

 **FIRST THINGS FIRST**

Colorado River Indian Tribes Region



2022

NEEDS AND ASSETS
REPORT

INTRODUCTORY SUMMARY AND ACKNOWLEDGMENTS

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 start 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 in our communities and our state.

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

The report is organized by topic areas pertinent to young children in the region, such as 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 CRIT 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 and education of young children in their care. It is our sincere hope that this information will help guide community conversations about how we can best support school readiness for all children in the CRIT Region. To that end, this information may be useful to local stakeholders as they work to enhance the resources available to young children and their families and as they make decisions about how best to support children birth to 5 years old in communities throughout the region.

Acknowledgements

The FTF Colorado River Indian Tribes Regional Partnership Council wishes to thank all of the federal, state and local partners whose contributions of data, ongoing support and partnership with First Things First made this report possible. These partners included the Arizona Departments of Administration (Employment and Population Statistics), Child Safety, Economic Security, Education, and Health Services; the Arizona Health Care Cost Containment System; Child Care Resource and Referral; and the U.S. Census Bureau. Local partners included CRIT Head Start, the CRIT Social Services Department, and the CRIT Police Department. We are especially grateful for the spirit of collaboration exhibited by all our partners during an unprecedented time of crisis for our state and our nation.

We also want to thank parents and caregivers, local service providers and members of the public who attended regional council meetings and voiced their opinions, as well as all the organizations working to transform the vision of the regional council into concrete programs and services for children and families in the CRIT Region.

Lastly, we want to acknowledge the current and past members of the CRIT Regional Partnership Council whose vision, dedication, and passion have been instrumental in improving outcomes for young children and families within the region. As we build upon those successes, we move ever closer to our ultimate goal of creating a comprehensive early childhood system that ensures children throughout Arizona are ready for school and set for life.

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EXECUTIVE SUMMARY

First Things First (FTF) is the only state agency in Arizona dedicated exclusively to investing in and enhancing the early childhood system. FTF works through regional partnership councils that partner with local communities to create a family-centered, comprehensive, collaborative, and high-quality early childhood system that supports the development, health, and early education of all Arizona children, from birth to age five.

Every two years, each regional partnership council develops a report detailing the needs and assets of the region's youngest children and their families. The intent of the report is to inform the council and the local community about the overall status of children zero to five years of age in the region, in order to support data-driven decision making around future funding and programming. Data for this report were gathered from federal and local data sources as well as data from state agencies provided directly to FTF. Furthermore, additional data specific to the Colorado River Indian Tribes were obtained from various tribal departments and agencies with approval from the Colorado River Indian Tribal Council.

Overview of the FTF Colorado River Indian Tribes Region

When First Things First was established by the passage of Proposition 203 in November 2006, Arizona's federally recognized Tribes and nations were consulted to determine if they would like to participate within a First Things First designated region or elect to be designated as a separate region. The Colorado River Indian Tribes was one of ten tribes that chose to be designated as its own region, the FTF Colorado River Indian Tribes (CRIT) Region. The FTF CRIT Region, defined as the Arizona portion of the Colorado River Indian Tribes Reservation, lies entirely in La Paz County in southwest Arizona. The FTF CRIT Region serves both Tribal members and non-members on the Arizona portions of the Colorado River Indian Reservation and in the Town of Parker.

The FTF Colorado River Indian Tribes Regional Partnership Council (Council) makes strategic investments to support the healthy development and learning of the young children in the region. The Council's priorities include:

- Improving the quality of child care and preschool programs;
- Providing access to high quality, culturally responsive early care and education;
- Promoting health, nutrition and physical activity;
- Strengthening families and early literacy; and
- Supporting the needs of infants and toddlers in the child welfare system.

The following section provides a summary of the key findings for each of the six domains of the 2022 Regional Needs and Assets report, highlighting the major data findings, the needs and assets they uncover for the FTF CRIT region.

Key Findings

Population Characteristics

The demographic profile of residents in a particular community helps policy and decision makers make effective decisions that will positively impact the community's well-being. The FTF CRIT Region has a total population of 7,077 residents and close to 739 children under the age of six. The total number of births has remained stable in recent years, and the population of zero to five years old is projected to stay relatively consistent over the next several decades. There are a total of 362 enrolled members of the Colorado River Indian Tribes under the age of six, 233 of whom reside on-reservation. The race and ethnicity breakdown of the adult population in the region is more diverse than the rest of the state with 27% of adults and 42% of children under the age of five identifying as American Indian.

The majority of households with children under six are married-couple households (51%), with about 28% of households led by single females and 21% led by single males. The share of married-couple households in the region is much smaller compared to the state overall (68%). Additionally, of children under 18 who live in the same household as a grandparent, 49% are primarily cared for by the grandparent.¹ The relatively high percentage of children living in a multigenerational household is an asset for the region, as is the experience of growing up in dual-parent households, since this means the children likely have more permanent connections with adult role models. Though living with grandparents can be an asset, it can also indicate that the child's parents are emotionally or financially unable to care for their child on their own and there may be need for resources and parenting education for grandparents who are taking on the role of raising a second generation. Additionally, about half of all children are living in single-family households which may indicate a more stressful home environment and less time spent with their parents who are likely the sole breadwinners for their family.

Economic Circumstances

As children are growing and developing, outcomes such as school achievement, physical health, and emotional well-being are all impacted by a child's economic situation.² The average unemployment rates for both the state and county have stayed stable and the labor force has increased since 2016, indicating the county as a whole is healthy and growing. In the CRIT Region, most children under age six (89%) live in a household where at least one adult is in the labor force. The median annual income for families with children under 18 in the county is consistently lower than the statewide median for all household types. Married-couple families in the county have a median income of about \$67,000 while single females have a median income of \$17,000. With the self-sufficiency standard for an adult with a young child in La Paz County being around \$41,000, single females are likely struggling and need for support to help their child's growth and development.

¹ U.S. Census Bureau; American Community Survey. 2019 American Community Survey 5-Year Estimates, Tables B05009 & B17006; generated by AZ FTF; using American FactFinder; <<http://factfinder2.census.gov>>

² Brooks-Gunn, J., Duncan, G. (1997). *The effects of poverty on children. The future of children*, 55-71.

In the CRIT Region, 38% of children live under the poverty level, more than the state (26%). In addition, 41% of the American Indian population of La Paz County live in poverty. These data may help identify populations and subgroups to target for further intervention or support around increasing financial resources. Additionally, the school districts and populations with lower poverty rates may be able to identify strategies or assets within their areas that can be applied to others.

Additionally, 20% of residents in the CRIT Region spend 30% or more of their income on housing, which is a smaller proportion than in La Paz County or for the state overall. About three-quarters of residents in the CRIT Region (77%) live in households with a computer and internet, which is lower than the state (87%). Of people living in households with a computer and internet in the region, 83% have fixed broadband with a cellular data plan. With the increased importance and reliance on technology to support remote education and employment, especially given the ongoing impact of the COVID-19 pandemic, data related to internet and technology accessibility may continue to be important indicators to consider.

Educational Indicators

Children's participation in early learning experiences is likely to result in higher academic performance in future years.³ About half of all children between ages three and four (51%) are enrolled in nursery school, preschool, or kindergarten in the CRIT Region. About 39% of the third-grade students in the Parker Unified School District scored proficient or highly proficient on the AZ Merit English Language Arts while 50% of students scored proficient or highly proficient on Math assessments. These results showing that roughly half of the region's third graders are proficient in math and English are concerning and supports the need for greater participation in early education.

The high school graduation rate in the CRIT Region has increased annually in the last few years, to 88% in 2020. From 2018 to 2020, the percent of students dropping out of high school was very low in the CRIT Region; under three percent. Three quarters of the adults in the region (75%) have completed high school/received a GED or pursued further education past high school. Among mothers in the region, a similar percentage (74%) have at least completed high school or their GED, a slightly lower percentage than the state. In general, residents in the CRIT Region have a high level of educational attainment, indicating a high level of understanding of the value and importance of education that will hopefully be incorporated into parenting.

Early Learning

Participation in early care and education programs plays an important role in preparing children for kindergarten and beyond.⁴ About 68% of households are assumed to need child care based on the

³ Bakken, L., Brown, N., Downing, B. (2017) *Early Childhood Education: The Long-Term Benefits*. *Journal of Research in Childhood Education*. Volume 31. Issue 2. Retrieved from: <https://doi.org/10.1080/02568543.2016.1273285>

⁴ University of Massachusetts Global (2021) *What is the purpose of early childhood education? Why it's so important*. Retrieved from: <https://www.umassglobal.edu/news-and-events/blog/what-is-purpose-of-early-childhood-education>

employment status of the adults in the household, yet only 51% of preschool-aged children in the region are enrolled in early care and education programs. According to a local expert, one factor that may influence this finding is the availability and cost of child care in the region. Child care subsidies in the region appear to be helping as the number of children receiving subsidies increased.

Head Start programs are assets in the region as children attending these programs tend to score higher in cognitive and social-emotional development than those who do not. A total of 147 children in the region are enrolled in CRIT Head Start. Increasing access to quality early care and education programs is essential for the regions' children, especially since early care and education teachers throughout the state are not well compensated, most earning minimum wage. Almost half leave the profession within five years, impacting the continuity and quality of care.

Children receiving AzEIP referrals have increased in the region, indicating increased need for services to support families with children experiencing developmental delays. The percentage of children in the region who participate in special education while in preschool but transition out before entering kindergarten was generally steady until 2020. The most common types of disabilities for preschool children were developmental delays and speech and language impairments.

Child Health

Ensuring healthy development through early identification and treatment of children's health issues helps families understand healthy developmental pathways and how health issues affect children and their school readiness.⁵ According to data provided by the Indian Health Service (IHS) from 2018-19, there were 510 children under six years old and a total of 4,517 active users of IHS among the Colorado River Indian Tribes. Seventeen percent of young children aged 0 to 5 in the CRIT Region are estimated to be without health insurance, along with 13% of the entire population in the region. In the calendar year 2019, CRIT Region residents gave birth to 135 babies. Of the mothers who gave birth in the region in 2019, 36% were American Indian. In 2019, 17% of babies were born preterm, almost double the proportion across the state (9%). Forty-one percent of all mothers received at least some form of prenatal care, while five percent or less of all mothers received no prenatal care visits.

In order to better understand the characteristics and experience of parents, grandparents, and caregivers in the CRIT Region, a survey was administered to caregivers of children zero to five. Among survey respondents, 74% of children received health care at a pediatrician's office or at a private practice, while an additional 19% went to Indian Health Service. Overall, caregivers were very satisfied with their child's health care, with 45% rating the quality of care as excellent. In addition, 39% of caregivers indicated that the COVID-19 pandemic had an impact on providing child care.

Data from the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

⁵ *Schools & Health (2016). Impact of Health on Education. Retrieved from <http://www.schoolsandhealth.org/pages/Anthropometricstatusgrowth.aspx>*

indicate that 37% of children in the CRIT Region ages 2 and older were either overweight or obese in 2020. Seventy-one percent of new mothers who participated in WIC were overweight or obese before becoming pregnant, which is higher than the state (64%). The obesity rate for children and mothers is higher than the state average, calling to attention the need for additional opportunities to access and engage in healthy behaviors such as exercise and good nutrition. Furthermore, the percentage of infants participating in WIC in CRIT being breastfed (58%) has generally increased from 2017 to 2020. Although immunization rates vary by vaccine, over 90% of children in child care and kindergarten in Arizona had completed each of the three major (DTAP, polio, and MMR) vaccine series.

Family Support

Support for young families is an essential piece of the holistic efforts around kindergarten readiness and long-term success for children.⁶ The number of families and children receiving assistance from SNAP, TANF, and WIC has decreased over the years. While the number of young children participating in SNAP and TANF has declined since 2017, SNAP still supported about 454 children in the CRIT Region in 2020. Additionally, a total of 510 households participated in the Food Distribution Program on Indian Reservations (FDPIR) over the three year period between 2019 and 2021. Approximately three-quarters of students in the Parker Unified School District (74%) have been eligible for free or reduced-price lunch since 2018. Finally, child welfare and public safety data show that among all child welfare investigations conducted, a total of 28% were determined to be substantiated. Furthermore, there were a total of 264 juvenile offenses in the region in 2021, which is a noticeable increase from the prior two years.

⁶ *Center for the Study of Social Policy (2013). Knowledge of Parenting and Child Development. Retrieved from http://www.cssp.org/reform/strengthening-families/2013/SF_Knowledge-of-Parenting-and-Child-Development.pdf*

BACKGROUND AND APPROACH

Family well-being is an important indicator of child success.^{7, 8} Healthy families and healthy communities create a context in which young children can thrive, developing the cognitive, emotional, motor, and social skills they will need to succeed in school and life.⁹ Early childhood interventions promote well-being and impact outcomes for children and adults later in life, including school readiness, parent involvement, K-12 achievement, educational attainment, crime prevention and remedial education.¹⁰

First Things First (FTF) is one of the critical partners creating a family-centered, comprehensive, collaborative, and high-quality early childhood system that supports the development, health, and early education of all Arizona children from birth to age five. FTF is intent on bolstering the current child-focused systems within Arizona as a strategic way to maximize current and future resources. The CRIT Regional Partnership Council (Council) makes strategic investments to support the healthy development and learning of the young children in the region. The Council's priorities include:

- Improving the quality of child care and preschool programs;
- Providing access to high quality, culturally responsive early care and education;
- Promoting health, nutrition and physical activity;
- Strengthening families and early literacy; and
- Supporting the needs of infants and toddlers in the child welfare system.

Methodology

This is the eighth Needs and Assets report conducted on behalf of the FTF CRIT Regional Partnership Council. It fulfills the requirement of ARS Title 8, Chapter 13, Section 1161, to submit a biennial report to the Arizona Early Childhood Health and Development Board detailing the assets, coordination of opportunities, and unmet needs of children from birth to age five and their families in the region. This report is designed to provide updated information to the FTF CRIT Regional Partnership Council about

⁷ Bøe, T., Serlachius, A., Sivertsen, B., Petrie, K., Hysing, M. (2017) *Cumulative effects of negative life events and family stress in children's mental health: the Bergen child study*. *Social Psychiatry and Psychiatric Epidemiology*. Retrieved from <https://link.springer.com/article/10.1007/s00127-017-1451-4>

⁸ Sosu, E., Schmidt, P. (2017) *Economic deprivation and its effects on childhood conduct problems: the mediating role of family stress and investment factors*. Retrieved from <https://doi.org/10.3389/fpsyg.2017.01580>

⁹ Knitzer, J. (2000). *Early childhood mental services: a policy and systems development perspective*. In J. Shonkoff & S. Meisels (Eds.), *Handbook of early childhood intervention* (pp. 416-438). New York, NY: Cambridge University Press.

¹⁰ Reynolds, A., Ou, S., Mondt, C., Hayakawa, M. (2017) *Processes of early childhood interventions to adult well-being*. *Child Development*. Volume 88 Issue 2. Retrieved from <https://doi.org/10.1111/cdev.12733>

the needs and assets in their region to help them make important programmatic and funding decisions. This report describes the current circumstances of young children and their families as it relates to unmet needs and assets for the region.

This report is organized by topic area followed by subtopics and indicators. When available, data are presented for the state, county, region, and subregional breakdowns as appropriate. Key data indicators are represented in this report in six unique domains:

- Population characteristics;
- Economic circumstances;
- Educational indicators;
- Early learning;
- Child health; and
- Family support.

A systematic review designed to reveal the needs and assets of the CRIT Region was used to collect and summarize data for this report. Quantitative data components included a review and analysis of current and relevant secondary data describing the FTF CRIT Region, La Paz County, and State of Arizona. Wherever possible, data throughout the report are provided specifically for the FTF CRIT region, and are often presented alongside data for the County, the State of Arizona, and for all Arizona reservations for comparative purposes.

Secondary data was gathered to better understand demographic trends for the CRIT Region. The assessment was conducted using data from state and local agencies and organizations who provided public data or who have an existing data sharing agreement with FTF. A special request for data was made to the following state agencies by First Things First on behalf of Harder+Company Community Research: Arizona Department of Education (ADE), Arizona Department of Economic Security (DES), Arizona Department of Health Services (ADHS), Department of Child Safety (DCS) and First Things First itself.

Further secondary data were gathered directly from public databases. For example, demographic data included in this report were primarily gathered from the US Census and the American Community Survey. Likewise, early education data were gathered from the US Children's Bureau, an office of the Administration for Children & Families. Understanding the true needs and assets of the region required extracting data from multiple data sets that often do not have similar reporting standards, definitions, or means for aggregating data. This suggests that, for some indicators, data were only available at the county level, for small towns, or certain zip codes, whereas for other indicators, data were available at all levels. Whenever possible this report presents all data available. In some cases, not enough data are available to make meaningful conclusions about a particular indicator within a region, city, or county.

Furthermore, many agencies are collecting data independent of other public entities which results in

duplication of data efforts, gaps in the collection of critical indicators, or differences in method of collection, unit of analysis, or geographic level. Many indicators that are of critical importance to understanding the well-being of children under age six and their families were not available for the FTF CRIT Region, such as more detailed data on housing or homelessness, hearing loss screenings, and child welfare. The analysis presented in this report aims to integrate relevant data indicators from a variety of credible sources, including regional and subregional, and/or community-level analyses for a subset of data indicators. This report represents the most up-to-date representation of the needs and assets of young children and their families in the region and interpretation of the identified strengths of the community (i.e., the assets available in the region).

In addition to systematically reviewing secondary data, key findings and data trends were synthesized and presented to the FTF Regional Partnership Council and community members, FTF Research and Evaluation Unit, and FTF Regional Directors which allowed for a deeper discussion on the interpretation of the findings. Whenever possible, the rich context provided by these contributors is incorporated throughout the report to help contextualize the findings. To further expand the meaningfulness of data trends, a brief literature review was conducted to ensure the inclusion of other relevant research studies that help explain the needs and assets of the region.

Per FTF guidelines, education data from the Arizona Department of Education (ADE), with counts of or percentages related to fewer than eleven, excluding counts of zero (i.e., all counts of one through ten) are suppressed. Percentages greater than 98% or less than 2% were presented as >98% and <2% respectively. For data related to health or developmental delay, all counts and rates/ratios/percentages that are based on non-zero counts less than six, excluding counts of zero, (i.e., all counts of one through six, depending on the indicator) are suppressed.

Additionally, a Caregiver Survey was administered to better understand the characteristics and experience of parents, grandparents, and caregivers in the CRIT Region. The survey was made available online and in-person throughout the CRIT Regional Partnership Council between November 29, 2021 and March 25, 2022. In total, 52 surveys were collected. Key findings from the Caregiver Survey that speak to child health outcomes and indicators are included in the Child Health section. A separate brief was produced for the CRIT Regional Partnership Council that summarizes complete findings from the survey.

Limitations

In the United States, the COVID-19 pandemic began in March 2020 and continues through the writing of this report. Thus, it is important to contextualize how the pandemic impacted data availability and the process to develop this report. First, public agencies had limited capacity to support data requests while they focused on their pandemic response, therefore some data sets could not be provided. For this reason, the timeline for the 2022 RNA report was modified to adapt to the barriers in collecting data and moving forward with the report process. For this reason, the timeline for the 2022 RNA report was modified to adapt to the barriers in collecting data and moving forward with the report process.

This report relied primarily on secondary data. Most of the data were extracted by teams other than the evaluation team conducting the needs and assets assessment, except for the data of the Arizona Department of Education (ADE) which the evaluation team accessed through the ADE data system.

Some of the most recent data were not available for this report. The demographic and economic profile of the region relied mostly on Census and ACS data. For some of the Census indicators, only 2010 Census data were available as 2020 Census data were delayed due to COVID-19. For some of the indicators reported, the most recent data for the region was released in 2018, thus trends may have changed within the past four years, especially due to the pandemic. For example, the most recent data for the Child Care Market Rate Survey is from 2018. This survey provides the median cost for licensed centers, approved family homes and certified group homes, data that has likely changed in recent years.

Another limitation impacting the findings and interpretation of findings is the targeted population included in each of the different data sources. For many domains reported, data were often available only at the county level rather than the region, and data for children often includes children under 18 rather than children under six. Additionally, ACS estimates are less reliable for small geographic areas or areas with smaller populations. Similarly, rural areas tend to be undercounted, along with non-white populations. Federal data also have similar limitations. For example, WIC data only includes a sample of the young children and families' served. In regards to education data, ADE provided AZMerit only for 2018-2019 school year (prior to COVID-19) since this assessment was not administered during the 2019-2020 school year. The report uses public data for the 2020-2021 school year at the state and county level.

Another major limitation is the discrepancy in the definitions and criteria used by each agency that is collecting the data. Because various different data sources are used for each domain and they each have different definitions, it is difficult to make confident comparisons on indicators between data sources. Given these limitations, interpretation of key findings requires a deep understanding of the region. Contextualizing the findings is equally important as what the data tell us.



POPULATION CHARACTERISTICS

POPULATION CHARACTERISTICS

Why It Matters

The demographic profile of residents in a particular community helps inform the types of services needed in that community. Policy and decision makers need to understand the demographic profile of the communities they serve in order to make effective decisions that will positively impact the community's well-being. Timely information about the demographics of a region, such as the number of children and families, number and composition of households, racial and ethnic composition, languages spoken, and living arrangements help policy makers identify the needs of the region they serve and the services and resources that would benefit the community. For example, knowing where non-English speakers live and what their primary languages are can inform translation and interpretation services to help these families access health care and other social services. Knowing where children and families are located will help identify the needs for early childhood services to support their development and well-being.

This first domain of the report provides an overview of the geographic region's population dynamics, projected growth, ethnic and racial composition, languages spoken, immigration trends, and household characteristics (e.g., living arrangements for children). Indicators about children living with grandparents are included as well. Although only limited research has been conducted on the influence of grandparents on child development and health, this data provides an overview of their participation in the region's households and shows trends in grandparental care over time.¹¹ Understanding how the population is changing and where it is growing allows decision makers to strategically and proactively allocate resources.

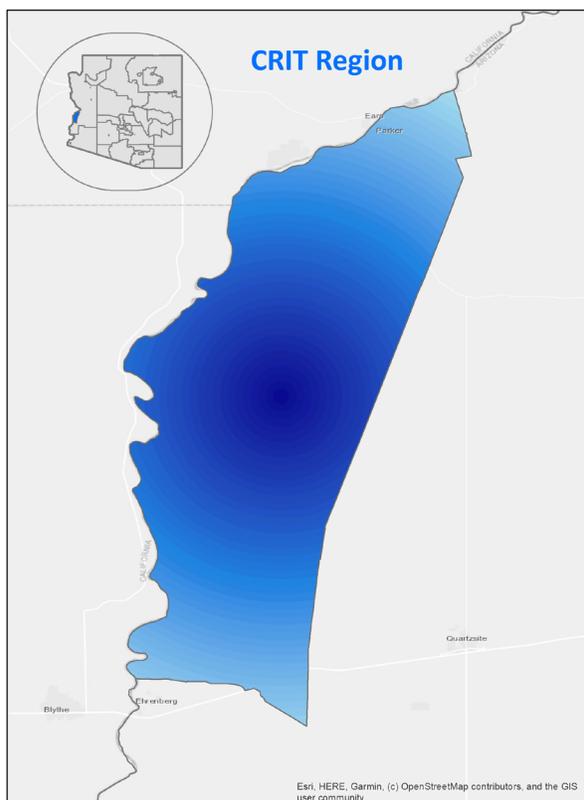
What the Data Tell Us

The FTF CRIT Region is defined as the Arizona portion of the Colorado River Indian Tribes Reservation, including the town of Parker. The region lies entirely in La Paz County in southwest Arizona, as shown in Exhibit 1.1. The Colorado River Indian Tribes Reservation covers about 420 square miles, the majority of which lies in Arizona (84%) and the remainder across the river in California.

¹¹ Sadruddin, A., Ponguta, L., Zonderman, A., Wiley, K., Grimshaw, A., Panter-Brick, C. (2019) *How do grandparents influence child health and development? A systematic review. Social Science & Medicine. Volume 239.* Retrieved from <https://doi.org/10.1016/j.socscimed.2019.112476>

The Colorado River Indian Tribes include four distinct Tribes - the Mohave, Chemehuevi, Hopi and Navajo. The primary communities in the First Things First Colorado River Indian Tribes Region is Parker and Poston, Arizona, which are located on a combination of Tribal land, leased land that is owned by CRIT and land owned by non-tribal members. Therefore, the First Things First CRIT Region serves both Tribal members and non-members on the Arizona portions of the Colorado River Indian Reservation and in the Town of Parker.

Exhibit 1.1. Map of La Paz County and FTF CRIT Region boundaries



Population Counts and Projections

According to the 2010 Census, the FTF CRIT Region has a total population of 7,077 residents. There are 739 children under six years old in the region, accounting for ten percent of the total population in the region (Exhibit 1.2).

Data provided from the CRIT Enrollment Department show a total of 362 enrolled members of the Colorado River Indian Tribes under the age of six in 2020, 233 of whom were residing on-reservation. The total tribal enrollment for that year was 3,569, with 2,062 members residing on-reservation (Exhibit 1.3).

Exhibit 1.2. Population (all ages and children 0-5) in the 2010 Census

	All ages	Ages 0-5	Children (0-5) as a percentage of the total population
FTF CRIT Region	7,077	739	10%
All Arizona Reservations	178,131	20,511	12%
La Paz County	20,489	1,227	6%
ARIZONA	6,392,017	546,609	9%

U.S. Census Bureau; 2010 Census Summary File 1; Tables P11 & P14

Exhibit 1.3. Colorado River Indian Tribal enrollment, 2019-20

	2019			2020		
	On-Reservation	Off-Reservation	Total Population	On-Reservation	Off-Reservation	Total Population
Children (Ages 0-5)	249	137	386	233	129	362
Under 1	37	15	52	19	12	31
Age 1	42	20	62	39	17	56
Age 2	41	23	64	42	20	62
Age 3	45	19	64	41	23	64
Age 4	47	38	85	45	19	64
Age 5	37	22	59	47	38	85
Ages 6-17	636	384	1,020	614	377	991
Children (ages 0-17)	885	521	1,406	847	506	1,353
Adults (18 or older)	1,156	972	2,128	1,215	1,001	2,216
Total membership	2,041	1,493	3,534	2,062	1,507	3,569

Colorado River Indian Tribes Enrollment Office (2022). [Tribal Enrollment]. Unpublished Data

The number of births in the FTF CRIT Region has remained steady between 2018 and 2019, with 132 and 135 births over the two years (Exhibit 1.4).¹² The number of children under six in La Paz County is also expected to remain relatively steady, rising to approximately 1,250 by 2050 (Exhibit 1.5).¹³ Over the same time period the number of children under six are expected to increase for the state as a whole.

¹² Arizona Department of Health Services (2021). Vital Statistics. Provided by AZ FTF.

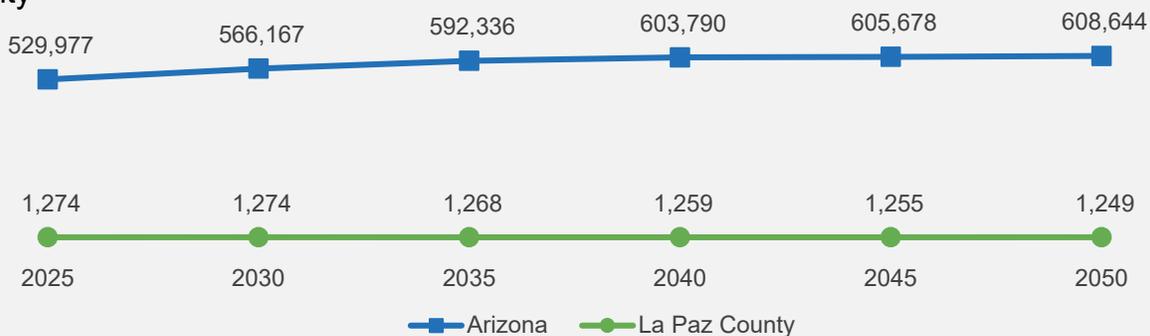
¹³ Population projection data for children were not available for the CRIT Region.

Exhibit 1.4. Number of births from 2018-2019

	2018	2019
FTF CRIT Region	132	135
La Paz County	187	186
ARIZONA	80,539	79,183

Arizona Department of Health Services (2019). Vital Statistics. Provided by AZ FTF.

Exhibit 1.5. Projected population of children 0-5 in Arizona and La Paz County



Arizona Department of Administration, Office of Employment & Population Statistics (2017). Arizona Population Projections: 2020 to 2050, Medium Series

Demographics and Language

In the FTF CRIT Region, just over a quarter of adults 18 and over identify as American Indian (27%) and 36% identify as Hispanic or Latino. This compares to four percent and 25%, respectively, for Arizona, underscoring the racially and ethnically distinct profile of the region compared to the state. In addition, the region has a significantly higher proportion of children that identify as American Indian compared to the overall population (Exhibit 1.6 and Exhibit 1.7). Note that percentages in the exhibits may not add up to 100% due to rounding and data aggregation.

Exhibit 1.6. Race and ethnicity of the adult population (ages 18 and older) in the 2010 Census

	Hispanic or Latino	White alone (not Hispanic or Latino)	American Indian alone (not Hispanic or Latino)	African-American alone (not Hispanic or Latino)	Asian or Pacific Islander (not Hispanic or Latino)
FTF CRIT Region	36%	33%	27%	1%	1%
Arizona	25%	63%	4%	4%	3%

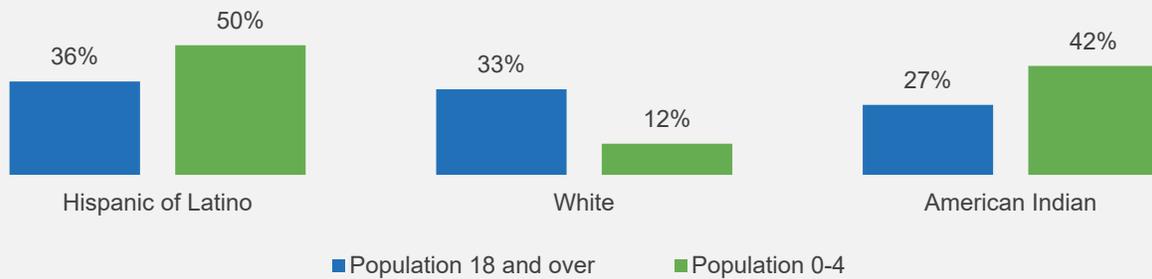
U.S. Census Bureau; 2010 Census Summary File 1; Table P11; generated by Harder+Company using American FactFinder; <http://factfinder2.census.gov>

Exhibit 1.7. Race and ethnicity of children (ages 0-4) in the 2010 Census

	Hispanic or Latino	White alone (not Hispanic or Latino)	American Indian alone (not Hispanic or Latino)	African-American alone (not Hispanic or Latino)	Asian or Pacific Islander (not Hispanic or Latino)
FTF CRIT Region	50%	12%	42%	1%	0%
ARIZONA	45%	40%	6%	5%	3%

U.S. Census Bureau; 2010 Census Summary File 1; SF 1, Tables P12B, P12C, P12D, P12E, P12H, and P12I; generated by Harder+Company using American FactFinder; <http://factfinder2.census.gov>

Exhibit 1.8. Distribution of race/ethnicity in the FTF CRIT Region



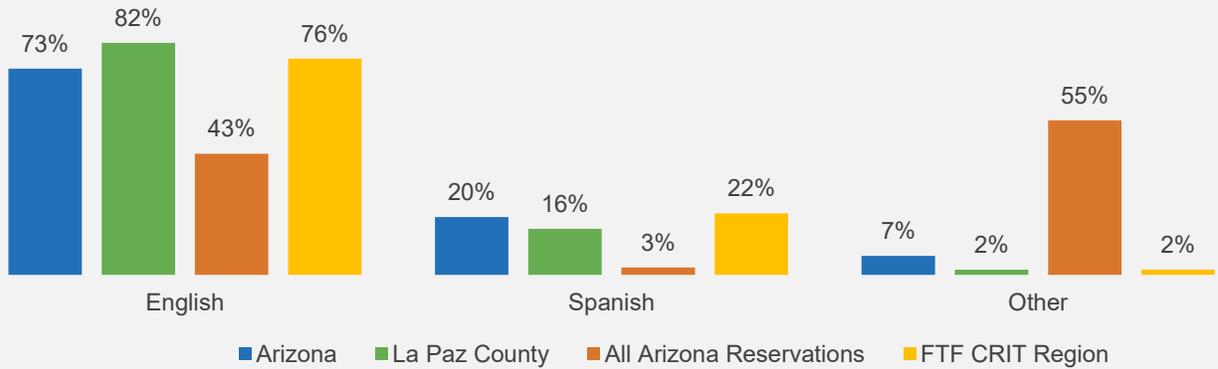
U.S. Census Bureau; 2010 Census Summary File 1; Table P11; generated by AZ FTF using American FactFinder; <http://factfinder2.census.gov>

U.S. Census Bureau; 2010 Census Summary File 1; Tables P12B, P12C, P12D, P12E, P12H, and P12I; generated by AZ FTF using American FactFinder; <http://factfinder2.census.gov>

Most people in the region (76%) speak English as their primary language, while 22% primarily speak Spanish (Exhibit 1.9). Estimates indicate that only two percent of residents in the CRIT Region speak a Native North American language at home, a considerably lower rate than across all Arizona reservations (55%), reflecting the mix of tribal and non-tribal land. The United States Census Bureau defines that a household is considered “limited-English-speaking” if there is no adult (age 14 or older) who speaks English well. Six percent of households in CRIT Region are classified as limited English-speaking, which is slightly higher compared to the proportion of households in La Paz County (4%) and Arizona (4%), but significantly lower compared to the average among all Arizona reservations combined (13%) (Exhibit 1.10).

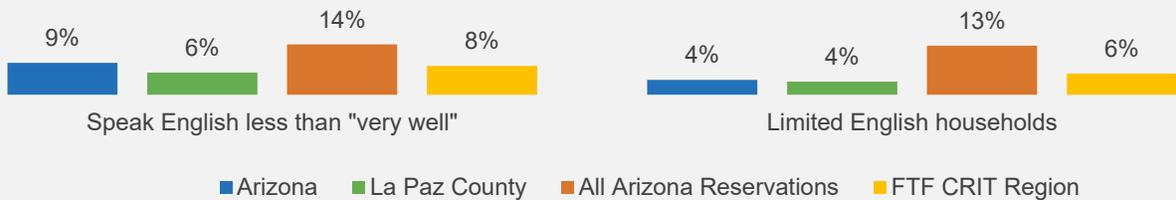
The Colorado River Indian Tribes include four distinct tribes (the Mohave, Chemehuevi, Hopi and Navajo), and each of these tribes has their own language. Mohave language classes are offered through the Colorado River Indian Tribes Library. Adult classes are offered year-round on a weekly basis, and classes for children ages 6 to 10 are also available during the summer at the library.

Exhibit 1.9. Primary language spoken at home for population ages 5 and over



U.S. Census Bureau; 2019 American Community Survey 5-Year Estimates, Tables B16001; generated by AZ FTF using American FactFinder; <<http://factfinder2.census.gov>>

Exhibit 1.10. Percentage of population that speaks English less than "very well" and percentage of limited English households



U.S. Census Bureau; 2019 American Community Survey 5-Year Estimates, Tables B16001 & B16002; generated by AZ FTF using American FactFinder; <<http://factfinder2.census.gov>>

The CRIT Region has a total of 831 children ages 0-5 living with parents. Among those, 19% live with parents born outside U.S., which is significantly higher than the rate among all Arizona reservations combined (1%), but notably comparable to La Paz County (22%) and the state overall (25%) (Exhibit 1.11).

Exhibit 1.11. Children (ages 0 to 5) living with parents born outside U.S.

	Children (ages 0-5) living with one or two parents	Children (ages 0-5) living with one or two foreign-born parents
FTF CRIT Region	831	19%
All Arizona Reservations	22,777	1%
La Paz County	899	22%
ARIZONA	494,590	25%

U.S. Census Bureau (2019). American Community Survey, 5-year estimates (2015-2019), Table B05009.

The number of kindergarten through third grade students that are migrants among the elementary school districts in the CRIT Region is low, as reflected in the suppressed data for the region as well as the county (Exhibit 1.12). Statewide, data show an increase in the overall number of children who are migrants between 2018 and 2020.

The percent of kindergarten through third grade students in the region who are English Language Learners (ELL) is 9% in 2020, which is a comparable rate to La Paz County and the state (Exhibit 1.13). These percentages remained generally consistent from 2018 to 2020 across the region, counties, and the state.

Exhibit 1.12. Children in grades K to 3 that are migrants from 2018 to 2020

	Arizona	La Paz County	FTF CRIT Region
2018	662	<11	<11
2019	570	<11	<11
2020	809	<11	<11

Arizona Department of Education (2021). Migrant Children. Provided by AZ FTF.

Exhibit 1.13. Percentage of children in grades K to 3 that are English Language Learners from 2018 to 2020

	Arizona	La Paz County	FTF CRIT Region
2018	10%	11%	7%
2019	9%	7%	3%
2020	10%	10%	9%

Arizona Department of Education (2021). English Language Learners. Provided by AZ FTF.

Household Characteristics

In the FTF CRIT Region there are 2,221 households and 23% include children under six years old. Half of all children under six live in married-couple households, accounting for 51% of all households with children 0-5 (Exhibit 1.14). Nine percent of children under six in the CRIT Region live with relatives or non-relatives (Exhibit 1.15). Of children under 18 who live in the same household as a grandparent, 49% are primarily cared for by a grandparent, which is the same as the rate for Arizona (Exhibit 1.16).¹⁴ A map illustrating the percentage of children 0-5 living with grandparents in the overall region can be found in the appendix section (Exhibit 7.1). There are several advantages to living in a multigenerational household, including an increase in emotional well-being and grandparents serving as role models in the socialization of children. However, this also indicates that young families may not have the resources to live on their own and may be living with their elderly parents. Grandparents raising their grandchildren may also require additional support due to the nontraditional family structure, changes in parenting

¹⁴ U.S. Census Bureau; American Community Survey. 2019 American Community Survey 5-Year Estimates, Tables B10002; generated by AZ FTF; using American FactFinder; <<http://factfinder2.census.gov>>

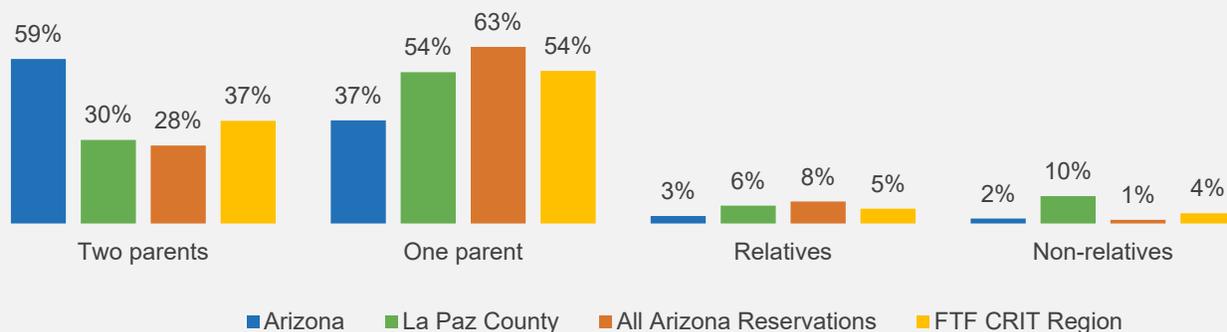
practices since grandparents were raising their children, and the fact that many older adults live on fixed incomes and may struggle with caring for dependents.

Exhibit 1.14. Number of households and household characteristics

	Arizona	La Paz County	All Arizona Reservations	FTF CRIT Region
Total number of households	1,679,198	5,930	51,893	2,221
Households with children 0-5	17% (291,242)	11% (623)	14% (7,215)	23% (521)
Married-couple households with children 0-5	68% (198,602)	44% (273)	47% (3,359)	51% (268)
Single-male households with children 0-5	10% (27,887)	35% (216)	16% (1,133)	21% (107)
Single-female households with children 0-5	22% (64,753)	22% (134)	38% (2,723)	28% (146)

U.S. Census Bureau (2010). 2010 Decennial Census, SF 1, Table P20

Exhibit 1.15. Living arrangements of children 0-5



U.S. Census Bureau; 2019 American Community Survey 5-Year Estimates, Tables B05009, B09001, & B17006; generated by AZ FTF using American FactFinder; <<http://factfinder2.census.gov>>

Exhibit 1.16. Children (ages 0-17) living in a grandparent's household

	Arizona	La Paz County	All Arizona Reservations	FTF CRIT Region
Number of children (ages 0-17) living in a grandparent's household	155,821	533	27,230	460
Percent of children (ages 0-17) living in a grandparent's household, and the grandparent is responsible for the child	50%	57%	52%	49%
Percent of children (ages 0-17) living in a grandparent's household, and the grandparent is responsible for the child (with no parent present)	16%	17%	13%	20%

U.S. Census Bureau; 2019 American Community Survey 5-Year Estimates, Table B10002; generated by AZ FTF using American FactFinder; <<http://factfinder2.census.gov>>

POPULATION CHARACTERISTICS HIGHLIGHTS

The FTF CRIT Region is defined as the Arizona portion of the Colorado River Indian Tribes Reservation, located in La Paz County in southwest Arizona. Children ages 0-5 make up 10% of the total population of the region. The ethnic profile of the region is markedly different from the profile of the State of Arizona with a higher percentage of the adult population (27%) and 42% of children under five identifying as American Indian, in addition to a significantly lower percentage of both adults and children identifying as white. The majority of households speak English as their primary language and only two percent primarily speak a Native North American language at home. Half of all households with children under six are led by married couples, though a sizable number of households are single-parent households. Only nine percent of children under six in the region live with relatives or non-relatives. Forty-nine percent of children ages 0-17 live in the same household as their grandparents and 20% of children are primarily cared for by a grandparent.

Below are key findings that highlight the demographic assets, needs and data-driven considerations for the region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
<p>The population of children under the age of six is projected to decline at modest and steady rate, allowing the region to foresee and prepare for the growing demands of their youngest residents.</p>	<p>Discuss tactics for planning ahead for the projected slow, but steady decline of the under six population and the tailored outreach and programs needed to support families in the region, such as healthcare and child care needs for young children.</p>

Needs	Considerations
<p>According to the American Community Survey, half of all children under six are living in single-parent households, as well as a sizable child population in grandparent-led households, which face additional barriers and difficulties when compared to two parent households.</p>	<p>Recognize that all families have strengths and needs, and discuss support services and programs specifically designed for single-parent and grandparent-led households to help them support the young children in their homes.</p>



ECONOMIC CIRCUMSTANCES

ECONOMIC CIRCUMSTANCES

Why It Matters

The economic situation of children and their families has a large impact on their ability to access opportunities and services that can contribute to their well-being and healthy development. As children are growing and developing, outcomes such as school achievement, physical health, and emotional well-being are all impacted by a child's economic situation.¹⁵ Additionally, being unemployed or living below the federal poverty level indicates that parents and caregivers have fewer resources to be able to meet their families' basic needs, such as adequate, nutritious food and good quality, stable housing.

Economic stability is critical to supporting young children and families to maintain a household where children can thrive. Recent research has shown that physical housing quality, neighborhood environment and housing stability play an important role in children's development and well-being.^{16, 17, 18} Housing instability, which includes frequent moves, difficulty paying rent, being evicted or being homeless, is associated with worse health, academic, and social outcomes.¹⁹ Children without housing stability often experience negative outcomes such as higher grade retention, higher high school dropout rates, and lower educational attainment as adults.^{20,21} Unemployment of parents can also affect the psychological well-being of children in the long-term due to negative experiences and stressful events.²² Lack of access to healthy food and general food insecurity can also lead to numerous issues for children and mothers, including birth complications, delayed development, learning difficulties, and chronic health conditions.^{23, 24} Thus, housing, families' employment and food security are important components to consider when evaluating the conditions that affect a child's development and well-being during their first five years of life.

¹⁵ Brooks-Gunn, J., & Duncan, G. J. (1997). *The effects of poverty on children. The future of children*, 55-71.

¹⁶ Blau, D. M., Haskell, N. L., & Haurin, D. R. (2019). *Are housing characteristics experienced by children associated with their outcomes as young adults? Journal of Housing Economics*, 46, 101631.

¹⁷ Roy, J., Maynard, M., Weiss, E. (2008) *Partnership for America's Economic Success. The Hidden Costs of the Housing Crisis*. Retrieved from http://www.pewtrusts.org/~media/legacy/uploadedfiles/wwwpewtrustsorg/reports/partnership_for_americas_economic_success/paeshousingreportfinal1pdf.pdf

¹⁸ Clair, A. (2019). *Housing: An under-explored influence on children's well-being and becoming. Child Indicators Research*, 12(2), 609-626.

¹⁹ Sandstrom, H. & Huerta, S. (September 2013). *The Negative Effects of Instability on Child Development: A Research Synthesis*. Urban Institute. Retrieved from http://www.urban.org/research/publication/negative-effects-instability-child-development-research-synthesis/view/full_report

²⁰ *Ibid.*

²¹ Kushel, M., Gupta, R., Gee, L., Haas, J. (2006) *Housing Instability and Food Insecurity as Barriers to Health Care Among Low-Income Americans*. Retrieved from <http://onlinelibrary.wiley.com/doi/10.1111/j.1525-1497.2005.00278.x/full>

²² Nikolova, M., Nikolaev, B. (2018) *How having unemployed parents affects children's future well-being*. Brookings. Retrieved from <https://www.brookings.edu/blog/up-front/2018/07/13/how-having-unemployed-parents-affects-childrens-future-well-being/>

²³ *Feeding America*. Retrieved from <http://www.feedingamerica.org/hunger-in-america/impact-of-hunger/child-hunger/child-development.html>

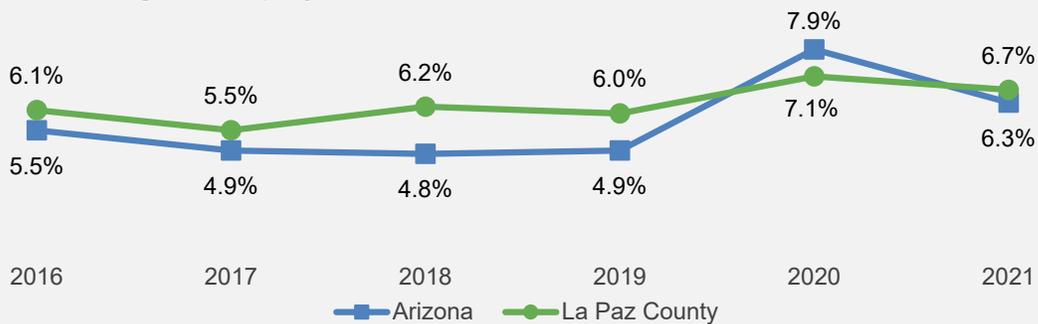
²⁴ Ke, J., Lee Ford-Jones, E. (2015) "Food Insecurity and Hunger: A Review of the Effects on Children's Health and Behaviour." *Paediatrics & Child Health* 20.2

What the Data Tell Us

Employment Indicators

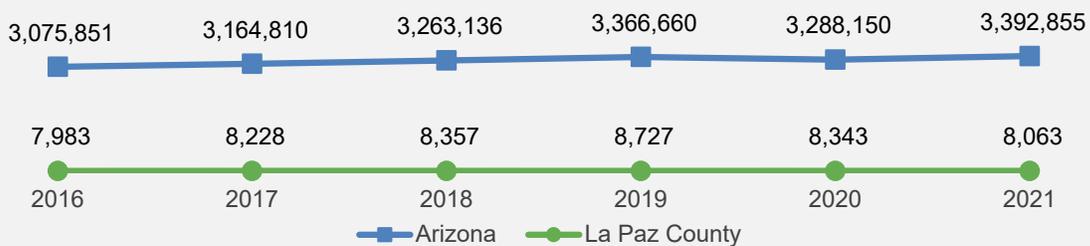
In La Paz County, the unemployment rate stayed relatively constant between 2016 and 2021, and stayed relatively similar to the unemployment rate for Arizona as a whole (Exhibit 2.1). Starting in 2020, unemployment rates for La Paz County and Arizona increased, likely in part due to the economic impact of the COVID-19 pandemic. During the pandemic, those who tended to be most affected by unemployment included those in jobs in services, restaurants, transportation, and other industries that commonly do not offer job security infrastructure, long-term employment contracts, and offer inadequate wages and benefits.²⁵ The unemployment rate peaked in April 2020, at 10% in La Paz County and 14% in the state overall (data not shown). The unemployment rate in both the county and the state decreased from 2020 to 2021, suggesting that more people started to go back to the labor force as stay-at-home orders were lifted (Exhibit 2.2).

Exhibit 2.1. Average unemployment rates from 2016 to 2021



U.S. Department of Labor, Bureau of Labor Statistics (2021). Local Area Unemployment Statistics (LAUS), Arizona Office of Employment. Note: The data for 2021 goes up to September 2021.

Exhibit 2.2. Total employment



U.S. Department of Labor, Bureau of Labor Statistics (2021). Local Area Unemployment Statistics (LAUS), Arizona Office of Employment. Note: The data for 2021 goes up to September 2021.

of their own and meet the other eligibility requirements. In order to receive these benefits, an individual that has lost their job will have to complete an application. If they are eligible, then they will receive

²⁵ Blustein, D., Paige, G. (2020) "Work and unemployment in the time of COVID-19: the existential experience of loss and fear." *Journal of Humanistic Psychology* 60.

unemployment benefits. In 2020 for the CRIT Region, the total number of unemployment claims spiked in March and April 2020 as the economic impacts of COVID-19 unfolded (Exhibit 2.3). The number of claims climbed over the months, peaking at 163 in August 2020, and sharply decreasing to 11 claims by the end of the year.

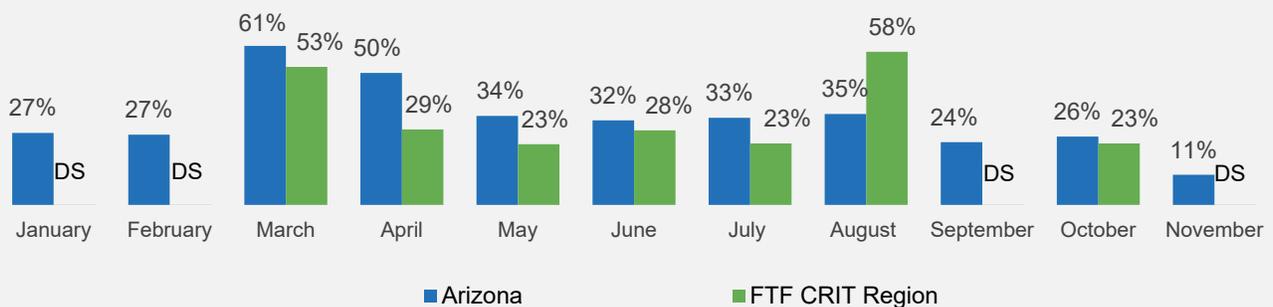
In addition to the increase in the number of claims, the percentage of eligible and paid claims also rose sharply in March 2020 in the CRIT Region and in Arizona (Exhibit 2.4). In the CRIT Region, 53% of claims were eligible and paid in March. The suppressed data from January and February suggest that the number was low in the prior two months which corroborates the impact of the pandemic on employment indicators in the CRIT Region.

Exhibit 2.3. Number of total claims in the CRIT Region, 2020



Arizona Department of Economic Security (2020). Unemployment claims. Provided by AZ FTF.

Exhibit 2.4. Percent of eligible and paid claims in 2020

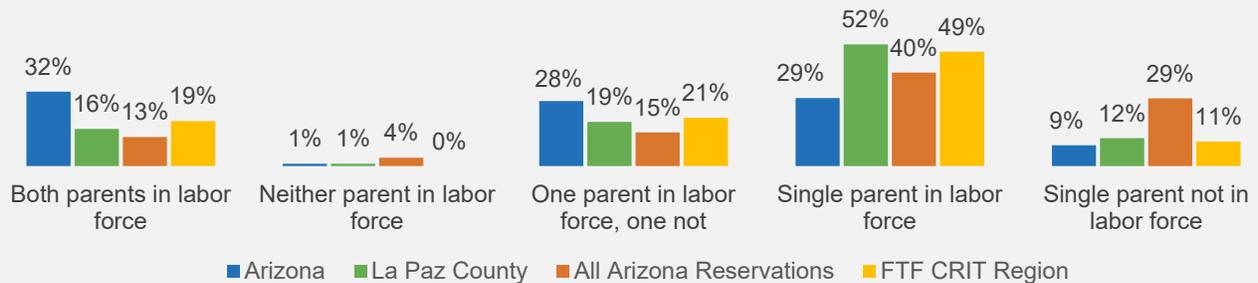


Note: DS = data suppressed.

Arizona Department of Economic Security (2020). Unemployment claims. Provided by AZ FTF

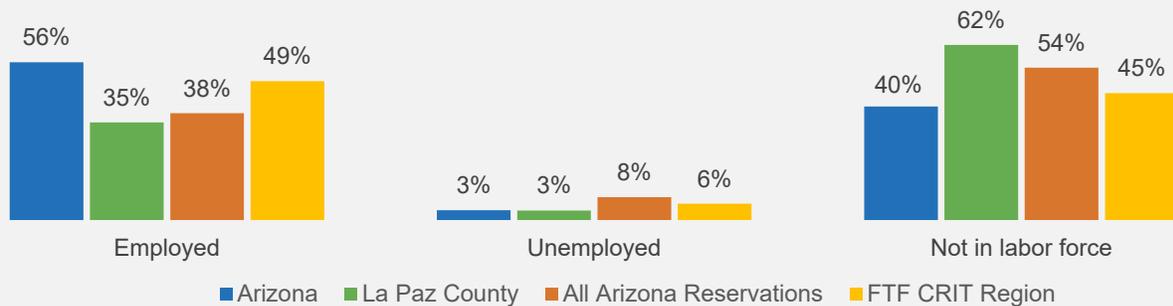
In the FTF CRIT Region, most children under age six (89%) live in a household where at least one adult is in the labor force (Exhibit 2.5), which is the same as the percentage for Arizona (89%). Sixty-eight percent of children under age six have either both parents in the labor force or a single parent in the labor force, indicating they have some need for child care. The overall percentage of adults who are in the labor force in the CRIT Region is 55%, which is slightly lower than the proportion in Arizona (59%) (Exhibit 2.6).

Exhibit 2.5. Employment status of parents with children 0-5



U.S. Census Bureau; American Community Survey, 2019 American Community Survey Table B23008.

Exhibit 2.6. Employment status of adult population (ages 16 and older) who are employed, unemployed, or not in the labor force



U.S. Census Bureau; American Community Survey, 2019 American Community Survey Table B23025.

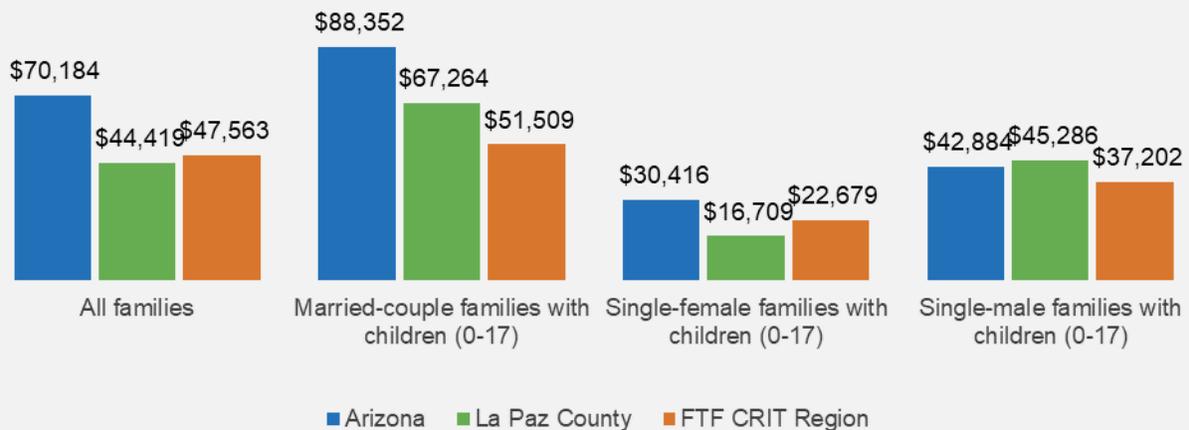
Note: The labor force includes all persons who are currently employed, including those on leave, furlough, or temporarily laid off.

Median Income and Poverty

The median income of all families in the CRIT Region is approximately \$48,000, which is slightly higher than the median income of La Paz County. The median income of married-couple families with children ages 0 to 17 in the CRIT Region, about \$52,000, is higher in comparison to all families in the region. Moreover, the median income for single-parent families and especially single-female families is

much less than for married-couple families. Exhibit 2.7 shows the difference in median income for married-couple families, single-female families, and single-male families. A map showing the median income for the CRIT Region overall can be found in the appendix section (Exhibit 7.2).

Exhibit 2.7. Median income for families with children (0-17)



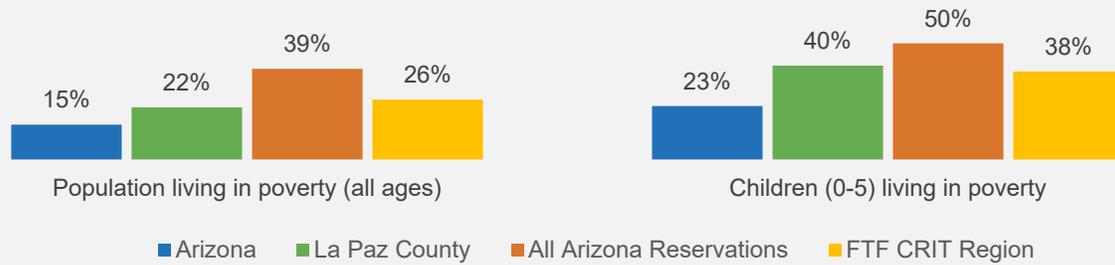
U.S. Census Bureau (2019) American Community Survey, 5-year estimates (2015-2019), Table B19126

The large number of single-parent families combined with their low median income may contribute to a sizable portion of the population in the FTF CRIT Region living in poverty.²⁶ Families with children under six years have a higher proportion of those living below the federal level, compared to the general population (Exhibit 2.8). In the CRIT Region, 26% of the population and 38% of children under age six are living in poverty. These poverty rates are similar to that of La Paz County but notably lower than the average across all reservations in Arizona.

Federal poverty levels (FPL) are used to determine eligibility for certain programs and benefits, including SNAP and Arizona Health Care Cost Containment System (AHCCCS). The federal poverty level changes every year and is based on family size. For example, in 2021, the FPL is \$26,500 for a family of four. A family of four that makes less than or equal to \$26,500 is considered to be in poverty. In the FTF CRIT Region, 38% of families are living in poverty (Exhibit 2.9).

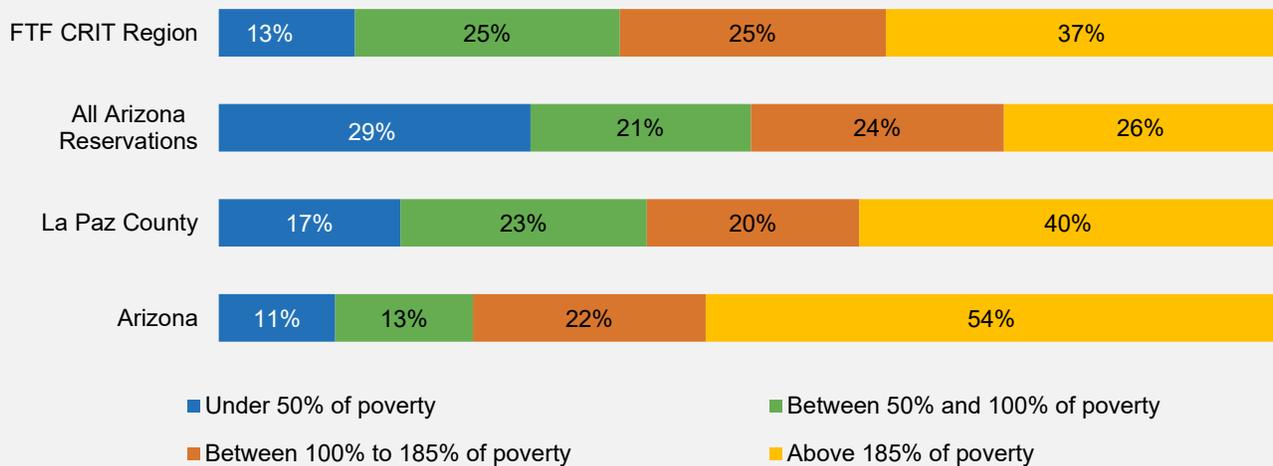
²⁶ To define poverty, the Census Bureau uses a set of money income thresholds that vary by family size and composition to determine who is in poverty. If a family's total income is less than the family's threshold, then that family and every individual in it is considered in poverty. The official poverty thresholds do not vary geographically, but they are updated for inflation using the Consumer Price Index (CPI-U).

Exhibit 2.8. Percentage of population living in poverty



U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B17001.

Exhibit 2.9. Families with young children (ages 0-5) living at various poverty thresholds



U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Tables B17001 & B17022.

In La Paz County, the percent of the population living in poverty varied significantly by race/ethnicity. Individuals identifying as American Indian have poverty rates around 41%, which is much higher than any other reported racial/ethnic group (Exhibit 2.10).

Exhibit 2.10. Percentage of population below the federal poverty level by race/ethnicity*

	Arizona	La Paz County
Black or African-American	20%	12%
American Indian or Alaskan Native	33%	41%
Asian	12%	0%
Native Hawaiian and Other Pacific Islander	16%	0%
Other Race	23%	11%
Two or More Races	17%	16%
White, not Hispanic	10%	17%
Hispanic or Latino	22%	25%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Tables B17001B, Table B17001C, Table B17001D, Table B17001E, Table B17001F, Table B17001H, Table B17001I.

Housing

Residents of the Colorado River Indian Tribes have a smaller housing cost burden to residents of the state as a whole: 20% of the CRIT Region’s housing units require their residents to contribute more than 30% of their household income toward housing (Exhibit 2.11). While cost of housing does provide a metric for economic circumstances in the tribal region, caution should be used to interpret these results as housing cost burden is not by itself a robust measure of affordability or economic conditions.²⁷

Exhibit 2.11. The cost of housing, relative to household income

	Number of occupied housing units	Occupied housing units which cost 30% of household income, or more
FTF CRIT Region	3,396	20%
La Paz County	9,346	21%
All Arizona Reservations	73,206	14%
ARIZONA	2,571,268	30%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B25106.

Children that are homeless qualify for rights and services under the McKinney-Vento Act. The McKinney-Vento Act defines homeless children “individuals who lack a fixed, regular, and adequate nighttime residence.”²⁸ The number of homeless children in grades kindergarten through third grade from 2018 to 2020 is displayed in Exhibit 2.12. From 2018 to 2020, the number of homeless students in

²⁷PD&R Edge (n.d.) Rental Burdens: Rethinking Affordability Measures. Retrieved from https://www.huduser.gov/portal/pdredge/pdr_edge_featd_article_092214.html

²⁸ Arizona Department of Education. Welcome to Homeless Education Program. Retrieved from <https://www.azed.gov/homeless>

the Parker Unified School District decreased marginally. Across the entire state, the number of homeless students also decreased, but markedly more so, over the same three years.

Exhibit 2.12. Number of homeless students in grades kindergarten through third grade, 2018 to 2020

	2018	2019	2020
CRIT Parker Unified School District	13	<11	12
La Paz County	13	<11	12
All Arizona Schools	4,565	3,676	3,191

Arizona Department of Education (2020). [homeless students]. Unpublished data.

Note: The school-district data in this table include only the schools that are located within the CRIT Region.

About 51% of households in the CRIT Region have both a smartphone and computer, which is lower than the proportion in La Paz County (53%) and significantly lower than in Arizona (73%) (Exhibit 2.13). In addition, 77% of CRIT residents live in households with a computer and internet (Exhibit 2.14). During the nationwide closures of elementary and secondary schools due to the COVID-19 pandemic, more families had to rely on having multiple computers and reliable internet in their homes which caused the digital divide to become more apparent.²⁹ Households that were the most impacted by the digital divide included those in rural communities, living in poverty and people of color.^{30,31} Given that the CRIT Region had a relatively high percentage of households with children under 18 years old that have a computer and internet (83%), it is possible that the pandemic’s impact on remote education was not experienced as strongly compared to other tribal reservations, where only 44% of households with children have a computer and internet (Exhibit 2.15). Of the people living in households with a computer and internet, half of all households (51%) in the CRIT Region have fixed broadband with cellular data plan as their internet (Exhibit 2.16).

Exhibit 2.13. Households with and without computers and smartphones

	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
FTF CRIT Region	3,396	8%	22%	51%	18%
La Paz County	9,346	9%	18%	53%	20%
All Arizona Reservations	73,206	5%	21%	30%	43%
ARIZONA	2,571,268	7%	12%	73%	8%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B25106.

Note: In this table, “computer” includes both desktops and laptops.

²⁹ Masonbrink, Abbey R., and Emily Hurley. "Advocating for children during the COVID-19 school closures." *Pediatrics* 146.3 (2020).

³⁰ Goldschmidt, K. (2020) "The COVID-19 pandemic: Technology use to support the wellbeing of children." *Journal of pediatric nursing* 53.

³¹ Dorn, E., Hancock, B., Sarakatsannis, J, Viruleg, E. (2020) "COVID-19 and learning loss—disparities grow and students need help." McKinsey & Company.

Exhibit 2.14. Persons (all ages) in households with and without computers and internet connectivity

	Number of person (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
FTF CRIT Region	9,372	77%	7%	16%
La Paz County	20,579	69%	15%	16%
All Arizona Reservations	268,129	40%	24%	36%
ARIZONA	6,892,175	87%	7%	6%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B28005.

Exhibit 2.15. Children (ages 0-17) in households with and without computers and internet connectivity

	Number of person (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
FTF CRIT Region	2,460	83%	6%	11%
La Paz County	3,395	78%	12%	10%
All Arizona Reservations	78,988	44%	26%	30%
ARIZONA	1,632,019	88%	8%	4%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B28005.

*Internet includes a dial-up internet subscription or a broadband internet subscription.

Exhibit 2.16. Households with computer & internet by type (dial-up, broadband, satellite, other)

	People living in households with computer and internet (all ages)	Percent with fixed broadband and 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
FTF CRIT Region	7,212	51%	25%	24%	0%
La Paz County	14,236	45%	27%	28%	0%
All Arizona Reservations	106,979	35%	30%	33%	2%
ARIZONA	5,968,639	69%	18%	12%	0%

U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B2808.

ECONOMIC CHARACTERISTICS HIGHLIGHTS

While the unemployment rate in La Paz County stayed relatively low, the number slightly increased in 2020 (7%), likely due to the COVID-19 pandemic, but started to decline in 2021. Single-parent families and single-female parent families in particular who are working earn significantly less, on average, than dual-parent households. Additionally, 38% of children under age six in the region live in poverty. One in five residents (20%) live without affordable housing in the region.

Below are key findings that highlight the economic assets, needs, and data-driven considerations for the region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
Eighty-nine percent of children under age six live in households with at least one parent in the labor force. In addition, the unemployment rate is generally consistent with the state average.	Consider encouraging stakeholders to target job training and employment programs to families with higher need to help increase employment and median incomes.

Needs	Considerations
According to the American Community Survey, about 38% of children in the region live in poverty, which is significantly higher than the state average.	Encourage community awareness of social service resources in the region, including housing support.
Four in five children under six live in single-parent households, which earn substantially less money than dual parent households.	Promote supports or resources that can help subsidize child care and housing costs for single parents with young children.



EDUCATIONAL INDICATORS

EDUCATIONAL INDICATORS

Why It Matters

Early care and education helps children thrive in school. Research shows that children who participate in early care and education programs are more likely to perform better on educational indicators such as math and reading tests, attendance rates, and discipline referrals than children who do not.^{32, 33}

Educational indicators that affect student outcomes and are likely related to participation in early care and education include, but are not limited to, school attendance, proficiency exams, grades, graduation and dropout rates, and educational attainment. For example, poor attendance in school affects student outcomes because it limits children from gaining knowledge and thriving in an academic setting.

Research indicates an association between high school dropout rates and poor attendance as early as kindergarten; on average, dropouts have missed 124 days of school by the time they reach 8th grade.³⁴ In addition, irregular attendance influences school budgets and could potentially lead to fewer funds for essential classroom needs.³⁵

Notably, children's participation in quality early care and education can also yield lifelong benefits. Improved performance on standardized tests and lower dropout rates in turn increases children's likelihood of graduating from high school, earning higher monthly earnings, and owning a home. Research shows that high-quality early care and education programs can reduce disparities in college graduation, educational attainment, and wages.³⁶ Research has also shown that students dropping out of high school have an increased likelihood of earning less than high school graduates, being unemployed, receiving public assistance, and a higher chance of being incarcerated. These factors may become additional barriers while raising a family.³⁷ Essentially, a child's enrollment in early learning provides short-term and long-term benefits that will contribute to the child successfully transitioning into and prospering in adulthood.

³² Bakken, L., Brown, N., Downing, B. (2017) *Early Childhood Education: The Long-Term Benefits*. *Journal of Research in Childhood Education*. Volume 31. Issue 2. Retrieved from: <https://doi.org/10.1080/02568543.2016.1273285>

³³ Campbell, F., Pungello, E., Kainz, K., Burchinal, M., Pan, Y., Wasik, B., Barbarin, O., Sparling, J., Ramey, C., (2012) *Adult outcomes as a function of an early childhood educational program: an abecedarian project follow-up*. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3989926/>

³⁴ GreatSchools staff. *Why attendance matters*. (2011). Retrieved from <http://www.greatschools.org/gk/articles/school-attendance-issues/>

³⁵ National Center for Education Statistics (2009). *Every school day counts: The forum guide to collecting and using attendance data*. Retrieved from <https://nces.ed.gov/pubs2009/attendancedata/chapter1a.asp>

³⁶ Bustamante, A., Dearing, E., Zachrisson, H., Vandell, D. (2021) *Adult outcomes of sustained high-quality early child care and education: Do they vary by family income?* Retrieved from <https://doi.org/10.1111/cdev.13696>

³⁷ Christle, C. A., Jolivette, K., Nelson, M. C. (2007). *School characteristics related to high school dropout rates*. *Journal of Remedial and Special Education*, 28, 15. Retrieved from www.eric.ed.gov/ERICWebPortal/recordDetail?accno=EJ785964

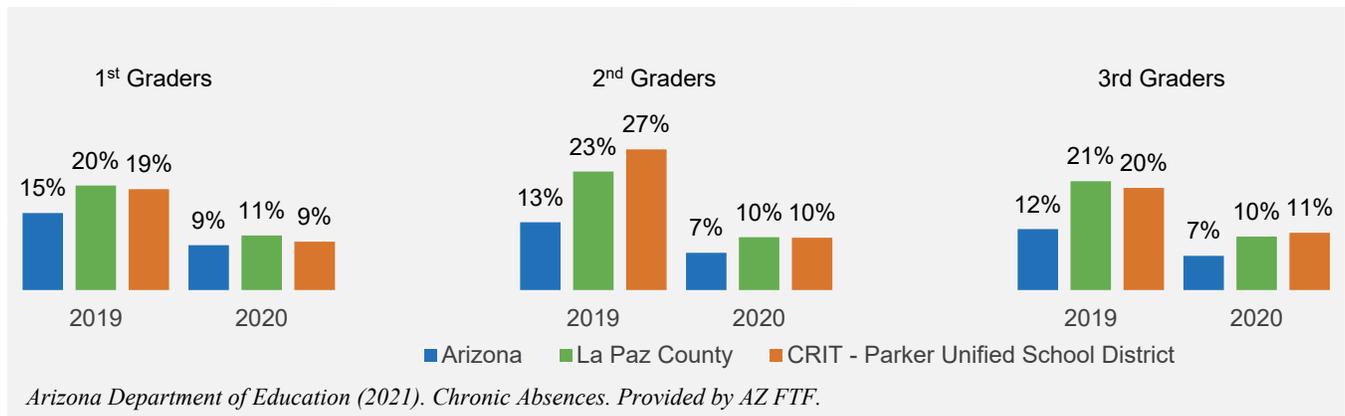
What the Data Tell Us

The Colorado River Indian Tribes Region is served by the Parker Unified School District which includes three public elementary schools: Blake Primary School, Wallace Elementary School, and Le Pera Elementary School. Blake Primary School serves students in preschool through second grade, Wallace Elementary school serves students in third through fifth grade, and Le Pera Elementary School serves students in kindergarten through eighth grade.

Student Attendance

Between 2019 and 2020, the CRIT Region experienced a decrease in the percentage of students missing ten or more days of school among all grade levels (Exhibit 3.1). The percentage of students in the region that missed ten or more days of school was higher than the state as a whole. The higher the grade level, the lower the rate of absences. There are many potential explanations for such findings, including that younger children may get sick more frequently than older children, parents may be more willing to let their children miss school in earlier years, or that the perception of the value of education changes as children grow. As for the percentage change from 2019 to 2020, it is possible that the increased virtual learning during the pandemic has made attendance easier for some students, leading to an overall decrease in student absences.

Exhibit 3.1. Percentage of students absent ten or more days from school



Early Achievement

Over half of all preschool-aged children in the CRIT Region (51%) are enrolled in nursery school, preschool, or kindergarten, which is lower than Arizona by about 14 percentage points and also lower than both La Paz County but higher than the average across all reservations in the state (Exhibit 3.2).

Exhibit 3.2. Children ages 3-4 enrolled in nursery school, preschool, or kindergarten*

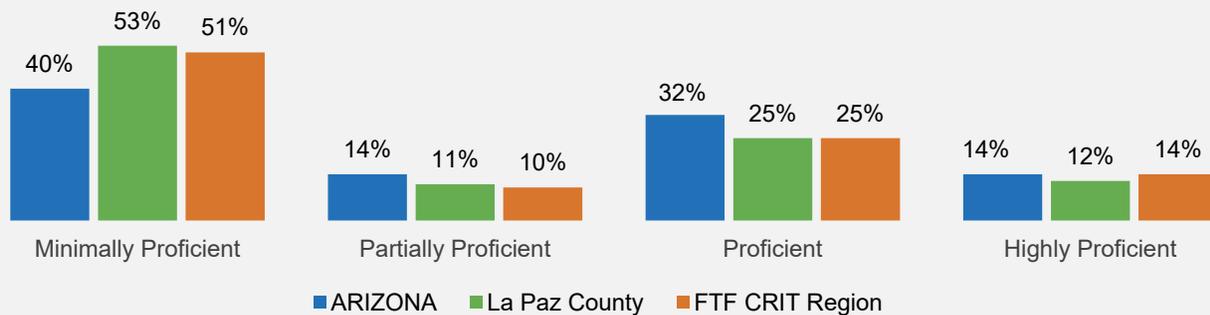


U.S. Census Bureau; American Community Survey, 2019 American Community Survey 5-Year Estimates, Table B2808.

**There is no data available on the status of children not enrolled in school.*

Research shows that preschool attendance has an effect on future academic performance, specifically English and math scores.³⁸ The English Language Arts (ELA) assessment results of the AzMERIT demonstrated that about 39% of all third graders in the CRIT Region scored “proficient” or “highly proficient”, which is slightly less than the statewide percentage (Exhibit 3.3). Slightly more, about 50%, of third graders scored “proficient” or highly proficient” on the math assessment test in the region, which is likewise similar to the percent for the State (Exhibit 3.4). Although math assessment results are slightly higher than the ELA assessment results, overall about half of all third graders are not meeting the proficiency standard for the two subjects.

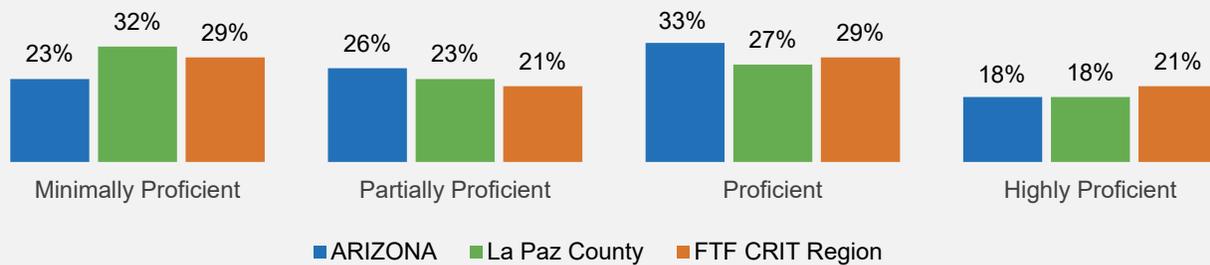
Exhibit 3.3. 2019 AzMERIT English Language Arts assessment results for third grade students



Arizona Department of Education (2019). AzMERIT Reports. Provided by AZ FTF.

³⁸ Andrews, R. J., Jargowsky, P., Kuhne, K. (2012). *The effects of Texas's targeted pre-kindergarten program on academic performance (No. w18598)*. National Bureau of Economic Research.

Exhibit 3.4. 2019 AzMERIT Math assessment results for third grade students

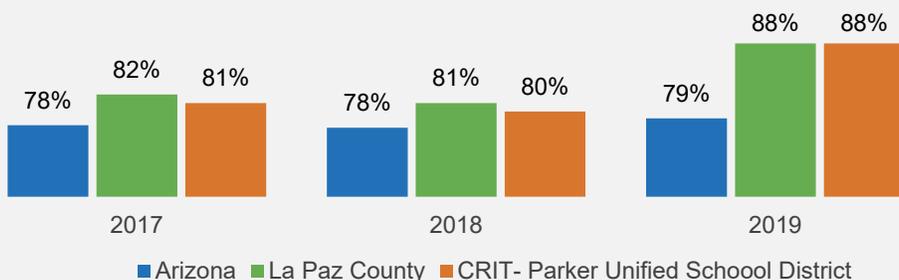


Arizona Department of Education (2019). AzMERIT Reports. Provided by AZ FTF.

High School Graduation & Dropout Rates

Between 2017 and 2018, the high school graduation rates stayed relatively constant for students in the Parker Unified School District (Exhibit 3.5). However, the graduation rate increased notably in 2019, similar to the trend seen in La Paz County, a positive sign of regional educational outcomes. From 2018 to 2020, the percent of students dropping out of high school was slightly lower in the region, where the dropout rate was just two percent in 2020 (Exhibit 3.6). While the number has decreased annually, additional focus on supports and services for students who are at risk of dropping out could be considered.

Exhibit 3.5. 2017-2019 High school graduation rates: 4-year cohort

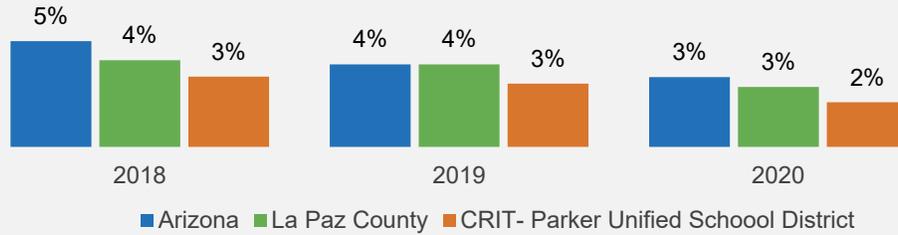


Arizona Department of Education (2021). Graduation Rate 2018 Cycle. Provided by AZ FTF.

*Data available by breakdown city, school district, school, and zip code

**The four-year graduation rate counts a student who graduates with a regular high school diploma in four years or less as a high school graduate in his or her original cohort

Exhibit 3.6. 2018-2020 High school dropout rates

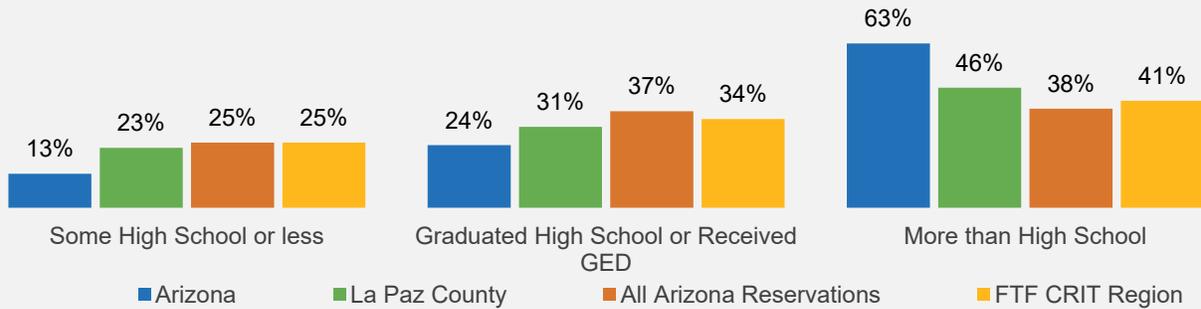


Arizona Department of Education (2021). Graduation Rate 2018 Cycle. Provided by AZ FTF.

Educational Attainment

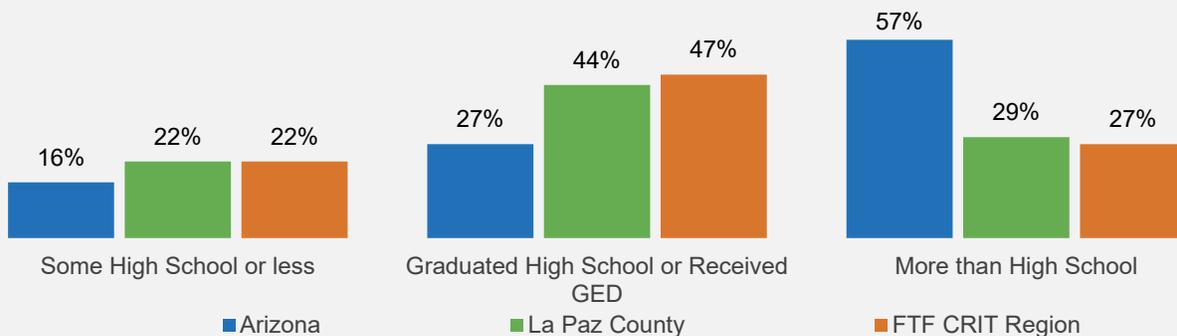
In the CRIT Region, 75% of adults age 25 and older have completed at least a high school education, which is the same percentage than the state (Exhibit 3.7). Among mothers giving birth in 2019 in the CRIT Region, 74% of infants were born to mothers have completed at least a high school education (Exhibit 3.8).

Exhibit 3.7. 2015-2019 Educational attainment of adults 25 and older



American Community Survey five year estimates, 2015-2019; generated by AZ FTF; using American FactFinder; <<http://factfinder2.census.gov>>.

Exhibit 3.8. 2019 Percentage of live births by mother's educational attainment



Arizona Department of Health Services (2019). Vital Statistics. Provided by AZ FTF.

EDUCATIONAL INDICATORS HIGHLIGHTS

A child’s development during their first five years of life makes an impact on their performance in future educational endeavors. About 51% of preschool-age children are enrolled in early education and about half of all third-grade students in the FTF CRIT Region are scoring proficiently on the math assessments, similar to the proficiency rate of the state and La Paz County. The region experienced an increase in the high school graduation rate. Three quarters of all adults 25 and older in the region have graduated high school or pursued further education, and similarly 74% of mothers have a high school education or more.

Assets	Considerations
According to the American Community Survey, the high school graduation rates and the average educational attainment level of adults and parents in the region are high.	Consider supporting programs for parents, such as peer support or mentoring programs, to support each other and share knowledge and attitudes around the importance of education, targeting teen parents or parents without a high school degree.

Needs	Considerations
AzMERIT reports from the Arizona Department of Education show that half of third graders are not meeting proficiency standards for English Language Arts (61%) and Math (50%)	Increase parent outreach and awareness of early education programs to support learning and school readiness from an early age.



EARLY LEARNING

EARLY LEARNING

Why It Matters

Early learning fosters children's development and well-being at a critical time in their lives. Early learning is supported by early care and education (ECE), a constellation of all formal and informal educational programs and strategies designed to contribute to the growth and development of children from birth through age five.³⁹ Research suggests that the first five years of life are considered to be the most crucial stage in children's development, as they undergo the most rapid phase of growth during that period.⁴⁰ Research also shows that when children participate in high-quality learning environments, they learn and develop important skills and abilities such as motivation, self-control, focus and self-esteem. These skills prepare them for educational achievement later in life and reduce the need for special education programs.⁴¹ In addition, research shows that investments in ECE have long-term health effects, helping to prevent disease and promote health.^{42, 43} For disadvantaged families, early childhood programs have benefits on health, future wages, crime reduction, and education.⁴⁴ Children who participate in early care and education programs are better prepared for kindergarten, have greater success in elementary school, and are more likely to graduate from high school and prosper well into adulthood.^{45, 46}

Key indicators of early learning that help identify the needs of children include, but are not limited to, the availability of ECE centers and homes; enrollment in ECE programs; compensation and retention of ECE professionals; costs of child care and availability of child care subsidies or scholarships; and capacity to serve children with special needs.

³⁹ University of Massachusetts Global (2021). *What is the purpose of early childhood education? Why it's so important*. Retrieved from: <https://www.umassglobal.edu/news-and-events/blog/what-is-purpose-of-early-childhood-education>

⁴⁰ Teach.com powered by 2U (n.d.). *Early Childhood Education*. Retrieved from <https://teach.com/where/levels-of-schooling/early-childhood-education/>

⁴¹ McCoy, C., Yoshikawa, H., Ziol-Guest, K. (2017) *Impacts of early childhood education on medium- and long-term educational outcomes*. Retrieved from <https://journals.sagepub.com/doi/abs/10.3102/0013189X17737739>

⁴² Garcia, J., Heckman, J., Ziff, A. (2019) *Early Childhood education and crime*. Retrieved from <https://doi.org/10.1002/imhj.21759>

⁴³ Campbell, F., Conti, G., Heckman, J. J., Moon, S. H., Pinto, R., Pungello, E., & Pan, Y. (2014). *Early childhood investments substantially boost adult health*. *Science*, 343(6178), 1478-1485.

⁴⁴ Garcia, J., Heckman, J., Leaf, D., Prados, M. (2016) *The life-cycle benefits of an influential early childhood program*. National Bureau of Economic Research. Retrieved from <https://www.nber.org/papers/w22993>

⁴⁵ Reynolds, A. J., Temple, J. A., Ou, S. R., Robertson, D. L., Mersky, J. P., Topitzes, J. W., & Niles, M. D. (2007). *Effects of a school-based, early childhood intervention on adult health and well-being: A 19-year follow-up of low-income families*. *Archives of Pediatrics & Adolescent Medicine*, 161(8), 730-739.

⁴⁶ Weiland, C., Yoshikawa, H. (2013). *Impacts of a prekindergarten program on children's mathematics, language, literacy, executive function, and emotional skills*. *Child Development*, 84(6), 2112-2130.

What the Data Tell Us

Early Care and Education

According to data from the Arizona Department of Economic Security, there are 2 Early Care and Education (ECE) centers with a total capacity of 264 children in the CRIT Region (Exhibit 4.1).⁴⁷ The total licensed capacity may be skewed if the actual facilities choose not to enroll the total number of children they are licensed to serve. The number of children served mainly depends on the center's ability to meet the adult to child ratio, which varies by child's age and must comply with licensing requirements.

Exhibit 4.1. Number and licensed capacity of early care and education centers and homes

	Total Number of Providers	Total Licensed Capacity
FTF CRIT Region	2	264
La Paz County	7	395
ARIZONA	4,307	395,787

Source: Arizona Department of Economic Security. (2021). 2021 Child Care Assistance Data. Unpublished data received by request

As previously mentioned, 51% of children between the ages of three and four are enrolled in ECE programs in the FTF CRIT Region (Exhibit 3.2). This is lower than the 68% assumed to need child care since all adults in the household are employed (Exhibit 2.5). Parents who do not have access to stable child care may find themselves missing work to care for their children. In addition, research has consistently demonstrated that lack of access to child care has negative effects on families and decreases parents' chances of sustaining employment.⁴⁸

ECE teachers/professionals are tasked with the early care and education of young children. The responsibilities of ECE teachers include guiding children, often through play and activities, and acting as their partner in the learning process. In addition, they are responsible for shaping the intellectual and social development of young children, which can have an effect on a child's future academic performance.⁴⁹

Head Start

Head Start is a federally funded program that promotes the school readiness of children ages five and under from low income families. These programs provide comprehensive services to support child development, including early learning, health services, and family well-being and engagement. The Office of Head Start funds agencies in local communities to implement Head Start and Early Head Start

⁴⁷ Arizona Department of Economic Security (2019). *Childcare Providers and Capacity*. Provided by AZ FTF.

⁴⁸ Greenberg, M. (2007). *Next steps for federal child care policy. The Next Generation of Antipoverty Policies*, 17, 2. Retrieved from <http://www.futureofchildren.org/publications/journals/article/index.Xml?journalid=33&articleid=67§ionid=353>

⁴⁹ Bano, N., Ansari, M., Ganai, M. (2016). *A study of personality characteristics and values of secondary school teachers in relation to their classroom performance and students' likings*. Anchor Academic Publishing.

programs.⁵⁰ Research shows that Head Start children tend to score higher on all domains of cognitive and social-emotional development in comparison to children not enrolled in Head Start.⁵¹ In addition, Head Start children are also more likely to improve their social skills, impulse control, and approaches to learning while concurrently decreasing their problem behaviors and becoming less aggressive and hyperactive over the course of a year.⁵²

According to data received from the CRIT Head Start, there are 147 children enrolled in Head Start, all of whom are preschool age (ages 3 to 4). Among the 20 staff of the Head Start location, comprising of 10 classroom teacher and 10 assistant teachers, 5 staff persons hold a child development associate (CDA) credential (Exhibit 4.2 and Exhibit 4.3) Furthermore, 4 classroom teachers hold a Bachelor of Arts (BA) degree and 1 teacher holds an Associate of Arts (AA) degree in childhood education.

Exhibit 4.2. CRIT Head Start Enrollment, 2022

	Number of children
Total enrollment capacity (available preschool slots)	183
Total cumulative enrollment	147
Under 1	0
1 year old	0
2 year old	0
3 year old	67
4 year old	80
5 year old and older	0

CRIT Head Start Data (2022). Data received by correspondence

Exhibit 4.3. Staff Credentials for Early Care and Education Programs

	Total Staff	Child Development Associate (CDA) Credential	AA in Early Childhood Education	BA in Early Childhood Education
Head Start Classroom Teachers	10	4	1	4
Head Start Assistant Teachers	10	1	0	0

CRIT Head Start Data (2022). Data received by correspondence

⁵⁰ *Head Start Programs. (2020 November 3). Retrieved from <http://www.acf.hhs.gov/ohs/about/head-start>*

⁵¹ *Head Start impact study: Final report. (2010, January). Retrieved from http://www.acf.hhs.gov/sites/default/files/opre/executive_summary_final.pdf*

⁵² *Aikens, N., Kopack Klein, A., Tarullo, L. & West, J. (2013). Getting ready for kindergarten: Children’s progress during Head Start. FACES 2009 report. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.*

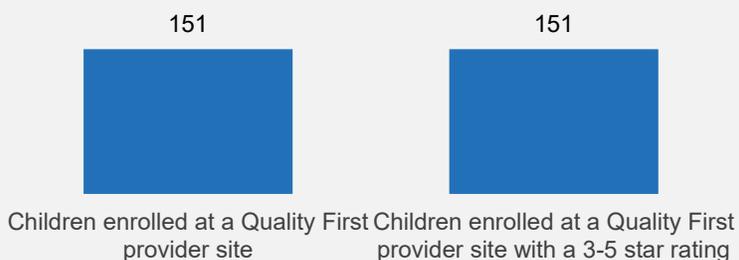
Quality of Early Care and Education

Quality First is a signature program of FTF that is designed to improve the quality of early learning for children birth to age five. Quality First partners with ECE providers across Arizona to provide coaching and funding that is meant to improve the quality of their services. Quality First implemented a statewide standard of quality for ECE programs along with associated star ratings. The star ratings allow parents to easily take quality into consideration when deciding on care providers. The star ratings range from one to five indicating the level of quality and attainment of quality standards.⁵³

	Highest Quality	Far exceeds quality standards
	Quality Plus	Exceeds quality standards
	Quality	Meets quality standards
	Progressing Star	Approaching quality standards
	Rising Star	Committed to quality improvement
	No Rating	Program is enrolled in Quality First but does not yet have a public rating

In the FTF CRIT Region, there are two Quality First centers, both of which are rated as a 3-5 star provider. In total, 151 children are enrolled across these facilities. Looking at the overall population of 739 children ages zero to five in the CRIT Region (Exhibit 1.2), it can be estimated that children enrolled in Quality First centers comprise just about a fifth (20%) of the population.

Exhibit 4.4. Quality First Enrollment by Quality First Star Ratings in the FTF CRIT Region



Arizona First Things First (2022). Colorado River Indian Tribes Regional Council Data Report - State Fiscal Year 2022, Quarter 3. Data received by correspondence.

Costs of Child Care & Access

In addition to supporting improvements in the quality of child care, the FTF CRIT Regional Council provides scholarships for low income children to attend quality ECE programs. Previous research has shown that low-income mothers receiving child care subsidies, a form of financial assistance, are more

⁵³ *Arizona First Things First (October 2021). Quality First. Retrieved from: <https://www.firstthingsfirst.org/resources/quality-first/>*

likely than other low-income mothers to work, sustain employment, and work longer hours.^{Error! Bookmark not defined.} Further, the negative effects of not accessing child care include the possibility of incurring financial debt, choosing child care that is lower quality and less stable, and losing time from work.

Across the state, licensed centers have the highest cost per day, certified group homes have the second highest cost per day, and approved family homes have the lowest cost per day (Exhibit 4.5). Where data is available, child care costs for the CRIT Region and La Paz County are lower than the state average. The median cost per day of licensed centers in the CRIT Region is approximately \$8 to 10 less per day compared to the cost statewide. High child care prices likely place a financial strain on families who already report barely making ends meet and having difficulty affording housing and food.

Based on the median cost per day, the estimated annual cost of child care at a licensed center in the CRIT Region totals to approximately \$8,250 a year for one infant, \$7,250 for a 1-2 year old, and \$6,375 for a 3-5 year old (data not shown). Compared against the median income of husband-wife families in La Paz County with children under 18, licensed centers comprise approximately 14% to 19% of the regional median family income (Exhibit 4.6)

The median cost per year of child care comprises an even higher amount of the median income for single parent led families with children under 18 in the region and La Paz County and is considerably more substantial for single-female families compared to single-male families. Based on the median income of single-female families (Exhibit 2.7), the cost of child care at a licensed centers could make up to 50% of their median income. High costs can be a barrier in affording quality child care especially for single-female families. Additionally, local experts mention that while there are childcare scholarships to help offset cost, financial barriers remain prohibitive and is a concern among care providers.

Exhibit 4.5. Median cost per day of Early Childhood Care

	Approved Family Homes			Certified Group Homes			Licensed Centers		
	Infants	1-2 Year Olds	3-5 Year Olds	Infants	1-2 Year Olds	3-5 Year Olds	Infants	1-2 Year Olds	3-5 Year Olds
FTF CRIT Region	N/A	N/A	N/A	N/A	N/A	N/A	\$33.00	\$29.00	\$25.50
La Paz County	N/A	N/A	N/A	N/A	N/A	N/A	\$33.00	\$29.00	\$25.50
ARIZONA	\$20.00	\$20.00	\$20.00	\$30.00	\$28.00	\$28.00	\$43.03	\$38.00	\$33.00

Arizona Department of Economic Security (2018). Child Care Market Rate Survey. Provided by AZ FTF.

Exhibit 4.6. Cost of center-based child care as a percentage of income

	Median Family Income (2019)	Cost For An Infant	Cost for a 1-2 Year Old Child	Cost for a 3-5 Year Old Child
La Paz County	\$44,419	19%	16%	14%
ARIZONA	\$70,184	15%	14%	12%

Arizona Department of Economic Security (2018). *Child Care Market Rate Survey*. Provided by AZ FTF.

From 2017-2020, the CRIT Region experienced an increase in the number of children receiving DES child care subsidies while the State also experienced an overall increase. During the same time period, the state and county both experienced a decrease in the percent of eligible children receiving child care subsidies (Exhibit 4.7).

Exhibit 4.7. 2019-2020 Number of children eligible and receiving child care subsidies

	Number of Children Receiving Subsidies				Percent of Eligible Children Receiving Subsidies			
	2017	2018	2019	2020	2017	2018	2019	2020
FTF CRIT Region	10	11	DS	25	83%	73%	Cannot Calculate	100%
La Paz County	DS	DS	DS	DS	Cannot Calculate	Cannot Calculate	Cannot Calculate	100%
ARIZONA	16,922	19,813	23,155	19,909	93%	92%	92%	80%

Note: DS = data suppressed. Cannot Calculate = percentages cannot be calculated due to suppressed data. Arizona Department of Economic Security (2020). *Child Care (CCA) Subsidies*. Provided by AZ FTF.

Developmental Delays and Special Needs

Advances in teaching young children with special needs reflect significant changes in public policy and professional philosophy across the nation. There are diverse perspectives on how to effectively teach young children with developmental delays and special needs.⁵⁴ The Individuals with Disabilities Education Act (IDEA) is a law ensuring services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education, and related services to more than 6.5 million eligible infants, toddlers, children, and youth with disabilities. Infants and toddlers with disabilities (ages zero to two) and their families receive early intervention services under IDEA Part C. Children and youth (ages three to 21) receive special education and related services under IDEA Part B.⁵⁵

AzEIP is a statewide system that offers services and assistance to families and their children with disabilities or developmental delays under the age of three under IDEA Part B. The purpose of the

⁵⁴ Examples of developmental delays for preschoolers include, but not limited to, cognitive, motor, social/emotional/behavioral or speech.

⁵⁵ US Department of Education: Office of Special Education and Rehabilitative Services. Retrieved from <https://www2.ed.gov/about/offices/list/osers/osep/osep-idea.html>

program is to intervene at an early stage to help children develop to their highest potential.⁵⁶ Research shows that children and youth with mild intellectual disabilities are behind in academic skills compared to their peers.⁵⁷ Without proper intervention, this can lead to delays in learning to read and perform basic math and to further difficulties in other academic areas that require use of those skills. A child is eligible for AzEIP if he/she is between birth and 36 months of age and is developmentally delayed or has an established condition that has a high probability of resulting in a developmental delay, as defined by the State.⁵⁸

From 2018-2020, the CRIT Region experienced an increase in the number of children receiving AzEIP referrals (Exhibit 4.8). Compared to 2019, the number of children receiving referrals in the CRIT region in 2020 increased by from 10 to 28. However, at the state-level, Arizona experienced a decrease in both the number of children receiving AzEIP referrals and services. The number of children receiving services decreased by more than 10% between 2018 and 2020 for Arizona. One local expert suggested that the rise at the regional level may be attributable in part to a robust identification process used in the region through the Child Find program that helps screen children and identify any developmental delays early. In general, one reason why all referred children do not receive services may be because of the high eligibility threshold of having a 50% or greater delay in development.

Exhibit 4.8. Children receiving AzEIP referrals and services in the FTF CRIT Region, La Paz County, and Arizona, 2018-2020

	Number of Children Receiving AzEIP Referrals			Number of Children Receiving AzEIP Services		
	2018	2019	2020	2018	2019	2020
FTF CRIT Region	DS	10	28	DS	DS	DS
La Paz County	DS	DS	DS	DS	DS	DS
ARIZONA	10,535	11,190	9,794	2,421	2,641	2,172

Note: DS = data suppressed.

Arizona Department of Economic Security (2021). AzEIP Referred and Served Children. Provided by AZ FTF.

Special Education

The Arizona Department of Education collects information on special education pre-k children who entered kindergarten without the need for an Individualized Education Program (IEP). In 2020, the most common types of disabilities for preschool children were developmental delay and speech/language impairment (Exhibit 4.9). For preschool students in the CRIT Region in 2018-2020, the number of

⁵⁶ Arizona Department of Economic Security (n.d.). Arizona Early Intervention Program. Retrieved from: <https://des.az.gov/services/disabilities/developmental-infant>

⁵⁷ Rosenberg, L., Bart, O., Ratzon, N., Jarus, T. (2013) Personal and Environmental Factors predict participation of children with and without mild developmental disabilities. Retrieved from: <https://link.springer.com/article/10.1007/s10826-012-9619-8/>

⁵⁸ Arizona Department of Economic Security (n.d.) Eligibility for the Arizona Early Intervention Program. Retrieved from: <https://des.az.gov/services/disabilities/early-intervention/arizona-early-intervention-program-azeip-eligibility>

students enrolled in special education was consistently around 100% (Exhibit 4.10). While this may be partly attributed to the overall small number of preschool students in the region, these data may suggest a high usage of special education services in the region.

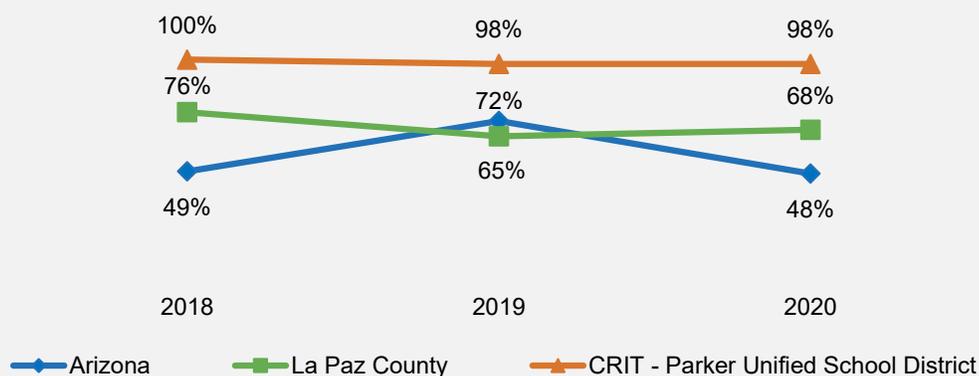
Exhibit 4.9. Preschool children enrolled in special education by type of disability, 2020

	Percent in Special Education	Autism	Developmental Delays	Hearing Impairment	Other	Preschool Severe Delay	Speech/ Language Impairment
FTF CRIT Region	>98%	0%	68%	0%	0%	9%	24%
La Paz County	68%	0%	67%	0%	0%	8%	25%
ARIZONA	48%	<2%	43%	<2%	<2%	20%	34%

Arizona Department of Education (2020). [Special education]. Unpublished data.

Note: The data presented in this table are unduplicated (i.e., children diagnosed with multiple disabilities are counted only one time in the Federal Primary Need (FPN) category)

Exhibit 4.10. Percent of preschool children enrolled in special education, 2018-2020



Arizona Department of Education (2014). Graduation Rate 2018 Cycle. Provided by AZ FTF.

EARLY LEARNING HIGHLIGHTS

About 51% of preschool-aged children in the region are enrolled in early care and education programs, which is less than the 68% assumed to need child care based on their parents’ employment status. A contributing factor may be the high cost of childcare. With respect to childcare subsidies, more children are becoming eligible for, receiving, and remaining on the waitlist for the subsidies in the CRIT Region. Based on the median income of families in La Paz County with children under 18, the cost of child care at a licensed centers could be the equivalent of a significant portion of median income. High costs can be a barrier in affording quality child care, especially for single-female families.

Below are key findings that highlight the early learning assets, needs, and data-driven considerations for the FTF CRIT Region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
Quality First has been increasing the quality and stability of child care programs in the region.	Support Quality First efforts in the region to increase the opportunities for children to receive quality early care and education experiences, including education training resources for early childcare providers.

Needs	Considerations
The capacity of ECE programs in the region is lower than the number of children presumed to need childcare. Availability of providers and the cost of child care are two possible contributing factors. High costs can be a particularly acute barrier to quality child care for single-female families, whose median income is even lower.	Explore further opportunities for research to understand the challenges associated with accessing child care for Colorado River Indian Tribes parents, and supports and services to alleviate barriers to access.



CHILD HEALTH

CHILD HEALTH

Why It Matters

Ensuring healthy development through early identification and treatment of children's health issues helps families understand healthy developmental pathways and how health issues affect children and their school readiness.⁵⁹ There are many health factors that impact the well-being of young children and their families. Research has shown that high quality prenatal care improves maternal health and health behaviors during pregnancy and after childbirth.⁶⁰ For example, during prenatal care visits, expectant mothers are provided with information and resources to promote a healthy pregnancy and increase the healthy development of their child. At routine prenatal visits, physicians often remind expectant mothers of the importance of abstaining from substance use, maintaining a healthy diet, and the benefits of breastfeeding, all of which influence a baby's development. For example, maternal overweight and obesity have been associated with risks of gestational diabetes mellitus, caesarean delivery, large for gestational age, pre-eclampsia, preterm birth, and admission to special care nursery or intensive care unit.⁶¹

Engaging in healthy preventative practices, such as breastfeeding and vaccinating children during early childhood, may help protect children from negative health outcomes and developmental delays. Breastfeeding provides children with the nutrition they need early in life.⁶² Children who have not been vaccinated are at a higher risk of contracting diseases and tend to have more health issues later in life. Research has found that it is important for children to receive their immunizations early in life. Children under the age of five are at the highest risk of contracting severe illnesses because their bodies have not built a strong immune system yet.⁶³ Another factor that may impact health outcomes and may be deemed less important by parents is early screening for hearing loss. According to the Center for Disease Control and Prevention (CDC), hearing loss can impact a child's ability to develop communication, language, and social skills.⁶⁴ Fortunately, early screening for hearing loss can connect children with services that can increase the likelihood of the child reaching their full potential.

⁵⁹ *Schools & Health* (2016). *Impact of Health on Education*. Retrieved from <http://www.schoolsandhealth.org/pages/Anthropometricstatusgrowth.aspx>

⁶⁰ Yan, J. (2016) *The effects of prenatal care utilization on maternal health and health behaviors*. *Health Economics*. Volume 26 Issue 8. Retrieved from <https://doi.org/10.1002/hec.3380>

⁶¹ Yang, Z., Phung, H., Freebairn, L., Sexton, R., Raulli, A., Kelly, P. (2018) *Contribution of maternal overweight and obesity to the occurrence of adverse pregnancy outcomes*. *ANZJOG*. Volume 59 Issue 3. Retrieved from <https://doi.org/10.1111/ajo.12866>

⁶² *Office on Women's Health* (2014). *Why breastfeeding is important*. Retrieved from <https://www.womenshealth.gov/breastfeeding/breastfeeding-benefits.html>

⁶³ *Centers for Disease Control and Prevention* (2016). *Infant Immunizations*. Retrieved from <http://www.cdc.gov/vaccines/parents/parent-questions.html>

⁶⁴ *Center for Disease Control and Prevention Division* (2020). *Hearing Loss*. Retrieved from <https://www.cdc.gov/ncbddd/hearingloss/index.html>

This chapter provides an overview of the health indicators for this region that highlight the well-being of children under age six and their families. Healthy People 2030 (HP 2030) set 10-year national objectives for improving the health of all Americans. Healthy People established these benchmarks to encourage collaborations across communities and sectors, empower individuals to make informed health decisions, and measure the impact of prevention activities.⁶⁵ When appropriate, these benchmarks will be presented throughout this chapter as comparison points for local indicators.

Caregiver Survey

The Caregiver Survey was administered online and in-person throughout the FTF CRIT Region between November 29, 2021 and March 25, 2022. In total, 52 surveys were collected from caregivers across the region. Thirty-two were completed online through the Qualtrics survey platform and an additional twenty were administered by the CRIT Regional Director and members of the Regional Partnership Council. The survey was administered to better understand the characteristics and experience of parents, grandparents, and caregivers in the CRIT Region. Key findings from the Caregiver Survey that speak to child health outcomes and indicators are included in this chapter. A separate standalone brief was produced for the CRIT Regional Partnership Council that summarized complete findings from the survey.

What the Data Tell Us

Access to Health Services

Data provided by Indian Health Services (IHS) indicates that in Fiscal Year 2018-19, there were 510 children ages zero to five among 4,517 total active users of IHS among the Colorado River Indian Tribes.⁶⁶ Exhibit 5.1 illustrates the different services that were provided by IHS, including 805 immunizations and screenings as well as 491 medical examinations.

Exhibit 5.1. IHS Services Received in the CRIT Region, FY2019-20

Service	Number of visits
Administrative/social admission	2,047
Immunizations and screening for infectious disease	805
Medical examination/evaluation	491
Residual codes; unclassified	378
Other lower respiratory disease	227

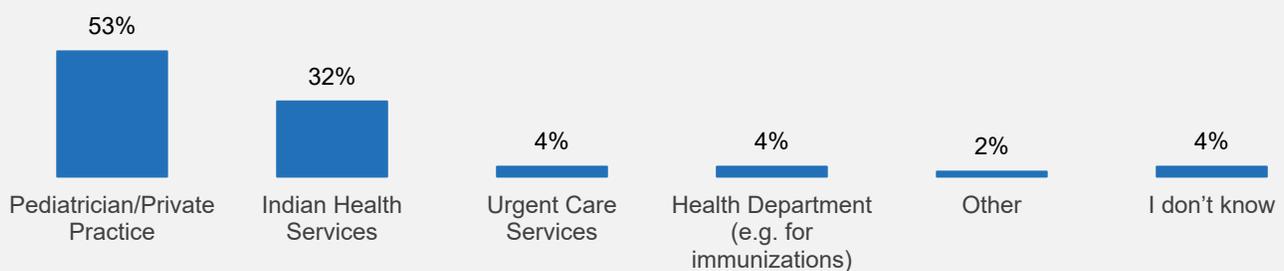
Indian Health Service (2021). [Maternal and Child Health Dataset]. Unpublished Data

⁶⁵ Healthy People 2030. U.S. Department of Health and Human Services. ODPHP Office of Disease Prevention and Health Promotion. Retrieved from <https://health.gov/healthypeople>

⁶⁶ Indian Health Service (2021). [Maternal and Child Health Dataset]. Unpublished Data

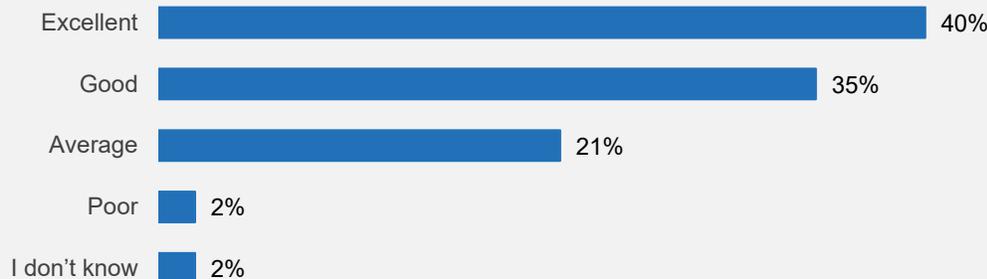
Caregiver Survey respondents were asked to indicate where they typically go for health care for their child or the child they care for. Among survey respondents, about half of caregivers (53%) indicated they accessed their child’s health care at a pediatrician’s office or at a private practice, while an additional 32% of respondents went to Indian Health Service for their children’s care (Exhibit 5.2). Survey respondents were also asked to rate the quality of their child’s health care. Exhibit 5.3 demonstrates that most caregivers were satisfied with the care they sought for their children in the region, with the majority of caregivers rating the quality of care as excellent (40%) or good (35%).

Exhibit 5.2. Childcare Providers Used by CRIT Region Caregivers



Harder+Company Community Research. (2022). [FTF CRIT Region Caregiver Survey]. Unpublished data.

Exhibit 5.3. Quality of Childcare Rating by CRIT Region Caregivers

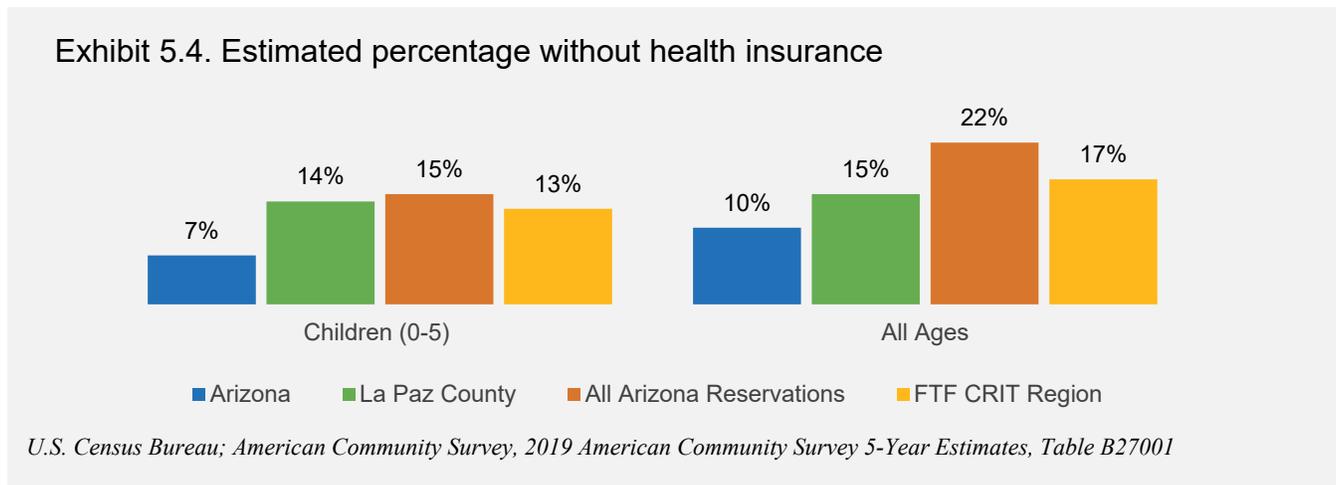


Harder+Company Community Research. (2022). [FTF CRIT Region Caregiver Survey]. Unpublished data.

Lack of access to affordable health care is a major impediment to receiving proper care and an issue that disproportionately affects women living in poverty, placing their children at risk for health issues even before they are born, and perpetuating health disparities.⁶⁷ Overall, the FTF CRIT Region has a higher percentage of individuals without health insurance coverage compared to the state average, indicating more access to physicians may be needed. However, the rate of health insurance coverage in the region

⁶⁷ LaVeist, T., Gaskin, D., Richard, P. (2009). *The Economic Burden of Health Inequalities in the United States*. Joint Center for Political and Economic Studies. Retrieved from https://hsrc.himmelfarb.gwu.edu/sphhs_policy_facpubs/225/

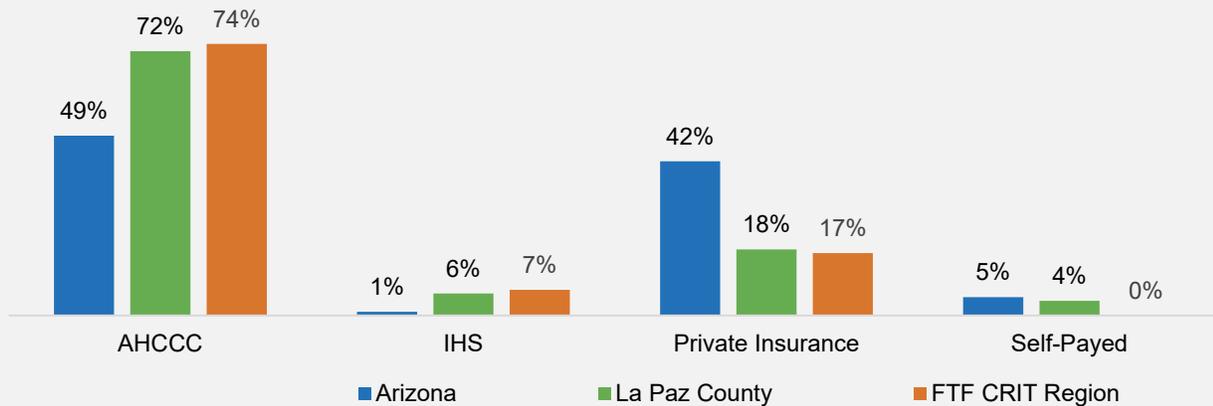
is comparable to the rate in La Paz County, and notably lower in comparison to the average among children in all tribal reservations in the state (Exhibit 5.4).



The HP 2030 target is for 92.1% of Americans to have medical insurance by 2030.⁶⁸ The combination of the limited number of providers in rural parts of the region and children lacking health insurance could potentially place children in the region at risk for long term health complications if they fall ill and providers are not available or their parents do not have the sufficient funds to seek care. In terms of payers of births in CRIT Region, 74% paid with AHCCC (Arizona’s Medicaid agency), which is much higher than the coverage rate statewide in Arizona (Exhibit 5.5) However, the proportion of individuals paying with private insurance in the CRIT Region (17%) is substantially lower than the state average of private insurance payers (42%).

⁶⁸ *Healthy People 2030. About Health People. Retrieved from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality/increase-proportion-people-health-insurance-ahs-01>*

Exhibit 5.5. Percentages for payers of births in 2019



Arizona Department of Health Services (2019). Vital Statistics. Provided by AZ FTF.

In addition to the affordability and cost, the Caregiver Survey also asked caregivers the types of support they feel they most need to help with their child(ren). The most common responses were supports and services related to child development, nutrition, and early literacy (Exhibit 5.6).

Exhibit 5.6. Types of services and support caregivers indicate they need

Service	Percent
Child Development	53%
Nutrition/Physical Activity	44%
Early literacy	44%
Behavior	40%
Health Services	22%
Guardianship	18%
Special Education	13%
Legal	13%
Other	0%

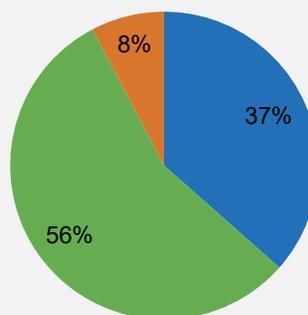
Note: Survey respondents (n=45) could select multiple responses
 Harder+Company Community Research. (2022). [FTF CRIT Region Caregiver Survey]. Unpublished data.

Given that survey design and data collection for the Caregiver Survey began in November 2021, the survey included a question asking about the impact of the COVID-19 so far on caregivers' ability to provide child care. More than a third of caregivers (37%) indicated that the pandemic did have an impact on providing and/or seeking child care (Exhibit 5.7). However, given the ongoing and evolving impacts of the pandemic, it is likely that these data will fluctuate and possibly improve with time. Additional analysis is included in the caregiver survey findings brief.

Exhibit 5.7. COVID-19 impact on child care

Has the COVID-19 pandemic impacted your ability to provide child care?

- Yes
- No
- I don't know



Harder+Company Community Research. (2022). [FTF CRIT Region Caregiver Survey]. Unpublished data.

Hospitalizations

In the CRIT Region, there were a total of 230 non-fatal emergency department visits for children 0-4 (Exhibit 5.8). The most common reasons for visits include falls or being ‘struck by or against’ an object or person (data not shown). Accidents such as these further emphasize the importance of health insurance coverage for families and their children, as rapid medical response can prevent long term or more severe health complications later in life. Data on fatal hospitalizations and emergency department visits for the CRIT Region and La Paz were suppressed, suggesting that the number was low and overall insignificant (data not shown).

Exhibit 5.8. Injury hospitalizations and ED visits for children 0-4, ADHS (2016-2020)

	Number of Non-Fatal Hospitalizations	Number of ED Visits
FTF CRIT Region	DS	230
La Paz County	8	333
ARIZONA	2,890	181,035

Note: DS = data suppressed.

Arizona Department of Health Services (July 2020). Unintentional Injuries in Children 0-5, Arizona 2016-2020. Provided AZFTF

Pregnancies and Birth

During calendar year 2019, CRIT Region residents gave birth to 135 babies, which makes up the majority of births in La Paz County (Exhibit 5.9).

Exhibit 5.9. Live births during calendar year 2019, by mother’s place of residence

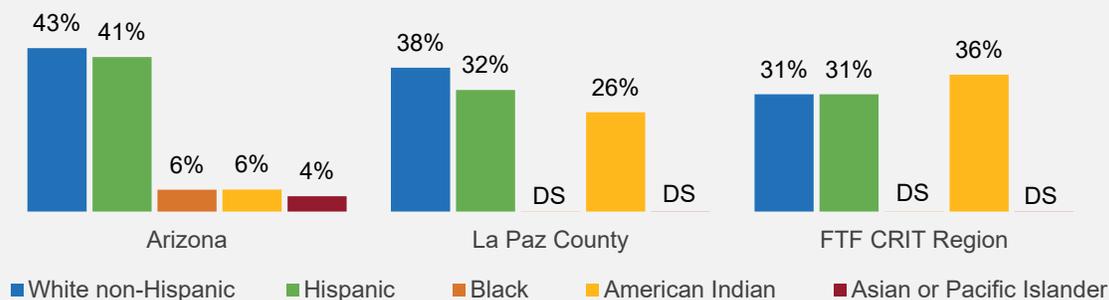
Total number of births in 2019	
FTF CRIT Region	135
La Paz County	186
ARIZONA	79,183

Arizona Department of Health Services (2021). [Vital Statistics Births dataset]. Unpublished data

Characteristics of People Giving Birth

Among all people who gave birth in the CRIT Region, 36% identified as American Indian, 31% as Hispanic or Latino/a, and 31% were non-Hispanic white (Exhibit 5.10). While data were suppressed for the percentages of people who gave birth identifying as other racial or ethnic groups, it can be assumed that these made up no more than two percent of all people who gave birth in the CRIT Region. A comparison of the race/ethnicity of people giving birth between the region and the state overall, especially the number of American Indian people demonstrates the unique racial/ethnic makeup of people who gave birth in the region and the county compared to Arizona.

Exhibit 5.10. Race and ethnicity of mothers giving birth in 2019



Note: DS = data suppressed.

Arizona Department of Health Services (2021). [Vital Statistics Births dataset]. Unpublished data

Prenatal Care

Research suggests that a lack of prenatal care is associated with many negative health issues for both the mother and the child.⁶⁹ Research also shows that children of mothers who did not obtain prenatal care were three times more likely to have a low birth weight and five times more likely to experience fatal outcomes than those born to mothers who did receive prenatal care.⁷⁰ In addition, studies show that women who are at the highest risk of not receiving prenatal care are mothers younger than 19 years old and single mothers.^{71,72} Educational attainment has also been associated with mothers receiving prenatal care, such that the higher a mother's educational attainment, the more likely they are to seek prenatal care.⁷³ It is important that mothers seek and receive prenatal care at an early stage in their pregnancy so

⁶⁹ Prenatal Care Effects Felt Long After Birth. (n.d.). Retrieved from <http://toosmall.org/blog/prenatal-care-effects-felt-long-after-birth>

⁷⁰ Womens Health (n.d.). Prenatal care fact sheet. Retrieved from <https://www.womenshealth.gov/publications/our-publications/fact-sheet/prenatal-care.html#b>

⁷¹ Center for Disease Control and Prevention (n.d.). Vital Statistics Online. Retrieved from http://www.cdc.gov/nchs/data_access/vitalstatsonline.htm

⁷² Institute of Medicine (US) Committee to Study Outreach for Prenatal Care; Brown SS, editor. Prenatal Care: Reaching Mothers, Reaching Infants. Washington (DC): National Academies Press (US); 1988. Chapter 1, Who Obtains Insufficient Prenatal Care? Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK217693/>

⁷³ National Center for Health Statistics (1994). Vital and Health Statistics: Data from the National Vital Statistics System. Retrieved from https://books.google.com/books?id=zIFPAQAIAAJ&pg=RA2-PA19&lpg=RA2PA19&dq=lack+of+prenatal+care+linked+with+mothers+educational+attainment&source=bl&ots=ilqp_JVnA&sig=SQBgmIhOG9JNrgFLEjMOVkt90&hl=en&sa=X&ved=0ahUKEwjM6vH_6vPAhWCjlQKHWRjCwkQ6AEIVDAH#v=onepage&q&f=false

physicians can treat and prevent any health issues that may occur.⁷⁴

HP 2030 aims to bring the proportion of pregnant women who receive early and adequate prenatal care to 80.5%.⁷⁵ In 2018, 37% of women in the CRIT Region began prenatal care in the first trimester while there were five percent whom did not receive any prenatal (Exhibit 5.11). In 2014, a new version of the Birth Certificate introduced changes in the way prenatal care by trimester is assessed. The trimester when prenatal care began is no longer directly reported but rather calculated using the date of the mother’s last menstrual period and the date of the first prenatal care visit. Due to this procedural change, prenatal care is not comparable to previous reports. Based on the new methodology, the percentage of mothers in the region who started prenatal care in the first trimester in 2019 is 41%, which is about 40% lower than HP goal and also lower than in La Paz County (47%) and statewide (69%).

Exhibit 5.11. Percentage of women who began prenatal care in first trimester and who did not receive any prenatal care

	Women who began prenatal care in first trimester		Women who did not receive any prenatal care	
	2018	2019	2018	2019
FTF CRIT Region	37%	41%	5%	Cannot Calculate
La Paz County	44%	47%	4%	3%
ARIZONA	69%	69%	3%	3%

Cannot Calculate = percentage cannot be calculated due to suppressed data.

Arizona Department of Health Services (2019). Vital Statistics. Provided by AZ FTF.

Birth Outcomes

The percentage of underweight children in the CRIT Region has remained relatively consistent between 2018 and 2019, and slightly higher than the rate in the county and the state overall (Exhibit 5.12). The percentage of preterm births rose over the two years in both the CRIT Region and in La Paz County, and the proportion of preterm births was almost twice as high in the CRIT Region in 2019 compared to the state average.

The percentage of newborns in CRIT Region who were admitted to the Intensive Care Unit has fluctuated over time and showed a slight increased from 2018 to 2019 (Exhibit 5.13). In addition, it was reported that five percent of mothers had used tobacco during pregnancy in the CRIT Region, a similar rate to the county and the state (Exhibit 5.14). From 2016-2019, approximately three percent of

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⁷⁴ *Womens Health (n.d.). Prenatal care fact sheet. Retrieved from <https://www.womenshealth.gov/publications/our-publications/fact-sheet/prenatal-care.html#b>*

⁷⁵ *Healthy People 2030. About Health People. Retrieved from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/pregnancy-and-childbirth/increase-proportion-pregnant-women-who-receive-early-and-adequate-prenatal-care-mich-08>*

newborns in Arizona were hospitalized after birth because they were affected by maternal use of drugs during pregnancy. This may be related to the decrease in early prenatal care as mothers using substances may be less likely to seek care. Follow-up care is therefore just as important to identify any emerging health conditions that could worsen over time, such as Type II Diabetes and Asthma. In Arizona overall, inpatient hospitalizations and ED visits for children 0-17 with Type II Diabetes and Asthma has remained steady from 2016-2020 (data not shown).

Exhibit 5.12. Percentage of births with low birth weights (<2,500g) and preterm births (<37 weeks)

	Low birth weight (<2,500g)		Preterm births (<37 weeks)	
	2018	2019	2018	2019
FTF CRIT Region	8%	10%	13%	17%
La Paz County	7%	9%	11%	15%
ARIZONA	8%	7%	10%	9%

Arizona Department of Health Services (2019). Vital Statistics. Provided by AZ FTF.

Exhibit 5.13. Percentage of Infants Admitted to the Intensive Care Unit

	2018	2019
FTF CRIT Region	5%	7%
La Paz County	6%	7%
ARIZONA	8%	8%

Arizona Department of Health Services (2019). Vital Statistics. Provided by AZ FTF.

Exhibit 5.14. Percentage of Reported Tobacco Use During Pregnancy

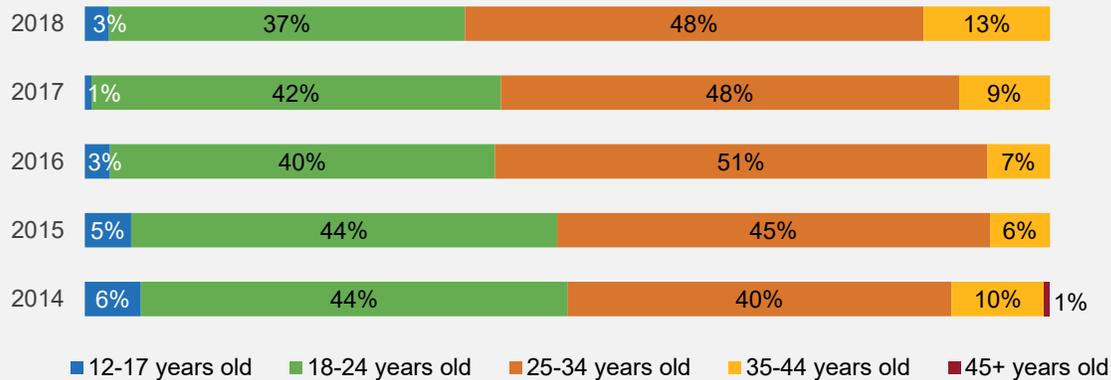
	2018	2019
FTF CRIT Region	5%	Cannot Calculate
La Paz County	4%	5%
ARIZONA	5%	4%

Cannot Calculate = percentage cannot be calculated due to suppressed data.

Arizona Department of Health Services (2019). Vital Statistics. Provided by AZ FTF.

Additional factors that place mothers at-risk of not receiving prenatal care, such as teen pregnancy, single mothers, and mothers with lower education levels, have decreased or remained steady over the past few years. In the CRIT Region, three percent of mothers giving birth in 2018 were under the age of 17, a rate that has decreased in the last few years (Exhibit 5.15). Overall, the average maternal age in the CRIT Region has increased, with fewer teen births and a greater percentage of births to mothers in their 20s and 30s.

Exhibit 5.15. Births by maternal age in the FTF CRIT Region, 2014-18



Source: Inter-Tribal Council of Arizona (2016) [WIC Dataset]. Unpublished data.

Obesity

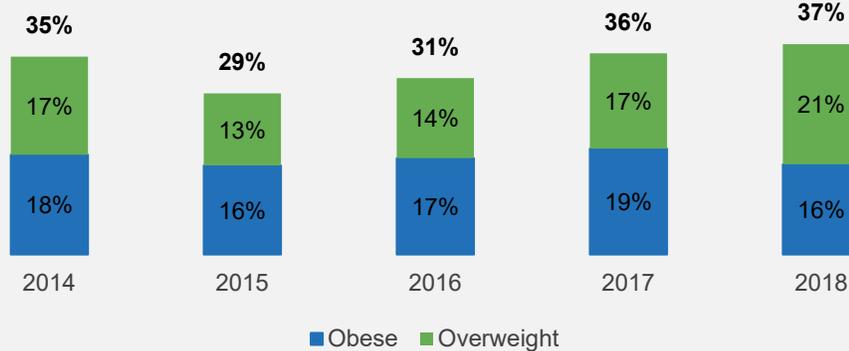
Another aspect of maternal health that is linked to both birth outcomes and a child’s subsequent health is maternal obesity. Obesity has been a concern in the US due to associated health outcomes, such as higher risks for diabetes, cancer, and heart disease.⁷⁶ Diabetes has also been associated with many negative health complications such as blindness, kidney failure, and amputation of limbs.⁷⁷

Among children ages 2 and older, 37% of children were either obese or overweight in the CRIT Region in 2018, and that rate has increase overall from 2014 onwards (Exhibit 5.16). The obesity rate is higher than the state average (16%), calling to attention the need for additional opportunities and access to engage in healthy behaviors such as exercise and good nutrition. Looking at data provided by WIC on the childhood obesity rate by race/ethnicity, the obesity rate is highest among American Indian children over 2 years old, where 23% of American Indian children are obese, a rate that has remained consistently higher than other racial and ethnic groups (Exhibit 5.17).

⁷⁶ Center for Disease Control and Prevention. (n.d.). Adult Obesity Facts. Retrieved from <https://www.cdc.gov/obesity/data/adult.html>

⁷⁷ Chronic Disease Prevention and Health Promotion. (n.d.). Diabetes At A Glance Reports. Retrieved from <http://www.cdc.gov/chronicdisease/resources/publications/aag/diabetes.htm>

Exhibit 5.16. Percentage of children over 2 years old who are overweight and obese in the FTF CRIT Region



Inter-Tribal Council of Arizona (2016) [WIC Dataset]. Unpublished data. Provided by AZ FTF

Exhibit 5.17. Percentage of children over 2 years old in the FTF CRIT Region who are obese, overall and by race/ethnicity, 2014-2018

	2014	2015	2016	2017	2018
Total	18%	16%	17%	19%	16%
American Indian/Native American	22%	21%	24%	21%	23%
Hispanic	0%	13%	12%	18%	11%
White	12%	3%	8%	9%	8%

Inter-Tribal Council of Arizona (2016) [WIC Dataset]. Unpublished data. Provided by AZ FTF

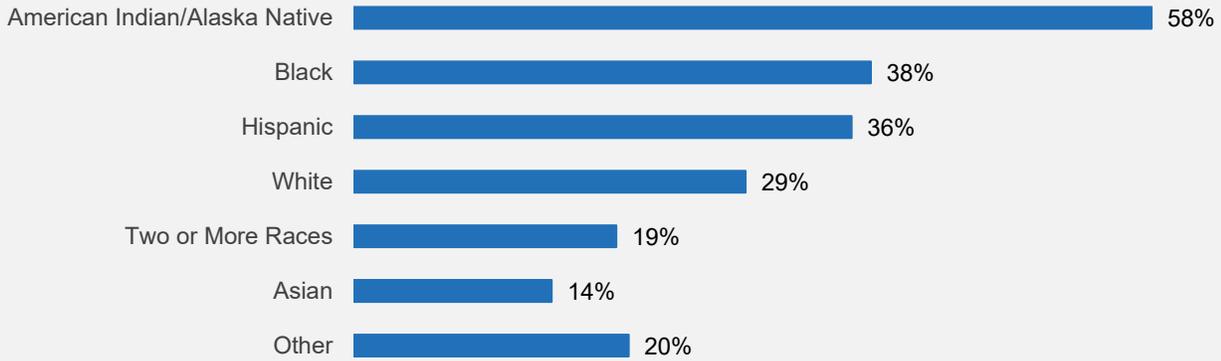
According to the College of Obstetricians and Gynecologists (ACOG), mothers who are obese during pregnancy are at increased risk of developing gestational diabetes, preeclampsia, and sleep apnea.⁷⁸ According to the CDC, diabetes and obesity can be prevented by increasing physical activity and maintaining a healthy diet.⁷⁹ HP 2030 aims to reduce the proportion of adults who are obese to 36% and the proportion of children and adolescents who are obese to 15.5%.⁸⁰ In Arizona overall, the percentage of adults with obesity was 31.4% in 2019, and Exhibit 5.18 shows the differences across racial/ethnic groups.

⁷⁸ ACOG (2016). *Obesity and Pregnancy*. Retrieved from <http://www.acog.org/Patients/FAQs/Obesity-and-Pregnancy>

⁷⁹ Chronic Disease Prevention and Health Promotion. (n.d.). *Diabetes At A Glance Reports*. Retrieved from <http://www.cdc.gov/chronicdisease/resources/publications/aag/diabetes.htm>

⁸⁰ Healthy People 2030. *About Health People*. Retrieved from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/overweight-and-obesity/reduce-proportion-adults-obesity-nws-03>

Exhibit 5.18. Percentage of adults with obesity in Arizona by Race/Ethnicity, 2019

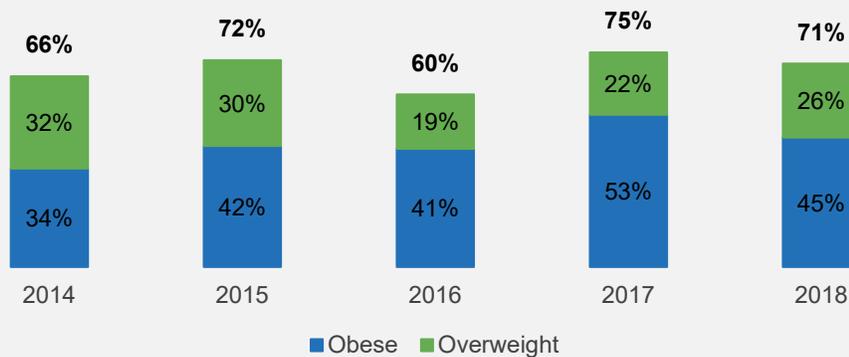


Centers for Disease Control and Prevention (2019). Obesity.

In the CRIT Region, the rate of overweight or obese pre-pregnancy among mothers participating in WIC has stayed steadily high; 71% of mothers in 2018 were overweight/obese pre-pregnancy (Exhibit 5.19). By race/ethnicity, the obesity rate is highest among American Indian mothers (59%), and similar to the childhood obesity rate, this rate has remained consistently higher than mothers of other racial and ethnic groups (Exhibit 5.20).

Families participating in WIC are likely opting for less expensive food options which often tend to be less healthy as well. Furthermore, the availability of recreation and fitness facilities where residents of the CRIT Region can stay active may likely have an impact on physical wellbeing.⁸¹ The lack of services and infrastructure where residents can engage in physical activity, in addition the limited availability of grocery stores, may contribute to the increasing rate of obesity and diabetes in region.

Exhibit 5.19. Percentage of mothers overweight and obese pre-pregnancy in the FTF CRIT Region



Arizona Department of Health Services (2020). Women, Infants & Children (WIC). Provided by AZ FTF.

⁸¹ *United States Department of Agriculture and Economic Research Service (2012). Food Environment Atlas.*

Exhibit 5.20. Percentage of mothers who are obese in the FTF CRIT Region, 2014-2018

	2014	2015	2016	2017	2018
Total	34%	42%	41%	53%	45%
American Indian/Native American	34%	49%	62%	60%	59%
Hispanic	35%	42%	35%	49%	33%
White	33%	28%	19%	48%	40%

Inter-Tribal Council of Arizona (2016) [WIC Dataset]. Unpublished data. Provided by AZ FTF.

Engaging in Healthy Preventive Practices

The American Academy of Pediatrics recommends that mothers breastfeed for the first six months after giving birth.⁸² Breast milk has antibodies that prevent babies from getting ill and it has been shown to decrease the likelihood of babies becoming obese.⁸³ HP 2030 aims to increase the proportion of infants who are breastfed at six months to 42.4%.⁸⁴ In the CRIT Region, the percentage of mothers participating in WIC who had ever breastfed their infant increased overall from 2017-2020. Notably, in 2019, two-thirds of mothers (67%) reported breastfeeding their infant (Exhibit 5.21).

Exhibit 5.21. Percentage of mothers in the FTF CRIT Region who breastfeed their infant, 2017-20

	2017	2018	2019	2020
Ever	51%	55%	67%	58%
Never	49%	45%	33%	42%

Arizona Department of Health Services (2020). Women, Infants & Children (WIC). Provided by AZ FTF

**Breastfeeding is defined as the practice of feeding a mother's breast milk to her infant(s) on the average of at least once a day*

Vaccinations can protect children from measles, mumps, and whooping cough, which are all severe illnesses currently present and potentially fatal to young children.⁸⁵ Receiving timely vaccinations is not only a protective factor to oneself, but to the community's immunity.⁸⁶ Across the state, children have an overall high rate of immunizations (Exhibit 5.22).

⁸² American Academy of Pediatrics (2012). *Breastfeeding and the Use of Human Milk*. Retrieved from <http://pediatrics.aappublications.org/content/129/3/e827.full#content-block>

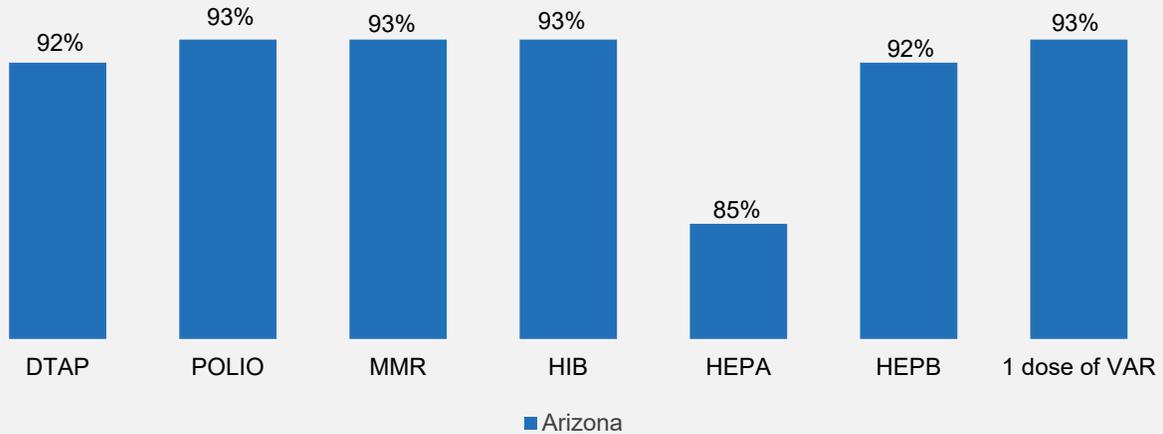
⁸³ Office on Women's Health (2014). *Why breastfeeding is important*. Retrieved from <https://www.womenshealth.gov/breastfeeding/breastfeeding-benefits.html>

⁸⁴ Healthy People 2030. *About Health People* Retrieved from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/infants/increase-proportion-infants-who-are-breastfed-exclusively-through-age-6-months-mich-15>

⁸⁵ Basic Vaccines (2016). *Importance of Vaccines*. Retrieved from <http://www.vaccineinformation.org/vaccines-save-lives/>

⁸⁶ U.S Department of Health and Human Services (2016). *Community Immunity*. Retrieved from http://www.health.ny.gov/prevention/immunization/vaccine_safety/

Exhibit 5.22. Percentage of children in childcare receiving immunizations by type of immunization



Immunization Data Reports (2020). Provided by AZ FTF.

Hearing loss in newborns and young children can lead to developmental problems with the child’s speech, language, and social skills.⁸⁷ There are several potential causes of infant hearing loss, including genetics, maternal infections during pregnancy, complications after birth, and head trauma.⁸⁸ Fortunately, early interventions can prevent such developmental problems, highlighting the importance of incorporating screenings for hearing loss into the child’s overall preventative care.

⁸⁷ Center for Disease Control and Prevention Division (2020). *Hearing Loss*. Retrieved from <https://www.cdc.gov/ncbddd/hearingloss/index.html>.

⁸⁸ *Ibid.*

CHILD HEALTH HIGHLIGHTS

The unique profile of the FTF CRIT Region presents both assets and challenges for supporting the health of pregnant women, young children, and their families. The percentage of the overall population and children 0-5 without health insurance is higher than that of the state, suggesting a need for access to healthcare in the region, though variable by area. Additionally, among the 135 births in 2019, 41% of women are receiving prenatal care in the first trimester and a high percentage are breastfeeding. However, the obesity rate among both infants and mothers in the CRIT Region is higher than the state average.

Below are key data trends that highlight the health assets, needs, and data-driven considerations for the region. The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
Parents and caregivers in the region are overall satisfied with their children’s health care, with the majority of caregivers rating the quality of care as excellent (40%) or good (35%).	Continue to provide public education about the benefits of health care for their children and consider targeted outreach for families in most need.
According to the Arizona Department of Health Services, 41% of all pregnant women are receiving prenatal care in their first trimester.	Promote the importance of early prenatal care and provide education on the impact of prenatal care on the mother and child’s future well-being.

Needs	Considerations
The percentage of mothers enrolled in WIC in the CRIT Region who are overweight or obese has seen a steady increase in recent years, from 2014 (66%) to 2018 (71%).	Promote evidence based community and place-based interactive health education to support families and children in achieving and maintaining a healthy weight. Interactive health education could focus on healthy nutrition and physical activity and be provided to children, families, early child care and education professionals, and others in the community who care for young children.



FAMILY SUPPORT

FAMILY SUPPORT

Why It Matters

The first five years of life have a significant impact on children's intellectual, social, and emotional development, and research shows that parents have a profound impact on their child's development during this time.⁸⁹ Support for young families is an essential piece of the holistic efforts around kindergarten readiness and long-term success for children. First Things First supports families through home visitation and parent outreach and education programs. Evidence-based Parenting Education and supports to improve parenting practices can reduce stressors and lead to enriched child development and reduction of removals of children from their homes.

Given the importance of the first years of life on children's development and the role that parents can play, it is crucial for parents to receive support and access to programs that provide tools and knowledge about their child's needs and effective parenting techniques. Providing more knowledge about parenting and child development supports parents in improving their parenting practices and providing their children with the experiences they need to succeed in kindergarten and beyond.⁹⁰ Public assistance programs in the United States can play an important role in providing adequate socioeconomic conditions for families to raise their children. The Supplemental Nutrition Assistance Program (SNAP) has been associated with helping families move out of poverty, guarantee food security, and improve child health and school performance.⁹¹ Research has also shown that the Temporary Assistance to Needy Families (TANF) could prevent child maltreatment due to increased cash benefits and access that have been associated with decreased physical abuse.⁹² The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) has reduced the prevalence of child food insecurity. Further, the revisions made to the WIC food package in October 2009 have been associated with reduced maternal preeclampsia and gestational weight gain, as well as improvements in infant gestational age and birth weight.^{93, 94}

⁸⁹ Center for the Study of Social Policy (2013). *Knowledge of Parenting and Child Development*. Retrieved from http://www.cssp.org/reform/strengthening-families/2013/SF_Knowledge-of-Parenting-and-Child-Development.pdf

⁹⁰ *Ibid.*

⁹¹ Carlson, S., Rosenbaum, D., Keith-Jennings, B., Nchako, C. (2016) *SNAP works for America's Children*. Center on Budget and Policy Priorities. Retrieved from <https://www.cbpp.org/sites/default/files/atoms/files/9-29-16fa.pdf>

⁹² Spencer, R., Livingston, M., Komro, K., Sroczynski, N., Rentmeester, S., Woods-Jaeger, B. (2021) *Association between Temporary Assistance for Needy Families (TANF) and child maltreatment among a cohort of fragile families*. *Child Abuse & Neglect*. Volume 120. Retrieved from <https://doi.org/10.1016/j.chiabu.2021.105186>

⁹³ Kreider, B., Pepper, J., Roy, M. (2016) *Identifying the effects of WIC on food insecurity among infants and children*. *Southern Economic Association*. Volume 82 Issue 4. Retrieved from <https://doi.org/10.1002/soej.12078>

⁹⁴ Hamad, R., Collin, D., Baer, R., Jelliffe-Pawlowski, L. (2019) *Association of revised WIC food package with perinatal and birth outcomes*. Retrieved from <https://jamanetwork.com/journals/jamapediatrics/article-abstract/2737097>

Promoting a safe home environment for children is another key aspect of family support. The adverse and long-term effects of childhood trauma have become well-documented. For example, children who are exposed to domestic violence or experience abuse or neglect are at increased risk of depression, anxiety, physical aggression, and behavior problems.⁹⁵ Children who are exposed to opioid misuse are more likely to experience mental health problems, drug use, accidental opioid poisoning, substance use disorder, family dissolution, foster care placement or the death of a parent due to an opioid overdose.⁹⁶ Children in foster care are particularly likely to have had trauma exposure and are more likely than other children to have poor mental and physical health.^{97, 98} Understanding the impact of trauma has led to identifying opportunities to both prevent and mitigate its adverse effects. Opportunities include family support services like home visitation and parent education, as well as prioritizing out-of-home placements with family members or foster families before turning to congregate care in a residential facility.

What the Data Tell Us

Services to Help Families

There are several federal and local programs and services aimed at providing families with the food they need, including Supplemental Nutrition Assistance Program (SNAP); Temporary Assistance for Needy Families (TANF); Women, Infants & Children (WIC); Food Distribution Program on Indian Reservations (FDPIR), National School Lunch Program (NSLP), Child and Adult Care Food Program (CACFP), Summer Food Program (SFP), and free and reduced priced lunch programs for children in schools.

Despite the prevalence of these programs, in recent years the number of children and families receiving assistance has decreased. The Colorado River Indian Tribes Department of Health and Social Services administers FDPIR in the Colorado River Indian Tribes region. Over the three years from 2019 to 2021, 510 households participated in the program (Exhibit 6.1). The number of certified households and participating households has decreased annually. Families choosing not to participate in FDPIR may enroll in SNAP and receive monthly benefits to purchase food at participating retailers. Enrollment in federal programs such as SNAP has also decreased in recent years due to the expiration of benefit increases instituted during the recession.⁹⁹ These decreases come even as the number of families living

⁹⁵ Evans, S. E., Davies, C., & DiLillo, D. (2008). *Exposure to domestic violence: A meta-analysis of child and adolescent outcomes. Aggression and violent behavior, 13*(2), 131-140.

⁹⁶ Winstanley, E., Stover, A. (2019) *The impact of the opioid epidemic on children and adolescents. Clinical Therapeutics. Volume 41 Issue 9.* Retrieved from <https://doi.org/10.1016/j.clinthera.2019.06.003>

⁹⁷ Dorsey, S., Burns, B., Southerland, D., Cox, J., Wagner, H., Farmer, E. (2012) *Prior Trauma Exposure for Youth in Treatment Foster Care. J Child Fam Stud.* Retrieved from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3667554/>

⁹⁸ Turney K, Wildeman C. (2016) *Mental and Physical Health of Children in Foster Care. Pediatrics.* Retrieved from: <https://pubmed.ncbi.nlm.nih.gov/27940775/>

⁹⁹ Rosenbaum, D. & Keith-Jennings, B. (2016). *Snap Costs and Caseloads Declining. Center on Budget and Policy Priorities.* Retrieved from <http://www.cbpp.org/research/food-assistance/snap-costs-and-caseloads-declining>

in poverty has increased nationally.¹⁰⁰ Exhibit 6.2 and Exhibit 6.3 show how the number of children and families receiving SNAP assistance has decreased in recent years. The percentage of families and children in the CRIT Region that received SNAP benefits decreased by 21% and 22% respectively from 2017 to 2020. As of 2020, the program supports approximately 454 children and 270 families annually in the CRIT Region. Among children who received SNAP benefits in 2020, data show that 63% were American Indian, 37% were Hispanic or Latino, and 37% were non-Hispanic white.

Exhibit 6.1. Food Distribution Program on Indian Reservations (FDPIR) for the CRIT Region

	2019	2020	2021
Certified persons	496	516	286
Certified households	231	233	149
Household participating	198	187	125

Colorado River Indian Tribes Social Services Department (2022). [Food Distribution Program Data]. Received by correspondence.

Exhibit 6.2. Numbers of young children (ages 0 to 5) receiving SNAP Benefits, 2017 to 2020

	FY 2017	FY 2018	FY 2019	FY 2020	Change from 2017 to 2020
FTF CRIT Region	575	573	524	454	-21%
La Paz County	865	856	764	665	-23%
ARIZONA	247,414	229,275	211,814	198,961	-20%

Arizona Department of Economic Security (2020). Supplemental Nutrition Assistance Program (SNAP).

Exhibit 6.3. Numbers of families receiving SNAP Benefits, 2017 to 2020

	FY 2017	FY 2018	FY 2019	FY 2020	Change from 2017 to 2020
FTF CRIT Region	346	341	312	270	-22%
La Paz County	529	519	471	405	-23%
ARIZONA	164,092	151,816	140,056	132,466	-19%

Arizona Department of Economic Security (2020). Supplemental Nutrition Assistance Program (SNAP).

Similar to the SNAP benefits, the number of children and families receiving TANF benefits decreased from 2017 to 2020 in the CRIT Region, La Paz County, and Arizona (Exhibit 6.4 and Exhibit 6.5). Notably, data for the CRIT Region show a sharp decrease particularly in young children receiving TANF benefits in 2020 where 15 children and 10 families received benefits. TANF benefits can be the primary cash assistance program for families with low incomes.¹⁰¹ Some research has criticized that

¹⁰⁰ Spalding, A. (2012). *Decline of TANF Caseloads Not the Result of Decreasing Poverty*. Kentucky Center for Economic Policy. Retrieved from <http://kypolicy.org/decline-tanf-caseloads-result-decreasing-poverty/>

¹⁰¹ U.S. Department of Health & Human Services (n.d.) Office of Family Assistance. *Temporary Assistance for Needy Families (TANF)*. Retrieved from: <https://www.acf.hhs.gov/ofa/programs/temporary-assistance-needy-families-tanf>

TANF does a poor job in providing enough assistance to Hispanic/Latino and African American families, especially those who have been the most impacted by the COVID-19 pandemic.¹⁰²

Exhibit 6.4. Numbers of young children (0-5) receiving TANF Benefits, 2017 to 2020

	FY 2017	FY 2018	FY 2019	FY 2020	Change from 2017 to 2020
FTF CRIT Region	34	38	35	15	-56%
La Paz County	34	46	48	38	-12%
ARIZONA	17,143	14,659	13,029	13,747	-20%

Arizona Department of Economic Security (2020). Temporary Assistance for Needy Families (TANF).

Exhibit 6.5. Numbers of families receiving TANF Benefits, 2017 to 2020

	FY 2017	FY 2018	FY 2019	FY 2020	Change from 2017 to 2020
FTF CRIT Region	15	11	16	10	-33%
La Paz County	24	DS	31	15	-38%
ARIZONA	12,315	10,538	9,360	9,947	-19%

Arizona Department of Economic Security (2020). Temporary Assistance for Needy Families (TANF).

Due to the school mandatory school closures due to COVID-19 in 2020, the Arizona Department of Economic Security, the US Department of Agriculture Food and Nutrition Service, and the Arizona Department of Education issued the P-EBT benefits to current SNAP households and non-SNAP households with children eligible for free and reduced price school meals.¹⁰³ Enrolled families were given a pre-loaded EBT card to purchase groceries. The number of families with children 0 to 5 years old that were enrolled in P-EBT from March 2021 to May 2021 decreased by about 11% in the CRIT Region, a slightly lower percent decrease than in La Paz County and statewide in Arizona. Although the number of families with young children using P-EBT has decreased, P-EBT was able to provide financial relief to 73 CRIT Region families in May 2021 (Exhibit 6.6).

Exhibit 6.6. Number of families with children 0-5 enrolled in P-EBT, March 2021 to May 2021

	March 2021	April 2021	May 2021	Change from March 2021 to May 2021
FTF CRIT Region	82	79	73	-11%
La Paz County	108	104	93	-14%
ARIZONA	36,971	33,431	30,066	-19%

Arizona Department of Economic Security (2021). EBT Enrollment.

Through federal grants, WIC provides nutrition, education and breastfeeding support services, supplemental nutritious foods and referrals to health and social services for women, infants, and children

¹⁰² Safawi, A., Reyes, C., (2021) States must continue recent momentum to further improve TANF benefit levels. Center on Budget and Policy Priorities. Retrieved from <https://www.cbpp.org/research/family-income-support/tanf-benefits-still-too-low-to-help-families-especially-black>

¹⁰³ Arizona Department of Economic Security (n.d.) Arizona P-EBT Benefits. Retrieved from <https://des.az.gov/services/basic-needs/food-assistance/other-food-programs/arizona-p-ebt-benefits>

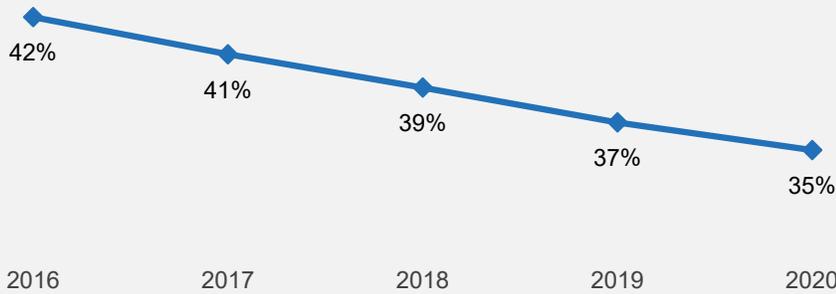
under five years old. In 2020, WIC served a total of 883 individuals in the CRIT Region, which comprises of 205 women, 230 infants, and 448 children (Exhibit 6.7). The WIC enrollment for Arizona children under 5 years old slightly decreased steadily from 2016 (42% of children under five) to 2020 (35% of children under five) (Exhibit 6.8). WIC benefit utilization data for the CRIT Region in particular show that 46% of those eligible for WIC in the region used those services (data not shown).

Exhibit 6.7. Number of women, infants and children enrolled in the WIC program during 2020

	Total	Women	Infants	Children
FTF CRIT Region	883	205	230	448
La Paz County	42	13	14	15
ARIZONA	256,733	63,111	70,242	123,380

Arizona Department of Health Services (2020). Women, Infants & Children (WIC). Provided by AZ FTF.

Exhibit 6.8. Infants and children (ages 0 to 4) enrolled in the WIC program as a percentage of the population, Arizona, 2017 to 2020



Arizona Department of Health Services (2020). Women, Infants & Children (WIC). Provided by AZ FTF.

Schools are an important part of the nutrition assistance system, especially for children that may be food insecure. About three-quarters of all public-school students in the Parker Unified School District have been eligible for free or reduced-price lunch since 2018 (Exhibit 6.9). This is significantly higher than the statewide percentage, which has hovered at about 55% to 57%. Over the last three years, the proportion of students receiving free or reduced-price lunch has stayed fairly constant in the Parker Unified School District.

Exhibit 6.9. Proportion of students (pre-kindergarten through twelfth grade) eligible for free or reduced-price lunch, 2018 to 2020

	2018	2019	2020
CRIT - Parker Unified School District	78%	74%	74%

Arizona Department of Education (2020). [Free and reduced lunch dataset]. Unpublished data.

Note: The school-district data in this table include only the schools that are located within the CRIT Region.

Child Welfare

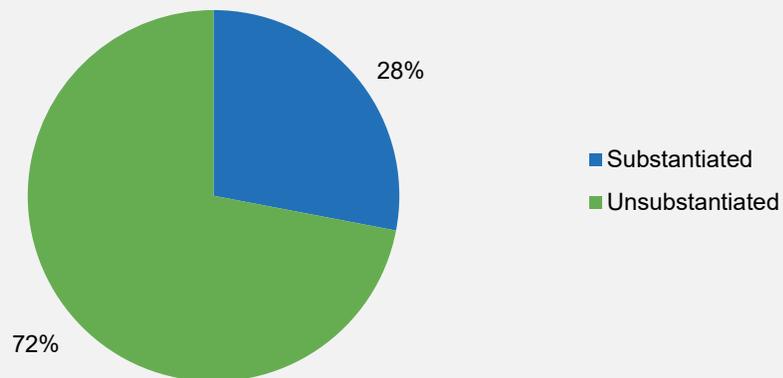
Child Welfare services in the Colorado River Indian Tribes Region are provided by the CRIT Department of Health and Social Services. Data from the CRIT Health and Social Services Department show the referrals received by the department for child abuse and neglect (Exhibit 6.10). Local experts posit that the increase from 2019 to 2020 could be due to stress related to the COVID-19 pandemic. Of the referrals received 2021, 26 referrals were for child abuse, 99 for neglect, and 51 referrals for alcohol or substance abuse involved incidents. Among all investigations conducted on child welfare referrals, 28% were determined to be substantiated (Exhibit 6.11). Additionally, data provided show that 31 children under the age of six were removed by Tribal CPS in 2021 while 9 children were involved in an ICWA placement (Exhibit 6.12)

Exhibit 6.10. Referrals to social services by type, 2019-2021

	2019	2020	2021
Abuse	22	33	26
Neglect	31	96	99
Alcohol or Substance Abuse Involved	33	79	51

Colorado River Indian Tribes Social Services Department (2022). [Child Welfare Data]. Received by correspondence.

Exhibit 6.11. Investigation Results for Child Welfare Referrals



Colorado River Indian Tribes Social Services Department (2022). [Child Welfare Data]. Received by correspondence.

Exhibit 6.12. Children removed by Tribal CPS and ICWA placements, 2021

	Ages 0-5	Ages 0-17
Children removed by Tribal CPS	31	137
Number of children in out-of-home placement	31	137
ICWA Placements	9	15

Colorado River Indian Tribes Social Services Department (2022). [Child Welfare Data]. Received by correspondence.

Child Safety and Domestic Violence

According to data provided by the Colorado River Indian Tribes Police Department, there were a total of 264 juvenile offenses in the region in 2021, which is a noticeable increase from the prior two years (Exhibit 6.13). The jump in the incidence of juvenile offenses in 2021 appears to be driven by the increase in violence-related juvenile offenses in the past year. In addition, data on domestic violence show a total of 117 domestic violence offenses in 2021 and that all offenses led to an arrest (Exhibit 6.14).

Exhibit 6.13. Colorado River Indian Tribes juvenile offenses by type, 2019-2021

	2019	2020	2021
Serious (Part I) Offenses	N/A	N/A	6
Other Offenses	16	29	44
Substance-use related offenses	24	78	62
Violence-related offenses	12	24	120
Statutory offenses	6	23	18
All other offenses	19	5	14
Total Juvenile Offenses	77	159	264

Colorado River Indian Tribes Police Department (2022). [Public Safety Data]. Received by correspondence.

Exhibit 6.14. Colorado River Indian Tribes domestic violence and child abuse offenses and arrests, 2019-2021

	2019	2020	2021
Domestic Violence Offense	93	119	117
Domestic Violence Arrests	93	119	117

Colorado River Indian Tribes Police Department (2022). [Public Safety Data]. Received by correspondence.

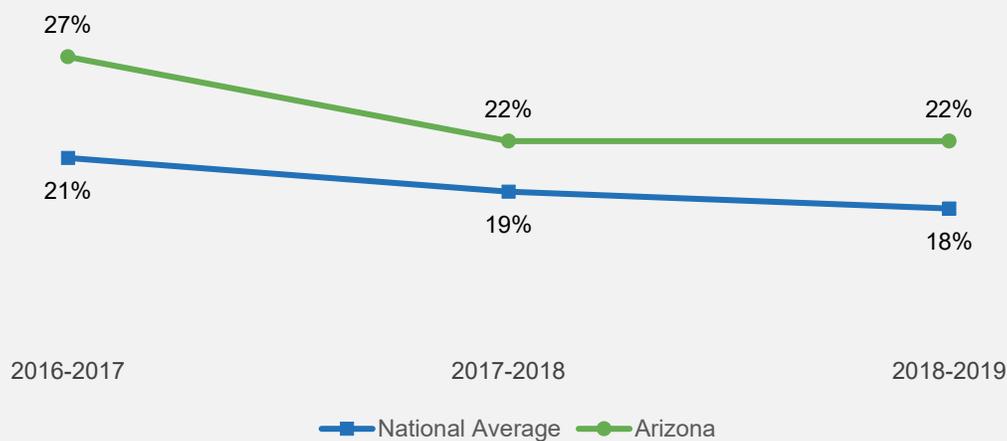
Adverse Childhood Experiences

Unfortunately, not all children are able to begin their lives in positive, stable, nurturing environments. Experiences early in life can have lasting impacts on an individual's mental and physical health. Adverse Childhood Experiences (ACES) are potentially traumatic events (such as physical or emotional abuse, alcohol and/or drug abuse in the household or emotional or physical neglect) that occur during childhood (0-17 years old).¹⁰⁴ When one experiences more ACES during their childhood then they are

¹⁰⁴Centers for Disease Control and Prevention (n.d.) Fast Facts: Preventing Adverse Childhood Experiences. Retrieved from https://www.cdc.gov/violenceprevention/aces/fastfact.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fviolenceprevention%2Facesstudy%2Ffastfact.html

more at-risk for 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.¹⁰⁵ In 2018 to 2019, children (0 to 17 years old) in Arizona were more likely to have experienced two or more ACES (22%) than children nationwide (18%). As shown in Exhibit 6.15, this trend has been consistent since 2016. To help decrease ACES in Arizona, the Arizona ACE Consortium has been working with professionals and agencies to increase awareness around the causes, effects and opportunities around decreasing ACES in Arizona.

Exhibit 6.15. Percent of children (0-17 years old) with 2 or more ACES



SHADAC analysis of children with adverse childhood experiences (ACEs), State Health Compare, SHADAC, University of Minnesota, statehealthcompare.shadac.org, Accessed Jan 28 2022.

¹⁰⁵ Arizona Adverse Childhood Experiences Consortium (n.d.) *Overcoming Adverse Childhood Experiences: Creating Hope for a Healthier Arizona*. Retrieved from <https://azaces.org/wp-content/uploads/2019/01/ACEs.pdf>.

FAMILY SUPPORT HIGHLIGHTS

In the FTF CRIT Region, there is opportunity to strengthen parental knowledge about child development and engaging in positive parenting practices. The number of families and young children receiving federal program assistance in the region, including as SNAP, WIC and TANF, decreased from 2017 to 2020. These decreases come even as the number of families living in poverty has increased nationally and regionally. Due to the school mandatory school closures and other social and economic impacts of COVID-19 in 2020, it will become increasingly important to continue to provide family support services.

Below are some data trends that highlight the family support related assets, needs, and data-driven considerations for the region.

Assets	Considerations
The FTF CRIT Region has several local programs aimed to support the availability of nutritious foods for children under six and their families.	Continue to support local DES and WIC offices' efforts to increase community awareness of nutrition programs available to young children and their families.

Needs	Considerations
The number of children and families enrolled in assistance programs, including SNAP and TANF, have significantly decreased in recent years.	Support community education campaigns to increase awareness of federal and state assistance programs.

CONCLUSION

The FTF CRIT Region has both strengths and opportunities for improvement. The region overall has high educational attainment levels and is faring well in select health indicators, while having fewer economic resources than other parts of the county and state. Parents in the region are educated but may benefit from more information and awareness of age-appropriate child development and the impact they have on their child's readiness to learn and grow.

The region has many strong providers who are continuing to build a more efficient system of care dedicated to the well-being of the region's youngest children and their families, yet could use support to overcome barriers such as limited funding and competition for resources. First Things First is a great asset in the region as they play a large role in funding and supporting the area's early childhood system.

The following tables include the assets, needs and considerations from the six domains presented in this report. These key findings are intended to provide information to the FTF CRIT Regional Partnership Council and the community as a whole around the needs and assets of the region's zero to five population and their families.

The considerations provided below do not represent comprehensive approaches and methods for tackling the needs and assets in the region. Instead, the considerations represent possible approaches that early childhood system partners, including FTF, could take to address needs and assets in the region, as conceptualized by the authors of this report.

Assets	Considerations
Population Characteristics	
The population of children under the age of six is projected to decline at modest and steady rate, allowing the region to foresee and prepare for the growing demands of their youngest residents.	Discuss tactics for planning ahead for the projected slow, but steady decline of the under six population and the tailored outreach and programs needed to support families in the region, such as healthcare and child care needs for young children.
Economic Circumstances	
Eighty-nine percent of children under age six live in households with at least one parent in the labor force. In addition, the unemployment rate is generally consistent with the state average.	Consider encouraging stakeholders to target job training and employment programs to families with higher need to help increase employment and median incomes.
Educational Indicators	
According to the American Community Survey, the high school graduation rates and the average educational attainment level of adults and parents in the region are high.	Consider supporting programs for parents, such as peer support or mentoring programs, to support each other and share knowledge and attitudes around the importance of education, targeting teen parents or parents without a high school degree.
Early Learning	
Quality First has been increasing the quality and stability of child care programs in the region.	Support Quality First efforts in the region to increase the opportunities for children to receive quality early care and education experiences, including education training resources for early childcare providers.
Child Health	
Parents and caregivers in the region are overall satisfied with their children's health care, with the majority of caregivers rating the quality of care as excellent (40%) or good (35%).	Continue to provide public education about the benefits of health care for their children and consider targeted outreach for families in most need.
According to the Arizona Department of Health Services, 41% of all pregnant women are receiving some prenatal care in their first trimester.	Promote the importance of early prenatal care and provide education on the impact of prenatal care on the mother and child's future well-being.
Family Support	
The FTF CRIT Region has several local programs aimed to support the availability of nutritious foods for children under six and their families.	Continue to support local DES and WIC offices' efforts to increase community awareness of nutrition programs available to young children and their families.

Needs	Considerations
Population Characteristics	
According to the American Community Survey, half of all children under six are living in single-parent households, as well as a sizable child population in grandparent-led households, which face additional barriers and difficulties when compared to two parent households.	Recognize that all families have strengths and needs, and discuss support services and programs specifically designed for single-parent and grandparent-led households to help them support the young children in their homes.
Economic Circumstances	
According to the American Community Survey, about 38% of children in the region live in poverty, which is significantly higher than the state average.	Encourage community awareness of social service resources in the region, including housing support.
Four in five children under six live in single-parent households, which earn substantially less money than dual parent households.	Promote support or resources that can help subsidize child care and housing costs for single parents with young children.
Education	
AZMERIT reports from the Arizona Department of Education show that half of third graders are not meeting proficiency standards for English Language Arts (61%) and Math (50%)	Increase parent outreach and awareness of early education programs to support learning and school readiness from an early age.
Early Learning	
Based on household median income in the region and county, the cost of child care can make up a significant portion of household income. High costs can be a particularly acute barrier to quality child care for single-female families, whose median income is even lower	Explore further opportunities for research and understanding the cost burden of child care for Colorado River Indian Tribes parents, and supports and services to alleviate barriers to access.
Child Health	
The percentage of mothers enrolled in WIC in the CRIT Region who are overweight or obese has steadily increased from 2014 (66%) to 2018 (71%).	Promote evidence-based community and place-based interactive health education to support families and children in achieving and maintaining a healthy weight. Interactive health education could focus on healthy nutrition and physical activity and be provided to children, families, early child care and education professionals, and others in the community who care for young children.
Family Support	
The number of children and families enrolled in assistance programs, including SNAP and TANF, have significantly decreased in recent years.	Support community education campaigns to increase awareness of federal and state assistance programs.

APPENDIX

ADDITIONAL DATA INDICATORS

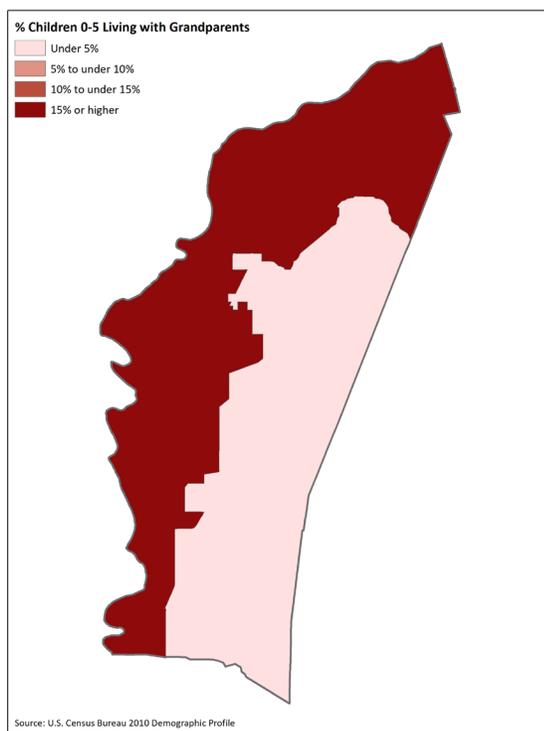
Data included in this report were sourced from state and local agencies and organizations, and wherever possible, data is provided specifically for the FTF CRIT Region alongside data for La Paz County and Arizona. Select data indicators that were not available for the CRIT Region and only available at the county and state level are presented in this appendix section per the request of the CRIT Regional Partnership Council. In addition, maps of the CRIT Region that depict select data indicators are also included in this appendix section.

Population Characteristics

Household Characteristics

Exhibit 7.1 illustrates the percentage of children 0-5 living with grandparents, and shows that over 15% of children in the census tract that includes Poston and Parker on the western side of the region live with their grandparents.

Exhibit 7.1. Map of children 0-5 living with grandparents

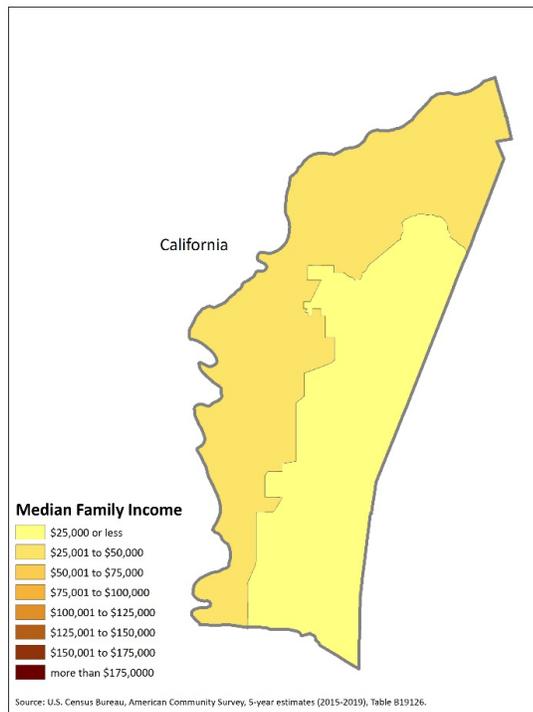


Economic Circumstances

Median Income and Poverty

The map shown in Exhibit 7.2 demonstrates the median income for the CRIT Region overall, and illustrates that the median income is in the \$25,001—50,000 range for the western portion of the CRIT Region that includes the population centers of Parker and Poston.

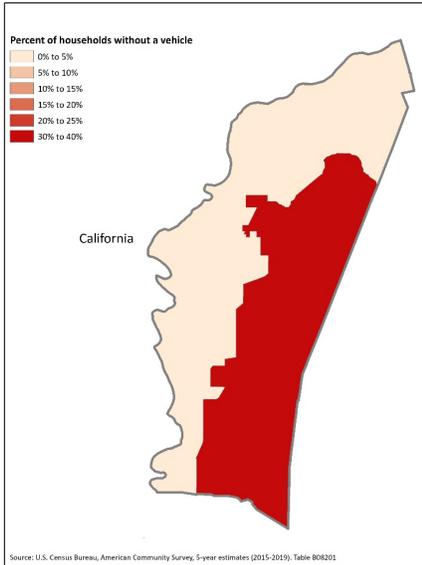
Exhibit 7.2. Map of median family income in the FTF CRIT Region



Housing

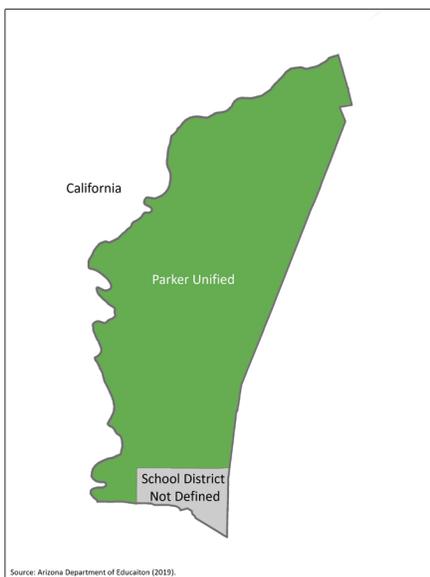
Exhibit 7.3 illustrates the proportion of households that do not have a vehicle, and shows that a majority of households in the western region that includes Parker and Poston have vehicles.

Exhibit 7.3. Map of households without vehicles in the FTF CRIT Region



Educational Indicators

Exhibit 7.4. Map of school districts in the CRIT Region



Early Learning

Costs of Child Care & Access

Among Department of Child (DCS)-involved children, there was a decrease in the number of children receiving child care subsidies and percent of eligible children receiving subsidies was witnessed statewide. Data for the region and the county were suppressed and could not be provided (Exhibit 7.5).

Exhibit 7.5. 2019-2020 Number of DCS-involved children eligible and receiving child care subsidies

	Number of Children Receiving Subsidies				Percent of Eligible Children Receiving Subsidies			
	2017	2018	2019	2020	2017	2018	2019	2020
FTF CRIT Region	DS	DS	DS	DS	Cannot Calculate	Cannot Calculate	Cannot Calculate	Cannot Calculate
La Paz County	DS	DS	DS	DS	Cannot Calculate	Cannot Calculate	Cannot Calculate	Cannot Calculate
ARIZONA	12,201	12,219	11,808	7,137	88%	82%	82%	59%

Note: DS = data suppressed. Cannot Calculate = percentages cannot be calculated due to suppressed data. Arizona Department of Economic Security (2020). Child Care (CCA) Subsidies. Provided by AZ FTF.

Developmental Delays and Special Needs

To qualify for Division of Developmental Disabilities (DDD) services an individual must have a cognitive disability, cerebral palsy, autism, epilepsy, or be at risk for a developmental disability. Children under the age of six are eligible if they show significant delays in one or more of these areas of development: physical, cognitive, communication, social-emotional, or self-help. While regional and county data were suppressed, between 2017 to 2020, the rates of children receiving referrals and services through the DDD stay consistent across the years in Arizona (Exhibit 7.6). However, the number of children receiving services decreased statewide.

Exhibit 7.6. Children receiving referrals and services from the Division of Developmental Disabilities in the FTF CRIT Region, La Paz County, and Arizona, 2017-2020

	Number of Children Receiving DDD Referrals				Number of Children Receiving DDD Services			
	2017	2018	2019	2020	2017	2018	2019	2020
FTF CRIT Region	DS	DS	DS	DS	DS	DS	DS	DS
La Paz County	DS	DS	10	DS	DS	DS	DS	DS
ARIZONA	5,478	6,163	6,261	5,700	5,520	6,123	4,005	4,078

Note: DS = data suppressed. Arizona Department of Economic Security (2020). Child Care (CCA) Subsidies. Provided by AZ FTF.