Face-to-Face	Text, Phone
Chattooga	Face-to-Face	Text, Phone
Dade	Face-to-Face	—
Murray	Face-to-Face	Text
Whitfield	Text	Face-to-Face

Analysis

The Community Assessment identifies three critical focus areas impacting program effectiveness and long-term family outcomes: chronic child absenteeism, low adult educational attainment (GED needs), and targeted recruitment of underserved populations. These factors are interconnected and directly influence school readiness, family stability, and program reach.

1. Child Attendance: Chronic Absenteeism as a Barrier to School Readiness:

Chronic absenteeism is a significant concern across the six-county service area. Program data show absenteeism rates as high as:

43.8% in Catoosa County
38.6% in Chattooga County
37% in Walker County

Similar patterns are seen in local kindergarten populations, confirming that attendance challenges begin early and persist into school.

Key contributing factors include:

Transportation barriers in rural areas
Seasonal illness and limited healthcare access

2. GED and Adult Education Need:

The service area demonstrates low higher education attainment (20.7%), significantly below state and national averages. In addition, data on teen pregnancy and births to mothers without a high school diploma—particularly in Whitfield, Walker, and Murray counties—highlight a continued need for adult education and GED support.

3. Recruitment Priorities: Targeting Underserved and High-Need Populations:

The assessment reveals gaps between eligible children and those currently served. Recruitment must prioritize populations with the highest unmet need:

Priority recruitment areas include:

Whitfield County: Highest population, largest number of unserved eligible children
Walker and Catoosa Counties: High numbers of eligible children with service gaps
Chattooga County: Highest poverty rate (20.7%) but low service utilization

Priority populations:

Infants and toddlers (largest Early Head Start gaps)
Children in poverty or near-poverty households
Homeless and foster children (categorically eligible)
Dual language learners (especially Spanish-speaking families)

Conclusion

Child attendance, adult education (GED attainment), and targeted recruitment represent key leverage points for improving outcomes across the service area. Addressing attendance barriers, expanding GED and family education supports, and strengthening recruitment in high-need areas will enhance school readiness, family self-sufficiency, and overall program impact.

Resources:

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

CDC <https://www.cdc.gov/>

ChildPlus PIR and Reports 2024-2025

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

Fostering Court Improvement-<http://fosteringcourtimprovement.org>

GEEARS: Georgia Early Education Alliance for Ready Students

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

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

<http://findaprovider.pshpgeorgia.com>

<http://georgiainsights.gadoe.org/dashboards/attendance>

<https://mchb.tvisdata.hrsa.gov/Narratives/Perinatal-Infant Health Annual Report>

<https://pmc.ncbi.nlm.nih.gov> Infant Mortality and Social Environment in Georgia

<https://oasis.state.ga.us/trendingtool/InfantMort>

Kid's Count Data Center <https://datacenter.kidscount.org>

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

US Census Bureau/American Community Surveys 2019-2023

www.americashealthrankings.org

www.countyhealthrankings.org

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

This Community Assessment was created using Infogram.

