



2016

NEEDS AND ASSETS REPORT

 **FIRST THINGS FIRST**

Salt River Pima Maricopa Indian Community Region

Salt River Pima-Maricopa Indian Community Regional Partnership Council

2016

Needs and Assets Report

Prepared by

Community Research, Evaluation & Development (CRED)
The Frances McClelland Institute for Children, Youth, and Families
John & Doris Norton School of Family and Consumer Sciences
College of Agricultural and Life Sciences
The University of Arizona

Funded by

First Things First Salt River Pima-Maricopa Indian Community Regional
Partnership Council

Frances McClelland Institute for Children, Youth and Families
John & Doris Norton School of Family and Consumer Sciences
College of Agricultural and Life Sciences
The University of Arizona
PO Box 210078
Tucson, AZ 85721-0462
Phone: (520) 621-8739
Fax: (520) 621-4979
<http://ag.arizona.edu/fcs/>

Letter from the Chair

February 10, 2017

Message from the Chair:

The past two years have been rewarding for the First Things First Salt River Pima-Maricopa Indian Community Regional Partnership Council, as we delivered on our mission to build better futures for young children and their families. During the past year, we have touched many lives of young children and their families.

The First Things First Salt River Pima-Maricopa Indian Community Regional Partnership Council will continue to advocate and provide opportunities as indicated throughout this report.

Our strategic direction has been guided by the Needs and Assets reports, specifically created for the Salt River Pima-Maricopa Indian Community Region in 2014 and the new 2016 report. The Needs and Assets reports are vital to our continued work in building a true integrated early childhood system for our young children and our overall future. The Salt River Pima-Maricopa Indian Community Regional Council would like to thank our Needs and Assets vendor, the University of Arizona Norton School of Family and Consumer Sciences, for their knowledge, expertise and analysis of the Salt River Pima-Maricopa Indian Community Region. The new report will help guide our decisions as we move forward for young children and their families within the Salt River Pima-Maricopa Indian Community region.

Going forward, the First Things First Salt River Pima-Maricopa Indian Community Regional Partnership Council is committed to meeting the needs of young children by providing essential services and advocating for social change.

Thanks to our dedicated staff, volunteers and community partners, First Things First is making a real difference in the lives of our youngest citizens and throughout the entire State.

Thank you for your continued support.

Sincerely,

A handwritten signature in black ink, appearing to read "Bella Miller". The signature is fluid and cursive, with the first name "Bella" and last name "Miller" clearly distinguishable.

Bella Miller, Chair

Salt River Pima-Maricopa Indian Community Regional Partnership Council

1839 South Alma School Road, Suite 100
Mesa, Arizona 85210
Phone: 602.771.4987
Fax: 602.755.2263

Bella Miller, Chair

Kevin Poleyumptewa, Vice Chair

Chris McIntier

Dr. Joyce Helmuth

Virginia Loring

Deborah DeVold

Edith Eubanks

Crystal Banuelos

Felicia Panana

Report Prepared by:

Norton School of Family and Consumer Sciences, College of Agricultural and Life Sciences,
University of Arizona
Tucson, AZ 85721-0462

Introductory Summary and Acknowledgments

Ninety percent of a child's brain develops before kindergarten and the quality of a child's early experiences impact whether their brain will develop in positive ways that promote learning. Understanding the critical role the early years play in a child's future success is crucial to our ability to foster each child's optimal development and, in turn, impact all aspects of wellbeing of our communities and our state.

This Needs and Assets Report for the Salt River Pima-Maricopa Indian Community Region helps us in understanding the needs of young children, the resources available to meet those needs and gaps that may exist in those resources. An overview of this information is provided in the Executive Summary and documented in further detail in the full report.

The First Things First Salt River Pima-Maricopa Indian Community Regional Partnership Council recognizes the importance of investing in young children and ensuring that families and caregivers have options when it comes to supporting the healthy development of young children in their care. This report provides information that will aid the Council's funding decisions, as well as our work with community partners on building a comprehensive early childhood system that best meets the needs of young children in our community.

It is our sincere hope that this information will help guide community conversations about how we can best support school readiness for all children in the Salt River Pima-Maricopa Indian Community region. This information may also be useful to stakeholders in our area as they work to enhance the resources available to young children and their families and as they make decisions about how best to support children birth to 5 years old in our area.

Acknowledgments:

We want to thank the Arizona Department of Economic Security and the Arizona Child Care Resource and Referral, the Arizona Department of Health Services, the Arizona Department of Education, the Census Bureau, the Arizona Department of Administration- Employment and Population Statistics, and the Arizona Health Care Cost Containment System for their contributions of data for this report, and their ongoing support and partnership with First Things First on behalf of young children.

To the current and past members of the Salt River Pima-Maricopa Indian Community Regional Partnership Council, your vision, dedication, and passion have been instrumental in improving outcomes for young children and families within the region. Our current efforts will build upon those successes with the ultimate goal of building a comprehensive early childhood system for the betterment of young children within the region and the entire state.

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Executive Summary

Regional Description

The Salt River Pima-Maricopa Indian Community is a sovereign tribe located 15 miles northeast of Phoenix, Arizona. The Community was established by Executive Order on June 14, 1879 and consists of 53,000 acres bordering the cities of Scottsdale, Tempe, Mesa and Fountain Hills. The Salt River Pima-Maricopa Indian Community is home to the Pima (“Akimel O’Odham,” River People) and the Maricopa (“Xalychidom Pipaash,” People who live toward the water). The First Things First Salt River Pima-Maricopa Indian Community Region has the same boundaries as the Salt River Reservation. The region covers about 85 square miles, entirely within Maricopa County.

Data Sources

The data contained in this report come from a variety of sources. Some data were provided to First Things First by state agencies, such as the Arizona Department of Economic Security (DES), the Arizona Department of Education (ADE), and the Arizona Department of Health Services (ADHS). Other data were obtained from publically available sources, including the 2010 U.S. Census, the American Community Survey (ACS), and the Arizona Department of Administration (ADOA). In addition, regional data from the 2014 First Things First Parent and Caregiver Survey are included.

Where available, tables and figures in this report include data for all Arizona reservations combined in addition to data for the state of Arizona to allow for appropriate comparisons between the region and other relevant geographies.

Population Characteristics

According to the U.S. Census, the Salt River Pima-Maricopa Indian Community Region had a population of 6,289 in 2010, of whom 626 (10%) were children ages birth to 5 years. Seventeen percent of households in the region included a young child. Over half (53%) of the households with young children (birth to 5) in the region are single-female households. Fourteen percent of children in the region are living with at least one foreign-born parent, compared to only three percent across all Arizona reservations. The proportion of young children living in a grandparent’s household in the region (37%) is slightly lower than the percentage in all Arizona reservations combined (40%) but more than double the proportion statewide (14%). For those children living in a grandparent’s household, over half (58%) live with a grandparent who is financially responsible for them, and nearly a quarter (23%) of children living with grandparents have no parent present in the home.

The vast majority (91%) of young children (ages 0-4) in the Salt River Pima-Maricopa Indian Community Region are American Indian. This proportion is similar to that of all Arizona reservations combined (92%), but differs greatly from that across the state (6%). The percentage of young children who are Hispanic or Latino in the Salt River Pima-Maricopa Indian Community is 20 percent, compared to nine percent in Arizona reservations overall and 45 percent in the state as a whole. The race and ethnicity breakdown among adults in the region differs from that of young children. Although most adults in the region are American Indian

(57%), 29 percent are white and 11 percent identify as Hispanic or Latino. In the state, however, only four percent of adults identified as American Indian, and twenty-five percent as Hispanic or Latino.

The ethnic composition in the Salt River Pima-Maricopa Indian Community Region is reflected in language use as well. Seven percent of people over age 5 speak a Native North American language. This is larger than the two percent of residents statewide; however, in comparison to all Arizona reservations (51%), far fewer people speak a Native North American language in the Salt River Pima-Maricopa Indian Community. Spanish is spoken in seven percent of households in the region, compared to four percent across all Arizona reservations combined. In the Salt River Pima-Maricopa Indian Community, the native languages spoken are Akimel O'Odham and Xalychidom Piipaash.

Economic Circumstances

Poverty rates for the total (of all ages) population and for young children in the Salt River Pima-Maricopa Indian Community Region are lower than those across all Arizona reservations combined but substantially higher than those in the state as a whole. Approximately one-third (32%) of the total population in the region lives in poverty, compared to 42 percent across all Arizona reservations and 18 percent statewide. In all these geographies, young children are consistently more likely to be in poverty than members of the total population. Over half (53%) of the children in the region live in poverty, a proportion that is slightly lower than that in all Arizona reservations combined (56%) but nearly double the proportion statewide (28%).

In addition to the families whose incomes fall below the federal poverty level, a substantial proportion of households in the region and across all Arizona reservations are low income, i.e., near but not below the federal poverty level (FPL). In the Salt River Pima-Maricopa Indian Community Region, nearly nine out of every ten (88%) of families with children aged four and under are living below 185 percent of the FPL (i.e., earned less than \$3,677 a month for a family of four), compared to 77 percent of families in all Arizona reservations combined, and 48 percent across the state. The median family income in the region (\$35,821) is substantially lower than the median family income in the state (\$58,897).

The average unemployment rate in the region for the 2009-2013 period is 15.8 percent, which is lower than the rate (25%) across all Arizona reservations combined but higher than the average state rate (10.4%).

The use of economic supports such as LEARN Program (Life Enhancement and Resource Network, the Tribal Temporary Assistance for Needy Families) and Supplemental Nutrition Assistance Program (SNAP) are higher in the Salt River Pima-Maricopa Indian Community Region compared to the state. In 2014, 20 percent of children birth to 5 years in the region received LEARN benefits, compared to only four percent of children statewide receiving Temporary Assistance for Needy Families (TANF). The majority of young children in the region (84%) received SNAP benefits in 2014, a much higher proportion than the 51 percent statewide. In both the region and the state, the proportion of young children in the region receiving LEARN/TANF and SNAP decreased between 2012 and 2014.

Educational Indicators

Children living within the Salt River Pima-Maricopa Indian Community Region attend schools in the Salt River-Pima Maricopa Community Schools, the Mesa Unified District, Scottsdale Unified School District, charter schools in the state, other public schools, private schools or Bureau of Indian Education boarding schools.

Early Learning

Early childhood education and care programs in the Salt River Pima-Maricopa Indian Community Region include the Early Childhood Education Center (ECEC), the FACE Program at Salt River Elementary, and the Early Enrichment Program under the Community's Youth Services Department.

Center and home-based care and education

Center-based services in the Salt River Pima-Maricopa Indian Community Region are available through the tribally-operated Early Childhood Education Center (ECEC), which offers several program options that allow parents to choose the one that best meets their individual needs. These include the Head Start preschool program, Early Head Start infant-toddler program and Early Childhood Education Center (Child Care Development Fund (CCDF) and Tribal funded components).

Head Start preschool program: serves children ages 3 to 5 living in the Salt River Community. The operation hours are from 8:00 am to 1:00 pm from early August to late May. This program is offered free-of-cost.

Early Head Start infant-toddler program: this program provides services to pregnant women and children ages 0 to 3 living in the Salt River Community. The program operates year-round from 8:00 am to 1:00 pm and there are no fees associated with it. The Early Head Start program includes 20 slots for home-based services where Parent Educators work with the children and their parents in the child's home twice a month.

Early Childhood Education Center (CCDF-funded component): funding from the Child Care and Development Fund (see more information on CCDF below) is also allocated for center-based full-time services at the ECEC. The Center serves children from 6 weeks old to five years of age. The Center hours are 7:30 am to 6:00 pm.

Although these different program components are available through the ECEC, the categories mostly refer to the funding source and the eligibility requirements associated with it. For the past 10 years, ECEC has been operating under a unique "blended" model where all enrolled children receive the same services in one facility, regardless of what specific funding source (or program) they are enrolled through. This model differs substantially from the one seen in other tribal communities where there is a stand-alone tribally-operated child care center (with funding from CCDF) and a stand-alone Head Start Program, both of which may also receive additional funding from the tribe; the level of coordination between the two programs varies depending on the community. At ECEC, eligibility criteria for all applications (with the exception of two new classrooms) is based on the Head Start requirements, but assignment of funding

source for each enrolled child is determined based on the family's demographic characteristics. Although administratively complex, ECEC's "blended" model allows for provision of high quality services (e.g. the entire Center is held to the requirements of the funding source with the highest standards, or even higher when the Community's Education Board set its own standards) while maximizing the resources available. According to key informants, this model may also open up additional full-time slots for enrolled children (i.e. Head Start funding is only for a five-hour a day program, so some children's slots may be funded through Head-Start funds in the morning and CCDF or tribal funds in the afternoon). This results in a seamless provision of services for children at one location without the additional paperwork and logistical burden that families in need of full-time care would face if they had to enroll their children in more than one program.

ECEC provides services to about 150 preschool-age children, 80 infants and toddlers in center based care and 20 families of infants and toddlers in the home based Early Head Start Program. In fiscal year 2012-2013, the total cumulative enrollment was 134 children aged 0-2 and 197 children aged 3-4; the monthly average number of children on the ECEC waiting list during that year was 91.

Child Care Development Fund (CCDF) program

The Child Care Development Fund (CCDF) Child Care Program is funded through the US Department of Health & Human Services – Administration for Children and Families. The program provides funding to grantees to help increase the availability, affordability, and quality of child care services. The Salt River Pima-Maricopa Indian Community receives funding from CCDF to provide services to low-income Native children ages 6 weeks to 9 years with parents who are working or in school full-time. Parents pay a co-payment based upon family size and income. To be eligible, the child must be enrolled in a federally-recognized tribe and the parents must be working or in school/job training full-time. Income eligibility requirements limit this program to low-income families.

Children must currently attend child care a minimum of 5 hours per day in order to meet the full-time attendance requirement. Once eligibility is determined, parents select a type of child care: a state licensed center, an Arizona Department of Economic Security (DES)-certified group or family care home, or an in-home provider. In the Salt River Pima-Maricopa Indian Community Region, the CCDF grant funds full-time, center-based services at the ECEC (as described above); home-based care for children with severe disabilities; and off-reservation, center-based care for children who are enrolled in private child care centers outside of the reservation through the Certificate Program. Another portion of CCDF funds is utilized for after-school programs at Salt River Elementary School.

Home-based care: In-home child care services funded by CCDF are restricted to children with severe diagnosed disabilities who cannot attend other types of care. The parent pays a co-payment directly to the provider, based upon rates charged and the family's size and income. The provider submits billing to ECEC along with attendance records on the children and ECEC pays the child care provider with CCDF grant funds. Re-certification is done annually to determine eligibility and as long as the family remains income-eligible (based upon current

federal poverty levels and state median income levels), they may continue to participate in this subsidy program.

Certificate Program: funding from CCDF is also available through the Certificate program which pays for a proportion of the cost of alternative off-reservation child care for families enrolled in federally recognized tribes living in the SRPMIC designated service area. This program serves children ages 6-weeks old to ten years old and cost is based on a sliding-scale fee.

According to the ECEC Annual Report 2012-2013 the Child Care Development Fund provided child care subsidies for a total of 492 children, 232 of whom were served at the ECEC center and 260 who participated in the Certificate Program.

In addition to Head Start and CCDF, ECEC also receives funding from the Salt River Pima-Maricopa Indian Community.

FACE

Family and Child Education (FACE) is an early childhood and parental involvement program for American Indian families in schools sponsored by the Bureau of Indian Education Bureau of Indian Affairs. The goals of the FACE program include increasing family literacy; strengthening family-school-community connections; promoting the early identification and provision of services to children with special needs; and promoting the preservation of the unique cultural and linguistic diversity of the communities served by the program. FACE services and activities are currently taking place in 46 Bureau of Indian Education schools, 12 of which are located in the state of Arizona. In the Salt River Pima-Maricopa Indian Community, a FACE Program has been available at Salt River Elementary since school year 2001-2002.

FACE has both a center-based and a home-based component. The home-based component includes personal visits and screenings by parent educators and is aimed at families with children from birth to age three, although families can join the program from pregnancy on. As of July 2014, 25 children and 30 adults, participated in the home-based component.

The FACE center-based preschool component includes an early childhood education program for children aged three to five, adult education for the children's parents, and Parent and Child Time (PACT). The adult component of the program at Salt River Elementary has a strong focus on parents or caregivers obtaining their GED. Some parents also attend community college courses. Most adults in the program are also active in school events, as the program is well integrated into school activities. As of July 2014, there were 16 children and 11 adults participating in the center-based component.

Key informants indicated that the number of participating families tends to fluctuate, as families enter and leave the program constantly. On average, families stay in the program for 6 or 7 months. Some parents or caregivers obtain a job, while others may feel that commitment to participate is too high and that the time of service is required is too long. In addition, key informants pointed out that an additional challenge for parents with babies is the lack of child care available so they can participate in the program (as was mentioned above, the ECEC has a long waiting list).

The FACE program at Salt River Elementary recruits through the community newspaper, participant referrals and word of mouth. In addition, the program recruits participants twice a month at community events and also at the school. The program has a waiting list for the home-based component of the program, but there has not been a waiting list for the center-based component in the past few years. According to key informants, in the past the program did not require a background checks for the adults participating in center-based services. Once this requirement was implemented, it became a major recruitment challenge for the program because many of the adults interested in participating were not able to clear the background check. This is a challenge shared by many other FACE programs in the state and nationally. According to key informants, it is an unfortunate situation because the program often targets parents who are “starting over”: those who might have spent time in jail in the past but who are looking for a second opportunity to start over and become better parents. However, having a criminal record in their background precludes them from participating in the center-based program at the school. Home-based services are the only option available to families in this situation.

The only eligibility requirement for the program is for the child to be at least 1/4 Native American. The program does give priority to enrolled members of the Community but if slots are available after all enrolled members have registered, they do open the program up to any other Native families.

As mentioned above, FACE programs put an emphasis on traditional Native culture and language. All participants at the Salt River Elementary FACE program (adults and children) have a language and culture class once a week.

The program currently employs two parent educators, one adult education teacher, one early childhood teacher, and a teacher’s aide. As a comprehensive family support program, it collaborates closely with other agencies in the Community. The FACE program constantly refers parents to the Life Enhancement and Resource Network (LEARN) Tribal TANF Program, even if they do not qualify for FACE services.

Early Enrichment Program

Center-based services in the region are also available through the Early Enrichment Program, which is housed at the Salt River Pima-Maricopa Indian Community Youth Services Department. This program, which is fully funded by the Salt River Pima-Maricopa Indian Community provides free-of-cost services to preschool age children (3 to up to the time they enter kindergarten). It focuses on Kindergarten readiness and social skills and the overall curriculum is based on the children’s interest.

The Early Enrichment Program, formerly known as Child Development Center, has been in place in the Community for over a decade. It operates year-round from 8:00 to 1:00 pm and breakfast, snack and lunch are served to all children. Transportation is available to children enrolled in the program; as of May of 2014, all 12 enrolled children were being transported. The total enrollment capacity for the Early Enrichment Program is 18 children, but the program is currently understaffed and therefore limited in the number of children that can be enrolled. In addition, transportation is currently available for only a total of 12 children.

Children can enroll in the program from the time they turn three and are potty-trained; the only other requirements are for the children to live on the reservation and to be up-to-date on their immunizations. Priority is given to enrolled Community members, although the program opens up slots to non-enrolled Community members if space allows, and no enrolled children are on the waiting list. However, the program almost always operates at capacity, with a long waiting list (12 children or more, as of May of 2014) and with few children leaving the program until they transition to kindergarten or move out of the Community.

Another unique characteristic of the Early Enrichment Program is the close connection it maintains with the families of participating children. Program staff keep in communication with the parents, allowing them to work with the families when personal or family circumstances may get in the way of children participating in the program. This is particularly important for the young parents in the program.

The program strongly emphasizes parent participation and involvement. Parents are encouraged to join the program activities at any time, and monthly family activities are part of the regular curriculum. Staff with the program are able to stay in touch with the parents every day during pick-up and drop-off times. According to staff with the program, parent participation is very good, and typically all of the parents (and extended family members) attend program events.

The Early Enrichment Program collaborates with various departments in the Community. The tribal Child Find program does developmental screenings of children enrolled in the Early Enrichment Program twice a year in the Fall and Spring, as well as every time a new child enrolls. The Early Enrichment Program also works with the Recreation Department and the Health Center on their Tiny Tots program. Children in the program also receive services from the Cultural Resources Department, which provides culture and language education, including working on a garden with traditional crops. Other programs that they collaborate with include: the Boys and Girls Club, the Salt River Pima-Maricopa Indian Community Library and Police and Fire Departments and soon also with the Fatherhood Program.

Cost of Childcare

In the Salt River Pima--Maricopa Indian Community Region, efforts are made to assure child care in the Community is more affordable. Parents of children enrolled full--time at the Early Childhood Education Center (ECEC) are billed for the child care services their child receives. Bills are due and payable at the Finance office on the 25th of each month and are for services rendered the previous month. Parents may elect to use payroll deductions (if employed by Salt River Pima--Maricopa Indian Community) or Per Capita deductions. Parents are not billed for the Head Start/Early Head Start hours between 8:00 a.m. and 1:00 p.m. The billing structure is dependent upon the current year's Federal Poverty Levels and the Arizona State Median Income levels which are updated annually. Billing amounts vary depending upon the hours the child is in attendance each day. Full day (5 hours or more) ranges from \$1.40 per day to \$14.00 per day. Part day (less than 5 hours per day) ranges from \$.70 per day to \$7.00 per day. Siblings are billed at the rate of \$1 per day. There are six billing levels; four are CCDF subsidized and one is considered "full pay." Some families living under the poverty guidelines are exempt from

paying a co-payment and these families include children placed in protective care, including foster placement, homeless children, and children of teen parents who are attending high school.

The number of service visits by the Division of Developmental Disabilities (DDD) for children aged 0-2 in the region decreased between 2013 and 2014 (from 151 to 57, respectively). No services were provided by DDD to children aged 3-5 in those same years.

Parent perceptions of their children's developmental needs

The First Things First Family and Community Survey is a phone-based survey designed to measure many critical areas of parents' knowledge, skills, and behaviors related to their young children. In 2014, First Things First conducted a modified version of the Family and Community survey in six tribal regions including the Salt River Pima-Maricopa Indian Community Region, known as the 2014 First Things First Parent and Caregiver Survey. This survey, conducted face-to-face with parents and caregivers of young children living in the region, included a sub-set of items from the First Things First Family and Community Survey, as well as additional questions that explored health needs in tribal communities. A total of 107 parents and other caregivers responded to the survey at a variety of locations across the Salt River Pima-Maricopa Indian Community Region.

The 2014 First Things First Parent and Caregiver Survey included a set of questions aimed at gauging parents' and caregivers' concerns about their children's development. Respondents were asked to indicate how concerned they were about several developmental events and stages in eight key areas. The two areas which revealed the greatest degree of concern were "How well your child behaves" and "How well your child gets along with others." About one-third of the respondents reported being worried, either a lot or a little, about each of these two areas of child development. The next most worrisome area for parents and caregivers was "How well your child talks and makes speech sounds," which was of concern to 21 percent of the respondents.

Across the eight questions, 12 percent of the respondents reported being "worried a lot" about one or more, and 46 percent were "not worried at all" about all eight. The remaining 42 percent were "worried a little" about at least one of the eight.

Child Health

In 2013, there were 114 babies born to women residing in the Salt River Pima-Maricopa Indian Community Region. Forty percent of pregnant women in the region had no prenatal care during the first trimester. This regional percentage is more than twice than the one across the state as a whole (19%) and does not meet the Healthy People 2020 objective of fewer than 22.1 percent without first-trimester care. Seventeen percent of pregnant women in the region had fewer than five prenatal care visits, which is more than three times the percentage statewide (5%).

The majority of births in the region (87%) were paid for by a public payor (the Indian Health Service or the Arizona Health Care Cost Containment System (AHCCCS, Arizona's Medicaid)), while just over half (55%) of births in the state fall into that category.

Of the babies born in 2013 to women in the region, 11 percent had low birth weight (2.5 kg or less), a higher percentage than across the state as a whole (7%), and over the Healthy People 2020 objective of fewer than 7.8 percent. A higher proportion of babies in the region (16%) were premature (less than 37 weeks) compared to the state (9%). The regional percentage does not meet the Healthy People 2020 objective of fewer than 11.4 percent premature. Six percent of babies in the region were placed in neonatal intensive care, a slightly higher proportion than the state as a whole (5%).

According to the data from the American Community Survey, over one quarter (26%) of the young children in the Salt River Pima-Maricopa Indian Community Region are estimated to be uninsured. This percentage is higher than that in all Arizona reservations combined (20%), and more than double the percentage across the state (10%).

Healthy People 2020 sets a target of 80 percent for full vaccination coverage among young children (19-35 months). Indian Health Service data for the Salt River Pima-Maricopa Indian Community (FY2013) indicate that 70.1 percent of children 19-35 months have had the recommended vaccine series (using series 4:3:1:3:3:1:4), which is below the Healthy People Target.

A set of questions on the 2014 First Things First Parent and Caregiver Survey asked participants whether various health care services that their child had required in the past year were delayed or never received. Over one-third (35%) of the survey participants in the Salt River Pima-Maricopa Indian Community Region reported that their child (or children) had not received timely health care at least once during the previous year. Most frequently, it was dental care (20%), medical care (15%), or vision care (15%) that was delayed or not received.

Family Support and Literacy

The 2014 First Things First Parent and Caregiver Survey collected data about parent and caregiver knowledge of children's early development and their involvement in a variety of behaviors known to contribute positively to healthy development, including two items about home literacy events.

Thirty percent of the respondents in the Salt River Pima-Maricopa Indian Community Region reported that someone in the home read to their child six or seven days in the week prior to the survey. A slightly larger fraction (33%) reported that the child was not read to, or only once or twice during the week. Telling stories or singing songs six or seven days a week was similarly frequent; 31 percent of the respondents reported their children were engaged in these activities. In more than two-thirds of the homes (76%), children heard stories or songs three or more days per week. The average respondent reported reading stories 3.8 days per week, and singing songs or telling stories 4.2 days per week.

The 2014 First Things First Parent and Caregiver Survey also included an item aimed at eliciting information about parents' and caregivers' awareness of their influence on a child's brain development.

More than half (56%) of the survey participants in the region recognized that they could influence brain development prenatally or right from birth. Still, a sizeable proportion (22%) responded that a parent's influence would not begin until after the infant was 7 months old.

Raising young children in the region: positive aspects and challenges

Parents and caregivers of young children who participated in the 2014 First Things First Parent and Caregiver Survey were asked what they liked best about raising young children in their community. In response to this question, many of the respondents indicated they liked the opportunities children have to learn about their culture (22%), heritage and traditions (17%), and Native language (5%). As some parents said: "Children get to see where they come from and learn about their culture;" "[I like best the] teaching of traditions and culture and what grandparents passed on."

Survey respondents also indicated they were grateful their children can grow up near their grandparents, other relatives, and elders (18%). Many parents and caregivers (21%) also indicated their appreciation for the opportunity to raise children in a community that is "close-knit," supportive, and also overall safe. In the words of one parent: "It's a 'together community.' Everyone knows each other."

More specifically, many parents and caregivers mentioned the appreciation they have for the community activities and events that take place in the Salt River Pima-Maricopa Indian Community (12%), the services available to community members (10%), and the programs available to young children and their families (15%) including, sports activities, Boy Scouts and Girl Scouts, the FACE program, church-led activities, and programs and activities sponsored by First Things First and the Early Childhood Education Center. Other responses included appreciation for the high quality of the schools and early childhood education programs in the Community (10%): "The schools are very good," one survey participant said. "If you need resources through the school they're very good and out there to help you." Survey respondents also liked the opportunities for outdoor and indoor recreational activities (5%), and the supportiveness of the Tribal Council towards the people of the Community (2%). The following quotes illustrate some of these perceptions: "I have gotten a lot of help since I moved here;" "the Tribal Council takes care of the community and provides services;" "I like best that [my children] are in a community who only wants the best for all children."

Parents and caregivers were also asked about the most difficult aspects of raising children in the Salt River Pima-Maricopa Indian Community. The majority of survey takers indicated that negative influences such as drugs and alcohol (19%) and gangs (10%), were among the main challenges of raising children in Community. Additionally, about five percent of respondents indicated they sometimes worry about their children's general safety in terms of traffic (3%), violence (5%), bullying (2%), and crime (2%). Aside from safety concerns, seven percent of parents and caregivers indicated it was difficult to raise children in their community because community members have different – and at times conflicting – views and values about how children should be raised. Other parents and caregivers who participated in the survey indicated that they sometimes have difficulties with transportation (5%) and being able to afford necessities (3%). Additionally, about four percent of survey takers indicated they have

trouble finding childcare that fits with their work schedules. A few other parents expressed a concern about their children not learning enough about other cultures or communities (or cultural diversity in general), or not being able to interact with children from other ethnic groups.

Most important things that would improve young children's lives

The 2014 First Things First Parent and Caregiver Survey also included an item asking parents what they thought were the most important things that should happen in order to improve the lives of children and families in the Salt River Pima-Maricopa Indian Community Region. Responses to these questions were diverse with some including specific suggestions about additional services (or an increase in existing services). They are presented in order of most to least cited.

Increased parent involvement, especially around children's education, was a common response to this item. More family activities, especially those targeting young children and teens was another frequent suggestion. Several other parents indicated that the community would benefit from an increase in family support services to help families involved with Child Protective Services (CPS) (like additional parenting classes). A decrease in the use of drugs and alcohol was also brought up by some survey respondents. Other parents suggested that more traditional/cultural events would benefit the community.

A few parents and caregivers suggested increasing the availability of existing services or resources such as:

- the number of doctors and services at the Salt River Health Clinic
- mental health services
- services for children with special needs
- nutrition and physical activity classes
- child care, including options for parents who work early in the morning and/or late at night
- life-skills classes
- adult education
- transportation services
- creating opportunities for parents and single parents to get together for the purpose of networking and supporting one another
- housing

Communication, Public Information and Awareness Systems Coordination among Early Childhood Programs and Services

As it has been described in this report, there is a wide range of services available to families with young children in the Community. This certainly represents a major asset in the region.

One example of this is the collaboration between Life Enhancement and Resource Network (LEARN) program and tribal Child Protective Services (CPS). LEARN is now seen as one more resource available to CPS and they can make LEARN services be part of the parents' case plan which often includes an educational component, bringing in the variety of services offered by the Education Division. Because the LEARN program is separate from CPS, this program can serve as a more 'neutral entity' and help facilitate parent cooperation. This kind of collaboration creates a network of support for the parents of young children in the region.

Nevertheless, key informants pointed out that the level of coordination and collaboration among all the different services providers tends to vary. On the one hand, some key informants indicated that service providers in the region are very good at coming together to organize Community-wide events and activities and that interactions among the different programs are generally positive and collaborative.

On the other hand, key informants suggested that collaboration among services providers could increase for the benefit of families in the Community. Enhanced communication and collaboration would also benefit providers of home-based services, key informants said, in order to avoid duplication of services and to make sure that families are accessing the services that will meet their needs.

The Salt River Pima-Maricopa Indian Community Region

Regional Description

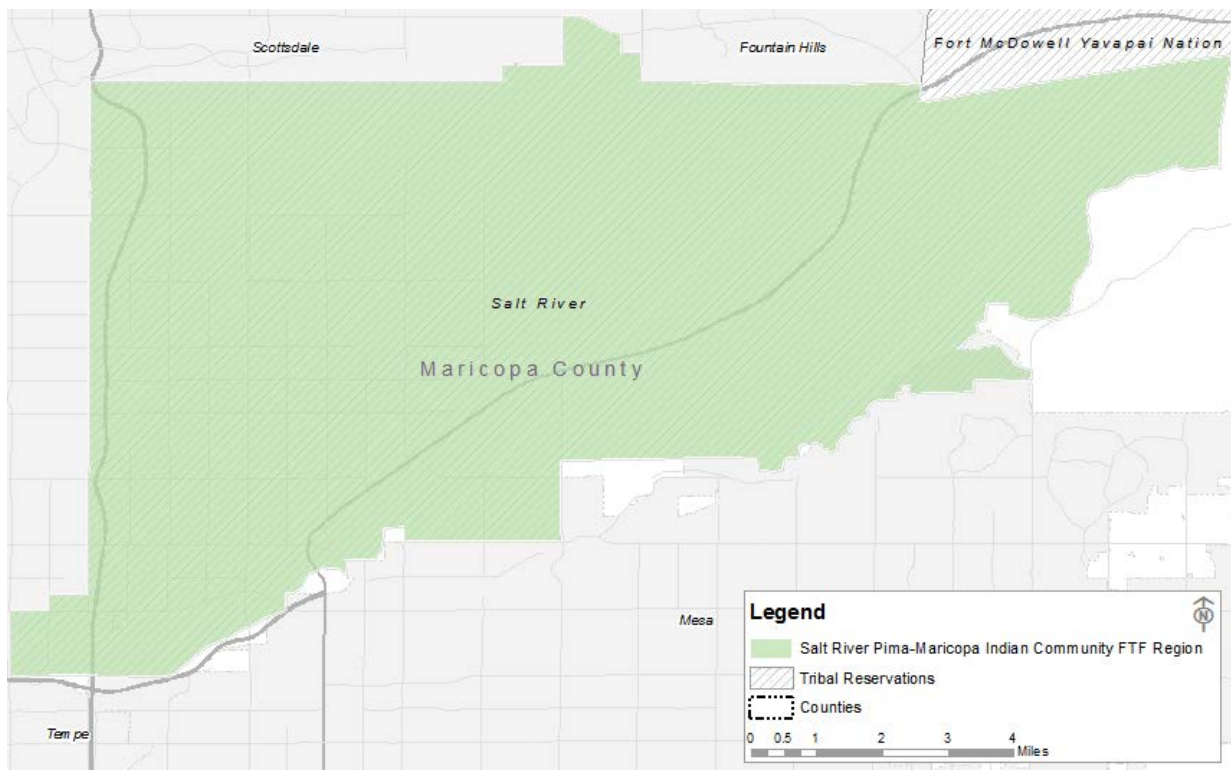
When First Things First was established by the passage of Proposition 203 in November 2006, the government-to-government relationship with federally-recognized tribes was acknowledged. Each tribe with tribal lands located in Arizona was given the opportunity to participate within a First Things First designated region or elect to be designated as a separate region. The Salt River Pima-Maricopa Indian Community was one of 10 tribes that chose to be designated as its own region. This decision must be ratified every two years, and the Salt River Pima-Maricopa Indian Community has opted to continue to be designated as its own region.

The Salt River Pima-Maricopa Indian Community is a sovereign tribe located 15 miles northeast of Phoenix, Arizona. The Community was established by Executive Order on June 14, 1879 and consists of 53,000 acres bordering the cities of Scottsdale, Tempe, Mesa and Fountain Hills. The Salt River Pima-Maricopa Indian Community is home to the Pima (“Akimel O’Odham,” River People) and the Maricopa (“Xalychidom Pipaash,” People who live toward the water).¹ The First Things First Salt River Pima-Maricopa Indian Community Region has the same boundaries as the Salt River Reservation. The region covers about 85 square miles, entirely within Maricopa County.

Figure 1 shows the geographical area covered by the Salt River Pima-Maricopa Indian Community Region. Additional information available at the end of this report includes a map of the region by zip code in Appendix 1, a table listing zip codes for the region in Appendix 2, and a map of school districts in the region in Appendix 3.

¹ <http://www.srpmic-nsn.gov/>

Figure 1. The Salt River Pima-Maricopa Indian Community Region



Source: U.S. Census Bureau (2010). TIGER/Line Shapefiles: TabBlocks, Streets, Counties, American Indian/Alaska Native Homelands. Retrieved from <http://www.census.gov/geo/maps-data/data/tiger-line.html>

Data Sources

The data contained in this report comes from a variety of sources. Some data were provided to First Things First by state agencies, such as the Arizona Department of Economic Security (DES), the Arizona Department of Education (ADE), and the Arizona Department of Health Services (ADHS). Other data were obtained from publically available sources, including the 2010 U.S. Census, the American Community Survey (ACS), and the Arizona Department of Administration (ADOA). In addition, regional data from the 2014 First Things First Parent and Caregiver Survey are included.

The U.S. Census² is an enumeration of the population of the United States. It is conducted every ten years, and includes information about housing, race, and ethnicity. The 2010 U.S. Census data are available by census block. There are about 115,000 inhabited blocks in Arizona, with an average population of 56 people each. The Census data for the Salt River

² U.S. Census Bureau. (May, 2000). *Factfinder for the Nation*. Retrieved from <http://www.census.gov/history/pdf/cff4.pdf>

Pima-Maricopa Indian Community Region presented in this report were calculated by identifying each block in the region, and aggregating the data over all of those blocks.

The American Community Survey³ is a survey conducted by the U.S. Census Bureau each month by mail, telephone, and face-to-face interviews. It covers many different topics, including income, language, education, employment, and housing. The ACS data are available by census tract. Arizona is divided into about 1,500 census tracts, with an average of about 4,200 people in each. The ACS data for the Salt River Pima-Maricopa Indian Community Region were calculated by aggregating over the census tracts which are wholly or partially contained in the region. The data from partial census tracts were apportioned according to the percentage of the 2010 Census population in that tract living inside the Salt River Pima-Maricopa Indian Community Region. The most recent and most reliable ACS data are averaged over the past five years; those are the data included in this report. They are based on surveys conducted from 2009 to 2013. In general, the reliability of ACS estimates is greater for more populated areas. Statewide estimates, for example, are more reliable than county-level estimates.

To protect the confidentiality of program participants, the First Things First Data Dissemination and Suppression Guidelines preclude our reporting social service and early education programming data if the count is less than ten, and preclude our reporting data related to health or developmental delay if the count is less than twenty-five. In addition, some data received from state agencies may be suppressed according to their own guidelines. The Arizona Department of Health Services, for example, does not report counts less than six. Throughout this report, information which is not available because of suppression guidelines will be indicated by entries of “N/A” in the data tables.

A note on the Census and American Community Survey data included in this report:

In this report we use two main sources of data to describe the demographic and socio-economic characteristics of families and children in the region: the U.S. Census 2010 and the American Community Survey. These data sources are important for the unique information they are able to provide about children and families across the United States, but both of them have acknowledged limitations for their use on tribal lands. Although the Census Bureau asserted that the 2010 Census count was quite accurate in general, they estimate that “American Indians and Alaska Natives living on reservations were undercounted by 4.9 percent.”⁴ In the past, the decennial census was the only accessible source of wide-area

³ U.S. Census Bureau. (April, 2013). *American Community Survey Information Guide*. Retrieved from http://www.census.gov/content/dam/Census/programs-surveys/acs/about/ACS_Information_Guide.pdf

⁴ U.S. Census Bureau. (May, 2012). *Estimates of Undercount and Overcount in the 2010 Census*. www.census.gov/newsroom/releases/archives/2010_census/cb12-95.html

demographic information. Starting in 2005, the Census Bureau replaced the “long form” questionnaire that was used to gather socio-economic data with the American Community Survey (ACS). As noted above, the ACS is an ongoing survey that is conducted by distributing questionnaires to a sample of households every month of every year. Annual results from the ACS are available but they are aggregated over five years for smaller communities, to try to correct for the increased chance of sampling errors due to the smaller samples used.

According to the State of Indian Country Arizona Report,⁵ this has brought up new challenges when using and interpreting ACS data from tribal communities and American Indians in general. There is no major outreach effort to familiarize the population with the survey (as it is the case with the decennial census), and the small sample size of the ACS makes it more likely that the survey may not accurately represent the characteristics of the population on a reservation. The State of Indian Country Arizona Report indicates that at the national level, in 2010 the ACS failed to account for 14% of the American Indian/Alaska Native (alone, not in combination with other races) population that was actually counted in the 2010 decennial census. In Arizona the undercount was smaller (4%), but according to the State of Indian Country Arizona report, ACS may be particularly unreliable for the smaller reservations in the state.

While recognizing that estimates provided by ACS data may not be fully reliable, we have elected to include them in this report because they still are the most comprehensive publically-available data that can help begin to describe the families that First Things First serve. Considering the important planning, funding and policy decisions that are made in tribal communities based on these data, however, the State of Indian Country report recommends a concerted tribal-federal government effort to develop the tribes’ capacity to gather relevant information on their populations. This information could be based on the numerous records that tribes currently keep on the services provided to their members (records that various systems must report to the federal agencies providing funding but that are not currently organized in a systematic way) and on data kept by tribal enrollment offices.

A current initiative that aims at addressing some of these challenges has been started by the American Indian Policy Institute, the Center for Population Dynamics and the American Indian Studies Department at Arizona State University. The Tribal Indicators Project⁶ began at the request of tribal leaders interested in the development of tools that can help them gather and utilize meaningful and accurate data for governmental decision-making. An important part of

⁵ Inter Tribal Council of Arizona, Inc., ASU Office of the President on American Indian Initiatives, ASU Office of Public Affairs. (2013). *The State of Indian Country Arizona. Volume 1*. Retrieved from http://outreach.asu.edu/sites/default/files/SICAZ_report_20130828.pdf

⁶ http://aipi.clas.asu.edu/Tribal_Indicators

this effort is the analysis of Census and ACS data in collaboration with tribal stakeholders. We hope that in the future these more reliable and tribally-relevant data will become available for use in these community assessments.

Population Characteristics

Why it Matters

The characteristics of families living within a region can influence the availability of resources and supports for those families.⁷ Population characteristics and trends in family composition are often considered by policymakers when making decisions about the type and location of services to be provided within a region such as schools, health care facilities and services, and social services and programs. As a result of these decisions, families with young children may have very different experiences within and across regions regarding access to employment, food resources, schools, health care facilities and providers, and social services. It is important, therefore, that decision-makers understand who their constituents are so that they can prioritize policies that address the needs of diverse families with young children. Accurate and up-to-date information about population characteristics such as the number of children and families in a geographic region, their ethnic composition, whether their parents were born abroad, living arrangements and languages spoken can support the development or continuation of resources that are linguistically, culturally, and geographically most appropriate for a given locale.

In addition to being affected by community resources, the likelihood of a child reaching his or her optimal development can also be affected by the supports and resources available within the family.^{8,9} The availability of family resources can be influenced by the characteristics of the family structure, such as who resides in a household and who is responsible for a child's care.

Children living with and being cared for by relatives or caregivers other than parents, is increasingly common.¹⁰ Extended, multigenerational families and kinship care are more typical in Native communities.^{11,12} The strengths associated with this open family structure -mutual

⁷ U.S. Department of Health and Human Services. Health Resources and Services Administration, Maternal and Child Health Bureau. (2014). *Child Health USA 2014. Population Characteristics*. Retrieved from: <http://mchb.hrsa.gov/chusa14/population-characteristics.html>

⁸ Center for American Progress. (2015). *Valuing All Our Families. Progressive Policies that Strengthen Family Commitments and Reduce Family Disparities*. Retrieved from: <https://cdn.americanprogress.org/wp-content/uploads/2015/01/FamilyStructure-report.pdf>

⁹ Kidsdata.org. (n.d.). *Summary: Family Structure*. Retrieved from: <http://www.kidsdata.org/topic/8/family-structure/summary>

¹⁰ U.S. Department of Health and Human Services. (2012). *ASPE Report. Children in Nonparental Care: A Review of the Literature and Analysis of Data Gaps*. Retrieved from <http://aspe.hhs.gov/basic-report/children-nonparental-care-review-literature-and-analysis-data-gaps>

¹¹ Harrison, A. O., Wilson, M. N., Pine, C. J., Chan, S. Q., & Buriel, R. (1990). Family ecologies of ethnic minority children. *Child Development*, 61(2), 347-362.

¹² Red Horse, J. (1997). Traditional American Indian family systems. *Families, Systems, & Health*, 15(3), 243.

help and respect- can provide members of these families with a network of support which can be very valuable when dealing with socio-economic hardships.¹³ Grandparents are often central to these multigenerational households. However, when caring for children not because of choice, but because parents become unable to provide care due to the parent's death, physical or mental illness, substance abuse, incarceration, unemployment or underemployment or because of domestic violence or child neglect in the family, grandparents may be in need of specialized assistance and resources to support their grandchildren.¹⁴

Understanding language use in the region can also contribute to being better able to serve the needs of families with young children. Language preservation and revitalization have been recognized by the U.S. Department of Health & Human Services as keys to strengthening culture in Native communities and to encouraging communities to move toward social unity and self-sufficiency.¹⁵ Special consideration should be given to respecting and supporting the numerous Native languages spoken by families, particularly in tribal communities. In addition, assuring that early childhood resources and services are available in Spanish is important in many areas of Arizona, given that five percent of the households in the state are limited English speaking households (that is, a household where none of the members speak English very well). Language barriers for these families can limit their access to health care and social services, and can provide challenges to communication between parents and their child's teachers, which can impact the quality of education children are able to receive.¹⁶

What the Data Tell Us

According to the U.S. Census, the Salt River Pima-Maricopa Indian Community Region had a population of 6,289 in 2010, of whom 626 (10%) were children ages birth to 5 years (see Table 1). Seventeen percent of households in the region included a young child. Over half (53%) of the households with young children (birth to 5) in the region are single-female households (see Figure 3). Fourteen percent of children in the region are living with at least one foreign-born parent, compared to only three percent across all Arizona reservations (see Table 4). The proportion of young children living in a grandparent's household in the region (37%) is slightly

¹³ Hoffman, F. (Ed.). (1981). *The American Indian Family: Strengths and Stresses*. Isleta, NM: American Indian Social Research and Development Associates.

¹⁴ Population Reference Bureau. (2012). *More U.S. Children Raised by Grandparents*. Retrieved from <http://www.prb.org/Publications/Articles/2012/US-children-grandparents.aspx>

¹⁵ U.S. Department of Health & Human Services, Administration for Native Americans. (n.d.). *Native Languages* <http://www.acf.hhs.gov/programs/ana/programs/native-language-preservation-maintenance>

¹⁶ Shields, M. & Behrman, R. (2004). Children of immigrant families: Analysis and Recommendations. *The Future of Children*. 14(2). Retrieved from: https://www.princeton.edu/futureofchildren/publications/docs/14_02_1.pdf

lower than the percentage in all Arizona reservations combined (40%) but more than double the proportion statewide (14%) (see Table 5). For those children living in a grandparent's household, over half (58%) live with a grandparent who is financially responsible for them, and nearly a quarter (23%) of children living with grandparents have no parent present in the home (see Table 6).

The vast majority (91%) of young children (ages 0-4) in the Salt River Pima-Maricopa Indian Community Region are American Indian. This proportion is similar to that of all Arizona reservations combined (92%), but differs greatly from that across the state (6%). The percentage of young children who are Hispanic or Latino in the Salt River Pima-Maricopa Indian Community is 20 percent, compared to nine percent in Arizona reservations overall and 45 percent in the state as a whole (see Table 7). The race and ethnicity breakdown among adults in the region differs from that of young children. Although most adults in the region are American Indian (57%), 29 percent are white and 11 percent identify as Hispanic or Latino.¹⁷ In the state, however, only four percent of adults identified as American Indian, and twenty-five percent as Hispanic or Latino (see Table 8).

The ethnic composition in the Salt River Pima-Maricopa Indian Community Region is reflected in language use as well. Seven percent of people over age 5 speak a Native North American language. This is larger than the two percent of residents statewide; however, in comparison to all Arizona reservations (51%), far fewer people speak a Native North American language in the Salt River Pima-Maricopa Indian Community (see Figure 4). Spanish is spoken in seven percent of households in the region, compared to four percent across all Arizona reservations combined. In the Salt River Pima-Maricopa Indian Community, the native languages spoken are Akimel O'Odham and Xalychidom Piipaash.

¹⁷ According to the First Things First Salt River Pima-Maricopa Indian Community 2014 Needs and Assets Report, the higher proportion of white residents in the region –compared to that in all Arizona reservations combined, is due to the high number of non-Native American retirees who reside in two RV parks on the reservation during the winter. The report is available at: <http://www.azftf.gov/RPCCouncilPublicationsCenter/Regional%20Needs%20and%20Assets%20Report%20-%202014%20-%20Salt%20River%20Pima%20Maricopa%20Indian%20Community.pdf>

Population and Households

Table 1. Population and households, 2010

	TOTAL POPULATION	POPULATION (AGES 0-5)	TOTAL NUMBER OF HOUSEHOLDS	HOUSEHOLDS WITH ONE OR MORE CHILDREN (AGES 0-5)	
Salt River Pima-Maricopa Indian Community Region	6,289	626	2,198	380	17%
All Arizona Reservations	178,131	20,511	50,140	13,115	26%
Maricopa County	3,817,117	339,217	1,411,583	238,955	17%
Arizona	6,392,017	546,609	2,380,990	384,441	16%

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P1, P14, P20.

Retrieved from: <http://factfinder.census.gov>

Table 2. Population of children by single year-of-age, 2010

	AGES 0-5	AGE 0	AGE 1	AGE 2	AGE 3	AGE 4	AGE 5
Salt River Pima-Maricopa Indian Community Region	626	91	96	113	112	97	117
All Arizona Reservations	20,511	3,390	3,347	3,443	3,451	3,430	3,450
Maricopa County	339,217	54,300	55,566	57,730	58,192	56,982	56,447
Arizona	546,609	87,557	89,746	93,216	93,880	91,316	90,894

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P14.

Retrieved from: <http://factfinder.census.gov>

Note: Children age 0 were born between April 2009 and March 2010; children age 5 were born between April 2004 and March 2005.

Table 3. State and county population projections, 2015 & 2020

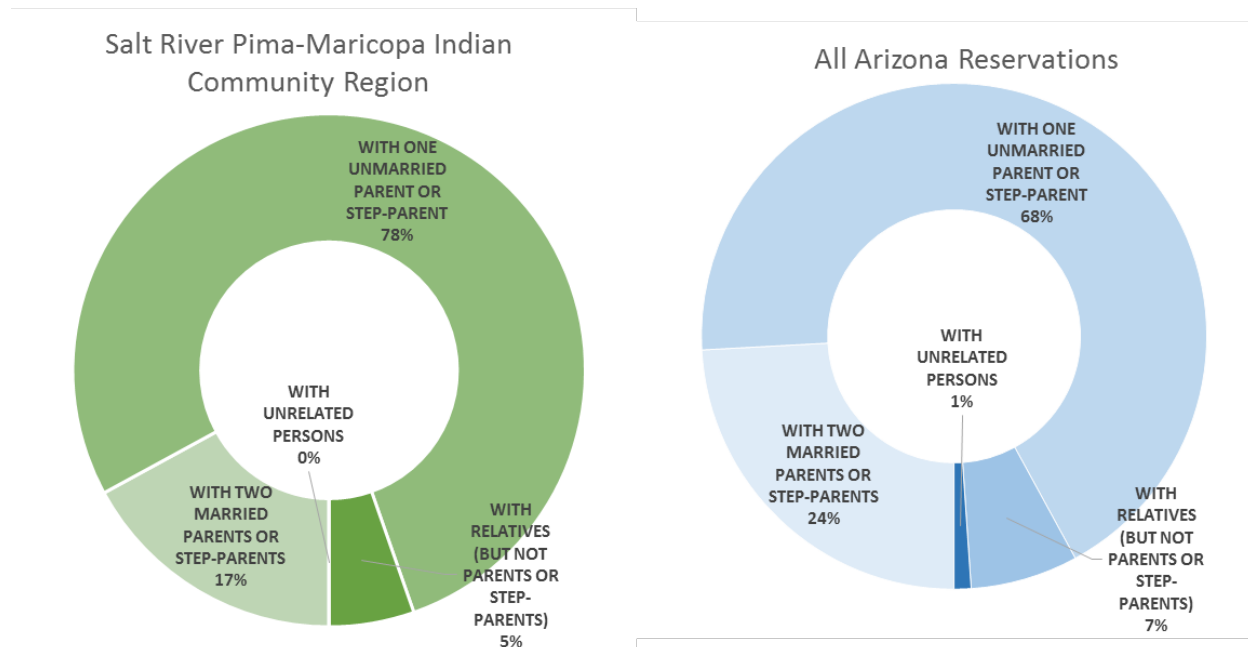
	POPULATION (AGES 0-5) IN 2010 CENSUS	PROJECTED POPULATION (AGES 0-5) IN 2015	PROJECTED POPULATION (AGES 0-5) IN 2020	PROJECTED CHANGE FROM 2010 TO 2020
Maricopa County	339,217	330,800	373,700	10%
Arizona	546,609	537,200	610,400	12%

Sources: Arizona Dept. of Administration, Employment and Population Statistics, "2012-2050 State and county population projections" & 2010 U.S. Census

Note: Regional data were not available for this indicator.

Living Arrangements for Young Children

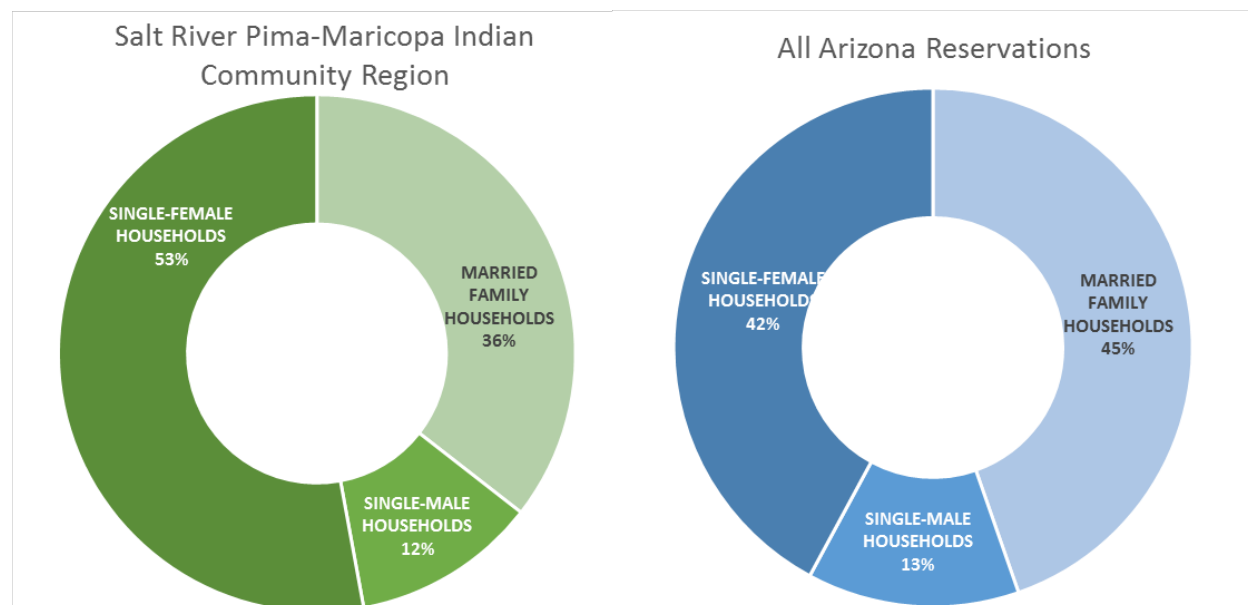
Figure 2. Living arrangements for children (ages 0-5), 2009-2013 five-year estimate



Source: American Community Survey, 5-year estimates (2009-2013), Tables B05009, B09001, B17006.

Retrieved from: <http://factfinder.census.gov>

Figure 3. Heads of households in which young children (ages 0-5) live, 2010



Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P20, P32.

Retrieved from: <http://factfinder.census.gov>

Table 4. Children (ages 0-5) living with one or two foreign-born parents, 2009-2013 five-year estimate

CHILDREN (0-5) LIVING WITH ONE OR TWO FOREIGN-BORN PARENTS	
Salt River Pima-Maricopa Indian Community Region	14%
All Arizona Reservations	3%
Maricopa County	31%
Arizona	28%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B05009.
Retrieved from: <http://factfinder.census.gov>

Table 5. Children (ages 0-5) living in the household of a grandparent, 2010

CHILDREN (0-5) LIVING IN A GRANDPARENT'S HOUSEHOLD	
Salt River Pima-Maricopa Indian Community Region	37%
All Arizona Reservations	40%
Maricopa County	12%
Arizona	14%

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P41
Retrieved from: <http://factfinder.census.gov>

Table 6. Grandparents responsible for grandchildren (ages 0-17) living with them, 2009-2013 five-year estimate

	GRANDCHILDREN (0-17) LIVING WITH GRANDPARENT HOUSEHOLDER	GRANDPARENT HOUSEHOLDER RESPONSIBLE FOR OWN GRANDCHILDREN (0-17)		GRANDPARENT HOUSEHOLDER RESPONSIBLE FOR OWN GRANDCHILDREN (0-17) WITH NO PARENT PRESENT	
Salt River Pima-Maricopa Indian Community Region	554	319	58%	129	23%
All Arizona Reservations	17,142	10,120	59%	2,013	12%
Maricopa County	72,197	36,520	51%	9,596	13%
Arizona	137,753	73,467	53%	20,102	15%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B10002.
Retrieved from: <http://factfinder.census.gov>

Race, Ethnicity, and Language

Table 7. Race and ethnicity of the population of young children (ages 0-4), 2010

	TOTAL POPULATION (AGES 0-4)	HISPANIC OR LATINO	WHITE, NOT HISPANIC	BLACK OR AFRICAN AMERICAN	AMERICAN INDIAN	ASIAN OR PACIFIC ISLANDER
Salt River Pima-Maricopa Indian Community Region	509	20%	1%	0%	91%	0%
All Arizona Reservations	17,061	9%	1%	0%	92%	0%
Maricopa County	282,770	46%	40%	6%	3%	4%
Arizona	455,715	45%	40%	5%	6%	3%

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P12A-H.

Retrieved from: <http://factfinder.census.gov>

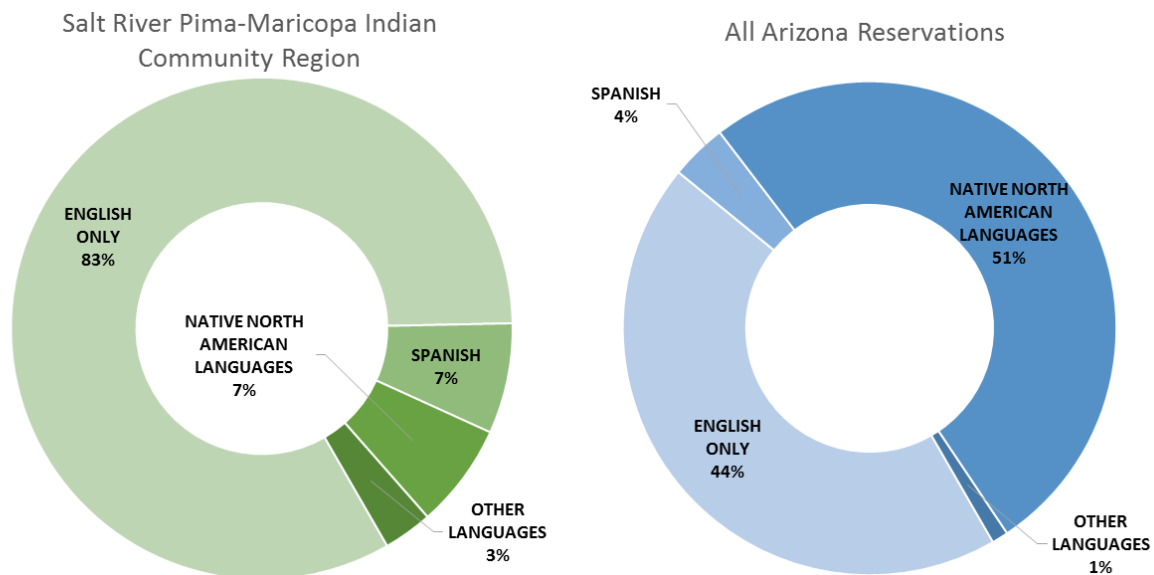
Note: Percentages may not equal 100% as categories are not exclusive (e.g., a child could be reported as both Hispanic and American Indian).

Table 8. Race and ethnicity of the adult population (ages 18 and older), 2010

	TOTAL POPULATION (AGES 18+)	HISPANIC OR LATINO	NOT HISPANIC OR LATINO				
			WHITE	BLACK OR AFRICAN AMERICAN	AMERICAN INDIAN	ASIAN OR PACIFIC ISLANDER	OTHER
Salt River Pima-Maricopa Indian Community Region	4,413	11%	29%	0%	57%	0%	2%
All Arizona Reservations	117,049	5%	5%	0%	88%	0%	1%
Maricopa County	2,809,256	25%	64%	4%	1%	4%	1%
Arizona	4,763,003	25%	63%	4%	4%	3%	1%

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P11

Retrieved from: <http://factfinder.census.gov>.

Figure 4. Language spoken at home, by persons ages 5 and older, 2009-2013 five-year estimate

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B16001.
 Retrieved from: <http://factfinder.census.gov>

Table 9. Household use of languages other than English, 2009-2013 five-year estimate

	NUMBER OF HOUSEHOLDS	HOUSEHOLDS IN WHICH A LANGUAGE OTHER THAN ENGLISH IS SPOKEN	LIMITED ENGLISH SPEAKING HOUSEHOLDS (TOTAL)	LIMITED ENGLISH SPEAKING HOUSEHOLDS (SPANISH)	LIMITED ENGLISH SPEAKING HOUSEHOLDS (NOT SPANISH)
Salt River Pima-Maricopa Indian Community Region	2,197	22%	2%	0%	1%
All Arizona Reservations	47,351	80%	1%	0%	1%
Maricopa County	1,411,727	25%	5%	4%	1%
Arizona	2,370,289	27%	5%	4%	1%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B16002.
 Retrieved from: <http://factfinder.census.gov>

Economic Circumstances

Why it Matters

Many economic factors contribute to a child's well-being, including family income, parent employment status, and the availability of safety-net programs such as housing and nutrition assistance.^{18,19} Understanding the economic context in which families with young children live is crucial when designing programs and policies intended to assist them.

Employment rates and income are common indicators of economic well-being. Unemployment and job loss often results in families having fewer resources to meet their regular monthly expenses and support their children's development. Family dynamics can be negatively impacted by job loss as reflected in higher levels of parental stress, family conflict and more punitive parental behaviors.²⁰ Parental job loss can also impact children's school performance (shown by lower test scores, poorer attendance, higher risk of grade repetition, suspension or expulsion among children whose parents have lost their jobs.)²¹ Unemployment rates, therefore, can be an indicator of family stress, and are also an important indicator of regional economic vitality.

Employment rates and job opportunities contribute to the income families have available. It is estimated that families need an income of about twice the federal poverty level (FPL)²² to meet basic needs.²³ Families earning less may experience unstable access to basic resources like food and housing. Food insecurity – the lack of reliable access to affordable, nutritious food – negatively impacts the health and well-being of children, including a heightened risk for developmental delays.²⁴ High housing costs, relative to income, are associated with increased risk for homelessness, overcrowding, poor nutrition, frequent moving, lack of supervision while

¹⁸ Annie E Casey Foundation. (2015). *Kids Count 2015 Data Book – State Trends in Child Well-being*. Retrieved from <http://www.aecf.org/m/databook/aecf-2015kidscountdatabook-2015-em.pdf>

¹⁹ Kalil, A. (2013). Effects of the Great Recession on Child Development. *The Annals of the American Academy of Political and Social Science*, 650(1), 232-250. Retrieved from <http://ann.sagepub.com/content/650/1/232.full.pdf+html>

²⁰ Isaacs, J. (2013). *Unemployment from a child's perspective*. Retrieved from <http://www.urban.org/UploadedPDF/1001671-Unemployment-from-a-Childs-Perspective.pdf>

²¹ Ibid

²² The 2015 FPL for a family of four is \$24,250. Source: U.S. Department of Health and Human Services. (2015). *2015 Poverty Guidelines*. Retrieved from: <http://aspe.hhs.gov/2015-poverty-guidelines>

²³ National Center for Children in Poverty. (2015). *Arizona Demographics of Low-income Children*. Retrieved from http://www.nccp.org/profiles/AZ_profile_6.html

²⁴ Rose-Jacobs, R., Black, M. M., Casey, P. H., Cook, J. T., Cutts, D. B., Chilton, M., Heeren, T., Levenson, S. M., Meyers, A. F., & Frank, D. A. (2008). Household food insecurity: associations with at-risk infant and toddler development. *Pediatrics*, 121(1), 65-72. Retrieved from <http://pediatrics.aappublications.org/content/121/1/65.full.pdf>

parents are at work, and low cognitive achievement.²⁵ Even when housing is affordable, housing *availability* is typically lower on tribal land, due to the legal complexities of land ownership and the lack of rental properties, often leading to a shortage of safe, quality housing.²⁶ Low income and poverty, especially among children, can have far reaching negative consequences, including an effect on brain development and later cognitive ability.²⁷

Public assistance programs are one way of combating the effects of poverty and providing supports to children and families in need. Temporary Assistance for Needy Families²⁸ (TANF, which has replaced previous welfare programs) provides cash assistance and services to the very poor and can help offset some of the economic circumstances of families that may have a detrimental effect on young children. In recognition of tribal sovereignty, the federal agency in charge of overseeing the TANF program, the U.S. Department of Health and Human Services, Administration for Children and Families (ACF), gives federally-recognized tribes the option to administer their own TANF program. The Salt River Pima-Maricopa Indian Community is one of the six Arizona tribes that operate a Tribal TANF program known as Life Enhancement and Resource Network (LEARN). Some Tribal TANF program requirements are different from those in state programs (e.g. time limit on receipt of TANF cash assistance). Tribal TANF programs also have more flexibility in determining program requirements, which allows them, for instance, to incorporate socially and culturally appropriate activities into their self-sufficiency plans for clients.²⁹

²⁵ The Federal Interagency Forum on Child and Family Statistics. (2015). *America's Children: Key National Indicators of Well-Being, 2015*. http://www.childstats.gov/pdf/ac2015/ac_15.pdf

²⁶ Housing Assistance Council. (2013). *Housing on Native American Lands*. Retrieved from http://www.ruralhome.org/storage/documents/rpts_pubs/ts10_native_lands.pdf

²⁷ Noble, K.G., Houston, S.M., Brito, N.H., Bartsch, H. Kan E., et. al. (2015). Family Income, parental education and brain structure in children and adolescents. *Nature Neuroscience*, 18, 773–778. Retrieved from <http://www.nature.com/neuro/journal/v18/n5/full/nn.3983.html#close>

²⁸ In Arizona, TANF eligibility is capped at \$335 per month, or \$4020 annually for a family of four, and has recently undergone significant changes. Beginning in 2016, Arizona will become the first and only state that limits a person's lifetime benefit to 12 months. In addition, since 2009, a steadily decreasing percentage of Arizona TANF funds have been spent on three of the key assistance categories: cash assistance to meet basic needs, helping connect parents to employment opportunities, and child care; in 2013, Arizona ranked 51st, 47th, and 46th respectively in proportional spending in those categories across all states and the District of Columbia. Meanwhile, since 2009, an increasing percentage of Arizona TANF funds have been spent on other costs such as child protection, foster care, and adoption. [Sources: Reilly, T., and Vitek, K. (2015). *TANF cuts: Is Arizona shortsighted in its dwindling support for poor families?* Retrieved from: https://morrisoninstitute.asu.edu/sites/default/files/content/products/TANF.doc_0.pdf; Floyd, I., Pavetti, L., and Schott, L. (2015). *How states use federal and state funds under the TANF block grant*. Retrieved from: <http://www.cbpp.org/research/family-income-support/how-states-use-federal-and-state-funds-under-the-tanf-block-grant>;

²⁹ Hahn, H., Olivia Healy, Walter Hillabrant, and Chris Narducci (2013). *A Descriptive Study of Tribal Temporary Assistance for Needy Families (TANF) Programs*. OPRE Report # 2013-34, Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Another safety net program, the Supplemental Nutrition Assistance Program (SNAP, also referred to as “Nutrition Assistance” and “food stamps”) has been shown to help reduce hunger and improve access to healthier food.³⁰ SNAP benefits support working families whose incomes simply do not provide for all their needs. For low-income working families, the additional income from SNAP is substantial. For example, for a three-person family with one person whose wage is \$10 per hour, SNAP benefits boost take-home income by ten to 20 percent.³¹ Similarly, the National School Lunch Program³² provides free and reduced-price meals at school for students whose families meet income criteria. These income criteria are 130 percent of the federal poverty level (FPL) for free lunch, and 185 percent of the FPL for reduced price lunch.

What the Data Tell Us

Poverty rates for the total (of all ages) population and for young children in the Salt River Pima-Maricopa Indian Community Region are lower than those across all Arizona reservations combined but substantially higher than those in the state as a whole. Approximately one-third (32%) of the total population in the region lives in poverty, compared to 42 percent across all Arizona reservations and 18 percent statewide (see Figure 5). In all these geographies, young children are consistently more likely to be in poverty than members of the total population. Over half (53%) of the children in the region live in poverty, a proportion that is slightly lower than that in all Arizona reservations combined (56%) but nearly double the proportion statewide (28%).

In addition to the families whose incomes fall below the federal poverty level, a substantial proportion of households in the region and across all Arizona reservations are low income, i.e., near but not below the federal poverty level (FPL). In the Salt River Pima-Maricopa Indian Community Region, nearly nine out of every ten (88%) of families with children aged four and under are living below 185 percent of the FPL (i.e., earned less than \$3,677³³ a month for a family of four), compared to 77 percent of families in all Arizona reservations combined, and 48 percent across the state (see Table 10). The median family income in the region (\$35,821) is substantially lower than the median family income in the state (\$58,897) (see Figure 6).

³⁰ Food Research and Action Center. (2013). *SNAP and Public Health: The Role of the Supplemental Nutrition Assistance Program in Improving the Health and Well-Being of Americans*. Retrieved from http://frac.org/pdf/snap_and_public_health_2013.pdf

³¹ Ibid

³² United States Department of Agriculture, Food and Nutrition Service. (2015). *National School Lunch Program (NSLP)*. Retrieved from <http://www.fns.usda.gov/nsfp/national-school-lunch-program-nsfp>

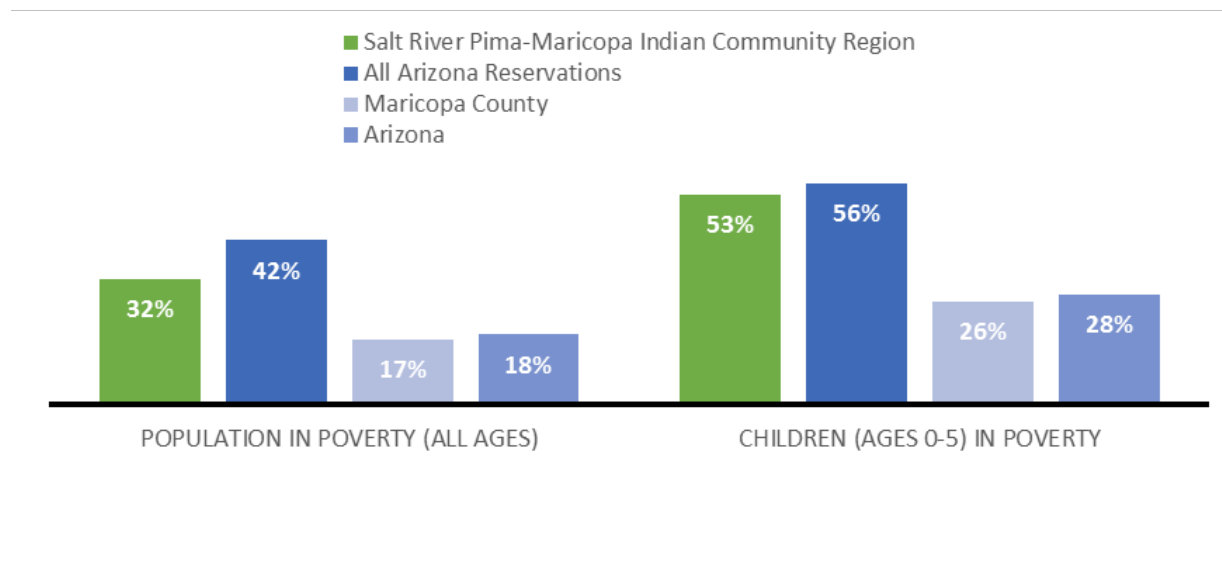
³³ Based on 2014 FPL Guidelines, see <http://aspe.hhs.gov/2014-poverty-guidelines>

The average unemployment rate in the region for the 2009-2013 period is 15.8 percent, which is lower than the rate (25%) across all Arizona reservations combined but higher than the average state rate (10.4%) (see Figure 7).

The use of economic supports such as LEARN Program (Life Enhancement and Resource Network, the Tribal Temporary Assistance for Needy Families) and Supplemental Nutrition Assistance Program (SNAP) are higher in the Salt River Pima-Maricopa Indian Community Region compared to the state (see Table 14 and Table 15). In 2014, 20 percent of children birth to 5 years in the region received LEARN benefits, compared to only four percent of children statewide receiving Temporary Assistance for Needy Families (TANF). The majority of young children in the region (84%) received SNAP benefits in 2014, a much higher proportion than the 51 percent statewide. In both the region and the state, the proportion of young children in the region receiving LEARN/TANF and SNAP decreased between 2012 and 2014.

Poverty and Income

Figure 5. Percent of population in poverty, 2009-2013 five-year estimate



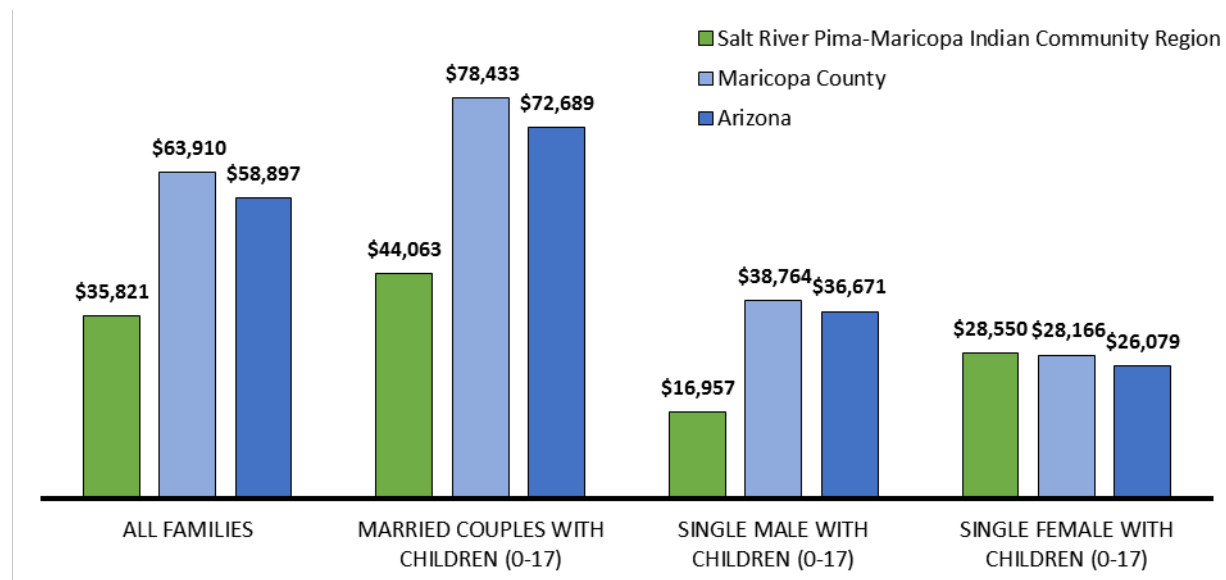
Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B17001.

Retrieved from: <http://factfinder.census.gov>

Table 10. Federal poverty levels for families with young children (ages 0-4), 2009-2013 five-year estimate

	FAMILIES WITH CHILDREN 0-4	FAMILIES WITH CHILDREN 0-4			
		BELOW POVERTY	BELOW 130% POVERTY	BELOW 150% POVERTY	BELOW 185% POVERTY
Salt River Pima-Maricopa Indian Community Region	283	58%	74%	81%	88%
All Arizona Reservations	9,660	52%	63%	69%	77%
Maricopa County	192,078	25%	33%	38%	45%
Arizona	307,126	26%	35%	40%	48%

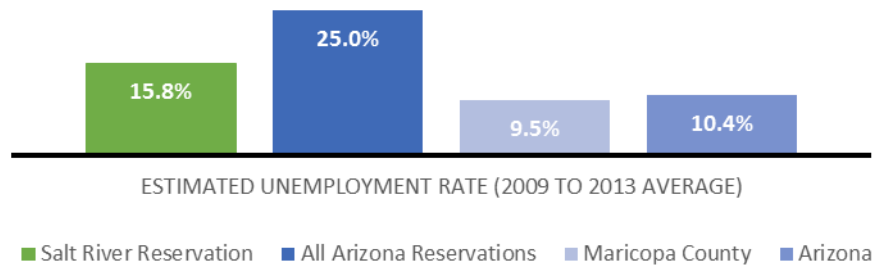
Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table 17010 & 17022.
 Retrieved from: <http://factfinder.census.gov>

Figure 6. Median annual family incomes, 2009-2013 five-year estimate

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B19126.
 Retrieved from: <http://factfinder.census.gov>

Employment and Housing

Figure 7. Average annual unemployment rates, 2009 to 2013³⁴



Source: U.S. Census Bureau (2015). 2009-2013 American Community Survey 5-Year Estimates, Table S2301. Retrieved from <http://factfinder.census.gov>

Table 11. Parents of young children (ages 0-5) who are or are not in the labor force, 2009-2013 five-year estimate

	ESTIMATED NUMBER OF CHILDREN (AGES 0-5) LIVING WITH ONE OR TWO PARENTS	CHILDREN (0-5) LIVING WITH TWO PARENTS			CHILDREN (0-5) LIVING WITH ONE PARENT	
		BOTH PARENTS IN LABOR FORCE	ONE PARENT IN LABOR FORCE	NEITHER PARENT IN LABOR FORCE	PARENT IN LABOR FORCE	PARENT NOT IN LABOR FORCE
Salt River Pima-Maricopa Indian Community Region	582	3%	12%	2%	42%	40%
All Arizona Reservations	18,682	13%	11%	2%	40%	34%
Maricopa County	324,493	32%	29%	1%	28%	9%
Arizona	517,766	31%	29%	1%	29%	10%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B23008.

Retrieved from: <http://factfinder.census.gov>

Note: Persons who are unemployed but looking for work are considered to be "in the labor force."

³⁴ Please note that the source for the unemployment data presented in this report is different than that used in previous Needs and Assets Reports for the region. The previous estimates are no longer be available, so the data in this figure are the most recent available for the region. According to the Arizona Department of Administration Office of Employment and Population Statistics, these unemployment rates are calculated using a fixed ratio method derived from the 2009-2013 American Community Survey. Previous unemployment statistics for Arizona reservations were obtained using a fixed ratio derived from the 2000 Decennial Census. Source: Arizona Department of Administration, Office of Employment and Population Statistics. (2014). *Special Unemployment Report, 2009-2014*; Arizona Department of Administration, Office of Employment and Population Statistics. (2015). *2009 to 2015 Special Unemployment Report*. Retrieved from <https://laborstats.az.gov/local-area-unemployment-statistics>

Table 12. Vacant and occupied housing units, 2009-2013 five-year estimate

	TOTAL HOUSING UNITS	OCCUPIED HOUSING UNITS	VACANT HOUSING UNITS (NON- SEASONAL)	VACANT HOUSING UNITS (SEASONAL)
Salt River Pima-Maricopa Indian Community Region	2,696	82%	9%	9%
All Arizona Reservations	68,118	70%	15%	15%
Maricopa County	1,648,392	10%	14%	4%
Arizona	2,859,768	83%	10%	7%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B25002, B25106.

Retrieved from: <http://factfinder.census.gov>

Note: Seasonal units are intended for use only in certain seasons or for weekends or other occasional use.

Table 13. Occupied housing units and costs relative to income, 2009-2013 five-year estimate

	NUMBER OF OCCUPIED HOUSING UNITS	UNITS WHICH COST THE OWNER OR RENTER MORE THAN 30% OF THEIR INCOME	
Salt River Pima-Maricopa Indian Community Region	2,197	603	27%
All Arizona Reservations	47,351	8,030	17%
Maricopa County	1,411,727	521,467	37%
Arizona	2,370,289	847,315	36%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B25002, B25106.

Retrieved from: <http://factfinder.census.gov>; <http://www.realtytrac.com/statsandtrends/az>

Economic Supports

Table 14. Children (ages 0-5) enrolled in the Life Enhancement and Resource Network (Tribal Temporary Assistance to Needy Families)

	CENSUS 2010 POPULATION (AGES 0-5)	CHILDREN (AGES 0-5) RECEIVING TANF			CHANGE FROM 2012 TO 2014
		2012	2013	2014	
Salt River Pima-Maricopa Indian Community Region	626	27%	23%	20%	-28%
All Arizona Reservations	N/A	N/A	N/A	N/A	N/A
Maricopa County	339,217	5%	5%	4%	-27%
Arizona	546,609	5%	5%	4%	-26%

Source: The Arizona Department of Economic Security (July 2015). [SNAP/TANF Dataset]. Unpublished data.

Note: The data reflect unduplicated counts of children served during each of calendar year.

Note: Entries of "N/A" indicate percentages which cannot be reported because of data suppression, or are otherwise not available.

Table 15. Children (ages 0-5) in the Supplemental Nutrition Assistance Program (SNAP)

	CENSUS 2010 POPULATION (AGES 0-5)	CHILDREN (AGES 0-5) RECEIVING SNAP			CHANGE FROM 2012 TO 2014
		2012	2013	2014	
Salt River Pima-Maricopa Indian Community Region	626	88%	82%	84%	-5%
All Arizona Reservations	NA	NA	NA	NA	NA
Maricopa County	339,217	52%	51%	48%	-7%
Arizona	546,609	54%	53%	51%	-7%

Source: The Arizona Department of Economic Security (July 2015)

Note: The data reflect unduplicated counts of children served during each calendar year.

Note: Entries of "N/A" indicate percentages which cannot be reported because of data suppression, or are otherwise not available.

Educational Indicators

Why it Matters

Characteristics of educational involvement and achievement in a region, such as school attendance, standardized tests scores, graduation rates, and the overall level of education of adults, all impact the developmental and economic resources available to young children and their families. Education, in and of itself, is an important factor in how able parents and caregivers are to provide for the children in their care. Parents who graduate from high school earn more and are less likely to rely on public assistance programs than those without high school degrees.^{35,36} Higher levels of education are associated with better housing, neighborhood of residence, and working conditions, all of which are important for the health and well-being of children.^{37,38}

By third grade, reading ability is strongly associated with high school completion. One in six third graders who do not read proficiently will not graduate from high school on time, and the rates are even higher (23%) for children who were both not reading proficiently in third grade and living in poverty for at least a year.³⁹ In recognition of the importance of assuring that children are reading by the third grade, legislators enacted the Arizona Revised Statute §15-701 (also known as the *Move on When Reading* law) which states that as of school year 2013-2014 a student shall not be promoted from the third grade if the student obtains a score on the statewide reading assessment “that demonstrates that the pupil’s reading falls far below the third-grade level.” Exceptions exist for students identified with or being evaluated for learning disabilities, English language learners, and those with reading impairments.

³⁵ Planty, M., Hussar, W., Snyder, T., Provasnik, S., Kena, G., Dinkes, R., KewalRamani, A., & Kemp, J. (2008). *The Condition of Education 2008* (NCES 2008-031). National Center for Education Statistics, Institute of Education Sciences, U.S. Department of Education, Washington, D.C. Retrieved from: <http://nces.ed.gov/pubs2008/2008031.pdf>

³⁶ Waldfogel, J., Garfinkel, I. and Kelly, B. (2007). Welfare and the costs of public assistance. In C.R. Belfield and H.M. Levin (Eds.). *The price we pay: Economic and social consequences for inadequate education*. Washington, DC: The Brookings Institution, 160-174.

³⁷ Annie E. Casey Foundation. (2013). *The First Eight Years. Giving kids a foundation for lifelong success*. Retrieved from <http://www.aecf.org/m/resourcedoc/AECF-TheFirstEightYearsKCpolicyreport-2013.pdf>

³⁸ Lynch, J., & Kaplan, G. (2000). Socioeconomic position (pp. 13-35). In *Social Epidemiology*. Berkman, L. F. & Kawachi, I. (Eds.). New York: Oxford University Press. Retrieved from

³⁹ Hernandez, D. (2011). *Double jeopardy: How third-grade reading skills and poverty influence high school graduation*. The Annie E. Casey Foundation. Retrieved from <http://files.eric.ed.gov/fulltext/ED518818.pdf>.

From 2000-2014, the primary in-school performance of students in the public elementary schools in the state has been measured by Arizona's Instrument to Measure Standards (AIMS).⁴⁰ AIMS scores were used to meet the requirement of *Move on When Reading*.

However, a new summative assessment system which reflects Arizona's K-12 academic standards, Arizona's Measurement of Educational Readiness to Inform Teaching (AzMERIT), was implemented in the 2014-2015 school year.⁴¹ This assessment replaced the reading and mathematics portions of the AIMS test. Although it is not a graduation requirement, it will still be used to determine promotion from the third grade in accordance with Arizona Revised Statute §15-701.⁴²

AIMS results are included in this report, but future reports will use AzMERIT scores as they become available.

In order for children to be prepared to succeed on tests such as the AIMS or AzMERIT, research shows that early reading experiences, opportunities to build vocabularies and literacy rich environments are the most effective ways to support the literacy development of young children.⁴³

What the Data Tell Us

Children living within the Salt River Pima-Maricopa Indian Community Region attend schools in the Salt River-Pima Maricopa Community Schools, the Mesa Unified District, Scottsdale Unified School District, charter schools in the state, other public schools, private schools or Bureau of Indian Education boarding schools (see Appendix 3).

⁴⁰ For more information on the AIMS test, see <http://arizonaindicators.org/education/aims>

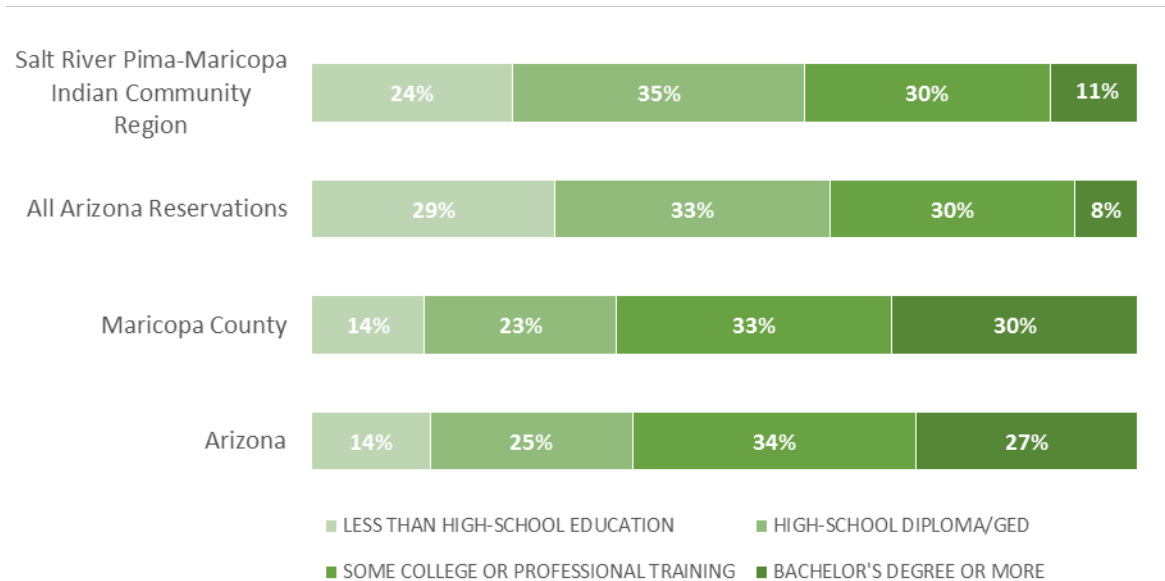
⁴¹ For more information on AzMERIT, see <http://www.azed.gov/assessment/azmerit/>

⁴² For more information on Move on When Reading, see <http://www.azed.gov/mowr/>

⁴³ First Things First. (2012). *Read All About It: School Success Rooted in Early Language and Literacy*. Retrieved from http://www.azftf.gov/WhoWeAre/Board/Documents/Policy_Brief_Q1-2012.pdf (April, 2012)

Educational Attainment of the Adult Population

Figure 8. Level of education for the population ages 25 and older, 2009-2013 five-year estimate



Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B15002.
 Retrieved from: <http://factfinder.census.gov>

Early Learning

Why it Matters

Early childhood marks a time of peak plasticity in the brain, and early adversity can weaken the foundation upon which future learning will be built; in other words, positive developmental experiences in early life are crucial.⁴⁴ Research has shown that the experiences that children have from birth to five years of age influence future health and well-being, and that supporting children during this time has a great return on investment.⁴⁵ Investing in high-quality early childhood programs, particularly for disadvantaged children, provides substantial benefits to society through increased educational achievement and employment, reductions in crime, and better overall health of those children as they mature into adults.^{46,47} Children whose education begins with high-quality preschool repeat grades less frequently, obtain higher scores on standardized tests, experience fewer behavior problems, and are more likely to graduate high school.⁴⁸

The ability of families to access quality, affordable early care and education opportunities, however, can be limited. The annual cost of full-time center-based care for a young child in Arizona is only slightly less than a year of tuition and fees at a public college.⁴⁹ Although the Department of Health and Human Services recommends that parents spend no more than 10 percent of their family income on child care,⁵⁰ the cost of center-based care for a single infant, toddler, or 3-5 year old is an estimated 17, 15 and 11 percent, respectively, of an average Arizona family's income.⁵¹

⁴⁴ Center on the Developing Child at Harvard University. (2010). *The Foundations of Lifelong Health Are Built in Early Childhood*. Retrieved from <http://developingchild.harvard.edu/wp-content/uploads/2015/05/Foundations-of-Lifelong-Health.pdf>

⁴⁵ Executive Office of the President of the United States. (2014). *The Economics of Early Childhood Investments*. Retrieved from https://www.whitehouse.gov/sites/default/files/docs/early_childhood_report1.pdf

⁴⁶ The Heckman Equation. (2013). *The Heckman Equation Brochure*. Retrieved from <http://heckmanequation.org/content/resource/heckman-equation-brochure-0>

⁴⁷ The Heckman Equation. (n.d.). *Research Summary: Abecedarian & Health*. Retrieved from <http://heckmanequation.org/content/resource/research-summary-abecedarian-health>

⁴⁸ Annie E. Casey Foundation. (2013). *The First Eight Years. Giving kids a foundation for lifelong success*. Retrieved from <http://www.aecf.org/m/resourcedoc/AECF-TheFirstEightYearsKCpolicyreport-2013.pdf>

⁴⁹ Child Care Aware® of America. (2014). *Parents and the High Cost of Child Care. 2014 Report*. Retrieved from https://www.ncsl.org/documents/cyf/2014_Parents_and_the_High_Cost_of_Child_Care.pdf

⁵⁰ U.S. Department of Health and Human Services, Child Care Bureau. (2008). *Child Care and Development Fund: Report of state and territory plans: FY 2008-2009*. Section 3.5.5 – Affordable co-payments, p. 89. Retrieved from <http://www.researchconnections.org/childcare/resources/14784/pdf>

⁵¹ The cost of center-based care as a percentage of income is based on the Arizona median annual family income of \$58,900.

Child care subsidies can help families who otherwise would be unable to access early learning services.⁵² However, the availability of this type of support is also limited. The number of children receiving Child Care and Development Fund (CCDF) subsidies in Arizona is low. In 2014, only 26,685 children aged birth to 5 (about 5% of Arizona's children in this age range) received CCDF vouchers. With half of young children in Arizona living below the federal poverty level, the number in need of these subsidies is likely much higher than those receiving them.

The availability of services for young children with special needs is an ongoing concern across the state, particularly in more geographically remote communities. The services available to families include early intervention screening and intervention services provided through the Arizona Department of Education AZ FIND (Child Find),⁵³ the Arizona Early Intervention Program (AzEIP)⁵⁴ and the Division of Developmental Disabilities (DDD).⁵⁵ These programs help identify and assist families with young children who may need additional support to meet their potential. Timely intervention can help young children with, or at risk for, developmental delays improve language, cognitive, and social/emotional development. It also reduces educational costs by decreasing the need for special education.^{56,57,58}

What the Data Tell Us

Early childhood education and care programs in the Salt River Pima-Maricopa Indian Community Region include the Early Childhood Education Center (ECEC), the FACE Program at Salt River Elementary, and the Early Enrichment Program under the Community's Youth Services Department.

⁵² For more information on child care subsidies see <https://www.azdes.gov/child-care/>

⁵³ For more information on AZ FIND see <http://www.azed.gov/special-education/az-find/>

⁵⁴ For more information on AzEIP see <https://www.azdes.gov/azeip/>

⁵⁵ For more information on DDD see https://www.azdes.gov/developmental_disabilities/

⁵⁶ The National Early Childhood Technical Assistance Center. (2011). *The Importance of Early Intervention for Infants and Toddlers with Disabilities and their Families*. Retrieved from <http://www.nectac.org/~pdfs/pubs/importanceofearlyintervention.pdf>

⁵⁷ Hebbeler, K, Spiker, D, Bailey, D, Scarborough, A, Mallik, S, Simeonsson, R, Singer, M & Nelson, L. (2007). *Early intervention for infants and toddlers with disabilities and their families: Participants, services and outcomes. Final Report of the National Early Intervention Longitudinal Study (NEILS)*. Retrieved from http://www.sri.com/sites/default/files/publications/neils_finalreport_200702.pdf

⁵⁸ NECTAC Clearinghouse on Early Intervention and Early Childhood Special Education. (2005). *The long term economic benefits of high quality early childhood intervention programs*. Retrieved from <http://ectacenter.org/~pdfs/pubs/econbene.pdf>

Center and home-based care and education

Center-based services in the Salt River Pima-Maricopa Indian Community Region are available through the tribally-operated Early Childhood Education Center (ECEC), which offers several program options that allow parents to choose the one that best meets their individual needs. These include the Head Start preschool program, Early Head Start infant-toddler program and Early Childhood Education Center (Child Care Development Fund (CCDF) and Tribal funded components).⁵⁹

Head Start preschool program: serves children ages 3 to 5 living in the Salt River Community. The operation hours are from 8:00 am to 1:00 pm from early August to late May. This program is offered free-of-cost.⁶⁰

Early Head Start infant-toddler program: this program provides services to pregnant women and children ages 0 to 3 living in the Salt River Community. The program operates year-round from 8:00 am to 1:00 pm and there are no fees associated with it. The Early Head Start program includes 20 slots for home-based services where Parent Educators work with the children and their parents in the child's home twice a month.⁶¹

Early Childhood Education Center (CCDF-funded component): funding from the Child Care and Development Fund (see more information on CCDF below) is also allocated for center-based full-time services at the ECEC. The Center serves children from 6 weeks old to five years of age. The Center hours are 7:30 am to 6:00 pm.⁶²

Although these different program components are available through the ECEC, the categories mostly refer to the funding source and the eligibility requirements associated with it. For the past 10 years, ECEC has been operating under a unique “blended” model where all enrolled children receive the same services in one facility, regardless of what specific funding source (or program) they are enrolled through. This model differs substantially from the one seen in other tribal communities where there is a stand-alone tribally-operated child care center (with funding from CCDF) and a stand-alone Head Start Program, both of which may also receive additional funding from the tribe; the level of coordination between the two programs varies depending on the community. At ECEC, eligibility criteria for all applications (with the exception

⁵⁹ First Things First Salt River Pima-Maricopa Indian Community Regional Partnership Council 2014 Needs and Assets Report retrieved from: <http://www.azftf.gov/RPCCouncilPublicationsCenter/Regional%20Needs%20and%20Assets%20Report%20-%202014%20-%20Salt%20River%20Pima%20Maricopa%20Indian%20Community.pdf>

⁶⁰ Ibid

⁶¹ Ibid

⁶² Ibid

of two new classrooms) is based on the Head Start requirements, but assignment of funding source for each enrolled child is determined based on the family's demographic characteristics. Although administratively complex, ECEC's "blended" model allows for provision of high quality services (e.g. the entire Center is held to the requirements of the funding source with the highest standards, or even higher when the Community's Education Board set its own standards) while maximizing the resources available. According to key informants, this model may also open up additional full-time slots for enrolled children (i.e. Head Start funding is only for a half-day program, so some children's slots may be funded through Head-Start funds in the morning and CCDF or tribal funds in the afternoon). This results in a seamless provision of services for children at one location without the additional paperwork and logistical burden that families in need of full-time care would face if they had to enroll their children in more than one program.⁶³

ECEC provides services to about 150 preschool-age children, 80 infants and toddlers in center based care and 20 families of infants and toddlers in the home based Early Head Start Program. In fiscal year 2012-2013, the total cumulative enrollment was 134 children aged 0-2 and 197 children aged 3-4 (see Table 16); the monthly average number of children on the ECEC waiting list during that year was 91.⁶⁴

Child Care Development Fund (CCDF) program

The Child Care Development Fund (CCDF) Child Care Program is funded through the US Department of Health & Human Services – Administration for Children and Families. The program provides funding to grantees to help increase the availability, affordability, and quality of child care services. The Salt River Pima-Maricopa Indian Community receives funding from CCDF to provide services to low-income Native children ages 6 weeks to 9 years with parents who are working or in school full-time. Parents pay a co-payment based upon family size and income. To be eligible, the child must be enrolled in a federally-recognized tribe and the parents must be working or in school/job training full-time. Income eligibility requirements limit this program to low-income families.⁶⁵

Children must currently attend child care a minimum of 5 hours per day in order to meet the full-time attendance requirement. Once eligibility is determined, parents select a type of child care: a state licensed center, an Arizona Department of Economic Security (DES)-certified group or family care home, or an in-home provider. In the Salt River Pima-Maricopa Indian

⁶³ Ibid

⁶⁴ Ibid

⁶⁵ Ibid

Community Region, the CCDF grant funds full-time, center-based services at the ECEC (as described above); home-based care for children with severe disabilities; and off-reservation, center-based care for children who are enrolled in private child care centers outside of the reservation through the Certificate Program. Another portion of CCDF funds is utilized for after-school programs at Salt River Elementary School.⁶⁶

Home-based care: In-home child care services funded by CCDF are restricted to children with severe diagnosed disabilities who cannot attend other types of care. The parent pays a co-payment directly to the provider, based upon rates charged and the family's size and income. The provider submits billing to ECEC along with attendance records on the children and ECEC pays the child care provider with CCDF grant funds. Re-certification is done annually to determine eligibility and as long as the family remains income-eligible (based upon current federal poverty levels and state median income levels), they may continue to participate in this subsidy program.⁶⁷

Certificate Program: funding from CCDF is also available through the Certificate program which pays for a proportion of the cost of alternative off-reservation child care for families enrolled in federally recognized tribes living in the SRPMIC designated service area. This program serves children ages 6-weeks old to ten years old and cost is based on a sliding-scale fee.⁶⁸

According to the ECEC Annual Report 2012-2013 the Child Care Development Fund provided child care subsidies for a total of 492 children, 232 of whom were served at the ECEC center and 260 who participated in the Certificate Program.⁶⁹

In addition to Head Start and CCDF, ECEC also receives funding from the Salt River Pima-Maricopa Indian Community.⁷⁰

FACE

Family and Child Education (FACE) is an early childhood and parental involvement program for American Indian families in schools sponsored by the Bureau of Indian Education Bureau of Indian Affairs. The goals of the FACE program include increasing family literacy; strengthening family-school-community connections; promoting the early identification and provision of services to children with special needs; and promoting the preservation of the unique cultural

⁶⁶ Ibid

⁶⁷ Ibid

⁶⁸ Ibid

⁶⁹ Ibid

⁷⁰ Ibid

and linguistic diversity of the communities served by the program. FACE services and activities are currently taking place in 46 Bureau of Indian Education schools, 12 of which are located in the state of Arizona. In the Salt River Pima-Maricopa Indian Community, a FACE Program has been available at Salt River Elementary since school year 2001-2002.

FACE has both a center-based and a home-based component. The home-based component includes personal visits and screenings by parent educators and is aimed at families with children from birth to age three, although families can join the program from pregnancy on. As of July 2014, 25 children and 30 adults, participated in the home-based component.⁷¹

The FACE center-based preschool component includes an early childhood education program for children aged three to five, adult education for the children's parents, and Parent and Child Time (PACT). The adult component of the program at Salt River Elementary has a strong focus on parents or caregivers obtaining their GED. Some parents also attend community college courses. Most adults in the program are also active in school events, as the program is well integrated into school activities. As of July 2014, there were 16 children and 11 adults participating in the center-based component.⁷²

Key informants indicated that the number of participating families tends to fluctuate, as families enter and leave the program constantly. On average, families stay in the program for 6 or 7 months. Some parents or caregivers obtain a job, while others may feel that commitment to participate is too high and that the time of service is required is too long. In addition, key informants pointed out that an additional challenge for parents with babies is the lack of child care available so they can participate in the program (as was mentioned above, the ECEC has a long waiting list).⁷³

The FACE program at Salt River Elementary recruits through the community newspaper, participant referrals and word of mouth. In addition, the program recruits participants twice a month at community events and also at the school. The program has a waiting list for the home-based component of the program, but there has not been a waiting list for the center-based component in the past few years. According to key informants, in the past the program did not require a background checks for the adults participating in center-based services. Once this requirement was implemented, it became a major recruitment challenge for the program because many of the adults interested in participating were not able to clear the background

⁷¹ Bureau of Indian Education. (2011). *BIE Family and Child Education Program*. Retrieved from <http://faceresources.org/index.php?page=evaluation-reports>

⁷² Ibid

⁷³ Ibid

check. This is a challenge shared by many other FACE programs in the state and nationally. According to key informants, it is an unfortunate situation because the program often targets parents who are “starting over”: those who might have spent time in jail in the past but who are looking for a second opportunity to start over and become better parents. However, having a criminal record in their background precludes them from participating in the center-based program at the school. Home-based services are the only option available to families in this situation.⁷⁴

The only eligibility requirement for the program is for the child to be at least 1/4 Native American. The program does give priority to enrolled members of the Community but if slots are available after all enrolled members have registered, they do open the program up to any other Native families.⁷⁵

As mentioned above, FACE programs put an emphasis on traditional Native culture and language. All participants at the Salt River Elementary FACE program (adults and children) have a language and culture class once a week.⁷⁶

The program currently employs two parent educators, one adult education teacher, one early childhood teacher, and a teacher’s aide. As a comprehensive family support program, it collaborates closely with other agencies in the Community. The FACE program constantly refers parents to the Life Enhancement and Resource Network (LEARN) Tribal TANF Program, even if they do not qualify for FACE services.⁷⁷

Early Enrichment Program

Center-based services in the region are also available through the Early Enrichment Program, which is housed at the Salt River Pima-Maricopa Indian Community Youth Services Department. This program, which is fully funded by the Salt River Pima-Maricopa Indian Community provides free-of-cost services to preschool age children (3 to up to the time they enter kindergarten). It focuses on Kindergarten readiness and social skills and the overall curriculum is based on the children’s interest.⁷⁸

The Early Enrichment Program, formerly known as Child Development Center, has been in place in the Community for over a decade. It operates year-round from 8:00 to 1:00 pm and

⁷⁴ Ibid

⁷⁵ Ibid

⁷⁶ Ibid

⁷⁷ Ibid

⁷⁸ Ibid

breakfast, snack and lunch are served to all children. Transportation is available to children enrolled in the program; as of May of 2014, all 12 enrolled children were being transported. The total enrollment capacity for the Early Enrichment Program is 18 children, but the program is currently understaffed and therefore limited in the number of children that can be enrolled. In addition, transportation is currently available for only a total of 12 children.⁷⁹

Children can enroll in the program from the time they turn three and are potty-trained; the only other requirements are for the children to live on the reservation and to be up-to-date on their immunizations. Priority is given to enrolled Community members, although the program opens up slots to non-enrolled Community members if space allows, and no enrolled children are on the waiting list. However, the program almost always operates at capacity, with a long waiting list (12 children or more, as of May of 2014) and with few children leaving the program until they transition to kindergarten or move out of the Community.⁸⁰

Another unique characteristic of the Early Enrichment Program is the close connection it maintains with the families of participating children. Program staff keep in communication with the parents, allowing them to work with the families when personal or family circumstances may get in the way of children participating in the program. This is particularly important for the young parents in the program.⁸¹

The program strongly emphasizes parent participation and involvement. Parents are encouraged to join the program activities at any time, and monthly family activities are part of the regular curriculum. Staff with the program are able to stay in touch with the parents every day during pick-up and drop-off times. According to staff with the program, parent participation is very good, and typically all of the parents (and extended family members) attend program events.⁸²

The Early Enrichment Program collaborates with various departments in the Community. The tribal Child Find program does developmental screenings of children enrolled in the Early Enrichment Program twice a year in the Fall and Spring, as well as every time a new child enrolls. The Early Enrichment Program also works with the Recreation Department and the Health Center on their Tiny Tots program. Children in the program also receive services from the Cultural Resources Department, which provides culture and language education, including working on a garden with traditional crops. Other programs that they collaborate with include:

⁷⁹ Ibid

⁸⁰ Ibid

⁸¹ Ibid

⁸² Ibid

the Boys and Girls Club, the Salt River Pima-Maricopa Indian Community Library and Police and Fire Departments and soon also with the Fatherhood Program.⁸³

Cost of Childcare

In the Salt River Pima--Maricopa Indian Community Region, efforts are made to assure child care in the Community is more affordable. Parents of children enrolled full--time at the Early Childhood Education Center (ECEC) are billed for the child care services their child receives. Bills are due and payable at the Finance office on the 25th of each month and are for services rendered the previous month. Parents may elect to use payroll deductions (if employed by Salt River Pima--Maricopa Indian Community) or Per Capita deductions. Parents are not billed for the Head Start/Early Head Start hours between 9:00 a.m. and 1:00 p.m. The billing structure is dependent upon the current year's Federal Poverty Levels and the Arizona State Median Income levels which are updated annually. Billing amounts vary depending upon the hours the child is in attendance each day. Full day (5 hours or more) ranges from \$1.40 per day to \$14.00 per day. Part day (less than 5 hours per day) ranges from \$.70 per day to \$7.00 per day. Siblings are billed at the rate of \$1 per day. There are six billing levels; four are CCDF subsidized and one is considered "full pay." Some families living under the poverty guidelines are exempt from paying a co--payment and these families include children placed in protective care, including foster placement, homeless children, and children of teen parents who are attending high school.

The number of service visits by the Division of Developmental Disabilities (DDD) for children aged 0-2 in the region decreased between 2013 and 2014 (from 151 to 57, respectively). No services were provided by DDD to children aged 3-5 in those same years (see Table 19 and Table 20).

Parent perceptions of their children's developmental needs

The First Things First Family and Community Survey is a phone-based survey designed to measure many critical areas of parents' knowledge, skills, and behaviors related to their young children. In 2014, First Things First conducted a modified version of the Family and Community survey in six tribal regions including the Salt River Pima-Maricopa Indian Community Region, known as the 2014 First Things First Parent and Caregiver Survey. This survey, conducted face-to-face with parents and caregivers of young children living in the region, included a sub-set of items from the First Things First Family and Community Survey, as well as additional questions that explored health needs in tribal communities. A total of 107 parents and other caregivers

⁸³ Ibid

responded to the survey at a variety of locations across the Salt River Pima-Maricopa Indian Community Region.

The 2014 First Things First Parent and Caregiver Survey included a set of questions aimed at gauging parents' and caregivers' concerns about their children's development. Respondents were asked to indicate how concerned they were about several developmental events and stages in eight key areas. The two areas which revealed the greatest degree of concern were "How well your child behaves" and "How well your child gets along with others." About one-third of the respondents reported being worried, either a lot or a little, about each of these two areas of child development. The next most worrisome area for parents and caregivers was "How well your child talks and makes speech sounds," which was of concern to 21 percent of the respondents (see Figure 9).

Across the eight questions, 12 percent of the respondents reported being "worried a lot" about one or more, and 46 percent were "not worried at all" about all eight. The remaining 42 percent were "worried a little" about at least one of the eight.

Early Care and Education

Table 16. Participation in Salt River Pima-Maricopa Indian Community ECEC programs, 2012-2013

	ECEC PRESCHOOL INFANTS AND TODDLERS (AGES 0-2) TOTAL CUMULATIVE ENROLLMENT	ECEC PRESCHOOL (AGES 3-4) TOTAL CUMULATIVE ENROLLMENT
Early Childhood Education Center (ECEC)	134	197

Source: Salt River Pima-Maricopa Indian Community Early Childhood Education Center. 2012-2013 Annual Report for the First Things First Salt-River Pima-Maricopa Indian Community 2014 Needs and Assets Report.

Note: ECEC enrollment numbers include all programs: Early Head Start, Head Start, and CCDF-funded ECEC services.

Table 17. Estimated number of children (ages 3 and 4) enrolled in nursery school, preschool, or kindergarten 2009-2013 five-year estimate

	ESTIMATED POPULATION (AGES 3-4)	ENROLLED IN SCHOOL (AGES 3-4)	
Salt River Pima-Maricopa Indian Community Region	237	61	26%
All Arizona Reservations	6,940	2,849	41%
Maricopa County	115,608	40,746	35%
Arizona	185,310	65,591	35%

Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B14003.
Retrieved from: <http://factfinder.census.gov>

Families with Children Who Have Special Needs

Table 18. AzEIP referrals and children served, 2014

	NUMBER OF AzEIP REFERRALS DURING FISCAL YEAR 2014			NUMBER OF CHILDREN BEING SERVED BY AzEIP ON OCTOBER 1, 2014		
	LESS THAN 1 YEAR OLD	FROM 13 TO 24 MONTHS OLD	FROM 25 TO 35 MONTHS OLD	LESS THAN 1 YEAR OLD	FROM 13 TO 24 MONTHS OLD	FROM 25 TO 35 MONTHS OLD
Salt River Pima-Maricopa Indian Community Region	N/A	N/A	N/A	N/A	N/A	N/A
All Arizona Reservations	N/A	N/A	N/A	N/A	N/A	N/A
Maricopa County	1,646	2,325	3,528	487	1,113	1,874
Arizona	2,651	3,669	5,421	746	1,659	2,843

Source: The Arizona Department of Economic Security (July 2015). [Special needs dataset]. Unpublished data.

Note: Entries of "N/A" indicate percentages which cannot be reported because of data suppression (counts of <25), or are otherwise not available.

Table 19. Division of Developmental Disabilities (DDD) services to children (ages 0-2), 2013-2014

	CHILDREN (AGES 0-2) REFERRED TO DDD		CHILDREN (AGES 0-2) SCREENED BY DDD		CHILDREN (AGES 0-2) SERVED BY DDD		NUMBER OF DDD SERVICE VISITS TO CHILDREN (AGES 0-2)	
	FY 2013	FY 2014	FY 2013	FY 2014	FY 2013	FY 2014	FY 2013	FY 2014
Salt River Pima-Maricopa Indian Community Region	N/A	N/A	0	0	N/A	N/A	151	57
All Arizona Reservations	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Maricopa County	1,538	1,763	217	157	1,918	1,662	117,268	98,971
Arizona	2,186	2,479	314	216	2,693	2,341	158,496	130,486

Source: The Arizona Department of Economic Security, Division of Developmental Disabilities (July 2015). [Special needs dataset]. Unpublished data.

Note: Entries of "N/A" indicate percentages which cannot be reported because of data suppression (counts of <25), or are otherwise not available.

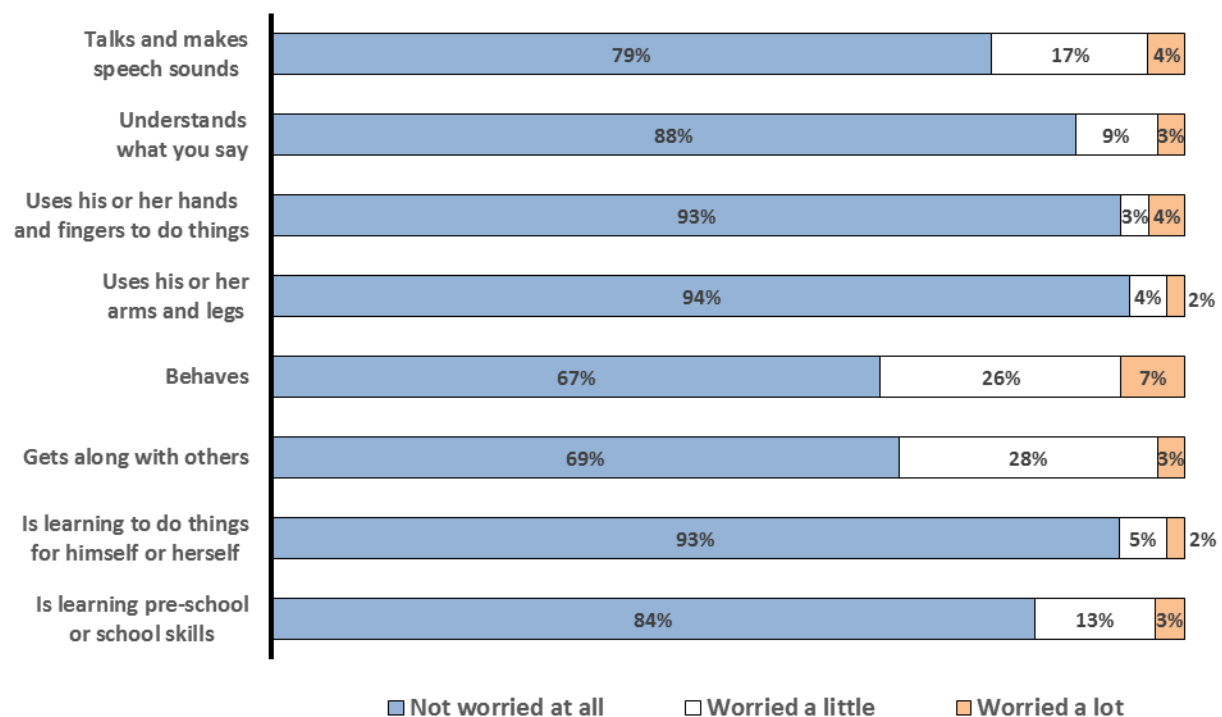
Table 20. Division of Developmental Disabilities (DDD) services to children (ages 3-5), 2013-2014

	CHILDREN (AGES 3-5) REFERRED TO DDD		CHILDREN (AGES 3-5) SCREENED BY DDD		CHILDREN (AGES 3-5) SERVED BY DDD		NUMBER OF DDD SERVICE VISITS TO CHILDREN (AGES 3-5)	
	FY 2013	FY 2014	FY 2013	FY 2014	FY 2013	FY 2014	FY 2013	FY 2014
Salt River Pima-Maricopa Indian Community Region	0	0	0	0	0	0	0	0
All Arizona Reservations	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Maricopa County	963	1,266	506	509	1,891	1,847	294,586	285,484
Arizona	1,401	1,804	731	727	2,600	2,533	374,440	367,590

Source: The Arizona Department of Economic Security, Division of Developmental Disabilities (July 2015). [Special needs dataset]. Unpublished data.

Note: Entries of "N/A" indicate percentages which cannot be reported because of data suppression (counts of <25), or are otherwise not available.

Figure 9. Parents' and caregivers' reported levels of concern for how well their children are meeting developmental milestones (Parent and Caregiver Survey, 2014).



Source: FTF Parent and Caregiver Survey, 2014

Child Health

Why it Matters

The Institute of Medicine defines children's health as the extent to which children are able or enabled to develop and realize their potential, satisfy their needs, and develop the capacities that allow them to successfully interact with their biological, physical, and social environments.⁸⁴ Health therefore encompasses not only physical health, but also mental, intellectual, social, and emotional well-being. Children's health can be influenced by their mother's health and the environment into which they are born and raised.^{85,86} The health of a child in utero, at birth, and in early life can impact many aspects of a child's development and later life. Factors such as a mother's prenatal care, access to health care and health insurance, and receipt of preventive care such as immunizations and oral health care all influence not only a child's current health, but long-term development and success as well.^{87,88,89}

Healthy People is a science-based government initiative which provides 10-year national objectives for improving the health of Americans. Healthy People 2020 targets are developed with the use of current health data, baseline measures, and areas for specific improvement. Understanding where Arizona mothers and children fall in relation to these national benchmarks can help highlight areas of strength in relation to young children's health and those in need of improvement in the state. The Arizona Department of Health Services monitors state level progress towards a number of maternal, infant and child health objectives for which data are available at the regional level, including increasing the proportion of pregnant women who receive prenatal care in the first trimester; reducing low birth weight;

⁸⁴ National Research Council and Institute of Medicine. (2004). *Children's Health, the Nation's Wealth: Assessing and Improving Child Health*. Washington, DC: National Academies Press. Retrieved from <http://www.ncbi.nlm.nih.gov/books/NBK92198/#ch2.s3>

⁸⁵ The Future of Children. (2015). *Policies to Promote Child Health*, (25) 1. Retrieved from <http://www.princeton.edu/futureofchildren/publications/docs/FOC-spring-2015.pdf>

⁸⁶ Center on the Developing Child at Harvard University. (2010). *The Foundations of Lifelong Health Are Built in Early Childhood*. Retrieved from <http://developingchild.harvard.edu/wp-content/uploads/2015/05/Foundations-of-Lifelong-Health.pdf>

⁸⁷ Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services. (n.d.). *Prenatal services*. Retrieved from <http://mchb.hrsa.gov/programs/womeninfants/prenatal.html>

⁸⁸ Patrick, D. L., Lee, R. S., Nucci, M., Grembowski, D., Jolles, C. Z., & Milgrom, P. (2006). Reducing oral health disparities: A focus on social and cultural determinants. *BMC Oral Health*, 6(Suppl 1), S4. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2147600/>

⁸⁹ Council on Children With Disabilities, Section on Developmental Behavioral Pediatrics, Bright Futures Steering Committee, and Medical Home Initiatives for Children With Special Needs Project Advisory Committee. (2006). Identifying infants and young children with developmental disorders in the medical home: An algorithm for developmental surveillance and screening. *Pediatrics*, 118s(1), 405-420. Retrieved from <http://pediatrics.aappublications.org/content/118/1/405.full>

reducing preterm births; and increasing abstinence from cigarette smoking among pregnant women.⁹⁰ Although not a target of a Healthy People 2020 objective, high-birth weight, or macrosomia, is also associated with health risks for both the mother and infant during birth. These children are also at increased risk for obesity and metabolic syndrome (which is linked to an increase risk of heart disease, stroke, and diabetes).⁹¹

The ability to obtain health care is critical for supporting the health of young children. In the early years of a child's life, well-baby and well-child visits allow clinicians to offer developmentally appropriate information and guidance to parents and provide a chance for health professionals to assess the child's development and administer preventative care measures like vaccines and developmental screenings. Without health insurance, each visit can be prohibitively expensive and may be skipped.⁹² Health care services to members of federally-recognized Indian tribes are available from Indian Health Service (IHS) facilities and other tribally-administered health care facilities.⁹³ Being eligible for IHS services alone, however, does not meet the minimum essential coverage requirement under the Affordable Care Act.⁹⁴

What the Data Tell Us

In 2013, there were 114 babies born to women residing in the Salt River Pima-Maricopa Indian Community Region. Forty percent of pregnant women in the region had no prenatal care during the first trimester. This regional percentage is more than twice than the one across the state as a whole (19%) and does not meet the Healthy People 2020 objective of fewer than 22.1 percent without first-trimester care (see Figure 10). Seventeen percent of pregnant women in the region had fewer than five prenatal care visits, which is more than three times the percentage statewide (5%) (see Table 21). The majority of births in the region (87%) were paid for by a public payor (the Indian Health Service or the Arizona Health Care Cost Containment

⁹⁰ Arizona Department of Health Services. (2013). *Arizona Health Status and Vital Statistics 2013 Annual Report. Table 6A: Monitoring Progress Toward Arizona and Selected Healthy People 2020 Objectives: Statewide Trends* Retrieved from: http://www.azdhs.gov/plan/report/ahs/ahs2013/pdf/6a1_10.pdf

⁹¹ Mayo Clinic Staff. (2015). *Fetal macrosomia*. Retrieved from <http://www.mayoclinic.org/diseases-conditions/fetal-macrosomia/basics/complications/con-20035423>

⁹² Yeung, LF, Coates, RJ, Seeff, L, Monroe, JA, Lu, MC, & Boyle, CA. (2014). Conclusions and future directions for periodic reporting on the use of selected clinical preventive services to improve the health of infants, children, and adolescents—United States. *Morbidity and Mortality Weekly Report* 2014, 63(Suppl-2), 99-107. Retrieved from <http://www.cdc.gov/mmwr/pdf/other/su6302.pdf>

⁹³ As a result of the Indian Self-Determination and Education Assistance Act (PL-93-638) (ISDEAA), federally recognized tribes have the option to receive the funds that the Indian Health Service (IHS) would have used to provide health care services to their members. The tribes can then utilize these funds to directly provide services to tribal members. This process is often known as 638 contracts or compacts. Rainie, S., Jorgensen, M., Cornell, S., & Arsenault, J. (2015). The Changing Landscape of Health Care Provision to American Indian Nations. *American Indian Culture and Research Journal*, 39(1), 1-24.

⁹⁴ <https://www.ihs.gov/aca/index.cfm/thingstoknow/>

System (AHCCCS, Arizona's Medicaid)), while just over half (55%) of births in the state fall into that category (see Table 21).

Of the babies born in 2013 to women in the region, 11 percent had low birth weight (2.5 kg or less), a higher percentage than across the state as a whole (7%), and over the Healthy People 2020 objective of fewer than 7.8 percent (see Figure 11). A higher proportion of babies in the region (16%) were premature (less than 37 weeks) compared to the state (9%). The regional percentage does not meet the Healthy People 2020 objective of fewer than 11.4 percent premature. Six percent of babies in the region were placed in neonatal intensive care, a slightly higher proportion than the state as a whole (5%) (see Table 22).

According to the data from the American Community Survey, over one quarter (26%) of the young children in the Salt River Pima-Maricopa Indian Community Region are estimated to be uninsured. This percentage is higher than that in all Arizona reservations combined (20%) and more than double the percentage across the state (10%) (see Figure 12).

Healthy People 2020 sets a target of 80 percent for full vaccination coverage among young children (19-35 months). Indian Health Service data for the Salt River Pima-Maricopa Indian Community (FY2013) indicate that 70.1 percent of children 19-35 months have had the recommended vaccine series (using series 4:3:1:3:3:1:4), which is below the Healthy People Target.⁹⁵

A set of questions on the 2014 First Things First Parent and Caregiver Survey asked participants whether various health care services that their child had required in the past year were delayed or never received. Over one-third (35%) of the survey participants in the Salt River Pima-Maricopa Indian Community Region reported that their child (or children) had not received timely health care at least once during the previous year (see Figure 13). Most frequently, it was dental care (20%), medical care (15%), or vision care (15%) that was delayed or not received.

⁹⁵ First Things First Salt River Pima-Maricopa Indian Community Regional Partnership Council 2014 Needs and Assets Report retrieved from: <http://www.azftf.gov/RPCCouncilPublicationsCenter/Regional%20Needs%20and%20Assets%20Report%20-%202014%20-%20Salt%20River%20Pima%20Maricopa%20Indian%20Community.pdf>

Mothers Giving Birth

Table 21. Selected characteristics of mothers giving birth, 2013

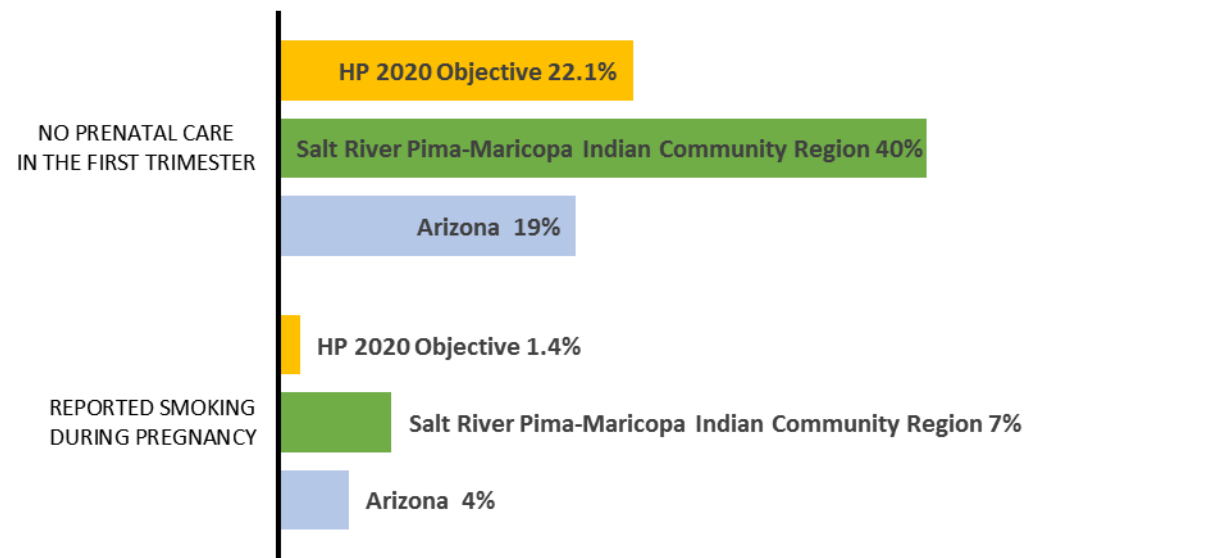
	TOTAL NUMBER BIRTHS TO ARIZONA- RESIDENT MOTHERS, 2013	HAD FEWER THAN 5 PRENATAL VISITS	HAD NO PRENATAL CARE IN FIRST TRI- MESTER	MOTHER REPORTED SMOKING DURING PREG- NANCY	MOTHER REPORTED DRINKING DURING PREG- NANCY	MOTHER HAD LESS THAN A HIGH SCHOOL- EDU- CATION*	MOTHERS YOUNGER THAN 20 YEARS OLD	BIRTH WAS PAID FOR BY AHCCCS OR IHS (PUBLIC PAYOR)
Salt River Pima- Maricopa Indian Community Region	114	17%	40%	7%	N/A	44% to 45%	24%	87%
All Arizona Reservations	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Maricopa County	53,848	4%	15%	4%	0%	17%	8%	53%
Arizona	84,963	5%	19%	4%	0%	18%	9%	55%

Source: The Arizona Department of Health Services, Bureau of Public Health Statistics (July 2015). [Vital statistics dataset]. Unpublished data.

Note: Entries of "N/A" indicate percentages which cannot be reported because of data suppression, or are otherwise not available.

*Due to data suppression policies, exact numbers cannot be calculated for the region for this indicator.

Figure 10. Healthy People 2020 objective for mothers, compared to 2013 region and state data



Sources: The Arizona Department of Health Services, Bureau of Public Health Statistics (July 2015). [Vital statistics dataset]. Unpublished data.

Healthy People 2020 objectives from ADHS, "Arizona Health Status and Vital Statistics 2013 Annual Report," Table 6A. Retrieved from <http://www.azdhs.gov/plan/menu/info/status.php>

Infant Health

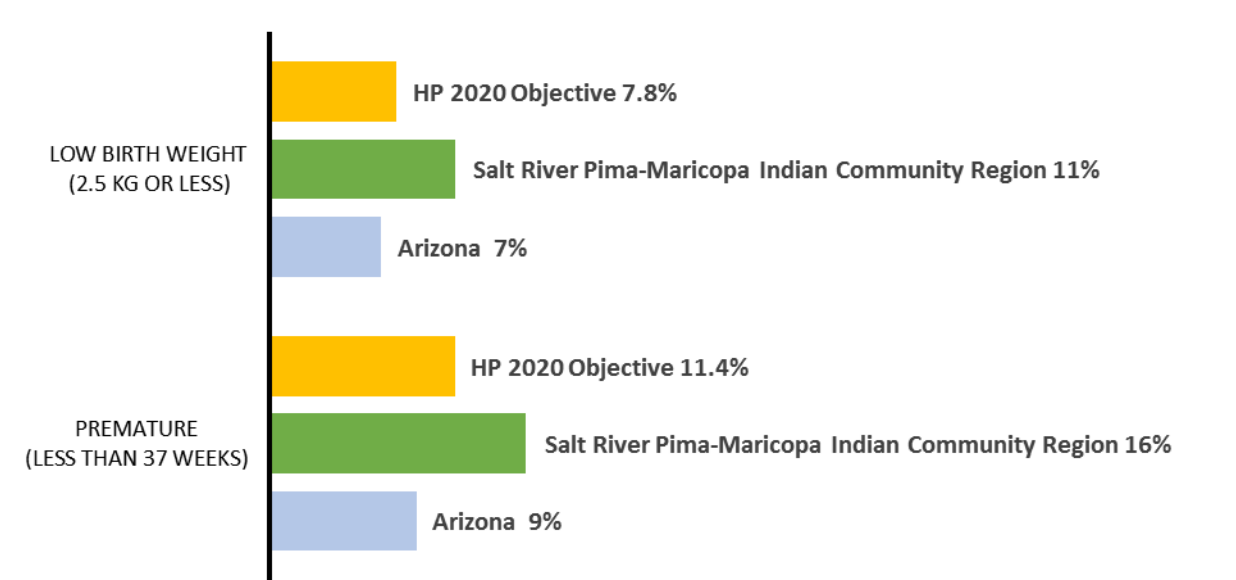
Table 22. Selected characteristics of babies born, 2013

	TOTAL NUMBER OF BIRTHS TO ARIZONA- RESIDENT MOTHERS, 2013	BABY HAD LOW BIRTH WEIGHT (2.5 kg OR LESS)	BABY HAD HIGH BIRTH WEIGHT (4 kg OR MORE)	BABY WAS PREMATURE (LESS THAN 37 WEEKS)	BABY WAS IN NEONATAL INTENSIVE CARE
Salt River Pima-Maricopa Indian Community Region	114	11%	11%	16%	6%
All Arizona Reservations	N/A	N/A	N/A	N/A	N/A
Maricopa County	53,848	7%	8%	9%	6%
Arizona	84,963	7%	8%	9%	5%

Source: The Arizona Department of Health Services, Bureau of Public Health Statistics (July 2015). [Vital statistics dataset]. Unpublished data.

Note: Entries of "N/A" indicate percentages which cannot be reported because of data suppression, or are otherwise not available.

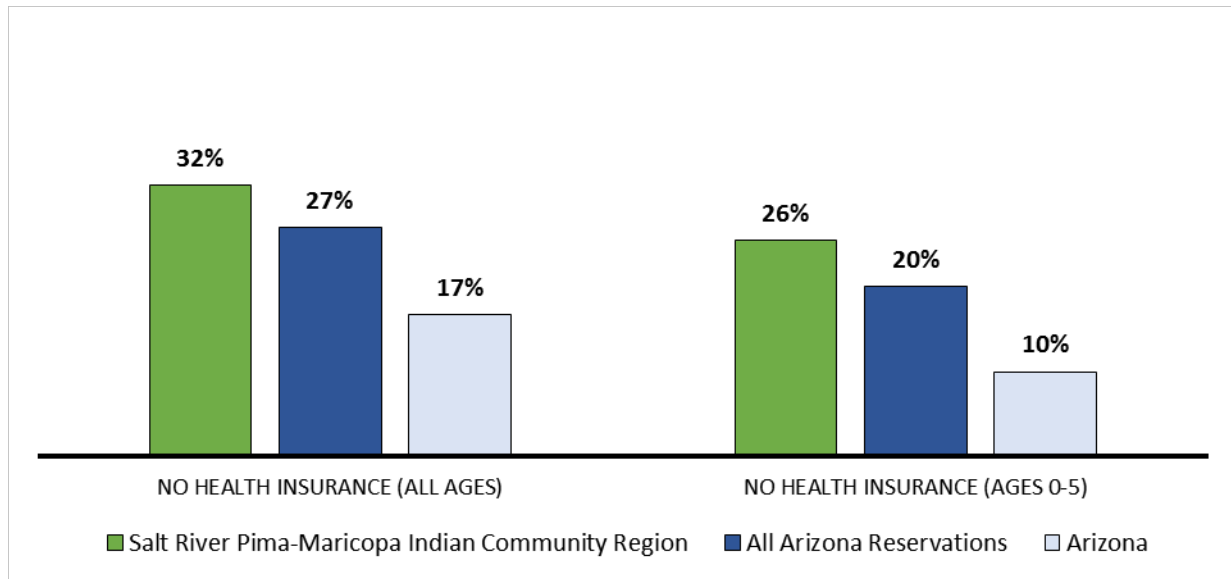
Figure 11. Healthy People 2020 objectives for babies, compared to 2013 region and state data



Sources: The Arizona Department of Health Services, Bureau of Public Health Statistics (July 2015). [Vital statistics dataset]. Unpublished data. Healthy People 2020 objectives from ADHS, "Arizona Health Status and Vital Statistics 2013 Annual Report," Table 6A. Retrieved from <http://www.azdhs.gov/plan/menu/info/status.php>

Health Insurance

Figure 12. Estimated percent of population without health insurance, 2009-2013 five-year estimate



Source: U.S. Census Bureau (2014). 2009-2013 American Community Survey 5 Year Estimates, Table B27001.

Retrieved from: <http://factfinder.census.gov>

Immunizations

Table 23. Immunizations for children in child care, school year 2014-2015*

	NUMBER OF STUDENTS	DTAP (DIPHTHERIA, TETANUS, PERTUSSIS), 4 OR MORE DOSES	POLIO, 3 OR MORE DOSES	MMR (MEASLES, MUMPS, RUBELLA), 1 OR MORE DOSES	RELIGIOUS BELIEFS EXEMPTIONS	MEDICAL EXEMPTIONS
Salt River Pima-Maricopa Indian Community Region	<25	92%	92%	92%	7.7%	0.0%
All Arizona Reservations	N/A	N/A	N/A	N/A	N/A	N/A
Maricopa County	55,622	92%	95%	95%	4.5%	0.5%
Arizona	84,778	93%	95%	96%	3.6%	0.5%

*Regional data included in this table are only from Noah Webster Basic School- Pima.

Sources: Arizona Department of Health Services (2015). [Regional immunization dataset]. Unpublished data. Arizona Department of Health Services (2015). Arizona childcare immunization coverage. Retrieved from: <http://azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage>

Table 24. Immunizations for children in kindergarten, school year 2014-15*

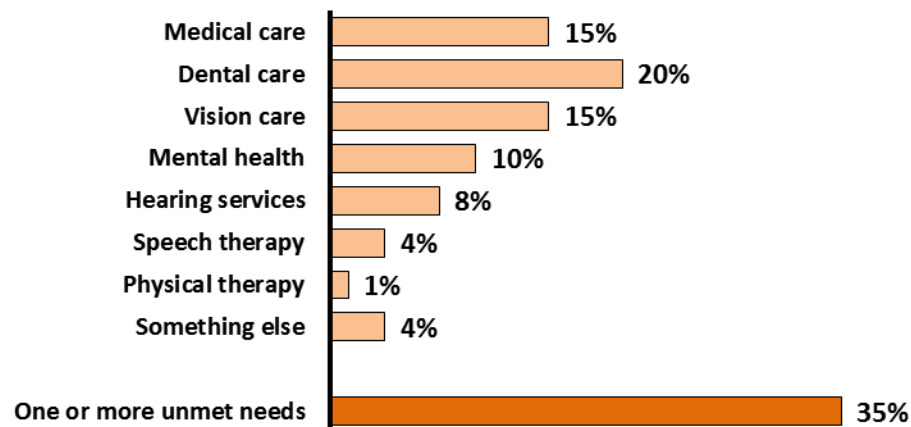
	NUMBER OF STUDENTS	DTAP (DIPHTHERIA, TETANUS, PERTUSSIS), 4 OR MORE DOSES	POLIO, 3 OR MORE DOSES	MMR (MEASLES, MUMPS, RUBELLA), 1 OR MORE DOSES	PERSONAL BELIEFS EXEMPTIONS	MEDICAL EXEMPTIONS
Salt River Pima-Maricopa Indian Community Region	145	87%	87%	86%	14.5%	0.0%
All Arizona Reservations	N/A	N/A	N/A	N/A	N/A	N/A
Maricopa County	54,292	94%	94%	94%	5.1%	0.3%
Arizona	84,651	94%	95%	94%	4.6%	0.3%

*Regional data included in this table are from Archway Classical Academy Cicero and Noah Webster Schools – Pima. Please note that data from some of these schools were not available for other indicators.

Source: Arizona Department of Health Services (2015). [Regional immunization dataset]. Unpublished data. Arizona Department of Health Services (2015). Arizona kindergarten immunization coverage. Retrieved from: <http://azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage>.

Note: Entries of "N/A" indicate percentages which cannot be reported because of data suppression, or are otherwise not available.

Access to care

Figure 13. Percent of respondents who reported that necessary health care was delayed or not received (Parent and Caregiver Survey, 2014).

Source: FTF Parent and Caregiver survey, 2014

Family Support and Literacy

Why it Matters

Parents and families have a crucial role in providing nurturing and stable relationships for optimal brain development during their child's first years.^{96,97,98} When children experience nurturing, responsive caregiving, they face better life prospects across a number of social, physical, academic and economic outcomes.^{99,100} Consequently, healthy development depends on positive relationships between children and their caregivers from an early age.¹⁰¹ For parents of young children, reading aloud, singings songs, practicing nursery rhymes, and engaging in conversation primes children to reach their full potential. Such interactions not only support literacy skills, but also offer exposure to a range of ideas, including recognizing and naming emotions, an important socio-emotional skill. Parents and family are children's first teachers; the most rapid expansion in vocabulary happens between ages one and three.¹⁰² In fact, literacy promotion is so central to a child's development that the American Academy of Pediatrics has recently focused on it as a key issue in primary pediatric care, aiming to make parents more aware of their important role in literacy.¹⁰³

Data on the amount and quality of the interaction parents typically have with their children can be useful to inform programs and policies to encourage positive engagement. Communities may employ many resources to support families in engaging with their children.

⁹⁶ Evans, G. W., & Kim, P. (2013). Childhood Poverty, Chronic Stress, Self-Regulation, and Coping. *Child Development Perspectives*, 7(1), 43-48. Retrieved from <http://onlinelibrary.wiley.com/doi/10.1111/cdep.12013/abstract>

⁹⁷ Shonkoff, J. P., & Fisher, P. A. (2013). Rethinking evidence-based practice and two-generation programs to create the future of early childhood policy. *Development and Psychopathology*, 25, 1635- 1653. Retrieved from http://journals.cambridge.org/download.php?file=%2FDPP%2FDPP25_4pt2%2FS0954579413000813a.pdf&code=aeb62de3e0ea8214329e7a33e0a9df0e

⁹⁸ Shonkoff, J. P. & Phillips, D. A. (2000). *From Neurons to Neighborhoods: The Science of Early Childhood Development*. Washington, D.C.: National Academy Press. Retrieved from <http://www.nap.edu/read/9824/chapter/1>

⁹⁹ Magnuson, K. & Duncan, G. (2013). Parents in poverty (95-121) In Bornstein, M. *Handbook of Parenting: Biology and Ecology of Parenting Vol. 4: Social Conditions and Applied Parenting*. New Jersey: Lawrence Erlbaum.

¹⁰⁰ Center on the Developing Child at Harvard University (2010). *The Foundations of Lifelong Health Are Built in Early Childhood*. Retrieved from <http://www.developingchild.harvard.edu>

¹⁰¹ National Scientific Council on the Developing Child. (n.d.). Category: Working Papers. Retrieved from <http://developingchild.harvard.edu/resourcecategory/working-papers/>

¹⁰² Read On Arizona. (n.d.). *As a parent what can I do at home to support early literacy?* Retrieved from <http://readonarizona.org/about-us/faq/>

¹⁰³ American Academy of Pediatrics. (n.d.). *Pediatric Professional Resource: Evidence Supporting Early Literacy and Early Learning*. Retrieved from https://www.aap.org/en-us/Documents/booksbuildconnections_evidencesupportingearlyliteracyandearlylearning.pdf

What the Data Tell Us¹⁰⁴

The 2014 First Things First Parent and Caregiver Survey collected data about parent and caregiver knowledge of children's early development and their involvement in a variety of behaviors known to contribute positively to healthy development, including two items about home literacy events.

Thirty percent of the 107 parent and caregiver respondents in the Salt River Pima-Maricopa Indian Community Region reported that someone in the home read to their child six or seven days in the week prior to the survey. A slightly larger fraction (33%) reported that the child was not read to, or only once or twice during the week. Telling stories or singing songs six or seven days a week was similarly frequent; 31 percent of the respondents reported their children were engaged in these activities. In more than two-thirds of the homes (76%), children heard stories or songs three or more days per week (see Figure 14). The average respondent reported reading stories 3.8 days per week, and singing songs or telling stories 4.2 days per week.

The 2014 First Things First Parent and Caregiver Survey also included an item aimed at eliciting information about parents' and caregivers' awareness of their influence on a child's brain development.

More than half (56%) of the survey participants in the region recognized that they could influence brain development prenatally or right from birth. Still, a sizeable proportion (22%) responded that a parent's influence would not begin until after the infant was 7 months old (see Figure 15).

Raising young children in the region: positive aspects and challenges

Parents and caregivers of young children who participated in the 2014 First Things First Parent and Caregiver Survey were asked what they liked best about raising young children in their community. In response to this question, many of the respondents indicated they liked the opportunities children have to learn about their culture (22%), heritage and traditions (17%), and Native language (5%). As some parents said: "Children get to see where they come from and learn about their culture;" "[I like best the] teaching of traditions and culture and what grandparents passed on."

¹⁰⁴ Please note that the data presented in this section are from the 2014 Salt River Pima-Maricopa Indian Community Regional Partnership Council Needs and Assets Report and are the most recent data available. The report is available at: <http://www.azftf.gov/RPCCouncilPublicationsCenter/Regional%20Needs%20and%20Assets%20Report%20-%202014%20-%20Salt%20River%20Pima%20Maricopa%20Indian%20Community.pdf>

Survey respondents also indicated they were grateful their children can grow up near their grandparents, other relatives, and elders (18%). Many parents and caregivers (21%) also indicated their appreciation for the opportunity to raise children in a community that is “close-knit,” supportive, and also overall safe. In the words of one parent: “It’s a ‘together community.’ Everyone knows each other.”

More specifically, many parents and caregivers mentioned the appreciation they have for the community activities and events that take place in the Salt River Pima-Maricopa Indian Community (12%), the services available to community members (10%), and the programs available to young children and their families (15%) including, sports activities, Boy Scouts and Girl Scouts, the FACE program, church-led activities, and programs and activities sponsored by First Things First and the Early Childhood Education Center. Other responses included appreciation for the high quality of the schools and early childhood education programs in the Community (10%): “The schools are very good,” one survey participant said. “If you need resources through the school they’re very good and out there to help you.” Survey respondents also liked the opportunities for outdoor and indoor recreational activities (5%), and the supportiveness of the Tribal Council towards the people of the Community (2%). The following quotes illustrate some of these perceptions: “I have gotten a lot of help since I moved here;” “the Tribal Council takes care of the community and provides services;” “I like best that [my children] are in a community who only wants the best for all children.”

Parents and caregivers were also asked about the most difficult aspects of raising children in the Salt River Pima-Maricopa Indian Community. The majority of survey takers indicated that negative influences such as drugs and alcohol (19%) and gangs (10%), were among the main challenges of raising children in Community. Additionally, about five percent of respondents indicated they sometimes worry about their children’s general safety in terms of traffic (3%), violence (5%), bullying (2%), and crime (2%). Aside from safety concerns, seven percent of parents and caregivers indicated it was difficult to raise children in their community because community members have different – and at times conflicting – views and values about how children should be raised. Other parents and caregivers who participated in the survey indicated that they sometimes have difficulties with transportation (5%) and being able to afford necessities (3%). Additionally, about four percent of survey takers indicated they have trouble finding childcare that fits with their work schedules. A few other parents expressed a concern about their children not learning enough about other cultures or communities (or cultural diversity in general), or not being able to interact with children from other ethnic groups.

Most important things that would improve young children's lives

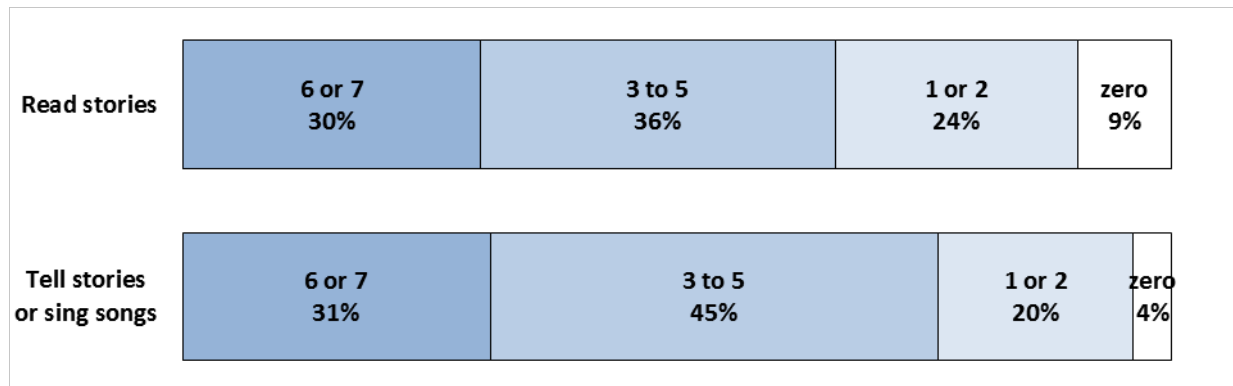
The 2014 First Things First Parent and Caregiver Survey also included an item asking parents what they thought were the most important things that should happen in order to improve the lives of children and families in the Salt River Pima-Maricopa Indian Community Region. Responses to these questions were diverse with some including specific suggestions about additional services (or an increase in existing services). They are presented in order of most to least cited.

Increased parent involvement, especially around children's education, was a common response to this item. More family activities, especially those targeting young children and teens was another frequent suggestion. Several other parents indicated that the community would benefit from an increase in family support services to help families involved with Child Protective Services (CPS) (like additional parenting classes). A decrease in the use of drugs and alcohol was also brought up by some survey respondents. Other parents suggested that more traditional/cultural events would benefit the community.

A few parents and caregivers suggested increasing the availability of existing services or resources such as:

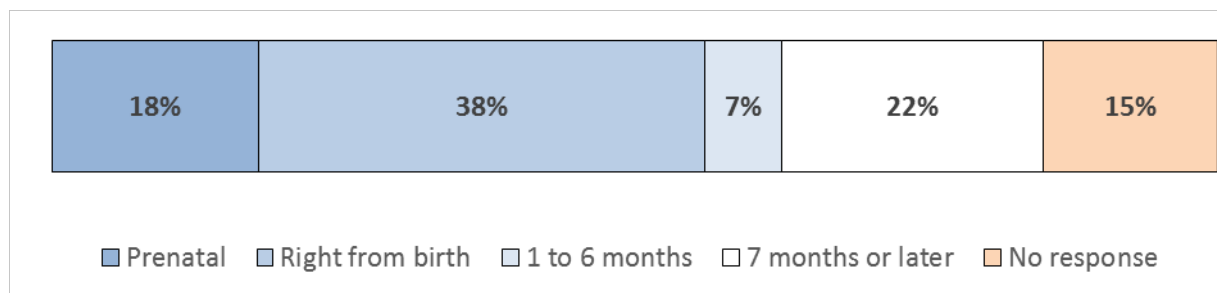
- the number of doctors and services at the Salt River Health Clinic
- mental health services
- services for children with special needs
- nutrition and physical activity classes
- child care, including options for parents who work early in the morning and/or late at night
- life-skills classes
- adult education
- transportation services
- creating opportunities for parents and single parents to get together for the purpose of networking and supporting one another
- housing

Figure 14. Reported frequencies of home literacy events: “How many days per week did someone read stories to your child? How many days per week did someone tell stories or sing songs to your child?” (Parent and Caregiver Survey, 2014).



Source: FTF Parent and Caregiver Survey, 2014

Figure 15. Responses to the question “When do you think a parent can begin to make a big difference on a child's brain development?” (Parent and Caregiver Survey, 2014).



Source: FTF Parent and Caregiver Survey, 2014

Communication, Public Information and Awareness and Systems Coordination among Early Childhood Programs and Services

Why it Matters

To create a strong, comprehensive, and sustainable early childhood system, communities need an awareness of the importance of the first five years in a child's life, and a commitment to align priorities and resources to programs and policies affecting these first years. Supporting public awareness by providing accessible information and resources on early childhood development and health, and educating community members about the benefits of committing resources to early childhood, are key to supporting and growing this system. Assessing the reach of these educational and informational efforts in First Things First regions across the state can help early childhood leadership and stakeholders refine, expand or re-direct these efforts.

What the Data Tell Us

As it has been described in this report, there is a wide range of services available to families with young children in the Community. This certainly represents a major asset in the region.

One example of this is the collaboration between Life Enhancement and Resource Network (LEARN) program and tribal Child Protective Services (CPS). LEARN is now seen as one more resource available to CPS and they can make LEARN services be part of the parents' case plan which often includes an educational component, bringing in the variety of services offered by the Education Division. Because the LEARN program is separate from CPS, this program can serve as a more 'neutral entity' and help facilitate parent cooperation. This kind of collaboration creates a network of support for the parents of young children in the region.

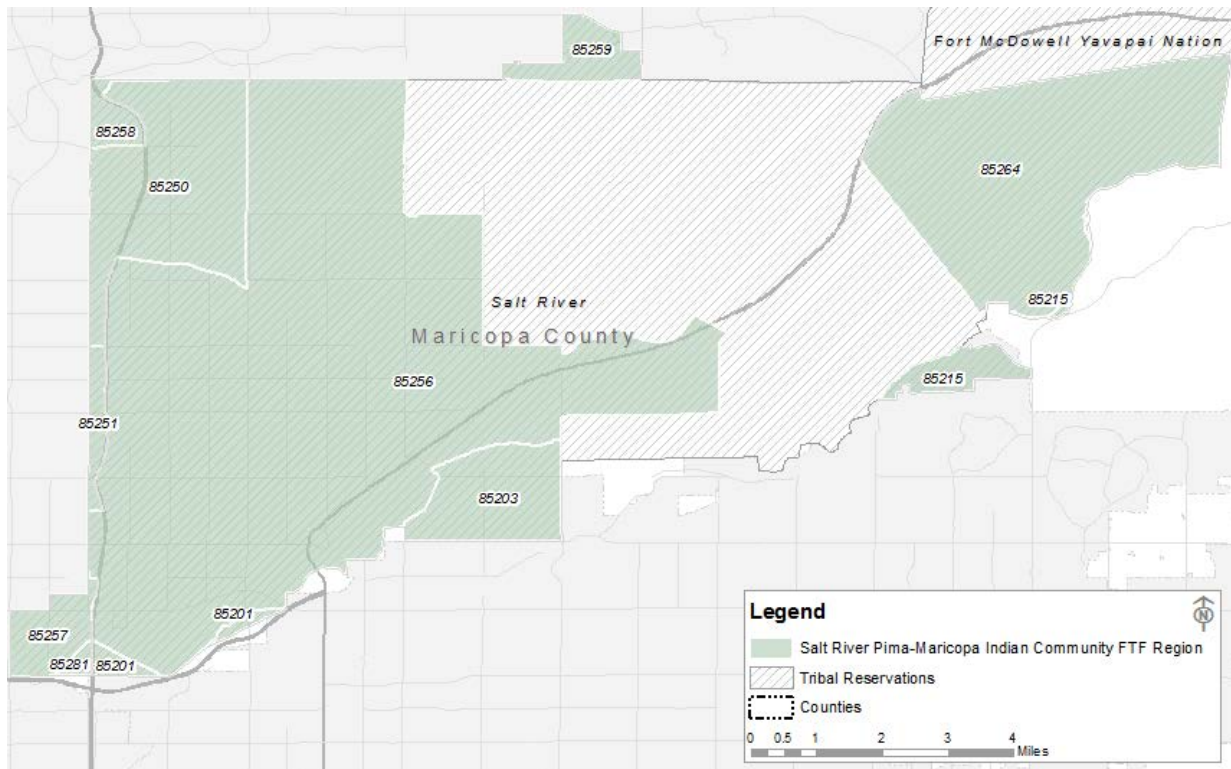
Nevertheless, key informants pointed out that the level of coordination and collaboration among all the different services providers tends to vary. On the one hand, some key informants indicated that service providers in the region are very good at coming together to organize Community-wide events and activities and that interactions among the different programs are generally positive and collaborative.

On the other hand, key informants suggested that collaboration among services providers could increase for the benefit of families in the Community. Enhanced communication and collaboration would also benefit providers of home-based services, key informants said, in order to avoid duplication of services and to make sure that families are accessing the services that will meet their needs.

Data sharing may be limited by privacy and confidentiality laws, but finding ways of complying with the laws while still making sure Community residents receive the services they need was considered a priority among key informants interviewed for this report. Some of them pointed out that in fact, there is strong interest in moving into that direction among members of the tribal leadership.

Key informants also expressed the importance of a concerted effort to create a 'community' among the service providers and show them the linkages that exists among the various programs serving families in the region.

Appendix 1: Map of ZIP Code Tabulation Areas (ZCTAs)* of the Salt River Pima-Maricopa Indian Community Region



Source: U.S. Census Bureau (2010). TIGER/Line Shapefiles: ZCTAs, Counties, American Indian/Alaska Native Homelands. Retrieved from <http://www.census.gov/geo/maps-data/data/tiger-line.html>

*Note: ZCTAs approximate U.S. Postal Service (USPS) ZIP Codes™. Users should keep in mind that they do not match zip codes exactly. ZCTAs are made up of groupings of census blocks, the smallest level of geography for which U.S. Census releases statistical data. To create ZCTAs, the U.S. Census uses a Master Address File to determine the ZIP Codes for the addresses in each census block. They then assign blocks to ZCTAs based on the most prevalent ZIP Code in the block. If the ZCTA code for a certain block does not match the ZIP Code, it is because the majority of the addresses in the block have a different ZIP Code.

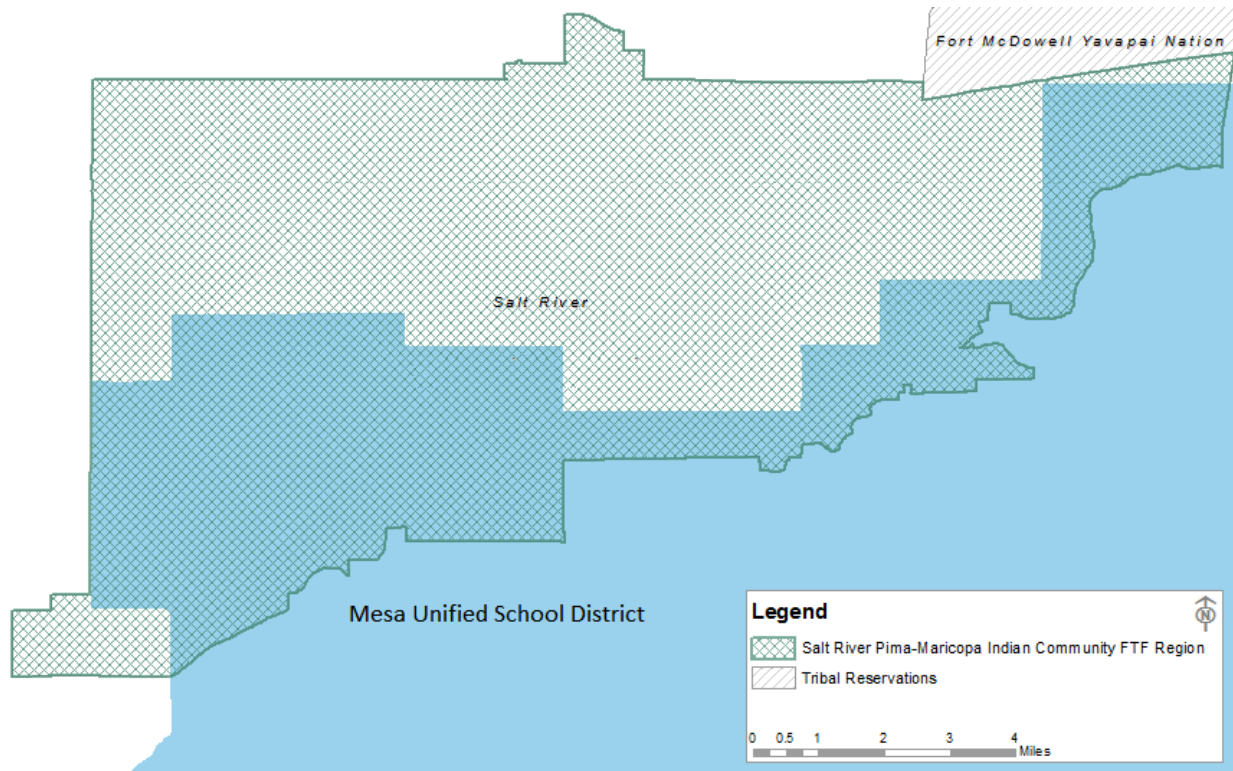
Appendix 2: ZIP Code Tabulation Areas (ZCTAs)* of the Salt River Pima-Maricopa Indian Community Region

ZIP CODE TABULATION AREA (ZCTA)	TOTAL POPULATION	POPULATION (AGES 0-5)	TOTAL NUMBER OF HOUSEHOLDS	HOUSEHOLDS WITH ONE OR MORE CHILDREN (AGES 0-5)	PERCENT OF ZCTA'S TOTAL POPULATION LIVING IN THE SALT RIVER PIMA- MARICOPA INDIAN COMMUNITY REGION	THIS ZCTA IS SHARED WITH
Salt River Pima- Maricopa Indian Community Region	6,289	626	2,198	380		
85203	544	51	148	31	2%	Southeast Maricopa
85215	3	0	1	0	0.02%	East Maricopa & Southeast Maricopa
85256	4,974	575	1,539	349	100%	
85257	762	0	507	0	3%	East Maricopa
85264	6	0	3	0	0.5%	East Maricopa

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P1, P14, P20.

*Note: ZCTAs approximate U.S. Postal Service (USPS) ZIP Codes™. Users should keep in mind that they do not match zip codes exactly. ZCTAs are made up of groupings of census blocks, the smallest level of geography for which U.S. Census releases statistical data. To create ZCTAs, the U.S. Census uses a Master Address File to determine the ZIP Codes for the addresses in each census block. They then assign blocks to ZCTAs based on the most prevalent ZIP Code in the block. If the ZCTA code for a certain block does not match the ZIP Code, it is because the majority of the addresses in the block have a different ZIP Code.

Appendix 3: Map of Elementary and Unified School Districts in the Salt River Pima-Maricopa Indian Community Region



Source: U.S. Census Bureau (2015). TIGER/Line Shapefiles: Elementary School Districts, Unified School Districts. Retrieved from <http://www.census.gov/geo/maps-data/data/tiger-line.html>

Appendix 4: Data Sources

Arizona Department of Administration, Office of Employment and Population Statistics (December 2012): "2012-2050 State and county population projections." Retrieved from <http://www.workforce.az.gov/population-projections.aspx>

Arizona Department of Administration, Office of Employment and Population Statistics (2014). Local area unemployment statistics (LAUS). Retrieved from <https://laborstats.az.gov/local-area-unemployment-statistics>

Arizona Department of Economic Security (2015). Child Care Market Rate Survey 2014. Data received from the First Things First State Agency Data Request

Arizona Department of Economic Security (2015). [Attendance data set]. Unpublished raw data received from the First Things First State Agency Data Request

Arizona Department of Economic Security (2015). [AzEIP Data]. Unpublished raw data received through the First Things First State Agency Data Request

Arizona Department of Economic Security (2015). [DDD Data]. Unpublished raw data received through the First Things First State Agency Data Request

Arizona Department of Economic Security (2015). [Drop-Out and Graduation data set]. Unpublished raw data received from the First Things First State Agency Data Request

Arizona Department of Economic Security (2015). [Homeless data set]. Unpublished raw data received from the First Things First State Agency Data Request

Arizona Department of Economic Security (2015). [SNAP data set]. Unpublished raw data received from the First Things First State Agency Data Request

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Arizona Department of Education (2014). AIMS and AIMS A 2014. Retrieved from <http://www.azed.gov/research-evaluation/aims-assessment-results/>

Arizona Department of Education (2015). Percentage of children approved for free or reduced-price lunches, July 2015. Unpublished raw data received from the First Things First State Agency Data Request

Arizona Department of Health Services (2015). [Immunizations Dataset]. Unpublished raw data received from the First Things First State Agency Data Request

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First Things First (2014). [2012 Family and Community Survey data]. Unpublished data received from First Things First

U.S. Census Bureau (2010). 2010 Decennial Census, Tables P1, P11, P12A, P12B, P12C, P12D, P12E, P12F, P12G, P12H, P14, P20, P32, P41. Retrieved from <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>

U.S. Census Bureau (2010). 2010 Tiger/Line Shapefiles prepared by the U.S. Census. Retrieved from <http://www.census.gov/geo/maps-data/data/tiger-line.html>

U.S. Census Bureau (2014). American Community Survey 5-Year Estimates, 2009-2013, Table B05009, Table B10002, B14003, B15002, B16001, B16002, B17001, B17010, B17022, B19126, B23008, B25002cor, B25106. Retrieved from <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>

U.S. Census Bureau (2015). 2015 Tiger/Line Shapefiles prepared by the U.S. Census. Retrieved from <http://www.census.gov/geo/maps-data/data/tiger-line.html>