

# # FIRST THINGS FIRST

Pascua Yaqui Tribe Region



## 2020 NEEDS AND ASSETS REPORT

# **Pascua Yaqui Tribe Regional Partnership Council**

**2020**

## **Needs and Assets Report**

Prepared by

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Funded by

First Things First Pascua Yaqui Tribe Regional Partnership Council

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## Introduction

Ninety percent of a child's brain growth occurs before kindergarten and the quality of a child's early experiences impacts whether their brain will develop in positive ways that promote learning. First Things First (FTF) was created by Arizonans to help ensure that Arizona children have the opportunity to arrive at kindergarten prepared to be successful. 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 FTF Pascua Yaqui Tribe Region helps community leaders and decision-makers understand the needs of young children, the resources available to meet those needs and gaps that may exist in those resources. Data collection and analysis for the 2020 report were completed prior to the COVID-19 pandemic and, therefore, do not reflect the impact of COVID-19 on families with young children and the services that support them. The report is organized by topic areas pertinent to young children in the region, such as the population characteristics or educational indicators. Within each topic area are sections that set the context for why the data found in the topic areas are important (Why it Matters), followed by a section that includes available data on the topic (What the Data Tell Us).

The FTF Pascua Yaqui Tribe 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. It is our sincere hope that this information also will help guide community conversations about how we can best support school readiness for all children in the Pascua Yaqui Tribe Region. To that end, this information may be useful to stakeholders in the 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 throughout the region

## **Acknowledgements**

The FTF Pascua Yaqui Tribe Regional Council wants to thank the Arizona Department of Economic Security, the Arizona Department of Health Services, the Arizona Department of Education and the U.S. Census Bureau, for their contributions of data for this report and their ongoing support and partnership with FTF on behalf of young children.

To the current and past members of the Pascua Yaqui Tribe Regional Council, your vision, dedication and passion have been instrumental in improving outcomes for young children and families within the region. Our future 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.

# LETTER FROM THE CHAIR

May 8, 2020

Message from the Chair:

Since the inception of First Things First, the Pascua Yaqui Tribe Regional Partnership Council has taken great pride in supporting evidence-based and evidence informed early childhood programs that are improving outcomes for young children. Through both funded and unfunded approaches, the early childhood programs and services supported by the regional council have strengthened families, improved the quality of early learning, and enhanced the health and well-being of children birth to 5 years old in our community.

This impact would not have been possible without data to guide our discussions and decisions. One of the primary sources of that data is our regional Needs and Assets report, which provides us with information about the status of families and young children in our community, identifies the needs of young children, and details the supports available to meet those needs. Along with feedback from families and early childhood stakeholders, the report helps us to prioritize the needs of young children in our area and determine how to leverage First Things First resources to improve outcomes for young children in our community.

The Pascua Yaqui Tribe Regional Council would like to thank our Needs and Assets vendor, University of Arizona, for their knowledge, expertise and analysis of the Pascua Yaqui Tribe region. Their partnership has been crucial to our development of this report and to our understanding of the extensive information contained within these pages.

As we move forward, the First Things First Pascua Yaqui Tribe Regional Partnership Council remains committed to helping more children in our community arrive at kindergarten prepared to be successful by funding high-quality early childhood services, collaborating with system partners to maximize resources, and continuing to build awareness across all sectors of the importance of the early years to the success of our children, our communities and our state.

Thanks to our dedicated staff, volunteers and community partners, First Things First has made significant progress toward our vision that all children in Arizona arrive at kindergarten healthy and ready to succeed.

Thank you for your continued support.

Sincerely,



Cecilia F. Garcia, Chair



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## Executive Summary

### ***Regional Boundaries***

The boundaries of the First Things First Pascua Yaqui Tribe Regional Partnership Council are those of the Pascua Pueblo Yaqui Reservation in Pima County. The region covers approximately 2.2 square miles. 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 Pascua Yaqui Tribe was one of 10 tribes that chose to be designated as its own region. This decision must be ratified every two years, and since then, the Pascua Yaqui Tribe has opted to continue to be designated as its own region.

### ***Population Characteristics***

According to the 2010 U.S. Census, the total population of the Pascua Yaqui Tribe Region was 3,478, of whom 470 were children ages birth to five years. About one-third (36%) of the 802 households in the region had one or more children ages birth to 5 years. The proportion of households with young children in the Pascua Yaqui Tribe region is higher than the rate for all Arizona reservations combined (26%), Pima County (14%), and Arizona (16%). However, the number of births per year in the region has declined from 96 in calendar year 2014, to 60 births in calendar year 2017.

Almost all the children ages 0-4 in the Pascua Yaqui Tribe Region (92%) are American Indian. This proportion is the same as that for all Arizona reservations combined (92%) and substantially higher than in the state (6%). The percentage of children in the region who are Hispanic, however, is about twice as that in all Arizona reservations combined (21% vs 9%, respectively). In 2017, the majority of the 60 births in the region (85%) were to women who identify as American Indian.

Three-quarters of adults in the Pascua Yaqui Tribe Region (75%) are American Indian, compared to 88 percent in all Arizona reservations combined. Almost one in four adults in the region (23%) identify as Hispanic or Latino, a proportion that is similar to the state (25%) but much higher than all Arizona reservations combined (5%).

More than one-third (41%) of individuals ages five or older in the region speak Spanish at home. This proportion is much higher than that in all Arizona reservations combined (4%), and even higher than the state rate (21%). Four percent of residents in the region speak a language other than English or Spanish, a proportion that is similar to the county (5%) and the state (6%) but substantially lower than all Arizona reservations combined (50%).

The majority of young children in the Pascua Yaqui Tribe Region (79%) live in households with either one parent or stepparent. Compared to all Arizona reservations combined, the proportion of children in the region who live in two-parent households is substantially smaller (27% vs 9%). Of the 531 children (ages 0-17) in the region living in a grandparent's household, two-thirds (66%) live with a grandparent who is responsible for them, a higher proportion than in all Arizona reservations (55%) and Pima County (52%).

### ***Economic Circumstances***

More than half (56%) of young children (ages 0-5) in the Pascua Yaqui Tribe Region live in poverty. This proportion is similar to that of all Arizona reservations combined (54%) but substantially higher than the state (26%). There is a similar pattern in the percentages of all residents living in poverty in the region (43%), all Arizona reservations (40%), and the state (17%).

The median income for all families in the region is \$29,387, much lower than in Pima County (\$60,790), and the state of Arizona (\$63,812). Single parent-headed families with children (ages 0-17) have a median income that is about one-third of the income in married-couple families.

Eligibility for some public assistance programs is determined by different poverty thresholds. For example, family income at or below 141 percent of the federal poverty threshold is one criterion for eligibility for the Arizona Health Care Cost Containment System (AHCCCS)<sup>i</sup> for children ages 1 to 5, and at or below 147 percent of the poverty threshold for children under 1 year old. In the Pascua Yaqui Tribe Region, the percentage of families with young children who may qualify for AHCCCS (77%) is substantially higher than in the state (38%) and higher than in all Arizona reservations combined (67%).

In fiscal year 2018, 98 young children in the Pascua Yaqui Tribe Region participated in the Temporary Assistance for Needy Families (TANF); this number represents an estimated 21 percent of all young children in the region, a proportion that is substantially higher than in Pima County (5%) and the state (3%).

### ***Educational Indicators***

There are no schools within the boundaries of the Pascua Yaqui Tribe Region that serve elementary and middle school-age children. Children from the community attend a variety of schools most of which are part of the Tucson Unified School District (TUSD). In the 2013-2014 school year, the district school with the greatest number of students from the Pascua Yaqui Tribe was Lawrence 3-8 School, with 238 students, followed by Johnson Elementary School (160

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<sup>i</sup> Arizona Health Care Cost Containment System (AHCCCS) is the name of Arizona's Medicaid program, which offers health care programs to Arizona residents.

students). The middle schools with the largest Pascua Yaqui student enrollment were Valencia Middle School (56) and Pistor Middle School (49).

According to the 2018 Pascua Yaqui Tribe Regional Needs and Assets Report, data for the 2015 AzMERIT test of third graders show that, similar to student performance across the state, fewer than half of the students at some of the schools that Pascua Yaqui children attend met or exceeded the desired math or reading level, a pattern that was also evident for TUSD as a whole.

Educational attainment among adults 25 and older in the Pascua Yaqui Tribe Region is somewhat lower than in all Arizona reservations combined. One-third (33%) of adults in the region have more than a high school education compared to 38 percent in all Arizona reservations. Both of these percentages, however, are substantially lower than those in the Pima County (66%) and Arizona (62%). In 2017, over one-quarter (27%) of the 60 births in the region were to mothers with more than high-school education, a proportion that is about half of that in Pima County (57%) and the state (56%).

Youth from the Pascua Yaqui Tribe Region attend Tucson Magnet High School (113 students from the region), Cholla High Magnet School (108 students from the region), and Pueblo Communication Arts Magnet High School (48 students from the region). The only school within the regional boundaries is Hiaki High School, which in the 2014-2015 academic year had 96 students enrolled. In 2017, the four-year graduation rate at Hiaki High School was 58 percent, at 70 percent for the five-year graduation rate. The dropout rate in that same year was 28 percent.

### ***Early Learning***

Early childhood education enrollment rates in the Pascua Yaqui Tribe Region are high. Sixty percent of children ages three to four are enrolled in school (i.e. nursery school, preschool, or kindergarten) compared to 41 percent in all Arizona reservations and 40 percent in Pima County. According to the 2018 Pascua Yaqui Tribe Regional Partnership Council Needs and Assets Report, within the Pascua Yaqui Tribe region, early care and education options include the Ili Uusim Mahtawa'apo Pascua Yaqui Head Start, which can serve up to 141 children (ages 3-4) and 24 certified/licensed Family Home Providers. Family Home Providers who are certified/licensed by the tribe can each provide care for up to five children with the costs subsidized by the Pascua Yaqui Tribe for children who are tribally-enrolled.

In the 2015-2016 school year, Ili Uusim Mahtawa'apo Pascua Yaqui Head Start served 64 three-year-olds and 76 four-year-olds. These numbers represent a substantial proportion of the Pascua Yaqui Tribe Region's children in this age group. Ili Uusim Mahtawa'apo Pascua Yaqui Head Start is a federal program that provides services to families on and off the reservation (five miles around the reservation), so children who do not reside in the region covered by Pascua Yaqui Tribe reservation boundaries can also attend this Head Start program.

According to data from the Department of Economic Security, in 2018 there were four licensed family child care providers in the region with a capacity to serve a total of 16 children. In the same year, there was one accredited child care provider in the region with the capacity to serve four children.

The number of children receiving a child care subsidy from the Department of Economic Security (DES) in the Pascua Yaqui Tribe Region increased from 39 in 2015, to 55 in 2017, and remained stable in 2018 (54 children). Nearly all (93%) children who are eligible for DES child care subsidies in the Pascua Yaqui Tribe Region have received them in recent years. This proportion is similar to that in the state overall, where 92 percent of eligible children received child care subsidies in 2018. In addition to DES subsidies available to families in the region, the cost of child care can also be lessened for families in the region through a child care subsidy provided by the tribe to eligible children who are enrolled tribal members through its Pascua Yaqui Tribe Child Care and Development Fund (CCDF).

For children involved with the Department of Child Safety specifically, the proportion of those who are eligible for DES child care subsidies and are actually receiving them has declined over time in the region, Pima County and the state. In 2015, all eligible children in the Pascua Yaqui Tribe Region received subsidies, compared to 83 percent in 2018.

The Department of Economic Security (DES) defines early care and education “quality environments”<sup>ii</sup> as providers that are accredited by a national organization or providers that have received a state-approved quality indicator that is recognized by the department. In 2017 there were 35 children receiving DES subsidies who were enrolled in quality environment settings, as defined by DES. That number increased to 43 children in 2018.

In fiscal year 2016, between 14 and 30 children ages 0-2 were referred to the Arizona Early Intervention Program (AzEIP) in the region; in 2017, between three and 27 children were referred to AzEIP and found eligible for services. In fiscal year 2017, fewer than ten children were referred to AzEIP and found eligible for services. In both 2017 and 2018, there were fewer than ten active AzEIP cases in the region. In State Fiscal Years 2015, 2016 and 2018 there were fewer than ten children ages 0-2 in the Pascua Yaqui Tribe Region who received services from the Division of Developmental Disabilities (DDD). No children from the region in that age range received DDD services in State Fiscal Year 2017. Similarly, no children ages 3-5 received services from DDD in the period between fiscal year 2015 and 2018.

### ***Child Health***

In the Pascua Yaqui Tribe Region, about one in three (34%) people lack health insurance coverage, a percent that is higher than in all Arizona reservations (22%) and the state of Arizona

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<sup>ii</sup> Providers are considered quality educational environments by the Arizona Department of Economic Security if they receive a Quality First three-star rating or higher or are accredited by a national organization, such as the Association for Early Learning Leaders or the National Association for the Education of Young Children (NAEYC).

(12%). The proportion of young children who are uninsured is lower than that of the general population in all three geographies, with a similar pattern of the regional percentage (20%) being higher than all Arizona reservations (16%) and the state (7%). It is important to note that the U.S. Census Bureau does not consider coverage by the Indian Health Service (IHS) to be insurance coverage.

In 2017, the most recent year for which data are available, IHS paid for 48 percent of the 60 births in the region, while AHCCCS paid for 43 percent of them.

A large proportion of births in the Pascua Yaqui Tribe Region in 2017 were to women who did not have adequate prenatal care. Forty-three percent of births were to women who had no prenatal care in their first trimester, a percentage that is substantially higher than the Healthy People 2020 target of not more than 22.1 percent. Additionally, 15 percent of births were to women who had fewer than five prenatal visits, compared to 13 percent in Pima County, and eight percent in the state.

From 2015 to 2018 there were fewer than six non-fatal inpatient hospitalizations of young children from the Pascua Yaqui Tribe Region. From 2015 to 2017, there were eight inpatient hospitalizations and seven emergency room visits for asthma among young children from the region, with an average length of stay for asthma hospitalization of 2.8 days.

From 2015 to 2018, there were 164 emergency room visits for non-fatal incidents for young children in the region. Reasons for these non-fatal emergency room visits were similar across the region, county, and state, with falls and being 'struck by or against' an object or person the most common. Being 'struck by or against' an object or person was slightly more common in the region than the state overall (20% and 14%, respectively), while falls were slightly less common in the region than the state (37% and 46%, respectively).

Between 2015 and 2017 there were fewer than six child deaths among young children (ages 0-4) and among all children (ages 0-17) in the Pascua Yaqui Tribe Region.

### ***Family Support and Literacy***

According to the 2018 First Things First Pascua Yaqui Tribe Regional Partnership Council Needs and Assets Report, from fiscal year 2011 to fiscal year 2015, the Pascua Yaqui Tribe Regional Partnership Council implemented the Home Visitation strategy to expand and enhance the services available in the region to support families with children birth to age five on the reservation.

Parenting Education services have been provided since fiscal year 2011 to families with young children in the region through different strategies: Community-Based Family Education, Parent Education Community-Based Training, Parenting Education and Parenting Outreach and

Awareness. Through the implementation of these funded approaches, parents and other caregivers have completed a voluntary series of community-based classes on topics like parenting skills, brain development, and nutrition. Families have also received books and participated in events on the reservation to increase their awareness of the importance of early childhood development, including early literacy, language acquisition, and tribal heritage learning opportunities.

Child welfare services in the Pascua Yaqui Tribe Region are overseen by the Pascua Yaqui Social Services Department. The 2018 First Things First Pascua Yaqui Tribe Regional Partnership Council Needs and Assets Report indicates that in 2014, there were 377 reports of abuse or neglect; in 2015 the number of reports was 321. The number of reports of child abuse or neglect made to Pascua Yaqui Child Protective Services that were confirmed or substantiated decreased from 184 in 2014 to 115 in 2015. The numbers of substantiated reports in these two years represent 49 percent and 36 percent of all reports made, respectively.

### ***Systems Coordination among Early Childhood Programs and Services***

The Tribal Children and Families Provider Networking Board was created by a tribal council executive order and resolution to coordinate services for tribal children and families and to recommend policies to tribal council for the well-being of the tribal children and families. The Tribal Networking Board has been working internally on their structure including the Itom Yoemia Initiative to develop the tribal strategic plan. First Things First regional staff met with tribal staff from numerous departments (i.e. tribal health department, social services, education, law enforcement, fire, housing, language and culture, attorney general, and others) to support the tribal government work to enhance the tribal early childhood development and health system.

The Tribal Awareness Campaign Committee is a collaborative effort between Pascua Yaqui departments and programs (i.e. tribal health department, education, law enforcement, social services, library, WIC, KPVT radio station, and others) to better serve families and increase awareness on a variety of social issues affecting the community. The main focus has been developing presentations, trainings and events such as Child Abuse Prevention Month (April), Children's Day and Children's Mental Health Awareness Month (May), Community Baby Shower, among others. First Things First regional staff joined the Tribal Awareness Campaign Committee to support its efforts and to leverage the resources and infrastructure available to increase community awareness about the importance of early childhood development and health and the services that are available.

### ***Communication, Public Information and Awareness***

First Things First regularly measures progress toward building support for children birth to age 5 through statewide surveys targeting both the general population and parents of young children. The most recent statewide survey conducted in September 2018 found that, compared to previous surveys in 2012 and 2016, there was increased agreement in the general public and parents of young children with statements about the importance of early childhood health and development. These include: the state should ensure all children have access to early childhood services, a child who received early education and healthcare services before age 5 is more likely to succeed in school and beyond, and the state should put the same priority on early education as it does on K-12 education. While the survey also showed that awareness of First Things First has increased over time, there are still large portions of the general public (87%) and parents of young children (66%) who have never heard of First Things First.

In SFY 2019, First Things First secured 11 million advertising impressions through traditional media strategies, including television, radio, cinema, and billboard ads, and 76 million digital advertising impressions through digital media strategies, including online ads on desktop and smartphone devices. Particular success has been seen in the growth of Facebook Page Likes for FTF, which grew from just 3,000 in 2012 to 142,600 in 2019. Additional digital marketing content in 2019 included 40 original, high-quality digital marketing pieces and the creation of an online searchable database of early childhood programs, which logged over 24,187 visits in its first six months.

## The Pascua Yaqui Tribe Region

### 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 publicly available sources, including the 2010 U.S. Census, the American Community Survey (ACS), and the Arizona Department of Administration (ADOA). Where more recent data are not available, this report cites data from the 2018 First Things First Pascua Yaqui Tribe Regional Partnership Council Needs and Assets Report.

The U.S. Census<sup>1</sup> 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. Census data presented in the report is drawn from the Census Geography for the Pascua Yaqui Tribe Region.

The American Community Survey<sup>2</sup> 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 are available for the Pascua Yaqui Tribe Region Census Geography. 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 2013 to 2017. In general, the reliability of ACS estimates is greater for more populated areas. Statewide estimates, for example, are more reliable than county-level estimates or estimates for small tribal communities.

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.”<sup>3</sup> According to the State of Indian Country Arizona report<sup>4</sup> there are particular challenges in 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 is the case with the decennial census). Most important, 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, this report includes these estimates because they still are the most comprehensive publicly-available data that can help begin to describe the families that First Things First serve.

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 six. In addition, some data received from state agencies may be suppressed according to their own guidelines. The Arizona Department of Health Services does not report counts less than six; the Arizona Department of Economic Security does not report counts between one and nine; and the Arizona Department of Education does not report counts less than eleven. Throughout this report, information which is not available because of suppression guidelines will be indicated by entries of “<6” or “<10” or “<11” for counts, or “DS” (data suppressed) for percentages. Data are sometimes not available for particular regions, either because a particular program did not operate in the region or because data are only available at the county level. Cases where data are not available will be indicated by an entry of “N/A.”

For some data, an exact number was not available because it was the sum of several numbers provided by a state agency, and some numbers were suppressed in accordance with agency guidelines. In these cases, a range of possible numbers is provided, where the true number lies within that range. For example, for data from the sum of a suppressed number of children ages 0-12 months, 13 children ages 13-24 months, and 12 children ages 25-35 months, the entry in the table would read “26 to 34.” This is because the suppressed number of children ages 0-12 months is between one and nine, so the possible range of values is the sum of the two known numbers plus one to the sum of the two known numbers plus nine. Ranges that include numbers below the suppression threshold of less than six or ten may still be included if the upper limit of the range is above six or ten. Since a range is provided rather than an exact number, the confidentiality of program participants is preserved.

In most of the tables in this report, the top row of data corresponds to the First Things First Pascua Yaqui Tribe Region. When available, the next rows show data that are useful for comparison purposes: all Arizona reservations combined, Pima County, and the state of Arizona. Please note that data are not always available for all these geographies. Data labelled “All Arizona reservations” come from either the 2010 U.S. Census or the 2013-2017 American Community Survey. These numbers are the totals for all residents of the 21 American Indian Areas within the state of Arizona. We include only the Arizona parts of the five reservations

(Colorado River Indian Tribes, Fort Mojave, Fort Yuma, Navajo Nation, and Zuni) which have land in neighboring states.

## Population Characteristics

### Why it Matters

To support the healthy development and learning of young children across Arizona, advocates and decision makers need to understand who those children and their families are.<sup>5</sup> Although parents are a child's first and most important teachers, families of young children often use community resources to help them promote positive outcomes for their children.<sup>6</sup> The number and characteristics of young children and families in a region can inform the range of services in a community, helping to guide where to locate child care, health care, and social services so that they are accessible to those who need them.<sup>7,8</sup> Tribal communities are often located in rural locations and often experience different economic conditions within the state such as access to jobs, food resources, schools, health care facilities and providers, and social services. These disparities have been associated with a number of poor outcomes for children including infant mortality and obesity, among others.<sup>9</sup>

**Language use.** Households with multiple languages spoken pose a unique balance of benefits for child learning and barriers to parental engagement, which counties with high rates of other languages spoken should specifically consider. Acknowledging and valuing linguistic heritage (such as through language preservation efforts) and recognizing needs for resources and services in languages other than English should remain important considerations for organizations and agencies across Arizona.<sup>10,11,12,13</sup> Awareness of the levels of English proficiency and of other home languages spoken within a region provides information about a community's assets and allows for identifying relevant supports. Young children can benefit from exposure to multiple languages; mastery of more than one language is an asset in school readiness and academic achievement, and offers cognitive and social-emotional benefits in early school and throughout their lifetime.<sup>14,15,16,17</sup> Although dual language learning is an asset, limited English speaking households (that is, households where none of the adult members speak English well) can face challenges. These families may experience barriers to accessing health care and social service information, as well as barriers to engaging in important parent-teacher interactions, all of which can impede their child's health and development.<sup>18,19</sup> Providing information about resources and services in languages accessible to families in the region can help remove those barriers. Although Spanish is the most common second language spoken, Arizona is also home to a large number of Native communities, with Native languages spoken by families in those communities. Language preservation and revitalization are critical to strengthening culture in Native communities, addressing issues of educational equity, and to the promotion of social unity, community well-being, and Indigenous self-determination.<sup>20, 21</sup>

Special consideration should be given to respecting and supporting the numerous Native American languages spoken, particularly in tribal communities around the state.

**Family and household composition.** In addition to growing racial, ethnic and social diversity, U.S. and Arizona families are becoming more diverse in terms of family structure.<sup>22,23,24,25</sup> Understanding the makeup of families in a region can help better prepare child care, school and agency staff to engage with families in ways that support positive interactions both within families and with staff to enhance each child’s early learning and development.<sup>26</sup>

Multi-generational households, particularly those where grandparents live in the home with the child and parents, are common in some communities and cultures and can provide financial and social benefits.<sup>27</sup> The proportion of young children living in a grandparent’s household in all Arizona reservations combined (40%) is more than double that of the state rate (14%).<sup>28</sup> It is important to note that these households may be multigenerational—i.e., the grandparent and the child’s parent may live in the same household.<sup>iii</sup> However, parents are not always in the picture in these homes. Care of children by someone other than their parents, such as relatives or close friends, is known as kinship care and is increasingly common.<sup>29</sup> Children living in kinship care can also arrive in those situations for a variety of reasons, including a parent’s absence for work or military service, chronic illness, drug abuse, or incarceration, or due to abuse, neglect, or homelessness. Understanding who is caring for children can help in identifying and creating specific supports for these families. Children in kinship care often face special needs as a result of trauma, and therefore these families often require additional support and assistance to help children adjust and provide the best possible home environment.<sup>30</sup> A child’s risk of living in poverty is also higher for those living with grandparents, adding to the family stress.<sup>31</sup> These families are likely to require access to information on resources, support services, benefits, and policies available to aid in their caregiving role.<sup>32</sup> Though it varies from one Native community to another, extended, multigenerational families, and kinship care are common in Native communities.<sup>33,34</sup> The strengths associated with this family structure—mutual 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.<sup>35</sup> Grandparents are often central to these multigenerational households, in many cases sharing and strengthening Native language, history, and culture.<sup>36, 37</sup>

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<sup>iii</sup> Note that there is difference between families/sub-families and householders in Census data. For example, a child living with their single mother in their grandparent’s married household would be counted as living with a single parent in the living arrangements but as living in a married couple household in the composition of households table. That is, the living arrangements figure looks at the presence of a child’s parents within the household (whether or not the parent is the householder).

## What the Data Tell Us

### Population, Race, and Ethnicity

- According to the 2010 U.S. Census, the total population of the Pascua Yaqui Tribe Region was 3,478, of whom 470 were children ages birth to five years. About one-third (36%) of the 802 households in the region had one or more children ages birth to five years. The proportion of households with young children in the Pascua Yaqui Tribe region is higher than the rate for all Arizona reservations combined (26%), Pima County (14%), and Arizona (16%) (Table 1).
- The number of births per year in the region has declined from 96 in calendar year 2014, to 60 births in calendar year 2017 (Figure 2).
- Almost all the children ages birth to four in the Pascua Yaqui Tribe Region (92%) are American Indian. This proportion is the same as that for all Arizona reservations combined (92%) and substantially higher than in the state (6%). The percentage of children in the region who are Hispanic, however, is about twice as that in all Arizona reservations combined (21% vs 9%, respectively) (Table 3).
- Three-quarters of adults in the Pascua Yaqui Tribe Region (75%) are American Indian, compared to 88 percent in all Arizona reservations combined. Almost one in four adults in the region (23%) identify as Hispanic or Latino, a proportion that is similar to the state (25%) but much higher than all Arizona reservations combined (5%) (Table 4).
- In 2017, the majority of the 60 births in the region (85%) were to women who identify as American Indian (Table 5).

### Immigrant Families and Language Use

- Four percent of young children in the Pascua Yaqui Tribe Region live with one or two foreign-born parents, a percentage that is similar to all Arizona reservations combined (3%) but substantially lower than Pima County (24%) and the state (26%) (Table 6).
- More than one-third (41%) of individuals ages five or older in the region speak Spanish at home. This proportion is much higher than that in all Arizona reservations combined (4%), and even higher than the state rate (21%). Four percent of residents in the region speak a language other than English or Spanish, a proportion that is similar to the county (5%) and the state (6%) but substantially lower than all Arizona reservations combined (50%).<sup>iv</sup> Similarly, there are comparable percentages of limited-English-

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<sup>iv</sup> Please note that the most recent estimates from the American Communities Surveys (ACS) no longer specify what those other languages are. Based on ACS data included in previous Needs and Assets Reports for the Pascua Yaqui Tribe Region, it is likely that the other languages spoken at home in the region are Native North American languages. See

speaking households in the region, county, and state (4% in each), all of which are lower than in all Arizona reservations combined (12%) (Table 7 & Table 9).

### **Family and Household Composition**

- The majority of young children in the Pascua Yaqui Tribe Region (79%) live in households with either one parent or stepparent. Compared to all Arizona reservations combined, the proportion of children in the region who live in two-parent households is substantially smaller (27% vs 9%) (Table 10).
- Of the 531 children (ages 0-17) living in a grandparent’s household, two-thirds (66%) live with a grandparent who is responsible for them, a higher proportion than in all Arizona reservations (55%) and Pima County (52%) (Table 13).

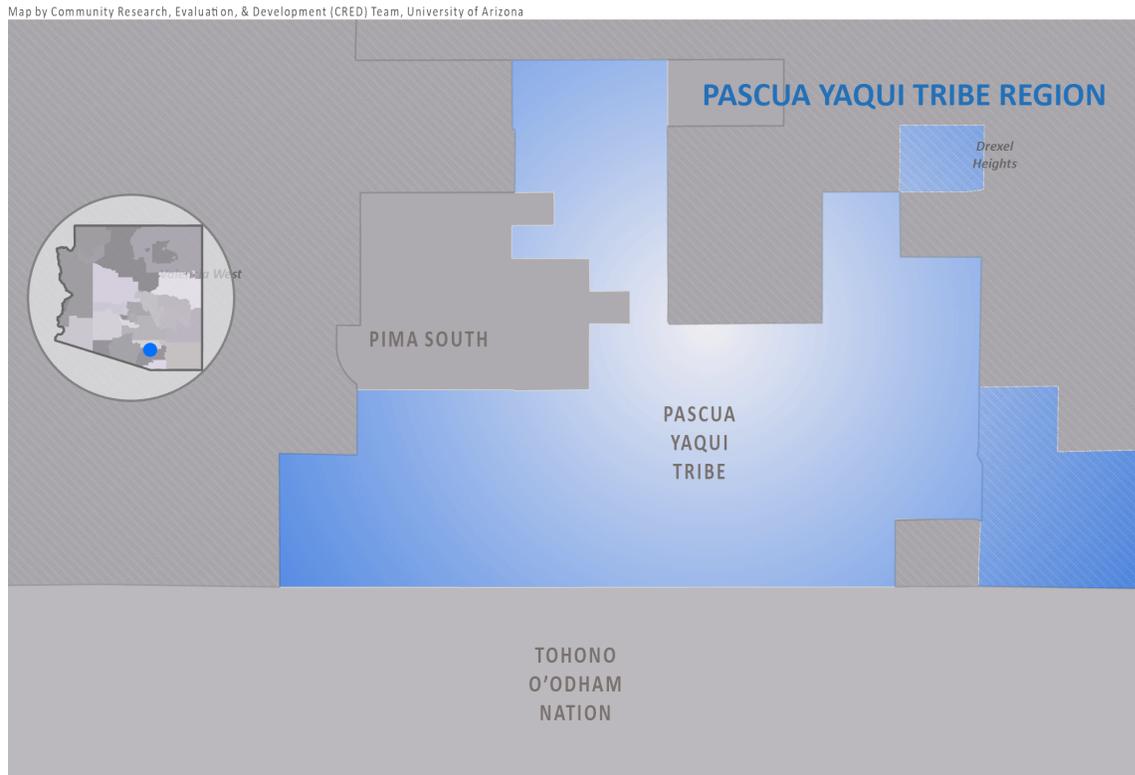
## **Regional Boundaries**

The First Things First regional boundaries were established to create regions that (a) reflect the view of families in terms of where they access services, (b) coincide with existing boundaries or service areas of organizations providing early childhood services, (c) maximize the ability to collaborate with service systems and local governments, (d) facilitate the ability to convene a Regional Partnership Council, and (e) allow for the collection of demographic and indicator data.

The boundaries of the First Things First Pascua Yaqui Tribe Regional Partnership Council are those of the Pascua Pueblo Yaqui Reservation in Pima County. The region covers approximately 2.2 square miles. 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 Pascua Yaqui Tribe was one of 10 tribes that chose to be designated as its own region. This decision must be ratified every two years, and since then, the Pascua Yaqui Tribe has opted to continue to be designated as its own region.

Figure 1 shows the geographical area covered by the Pascua Yaqui Tribe 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.

Figure 1. The First Things First Pascua Yaqui Tribe Region



Custom map by the Community Research, Evaluation, & Development (CRED) Team using shapefiles obtained from First Things First and the U.S. Census Bureau 2019 TIGER/Line Shapefiles (<https://www.census.gov/cgi-bin/geo/shapefiles/index.php>).

## Population, Race, and Ethnicity

Table 1. Population and households, 2010

GEOGRAPHY	TOTAL POPULATION	POPULATION (AGES 0-5)	TOTAL NUMBER OF HOUSEHOLDS	HOUSEHOLDS WITH ONE OR MORE CHILDREN (AGES 0-5)	PERCENT OF HOUSEHOLDS WITH ONE OR MORE CHILDREN (AGES 0-5)
<b>Pascua Yaqui Tribe Region</b>	<b>3,478</b>	<b>470</b>	<b>802</b>	<b>287</b>	<b>36%</b>
All Arizona Reservations	178,131	20,511	50,140	13,115	26%
Pima County	980,263	74,796	388,660	53,862	14%
Arizona	6,392,017	546,609	2,380,990	384,441	16%
United States	308,745,538	24,258,220	116,716,292	17,613,638	15%

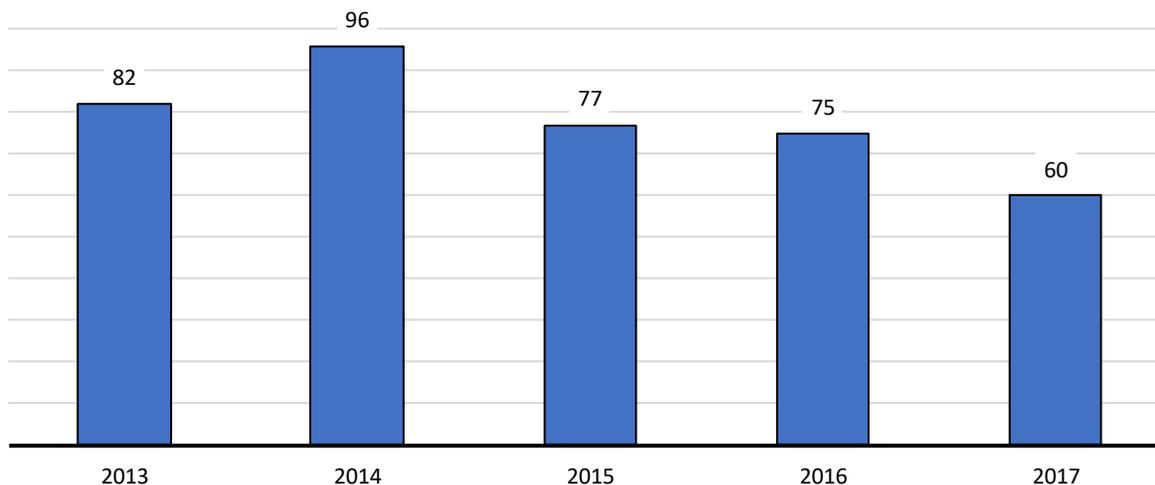
Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P1, P4, & P20

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

GEOGRAPHY	POPULATION (AGES 0-5)	AGE 0	AGE 1	AGE 2	AGE 3	AGE 4	AGE 5
<b>Pascua Yaqui Tribe Region</b>	<b>470</b>	<b>85</b>	<b>69</b>	<b>80</b>	<b>86</b>	<b>85</b>	<b>65</b>
All Arizona Reservations	20,511	3,390	3,347	3,443	3,451	3,430	3,450
Pima County	74,796	12,125	12,380	12,889	12,814	12,313	12,275
Arizona	546,609	87,557	89,746	93,216	93,880	91,316	90,894
United States	24,258,220	3,944,153	3,978,070	4,096,929	4,119,040	4,063,170	4,056,858

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

Figure 2. Number of births per calendar year in the Pascua Yaqui Tribe Region, 2013 to 2017



Source: ADHS Office of Disease Prevention and Health Promotion. (2019). Arizona Health Status and Vital Statistics.

Table 3. Race and ethnicity of the population of young children (ages 0-4), 2010

GEOGRAPHY	POPULATION (AGES 0-4)	HISPANIC	WHITE, NOT HISPANIC	BLACK OR AFRICAN-AMERICAN	AMERICAN INDIAN	ASIAN OR PACIFIC ISLANDER
<b>Pascua Yaqui Tribe Region</b>	<b>405</b>	<b>21%</b>	<b>1%</b>	<b>&lt;1%</b>	<b>92%</b>	<b>&lt;1%</b>
All Arizona Reservations	17,061	9%	1%	<1%	92%	<1%
Pima County	62,521	53%	35%	4%	5%	2%
Arizona	455,715	45%	40%	5%	6%	3%
United States	20,201,362	25%	51%	14%	1%	5%

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P12B-H

Table 4. Race and ethnicity of the adult population (ages 18 and older), 2010

GEOGRAPHY	POPULATION 18 YEARS AND OVER	HISPANIC	WHITE, NOT HISPANIC	BLACK OR AFRICAN- AMERICAN, NOT HISPANIC	AMERICAN INDIAN, NOT HISPANIC	ASIAN OR PACIFIC ISLANDER, NOT HISPANIC	OTHER, NOT HISPANIC
<b>Pascua Yaqui Tribe Region</b>	<b>2,164</b>	<b>23%</b>	<b>1%</b>	<b>&lt;1%</b>	<b>75%</b>	<b>&lt;1%</b>	<b>&lt;1%</b>
All Arizona Reservations	117,049	5%	5%	<1%	88%	<1%	1%
Pima County	754,947	29%	61%	3%	2%	3%	1%
Arizona	4,763,003	25%	63%	4%	4%	3%	1%
United States	234,564,071	14%	67%	12%	1%	5%	1%

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

Table 5. Race and ethnicity of mothers giving birth in calendar year 2017

GEOGRAPHY	TOTAL NUMBER OF BIRTHS IN 2017	MOTHER WAS HISPANIC OR LATINA	MOTHER WAS WHITE, NOT HISPANIC	MOTHER WAS BLACK OR AFRICAN- AMERICAN	MOTHER WAS AMERICAN INDIAN OR ALASKAN	MOTHER WAS ASIAN OR PACIFIC ISLANDER
<b>Pascua Yaqui Tribe Region</b>	<b>60</b>	<b>DS</b>	<b>DS</b>	<b>DS</b>	<b>85%</b>	<b>DS</b>
Pima County	10,970	48%	40%	5%	4%	4%
Arizona	81,664	41%	44%	6%	6%	4%

Source: ADHS Office of Disease Prevention and Health Promotion. (2019). Arizona Health Status and Vital Statistics.

## Immigrant Families and Language Use

Table 6. Children (ages 0-5) living with parents who are foreign-born

GEOGRAPHY	YOUNG CHILDREN (AGES 0-5) LIVING IN FAMILIES OR SUBFAMILIES	YOUNG CHILDREN (AGES 0-5) LIVING IN FAMILIES OR SUBFAMILIES WITH ONE OR TWO FOREIGN-BORN PARENTS	PERCENT OF YOUNG CHILDREN (AGES 0-5) LIVING IN FAMILIES OR SUBFAMILIES WITH ONE OR TWO FOREIGN-BORN PARENTS
<b>Pascua Yaqui Tribe Region</b>	<b>426</b>	<b>19</b>	<b>4%</b>
All Arizona Reservations	16,902	457	3%
Pima County	67,537	16,082	24%
Arizona	498,102	130,705	26%
United States	22,939,897	5,730,869	25%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table 05009

Note: Children living in subfamilies are children who live together with one or two of their parents in a relative's household (such as a grandparent or aunt or uncle).

Table 7. Language spoken at home by persons ages 5 and older

GEOGRAPHY	POPULATION (AGES 5 AND OLDER)	PERCENT OF THE POPULATION (AGES 5+) WHO SPEAK ONLY ENGLISH AT HOME	PERCENT OF THE POPULATION (AGES 5+) WHO SPEAK SPANISH AT HOME	PERCENT OF THE POPULATION (AGES 5+) WHO SPEAK OTHER LANGUAGES AT HOME
<b>Pascua Yaqui Tribe Region</b>	<b>3,463</b>	<b>55%</b>	<b>41%</b>	<b>4%</b>
All Arizona Reservations	171,213	46%	4%	50%
Pima County	948,093	72%	24%	5%
Arizona	6,375,189	73%	21%	6%
United States	301,150,892	79%	13%	8%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table C16001

Note: The most recent estimates from the American Community Survey (ACS) no longer specify the proportion of the population who speak a Native North American language for geographies smaller than the state. Based on ACS data included in previous Needs and Assets Reports for the Pascua Yaqui Tribe Region, it is likely that the other languages spoken at home in the region are Native North American languages. See

<https://files.firstthingsfirst.org/regions/Publications/Regional%20Needs%20and%20Assets%20Report%20-%202018%20-%20Pascua%20Yaqui%20Tribe.pdf>

Table 8. English-language proficiency for persons ages 5 and older

GEOGRAPHY	POPULATION (AGES 5 AND OLDER)	PERCENT OF THE POPULATION (AGES 5+) WHO SPEAK ONLY ENGLISH AT HOME	PERCENT OF THE POPULATION (AGES 5+) WHO SPEAK ANOTHER LANGUAGE AT HOME, AND SPEAK ENGLISH "VERY WELL"	PERCENT OF THE POPULATION (AGES 5+) WHO SPEAK ANOTHER LANGUAGE AT HOME, BUT DO NOT SPEAK ENGLISH "VERY WELL"
<b>Pascua Yaqui Tribe Region</b>	<b>3,463</b>	<b>55%</b>	<b>40%</b>	<b>5%</b>
All Arizona Reservations	171,213	46%	41%	13%
Pima County	948,093	72%	20%	8%
Arizona	6,375,189	73%	18%	9%
United States	301,150,892	79%	13%	9%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B16005

Table 9. Limited-English-speaking households

GEOGRAPHY	TOTAL NUMBER OF HOUSEHOLDS	NUMBER OF "LIMITED ENGLISH SPEAKING" HOUSEHOLDS	PERCENT OF HOUSEHOLDS WHICH ARE "LIMITED ENGLISH SPEAKING"
<b>Pascua Yaqui Tribe Region</b>	<b>916</b>	<b>35</b>	<b>4%</b>
All Arizona Reservations	49,638	5,955	12%
Pima County	398,530	16,400	4%
Arizona	2,482,311	108,133	4%
United States	118,825,921	5,305,440	4%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table 16002

Note: Both this table and Table 1 show a total number of households in the region. These numbers are different (916 and 802, respectively) because they come from different data sources: American Community Survey and Census 2010. For more information about these two datasets please see the Data Sources section in this report.

## Family and Household Composition

Table 10. Living arrangements for children (ages 0-5)

GEOGRAPHY	CHILDREN (0-5) LIVING IN HOUSEHOLDS	CHILDREN (0-5) LIVING WITH		CHILDREN (0-5) LIVING WITH	
		TWO PARENTS OR STEPPARENTS	ONE PARENT OR STEPPARENT	RELATIVES (NOT PARENTS)	NON-RELATIVES
<b>Pascua Yaqui Tribe Region</b>	<b>480</b>	<b>9%</b>	<b>79%</b>	<b>8%</b>	<b>3%</b>
All Arizona Reservations	18,635	27%	64%	8%	1%
Pima County	70,508	56%	39%	3%	2%
Arizona	520,556	59%	37%	2%	2%
United States	23,817,787	62%	34%	2%	2%

Source: U.S. Census Bureau (2018). 2013-2017 American Community Survey 5-Year Estimates, Tables B05009, B09001, and B17006

Note: Data in this table reflect the percent of young children living in the same household as their parents, some other family member, or a non-relative caregiver.

Table 11. Heads of households in which children (ages 0-5) live, 2010

GEOGRAPHY	HOUSEHOLDS WITH ONE OR MORE CHILDREN (AGES 0-5)	HEADS OF HOUSEHOLDS		
		MARRIED FAMILY HOUSEHOLDS	SINGLE-MALE HOUSEHOLDS	SINGLE-FEMALE HOUSEHOLDS
<b>Pascua Yaqui Tribe Region</b>	<b>287</b>	<b>30%</b>	<b>11%</b>	<b>58%</b>
All Arizona Reservations	13,115	45%	13%	42%
Pima County	53,862	62%	11%	27%
Arizona	384,441	65%	11%	24%
United States	17,613,638	67%	9%	24%

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

Note: Data in this table reflect the percent of households with one or more young children with each type of head of household.

Table 12. Children (ages 0-5) living in the household of a grandparent, 2010

GEOGRAPHY	POPULATION (AGES 0-5)	CHILDREN (0-5) LIVING IN A GRANDPARENT'S HOUSEHOLD	PERCENT OF CHILDREN (0-5) WHO LIVE IN A GRANDPARENT'S HOUSEHOLD
<b>Pascua Yaqui Tribe Region</b>	<b>470</b>	<b>225</b>	<b>48%</b>
All Arizona Reservations	20,511	8,239	40%
Pima County	74,796	10,346	14%
Arizona	546,609	74,153	14%
United States	24,258,220	2,867,165	12%

Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P41

Table 13. Grandparents responsible for grandchildren (ages 0-17) living with them

GEOGRAPHY	GRANDCHILDREN UNDER 18 LIVING WITH GRANDPARENT HOUSEHOLDER	PERCENT OF GRANDCHILDREN UNDER 18 LIVING WITH A GRANDPARENT HOUSEHOLDER WHO IS RESPONSIBLE FOR THEM
<b>Pascua Yaqui Tribe Region</b>	<b>531</b>	<b>66%</b>
All Arizona Reservations	18,864	55%
Pima County	19,407	52%
Arizona	147,707	51%
United States	5,781,786	49%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B10002

Note: This table includes both grandchildren living with grandparents with no parent present and grandchildren who live in multigenerational homes where the grandparent has assumed responsibility for the child, despite the presence of a parent.

## Economic Circumstances

### Why it Matters

A family’s economic stability is a powerful predictor of child well-being and is one of the key social determinants of health.<sup>38</sup> Factors contributing to economic stability—or lack thereof—include **poverty, food insecurity, employment, and housing instability.**<sup>39</sup>

Economic circumstances in tribal communities can be much more complex than in other parts of the state. For many historical and legal reasons, economic development in tribal areas has followed a different trajectory than in other areas. Economic disparities between non-Native and Native communities have compounded over decades, affecting the poverty, employment, housing instability and food security in tribal areas.<sup>40</sup> At the same time, it is common for tribal governments to be involved in community and economic development, investing in forestry, fisheries, gaming, and many other economic arenas to strengthen the social and economic conditions of their people.<sup>41</sup>

**Poverty.** Childhood poverty can negatively affect the way children’s bodies grow and develop, including fundamental changes to the architecture of the brain.<sup>42</sup> Children raised in poverty are at a greater risk of a host of negative outcomes including low birth weight, lower school achievement, and poor health.<sup>43,44,45,46,47</sup> They are also more likely to remain poor later in life.<sup>48,49</sup> As a benchmark, the 2019 Federal Poverty Guideline—the criterion used for establishing eligibility for some safety net programs—for a family of four was \$25,750.<sup>50</sup> However the federal poverty guideline definition of poverty was developed in the 1950s, and estimates only what a family would need to earn to afford basic nutrition, without taking into account other costs of living,<sup>51</sup> it is widely considered to be well below what a family actually needs to earn to make ends meet.<sup>52</sup> The “self-sufficiency standard” attempts to estimate how much families need to earn to fully support themselves, accounting for local costs of housing, transportation, and childcare, and other budget items.<sup>53</sup> The 2018 self-sufficiency standard for an Arizona family with two adults, one preschooler, and one school-age child was \$56,143—over twice the poverty threshold.<sup>54</sup>

Public assistance programs are one way of counteracting the effects of poverty and providing supports to children and families in need. The Temporary Assistance for Needy Families (TANF) Cash Assistance program provides temporary cash benefits and support services to children and families. Eligibility is based on citizenship or qualified resident status, Arizona residency, and limits on resources and monthly income. In recognition of tribal sovereignty, federally-recognized tribes have the option to administer their own TANF program. The Pascua Yaqui Tribe is one of the six Arizona tribes that operate a Tribal TANF program. Since tribes set their own priorities for their communities and many design their own social services, some Tribal

TANF program requirements may differ 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 to meet the needs of their own communities. With a focus on self-sufficiency, tribal TANF programs can include community and social programs that are unique to their spiritual and cultural traditions.<sup>55</sup>

**Food insecurity.** A limited or uncertain availability of food is negatively associated with many markers of health and well-being for children, including heightened risks for developmental delays,<sup>56</sup> and overweight and obesity.<sup>57</sup> The USDA defines food deserts as areas that are low-income and have low access to sources of healthy food, specifically grocery stores and supermarkets.<sup>58</sup> A large portion of tribal lands in Arizona are in food deserts, adding to food insecurity in tribal communities.<sup>59</sup> Sixty-five percent of populated tribal lands are considered food deserts, whereas only 17 percent of all populated areas in Arizona meet the definition of a food desert.<sup>60</sup> To help reduce food insecurity, there are a variety of federally-funded programs including the Supplemental Nutrition Assistance Program (SNAP),<sup>61</sup> the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC),<sup>62</sup> the National School Lunch Program,<sup>63</sup> the School Breakfast Program,<sup>64</sup> the Summer Food Service Program,<sup>65</sup> and the Child and Adult Care Food Program (CACFP).<sup>66</sup> However, only about 58 percent of food insecure households nationwide report participating in federally-funded nutrition assistance programs.<sup>67</sup> Income-eligible American Indians residing on some reservations in Arizona may have access to the federal Food Distribution Program on Indian Reservations (FDPIR).<sup>68</sup> On rural Indian reservations, the FDPIR exists to distribute food to eligible Native residents who do not have access to SNAP offices or SNAP-approved businesses.<sup>69</sup>

**SNAP.** Administered by the Arizona Department of Economic Security and also referred to as “Nutrition Assistance” and “food stamps,” SNAP has been shown to help reduce hunger and improve access to healthier food.<sup>70</sup> SNAP benefits support working families whose incomes simply do not provide for all their needs. For low-income working families, the additional funds available to access food from SNAP can help make a meaningful difference. For example, for a three-person family with one person who earns a minimum wage, SNAP benefits can boost take-home income by 10-20 percent.<sup>71</sup>

**WIC.** Administered by the Arizona Department of Health Services, this federally-funded program serves pregnant, postpartum, and breastfeeding women, as well as infants and young children (under the age of five) who are economically disadvantaged (i.e., family incomes at or below 185 percent of the federal poverty level). The program offers funds for nutritious food, breastfeeding and nutrition education, and referrals to health and social services.<sup>72</sup>

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<sup>v</sup> Low access is defined differently for urban (within ½-1 mile) and rural areas (within 10-20 miles).

Participation in WIC has been shown to be associated with healthier births, lower infant mortality, improved nutrition, decreased food insecurity, improved access to health care, and improved cognitive development and academic achievement for children.<sup>73</sup>

*National School Lunch Program.* Administered by the Arizona Department of Education, the National School Lunch Program provides free and reduced-price meals at school for students whose family incomes are at or less than 130 percent of the federal poverty level for free lunch, and 185 percent of the federal poverty level for reduced price lunch.

**Employment.** Unemployment and underemployment can affect a family’s ability to meet the expenses of daily living, as well as their access to resources needed to support their children’s well-being and healthy development. A parent’s job loss can affect children’s school performance, leading to poorer attendance, lower test scores, and higher risk of grade repetition, suspension, or expulsion.<sup>74</sup> Unemployment can also put families at greater risk for stress, family conflict, and homelessness.<sup>75</sup> Note that this does not include persons who have dropped out of the labor force entirely, including those who wanted to but could not find suitable work and thus have stopped looking for employment.<sup>76</sup> Due to many historical and legal reasons as well as differences in practical economic structures, employment rates in Native communities can vary greatly from state rates.<sup>77</sup>

**Housing instability.** Examining indicators related to housing quality, costs, and availability can reveal additional factors affecting the health and well-being of young children and their families in a region. Housing challenges such as issues paying rent or mortgage, overcrowded living conditions, unstable housing arrangements, and homelessness can have harmful effects on the physical, social-emotional, and cognitive development of young children.<sup>78</sup> Traditionally, housing has been deemed affordable for a family if it costs less than 30 percent of their annual income.<sup>79</sup> High housing costs, relative to family income, are associated with increased risk for overcrowding, frequent moving, poor nutrition, declines in mental health, and homelessness.<sup>80,81</sup> On tribal lands, even when housing is affordable, housing *availability* is typically lower due to the legal complexities of land ownership and the lack of rental properties. These circumstances often lead to a shortage of safe, quality housing.<sup>82</sup>

One increasingly critical need for modern homes is a reliable means of internet access. Families often rely on communication and information technologies to access information, connect socially, pursue an education, and apply for employment opportunities. Parents are also more likely to turn to online resources, rather than in-person resources, for information about obtaining health care and sensitive parenting topics including bonding, separation anxiety, and managing parenting challenges.<sup>83</sup> The term “digital divide” refers to disparities in communication and information technologies,<sup>84</sup> and the lack of sustained access to information and communication technologies in low-income communities is associated with economic and

social inequality.<sup>85</sup> Low-income households may experience regular disruptions to this increasingly important service when they cannot pay bills, repair or update equipment, or access public locations that may offer connectivity (e.g., computers at local libraries).<sup>86</sup> Nationally, Americans are increasingly reliant on smartphones as their sole source of internet access. Particularly for individuals who are younger, lower-income, and non-white, broadband service at home is less common and smartphone-only internet use is more common.<sup>87</sup> Households in rural areas typically experience more limited coverage from mobile networks and slower-speed internet services, as well as limited internet provider options which can result in higher monthly costs.<sup>88,89,90</sup> This is especially true of the more rural Native American communities in the state, where broadband services are sometimes non-existent.<sup>91, 92</sup>

## What the Data Tell Us

### Poverty

- More than half (56%) of young children (ages 0-5) in the Pascua Yaqui Tribe Region live in poverty. This proportion is similar to that of all Arizona reservations combined (54%) but substantially higher than the state (26%). There is a similar pattern in the percentages of all residents living in poverty in the region (43%), all Arizona reservations (40%), and the state (17%) (Figure 3).
- The median income for all families in the region is \$29,387, much lower than in Pima County (\$60,790), and the state of Arizona (\$63,812). Single parent-headed families with children (ages 0-17) have a median income that is about one-third of the income in married-couple families (Table 14).
- Eligibility for some public assistance programs is determined by different poverty thresholds. For example, family income at or below 141 percent of the federal poverty threshold is one criterion for eligibility for the Arizona Health Care Cost Containment System (AHCCCS)<sup>vi</sup> for children ages 1 to 5, and at or below 147 percent of the poverty threshold for children under 1 year old.<sup>93</sup> In the Pascua Yaqui Tribe Region, the percentage of families with young children who may qualify for AHCCCS is substantially higher than in the state (38%) and higher than in all Arizona reservations combined (67%) (Table 15).
- In fiscal year 2018, 98 young children in the Pascua Yaqui Tribe Region participated in the Temporary Assistance for Needy Families (TANF) program; this number represents an estimated 21 percent of all young children in the region, a proportion that is substantially higher than in Pima County (5%) and the state (3%) (Table 17).

### Food Insecurity

- The number of families with young children participating in the Supplemental Nutrition Assistance Program (SNAP) remained stable in the Pascua Yaqui Tribe Region between 2016 and 2018, after a decline from 262 in fiscal year 2015 to 228 in fiscal year 2016. The proportion of young children participating in SNAP in 2018 was much higher in the region (77%) than in Pima County (44%) and Arizona (42%) (Table 18 & Table 19).
- Between the 2015-2016 and 2018-2019 school years, the percent of students in the Pascua Yaqui Tribe Region who qualified for free or reduced-price lunches ranged from 90 to 100 percent, with 90 percent qualified in the 2018-2019 school year. This proportion is notably higher than the proportion at the state-level (56%) (Table 20).

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<sup>vi</sup> AHCCCS is Arizona's Medicaid agency

## Employment

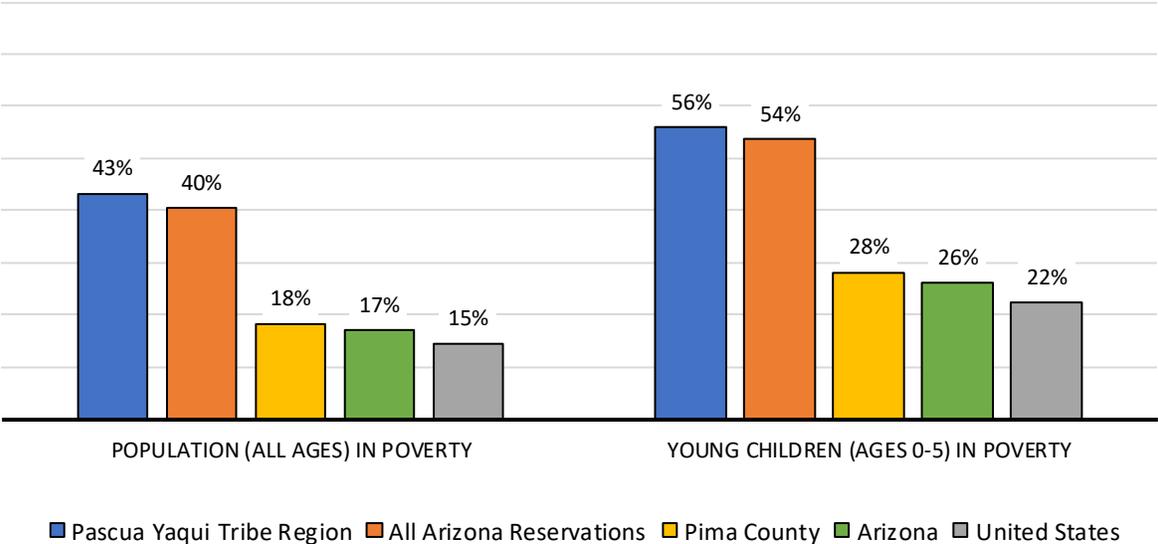
- Seventy-six percent of young children in the Pascua Yaqui Tribe Region live in families with at least one parent in the labor force, compared to 67 percent in all Arizona reservations combined and 89 percent in the state. The proportion of children in the region who live with only one parent and such parent is not in the labor force is lower in the region compared to all Arizona reservations (23% and 31%, respectively) (Table 21).
- The average unemployment rate in the region for the 2013-2017 period was 13 percent, slightly higher than the estimated ten percent in all Arizona reservations combined, and three times the average state rate of four percent. Nevertheless, in the Pascua Yaqui Tribe Region a higher proportion of the population is employed (46%) and a lower proportion is not in the labor force (i.e. they are neither employed nor looking for work) (41%) compared to all Arizona reservations (37% and 54%, respectively) (Table 22).

## Housing Instability

- Twenty-four percent of households in the region spend 30 percent or more of their income on housing-related costs. This percentage is higher than in all Arizona reservations (16%) but lower than in Pima County (33%) and the state (31%) (Table 24).
- About one-third (35%) of households in the region have both a smartphone and computer, which is slightly higher than all Arizona reservations (30%) and notably lower than the state of Arizona (67%) (Table 25).
- A substantially higher proportion of residents in the Pascua Yaqui Tribe Region live in households with both a computer and internet connectivity compared to all Arizona reservations (70% vs 38%). The region's percentage, however, is lower than in the state (82%). A similar pattern is present in the percentage of children (ages 0-17) living in households with a computer and internet connectivity for the region (74%), all Arizona reservations (41%), and the state overall (83%) (Table 26 & Table 27).
- Of people living in households with a computer and internet in the region, nearly half (48%) rely solely on a cellular data plan (Table 28).

**Poverty**

Figure 3. Percent of population (all ages) and young children (ages 0-5) living in poverty



Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B17001

Table 14. Median annual family income

GEOGRAPHY	MEDIAN INCOME FOR ALL FAMILIES	MEDIAN INCOME FOR MARRIED-COUPLE FAMILIES WITH CHILDREN (0-17)	MEDIAN INCOME FOR FAMILIES WITH CHILDREN (0-17), SINGLE MALE HEAD	MEDIAN INCOME FOR FAMILIES WITH CHILDREN (0-17), SINGLE FEMALE HEAD
<b>Pascua Yaqui Tribe Region</b>	<b>\$29,387</b>	<b>\$58,167</b>	<b>\$18,977</b>	<b>\$17,969</b>
Pima County	\$60,790	\$77,109	\$37,397	\$24,894
Arizona	\$63,812	\$80,533	\$38,650	\$26,907
United States	\$70,850	\$91,621	\$41,054	\$26,141

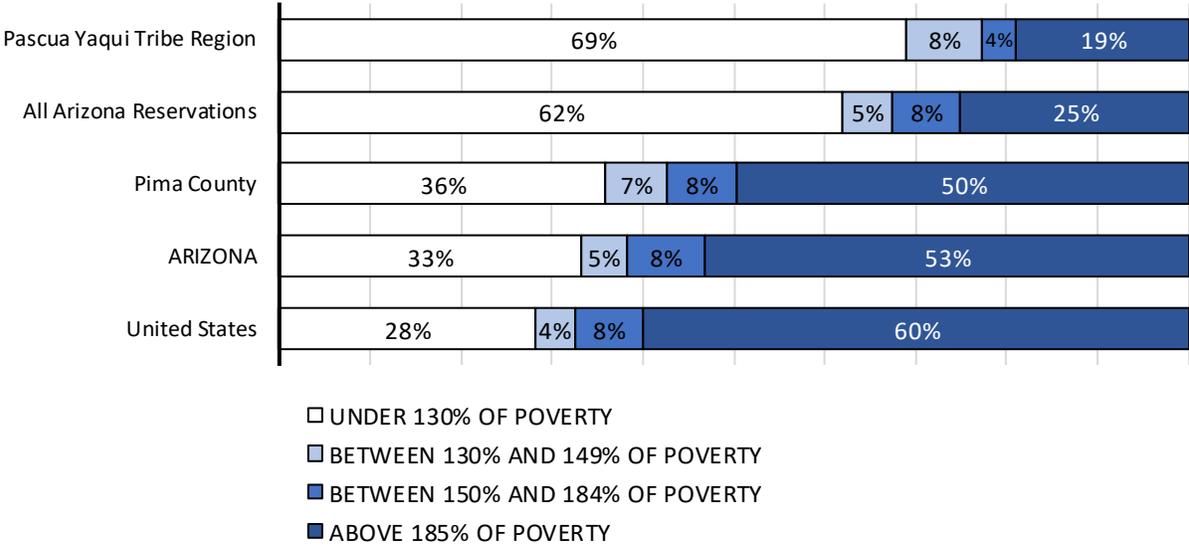
Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B19126

Table 15. Families with young children (ages 0-5) living at various poverty thresholds

GEOGRAPHY	TOTAL NUMBER OF FAMILIES WITH YOUNG CHILDREN (AGES 0-5)	PERCENT OF FAMILIES WITH YOUNG CHILDREN (AGES 0-5) UNDER 130% OF POVERTY	PERCENT OF FAMILIES WITH YOUNG CHILDREN (AGES 0-5) BETWEEN 130% AND 149% OF POVERTY	PERCENT OF FAMILIES WITH YOUNG CHILDREN (AGES 0-5) BETWEEN 150% AND 184% OF POVERTY	PERCENT OF FAMILIES WITH YOUNG CHILDREN (AGES 0-5) ABOVE 185% OF POVERTY
<b>Pascua Yaqui Tribe Region</b>	<b>242</b>	<b>69%</b>	<b>8%</b>	<b>4%</b>	<b>19%</b>
All Arizona Reservations	8,812	62%	5%	8%	25%
Pima County	42,302	36%	7%	8%	50%
Arizona	295,926	33%	5%	8%	53%
United States	13,951,604	28%	4%	8%	60%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Tables B17001 & B17022  
 Note: Poverty refers to the poverty threshold used by the U.S. Census Bureau to determine whether or not a family lives in poverty based on their income. In 2017, the most recent year of ACS data used in this report, the poverty threshold for a family of four was \$24,848. For more information about poverty thresholds, see <https://www.census.gov/topics/income-poverty/poverty/guidance/poverty-measures.html>

Figure 4. Families with young children (ages 0-5) living at various poverty thresholds



Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Tables B17001 & B17022

Table 16. Families participating in the TANF program, fiscal years 2015 to 2018

GEOGRAPHY	HOUSEHOLDS WITH ONE OR MORE CHILDREN (AGES 0-5)	NUMBER OF FAMILIES PARTICIPATING IN TANF				PERCENT OF HOUSEHOLDS WITH YOUNG CHILDREN (0-5) PARTICIPATING IN TANF IN 2018
		FY 2015	FY 2016	FY 2017	FY 2018	
<b>Pascua Yaqui Tribe Region</b>	<b>287</b>	<b>51 to 59</b>	<b>35 to 43</b>	<b>48 to 56</b>	<b>53 to 61</b>	<b>DS</b>
Pima County	53,862	3,237	3,137	3,108	2,724	5%
Arizona	384,441	18,165	16,399	14,188	12,042	3%

Sources: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P20 & Arizona Department of Economic Security, Division of Benefits and Medical Eligibility (2019). Unpublished data received by request.

Table 17. Children participating in the TANF program, fiscal years 2015 to 2018

GEOGRAPHY	NUMBER OF YOUNG CHILDREN (AGES 0-5)	NUMBER OF CHILDREN PARTICIPATING IN TANF				PERCENT OF YOUNG CHILDREN (0-5) PARTICIPATING IN TANF IN 2018
		FY 2015	FY 2016	FY 2017	FY 2018	
<b>Pascua Yaqui Tribe Region</b>	<b>470</b>	<b>80 to 88</b>	<b>56 to 64</b>	<b>90</b>	<b>98</b>	<b>21%</b>
Pima County	74,796	4,111	4,080	4,177	3,763	5%
Arizona	546,609	23,862	22,326	19,614	16,634	3%

Sources: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P20 & Arizona Department of Economic Security, Division of Benefits and Medical Eligibility (2019). Unpublished data received by request.

## Food Insecurity

Table 18. Families participating in the SNAP program, fiscal years 2015 to 2018

GEOGRAPHY	HOUSEHOLDS WITH ONE OR MORE CHILDREN (AGES 0-5)	NUMBER OF FAMILIES PARTICIPATING IN SNAP				PERCENT OF HOUSEHOLDS WITH YOUNG CHILDREN (0-5) PARTICIPATING IN SNAP IN 2018
		FY 2015	FY 2016	FY 2017	FY 2018	
<b>Pascua Yaqui Tribe Region</b>	<b>287</b>	<b>262</b>	<b>228</b>	<b>235</b>	<b>228</b>	<b>79%</b>
Pima County	53,862	26,111	24,966	24,382	22,604	42%
Arizona	384,441	179,988	172,014	164,092	151,819	39%

Sources: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P20 & Arizona Department of Economic Security, Division of Benefits and Medical Eligibility (2019). Unpublished data received by request.

Table 19. Children participating in the SNAP program, fiscal years 2015 to 2018

GEOGRAPHY	NUMBER OF YOUNG CHILDREN (AGES 0-5) IN THE POPULATION	NUMBER OF CHILDREN PARTICIPATING IN SNAP				PERCENT OF YOUNG CHILDREN (0-5) PARTICIPATING IN SNAP IN 2018
		FY 2015	FY 2016	FY 2017	FY 2018	
<b>Pascua Yaqui Tribe Region</b>	<b>470</b>	<b>391</b>	<b>374</b>	<b>385</b>	<b>362</b>	<b>77%</b>
Pima County	74,796	35,113	36,500	35,650	33,142	44%
Arizona	546,609	249,707	258,556	247,418	229,291	42%

Sources: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Table P20 & Arizona Department of Economic Security, Division of Benefits and Medical Eligibility (2019). Unpublished data received by request.

Table 20. Students (all grades) eligible for free or reduced-price lunch, 2015-16 to 2018-19

GEOGRAPHY	STUDENTS ELIGIBLE FOR FREE OR REDUCED-PRICE LUNCH (2015-16)	STUDENTS ELIGIBLE FOR FREE OR REDUCED-PRICE LUNCH (2016-17)	STUDENTS ELIGIBLE FOR FREE OR REDUCED-PRICE LUNCH (2017-18)	STUDENTS ELIGIBLE FOR FREE OR REDUCED-PRICE LUNCH (2018-19)
<b>Pascua Yaqui Tribe Region</b>	<b>95%</b>	<b>92%</b>	<b>100%</b>	<b>90%</b>
Pima County	59%	58%	56%	55%
Arizona	58%	57%	57%	56%

Source: Arizona Department of Education (2019). 2015-16 to 2018-19 Free & Reduced-Price Lunch Data. Custom tabulation of eligibility data.

## Employment

Table 21. Parents of young children (ages 0-5) who are or are not in the labor force

GEOGRAPHY	TOTAL NUMBER OF CHILDREN (AGES 0-5) LIVING IN FAMILIES or SUBFAMILIES	WITH TWO PARENTS, BOTH IN LABOR FORCE	WITH TWO PARENTS, ONE IN LABOR FORCE AND ONE NOT	WITH TWO PARENTS, NEITHER IN LABOR FORCE	WITH ONE PARENT, IN LABOR FORCE	WITH ONE PARENT, NOT IN LABOR FORCE
<b>Pascua Yaqui Tribe Region</b>	<b>426</b>	<b>6%</b>	<b>4%</b>	<b>1%</b>	<b>66%</b>	<b>23%</b>
All Arizona Reservations	16,902	13%	14%	3%	40%	31%
Pima County	67,537	32%	26%	1%	33%	8%
Arizona	498,102	31%	29%	1%	29%	10%
United States	22,939,897	38%	26%	1%	27%	8%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B23008

Note: The labor force includes all persons who are currently employed, including those on leave, furlough, or temporarily laid off. Persons who are unemployed but actively looking for work are also considered to be in the labor force. Persons who are not working or looking for work (e.g., retired persons, stay-at-home parents, students) are considered to be "not in the labor force" in the American Community Survey.

Table 22. Adult population (ages 16 and older) who are employed, unemployed, or not in the labor force

GEOGRAPHY	TOTAL POPULATION (AGES 16 AND OLDER)	PERCENT WHICH IS EMPLOYED	PERCENT WHICH IS UNEMPLOYED	PERCENT WHICH IS NOT IN THE LABOR FORCE
<b>Pascua Yaqui Tribe Region</b>	<b>2,572</b>	<b>46%</b>	<b>13%</b>	<b>41%</b>
All Arizona Reservations	136,081	37%	10%	54%
Pima County	814,161	54%	5%	41%
Arizona	5,371,341	55%	4%	40%
United States	255,797,692	59%	4%	37%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B23025

Note: The labor force includes all persons who are currently employed, including those on leave, furlough, or temporarily laid off. Persons who are unemployed but actively looking for work are also considered to be in the labor force. Persons who are not working or looking for work (e.g., retired persons, stay-at-home parents, students) are considered to be "not in the labor force" in the American Community Survey.

Table 23. Annual unemployment rates, not seasonally adjusted, 2015 to 2018

GEOGRAPHY	ANNUAL UNEMPLOMENT RATE, 2015	ANNUAL UNEMPLOMENT RATE, 2016	ANNUAL UNEMPLOMENT RATE, 2017	ANNUAL UNEMPLOMENT RATE, 2018
Pima County	6.0%	5.0%	5.0%	5.0%
Arizona	6.1%	5.4%	4.9%	4.8%

Source: Arizona Labor Statistics (2019). Local Area Unemployment Statistics (LAUS). Retrieved from <https://laborstats.az.gov/local-area-unemployment-statistics>

## Housing Instability

Table 24. Households who are paying thirty percent or more of their income for housing

GEOGRAPHY	TOTAL NUMBER OF OCCUPIED HOUSING UNITS	PERCENT OF HOUSING UNITS FOR WHICH HOUSING COSTS 30% OF INCOME OR MORE
<b>Pascua Yaqui Tribe Region</b>	<b>916</b>	<b>24%</b>
All Arizona Reservations	49,638	16%
Pima County	398,530	33%
Arizona	2,482,311	31%
United States	118,825,921	32%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B25106

Table 25. Households with and without computers and smartphones

GEOGRAPHY	TOTAL NUMBER OF HOUSEHOLDS	PERCENT WITH COMPUTER (BUT NO SMARTPHONE)	PERCENT WITH SMARTPHONE (BUT NO COMPUTER)	PERCENT WITH BOTH SMARTPHONE AND COMPUTER	PERCENT WITH NEITHER SMARTPHONE NOR COMPUTER
<b>Pascua Yaqui Tribe Region</b>	<b>916</b>	<b>6%</b>	<b>32%</b>	<b>35%</b>	<b>27%</b>
All Arizona Reservations	49,638	9%	14%	30%	47%
Pima County	398,530	13%	10%	66%	11%
Arizona	2,482,311	12%	9%	67%	12%
United States	118,825,921	12%	9%	66%	13%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table 28010

Note: In this table, "computer" includes both desktops and laptops

Table 26. Persons (all ages) in households with and without computers and internet connectivity

GEOGRAPHY	NUMBER OF PERSONS (ALL AGES) LIVING IN HOUSEHOLDS	PERCENT IN HOUSEHOLDS WITH COMPUTER AND INTERNET	PERCENT IN HOUSEHOLDS WITH COMPUTER BUT NO INTERNET	PERCENT IN HOUSEHOLDS WITHOUT COMPUTER
<b>Pascua Yaqui Tribe Region</b>	<b>3,851</b>	<b>70%</b>	<b>9%</b>	<b>20%</b>
All Arizona Reservations	185,192	38%	21%	40%
Pima County	978,363	85%	8%	7%
Arizona	6,656,124	82%	9%	9%
United States	312,916,765	83%	9%	9%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B28005

Table 27. Children (ages 0-17) in households with and without computers and internet connectivity

GEOGRAPHY	NUMBER OF CHILDREN (AGES 0-17) LIVING IN HOUSEHOLDS	PERCENT IN HOUSEHOLDS WITH COMPUTER AND INTERNET	PERCENT IN HOUSEHOLDS WITH COMPUTER BUT NO INTERNET	PERCENT IN HOUSEHOLDS WITHOUT COMPUTER
<b>Pascua Yaqui Tribe Region</b>	<b>1,450</b>	<b>74%</b>	<b>9%</b>	<b>17%</b>
All Arizona Reservations	57,156	41%	24%	35%
Pima County	217,245	87%	8%	4%
Arizona	1,619,346	83%	10%	8%
United States	73,392,369	85%	9%	5%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B28005

Table 28. Households by type of internet access (broadband, cellular data, and dial-up)

GEOGRAPHY	PEOPLE LIVING IN HOUSEHOLDS WITH COMPUTER AND INTERNET (ALL AGES)	PERCENT WITH FIXED BROADBAND WITH CELLULAR DATA PLAN	PERCENT WITH FIXED BROADBAND WITHOUT CELLULAR DATA PLAN	PERCENT WITH CELLULAR DATA PLAN, WITHOUT FIXED BROADBAND	PERCENT WITH DIAL-UP INTERNET ONLY
<b>Pascua Yaqui Tribe Region</b>	<b>2,709</b>	<b>43%</b>	<b>9%</b>	<b>48%</b>	<b>0%</b>
All Arizona Reservations	71,139	29%	42%	25%	3%
Pima County	830,898	56%	31%	12%	1%
Arizona	5,475,311	54%	35%	10%	1%
United States	258,531,929	55%	35%	10%	1%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table 28008

Note: According to the American Community Survey, fixed broadband is defined as high speed Internet service such as cable, fiber optic, or DSL. Cellular data plans refer to data plans for smartphones or other mobile devices. Dial-up Internet works through public telephone networks, and transfer speeds are much slower than broadband connections.

## Educational Indicators

### Why it Matters

Measures of educational engagement and achievement in a community have important implications for the developmental and economic resources available to children and families in that region. Individuals with higher levels of education tend to live longer and healthier lives.<sup>94</sup> Indicators such as school attendance and absenteeism, achievement on standardized testing, high school graduation rates, and adult educational attainment can provide valuable information about a region's educational engagement and success. Early learning can set the stage for future educational achievement, and is discussed more fully in the following section.

**School attendance and absenteeism.** School attendance and academic engagement early in life can significantly impact the direction of a child's schooling trajectory. Chronic absenteeism is defined as missing more than 10 percent of the school days within a school year, and it affects even the youngest children, with more than 10 percent of U.S. kindergarteners and first graders considered chronically absent.<sup>95</sup> Poor school attendance can cause children to fall behind, leading to lower proficiency in reading and math and increased risk of not being promoted to the next grade.<sup>96</sup> Consistent school attendance is particularly important for children from economically disadvantaged backgrounds, the group of children most at risk for chronic absenteeism.<sup>97,98</sup>

**Achievement on standardized testing.** A child's third-grade reading comprehension skills have been identified as a critical indicator of future academic success.<sup>99</sup> Students who are at or above grade level reading in third grade are more likely to go on to graduate high school and attend college.<sup>100</sup> The link between poor reading skills and risk of dropping out of high school is even stronger for children living in poverty. More than a quarter (26%) of children who were living in poverty and not reading proficiently in third grade did not finish high school. This is more than six times the high school dropout rate of proficient readers.<sup>101</sup>

In 2010, the Arizona legislature, recognizing the importance of early identification and targeted intervention for struggling readers, enacted *Move on When Reading* legislation. As of 2015, the statewide assessment tool for English language arts (ELA), including reading and writing, is Arizona's Measurement of Education Readiness to Inform Teaching (AzMERIT).<sup>vii,102</sup> AzMERIT scores are used to determine promotion from the third grade in accordance with the *Move on When Reading* policy. *Move on When Reading* legislation states that a student shall not be promoted to fourth grade if their reading score falls far below the third-grade level, as established by the State Board of Education.<sup>103</sup> Exceptions exist for students identified with or

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<sup>vii</sup> AzMERIT was renamed AzM2, a change that will take effect during the 2019-2020 school year.

being evaluated for learning disabilities and/or reading impairments, English language learners, and those who have demonstrated reading proficiency on alternate forms of assessment approved by the State Board of Education.

**Graduation rates and adult educational attainment.** Ultimately, adult educational attainment speaks to the assets and challenges of a community's workforce, including those who are working with or on behalf of young children and their families. Adults who have graduated from high school have better health and financial stability, lower risk for incarceration, and better socio-emotional outcomes compared to adults who dropped out of high school.<sup>104,105</sup> Children whose parents have higher levels of education are more likely to have positive outcomes related to school readiness and educational achievement, promoting academic success across generations.<sup>106</sup> Given the cascading effect of early education on later academic achievement and success in adulthood, it is critical to provide substantial support for early education and promote policies and programs that encourage the persistence and success of Arizona's children.

## What the Data Tell Us

### School Attendance and Absenteeism

- There are no schools within the boundaries of the Pascua Yaqui Tribe Region that serve elementary and middle school-age children. Children from the community attend a variety of schools most of which are part of the Tucson Unified School District (TUSD) (see Appendix 3). In the 2013-2014 school year, the district school with the greatest number of students from the Pascua Yaqui Tribe was Lawrence 3-8 School, with 238 students, followed by Johnson Elementary School (160 students). The middle schools with the largest Pascua Yaqui student enrollment were Valencia Middle School (56) and Pistor Middle School (49).<sup>107</sup>

### Achievement on Standardized Testing

- According to the 2018 Pascua Yaqui Tribe Regional Needs and Assets Report, data for the 2015 Arizona's Measurement of Educational Readiness to Inform Teaching (AzMERIT) test of third graders show that, similar to student performance across the state, fewer than half of the students at some of the schools that Pascua Yaqui children attend met or exceeded the desired math or reading level, a pattern that was also evident for TUSD as a whole<sup>108</sup> (Table 33).

### Graduation Rates and Adult Educational Attainment

- Educational attainment among adults 25 and older in the Pascua Yaqui Tribe Region is somewhat lower than in all Arizona reservations combined. One-third (33%) of adults in the region have more than a high school education compared to 38 percent in all Arizona reservations. Both of these percentages, however, are substantially lower than those in the Pima County (66%) and Arizona (62%) (Figure 5).
- Youth from the Pascua Yaqui Tribe Region attend Tucson Magnet High School (113 students from the region), Cholla High Magnet School (108 students from the region), and Pueblo Communication Arts Magnet High School (48 students from the region).
- The only school within the regional boundaries is Hiaki High School, which in the 2014-2015 academic year had 96 students enrolled.<sup>109</sup> In 2017, the four-year graduation rate at Hiaki High School was 58 percent, and 70 percent for the five-year graduation rate. The dropout rate in that same year was 28 percent (Table 35).
- In 2017, over one-quarter (27%) of the 60 births in the region were to mothers with more than high-school education, a proportion that is about half of that in Pima County (57%) and the state (56%) (Table 39).

## School Attendance and Absenteeism

Table 29. Students enrolled in ADE preschool through 3rd grade, 2018-19

GEOGRAPHY	PRESCHOOL	KINDERGARTEN	1ST GRADE	2ND GRADE	3RD GRADE
Pima County	3,027	10,203	10,414	10,587	10,771
Arizona	21,238	79,990	81,913	81,951	83,037

Source: Arizona Department of Education (2019). 2018-19 October 1 Enrollments. Custom tabulation of enrollment data facilitated by state agency staff.

Table 30. Chronic absence rates, Kindergarten through 3rd grade, 2015-16 to 2018-19

GEOGRAPHY	CHRONIC ABSENCE RATE (2015-16)	CHRONIC ABSENCE RATE (2016-17)	CHRONIC ABSENCE RATE (2017-18)	CHRONIC ABSENCE RATE (2018-19)
Pima County	12%	12%	13%	14%
Arizona	9%	10%	11%	12%

Source: Arizona Department of Education (2019). 2015-16 to 2018-19 Chronic Absenteeism Data. Unpublished data received by request.

Note: The definition of chronic absenteeism used in this table includes children who are absent due to chronic illness

Table 31. Chronic absence rates, Kindergarten through 3rd grade, 2018-19

GEOGRAPHY	TOTAL STUDENTS	STUDENTS WITH CHRONIC ABSENCES	CHRONIC ABSENCE RATE
Pima County	51,272	7,273	14%
Arizona	402,206	46,482	12%

Source: Arizona Department of Education (2019). 2018-19 Chronic Absenteeism Data. Unpublished data received by request.

Note: The definition of chronic absenteeism used in this table includes children who are absent due to chronic illness

Table 32. Chronic absence rates for students by grade (Grade K-3), 2018-19

GEOGRAPHY	CHRONIC ABSENCE RATE (KINDERGARTEN)	CHRONIC ABSENCE RATE (1ST GRADE)	CHRONIC ABSENCE RATE (2ND GRADE)	CHRONIC ABSENCE RATE (3RD GRADE)
Pima County	10%	17%	16%	14%
Arizona	13%	12%	11%	10%

*Source: Arizona Department of Education (2019). 2015-16 to 2018-19 Chronic Absenteeism Data. Unpublished data received by request.*

*Note: The definition of chronic absenteeism used in this table includes children who are absent due to chronic illness*

## Achievement on Standardized Testing

Table 33. AzMERIT Math third-grade achievement levels for selected schools in the Tucson Unified School District attended by children from the Pascua Yaqui Tribe Region, 2015

	MINIMALLY PROFICIENT	PARTIALLY PROFICIENT	PROFICIENT	HIGHLY PROFICIENT	PASSING
Anna Lawrence Intermediate School	30%	36%	23%	11%	33%
Frances J. Warren Elementary School	38%	31%	29%	2%	31%
John E. White Elementary School	30%	21%	35%	14%	49%
Vesey Elementary School	50%	29%	17%	4%	21%
All TUSD Schools	36%	30%	25%	9%	34%
All Arizona Schools	28%	31%	29%	13%	41%

Source: *First Things First. (2018). Pascua Yaqui Tribe Regional Partnership Council 2018 Needs and Assets Report.*

Note: The percentages above may not add to 100% due to rounding. "Passing" is the percentage of students who are either "Proficient" or "Highly Proficient."

Table 34. AzMERIT English Language Arts third-grade achievement levels for selected schools in the Tucson Unified School District attended by children from the Pascua Yaqui Tribe Region, 2015

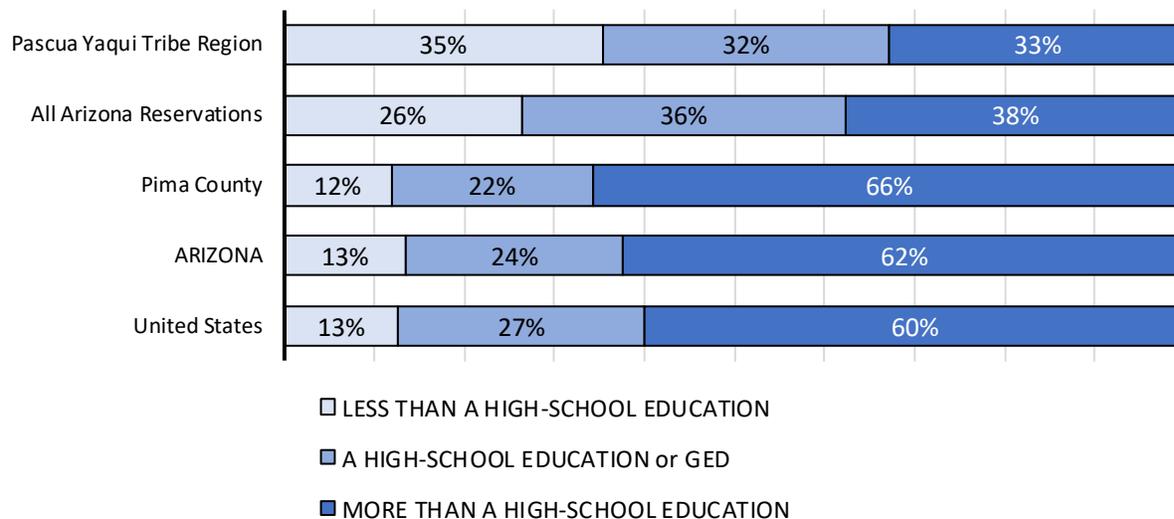
	MINIMALLY PROFICIENT	PARTIALLY PROFICIENT	PROFICIENT	HIGHLY PROFICIENT	PASSING
Anna Lawrence Intermediate School	64%	20%	15%	2%	17%
Frances J. Warren Elementary School	38%	31%	24%	7%	31%
John E. White Elementary School	35%	21%	38%	7%	44%
Vesey Elementary School	60%	18%	21%	2%	24%
All TUSD Schools	52%	16%	25%	7%	32%
All Arizona Schools	44%	16%	30%	10%	40%

Source: *Arizona Department of Education, received from First Things First*

Note: The percentages above may not add to 100% due to rounding. "Passing" is the percentage of students who are either "Proficient" or "Highly Proficient."

## Graduation Rates and Adult Educational Attainment

Figure 5. Level of education for the adult population (ages 25 and older)



Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B15002

Table 35. High school graduation and dropout rates, 2017

GEOGRAPHY	FOUR-YEAR SENIOR COHORT	FOUR-YEAR GRADUATES	FOUR-YEAR GRADUATION RATE	FIVE-YEAR GRADUATES	FIVE-YEAR GRADUATION RATE	DROPOUT RATE (7TH TO 12TH GRADES)
<b>Pascua Yaqui Tribe Region</b>	<b>26</b>	<b>15</b>	<b>58%</b>	<b>16</b>	<b>70%</b>	<b>28%</b>
Pima County	11,297	8,342	74%	9,124	80%	5%
Arizona	84,802	66,363	78%	70,178	82%	5%

Source: Arizona Department of Education (2019). Cohort 2017 Four Year Graduation Rate Data, Cohort 2017 Five Year Graduation Rate Data, and Dropout Rates 2017. Retrieved from <https://www.azed.gov/accountability-research/data/>  
 Note: The data on this table represent graduation and dropout rates from Envision High School (Hiaki High School) the only high school within the regional boundaries.

Table 36. Trends in four-year high school graduation rates, 2015 to 2017

GEOGRAPHY	FOUR-YEAR GRADUATION RATE (2015)	FOUR-YEAR GRADUATION RATE (2016)	FOUR-YEAR GRADUATION RATE (2017)
<b>Pascua Yaqui Tribe Region</b>	<b>DS</b>	<b>DS</b>	<b>58%</b>
Pima County	74%	78%	74%
Arizona	79%	80%	78%

Source: Arizona Department of Education (2019). Cohort 2014-2017 Four Year Graduation Rate Data. Retrieved from <https://www.azed.gov/accountability-research/data/>

Note: The data on this table represent graduation rates from Envision High School (Hiaki High School) the only high school within the regional boundaries.

Table 37. Trends in five-year high school graduation rates, 2015 to 2017

GEOGRAPHY	FIVE-YEAR GRADUATION RATE (2015)	FIVE-YEAR GRADUATION RATE (2016)	FIVE-YEAR GRADUATION RATE (2017)
<b>Pascua Yaqui Tribe Region</b>	<b>79%</b>	<b>DS</b>	<b>70%</b>
Pima County	77%	82%	80%
Arizona	82%	83%	82%

Source: Arizona Department of Education (2019). Cohort 2014-2017 Five Year Graduation Rate Data. Retrieved from <https://www.azed.gov/accountability-research/data/>

Note: The data on this table represent graduation rates from Envision High School (Hiaki High School) the only high school within the regional boundaries.

Table 38. Trends in 7th-12th grade dropout rates, 2015-16 to 2017-18

GEOGRAPHY	DROPOUT RATE (2015-16)	DROPOUT RATE (2016-17)	DROPOUT RATE (2017-18)
<b>Pascua Yaqui Tribe Region</b>	<b>19%</b>	<b>16%</b>	<b>28%</b>
Pima County	4%	5%	5%
Arizona	4%	5%	5%

Source: Arizona Department of Education (2019). Dropout Rates 2015-2018. Retrieved from <https://www.azed.gov/accountability-research/data/>

Note: The data on this table represent graduation rates from Envision High School (Hiaki High School) the only high school within the regional boundaries.

Table 39. Level of education for mothers giving birth during calendar year 2017

GEOGRAPHY	TOTAL NUMBER OF BIRTHS IN 2017	MOTHER HAD LESS THAN A HIGH-SCHOOL EDUCATION	MOTHER HAD HIGH-SCHOOL DIPLOMA OR GED	MOTHER HAD MORE THAN HIGH-SCHOOL
<b>Pascua Yaqui Tribe Region</b>	<b>60</b>	<b>37%</b>	<b>37%</b>	<b>27%</b>
Pima County	10,970	16%	26%	57%
Arizona	81,664	17%	26%	56%

Source: ADHS Office of Disease Prevention and Health Promotion. (2019). Arizona Health Status and Vital Statistics.

Note: Due to a small number of births for which the mother's educational attainment is unknown, entries in this table may not sum to 100%.

## Early Learning

### Why it Matters

Early childhood is an exciting time of rapid physical, cognitive, and social-emotional development. The experiences young children have during these early years are critical for healthy brain development and set the stage for lifelong learning and well-being.<sup>110,111</sup> Just as rich, stimulating environments can promote development, early negative experiences can have lasting effects. For example, gaps in language development between children from disadvantaged backgrounds and their more advantaged peers can be seen by 18 months of age;<sup>112</sup> those disparities that persist until kindergarten tend to predict later academic problems.<sup>113</sup>

**Access to early care and education.** Though high-quality early care and education can promote development, families often face barriers in accessing these opportunities for their children. Families living in rural areas are more likely to face an inadequate child care supply, but Arizona families in both urban and rural areas face a gap between the number of young children and the availability of licensed child care.<sup>114,115,116</sup> In fact, Arizona has a deficit of about 22,230 licensed early care and education slots to meet the needs of working families, without accounting for parents continuing their own education, or those not in the workforce but seeking out early learning programs to help assure their preschool age children are able to make a strong start in school.<sup>117</sup> Even when early education is available, the cost can be prohibitive. According to the U.S. Department of Education, only 19 percent of four-year-olds in Arizona are enrolled in publicly-funded free or reduced cost preschool programs, compared to 41 percent nationally.<sup>118</sup> If not enrolled in publicly-funded programs, the annual cost of full-time center-based care for a young child in Arizona is nearly equal to the cost of a year at a public college.<sup>119,120</sup>

Child care subsidies can be a support for families who have financial barriers to accessing early learning services.<sup>121</sup> In June 2019, for the first time since the Great Recession, the Arizona Department of Economic Security's (DES) child care subsidy waiting list was suspended, meaning all children who qualify for subsidies are able to receive them, assuming that they are able to find a provider.<sup>122</sup> This is due to \$56 million in additional federal funds from the Child Care and Development Fund (CCDF) that was authorized by the State Legislature, and the funding increase has also allowed DES to increase provider reimbursement rates, which may make it easier for families to use their child care subsidies.<sup>123</sup>

**High quality early care and education.** In addition to the early experiences children have in their homes, high quality early care and education services can also promote physical, cognitive, and social-emotional development and health, particularly for children from

disadvantaged backgrounds.<sup>124,125,126</sup> Children whose education begins in high quality preschool programs repeat grades less frequently, obtain higher scores on standardized tests, experience fewer behavior problems, and are more likely to graduate from high school.<sup>127</sup> This translates into a return on investment to society through increased educational achievement and employment, reductions in crime, and better overall health of children as they mature into adults.<sup>128,129</sup> Not only does access to affordable, quality child care make a positive difference for children's health and development, it also allows parents to maintain stable employment and support their families.<sup>130</sup> The early care education system in tribal communities often consists of a complex network of center-based and home-based care and education settings with funding from varied sources including tribal governments, federal grants, and the Arizona Department of Education.<sup>131</sup>

Establishing that available early care and education programs meet quality standards is important to ensure these early environments support positive outcomes for children's well-being, academic achievement, and success later in life.<sup>132</sup> Providers are considered quality educational environments by the Arizona Department of Economic Security if they receive a Quality First three-star rating or higher (see below) or are accredited by a national organization, such as the Association for Early Learning Leaders or the National Association for the Education of Young Children (NAEYC).<sup>133</sup>

High quality early education environments have teachers with more education, experience, and supports that increase their skills in developing positive teacher-child interactions, providing enriching age-appropriate experiences and guiding appropriate behaviors.<sup>134</sup> These quality environments may be particularly important for children with challenging behaviors, because lower teacher-child ratios and access to professional development and early childhood mental health consultation can help avoid preschool expulsion.<sup>135,136,137</sup>

Quality First is Arizona's Quality Improvement and Rating System (QIRS) for early child care and preschool providers.<sup>138</sup> A Quality First Star Rating represents where along the continuum of quality (1 to 5 stars) a program was rated and how they are implementing early childhood best practices. One star indicates a program is participating in Quality First, is regulated, in good standing, and is making the commitment to work on quality improvement. Three stars indicate that a program is of good quality care, and families can be confident that children are well cared for in such an environment. Five stars indicate the highest level of quality attainable, where families will find low staff-child ratios and group sizes, highly educated personnel, and strong curriculum which optimizes children's comprehensive development.<sup>139</sup> The number of providers across the state that meet quality standards (three-star rating or higher) has increased across the last five years such that 25 percent of the 857 participating providers in

2013 met or exceeded quality standards, and 76 percent of 1,032 participating providers in 2019 met or exceeded quality standards.<sup>140</sup>

High quality early care and education practices, including lower teacher-child ratios, access to professional development, and early childhood mental health consultation, can help avoid preschool expulsion.<sup>141,142</sup> Nationally, preschool expulsions and suspensions occur at high rates and disproportionately impact children of color, specifically young Black boys.<sup>143,144</sup> In 2016, an estimated 50,000 preschoolers were suspended and 17,000 preschoolers expelled nationwide, with Black children 2.2 times more likely to be suspended or expelled than other children.<sup>145</sup> The U.S. Department of Education Office of Civil Rights began collecting data on preschool suspension and expulsion in 2011 and, as a result of federal changes to the Child Care Development Block Grant in 2014, Arizona began collecting provider-reported data on early learning environment expulsion in 2017.<sup>146,147</sup> Given the positive impact of early educational experiences on children’s cognitive and emotional development and the negative impact of suspension and expulsion on educational outcomes, it is essential to identify areas with higher rates of expulsion to provide targeted supports.<sup>148</sup>

As an alternative to expulsion, early education providers in Arizona have an opportunity to identify young children as being at risk for expulsion and to receive consultation from experts to help intervene in problem behaviors. Consultation is provided through on-site mental health consultation, available for Quality First and some non-Quality First providers, in most but not all regions in the state, as well as through a statewide Department of Economic Security (DES)-managed hotline. If that child is then able to remain in the center, this is documented as a prevented expulsion and their case is closed out. The reported number of prevented expulsions of young children receiving subsidies increased from seven in 2017 to 45 in 2018.<sup>149</sup>

**Young children with special needs.** The availability of early learning opportunities and services for young children with special needs is an ongoing concern across the state, particularly in the more geographically remote communities and some tribal communities. Children with special health care needs are defined as “those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally.”<sup>150</sup> According to the National Survey of Children’s Health, children with special health care needs are more likely to experience more adverse childhood experiences (ACEs)<sup>viii</sup> than typically-developing children,<sup>151</sup>

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<sup>viii</sup> ACEs include eight categories of traumatic or stressful life events experienced before the age of 18 years. The eight ACE categories are sexual abuse, physical abuse, emotional abuse, household adult mental illness, household substance abuse, domestic violence in the household, incarceration of a household member, and parental divorce or separation.

and are at an increased risk for maltreatment and neglect,<sup>152,153</sup> suggesting they may particularly benefit from high quality teacher-child interactions in classrooms.<sup>154,155</sup> Nationally, American Indian/Alaska Native children receive special education services at the highest rates (18%) of any racial/ethnic group, with notably higher rates of services than their white (14%) and Hispanic (13%) peers.<sup>156</sup> Almost half (46%) of families with a child with special needs in Arizona have incomes below 200 percent of the federal poverty level, suggesting that even if they can identify an appropriate provider, affording quality care is likely to be a burden.<sup>157</sup>

Ensuring all families have access to timely and appropriate screenings for children who may benefit from early identification of special needs can help improve outcomes for these children and their families. Timely intervention can help young children with, or at risk for, developmental delays improve language, cognitive, and socio-emotional development.<sup>158,159</sup> It also reduces educational costs by decreasing the need for special education.<sup>160</sup> In Arizona, services available to families with children with special needs include those provided through the Arizona Early Intervention Program (AzEIP),<sup>161</sup> the Arizona Department of Education Early Childhood Special Education program,<sup>162</sup> and the Division of Developmental Disabilities (DDD).<sup>163</sup>

## What the Data Tell Us

### Access to Early Care and Education

- Early childhood education enrollment rates in the Pascua Yaqui Tribe Region are high. Sixty percent of children ages three to four are enrolled in school (i.e. nursery school, preschool, or kindergarten) compared to 41 percent in all Arizona reservations and 40 percent in Pima County (Table 40).
- According to the 2018 Pascua Yaqui Tribe Regional Partnership Council Needs and Assets Report, within the Pascua Yaqui Tribe region, early care and education options include the Ili Uusim Mahtawa’apo Pascua Yaqui Head Start, which can serve up to 141 children (ages 3-4) and 24 certified/licensed Family Home Providers. Family Home Providers who are certified/licensed by the tribe can each provide care for up to five children with the costs subsidized by the Pascua Yaqui Tribe for children who are tribally-enrolled.<sup>164</sup>
- In the 2015-2016 school year, Ili Uusim Mahtawa’apo Pascua Yaqui Head Start served 64 three-year-olds and 76 four-year-olds. These numbers represent a substantial proportion of the Pascua Yaqui Tribe Region’s children in this age group. Ili Uusim Mahtawa’apo Pascua Yaqui Head Start is a federal program that provides services to families on and off the reservation (five miles around the reservation), so children who do not reside in the region covered by Pascua Yaqui Tribe reservation boundaries can also attend this Head Start program.<sup>165</sup>
- According to data from the Department of Economic Security, in 2018 there were four licensed family child care providers in the region with a capacity to serve a total of 16 children. In the same year, there was one accredited child care provider in the region with the capacity to serve four children (Table 41 & Table 42).
- Data on the cost of full-time child care was not available for the Pascua Yaqui Region. At the county level, median monthly child care costs for certified group homes and licensed centers are similar across Pima County and the state. Median costs for approved family homes are as much as \$100 more per child per month in Pima County compared to the state. Overall, licensed centers are the most expensive and approved family homes the least expensive for all ages (Table 43).
- Child care costs are relatively more expensive in Pima County than in the state overall. At median levels, sending an infant to a licensed center requires over one-sixth (17%) of a family’s income (Table 44).
- The number of children receiving a child care subsidy from the Department of Economic Security (DES) in the Pascua Yaqui Tribe Region increased from 39 in 2015, to 55 in 2017, and remained stable in 2018 (54 children) (Table 45).

- Nearly all (93%) children who are eligible for DES child care subsidies in the Pascua Yaqui Tribe Region have received them in recent years. This proportion is similar to that in the state overall, where 92 percent of eligible children received child care subsidies in 2018 (Table 47).
- For children involved with the Department of Child Safety (DCS) specifically, the proportion of those who are eligible for DES child care subsidies and are actually receiving them has declined over time in the region, Pima County and the state. In 2015, all eligible children in the Pascua Yaqui Tribe Region received subsidies, compared to 83 percent in 2018 (Table 46).
- In addition to DES subsidies available to families in the region, the cost of child care can also be lessened for families in the region through a child care subsidy provided by the tribe to eligible children who are enrolled tribal members through its Pascua Yaqui Tribe Child Care and Development Fund (CCDF). For center-based child care this subsidy ranges from \$22-\$25 per day, depending on the child’s age. For care with a family home provider, the daily subsidy is from \$19-\$20. The number of families that can receive a child care subsidy depends on the amount of federal funding the tribe receives from the U.S. Department of Health and Human Services<sup>166</sup> (Table 48).

### **High Quality Early Care and Education**

- The Department of Economic Security (DES) defines early care and education “quality environments” as providers that are accredited by a national organization or providers that have received a state-approved quality indicator that is recognized by the department.<sup>ix</sup> In 2017 there were 35 children receiving DES subsidies who were enrolled in quality environment settings, as defined by DES. That number increased to 43 children in 2018 (Table 49).
- In State Fiscal Year 2019, there were no Quality First sites within the boundaries of the Pascua Yaqui Tribe Region (Table 50 & Table 51).

### **Young Children with Special Needs**

- In fiscal year 2016, between 14 and 30 children ages birth to two were referred to the Arizona Early Intervention Program (AzEIP) in the region; in 2017, between three and 27 children were referred to AzEIP and found eligible for services. In fiscal year 2017, fewer than ten children were referred to AzEIP and found eligible for services. In both 2017

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<sup>ix</sup> More information about Arizona’s quality educational environments can be found in the DES CCDF State Plan FY2019-FY2021, available at <https://des.az.gov/documents-center>

and 2018, there were fewer than ten active AzEIP cases in the region (Table 53 & Table 54).

- In State Fiscal Years 2015, 2016 and 2018 there were fewer than ten children ages birth to two in the Pascua Yaqui Tribe Region who received services from the Division of Developmental Disabilities (DDD). No children from the region in that age range received DDD services in State Fiscal Year 2017. Similarly, no children ages three to five received services from DDD in the period between fiscal year 2015 and 2018 (Table 55 & Table 56).

## Access to Early Care and Education

Table 40. School enrollment for children (ages 3 and 4)

GEOGRAPHY	POPULATION OF CHILDREN (AGES 3-4)	NUMBER ENROLLED IN SCHOOL	PERCENT ENROLLED IN SCHOOL
<b>Pascua Yaqui Tribe Region</b>	<b>163</b>	<b>97</b>	<b>60%</b>
All Arizona Reservations	6,574	2,673	41%
Pima County	24,503	9,893	40%
Arizona	182,970	69,712	38%
United States	8,190,503	3,892,317	48%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B14003

Notes: In this table, "school" may include nursery school, preschool, or kindergarten.

These data reflect whether or not respondents to the American Community Survey reported that children ages 3-4 who live in their household were enrolled in nursery school, preschool, or kindergarten. They may not exactly correspond with early care and education center enrollments within the region in a given year.

Table 41. Number and licensed capacity of licensed or registered child care providers by type, 2018

GEOGRAPHY	NANNIES OR INDIVIDUAL PROVIDERS		CHILD CARE CENTERS		FAMILY CHILD CARE PROVIDERS		TOTAL PROVIDERS	
	NUMBER	CAPACITY	NUMBER	CAPACITY	NUMBER	CAPACITY	NUMBER	CAPACITY
<b>Pascua Yaqui Tribe Region</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>16</b>	<b>4</b>	<b>16</b>
Pima County	7	27	250	28,568	237	1,377	494	29,972
Arizona	26	90	1,527	182,561	656	3,871	2,209	186,522

Source: Arizona Department of Economic Security (2019). 2018 Child Care Assistance Data. Unpublished data received by request.

Note: The data shown in this table exclude home-based providers licensed by the Pascua Yaqui Tribe.

Table 42. Number and licensed capacity of accredited child care providers, 2018

GEOGRAPHY	NUMBER OF ACCREDITED PROVIDERS	PERCENT OF PROVIDERS WHO ARE ACCREDITED	CAPACITY IN ACCREDITED PROVIDERS	PERCENT OF PROVIDER CAPACITY WHICH IS WITH ACCREDITED PROVIDERS
<b>Pascua Yaqui Tribe Region</b>	<b>1</b>	<b>25%</b>	<b>4</b>	<b>25%</b>
Pima County	76	15%	5,609	19%
Arizona	213	10%	22,931	12%

Source: Arizona Department of Economic Security (2019). 2018 Child Care Assistance Data. Unpublished data received by request.

Table 43. Median monthly charge for full-time child care, 2018

GEOGRAPHY	APPROVED FAMILY HOMES			CERTIFIED GROUP HOMES			LICENSED CENTERS		
	INFANTS	1 TO 2 YEAR OLDS	3 TO 5 YEAR OLDS	INFANTS	1 TO 2 YEAR OLDS	3 TO 5 YEAR OLDS	INFANTS	1 TO 2 YEAR OLDS	3 TO 5 YEAR OLDS
Pima County	\$500	\$500	\$500	\$600	\$560	\$560	\$861	\$765	\$669
Arizona	\$400	\$400	\$400	\$600	\$560	\$560	\$861	\$760	\$660

Source: Arizona Department of Economic Security (2019). 2018 Child Care Assistance Data. Unpublished data received by request.

Table 44. Cost of center-based care as a percentage of income, 2018

GEOGRAPHY	MEDIAN FAMILY INCOME (ACS 2013-2017)	COST FOR AN INFANT	COST FOR A 1 TO 2 YEAR OLD CHILD	COST FOR A 3 TO 5 YEAR OLD CHILD
Pima County	\$60,790	17%	15%	13%
Arizona	\$63,812	16%	14%	12%

Source: Arizona Department of Economic Security (2019). 2018 Child Care Market Rate Survey. Unpublished data received by request. Arizona Department of Economic Security (2019). 2018 Child Care Market Rate Survey Report. Retrieved from <https://des.az.gov/file/14277/download>.

Table 45. Children receiving DES child care subsidies, 2015 to 2018

GEOGRAPHY	NUMBER OF CHILDREN RECEIVING SUBSIDIES, 2015	NUMBER OF CHILDREN RECEIVING SUBSIDIES, 2016	NUMBER OF CHILDREN RECEIVING SUBSIDIES, 2017	NUMBER OF CHILDREN RECEIVING SUBSIDIES, 2018
<b>Pascua Yaqui Tribe Region</b>	<b>39</b>	<b>44</b>	<b>55</b>	<b>54</b>
Pima County	4,021	3,766	3,603	4,285
Arizona	19,040	17,784	16,922	19,813

Source: Arizona Department of Economic Security (2019). 2015-2018 Child Care Assistance Data. Unpublished data received by request.

Note: This table reflects children receiving subsidies who are not DCS-involved.

Table 46. DCS-involved children receiving DES child care subsidies, 2015 to 2018

GEOGRAPHY	NUMBER OF DCS CHILDREN RECEIVING SUBSIDIES				PERCENT OF ELIGIBLE DCS CHILDREN RECEIVING SUBSIDIES			
	2015	2016	2017	2018	2015	2016	2017	2018
<b>Pascua Yaqui Tribe Region</b>	<b>15</b>	<b>23</b>	<b>25</b>	<b>19</b>	<b>100%</b>	<b>100%</b>	<b>83%</b>	<b>83%</b>
Pima County	2,994	2,942	2,584	2,629	92%	91%	89%	86%
Arizona	13,098	13,352	12,201	12,219	91%	89%	88%	82%

Source: Arizona Department of Economic Security (2019). 2015-2018 Child Care Assistance Data. Unpublished data received by request.

Table 47. Eligible families not using DES child care subsidies, 2015 to 2018

GEOGRAPHY	FAMILIES NOT USING SUBSIDIES, 2015	FAMILIES NOT USING SUBSIDIES, 2016	FAMILIES NOT USING SUBSIDIES, 2017	FAMILIES NOT USING SUBSIDIES, 2018
<b>Pascua Yaqui Tribe Region</b>	<b>0%</b>	<b>0%</b>	<b>3%</b>	<b>7%</b>
Pima County	4%	4%	5%	5%
Arizona	6%	6%	7%	8%

Source: Arizona Department of Economic Security (2019). 2015-2018 Child Care Assistance Data. Unpublished data received by request.

Table 48. Pascua Yaqui Tribe Child Care and Development Fund subsidy, per day, October 2015 to September 2016

AGE OF CHILD	FAMILY HOME PROVIDER	CHILD-CARE CENTER
Infant	\$20	\$25
1-2 year old	\$19	\$22
3-5 year old	\$19	\$22

*Source: First Things First. (2018). Pascua Yaqui Tribe Regional Partnership Council 2018 Needs and Assets Report.*

## High Quality Early Care and Education

Table 49. Children receiving DES subsidies in quality educational environments, 2017 and 2018

GEOGRAPHY	TOTAL NUMBER OF CHILDREN IN QUALITY ENVIRONMENTS, 2017	TOTAL NUMBER OF CHILDREN IN QUALITY ENVIRONMENTS, 2018
<b>Pascua Yaqui Tribe Region</b>	<b>35</b>	<b>43</b>
Pima County	3,407	3,848
Arizona	13,706	17,295

Source: Arizona Department of Economic Security (2019). Child Care Assistance Dataset. Unpublished data received by request.

Note: These data only reflect children receiving child care subsidies from DES. Quality educational environments are defined by the Department of Economic Security as providers that are accredited by a national organization or providers that have received a state-approved quality indicator that is recognized by the department. More information about Arizona's quality educational environments can be found in the DES CCDF State Plan FY2019-FY2021, available at <https://des.az.gov/documents-center>

Table 50. First Things First Quality First child data, State Fiscal Year 2019

GEOGRAPHY	QUALITY FIRST SCHOLARSHIPS: NUMBER OF CHILDREN SERVED	NUMBER OF CHILDREN ENROLLED AT A QUALITY FIRST PROVIDER SITE	NUMBER OF CHILDREN ENROLLED AT A QUALITY FIRST PROVIDER SITE WITH A PUBLIC 3-5 STAR RATING	PERCENT OF CHILDREN IN A QUALITY-LEVEL SETTING (PUBLIC 3-5 STARS)
<b>Pascua Yaqui Tribe Region</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>N/A</b>
Arizona	9,179	62,215	45,278	73%

Source: First Things First (2019). Quality First, a Signature Program of First Thing First. Unpublished data received by request  
 Note: These data reflect regionally-funded Quality First provider sites and statewide-funded Quality First Redesign provider sites. Data reflect children enrolled at provider sites with a public rating. Star ratings are not publicly available when provider sites decline to publish their initial rating or when a rating is not yet assigned. The Pascua Yaqui Tribe Region does not fund Quality First and Quality First Scholarships. However, the Tribe, through a Federal CCDF grant, covers a proportion of child care costs for families based on a sliding fee scale.

Table 51. First Things First Quality First child care provider data, State Fiscal Year 2019

GEOGRAPHY	NUMBER OF CHILD CARE PROVIDERS SERVED	NUMBER OF CHILD CARE PROVIDERS SERVED WITH A PUBLIC 3-5 STAR RATING	PERCENT OF CHILD CARE PROVIDERS SERVED WITH A PUBLIC 3-5 STAR RATING
<b>Pascua Yaqui Tribe Region</b>	<b>0</b>	<b>0</b>	<b>N/A</b>
Arizona	1,119	821	73%

*Source: First Things First (2019). Quality First, a Signature Program of First Thing First. Unpublished data received by request*  
*Note: These data reflect regionally-funded Quality First provider sites and statewide-funded Quality First Redesign provider sites. Data reflect children enrolled at provider sites with a public rating. Star ratings are not publicly available when provider sites decline to publish their initial rating or when a rating is not yet assigned.*

## Young Children with Special Needs

Table 52. Ili Uusim Mahtawa'apo Pascua Yaqui Head Start counts of preschool children with an Individualized Education Plan (IEP)

	SCHOOL YEAR 2013-14	SCHOOL YEAR 2014-15	SCHOOL YEAR 2015-16
All children in Head Start with an Individualized All children in Head Start with an Individualized Education Plan (IEP) indicating they are eligible to receive special education and related services	<25	25	30
Children with an IEP whose primary disability is a speech or language impairment	<25	<25	<25
Children with an IEP whose primary disability is a noncategorical/developmental delay	<25	<25	<25
Total number of children enrolled in Head Start	141	141	140

Source: *First Things First. (2018). Pascua Yaqui Tribe Regional Partnership Council 2018 Needs and Assets Report.*

Note: Where the total number of children was less than 25 (<25) in the 2018 report, the number was suppressed to protect confidentiality.

Table 53. Children referred to and found eligible for AzEIP, Federal Fiscal Years 2016 and 2017

GEOGRAPHY	NUMBER OF CHILDREN (AGES 0-2) REFERRED TO AzEIP, FFY2016	NUMBER OF CHILDREN (AGES 0-2) ELIGIBLE FOR AzEIP, FFY2016	PERCENT OF REFERRALS FOUND ELIGIBLE, FFY2016	NUMBER OF CHILDREN (AGES 0-2) REFERRED TO AzEIP, FFY2017	NUMBER OF CHILDREN (AGES 0-2) ELIGIBLE FOR AzEIP, FFY2017	PERCENT OF REFERRALS FOUND ELIGIBLE, FFY2017
<b>Pascua Yaqui Tribe Region</b>	<b>14 to 30</b>	<b>3 to 27</b>	<b>DS</b>	<b>3 to 27</b>	<b>3 to 27</b>	<b>DS</b>
Pima County	2,100	1,102	52%	2,067	1,203	58%
Arizona	16,063	9,383	58%	16,344	9,770	60%

Source: *Arizona Department of Economic Security (2019). AZEIP Service Dataset. Unpublished data received by request.*

Table 54. AzEIP caseloads, 2017 and 2018

GEOGRAPHY	CUMULATIVE ACTIVE AzEIP CASES, 2017	CUMULATIVE ACTIVE AzEIP CASES, 2018	PERCENT CHANGE IN AzEIP CASELOADS FROM 2017 TO 2018
<b>Pascua Yaqui Tribe Region</b>	<b>&lt;10</b>	<b>&lt;10</b>	<b>N/A</b>
Pima County	1,295	1,306	1%
Arizona	10,934	11,600	6%

Source: Arizona Department of Economic Security (2019). AZEIP Service Dataset. Unpublished data received by request.

Table 55. Children (ages 0-2) receiving services from DDD, State Fiscal Years 2015 to 2018

GEOGRAPHY	CHILDREN (AGES 0-2) RECEIVING DDD SERVICES, SFY2015	CHILDREN (AGES 0-2) RECEIVING DDD SERVICES, SFY2016	CHILDREN (AGES 0-2) RECEIVING DDD SERVICES, SFY2017	CHILDREN (AGES 0-2) RECEIVING DDD SERVICES, SFY2018	PERCENT CHANGE FROM 2015 TO 2018
<b>Pascua Yaqui Tribe Region</b>	<b>&lt;10</b>	<b>&lt;10</b>	<b>0</b>	<b>&lt;10</b>	<b>N/A</b>
Pima County	480	459	482	577	20%
Arizona	3,948	4,095	4,505	5,012	27%

Source: Arizona Department of Economic Security (2019). 2015-2018 Division Developmental Disabilities Data. Unpublished data received by request.

Table 56. Children (ages 3-5) receiving services from DDD, State Fiscal Years 2015 to 2018

GEOGRAPHY	CHILDREN (AGES 3-5) RECEIVING DDD SERVICES, SFY2015	CHILDREN (AGES 3-5) RECEIVING DDD SERVICES, SFY2016	CHILDREN (AGES 3-5) RECEIVING DDD SERVICES, SFY2017	CHILDREN (AGES 3-5) RECEIVING DDD SERVICES, SFY2018	PERCENT CHANGE FROM 2015 TO 2018
<b>Pascua Yaqui Tribe Region</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>N/A</b>
Pima County	85	90	119	133	56%
Arizona	887	898	1,049	1,154	30%

Source: Arizona Department of Economic Security (2019). 2015-2018 Division Developmental Disabilities Data. Unpublished data received by request.

## Child Health

### Why it Matters

The physical and mental health of both children and their parents are important for optimal child development and well-being. Starting with the mother's health before pregnancy, many factors influence a child's health.<sup>167</sup> Exposures and experiences in utero, at birth, and during the early years set the stage for health and well-being throughout a child's life.<sup>168,169</sup> Access to health insurance and preventive care influence not only a child's current health, but long-term development and future health.<sup>170,171,172</sup> Various health care services, depending on the region, are available to members of federally-recognized Indian tribes from Indian Health Service (IHS) facilities and/or other tribally-administered health care facilities.<sup>173,174</sup>

**Access to health services.** The ability to obtain health care is critical for supporting the health of pregnant mothers and young children. Health care during pregnancy, or prenatal care, can reduce maternal and infant mortality and complications during pregnancy.<sup>175,176</sup> In the early years of a child's life, well-baby and well-child visits allow clinicians to assess and monitor the child's development and offer developmentally appropriate information and guidance to parents.<sup>177</sup> Families without health insurance are more likely to skip these visits, and are less likely to receive preventive care for their children, or care for health conditions and chronic diseases.<sup>178,179</sup> Thus, access to health insurance is an indicator of children's access to health services. Children who lack health insurance are also more likely to be hospitalized and to miss school.<sup>180</sup> Despite being eligible to receive health care services through IHS facilities and/or tribally-operated facilities, Native communities often struggle to access adequate, high quality care. Services and funding are often limited at IHS facilities,<sup>181</sup> and eligibility for IHS services alone does not meet the minimum essential coverage requirement under the Affordable Care Act.<sup>182</sup> Transportation is a challenge in many rural tribal regions, which can also limit access to care. Close to one in 5 households on tribal lands do not have a vehicle available (17%), which is more than double the proportion of households without a vehicle statewide (7%).<sup>183</sup>

**Maternal, infant, and child health.** A number of factors occurring before conception and in utero influence child health, making characteristics of pregnant women important determinants of the birth and developmental outcomes of their children. Pregnancy during the teen years is associated with a number of health concerns for infants, including neonatal death, sudden infant death syndrome, and child abuse and neglect.<sup>184</sup> Teenage mothers (and fathers) themselves are less likely to complete high school or college, and more likely to require public assistance and to live in poverty than their peers who are not parents.<sup>185,186,187</sup>

In addition to age, a mother's health status before, during, and after pregnancy influences her child's health. Women who are obese before they become pregnant are at a higher risk of birth

complications and neonatal and infant mortality than women who are normal weight before pregnancy.<sup>188,189</sup> Babies born to obese women are at risk for chronic conditions later in life such as diabetes and heart disease.<sup>190</sup> Preterm birth, in addition to being associated with higher infant and child mortality, often results in longer hospitalization, increased health care costs, and longer-term impacts such as physical and developmental impairments. Babies born at a low-birth weight (less than 5 pounds, 8 ounces) are also at increased risk of infant mortality and longer-term health problems such as diabetes, hypertension and cardiac disease.<sup>191</sup>

Maternal mental health is a factor for children's well-being as well. Maternal depression during and after pregnancy negatively influences the mother's ability to maintain a healthy pregnancy as well as meet the demands of motherhood and form a secure attachment with her baby.<sup>192,193</sup> Quality preconception counseling and early-onset prenatal care can help reduce some of these risks for poor prenatal and postnatal outcomes by providing information, conducting screenings, and supporting an expectant mother's health and nutrition.<sup>194</sup>

**Substance use disorders.** A mother's use of substances such as drugs and alcohol also has implications for her baby. Babies born to mothers who smoke are more likely to be born early (pre-term), have low birth weight, die from sudden infant death syndrome (SIDS) and have weaker lungs than babies born to mothers who do not smoke.<sup>195,196</sup> Opiate use during pregnancy, either illegal or prescribed, has been associated with neonatal abstinence syndrome (NAS), a group of conditions that causes infants exposed to these substances in the womb to be born exhibiting withdrawal symptoms.<sup>197</sup> This can create longer hospital stays, increase health care costs and increase complications for infants born with NAS. Infants exposed to cannabis (marijuana) in utero often have lower birth weights and are more likely to be placed in neonatal intensive care compared to infants whose mothers had not used the drug during pregnancy.<sup>198</sup>

Parental substance abuse also has significant impacts on family wellbeing. According to the National Survey of Children's Health, young children in Arizona are more than twice as likely to live with someone with a problem with alcohol or drugs than children in the U.S. as a whole (9.8 percent compared to 4.5 percent).<sup>199</sup> Children of parents with substance use disorders are more likely to be neglected or abused and face a higher risk of later mental health and behavioral health issues, including developing substance use disorders themselves.<sup>200,201</sup>

Substance abuse treatment and supports for parents and families grappling with these issues can help to ameliorate the short and long-term impacts on young children.<sup>202</sup> Because of the impact of historical trauma and adverse childhood experiences (ACEs), in Native American communities, interventions to address substance use among youth and adults are often trauma-informed, culturally-grounded and community-based.<sup>203</sup>

**Nutrition and weight status.** After birth, a number of factors have been associated with improved health outcomes for infants and young children. One factor is breastfeeding, which

has been shown to reduce the risk of ear, respiratory and gastrointestinal infections, SIDS, overweight, and type 2 diabetes.<sup>204</sup> The American Academy of Pediatrics recommends exclusive breastfeeding for about 6 months, and continuing to breastfeed as new foods are introduced for 1 year or longer.<sup>205</sup> American Indians have the lowest breastfeeding rate nationwide. There is a movement to reclaim breastfeeding among Native women to benefit the health of the mother, child, and community. In one example of an effort to address this issue, the Indian Health Service (IHS) has been tasked to make all IHS birthing hospitals baby-friendly, which includes breastfeeding support as part of maternity care.<sup>206</sup>

A child's weight status can have long-term impacts on health and well-being. Nationwide, an estimated three percent of children ages 2-19 are underweight, 16.6 percent are overweight, and 18.5 percent are obese.<sup>207,208</sup> Obesity can have negative consequences on physical, social, and psychological well-being that begin in childhood and continue into and throughout adulthood.<sup>209</sup> Higher birth weight and higher infancy weight, as well as lower-socioeconomic status and low-quality mother-child relationships, have all been shown to be related to higher childhood weight and increased risk for obesity and metabolic syndrome (which is linked to an increase risk of heart disease, stroke, and diabetes).<sup>210, 211</sup>

**Oral health.** Oral health and good oral hygiene practices are important to children's overall health. Tooth decay and early childhood cavities can have short- and long-term consequences including pain, poor appetite, disturbed sleep, lost school days, and reduced ability to learn and concentrate.<sup>212</sup> A national study showed that low-income children were more likely than higher income children to have untreated cavities.<sup>213</sup> Despite high percentages of young Arizona children who have preventative dental care visits (68.4%) compared to the national average (57.8%), there is a relatively high percentage who have had decayed teeth or cavities (11.1%) compared to those across the nation overall (7.7%).<sup>214</sup> Low-income children in Arizona, specifically, are more likely to have untreated cavities and less likely to have had an annual dental visit than their higher-income peers.<sup>215</sup> According to a 2015 study, among kindergarteners, American Indian children in Arizona had significantly higher incidences of decay (75% AIAN versus 52% all races), and untreated decay (48% AIAN versus 24% all races), relative to all kindergarteners).<sup>216</sup>

First Things First's Oral Health strategy was able to provide 24,664 children birth to age five with a dental screening, and 16,837 children with a fluoride varnish in the Arizona State Fiscal Year 2019.<sup>217</sup> Many children had untreated tooth decay and other oral health needs identified through the screenings. Further, attempts were made to connect children to dental homes who either did not already have a dental home or who needed dental care.

**Childhood immunizations.** Immunization against preventable diseases protects children and the surrounding community from illness and potentially death. In order to ensure community

immunity of preventable diseases, which helps to protect unvaccinated children and adults, rates of vaccination in a community need to remain high.<sup>218</sup>

**Illness and injury.** Asthma is the most common chronic illness affecting children,<sup>219</sup> and it is more prevalent among boys, Black children, American Indian or Alaska Native children, and children in low-income households.<sup>220,221</sup> The total healthcare costs of childhood asthma in the United States are estimated to be between \$1.4 billion and \$6.4 billion, but these costs could be reduced through better management of asthma to prevent hospitalizations.<sup>222</sup> Unintentional injuries are the leading cause of death for children in Arizona<sup>223</sup> and nationwide.<sup>224</sup> It is estimated that as many as ninety percent of unintentional injury-related deaths could be preventable through better safety practices, such as use of proper child restraints in vehicles and supervision of children around water.<sup>225</sup> Children in rural areas are at higher risk of unintentional injuries than those who live in more urban areas, as are children in Native communities, suggesting that injury prevention is an especially salient need in these areas.<sup>226,227</sup>

One useful metric for evaluating child health in Arizona are the Healthy People objectives. These science-based objectives define priorities for improving the nation's health and are updated every ten years. Understanding where Arizona mothers and children fall in relation to these current national benchmarks (Healthy People 2020) 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 county level, including increasing the proportion of pregnant women who receive prenatal care in the first trimester; reducing low birth weight; reducing preterm births; and increasing abstinence from cigarette smoking among pregnant women.<sup>228</sup>

## What the Data Tell Us

### Access to Health Services

- In the Pascua Yaqui Tribe Region, about one in three (34%) people lack health insurance coverage, a percent that is higher than in all Arizona reservations (22%) and the state of Arizona (12%). The proportion of young children who are uninsured is lower than that of the general population in all three geographies, with a similar pattern of the regional percentage (20%) being higher than all Arizona reservations (16%) and the state (7%). It is important to note that the U.S. Census Bureau does not consider coverage by the Indian Health Service (IHS) to be insurance coverage (Table 57 & Figure 6).
- In 2017, the most recent year for which data are available, IHS paid for 48 percent of the 60 births in the region, while AHCCCS paid for 43 percent of them (Table 58).

### Maternal, Infant, and Child Health

- A large proportion of births in the Pascua Yaqui Tribe Region in 2017 were to women who did not have adequate prenatal care. Forty-three percent of births were to women who had no prenatal care in their first trimester, a percentage that is substantially higher than the Healthy People 2020 target of no more than 22.1 percent. Additionally, 15 percent of births were to women who had fewer than five prenatal visits, compared to 13 percent in Pima County, and eight percent in the state (Table 59).

### Child Immunizations

- Region-specific data on immunization rates for young children were not available for this report. Data for Pima County show that across all required immunizations, with the exception of Hepatitis A, children in child care in Pima County had higher vaccination rates than the state as a whole and met the Healthy People 2020 targets during the 2018-2019 school year (Table 65). Pima County also exceeded statewide immunization rates and met all Healthy People 2020 targets for kindergarten immunizations during this time (Table 64).
- According to the First Things First Pascua Yaqui Tribe Regional Partnership Council 2018 Needs and Assets Report, the percentage of children enrolled at Ili Uusim Mahtawa'apo Pascua Yaqui Head Start who were up to date on their immunizations steadily increased from 93 percent in 2013-2014 to 98 percent in 2015-2016 (Table 65).

### Illness and Injury

- From 2015 to 2018, there were fewer than six non-fatal inpatient hospitalizations of young children from the Pascua Yaqui Tribe Region (Table 66).

- From 2015 to 2017, there eight non-fatal inpatient hospitalizations for unintentional injuries and seven emergency room visits for asthma among young children from the region, with an average length of stay for asthma hospitalization of 2.8 days (Table 67).
- From 2015 to 2018, there were 164 emergency room visits for non-fatal incidents for young children in the region. Reasons for these non-fatal emergency room visits were similar across the region, county, and state, with falls and being 'struck by or against' an object or person the most common. Being 'struck by or against' an object or person was slightly more common in the region than the state overall (20% and 14%, respectively), while falls were slightly less common in the region than the state (37% and 46%, respectively) (Table 68).
- Between 2015 and 2017 there were fewer than six child deaths among young children (ages 0-4) and among all children (ages 0-17) in the Pascua Yaqui Tribe Region (Table 70).

## Access to Health Services

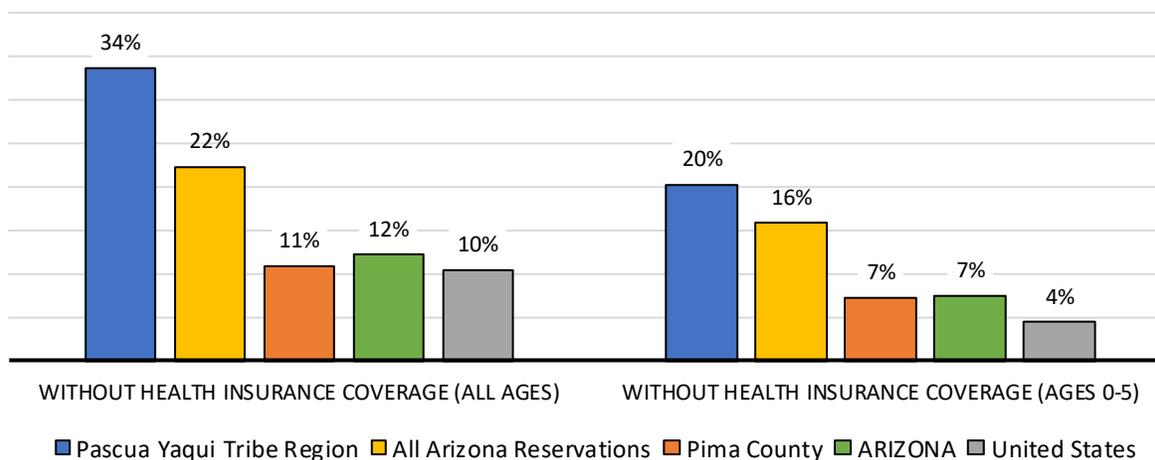
Table 57. Health insurance coverage

GEOGRAPHY	POPULATION (ALL AGES)	PERCENT WITHOUT HEALTH INSURANCE COVERAGE (ALL AGES)	POPULATION OF YOUNG CHILDREN (AGES 0-5)	PERCENT WITHOUT HEALTH INSURANCE COVERAGE (AGES 0-5)
<b>Pascua Yaqui Tribe Region</b>	<b>3,888</b>	<b>34%</b>	<b>480</b>	<b>20%</b>
All Arizona Reservations	186,018	22%	18,649	16%
Pima County	987,178	11%	70,616	7%
Arizona	6,701,990	12%	520,741	7%
United States	316,027,641	10%	23,832,080	4%

Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B27001

Note: This table excludes persons in the military and persons living in institutions such as college dormitories. People whose only health coverage is the Indian Health Service (IHS) are considered 'uninsured' according to the U.S. Census Bureau.

Figure 6. Health insurance coverage for the population (all ages) and for young children (ages 0 to 5)



Source: U.S. Census Bureau (2018). American Community Survey five-year estimates 2013-2017, Table B27001

Note: This table excludes persons in the military and persons living in institutions such as college dormitories. People whose only health coverage is the Indian Health Service (IHS) are considered 'uninsured' according to the U.S. Census Bureau.

Table 58. Payors for births during calendar year 2017

GEOGRAPHY	TOTAL NUMBER OF BIRTHS IN 2017	BIRTHS PAID BY AHCCCS	BIRTHS PAID BY IHS	BIRTHS SELF-PAY
<b>Pascua Yaqui Tribe Region</b>	<b>60</b>	<b>43%</b>	<b>48%</b>	<b>DS</b>
Pima County	10,970	49%	2%	4%
Arizona	81,664	53%	1%	5%

Source: ADHS Office of Disease Prevention and Health Promotion. (2019). Arizona Health Status and Vital Statistics.

## Maternal, Infant, and Child Health

Table 59. Prenatal care for mothers giving birth during calendar year 2017

GEOGRAPHY	TOTAL NUMBER OF BIRTHS IN 2017	MOTHERS WHO HAD NO PRENATAL CARE	MOTHERS WHO HAD NO PRENATAL CARE IN FIRST TRIMESTER	MOTHERS WHO HAD FEWER THAN FIVE PRENATAL VISITS
<b>Pascua Yaqui Tribe Region</b>	<b>60</b>	<b>DS</b>	<b>43.3%</b>	<b>15%</b>
Pima County	10,970	6%	32.3%	13%
Arizona	81,664	3%	26.4%	8%
Healthy People 2020 target			22.1%	

Source: ADHS Office of Disease Prevention and Health Promotion. (2019). Arizona Health Status and Vital Statistics.

Table 60. Various risk factors for births during calendar year 2017

GEOGRAPHY	TOTAL NUMBER OF BIRTHS IN 2017	LOW BIRTH-WEIGHT	PRETERM (LESS THAN 37 WEEKS)	NICU ADMISSIONS	MOTHER USED TOBACCO	MOTHER YOUNGER THAN 18	MOTHER YOUNGER THAN 20
<b>Pascua Yaqui Tribe Region</b>	<b>60</b>	<b>DS</b>	<b>DS</b>	<b>DS</b>	<b>DS</b>	<b>DS</b>	<b>DS</b>
Pima County	10,970	7.2%	8.4%	8%	5.4%	2%	6%
Arizona	81,664	7.5%	9.3%	7%	4.7%	2%	6%
Healthy People 2020 targets		7.8%	9.4%		1.4%		

Source: ADHS Office of Disease Prevention and Health Promotion. (2019). Arizona Health Status and Vital Statistics.

Table 61. Neonatal abstinence syndrome, calendar years 2016 and 2017

GEOGRAPHY	NAS CASE COUNT	NAS RATE PER 1,000 LIVE BIRTHS
Pima County	319	14.3
Arizona	1,228	7.4

Source: ADHS Arizona Health Status and Vital Statistics. Office of Disease Prevention and Health Promotion (2019), and Kyle Gardner. Office of Injury Prevention

## Child Immunizations

Table 62. Cases of infectious diseases among young children (ages 0-5), 2018

GEOGRAPHY	INFLUENZA	RESPIRATORY SYNCYTIAL VIRUS (RSV)	VARICELLA	PERTUSSIS	HAEMOPHILUS INFLUENZAE	MUMPS
Pima County	595	498	16	<6	<6	<6
Arizona	5,449	4,201	70	51	31	<6

Source: Office of Infectious Disease Services, Division of Public Health Preparedness, AZ Dept of Health Services

Note: These numbers include both confirmed and probable cases. There were zero reported cases of meningococcal meningitis or measles.

Table 63. Children in child care with required immunizations, 2018-19

GEOGRAPHY	NUMBER OF CHILDREN ENROLLED IN CHILD CARE	IMMUNIZATION COVERAGE						
		DTAP	POLIO	MMR	HIB	HEPATITIS-A	HEPATITIS-B	VARICELLA
Pima County	13,425	94.7%	96.1%	97.1%	96.7%	78.7%	96.4%	96.7%
Arizona	86,829	92.4%	94.2%	94.9%	94.2%	85.5%	93.3%	94.7%
Healthy People 2020 targets		90.0%	90.0%	90.0%	90.0%	85.0%	90.0%	90.0%

Source: Arizona Department of Health Services (2019). 2018-19 Child Care Immunization Data. Custom data tabulation from requested data; Arizona Department of Health Services (2019). Childcare Immunization Coverage by County, 2018-19 School Years. Retrieved from <https://www.azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage>

Note: The hepatitis A vaccine series (2 doses) is only required in Maricopa County child care settings, but is recommended in all other Arizona counties.

Table 64. Kindergarteners with required immunizations, 2018-19

GEOGRAPHY	ENROLLED (2018-19)	DTAP (2018-19)	POLIO (2018-19)	MMR (2018-19)	HEPATITIS B (2018-19)	VARICELLA (2018-19)
Pima County	10,727	95.5%	96.0%	95.9%	96.5%	97.3%
Arizona	79,981	92.7%	93.3%	93.0%	94.4%	95.6%
Healthy People 2020 targets		95.0%	95.0%	95.0%	95.0%	95.0%

Source: Arizona Department of Health Services (2019). 2018-19 Kindergarten Immunization Data. Custom data tabulation from requested data; Arizona Department of Health Services (2019). Kindergarten Immunization Coverage by County, 2018-19 School Years. Retrieved from <https://www.azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage>

Table 65. Immunization completion status at end of schoolyear for children attending Ili Uusim Mahtawa'apo Pascua Yaqui Head Start, 2013-14 to 2015-16

	SCHOOL YEAR 2013-14	SCHOOL YEAR 2014-15	SCHOOL YEAR 2015-16
Number of children determined by a health care professional to be up-to-date on all immunizations appropriate for their age	131 (93%)	137 (97%)	137 (98%)
Number of children determined by a health care professional to have received all immunizations possible at this time, but who have not received all immunizations appropriate for their age	10 (7%)	4 (3%)	3 (2%)
Number of children who meet state's guidelines for an exemption from immunizations	0	0	0
Total number of children	141	141	140

Source: First Things First. (2018). Pascua Yaqui Tribe Regional Partnership Council 2018 Needs and Assets Report.

## Illness and Injury

Table 66. Non-fatal hospitalizations of young children (ages 0-5) for unintentional injuries, 2015-2018 cumulative

GEOGRAPHY	NUMBER OF NON-FATAL INPATIENT HOSPITALIZATIONS FOR CHILDREN (AGES 0-5), 2015-2018 TOTALS	MOST COMMON REASON FOR HOSPITALIZATION	SECOND MOST COMMON REASON FOR HOSPITALIZATION
<b>Pascua Yaqui Tribe Region</b>	<b>&lt;6</b>	<b>DS</b>	<b>DS</b>
Pima County	427	Falls (30%)	Poisoning (18%)
Arizona	3,015	Falls (33%)	Poisoning (15%)

Source: Arizona Department of Health Services (2019). 2015-2018 Hospital Discharge Data. Unpublished data received by request.

Table 67. Asthma hospitalizations and emergency-room visits, 2015-2017 cumulative

GEOGRAPHY	NUMBER OF INPATIENT HOSPITALIZATIONS FOR ASTHMA (AGES 0 TO 5, EXCEPT NEWBORNS), 2015-2017 TOTALS	AVERAGE LENGTH OF STAY (DAYS) FOR ASTHMA HOSPITALIZATION (AGES 0- 5 EXCEPT NEWBORNS), 2015-2017	NUMBER OF EMERGENCY ROOM VISITS FOR ASTHMA (AGES 0 TO 5, EXCEPT NEWBORNS), 2015-2017 TOTALS
<b>Pascua Yaqui Tribe Region</b>	<b>8</b>	<b>2.8</b>	<b>7</b>
Pima County	463	2.3	1,241
Arizona	2,232	1.9	12,812

Source: Arizona Department of Health Services (2019). 2015-2017 Hospital Discharge Data. Unpublished data received by request.

Table 68. Non-fatal emergency-room visits by young children (ages 0-5) for unintentional injuries, 2015-2018 cumulative

GEOGRAPHY	NUMBER OF NON-FATAL EMERGENCY ROOM VISITS FOR CHILDREN (AGES 0-5), 2015-2017 TOTALS	MOST COMMON REASON FOR EMERGENCY ROOM VISIT	SECOND MOST COMMON REASON FOR EMERGENCY ROOM VISIT
<b>Pascua Yaqui Tribe Region</b>	<b>164</b>	<b>Falls (37%)</b>	<b>Struck by or against (20%)</b>
Pima County	24,212	Falls (45%)	Struck by or against (15%)
Arizona	181,068	Falls (46%)	Struck by or against (14%)

Source: Arizona Department of Health Services (2019). 2015-2018 Hospital Discharge Data. Unpublished data received by request.

Note: "Struck" denotes being struck by or against an object or person, not including vehicles.

Table 69. Infant mortality, calendar year 2017

GEOGRAPHY	INFANT DEATHS WITHIN 7 DAYS OF BIRTH, 2017	INFANT MORTALITY RATE (WITHIN 1 YEAR; PER 1,000 LIVE BIRTHS), 2017
Pima County	25	3.9
Arizona	234	5.6
Healthy People 2020 target		6.0

Source: Arizona Department of Health Services (2019). 2018 Child Mortality Data. Unpublished data received by request.

Table 70. Child mortality, 2015-2017 cumulative

GEOGRAPHY	TOTAL NUMBER OF CHILD DEATHS (AGES 0-4), 2015 TO 2017	TOTAL NUMBER OF CHILD DEATHS (AGES 0-17), 2015 TO 2017
<b>Pascua Yaqui Tribe Region</b>	<b>&lt;6</b>	<b>&lt;6</b>
Pima County	193	264
Arizona	1,682	2,357

Source: Arizona Department of Health Services (2019). 2018 Child Mortality Data. Unpublished data received by request.

## Family Support and Literacy

### Why it Matters

Families and caregivers play a critical role as their child’s first and most important teacher. Positive and responsive early relationships and interactions support optimal brain development during a child’s earliest years and lead to better social, physical, academic, and economic outcomes later in life.<sup>229,230,231,232</sup> Parental and family involvement is positively linked to academic skills and literacy in preschool, kindergarten, and elementary school.<sup>233</sup> Children benefit when their families have the knowledge, resources, and support to use positive parenting practices, and support their child’s healthy development, nutrition, early learning, and language acquisition. Specifically, knowledge of positive parenting practices and child development has been identified as one of five key protective factors that improve child outcomes and reduce the incidence of child abuse and neglect.<sup>x,234</sup>

**Early literacy.** Parental and family involvement is positively linked to academic skills and literacy in preschool, kindergarten and elementary school.<sup>235</sup> Early literacy promotion, through singing, telling stories, and reading together, is so central to a child’s development that the American Academy of Pediatrics has emphasized it as a key issue in primary pediatric care, aiming to make parents more aware of their important role in literacy.<sup>236</sup> A child’s reading skills when entering elementary school have been shown to strongly predict academic performance in later grades, emphasizing the importance of early literacy for future academic success.<sup>237,238</sup> Home-based literacy practices between parents and caregivers and young children, specifically, have been shown to improve children’s reading and comprehension, as well as children’s motivation to learn.<sup>239,240</sup> However, low-income families may face additional barriers to home-based literacy practices, including limited free time with children, limited access to books at home, and a lack of knowledge of kindergarten readiness.<sup>241</sup> Communities may employ many resources to support families in engaging with their children, including through targeted programs like home visitation programs and “stay and play” programs, or participating in larger initiatives like Read On Arizona or the national “Reach Out & Read” program.<sup>242</sup>

Arizona children’s reading scores are below the national average. Of all the students in Arizona, Native American students face the biggest need for improved literacy.<sup>243</sup> The Bureau of Indian

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<sup>x</sup> The Center for the Study of Social Policy developed Strengthening Families: A Protective Factors Framework™ to define and promote quality practice for families. The research-based, evidence-informed Protective Factors are characteristics that have been shown to make positive outcomes more likely for young children and their families, and to reduce the likelihood of child abuse and neglect. Protective factors include: parental resilience, social connections, concrete supports, knowledge of parenting and child development, and social and emotional competence of children.

Education (BIE)'s Family and Child Education (FACE) program was developed to address some of the unique early literacy needs of American Indian children. The program includes training for staff at child care centers, parenting education and support, Native American language and cultural learning, and reading and learning practices for the family and child.<sup>244</sup>

**Adverse childhood experiences.** Unfortunately, not all children are able to begin their lives in positive, stable environments. Experiences early in life can have lasting impacts on an individual's mental and physical health. Adverse Childhood Experiences (ACEs) have been linked to future risky health behaviors (such as smoking, drug use, and alcoholism), chronic health conditions (including diabetes, depression, and obesity), poorer life outcomes (such as lower educational achievement and increased lost work time), and early death.<sup>245</sup> Alternatively, Positive Childhood Experiences (PCEs), including positive parent-child relationships and feelings of safety and support, have been shown to have similarly cumulative, though positive, long-term impacts on mental and relational health.<sup>246</sup> Nationally and in Arizona, very young children are most at risk for child abuse, neglect, and fatalities from abuse and neglect. In 2017, children five years old and younger made up more than half (55%) of child maltreatment victims in Arizona.<sup>247</sup> Future poor health outcomes are also more likely as an individual's ACE score increases.<sup>248</sup> Children in Arizona are considerably more likely to have experienced two or more ACEs (27.3%), compared to children across the country (8.3%).<sup>249</sup> These children and their families may require specific, targeted resources and interventions in order to reduce harm and prevent future risk.<sup>250</sup> In Native American communities, where historical trauma compounds the effects of ACEs, healing may take place through an integration of healthcare-based interventions (physical, behavioral, and mental health), and interventions that build on the strength of culture and community.<sup>251,252,253</sup>

**Mental and behavioral health.** Behavioral health supports, both for children and caregivers, are often needed to address exposure to adverse childhood events. Infant and toddler mental health development involves the young child's developing capacity to "experience, regulate and express emotions; form close interpersonal relationships; and explore the environment and learn."<sup>254</sup> When young children experience stress and trauma they often suffer physical, psychological, and behavioral consequences and have limited responses available to react to those experiences. Understanding the behavioral health of mothers is also important for the well-being of Arizona's young children. Mothers dealing with behavioral health issues such as depression may not be able to perform daily caregiving activities, form positive bonds with their children, or maintain relationships that serve as family supports.<sup>255</sup>

**Child removals and foster care.** There are situations where the harm in remaining with their family is determined to be too great to a child and they are removed from their home, either temporarily or permanently. Children involved in foster care systems often have physical and

behavioral health issues, in addition to the social-emotional needs brought on by being removed from a parent’s care.<sup>256</sup> Foster parents often need education, support and resources to ensure they are able to successfully care for foster children who may have these added health needs. According to a 2015 Arizona Department of Child Safety Independent Review, focusing on evidence-based targeted interventions for families at risk of child removal—including home visitation, positive parenting programs, and family-based therapy—may help lower this risk, thus reducing placements in the foster care system.<sup>257</sup> In accordance with the Indian Child Welfare Act of 1978 (ICWA), many tribal governments manage their own child welfare systems and state systems must work cooperatively with them.<sup>258</sup> ICWA established federal guidelines that are to be followed when an Indian child enters the welfare system in all state custody proceedings. Under ICWA, an Indian child’s family and tribe are able and encouraged to be actively involved in the decision-making that takes place regarding the child, and may petition for tribal jurisdiction over the custody case. ICWA also mandates that states make every effort to preserve Indian family units by providing family services before an Indian child is removed from his or her family, and after an Indian child is removed through family reunification efforts.<sup>259</sup>

## What the Data Tell Us

### Home Visitation

- According to the 2018 First Things First Pascua Yaqui Tribe Regional Partnership Council Needs and Assets Report, from fiscal year 2011 to fiscal year 2015, the Pascua Yaqui Tribe Regional Partnership Council implemented the Home Visitation strategy to expand and enhance the services available in the region to support families with children birth to age five on the reservation.<sup>260</sup>
- Parenting Education services have been provided since fiscal year 2011 to families with young children in the region through different strategies: Community-Based Family Education, Parent Education Community-Based Training, Parenting Education and Parenting Outreach and Awareness. Through the implementation of these funded approaches, parents and other caregivers have completed a voluntary series of community-based classes on topics like parenting skills, brain development, and nutrition. Families have also received books and participated in events on the reservation to increase their awareness of the importance of early childhood development, including early literacy, language acquisition, and tribal heritage learning opportunities.<sup>261</sup>

### Child Removals and Foster Care

- Child welfare services in the Pascua Yaqui Tribe Region are overseen by the Pascua Yaqui Social Services Department. The 2018 First Things First Pascua Yaqui Tribe Regional Partnership Council Needs and Assets Report indicates that in 2014, there were 377 reports of abuse or neglect; in 2015 the number of reports was 321.<sup>262</sup>
- The number of reports of child abuse or neglect made to Pascua Yaqui Child Protective Services that were confirmed or substantiated decreased from 184 in 2014 to 115 in 2015. The numbers of substantiated reports in these two years represent 49 percent and 36 percent of all reports made, respectively.<sup>263</sup>

## Systems Coordination among Early Childhood Programs and Services

### Why it Matters

From November 2016 to June 2017, First Things First convened the second Arizona Early Childhood Task Force, comprised of diverse leaders from across the state. The goal of the task force was to create an ambitious, yet attainable, statewide five-year plan for First Things First and Arizona’s early childhood system. Building from the model early-childhood system developed in 2010, the task force identified six desired outcomes, one of which is “When the early childhood system is successful, everyone will benefit from living in communities where the early childhood system is high-quality, centered on children and families, coordinated, integrated and comprehensive.” First Things First’s role in building this system is to foster cross-system collaboration among local, state, federal, and tribal organizations to improve the coordination and integration of programs, services, and resources for young children and their families.

Through system building, First Things First connects various components of the early childhood system to create a more holistic system that promotes shared results for children and families. Agencies that work together are often easier for families to access, and the services they provide are more responsive to those families’ needs. Coordination efforts may also increase agencies’ capacity to deliver services by identifying and addressing gaps in the service delivery continuum. By supporting a variety of coordination efforts, First Things First aims to create a high quality, interconnected, and comprehensive system of early-childhood service delivery that enhances children’s overall development and that is timely, culturally responsive, family driven, and community based. Determining how these efforts are affecting each of the 28 regions and their families can help inform services, programs, and policy decisions to benefit families and young children throughout the state.

### What the Data Tell Us

#### **Pascua Yaqui Tribe Children and Families Provider Networking Board**

The Tribal Children and Families Provider Networking Board was created by a Tribal Council executive order and resolution to coordinate services for tribal children and families and to recommend policies to tribal council for the well-being of the tribal children and families. The Tribal Networking Board has been working internally on their structure including the Itom Yoemia Initiative to develop the tribal strategic plan. First Things First regional staff met with tribal staff from numerous departments (i.e. tribal health department, social services, education, law enforcement, fire, housing, language and culture, attorney general, and others)

to support the tribal government work to enhance the tribal early childhood development and health system.

**Pascua Yaqui Tribe Awareness Campaign Committee**

The Tribal Awareness Campaign Committee is a collaborative effort between Pascua Yaqui departments and programs (i.e. tribal health department, education, law enforcement, social services, library, WIC, KPYT radio station, and others) to better serve families and increase awareness on a variety of social issues affecting the community. The main focus has been developing presentations, trainings and events such as Child Abuse Prevention Month (April), Children’s Day and Children’s Mental Health Awareness Month (May), Community Baby Shower, among others. First Things First regional staff joined the Tribal Awareness Campaign Committee to support its efforts and to leverage the resources and infrastructure available to increase community awareness about the importance of early childhood development and health and the services that are available.

## Communication, Public Information and Awareness

### Why it Matters

Public awareness of the importance of early childhood development and health is critical in building a comprehensive, effective early childhood system in Arizona. Building public awareness and support for early childhood impacts individual behaviors as well as the broader objectives of system building. For the general public, information and awareness is the first step in taking positive action in support of children birth to 5. This could include a range of actions—from influencing their personal networks by sharing early childhood information to actively encouraging community leaders to support programs and services for young children. For parents and other caregivers, awareness is the first step to engaging in programs or behaviors that will better support their child’s health and development.

There is no single communications strategy that will achieve the goal of making early childhood an issue that more Arizonans value and prioritize. Therefore, integrated strategies that complement and build on each other are key to any successful strategic communications effort. Employing a range of communications strategies to share information—from traditional broad-based tactics such as paid media advertising to grassroots, community-based tactics such as community outreach—ensures that diverse audiences are reached more effectively across multiple media platforms. A thoughtful and disciplined combination of methods of delivering information is required to ensure multiple messaging touch-points for diverse audiences: families, civic organizations, faith communities, businesses, local leaders, and others.

### What the Data Tell Us

Since State Fiscal Year 2011, First Things First (FTF) has led a collaborative, concerted effort to build public awareness and support across Arizona employing integrated communications strategies that now include:

- strategic messaging and branding
- community outreach
- community awareness
- social media
- digital content marketing
- earned media
- paid media advertising

Progress toward building support for children birth to age 5 can be measured by changes in awareness, attitudes and behaviors, as demonstrated through key results of a periodic statewide survey and through tactical impact measures. The most recent statewide survey was

held in September 2018. Key results of this statewide survey – which was comprised of both a general phone survey and an online survey of parents of young children specifically – included the following:

- Those who agree that the state should ensure all children have access to early childhood services increased from 80% in 2012 to 84% in 2018.
  - Among parents, this measure increased from 81% in 2016 (the first available parent survey results) to 87% in 2018.
- Those who agree that a child who received early education and healthcare services before age 5 is more likely to succeed in school and beyond increased from 82% in 2012 to 88% in 2018.
  - Among parents, agreement increased from 85% in 2016 to 87% in 2018.
- Those who agree that the state should put the same priority on early education as it does on K-12 education increased from 62% in 2012 to 72% in 2018.
  - Among parents, agreement increased from 69% in 2016 to 74% in 2018.

While understanding and supporting early childhood in general is critical, it's also important that Arizonans have a trustworthy source of early childhood resources and know about the availability of early childhood resources, programs and tools. For this reason, building awareness of FTF as a credible source is critical. Results of the most recent statewide survey show that, while some progress has been made, there is still more to be done to increase awareness about FTF.

- In the 2018 general survey, 87% of respondents had never heard of FTF, compared to 89% in 2012.
  - Among parents specifically, more had heard of FTF, with 66% stating they had never heard of FTF, compared to 69% in 2016.

While this statewide survey offers a measure of broad changes in attitude and awareness, specific tactical measures of awareness and support-building strategies employed by FTF offer another point of information. These include:

- FTF implemented three annual statewide awareness campaigns since the last regional needs and assets reporting period. The SFY17-SFY18 campaign - Help Them Get There - shared messaging about the importance of the early years to future school and life success and that parents' everyday positive interactions with babies, toddlers and preschoolers promote healthy development. The SFY19 campaign – Givers of Care – focused specifically on the important role of caregivers and quality early learning environments.

- These paid campaigns reached a large number of Arizonans, measured through the total number of impressions, which directly impacts awareness. Traditional media impressions refer to television, radio, cinema and billboard ads while digital media impressions refer to online ads which appear on both desktop and smartphone devices. These statewide impressions – which measure the estimated number of views of FTF ads – are detailed below.

Table 71. First Things First media awareness campaign impressions, SFY2017-SFY2019

	SFY17	SFY18	SFY19
Traditional media impressions	10 million	17 million	11 million
Digital media impressions	66 million	100 million	76 million

Source: First Things First (2019). Communications Strategy Data. Unpublished data received by request

- In addition, targeted digital advertising allows geographically-based targeting of audiences within regions with the ability to measure the number of click-throughs that digital ads garnered. The click-throughs delivered viewers to the FTF website. In SFY19, digital advertising led to a statewide total of 521,652 clicks-throughs to the FTF website where families could access more information and resources.
- In the area of social media, engagement with FTF early childhood online platforms has grown over the years. Particular success has been seen in the growth of Facebook Page Likes for FTF, which grew from just 3,000 in 2012 to 142,600 in 2019. Content is also distributed through Twitter, LinkedIn and Instagram.
- Since inception in SFY17, FTF’s digital content marketing strategy which targets parents and families with engaging and informative video and blog posts via website, social media and email has expanded its reach. In SFY19, 40 original, high-quality content pieces were published.
- In SFY19, an online searchable database of early childhood programs funded by FTF in all the regions launched. In the first six months, over 24,187 visits were logged.

In addition, FTF began a community engagement effort in SFY14 to recruit, motivate and support community members to take action on behalf of young children. The community engagement program is led by community outreach staff in regions which fund the FTF Community Outreach strategy. This effort focuses on engaging individuals across sectors –

including business, faith, K-12 educators, and civic organizations – in the work of spreading the word about the importance of early childhood as trusted, credible messengers in their communities.

Focused efforts to engage parents’ most trusted messengers – which include pediatricians – included creating and distributing a toolkit for health providers to help them better understand and share information on the statewide free Birth to 5 Helpline. This toolkit was also distributed to attendees of the annual conference of the Arizona Chapter of the American Academy of Pediatrics. Other statewide awareness partnerships included creation and distribution of a grocery list tip pad for parents and caregivers sharing Read On Arizona’s Smart Talk tips, a digital content sharing partnership with Expect More Arizona and partnering with the Arizona Association for the Education of Young Children on a social media campaign promoting Week of the Young Child.

Because Arizona is so vast – with more than 500,000 children under age six and nearly 400,000 households with kids under age six – engaging others in spreading the word about early childhood is critical to reaching across diverse geographic areas and expanding our reach. Supporters and Champions – who are trained in early childhood messaging and effective ways to share early childhood information – reported a total of 940 positive actions taken on behalf of young children throughout Arizona in SFY19. These actions range from leading presentations in support of early childhood to sharing FTF’s early childhood resources with parents at community events. The table below shows total recruitment of Supporters and Champions through SFY19 and actions taken in SFY19.

Table 72. FTF Engagement of Early Childhood Supporters and Champions

GEOGRAPHY	SUPPORTERS	CHAMPIONS	SUPPORTER AND CHAMPION ACTIONS IN SFY19
<b>Pascua Yaqui Tribe Region</b>	<b>46</b>	<b>24</b>	<b>5</b>
Arizona	6,258	1,170	940

*Source: First Things First (2019). Communications Strategy Data. Unpublished data received by request*

First Things First has also led a concerted effort to build awareness among policymakers at all levels (federal, tribal, state and municipal) of the importance of early childhood. This includes: in-office meetings with elected leaders to provide general information on early childhood, as

well as discuss the impact of proposed legislation; regular communication to policymakers with updates on early childhood research and the work of FTF (such as a quarterly email newsletter for policymakers and their staff); and site tours of FTF-funded programs to allow policymakers to see the impact of early childhood investments in their area. In SFY19, FTF also launched ACT4KIDS, a text-based system that alerts participants to timely developments in early childhood policy and opportunities to engage with policymakers. In its first nine months of implementation, more than 700 Arizonans had signed up to participate in ACT4KIDS.

In addition, FTF actively participates in the Arizona Early Childhood Alliance – comprised of more than 50 early childhood system leaders like the United Ways, the state affiliates of the National Association for the Education of Young Children, Southwest Human Development, Children’s Action Alliance, Read On Arizona, Stand for Children, Expect More Arizona and the Helios Foundation – represent the united voice of the early childhood community in advocating for early childhood programs and services. For the past three years, the Alliance has also led an annual Early Childhood Day at the Legislature, which have drawn hundreds of Arizonans to the state Capitol to engage with policymakers and show their support for early childhood development and health.

## Appendix 1: Map of Zip Codes of the Pascua Yaqui Tribe Region

Figure 7. Map of the ZIP codes in the Pascua Yaqui Tribe Region



Custom map by the Community Research, Evaluation, & Development (CRED) Team using shapefiles obtained from First Things First and the U.S. Census Bureau 2019 TIGER/Line Shapefiles (<https://www.census.gov/cgi-bin/geo/shapefiles/index.php>).

## Appendix 2: Zip Codes of the Pascua Yaqui Tribe Region

Table 73. Zip Code Tabulation Areas (ZCTAs) of the Pascua Yaqui Tribe 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 PASCUA YAQUI REGION	THIS ZCTA IS SHARED WITH
<b>Pascua Yaqui Tribe Region</b>	<b>3,478</b>	<b>470</b>	<b>802</b>	<b>287</b>		
85757	3,478	470	802	287	20%	Pima South

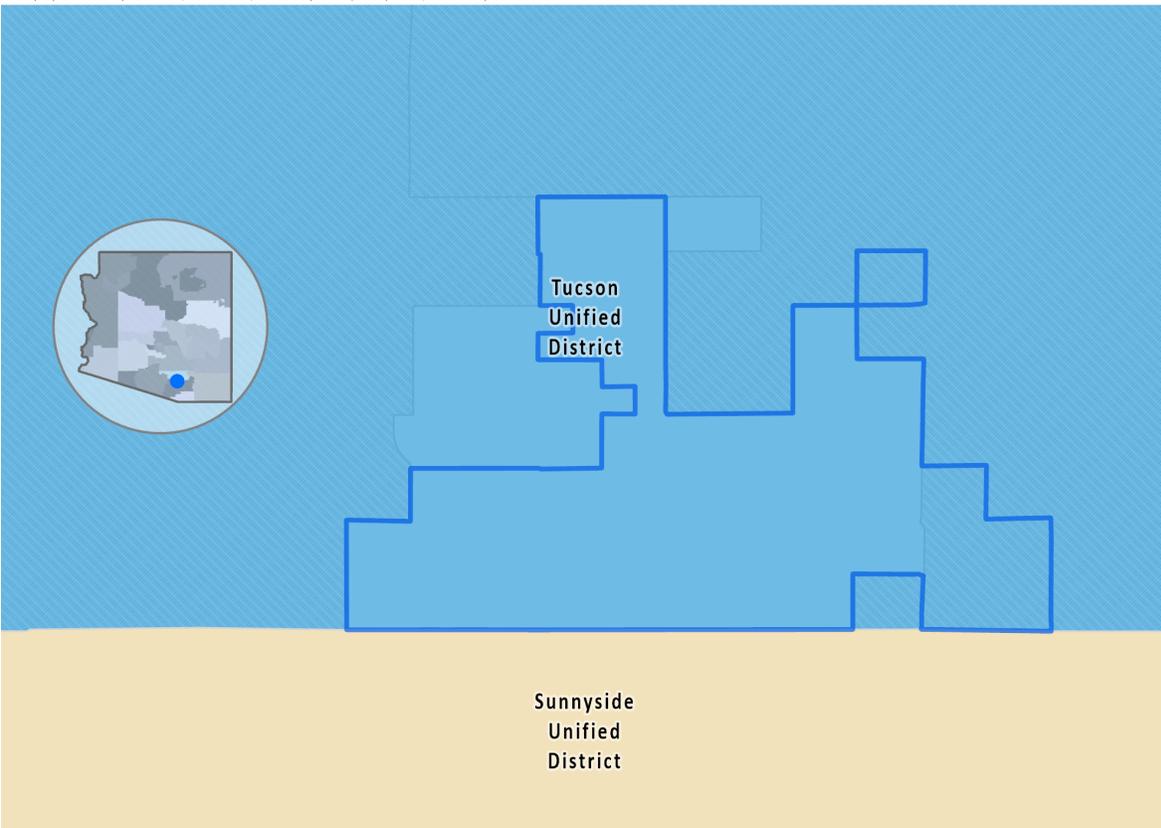
Source: U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P1, P4, & P20.

Note: The Zip Code Tabulation Area 85746 overlaps the Pascua Yaqui Region but has no population living within the region. This zip code is shared with the Pima South, Pima North, and Tohono O'odham Nation Regions.

## Appendix 3: Map of School Districts in the Pascua Yaqui Tribe Region

Figure 8. Map of the school districts in the Pascua Yaqui Tribe Region

Map by Community Research, Evaluation, & Development (CRED) Team, University of Arizona



Custom map by the Community Research, Evaluation, & Development (CRED) Team using shapefiles obtained from First Things First and the U.S. Census Bureau 2019 TIGER/Line Shapefiles (<https://www.census.gov/cgi-bin/geo/shapefiles/index.php>).

Table 74. School Districts in the Pascua Yaqui Tribe Region

SCHOOL DISTRICT	SCHOOLS IN DISTRICT	K-3RD GRADE STUDENTS IN DISTRICT	PERCENT OF K-3RD GRADES STUDENTS IN REGION	THIS DISTRICT IS SHARED WITH
<b>Pascua Yaqui Tribe Region</b>				
Tucson Unified School District	86	13,803	0%	Pima North, Pima South

Source: Arizona Department of Education (2019). FY 2018 & FY 2019 Enrollment Data. Custom tabulation facilitated by agency staff.

Note: Note: This table only contains Districts/LEAs with enrolled K-3rd grade students physically located within regional boundaries. It does not reflect the residence of students that attend these schools. It does not include high school districts. These are the districts and charter operators from which data on preschool to 3rd grade students were drawn for the tables and figures presented in this report. The percentage shown in the “Percent of K-3rd grade students in the region” column was used to apportion district-level enrollment counts to the region. All other data were aggregated at the school level. The “Schools in district/LEA” and “K-3rd grade students in district/LEA” columns reflect totals for the district, not only the portion within the region. There are no district schools physically located within the Pascua Yaqui Tribe Region.

Table 75. Tucson Unified School District schools with enrollment of 15 or more Pascua Yaqui children, 2013 2014 school year

NAME OF SCHOOL	TYPE OF SCHOOL	NUMBER OF STUDENTS
Johnson	Elementary school	160
Miller	Elementary school	43
White	Elementary school	38
Warren	Elementary school	26
Vesey	Elementary school	22
Lawrence	3rd to 8th	238
Roskruge Magnet	K to 8th	50
Safford Magnet	K to 8th	50
Valencia	Middle school	56
Pistor	Middle school	49
Utterback Magnet	Middle school	19
Tucson Magnet	High school	113
Cholla High	High school	108
Pueblo	High school	48

Source: *First Things First. (2018). Pascua Yaqui Tribe Regional Partnership Council 2018 Needs and Assets Report.*

## Appendix 4: Data Sources

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