# **2024**NEEDS AND ASSETS REPORT



# **# FIRST THINGS FIRST**

Colorado River Indian Tribes Region

# COLORADO RIVER INDIAN TRIBES REGIONAL PARTNERSHIP COUNCIL 2024 NEEDS AND ASSETS REPORT

#### Funded by the

First Things First Colorado River Indian Tribes Regional Partnership Council

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#### INTRODUCTION

Ninety percent of a child's brain growth occurs before kindergarten and the quality of a child's early experiences impacts whether their brain will develop in positive ways that promote learning. First Things First (FTF) was created by Arizonans to help ensure that Arizona children have the opportunity to 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 well-being in our communities and our state.

This Needs and Assets Report for the Colorado River Indian Tribes 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 Colorado River Indian Tribes 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 Colorado River Indian Tribes 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 age 5 in communities throughout the region.

## **ACKNOWLEDGEMENTS**

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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 Colorado River Indian Tribes Region.

Lastly, we want to acknowledge the current and past members of the FTF Colorado River Indian Tribes 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**

The Colorado River Indian Tribes Region. When First Things First (FTF) was established by the passage of Proposition 203 in November 2006, the government-to-government relationship with federally recognized tribes was acknowledged. Each tribe with tribal lands located in Arizona was given the opportunity to participate within a FTF designated region or elect to be designated as a separate region. Geographically, the FTF Colorado River Indian Tribes Region is defined as the Arizona part of the Colorado River Indian Reservation, including the town of Parker. The region lies entirely in La Paz County. The Colorado River Indian Reservation covers about 420 square miles, of which about 84% lies in Arizona. The remainder is across the river in California. The US Census Bureau identifies three census tracts in the reservation: the California part (9401), the town of Parker (9402) and the remainder of the Arizona proportion of the reservation (9403). The FTF Colorado River Indian Tribes Region is comprised of census tracts 9402 and 9403.

The Colorado River Indian Tribes include four distinct Tribes - the Mohave, Chemehuevi, Hopi and Navajo. The Colorado River Indian Tribes Region encompasses a unique and diverse area. The primary communities in the FTF Colorado River Indian Tribes Region are Parker, Arizona, which is located on a combination of Tribal land, leased land that is owned by Colorado River Indian Tribes and land owned by non-tribal members, as well as Poston, Arizona, which is located entirely on Tribal land. Therefore, the FTF Colorado River Indian Tribes Region serves both Tribal members and non-members on the Arizona portions of the Colorado River Indian Reservation and in the Town of Parker. There are programs managed by the Colorado River Indian Tribes, such as the Special Supplemental Nutrition Program for Women, Infants and Children program (WIC), Housing and Urban Development (HUD), the Colorado River Indian Tribes Library and the Joint Venture Sewer Project that serve the population of all of La Paz County.

**Population Characteristics.** According to the 2020 U.S. Census, the total population of the Colorado River Indian Tribes Region was 7,036, of whom 703 were young children (birth to age 5). Nearly onefifth of the 2,322 households in the region (19%) had one or more young children, a slightly higher proportion of households with young children than on the entire Colorado River Indian Tribes reservation (16%) and Arizona as a whole (13%). Census estimates indicate that the overall population of the Colorado River Indian Tribes Region fell by 1% between 2010 and 2020. This is marginally smaller than the decrease seen across the entire Colorado River Indian Tribes reservation (-4%) and all Arizona reservations (-3%) and much smaller than the decrease seen in La Paz County (-19%). As compared with a decrease of approximately one-quarter in all Arizona reservations (-26%) and La Paz County (-23%), the population of young children (birth to age 5) decreased much less substantially in the region (-5%).

Data provided by the Colorado River Indian Tribes Enrollment Department for the 2022 FTF Colorado River Indian Tribes Regional Needs and Assets Report show that there were 3,569 total enrolled members in 2020, about 58% of whom were living on the reservation (2,062). There were 362 total

enrolled young children (birth to age 5), 233 of whom were living on the reservation. American Indians living on reservations and young children (birth to age 4) were specifically found to be substantially undercounted in the 2020 Census (5.6% and 3-5% nationally). One way to understand potential undercounting of young children in the Colorado River Indian Tribes Region is to compare 2020 Census data on children birth to age 5 to Arizona Department of Health Services (ADHS) data on births from 2015 to 2020. While the 2020 Census estimated there were 703 young children in the region, ADHS reported 787 births between 2015 and 2020, representing a possible 11% undercount. In contrast, the number of births between 2015 and 2020 was only 1% higher than the Census estimated population of young children across the state.

In the 2020 Census, just under half of the population in the Colorado River Indian Tribes Region identified as American Indian or Alaska Native (44%), and over one-third identified as Hispanic or Latino (38%). More than a quarter identified as Non-Hispanic White (28%), 17% identified as Multiracial, and 2% each identified as Black or African American and Asian or Pacific Islander. This differs from the race and ethnicity breakdown across all Arizona reservations, where 93% of residents identified as American Indian or Alaska Native. Much of this difference can be attributed to the town of Parker, parts of which are non-tribal land or land leased from the Colorado River Indian Tribes. 1 These breakdowns were similar for young children, with even higher proportions identified as American Indian (47%), Hispanic or Latino (47%), and Multiracial (23%) when compared to the overall population.

The Colorado River Indian Tribes are made up of four distinct tribes, each with their own language: the Mohave, Chemehuevi, Hopi and Navajo. Mohave language classes are offered at the Colorado River Indian Tribes Library, with adult classes offered year-round and child classes offered during the summer (for ages 6 to 10). Community members also indicated that the Library will be adding tribal languages to their summer early literacy program, which targets children from birth to 5 years old. The pattern of languages spoken at home in the Colorado River Indian Tribes Region was more similar to the state as a whole than all Arizona Reservations. In the region, almost 10 times the proportion of individuals reported speaking Spanish at home (29%) compared with all Arizona reservations (3%). Only 2% of individuals in the region reported speaking languages other than English or Spanish at home (most likely a Native North American language), compared with half of residents across all Arizona reservations. This may reflect the mix of tribal and non-tribal lands represented in the region as well as low household use of Native languages.

Of those individuals speaking a language other than English at home, most also speak English "very well," with 22% of the region proficiently bilingual or multilingual. Almost one in 10 individuals speak another language at home and do not speak English very well (9%). One in 20 households in the Colorado River Indian Tribes Region were considered limited-English-speaking (5%), meaning no one over the age of 13 in the household speaks English very well. This is less than half the proportion seen across all Arizona reservations (12%), but comparable to the entire Colorado River Indian Tribes reservation, La Paz County and Arizona (all 4%).

During the 2021-22 school year, 5% of preschool to 12<sup>th</sup> grade students enrolled in Parker Unified School District schools were considered English Language Learners (n=86). This is a smaller percent of students than in La Paz County (7%) and across Arizona (8%). English Language Learners are identified through the Arizona Department of Education (ADE) Home Language Survey, which asks families about the student's first language and what language is spoken at home most of the time. Statewide, there were fewer than 11 households each speaking Mohave and Chemehuevi in any year. In 2021-22 statewide, 25 students had reported Hopi language use and 1,434 had reported Navajo language use at home. In Parker Unified School District, fewer than 11 households had any native language use reported, with most English Language Learner students coming from Spanish-speaking households.

According to American Community Survey (ACS) estimates, 44% of young children (birth to age 5) in the Colorado River Indian Tribes Region lived in a household with two married parents (44%), which is greater than the proportion on all Arizona reservations (25%) and La Paz County (34%) but smaller than Arizona as a whole (59%). Another 46% of young children in the region were living with one unmarried parent, with smaller shares living with non-relatives (8%) or relatives other than parents (such as grandparents, aunts and uncles) (2%).

One in five young children (20%) in the region lived in a grandparent's household, which is less than half the proportion seen across all Arizona reservations (43%). Note that the grandparent in these households may or may not be responsible for raising the child, and the child's parent(s) may or may not also be living in the household. Of the grandparents living with grandchildren birth to age 17 in the region, just 22% did not have a parent also present in the household. This suggests that many of the grandchildren residing with their grandparents are in multigenerational households, where grandparents, parents and children all live together.

The ACS considers a grandparent to be responsible for their grandchildren if they are "currently responsible for most of the basic needs of any grandchildren under the age of 18" who live in the grandparent's household. Based on this definition, an estimated 242 grandparents in the Colorado River Indian Tribes Region are responsible for their grandchildren under 18 years old. A parent is also present in most of these households (only 37% without the child's parent). Just over half of these grandparents are female (52%) and in the labor force (54%), meaning that they may need child care for their grandchildren while they are working. A smaller proportion of these grandparents have an income below the poverty level in the region (15%) compared with the entire Colorado River Indian Tribes reservation (17%), La Paz County (19%), Arizona (21%) and all Arizona reservations (36%).

**Economic Circumstances.** The median family income for all household types with children (birth to age 17) in the Colorado River Indian Tribes Region (\$53,000) is substantially lower than that in Arizona overall (\$75,100). Married couple families with children in the region have the highest median annual income (\$69,500) of all family types, more than \$30,000 lower than that statewide (\$100,000). Singleparent-led households in the region had lower median annual incomes, with single-female-headed families with children making less than half of married couple families (\$33,600), however these incomes are closer to the statewide rates than the median household income for married couple families.

Similar to La Paz County, 20% of the overall population and 30% of young children (birth to age 5) in the Colorado River Indian Tribes Region lived in poverty. These are higher than the poverty rates for

Arizona as a whole (13% and 20%, respectively), but lower than rates seen in all Arizona reservations (37% and 48%, respectively). According to ACS five-year estimates, rates of poverty among young children in the region have decreased substantially in recent years, from 53% in 2012-2016 to 30% in 2017-2021 (-23%). Poverty rates also declined across La Paz County (-18%), all Arizona reservations (-6%), Arizona (-8%) and the U.S. (-6%) during the same time period, but much less sharply.

More than half (53%) of young children in the Colorado River Indian Tribes Region live in households with incomes under 185% of the federal poverty level (FPL), a commonly used threshold for social safety net benefits such as the WIC and reduced-price school meals. In 2021, the 185% FPL threshold for a family of two adults and two children was \$50,836; for a single parent with one child, it was \$34,552. One in 12 young children in the region (8%) live in "deep poverty" (defined as below 50% FPL), a smaller percent than in La Paz County (11%) and less than one-third the percent in all Arizona Reservations (27%). However, while income is one important way to measure whether families can meet their basic needs, in Native communities, subsistence-based activities such as hunting, gathering, farming and ranching are important cultural practices that can also meet families' basic needs and are not captured in standard poverty measures.

In the region, the number of children birth to age 5 served by the Temporary Assistance for Needy Families Cash Assistance Program (TANF) program decreased from 38 in state fiscal year (SFY) 2018 to a low of 13 in SFY 2021 before increasing again to 19 in 2022. The number of families with young children participating in TANF also hit a low of 10 in SFY 2021, increasing to 13 in 2022.

The Colorado River Indian Tribes Department of Health Services administers the Food Distribution Program on Indian Reservations (FDPIR) in the region, through which eligible tribal members can receive a monthly box of USDA foods. Between 2019 and 2021, FDPIR served between 125 and 198 households in the region each year, or between 286 and 516 certified persons. Since SFY 2018, Supplemental Nutrition Assistance Program (SNAP) participation among young children (birth to age 5) in the Colorado River Indian Tribes Region has declined steadily from 573 in SFY 2018 to 395 in SFY 2022, a 31% decrease. Participation among families with young children also decreased by 32%. Participation in SNAP among young children and families with young children also decreased statewide during these years, but at a much lower rate (-16% and -15%, respectively).

The Colorado River Indian Tribes WIC program is one of the tribally-operated programs under the Inter Tribal Council of Arizona (ITCA). However, the program uniquely serves the entire population of La Paz County, as well as the Chemehuevi Indian Tribe and other communities in California. In 2020, there were 883 individuals enrolled in the program, including 205 women (23%), 230 infants (26%) and 448 children (ages 2-4) (51%).

From 2019-20 to 2021-22, the total number of school lunches served through school nutrition programs in the Colorado River Indian Tribes Region varied by program because of the effects of the COVID-19 pandemic. Due to USDA waivers that allowed for greater flexibility in meal service through the Summer Food Service Program (SFSP) year-round, the number of lunches served through SFSP increased more than seven-fold between 2019-20 (n=43,203) and 2020-21 (n=307,288), peaking at over 310,000 lunches served in 2021-22 (n=310,329). Conversely, lunch service through National School Lunch

Program (NSLP) fell to historic lows. Lunches served through the Child and Family Care Food Program (CACFP) at Colorado River Indian Tribes Head Start increased from 24,567 in 2019-20 to a high of 122,832 in 2020-21 and remained elevated in 2021-22 at 88,176 lunches served. Overall, these trends point to rapid adaptation to changing needs for children's meals and alternative delivery modes during the most intense years of the COVID-19 pandemic.

The unemployment rate is the proportion of the total number of people in the civilian labor force who are unemployed and looking for work. Unemployment rates do not include people who have dropped out of the labor force entirely, including those who wanted to work but could not find a suitable job and have stopped looking for employment. The ACS estimates that the average unemployment rate for the Colorado River Indian Tribes Region between 2017 to 2022 was 7%, just higher than for Arizona as a whole (6%) and half that on all Arizona reservations (14%).

An additional metric of employment is the labor-force participation rate. This rate is the fraction of the population who are in the labor force, whether employed or unemployed. The labor force participation rate in the region (60%) was similar to Arizona as a whole (61%) and much higher than across all Arizona reservations (45%) and La Paz County (40%). This includes 56% of working-age teens and adults in the Colorado River Indian Tribes Region who were employed and 4% who were actively looking for work, while the remaining 40% were not in the labor force (which includes students, retirees, stay-at-home parents and others).

The vast majority (93%) of young children (birth to age 5) in the Colorado River Indian Tribes Region were living in a household where at least one parent is in the labor force, compared to 90% of young children statewide and only 62% across all Arizona reservations. Over two-thirds of young children in the region (69%) live in households where all resident parents are in the workforce, indicating they likely require some form of child care.

Housing is considered to be affordable for families if it costs less than 30% of annual household income. According to recent ACS estimates, only 16% of households in the Colorado River Indian Tribes Region spent more than 30% of their income on housing, disproportionately impacting renters (21%) over homeowners (12%) in the region. Housing cost burden is notably lower in the region compared to the state (29%) but higher than that seen in all Arizona reservations (13%). The McKinney-Vento Act definition of homelessness includes children living in shelters, transitional housing, campgrounds, motels, trailer parks and cars, as well as children whose families are temporarily living within another family's household. The percent of students experiencing homelessness by this definition in Parker Unified School District, La Paz County schools and all Arizona schools remained below 2% from 2019-20 to 2021-22.

Almost three-quarters (74%) of households in the Colorado River Indian Tribes Region had both a computer (i.e., a desktop, laptop, tablet or smartphone) and broadband internet connectivity. This proportion is 14% lower than for households in Arizona overall (88%) but 30% higher than for households in all Arizona reservations (44%). At the individual level, 77% of individuals in the Colorado River Indian Tribes Region had access to both a computer and internet in their household. Access was slightly higher for children birth to age 17 (80%), but this was still 12% lower than statewide (92%).

**Educational Indicators.** The Colorado River Indian Tribes Region includes the Parker Unified School District and a small corner of Quartzsite School District. Parker Unified School District has three elementary schools: Blake Primary School (serving preschool through second grade), Wallace Elementary School (serving third through fifth grade) and Le Pera Elementary School (serving kindergarten through eighth grade). In the 2021-22 school year, there were 619 students enrolled in preschool through third grades in the Parker Unified School District. While only 32 students were enrolled in public preschools, enrollment in kindergarten was notably higher with 142 students.

Between 2019-20 and 2021-22, kindergarten through 3rd grade chronic absence rates across all schools in Arizona more than quadrupled, from 8% in 2019-20 to 34% in 2021-22. Chronic absence rates followed similar patterns in Parker Unified School District and La Paz County schools, increasing from a baseline of 12% to 54% and 48%, respectively. This means that more than half of early elementary students in the region missed more than 10% of the school days in 2021-22.

In the 2021-22 school year, only 23% of students in Parker Unified School District achieved a passing score on the 3rd grade English Language Arts (ELA) assessment, including 16% meeting expectations and 7% exceeding expectations. This is lower than a passing rate of 41% across all Arizona schools. Notably, almost half of all third-graders in Arizona schools (47%) and two-thirds in Parker Unified School District schools (67%) fell far below expectations on the ELA assessment that school year. Looking across recent years, ELA passing rates in Parker Unified School District have trended differently from Arizona schools as a whole. In 2018-19, the last year of the AzMERIT assessment, passing rates were 7% lower in Parker Unified School District (39%) than all Arizona schools (46%). In 2020-21, the first year of the AZM2 assessment, ELA passing rates in Parker Unified School District exceeded all Arizona schools (40% and 35%, respectively). While passing rates then began rebounding to pre-pandemic levels across Arizona in 2021-22 (41%), they plummeted to 23% in the region. In La Paz County schools, passing rates on the ELA assessment declined from 36% in 2018-19 to 24% in 2021-22.

Compared to ELA passing rates, 10% more students in Parker Unified School District schools passed the 3rd grade Math assessment in 2021-22 (33%). This is lower than the passing rates for all students in Arizona schools (40%) but more than twice that for American Indian 3<sup>rd</sup> graders across the state (16%). Math passing rates in Parker Unified School District followed similar trends to ELA passing rates from 2018-19 to 2021-22. In 2018-19, half of 3rd graders in Parker Unified School District schools passed the Math assessment (50%), close to the passing rate across Arizona (51%). Passing rates then decreased to 39% in 2020-21, then 33% in 2021-22. Math passing rates in La Paz County schools also decreased over these years from a high of 45% in 2018-19 to a low of 30% in 2021-22.

From 2020 to 2022, both four- and five-year graduation rates in Parker Unified School District schools, which closely followed La Paz County schools, were consistently higher than statewide. In 2022, 81% of Parker Unified School District students graduated in four years, compared to 83% in La Paz County

schools and 77% statewide, while 85% of students graduated within five years, compared to 87% in La Paz County schools and 80% statewide. In Parker Unified School District schools, dropout rates for 7<sup>th</sup> to 12th grade students tripled from 2% in 2019-20 to 6% in 2021-22. This is similar to the increases seen in La Paz County schools (+3%) and Arizona schools (+2%).

Among adults in the Colorado River Indian Tribes Region, 80% had at least a high school education. This was higher than across all Arizona reservations (77%) but lower than statewide (88%). Educational attainment looks similar between the Colorado River Indian Tribes Region, Colorado River Indian Tribes reservation, all Arizona reservations and La Paz County. The largest differences between these areas and statewide educational attainment were a larger proportion with a high-school degree or less (50-59% compared to 35% statewide) and a smaller proportion with a bachelor's degree or higher (9-12% compared to 31% statewide). Compared to all adults, mothers giving birth in 2019 to 2022 in the region were more likely to have less than a high school education (23% compared with 20% of all adults) or a high school diploma as their highest degree (45% compared with 34%).

Early Learning. Early care and education opportunities in the region include the Colorado River Indian Tribes Head Start, Blake Primary School's preschool program and the Early Learning Academy. According to community members, the Sonshine Center and Ms. Buni's Gingerbread House both closed in recent years. In 2020, the Colorado River Indian Tribes Regional Partnership Council and Colorado River Indian Tribes collaborated to establish the Early Learning Academy in Parker, which initially provided care as an Arizona Enrichment Center to provide care and scholarships to families of essential service providers during the COVID-19 pandemic. In addition to center-based care, key informants consulted in prior Regional Needs and Assets Reports have noted that families in the region often rely on informal care arrangements through friends and family members.

The National Data System for Child Care indicates that the three early care and education centers in the region had the combined capacity to serve 320 students, or approximately 46% of the region's young children based on Census estimates. However, early care options were much more limited for infants (ratio of 1 slot per 11.3 infants) and toddlers (ratio of 1 slot per 6.6 toddlers). This is because only the Early Learning Academy had licensed capacity for infants (n=8) and toddlers (n=16). The Colorado River Indian Tribes Head Start has 183 funded slots. Cumulative enrollment in the program has steeply declined in recent years, from 191 in 2019 to 99 in 2023 (-48%). The bulk of the decline in enrollment can be seen in the number of enrolled 3-year-olds, which decreased by 88% over these four years. Community members indicated that this was due to following tribal protocols regarding the number of children able to attend in-person in a group setting as well as difficulty finding qualified staff. Additionally, the Colorado River Indian Tribes recently broke ground on a new Head Start site, estimated to be completed by August 2025, which will enroll up to 500 students.

In La Paz County, the median monthly cost of center-based early care and education has been lower than statewide. Costs are highest for infants (\$788 in La Paz County, \$949 in Arizona), followed by 1- to 2year-olds (\$714 and \$826, respectively) and 3- to 5-year-olds (\$651 and \$727, respectively). From 2018 to 2022, monthly child care costs at licensed centers increased by one-quarter for infants (+25%) and almost as much for 1- to 2-year-olds (+21%) and 3- to 5-year-olds (+24%). In 2022, full-time centerbased child care for an infant cost 18% of the median family income in the Colorado River Indian Tribes Region. This percentage drops slightly for a 1- to 2-year-old (16%) and a 3- to 5-year-old (15%). As a percentage of median income, the cost of care is 3% higher in the region than across the state.

Assistance from the Arizona Department of Economic Security (DES) can help families manage the cost burden of child care. Patterns in the number of children eligible for and receiving assistance have changed in recent years. The number of children eligible for assistance increased from 12 in 2017 to a peak of 48 in 2021 before decreasing again to 25 in 2022. From 2017 to 2019, the number of children on the waitlist (between 1-9 and 12) exceeded the number of children receiving assistance (between 1-9 and 11) each year. Due to increased Child Care and Development Fund (CCDF) funding during the COVID-19 pandemic, the assistance waitlist was suspended in 2020, and the number of children receiving assistance in the region jumped to a high of 25 (100% of eligible children). However, only 44% of eligible children in 2021 and 60% in 2022 were receiving assistance. Children involved in the Department of Child Safety (DCS) are automatically eligible for DES assistance. With the exception of 2020, between 1 and 9 DCS-involved children in the region and La Paz County were receiving assistance each year between 2017 and 2022.

As of 2023, the Colorado River Indian Tribes Head Start program and the Early Learning Academy were participating in Quality First in the Colorado River Indian Tribes Region. Both of these programs received a 3-star rating in 2023, indicating they meet quality standards. Of the estimated 703 young children in the region according to the 2020 Census, 151 were enrolled in a high-quality early care and education environments (21%).

The Arizona Early Intervention Program (AzEIP) provider for the Colorado River Indian Tribes Region is A to Z Therapies in Lake Havasu City. In 2022, there were 12 children birth to age 2 in the region receiving services from AzEIP. The sources of referrals to AzEIP in the region changed between federal fiscal years (FFY) 2019 and 2022. In FFY 2019, the largest referral source was "other," which can include early care providers, child welfare, family friends and others. In FFY 2020 (31%) and FFY 2022 (16%), substantial proportions of referrals were made by public health and social service agencies. In FFY 2021 and FFY 2022, the proportion of referrals made by physicians increased to over half (63% and 56%, respectively). Compared to the state, there are very few self-referrals by parents or family members of the child; only 8% of referrals originated with parents or family members in FFY 2022 in the region compared to 21% statewide.

In the region, 28% of children (birth to age 2) who were referred to AzEIP in FFY 2022 were found eligible and received services, higher than in Arizona overall (21%). A much smaller share of assessed children were found not eligible (4%) compared to the state (22%). About one-third (32%) of children in the region referred to AzEIP were either in families where a service coordinator could not make contact (24%) or where families did not proceed with screening for eligibility (8%); it was less common in the region for families to not proceed with screening than in the state as a whole (14%).

Fewer than 10 children received services from the Department of Developmental Disabilities (DDD) in any year between SFY 2019 and 2022. Qualifying children may receive services from AzEIP and/or DDD, a number which can be used to estimate the total number of young children receiving early

intervention services in a region. The number of children receiving AzEIP and/or DDD services fell slightly in the region from 10 in SFY 2019 to between 1 and 9 in SFY 2022. Based on the population of children birth to age 2 in the region per the 2020 Census, this suggests that 0.3% to 2.8% of children of these ages in the region may be receiving early intervention services, compared to 2.6% of children statewide.

Between 2018 and 2022, a total of 152 students in preschool through 3<sup>rd</sup> grade in the Parker Unified School District were enrolled in special education. This included 24 preschoolers, 22 kindergarteners, 34 1<sup>st</sup> graders, 31 2<sup>nd</sup> graders and 41 3<sup>rd</sup> graders. The number of preschoolers with disabilities served by a local educational agency (LEA) has been relatively stable from 2018 to 2022 at 24 or 25 preschoolers. The exception was 2020, when the number increased by 10 (to 34 preschoolers). Of the preschoolers with disabilities receiving services through LEAs between 2018 and 2022, the majority were diagnosed with a developmental delay (75%), with much smaller percentages diagnosed with a speech or language impairment (17%), preschool severe delay (4%) and other disabilities (4%). The proportion of preschoolers with a developmental delay is much higher than that seen statewide (43%), while the share with preschool severe delay is much lower than the state (24%)

The number of kindergarten through 3<sup>rd</sup> grade students enrolled in special education has steadily increased from SFY 2018 (n=97) to SFY 2022 (n=128). Primary diagnoses were relatively similar in the region and the state as a whole, with 30% in the region diagnosed with a speech or language impairment, 26% a developmental delay, 25% a specific learning disability, 6% autism and 13% another disability. Compared to the state, a larger proportion of early elementary students were diagnosed with a specific learning disability (25% compared to 12%), and a smaller proportion were diagnosed with autism (6% compared with 11%).

Child Health. In the Colorado River Indian Tribes Region, health care services are available through the county-operated La Paz Regional Hospital and the Indian Health Service (IHS)-operated Parker Indian Health Center. Colorado River Indian Tribes Health and Social Services Department also provides health care services through Behavioral Health Services, Diabetes Prevention, WIC, Community Health Representatives and other programs. There is no Labor and Delivery unit within the region, so women give birth outside of the region in Lake Havasu City (40 miles), Phoenix (155 miles) or Blythe, California (50 miles).

In addition to members of the Colorado River Indian Tribes, Parker Indian Health Center also serves members of Chemehuevi Indian Tribe, Fort Mojave Indian Tribe, Hualapai Tribe, Havasupai Tribe and Moapa Paiute Tribe (in Nevada). In 2022, there were 4,517 active IHS users from the Colorado River Indian Tribes, 510 of whom were young children birth to age 5. The caregiver survey administered as part of the 2022 Regional Needs and Assets Report in 2021-2022 asked parents and caregivers where they typically access health care services for their child(ren). Over half of caregiver respondents indicated they seek care at a pediatrician's office or private practice (53%), and about a third indicated using IHS for their child's health care (32%). Another 4% each accessed child health care services at an urgent care or health department (such as for immunizations).

Health insurance coverage plays an important role in access to health care. In the Colorado River Indian Tribes Region, the proportion of young children birth to age 5 who did not have health insurance increased from an estimated 8% according to the 2012-2016 ACS to 14% in the 2017-2021 ACS. In this time period, rates of young children without health insurance increased by 3% across all Arizona reservations (from 17% to 20%) and by 15% in La Paz County (from 6% to 21%) but decreased by 1% in Arizona (from 8% to 7%) and nationally (from 5% to 4%). It is important to note that the U.S. Census Bureau does not consider coverage by IHS to be insurance coverage. Members of the Colorado River Indian Tribes with or without health insurance may access health care services at the Parker Indian Health Center.

Most births in the region were covered by the Arizona Health Care Cost Containment System (AHCCCS) in 2020 (79%) and 2021 (73%), which is similar to AHCCCS coverage across all Arizona reservations (71%) and La Paz County (74-76%) but much higher than statewide (46-48%). On average, about one in 10 births in the region were covered by IHS between 2020 and 2021. Between 2018 and 2022, the proportion of births in the Colorado River Indian Tribes Region paid for by AHCCCS ranged from a low of 68% in 2018 to a high of 79% in 2020. Facilitating enrollment in AHCCCS can have positive outcomes for both individuals and communities by increasing access to health care services and increasing funds available for health care provision to all community members.

In 2021, under half of births in the Colorado River Indian Tribes Region (45.6%) and in La Paz County (48.5%) were to mothers who began prenatal care in the first trimester, compared to 71.7% of births across the state. In the region, 4% of births that year were to mothers who had fewer than five prenatal visits, which was similar to the county and state (both 5%) and much lower than on all Arizona reservations (14% in 2020), and 5% were to mothers who had no prenatal care, which was higher than the state (2%).

Looking over time, the proportion of births to mothers with fewer than five prenatal care visits peaked at a high of 9.6% in 2019 and then declined steadily to 2.0% in 2022, a positive improvement. In contrast, the share of births with no prenatal care fluctuated during these years but generally increased (+2.4% from 2018 to 2022). Positively, the share of births in the Colorado River Indian Tribes region to mothers who began prenatal care in the first trimester steadily increased from 37% in 2018 to 52% in 2022, however this was still 19% behind the state as a whole (71%). This indicates an ongoing need for timely prenatal care in the region.

In 2020 and 2021, 6-12% of births in the Colorado River Indian Tribes Region were to mothers younger than age 20 and 1-5% were to mothers younger than 18. This is comparable to 9% of births to mothers younger than 20 and 4% to mothers younger than 18 across reservations statewide. Looking at births to teenaged mothers between 2018 and 2022, the proportion of births to mothers younger than 20 has fluctuated more in the region (due to small numbers) but always exceeded the state rates (5.8-12% compared with 4.6-5.8%). Births to mothers younger than 18 in the region increased slightly (+1-5%) while this proportion fell slightly across Arizona (-0.4%).

The share of mothers giving birth who smoked cigarettes during pregnancy was smaller in the region in 2020 (6%) than in all Arizona reservations (11.1%) and La Paz County (6.5%) but higher than Arizona

overall (3.6%). The Colorado River Indian Tribes Region did not meet the Healthy People 2030 target of no more than 4.3% of women using tobacco during pregnancy in 2020 or 2021 but did meet it in 2019 (0.7-3.7%). Between 2018 and 2022, 45 newborns were hospitalized because of maternal drug use during pregnancy in the Colorado River Indian Tribes Region. Based on the total number of births, this equates to 7.9 newborns hospitalized per 100 births, more than twice the statewide rate of 3.3 newborns hospitalized per 100 live births. The average length of hospital stay was shorter in the region (6.8 days) than in Arizona as a whole (9.5 days).

Between 2018 and 2022, rates of gestational diabetes decreased from 6.8% to between 1% and 5% while rates of pre-pregnancy obesity fluctuated but generally increased, reaching a five-year high at more than half of births in 2022 (51.5%). While rates of gestational diabetes were lower in the region than statewide, rates of pre-pregnancy obesity were higher during these years. Statewide, about 1 in 7 mothers (13.7%) of all race and ethnicities reported experiencing postpartum depressive symptoms in 2020, nearly the same rate as that seen nationwide (13.4%). National data show that more than one in five (22%) American Indian and Alaska Native mothers in the U.S. experienced postpartum depressive symptoms in 2018, suggesting that Native mothers may be at higher risk of postpartum depression.

In 2021, a larger proportion of babies were born preterm in the Colorado River Indian Tribes Region (13.6%) than in Arizona overall (10.0%), while the proportions of low birth weight births (1-4.9%) and babies admitted to the NICU (1-5%) were lower in the region than in the state (9.6% and 8%, respectively). Between 2018 and 2022, the proportion of low birth weight births in the region generally increased, with the exception of 2021 when it dipped below state rates (1-4.9% compared to 7.9%). In 2022, the share of births that were low birth weight was 2.1% higher in the region (9.9%) than the state (7.8%). The Healthy People 2030 target for the percentage of preterm births is 9.4% or lower. The Colorado River Indian Tribes Region did not meet that target between 2018 and 2022, though the percent of preterm births reached a recent low of 11.9% in 2022. The state of Arizona only met the Healthy People 2020 target in 2019 (9.3%)

According to data from the 2022 Regional Needs and Assets Report, between about half and two-thirds of infants enrolled in the Colorado River Indian Tribes WIC program in 2017 to 2020 were ever breastfed (51%-67%). This percent ranged from 4-14% below rates in all ITCA WIC programs and 12 -26% below rates in all Arizona WIC programs.

Childhood immunizations protect against many diseases, including diphtheria, tetanus and pertussis (DTaP); polio; and measles, mumps and rubella (MMR). While no regional child care centers reported into the ADHS immunization dataset in recent years, the fiscal year (FY) 2023 Program Information Report indicated that 94% of enrolled children in Colorado River Indian Tribes Head Start were up-todate on immunizations at the end of the year. Only 3% were not yet fully immunized, and another 3% had exemptions.

Kindergarten immunization rates in schools in the region (DTaP, 93.2%; Polio, 93.9%; MMR, 93.9%) were higher than statewide rates (DTaP, 89.6%; Polio, 90.3%; MMR, 89.9%) in the 2022-23 school year. Neither the region nor the state met the Healthy People 2030 kindergarten MMR immunization target of 95% or more. Rates of personal belief exemptions (4.5%) and exemptions from all required

vaccines (3.8%) were lower than in Arizona overall (7.3% and 4.6%, respectively). The pattern of confirmed and probable cases of influenza in young children birth to age 5 fell to 0 in 2021 before increasing to a recent high of 23 in 2022. Confirmed and probable cases of RSV increased from fewer than 6 in 2020 to 14 in 2022. This is relatively similar to the patterns of influenza and RSV cases statewide during these years.

There were between 1 and 5 infant deaths in the Colorado River Indian Tribes Region from 2019 to 2021. Neither Arizona (at 5.4) nor La Paz County (at 7.9) met the Healthy People 2030 target of 5.0 or fewer infant deaths per 1,000 live births during that time. There were 7 deaths of children birth to age 17 in the Colorado River Indian Tribes Region between 2019 and 2021. One-fifth of these deaths (20%) were due to accidents, 15% to congenital malformations, 9% to low birthweight, 6% to intentional selfharm or suicide and 5% to cancer/malignant neoplasms.

The types of unintentional injuries leading to non-fatal emergency department visits among young children (birth to age 4) are similar in the Colorado River Indian Tribes Region to the state as a whole. Between 2018 and 2022, the majority of emergency department visits among young children in the region were due to falls (n=102), followed by smaller numbers due to natural or environmental reasons (n=26), being struck by or against an object (n=19) or other causes (n=26). Natural or environmental reasons made up 12% of emergency visits in the region compared to 7% in the state. There were 7 deaths of children birth to age 17 in the Colorado River Indian Tribes Region between 2019 and 2021 due to accidents, congenital malformations (birth defects), low birth weight, intentional self-harm or suicide and cancer/malignant neoplasms.

Family Support and Literacy. A caregiver survey was administered between 2021 and 2022 as part of the 2022 Regional Needs and Assets Report to understand the characteristics and experiences of parents and other primary caregivers in the Colorado River Indian Tribes Region. When asked what types of services and support they most need for their child(ren), caregiver respondents most frequently answered child development (53%), nutrition and physical activity (44%), early literacy (44%) and behavior (40%). Fewer responded health services (22%), guardianship (18%), special education (13%) and legal (13%).

Between 2018 and 2021, there were fewer than 6 deaths with opiates or opioids contributing in the Colorado River Indian Tribes Region. However, it is important to note that this only includes deaths occurring within the region and with address data that allowed the death to be properly assigned to a FTF region, meaning this may be an undercount. In La Paz County, there were fewer than 6 deaths with opiates or opioids contributing per year from 2018 to 2021, with 0 deaths in 2021. La Paz County had fewer than 10 nonfatal overdoses per year, which then increased to 12 nonfatal overdoses in 2021.

Child welfare services in the Colorado River Indian Tribes Region are provided by the Colorado River Indian Tribes Department of Health and Social Services. Referrals to social services increased between 2019 and 2021, especially for cases of neglect (increasing from 31 in 2019 to 96 in 2020 and 99 in 2021) and cases where alcohol or substance abuse were involved (increasing from 33 in 2019 to 79 in 2020). The 2022 Regional Needs and Assets Report indicated that 28% of child welfare referrals were

substantiated. Data provided for the 2022 Regional Needs and Assets Report by the Colorado River Indian Tribes Police Department indicated that domestic violence arrests also increased from 93 in 2019 to 119 in 2020 and stayed elevated at 117 arrests in 2021. In 2021, 137 children (under age 18) had been removed by Tribal Child Protective Services (CPS) and were in out of home placements, 31 of whom were birth to age 5. Nine young children and 15 children of all ages were in Indian Child Welfare Act (ICWA) placements.

## **ABOUT THIS REPORT**

There is growing acknowledgement of the role our physical, social, and economic environments play in our day-to-day health and wellbeing.<sup>2</sup> These factors, known as the social determinants of health, have an especially strong effect on the development of young children ages birth to 5 and accumulate over time.<sup>3, 4</sup> Measuring and addressing these conditions can significantly impact not only early health and education outcomes, but also health and economic circumstances later in life.<sup>5, 6, 7</sup> It is important to acknowledge that structural inequities in access to quality health care, schools, and education as well as living, working and leisure conditions lead to disparate outcomes within and between groups of people.<sup>8</sup> For example, the U.S.'s history of segregation, discriminatory policy and differential investment across communities has created generational disparities in outcomes for people of color.<sup>9</sup> Native communities have additionally experienced periods of genocide, forced relocation and assimilation leading to systemically poorer economics and health compared with other groups.<sup>10, 11</sup> This Needs and Assets Report covers many structural and social determinants of health including population characteristics, economic characteristics, early learning and educational indicators, child health, and family support and literacy for the First Things First Colorado River Indian Tribes Region.

The data in this report come from a variety of sources including federal and state agencies and local agencies or service providers. Federal government sources include publicly available data from the 2020 Census and the 2017-2021 American Community Survey (ACS) 5-Year Estimates. Data in this report from the ACS summarize the responses from samples of residents taken between 2017 and 2021. Because these estimates are based on samples rather than the entire population, ACS data should not be considered exact. Estimates for smaller geographies, such as regions, are less accurate than estimates for larger geographies, such as the state, because they are based on smaller sample sizes.

Data were provided to FTF by state agencies including the Arizona Department of Health Services, the Arizona Department of Education and the Arizona Department of Economic Security. In most cases, the data in this report were calculated specifically for the Needs and Assets process and are more detailed than the data that are published by these agencies for the general public. Whenever possible, this report will use data tailored to the region, but in some cases, there are only county-level or statewide data available to report. This report also includes publicly available data for the state and counties to supplement data received through specific requests, including from state agencies such as the Arizona Department of Commerce's Office of Economic Opportunity. When more recent data from public or state agency datasets were not available, this report also cites data from the 2022 FTF Colorado River Indian Tribes Regional Needs and Assets Report.

In most tables in this report, the top rows of data correspond to the FTF Colorado River Indian Tribes Region. Not all data are available at the FTF regional level because not all data sources analyze their data based on FTF regional boundaries. The other table rows present data that are useful for comparison purposes, including the entire Colorado River Indian Tribes (both in Arizona and California), La Paz County, all Arizona reservations combined, the state of Arizona and national estimates or targets where available. Data tables and graphs are as complete as possible. Data which are not available for a

particular geography are indicated by the abbreviation "N/A." State agencies have varying policies about reporting small values. Entries such as "<11" are used when the count is too small to be reported and has been suppressed to protect privacy. In some cases, table entries will indicate a range of values such as "1 to 9" because the suppression policy prevented the vendor from knowing the exact value, but comparison of these ranges of possible values to other values in the table or figure may still be useful. Table entries of "DS" indicate that data have been suppressed and we are unable to provide a useful range of possible values. Additional data tables not included in the body of the report can be found in Appendix 1.

# THE COLORADO RIVER INDIAN TRIBES **REGION**

The First Things First regional boundaries were initially established in 2007, creating 31 regions which were designed to (a) reflect the view of families in terms of where they access services, (b) coincide with existing boundaries or service areas of organizations providing early childhood services, (c) maximize the ability to collaborate with service systems and local governments and facilitate the ability to convene a Regional Partnership Council and (d) allow for the collection of demographic and indicator data. The regional boundaries are reviewed every two years. In state fiscal year 2015, the boundaries were modified using census blocks, creating 28 regions.

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

Geographically, the First Things First (FTF) Colorado River Indian Tribes Region is defined as the Arizona part of the Colorado River Indian Reservation, including the town of Parker. The region lies entirely in La Paz County. The Colorado River Indian Reservation covers about 420 square miles, of which about 84% lies in Arizona. The remainder is across the river in California. The US Census Bureau identifies three census tracts in the reservation: the California part (9401), the town of Parker (9402) and the remainder of the Arizona portion of the reservation (9403). The FTF Colorado River Indian Tribes Region is comprised of census tracts 9402 and 9403.

The Colorado River Indian Tribes include four distinct Tribes - the Mohave, Chemehuevi, Hopi and Navajo. The Colorado River Indian Tribes Region encompasses a unique and diverse area. The primary communities in the FTF Colorado River Indian Tribes Region are Parker, Arizona, which is located on a combination of Tribal land, leased land that is owned by Colorado River Indian Tribes and land owned by non-tribal members, as well as Poston, Arizona, which is located entirely on Tribal land. Therefore, the FTF Colorado River Indian Tribes Region serves both Tribal members and non-members on the Arizona portions of the Colorado River Indian Reservation and in the Town of Parker. There are programs managed by the Colorado River Indian Tribes, such as the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), Housing and Urban Development (HUD), the Colorado River Indian Tribes Library and the Joint Venture Sewer Project that serve the population of all of La Paz County.

Figure 1 shows the geographical area covered by the Colorado River Indian Tribes Region. Additional information is available at the end of this report, including a map and table of the region's zip codes in Appendix 3 and a map and a list of Arizona public school districts in the region in Appendix 4.

Map by Community Research, Evaluation, & Development (CRED) Team, University of Arizona **COLORADO RIVER INDIAN TRIBES REGION** Parker COLORADO RIVER INDIAN TRIBES

Figure 1. The First Things First Colorado River Indian Tribes Region

Source: 2020 TIGER/Line Shapefiles prepared by the U.S. Census. Map produced by CRED.



**POPULATION CHARACTERISTICS** 

#### POPULATION CHARACTERISTICS

#### **Why It Matters**

Accurate information about the number and characteristics of families allows policy makers and program providers to understand what resources are needed in their communities, including where services should be located and how to tailor offerings to the specific needs of those who are likely to use them. 12, 13, 14, 15 For example, identifying which communities have high numbers of families with young children can facilitate strategic investments in libraries, playgrounds, health care facilities, social services and educational systems, which can help families with young children thrive. 16, 17 Program and policy decisions that are informed by data on the composition of children's home and community environments help ensure more effective supports for families and have a greater chance to improve well-being, economic security and educational outcomes for children.

#### 2020 Census data and its limitations

The release of 2020 Census data in 2023 provided updated information on the population of Arizona and the nation as a whole. However, the 2020 Census faced unprecedented challenges in conducting an accurate count of the population, the foremost of which included the COVID-19 pandemic and its related disruptions to institutions such as tribal and local governments, schools and health care facilities. 18, 19, 20, 21, 22 Overall, data quality reviews of the 2020 Census have concluded that the data are generally reliable and accurate for the overall population; however, specific groups that have been undercounted in the past were again undercounted, this time more severely.<sup>23</sup> Nationwide, American Indians living on reservations were estimated to be undercounted by 5.6% (compared to 4.9% in 2010), and Hispanic or Latino individuals were undercounted by an estimated 5.0% (compared with 1.5% in 2010). Young children birth to age 4 were also undercounted by 3-5% nationwide, meaning that as many as 1 in 20 young children birth to age 4 were missed by the Census.<sup>24</sup> These undercounts are important to keep in mind when using Census data, particularly data for young children and for communities with substantial American Indian and Hispanic or Latino populations. Undercounted communities risk receiving fewer resources for at least the next decade since the decennial census counts are the basis of many federal funding allocations. 25, 26

#### What the Data Tell Us

#### Population, race and ethnicity

While young children make up a small proportion of the overall population, their well-being has widereaching impacts on families, social service systems and the state's future population. Continued investment in children's well-being and the well-being of their families was deemed by the National Academy of Sciences as "the most efficient strategy" for strengthening the future workforce and supporting a thriving community.<sup>27, 28</sup>

Knowing the racial-ethnic composition of communities can inform efforts to ensure equitable access to services and resources. Many racial and ethnic minority groups in the U.S. experience reduced access to health care services, more poverty and housing inequality, poorer living conditions and increased rates of homelessness in comparison to non-Hispanic White Americans. <sup>29, 30, 31, 32</sup> In Native communities. these disparities have been shaped by decades of inequitable federal policies and underinvestment.<sup>33</sup> These inequities result in disproportionately worse overall health as indicated by higher rates of disease and illness, untreated physical health conditions and lower life expectancies within these groups.<sup>34</sup> Understanding a community's racial-ethnic composition is also critical for identifying communities facing higher risks from environmental and public health hazards due to historic underinvestment and other factors—as the COVID-19 pandemic made woefully clear.<sup>35</sup>

#### How the Colorado River Indian Tribes Region is faring

- According to the 2020 U.S. Census, the total population of the Colorado River Indian Tribes Region was 7,036, of whom 703 were young children (birth to age 5). Nearly one-fifth of the 2,322 households in the region (19%) had one or more young children, a slightly higher proportion of households with young children than on the entire Colorado River Indian Tribes reservation (16%) and Arizona as a whole (13%) (Table 1).
- Census estimates indicate that the overall population of the Colorado River Indian Tribes Region fell by 1% between 2010 and 2020. This is marginally smaller than the decrease seen across the entire Colorado River Indian Tribes reservation (-4%) and all Arizona reservations (-3%) and much smaller than the decrease seen in La Paz County (-19%). As compared with a decrease of approximately one-quarter in all Arizona reservations (-26%) and La Paz County (-23%), the population of young children (birth to age 5) decreased much less substantially in the region (-5%) (Table 2; Figure 2).
- Data provided by the Colorado River Indian Tribes Enrollment Department for the 2022 First Things First Colorado River Indian Tribes Regional Needs and Assets Report show that there were 3,569 total enrolled members in 2020, about 58% of whom were living on the reservation (2,062). There were 362 total enrolled young children (birth to age 5), 233 of whom were living on the reservation (Table 3).

- As previously mentioned in 2020 Census data and its limitations, American Indians living on reservations and young children (birth to age 4) were specifically found to be substantially undercounted in the 2020 Census (5.6% and 3-5% nationally). One way to understand potential undercounting of young children in the Colorado River Indian Tribes Region is to compare 2020 Census data on children birth to age 5 to Arizona Department of Health Services (ADHS) data on births from 2015 to 2020. While the 2020 Census estimated there were 703 young children in the region, ADHS reported 787 births between 2015 and 2020, representing a possible 11% undercount. In contrast, the number of births between 2015 and 2020 was only 1% higher than the Census estimated population of young children across the state (Figure 3).
- In the 2020 Census, just under half of the population in the Colorado River Indian Tribes Region identified as American Indian or Alaska Native (44%), and over one-third identified as Hispanic or Latino (38%). More than a quarter identified as Non-Hispanic White (28%), 17% identified as Multiracial, and 2% each identified as Black or African American and Asian or Pacific Islander. This differs from the race and ethnicity breakdown across all Arizona Reservations, where 93% of residents identified as American Indian or Alaska Native (Figure 4). Much of this difference can be attributed to the town of Parker, parts of which are non-tribal land or land leased from the Colorado River Indian Tribes.<sup>36</sup>
- These breakdowns were similar for young children, with even higher proportions identified as American Indian (47%), Hispanic or Latino (47%), and Multiracial (23%) when compared to the overall population (Figure 5).

Table 1. Population and households in the 2020 U.S. Census

Geography	Total population	Population (ages 0-5)	Total number of households	households w	and percent of ith one or more dren (ages 0-5)
Colorado River Indian Tribes Region	7,036	703	2,322	448	19%
Colorado River Indian Tribes (entire)	8,431	751	3,037	489	16%
All Arizona Reservations	173,499	15,140	50,362	10,167	20%
La Paz County	16,557	949	7,370	708	10%
Arizona	7,151,502	480,744	2,705,878	345,601	13%
United States	331,449,281	22,401,565	126,817,580	16,429,111	13%

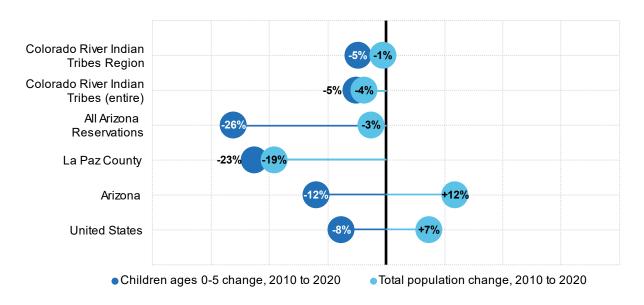
Source: U.S. Census Bureau. (2023). 2020 Decennial Census, Demographic & Housing Characteristics (DHC), Tables P1, P14, P20 & HCT3

Table 2. Change in the total population and population of children ages 0-5, 2010 to 2020 Census

		Total population	1	Population (Ages 0-5)			
Geography	2010	2020	% Change 2010 to 2020	2010	2020	% Change 2010 to 2020	
Colorado River Indian Tribes Region	7,077	7,036	-1%	739	703	-5%	
Colorado River Indian Tribes (entire)	8,764	8,431	-4%	792	751	-5%	
All Arizona Reservations	178,131	173,499	-3%	20,511	15,140	-26%	
La Paz County	20,489	16,557	-19%	1,227	949	-23%	
Arizona	6,392,017	7,151,502	+12%	546,609	480,744	-12%	
United States	308,745,538	331,449,281	+7%	24,258,220	22,401,565	-8%	

Source: U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC), Tables P1, P14, HCT3. U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P1, P14, P20.

Figure 2. Change in the total population and population of children ages 0-5, 2010 to 2020 Census



Source: U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC), Tables P1, P14, HCT3. U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P1, P14, P20.

Table 3. Colorado River Indian Tribes Enrollment, 2019 to 2020

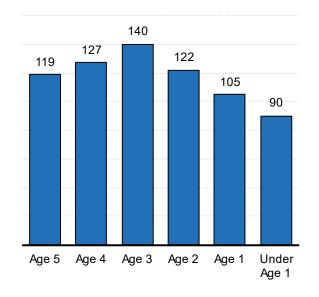
	On Reservation (2019)	Off Reservation (2019)	Total (2019)	On Reservation (2020)	Off Reservation (2020)	Total (2020)
Young children (ages 0-5)	249	137	386	233	129	362
Under age 1	37	15	52	19	12	31
Age 1	42	20	62	39	17	56
Age 2	41	23	64	42	20	62
Age 3	45	19	64	41	23	64
Age 4	47	38	85	45	19	64
Age 5	37	22	59	47	38	85
School-age children (ages 6-17)	636	384	1,020	614	377	991
Total children (ages 0-17)	885	521	1,406	847	506	1,353
Adults (ages 18 and 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

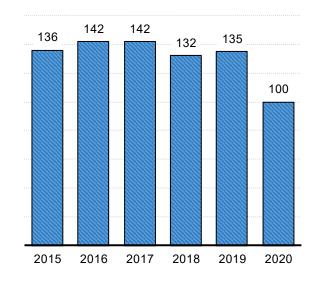
Source: First Things First (2022). First Things First Colorado River Indian Tribes Regional Needs and Assets Report. Retrieved from https://files.firstthingsfirst.org/regions/Publications/Regional%20Needs%20and%20Assets%20-%202022%20-%20CRIT.pdf

Figure 3. Children by single year of age in the 2020 Census compared to recent birth numbers in the region (2015 to 2020)

Children by age, Colorado River Indian Tribes Region

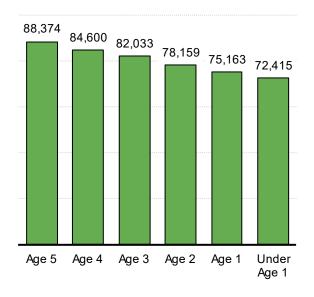
Births by year, Colorado River Indian Tribes Region

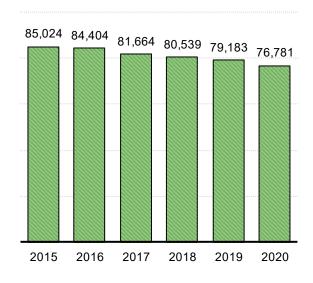




Children by age, Arizona

Births by year, Arizona





Source: Arizona Department of Health Services (2023). [Vital Statistics Births dataset]. Unpublished data. U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC), Tables P1, P14.

Note: Looking at these two figures allows a comparison of 2020 Census estimates (left) of the population size of young children by age with the count of births from their likely birth year (right) to try to understand further how much the Census may have undercounted young children.

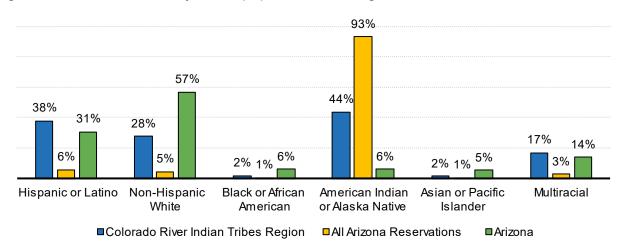


Figure 4. Race and ethnicity of the population of all ages, 2020 Census

Source: U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC), P6, P7, P8, P9, P12, P12A-W.

Note: The six percentages shown in this figure may sum to more or less than 100% because (a) persons reporting Hispanic ethnicity are counted twice if their race is Black, American Indian, Asian, Pacific Islander, or any combination of two or more races, (b) persons reporting any other race are not counted here unless they have Hispanic ethnicity, and (c) rounding.

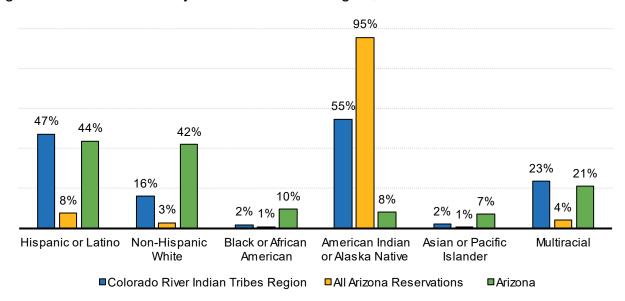


Figure 5. Race and ethnicity for children birth to age 4, 2020 Census

Source: U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC), P6, P7, P8, P9, P12, P12A-W.

Note: The six percentages shown in this figure may sum to more or less than 100% because (a) persons reporting Hispanic ethnicity are counted twice if their race is Black, American Indian, Asian, Pacific Islander, or any combination of two or more races, (b) persons reporting any other race are not counted here unless they have Hispanic ethnicity, and (c) rounding.

#### Language use

Language provides an important connection to family, community and culture. Arizona is home to many sovereign tribal nations whose Native languages are a vital cultural strength. Language preservation and revitalization are critical to safeguarding traditional knowledge and promoting Indigenous selfdetermination, social unity and educational equity. <sup>37, 38, 39</sup> Unfortunately, the latest estimates for Native language use in Arizona from the American Community Survey point to a sharp decline in the number of speakers of native languages between 2019 and 2021. While the population of English-only speakers rose 0.3% between 2019 and 2021, the population of Navajo speakers declined by an estimated 13% (from over 90,000 to about 78,000), and the population of speakers of Native North American languages other than Navajo declined by an estimated 27% (from over 30,000 to about 22,500). 40 This decrease reflects the devastating losses that Native communities experienced during the COVID-19 pandemic. 41,42 These deaths, especially among Native elders, signify a loss of life and of traditional knowledge, cultural history and language. 43,44 Ongoing support for cultural preservation and language revitalization continues to be a critical need for Native communities in Arizona.

Mastery of more than one language is also an asset in school readiness and academic achievement and may offer cognitive and social-emotional benefits in early school experiences and across one's lifetime. 45, 46, 47, 48, 49 However, families with lower English proficiency may also face barriers to accessing information about health care and other services or engaging with their children's teachers. Children who do not yet have a full grasp of English may also experience difficulties in school, impeding their academic success and resulting in negative health outcomes. <sup>50, 51</sup> Knowing the languages spoken and level of English proficiency in a region can inform the development of resources and services in multiple languages, ensuring that they are accessible to all families. 52, 53

#### How the Colorado River Indian Tribes Region is faring

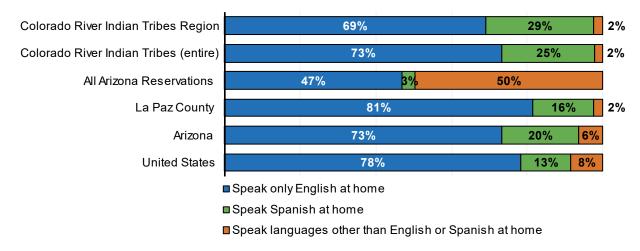
- The Colorado River Indian Tribes are made up of four distinct tribes, each with their own language: the Mohave, Chemehuevi, Hopi and Navajo. Mohave language classes are offered at the Colorado River Indian Tribes Library, with adult classes offered year-round and child classes offered during the summer (for ages 6 to 10).<sup>54</sup> Community members also indicated that the Library will be adding tribal languages to their summer early literacy program, which targets children from birth to 5 years old.
- The pattern of languages spoken at home in the Colorado River Indian Tribes Region was more similar to the state as a whole than all Arizona reservations. In the region, almost 10 times the proportion of individuals reported speaking Spanish at home (29%) compared with all Arizona reservations (3%). Only 2% of individuals in the region reported speaking languages other than English or Spanish at home (most likely a Native North American language), compared with half of residents across all Arizona Reservations (Figure 6). This may reflect the mix of tribal and non-tribal lands represented in the region as well as low household use of Native languages.

- Of those individuals speaking a language other than English at home, most also speak English "very well," with 22% of the region proficiently bilingual or multilingual. Almost one in 10 individuals speak another language at home and do not speak English very well (9%) (Figure 7).
- One in 20 households in the Colorado River Indian Tribes Region were considered limited-English-speaking (5%), meaning no one over the age of 13 in the household speaks English very well. This is less than half the proportion seen across all Arizona reservations (12%), but comparable to the entire Colorado River Indian Tribes reservation, La Paz County and Arizona (all 4%) (Figure 8).
- During the 2021-22 school year, 5% of preschool to 12<sup>th</sup> grade students enrolled in Parker Unified School District schools were considered English Language Learners (n=86). This is a smaller percent of students than in La Paz County (7%) and across Arizona (8%) (Table 4).
- English Language Learners are identified through the Arizona Department of Education (ADE) Home Language Survey, which asks families about the student's first language and what language is spoken at home most of the time. Statewide, there were fewer than 11 households each speaking Mohave and Chemehuevi in any year. In 2021-22 in all of Arizona, 25 students had reported Hopi language use and 1,434 had reported Navajo language use at home in 2021-22. In Parker Unified School District, fewer than 11 households had any native language use reported, with most English Language Learner students coming from Spanish-speaking households. This indicates that almost all of the households using Hopi and Navajo languages at home did not reside in the Colorado River Indian Tribes Region.

POPULATION CHARACTERISTICS 37

i "Very well" refers to the self-rated ability to speak English in response to the American Community Survey question "How well does this person speak English?". Other response options include: "well," "not well" and "not at all." See https://www.census.gov/topics/population/language-use/about.html

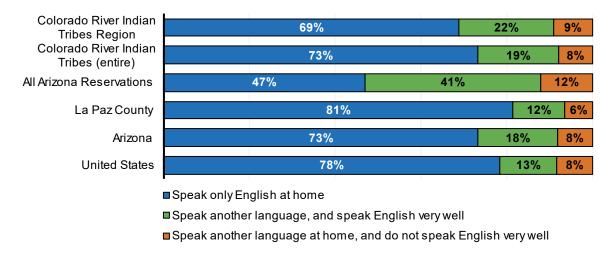
Figure 6. Language spoken at home (by persons ages 5 and older), 2017-2021 ACS



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table C16001

Note: The three percentages in each bar may not sum to 100% because of rounding. The American Community Survey (ACS) no longer specifies the proportion of the population who speak Native North American languages for geographies smaller than the state. In Arizona, Navajo and other Native American languages (including Apache, Hopi, and O'odham) are the most commonly spoken (2%), following English (73%) and Spanish (20%).

Figure 7. English-language proficiency (for persons ages 5 and older), 2017-2021 ACS



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table C16001

Note: The three percentages in the figure should sum to 100%, but may not because of rounding.

Colorado River Indian Tribes Region 5% 4% Colorado River Indian Tribes (entire) All Arizona Reservations 12% La Paz County 4% 4% Arizona

Figure 8. Share of households that are limited-English-speaking, 2017-2021 ACS

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table C16002

4%

**United States** 

Note: A "limited-English-speaking" household is one in which no one over the age of 13 speaks English very well.

Table 4. Number of English Language Learners enrolled in all grades, 2020-21 to 2021-22

	Number of PS-12 students who were Percent of PS-12 students who were English Language Learners English Language Learners			2 students who were Language Learners
Geography	2020-21	2021-22	2020-21	2021-22
Parker Unified School District	90	90 86		5%
La Paz County	160	159	7%	7%
Arizona schools	86,405	91,881	8%	8%

Source: Arizona Department of Education (2023). [Oct 1 Enrollment Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

Notes: English Language Learners are students who do not score 'proficient' in the English language based on the Arizona English Language Learning Assessment (AZELLA) and thus are eligible for additional supportive services for English language acquisition. Legislation in Arizona requires children in Arizona public schools be taught in English, and English Language Learners to attend English immersion programs. Senate Bill 1014 passed in 2019, increased the flexibility districts have in structuring English Language Learners immersion programs, and lessened the duration required of this instruction. For more information see https://www.azed.gov/oelas/structured-english-immersion-models

### Family and household composition

Young children in Arizona come from households with many potential compositions, each of which has possible implications for child development. <sup>56, 57, 58</sup> For example, families with two married parents tend to offer stability that promotes child well-being. 59, 60, 61 Single-parent households are common and can be linked to levels of poverty, access to health and education resources and the quality of a child's interactions with adult caregivers. 62, 63, 64, 65, 66, 67, 68 Multi-generational living, particularly arrangement

where grandparents live in the home with children and parents, has long been practiced in some cultures and communities but is becoming increasingly common in U.S. families of all backgrounds. 69, 70, 71, 72 These living arrangements can offer financial and social benefits but also specific stressors, such as managing conflicts in parenting styles and family roles. <sup>73, 74,75, 76, 77</sup> It is also increasingly common for children to live in kinship care, defined as the care of children by someone other than their parents, such as relatives or close friends. <sup>78, 79, 80</sup> These kinship caregivers, especially grandparents who care for their grandchildren, can face unique challenges, including navigating the logistics of informal guardianship (e.g., difficulties in registering children for school), coping with parental absence and addressing the challenges of being an aging caregiver for a young child. 81, 82, 83, 84

Though varying from one community to another, multigenerational households and kinship care are common in Native communities. 85, 86 The strengths associated with the extended family structure, including mutual help and respect, can provide family members with a network of support that can be valuable when dealing with socio-economic hardships. 87 Grandparents are often central to these households and care situations, in many cases sharing and strengthening Native language, history and culture. 88, 89

### How the Colorado River Indian Tribes Region is faring

- According to American Community Survey (ACS) estimates, 44% of young children (birth to age 5) in the Colorado River Indian Tribes Region lived in a household with two married parents (44%), which is greater than the proportion on all Arizona Reservations (25%) and La Paz County (34%) but smaller than Arizona as a whole (59%). Another 46% of young children in the region were living with one unmarried parent, ii with smaller shares living with non-relatives (8%) or relatives other than parents (such as grandparents, aunts and uncles) (2%) (Table 5).
- One in five young children (20%) in the region lived in a grandparent's household, which is less than half the proportion seen across all Arizona reservations (43%) (Figure 9). Note that the grandparent in these households may or may not be responsible for raising the child, and the child's parent(s) may or may not also be living in the household.
- Of the grandparents living with grandchildren birth to age 17 in the region, just 22% did not have a parent also present in the household (Figure 10). This suggests that many of the grandchildren residing with their grandparents are in multigenerational households, where grandparents, parents and children all live together.

ii Note that due to the way the ACS asks about family relationships, children living with two unmarried, cohabitating parents are not counted as living with two parents (these children are counted in the 'one parent' category). New data from the 2020 Census (table P20) for children ages 0-17 shows that in the Colorado River Indian Tribes Region, 34% of the children living in households with an unmarried parent are actually living in cohabitating couple families where there are two parents present but they are not married. This means that for children of all ages living with their parents in 2020, 45% were living in households led by married parents, 28% were living in households led by an unmarried (and not cohabitating) mother, 19% were living in households led by cohabitating parents and 9% were living in households led by an unmarried (and not cohabitating) father.

The ACS considers a grandparent to be responsible for their grandchildren if they are "currently responsible for most of the basic needs of any grandchildren under the age of 18" who live in the grandparent's household. Based on this definition, an estimated 242 grandparents in the Colorado River Indian Tribes Region are responsible for their grandchildren under 18 years old. A parent is also present in most of these households (only 37% without the child's parent). Just over half of these grandparents are female (52%) and in the labor force (54%), meaning that they may need child care for their grandchildren while they are working. A smaller proportion of these grandparents have an income below the poverty level in the region (15%) compared with the entire Colorado River Indian Tribes reservation (17%), La Paz County (19%), Arizona (21%) and all Arizona Reservations (36%) (Figure 10; Table 6).

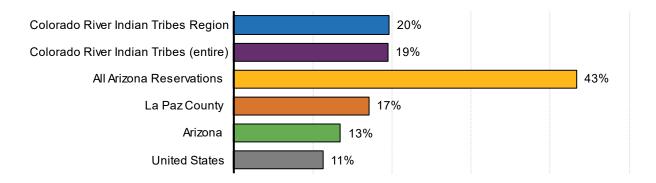
Table 5. Living arrangements for children birth to age 5, 2017-2021 ACS

Geography	Estimated number of children (birth to age 5) living in households	Living with two married parents	Living with one parent	Living not with parents but with other relatives	Living with non- relatives
Colorado River Indian Tribes Region	630	44%	46%	2%	8%
Colorado River Indian Tribes (entire)	701	44%	47%	2%	7%
All Arizona Reservations	15,661	25%	65%	8%	2%
La Paz County	845	34%	49%	4%	13%
Arizona	496,219	59%	37%	3%	2%
United States	23,353,556	64%	32%	2%	2%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Tables B05009, B09001, & B17001

Note: The four percentages in each row should sum to 100%, but may not because of rounding. The term "parent" here includes stepparents. Please note that due to the way the ACS asks about family relationships, children living with two unmarried, cohabitating parents are not counted as living with two parents (these children are counted in the 'one parent' category).

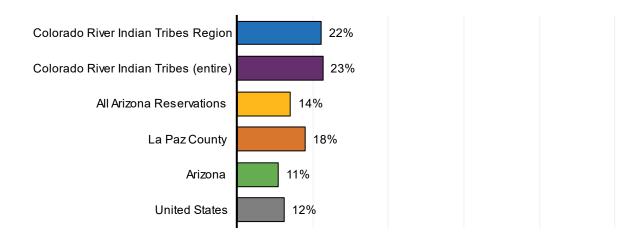
Figure 9. Grandchildren birth to age 5 living in a grandparent's household, 2020 Census



Source: U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC), Tables P14, PCT11.

Note: This table includes all children (under six years old) living in a household headed by a grandparent, regardless of whether the grandparent is responsible for them, or whether the child's parent lives in the same household.

Figure 10. Percent of grandparents living with their grandchildren birth to age 17 and no parent is present in the household, 2017-2021 ACS



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Tables B10051, B10054, B10056, & B10059

Table 6. Selected characteristics of grandparents who are responsible for one or more grandchildren under 18 in their households, 2017-2021 ACS

			Percent of these grandparents who:							
Geography	Estimated number of grandparents who live with and are responsible for grandchildren under 18 years old	have the child's	Are 60 years old or older	Are female	Do not speak English very well	In labor force	Have an income below the poverty level			
Colorado River Indian Tribes Region	242	37%	44%	52%	N/A	54%	15%			
Colorado River Indian Tribes (entire)	246	38%	43%	53%	N/A	53%	17%			
All Arizona Reservations	5,828	30%	49%	67%	18%	44%	36%			
La Paz County	271	35%	45%	55%	14%	48%	19%			
Arizona	56,079	33%	45%	62%	21%	57%	21%			
United States	2,319,443	38%	47%	63%	14%	56%	18%			

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Tables B10051, B10054, B10056, B10058, & B10059

Note: Grandparents are considered responsible for their grandchild or grandchildren if they are "currently responsible for most of the basic needs of any grandchildren under the age of 18" who live in the grandparent's household. Due to small sample sizes, reliable estimates for English language proficiency were not available for the region.

Additional data tables related to *Population Characteristics* can be found in Appendix 1 of this report.



**ECONOMIC CIRCUMSTANCES** 

# **ECONOMIC CIRCUMSTANCES**

## Why it Matters

A family's economic stability impacts children's well-being and predicts a variety of health outcomes. 90 Children who grow up in poverty and unstable economic conditions are more likely to face negative effects on their cognitive, behavioral, social and emotional development compared to those in stable economic environments. 91, 92, 93, 94, 95 The challenges they face may continue into adulthood, and such difficulties can be passed on to the next generation. 96, 97, 98 Poverty also affects children by straining parental well-being and parent-child interactions. Stressors related to poverty, like unemployment, food and housing insecurity and poor mental and physical health, make it difficult for caregivers to provide the necessary support for children's optimal development. 99 In light of these broad impacts, economic stability is a key social determinant of health and is included as a domain in the Healthy People 2030 Objectives. iii

Economic circumstances in tribal communities have been shaped by a long history of inequitable policies and federal investment. 100, 101 The resulting economic disparity between Native and non-Native communities affects rates of employment, poverty, food security and housing stability. Especially since the passing of the Indian Self-Determination and Education Assistance Act in 1975, which gave tribes greater autonomy in administering federally-funded programs and services, tribal governments have invested in community and economic development opportunities such as health care, manufacturing, forestry, fisheries, gaming and resorts to strengthen the economic conditions of their people. 102

## What the Data Tell Us

#### **Income and poverty**

Poverty is associated with reduced access to nutrition, green space and health care and greater exposure to psychosocial stress and environmental toxins, factors that can both directly and indirectly hinder children's growth and brain development. 103, 104, 105 Children living in poverty are thus at a higher risk of negative impacts including being born at a low birth weight, lower school achievement and poor health. 106, 107, 108, 109, 110, 111, 112 Economic hardship is included in some definitions of adverse childhood experiences (ACEs) and children living in poverty experience other non-economic ACEs, such as parental divorce or separation, exposure to violence, parental incarceration and living with someone with mental illness or a substance use disorder, at higher rates than children in higher income households. 113, 114 Given the many negative effects of poverty on child development, programs that alleviate poverty through providing cash assistance or food, housing or health care assistance can improve child well-being. 115

iii For more information on the Economic Stability Healthy People 2030 Objectives please see https://health.gov/healthypeople/objectivesand-data/browse-objectives/economic-stability

The Temporary Assistance for Needy Families Cash Assistance Program (TANF)<sup>iv</sup> provides temporary cash benefits and supportive services to children and families. Eligibility is based on citizenship or qualified resident status, Arizona residency and limits on resources and monthly income. 116 In recognition of tribal sovereignty, federally recognized tribes have the option to administer their own TANF programs.

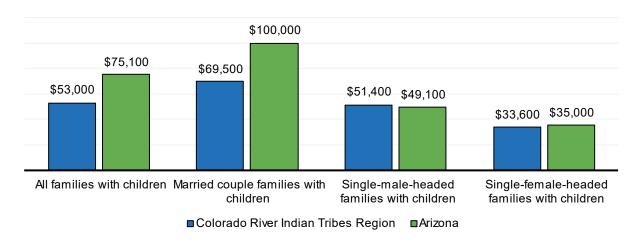
#### How the Colorado River Indian Tribes Region is faring

- The median family income for all household types with children (birth to age 17) in the Colorado River Indian Tribes Region (\$53,000) is substantially lower than that in Arizona overall (\$75,100). Married couple families with children in the region have the highest median annual income (\$69,500) of all family types, more than \$30,000 lower than that statewide (\$100,000). Single-parent-led households in the region had lower median annual incomes, with singlefemale-headed families with children making less than half of married couple families (\$33,600), however these incomes are closer to the statewide rates than the median household income for married couple families (Figure 11).
- Similar to La Paz County, 20% of the overall population and 30% of young children (birth to age 5) in the Colorado River Indian Tribes Region lived in poverty. These are higher than the poverty rates for Arizona as a whole (13% and 20%, respectively), but lower than rates seen in all Arizona reservations (37% and 48%, respectively) (Figure 12).
- According to American Community Survey (ACS) five-year estimates, rates of poverty among young children in the region have decreased substantially in recent years, from 53% in 2012-2016 to 30% in 2017-2021 (-23%). Poverty rates also declined across La Paz County (-18%), all Arizona reservations (-6%), Arizona (-8%) and the U.S. (-6%) during the same time period, but much less sharply (Figure 13).
- More than half (53%) of young children in the Colorado River Indian Tribes Region live in households with incomes under 185% of the federal poverty level (FPL), a commonly used threshold for social safety net benefits such as the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and reduced-price school meals. In 2021, the 185% FPL threshold for a family of two adults and two children was \$50,836; for a single parent with one child, it was \$34,552 (Figure 14).
- One in 12 young children in the region (8%) live in "deep poverty" (defined as below 50% FPL), a smaller percent than in La Paz County (11%) and less than one-third the percent in all Arizona Reservations (27%) (Figure 14). However, while income is one important way to measure whether families can meet their basic needs, in Native communities, subsistence-based activities such as hunting, gathering, farming and ranching are important cultural practices that can also meet families' basic needs and are not captured in standard poverty measures. 117

iv For more information see: https://www.acf.hhs.gov/ofa/programs/temporary-assistance-needy-families-tanf and https://des.az.gov/ca

In the region, the number of children birth to age 5 served by the TANF program decreased from 38 in state fiscal year (SFY) 2018 to a low of 13 in SFY 2021 before increasing again to 19 in 2022. The number of families with young children participating in TANF also hit a low of 10 in SFY 2021, increasing to 13 in 2022 (Figure 15).

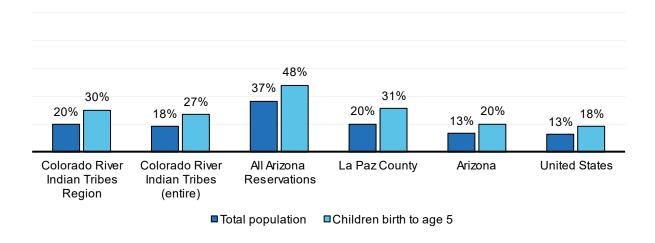
Figure 11. Median family income for families with children birth to age 17, 2017-2021 ACS



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B19126

Note: Half of the families in the population are estimated to have annual incomes above the median value, and the other half have incomes below the median. The median family income for all families includes families without children birth to age 17. A reliable estimate of median income for single-female-headed households was not available from the ACS due to sample size limitations. Note that median income estimates are not available for All Arizona Reservations.

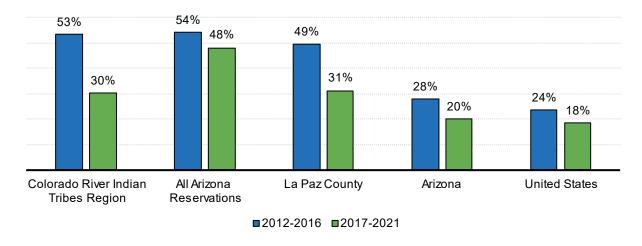
Figure 12. Rates of poverty for persons of all ages and for children birth to age 5, 2017-2021 **ACS** 



Source: U.S. Census Bureau. (2020). American Community Survey five-year estimates 2017-2021, Table B17001

Note: This graph includes only persons whose poverty status can be determined. Adults who live in group settings such as dormitories or institutions are not included. Children who live with unrelated persons are not included. In 2021, the poverty threshold for a family of two adults and two children was \$27,479; for a single parent with one child, it was \$18,677.

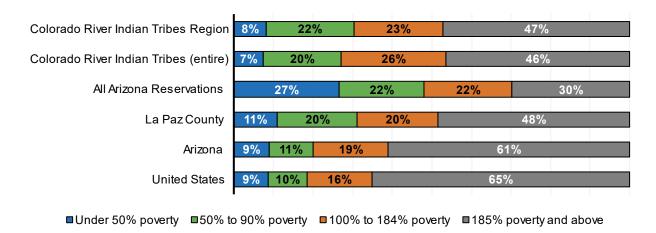
Figure 13. Rates of poverty for children birth to age 5, 2012-2016 and 2017-2021 ACS



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B17001. U.S. Census Bureau. (2017). American Community Survey five-year estimates 2012-2016, Table B17001.

Note: This graph includes only persons whose poverty status can be determined. Adults who live in group settings such as dormitories or institutions are not included. Children who live with unrelated persons are not included. In 2021, the poverty threshold for a family of two adults and two children was \$27,479; for a single parent with one child, it was \$18,677.

Figure 14. Children birth to age 5 living at selected poverty thresholds, 2017-2021 ACS



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B17024

Colorado River Indian Tribes Region

Note: The four percentages in each bar should sum to 100%, but may not because of rounding. In 2021, the poverty threshold for a family of two adults and two children was \$27,479; for a single parent with one child, it was \$18,677. The 185% thresholds are \$50,836 and \$34,552, respectively.

Arizona

Figure 15. Number of children ages birth to 5 and families with children ages birth to 5 receiving TANF, state fiscal years 2018 to 2022

14.659 13,747 13,654 13,592 13,029 38 35 10,538 9,947 9,884 9,881 9,360 19 16 to 24 13 17 to 25 13 12 to 20 11 to 19 10 SFY2018 SFY2019 SFY2020 SFY2021 SFY2022 SFY2018 SFY2019 SFY2020 SFY2021 SFY2022 ---- Families with children (ages 0-5) participating - Families with children (ages 0-5) participating in TANF in TANF --- Children (ages 0-5) participating in TANF --- Children (ages 0-5) participating in TANF

Sources: Arizona Department of Economic Security (2023). [Division of Benefits and Medical Eligibility dataset]. Unpublished data.

### **Food security**

Many families struggle with consistent access to "enough food for an active, healthy life," a problem known as food insecurity. 118 Food insecurity is linked with many aspects of child and parent well-being; it can be a major source of stress for parents and has been linked to health and behavioral problems for children, such as poorer parent-child attachment, decreased social skills and self-control and increased risk of depression. 119, 120, 121, 122, 123, 124

The Supplemental Nutrition Assistance Program (SNAP; also referred to as "nutrition assistance" and "food stamps"), is administered by the Arizona Department of Economic Security and aims to support working families who are unable to afford the food necessary to sustain their health with their income alone. Nationally, about one in every five children participates in SNAP, and families on average receive a benefit of up to \$2.61 per person for each meal. 125 The SNAP program has been shown to reduce hunger and improve access to healthy food options among those who utilize it. 126

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) vi is a federally funded program administered by the Arizona Department of Health Services aimed to support economically disadvantaged women who are pregnant, postpartum and/or breastfeeding, along with infants and young children. The program's services include directing participants to health services, nutrition and breastfeeding education and supplemental funding for food. In Arizona, WIC provided an average monthly benefit of \$42 per month in 2022, lower than the national average of \$48 per month. 127 The WIC program is administered in the state of Arizona by the Arizona Department of Health Services (ADHS) as well as the Inter Tribal Council of Arizona (ITCA) for 20 tribal nations in the state.

School meals provide another important nutritional safety net for children and their families. The National School Lunch Program (NSLP), administered by the Arizona Department of Education (ADE) and funded by the United States Department of Agriculture (USDA), provides meals for students of lowincome families at a reduced price. The Summer Food Service Program (SFSP)<sup>vii</sup>, also funded by the USDA and administered by ADE, works to keep all children birth to age 18 fed when school is out of session by providing free meals (breakfast, lunch, supper) and snacks at community sites. SFSP unites community sponsors like camps, faith-based organizations and schools with sites like parks, libraries, community centers and apartment complexes in high-need areas to distribute food. <sup>128</sup> In March 2020, in response to school closures due to the COVID-19 pandemic, the USDA issued waivers allowing yearround operation of the (SFSP) to serve meals to children of all ages engaging in remote learning; these waivers remained in effect through June 2022 and led to increased meal service through SFSP compared to NSLP for many schools. 129 The Child and Adult Care Food Program (CACFP), viii also funded by the USDA, gives reimbursements to participating child care centers, preschools, emergency centers and

V For more information see: https://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program and https://des.az.gov/na

vi For more information see: https://www.fns.usda.gov/wic and https://www.azdhs.gov/prevention/azwic/

vii For more information see: https://www.azed.gov/hns/sfsp

viii For more information see: https://www.azed.gov/hns/cacfp

after-school programs for nutritious meals and snacks served to eligible children. Eligible providers include for-profit child care centers serving at least 25% free or reduced-price lunch participants or any non-profit program. 130

## How the Colorado River Indian Tribes Region is faring

- The Colorado River Indian Tribes Department of Health Services administers the Food Distribution Program on Indian Reservations (FDPIR) in the region, through which eligible tribal members can receive a monthly box of USDA foods. 131 Between 2019 and 2021, FDPIR served between 125 and 198 households in the region each year, or between 286 and 516 certified persons (Table 7).
- Since state fiscal year (SFY) 2018, SNAP participation among young children (birth to age 5) in the Colorado River Indian Tribes Region has declined steadily from 573 in SFY 2018 to 395 in SFY 2022, a 31% decrease. Participation among families with young children also decreased by 32%. Participation in SNAP among young children and families with young children also decreased statewide during these years, but at a much lower rate (-16% and -15%, respectively) (Figure 16).
- The Colorado River Indian Tribes WIC program is one of the tribally-operated programs under the Inter Tribal Council of Arizona (ITCA). However, the program uniquely serves the entire population of La Paz County, as well as the Chemehuevi Indian Tribe and other communities in California. 132 In 2020, there were 883 individuals enrolled in the program, including 205 women (23%), 230 infants (26%) and 448 children (ages 2-4) (51%) (Table 8).
- From 2019-20 to 2021-22, the total number of school lunches served through school nutrition programs in the Colorado River Indian Tribes Region varied by program because of the effects of the COVID-19 pandemic. Due to USDA waivers that allowed for greater flexibility in meal service through the Summer Food Service Program (SFSP) year-round, the number of lunches served through SFSP increased more than seven-fold between 2019-20 (n=43,203) and 2020-21 (n=307,288), peaking at over 310,000 lunches served in 2021-22 (n=310,329). Conversely, lunch service through the National School Lunch Program (NSLP) fell to historic lows. Lunches served through the Child and Family Care Food Program (CACFP) at Colorado River Indian Tribes Head Start<sup>133</sup> increased from 24,567 in 2019-20 to a high of 122,832 in 2020-21 and remained elevated in 2021-22 at 88,176 lunches served (Figure 17). Overall, these trends point to rapid adaptation to changing needs for children's meals and alternative delivery modes during the most intense years of the COVID-19 pandemic.

Table 7. Colorado River Indian Tribes Food Distribution Program on Indian Reservations (FDPIR) services, 2019 to 2021

	2019	2020	2021
Certified persons	496	516	286
Octuned persons	430	310	200
Certified households	231	233	149
Household participating	198	187	125

Source: First Things First (2022). First Things First Colorado River Indian Tribes Regional Needs and Assets Report. Retrieved from https://files.firstthingsfirst.org/regions/Publications/Regional%20Needs%20and%20Assets%20-%202022%20-%20CRIT.pdf

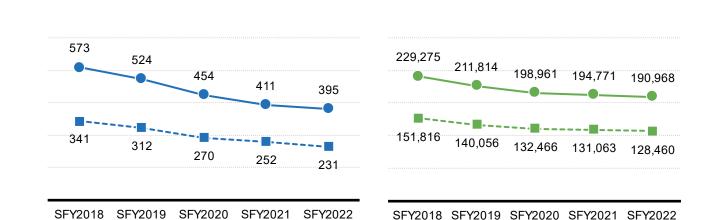
Arizona

---- Families with children (ages 0-5)

--- Children (ages 0-5) participating in SNAP

participating in SNAP

Figure 16. Number of children birth to age 5 and households with children birth to age 5 participating in SNAP, state fiscal years 2018 to 2022



Sources: Arizona Department of Economic Security (2023). [Division of Benefits and Medical Eligibility dataset]. Unpublished data.

----Families with children (ages 0-5) participating

—•— Children (ages 0-5) participating in SNAP

Colorado River Indian Tribes Region

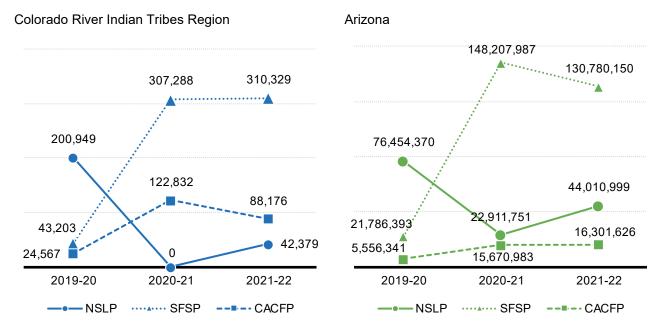
in SNAP

Table 8. Enrollment in the Colorado River Indian Tribes WIC Program, 2020

	Women enrolled	Infants enrolled	Children enrolled	Total enrolled
Colorado River Indian Tribes WIC Program	205	230	448	883
All ITCA WIC programs	2,865	3,095	6,247	12,207

Source: First Things First (2022). First Things First Colorado River Indian Tribes Regional Needs and Assets Report. Retrieved from https://files.firstthingsfirst.org/regions/Publications/Regional%20Needs%20and%20Assets%20-%202022%20-%20CRIT.pdf

Figure 17. Trends in lunches served through school nutrition programs, 2019-20 to 2021-22



Source: Arizona Department of Education (2023). [Health and Nutrition Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

Note: Due to the COVID-19 pandemic, the USDA issued a substantial number of waivers for school nutrition programs to allow greater flexibility for schools to get meals to students in need. More information on the pandemic's effect on school nutrition can be found on the ADE website: https://www.azed.gov/hns/covid19

Table 9. Lunches served through CACFP, 2019-20 to 2021-22

	Number of sites			Numb	er of lunches s	erved
Geography	2019-20	2020-21	2021-22	2019-20	2020-21	2021-22
Colorado River Indian Tribes Head Start Program	1	1	1	13,573	44,670	28,379
La Paz County sites	1	1	1	13,573	44,670	28,379
Arizona sites	N/A	715	643	5,556,341	15,670,983	16,301,626

Source: Arizona Department of Education (2023). [Health and Nutrition Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

## **Employment**

Unemployment and underemployment ix can impact families in ways that affect children's health and well-being. 134 Unemployment can limit access to resources that support children's physical and mental health, like health insurance, and can also contribute to family stress, conflict, homelessness and child abuse. 135, 136 Children with parents who have lost their jobs may also experience poorer school performance and behavioral issues, resulting in grade repetition, suspension or expulsion. <sup>137</sup> Due to many historical and legal reasons as well as differences in practical economic structures, employment rates in Native communities can vary greatly from state rates. 138

Education and employment support programs for parents and caregivers are important for increasing wages and improving the economic stability of families. "Two-generation" or "2Gen" approaches address the needs of both parents and children simultaneously through programs to support children and families together, such as a family literacy program that provides educational support to parents while enrolling children in free high-quality preschool. 139, 140, 141 These programs have the goal of decreasing the intergenerational effects of poverty by building parental capacity and protective factors within families. 142, 143, 144

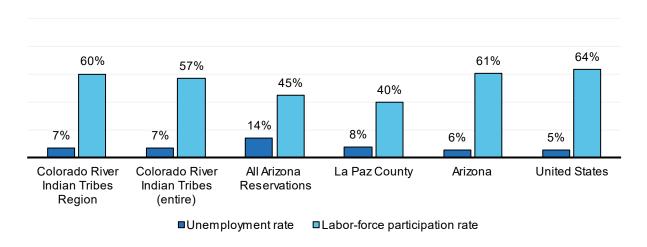
#### How the Colorado River Indian Tribes Region is faring

The unemployment rate is the proportion of the total number of people in the civilian labor force who are unemployed and looking for work. Unemployment rates do not include people who have dropped out of the labor force entirely, including those who wanted to work but could not find a suitable job and have stopped looking for employment. 145 The ACS estimates that the average unemployment rate for the Colorado River Indian Tribes Region between 2017 to 2022 was 7%,

ix Underemployment means that someone works fewer hours than they would like or is in a job that does not require the skills or training that they have.

- just higher than for Arizona as a whole (6%) and half that on all Arizona reservations (14%) (Figure 18 & Table 10).
- An additional metric of employment is the labor-force participation rate. This rate is the fraction of the population who are in the labor force, whether employed or unemployed. The labor force participation rate in the region (60%) was similar to Arizona as a whole (61%) and much higher than across all Arizona reservations (45%) and La Paz County (40%). This includes 56% of working-age teens and adults in the Colorado River Indian Tribes Region who were employed and 4% who were actively looking for work, while the remaining 40% were not in the labor force (which includes students, retirees, stay-at-home parents and others) (Figure 18 & Table 10).
- The vast majority (93%) of young children (birth to age 5) in the Colorado River Indian Tribes Region were living in a household where at least one parent is in the labor force, compared to 90% of young children statewide and only 62% across all Arizona reservations. Over two-thirds of young children in the region (69%) live in households where all resident parents are in the workforce, indicating they likely require some form of child care (Figure 19).

Figure 18. Unemployment and labor-force participation for the adult population (ages 16 and older), 2017-2021 ACS



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B23025

Note: The labor force is all persons who are working (employed) or looking for work (unemployed). Persons not in the labor force are mostly students, stay-at-home parents, retirees, and institutionalized people. The "labor force participation rate" is the fraction of the population who are in the labor force, whether employed or unemployed. The "unemployment rate" is the fraction of the civilian labor force which are unemployed.

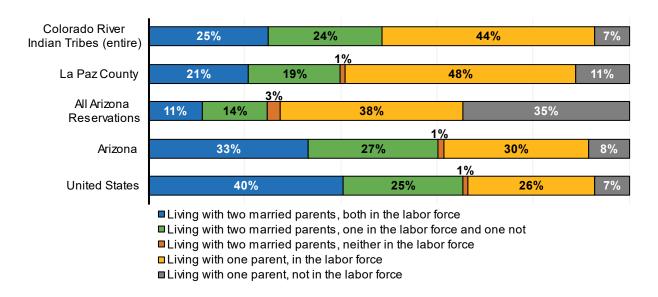
Table 10. Unemployment and labor-force participation for the adult population (ages 16 and older), 2017-2021 ACS

Geography	Estimated working-age population (age 16 and older)	Unemployment rate	Labor-force participation rate	In the labor force and employed	In the labor force but unemployed	In armed forces	Not in the labor force
Colorado River Indian Tribes Region	5,509	7%	60%	56%	4%	0.0%	40%
Colorado River Indian Tribes (entire)	6,769	7%	57%	53%	4%	0.0%	43%
All Arizona Reservations	132,731	14%	45%	39%	6%	0.0%	55%
La Paz County	14,368	8%	40%	37%	3%	0.0%	60%
Arizona	5,650,624	6%	61%	57%	3%	0.4%	39%
United States	264,087,642	5%	64%	60%	3%	0.5%	36%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B23025

Note: The labor force is all persons who are working (employed) or looking for work (unemployed). Persons not in the labor force are mostly students, stay-at-home parents, retirees, and institutionalized people. The "labor force participation rate" is the fraction of the population who are in the labor force, whether employed or unemployed. The "unemployment rate" is the fraction of the civilian labor force which are unemployed. The last four percentages in each row (employed, unemployed, in armed forces, and not in the labor force) should sum to 100% but may not because of rounding.

Figure 19. Parents of children birth to age 5 who are or are not in the labor force, 2017-2021 **ACS** 



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B23025

Note: The labor force is all persons who are working (employed) or looking for work (unemployed). Persons not in the labor force are mostly students, stay-at-home parents, retirees, and institutionalized people. The term "parent" here includes step-parents. The five percentages in each row should sum to 100%, but may not because of rounding. Please note that due to the way the ACS asks about family relationships, children living with two unmarried, cohabitating parents are not counted as living with two parents (these children are counted in the 'one parent' category).

#### Housing instability and internet access

Housing instability can have harmful effects on the development of young children. High housing costs relative to family income are associated with increased risk for overcrowding, frequent moving, poor nutrition, declines in mental health and homelessness. 146, 147, 148 High relative housing costs leave inadequate funds for other necessities, such as food and utilities. 149 This can negatively affect the physical, social-emotional and cognitive development of children, with severe forms of housing instability associated with poorer performance in school. 150, 151

In Native nations, land- and homeownership differs legally from other parts of the state. Native nations have experienced periods of forced relocation and assimilation as well as complex and changing policies of land ownership that have significantly reduced the total amount of land under tribal governance as well as the resources on these lands. 152 Tribal housing authorities have worked to build affordable housing options for their people, however housing availability is typically limited by funding and other critical infrastructure issues. 153 The most common housing challenges on tribal lands include overcrowding and physical housing problems such as insufficient kitchen, plumbing, electrical, heating and cooling utilities. 154 A nationwide study found that Native households are 19 times more likely to

lack indoor plumbing than White households, meaning that access to safe and reliable drinking water is a major concern for many families. 155

Another increasingly important utility in homes is reliable internet access. Access to broadband (high-speed) internet enables quick access to a far greater number of resources and information, telehealth options and other opportunities that can be critical for education and employment. Internet access has been deemed a "super determinant" of health because of its influence on more traditional social determinants of health such as education, employment, health care access and social connection. Household access to computers and high-speed internet is also important for school-aged children who may need this technology for school assignments and projects, particularly during the later years of primary education and beyond. Lack of access to reliable high-speed internet disproportionately occurs in rural areas and pockets of segregated urban areas, and this disparate access is known as the digital divide. Due to the importance of high-speed internet access, the federal government has instituted several funding initiatives to improve access to and affordability of high-speed internet, including for Native communities in particular, such as the Tribal Broadband Connectivity Project. Lack of access to a far greater number of resources and information, telehealth option, telehealth options and information, telehealth option and employment. Internet access has been deemed a "super determinant" of health because of its influence on more traditional social determinant on more traditio

### How the Colorado River Indian Tribes Region is faring

- Housing is considered to be affordable for families if it costs less than 30% of annual household income. 159 According to recent ACS estimates, only 16% of households in the Colorado River Indian Tribes Region spent more than 30% of their income on housing, disproportionately impacting renters (21%) over homeowners (12%) in the region. Housing cost burden is notably lower in the region compared to the state (29%) but higher than that seen in all Arizona reservations (13%) (Table 11).
- The McKinney-Vento Act definition of homelessness includes children living in shelters, transitional housing, campgrounds, motels, trailer parks and cars, as well as children whose families are temporarily living within another family's household. The percent of students experiencing homelessness by this definition in Parker Unified School District, La Paz County schools, and all Arizona schools remained below 2% from 2019-20 to 2021-22 (Table 12).
- Almost three-quarters (74%) of households in the Colorado River Indian Tribes Region had both a computer (i.e., a desktop, laptop, tablet or smartphone) and broadband internet connectivity. This proportion is 14% lower than for households in Arizona overall (88%) but 30% higher than for households in all Arizona reservations (44%) (Table 13).
- At the individual level, 77% of individuals in the Colorado River Indian Tribes Region had access to both a computer and internet in their household. Access was slightly higher for children birth to age 17 (80%), but this was still 12% lower than statewide (92%) (Figure 20 & Figure 21).

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x For more information, please see <a href="https://internetforall.gov/program/digital-equity-act-programs">https://www.ntia.gov/page/tribal-broadband-connectivity-program</a>

Table 11. Households with housing costs of 30% or more of household income by home ownership status, 2017-2021 ACS

Geography	Estimated number of households	Housing costs 30 percent or more of household income	Estimated number of owner- occupied housing units	Housing costs 30 percent or more of household income	Estimated number of renter- occupied housing units	Housing costs 30 percent or more of household income
Colorado River Indian Tribes Region	2,999	16%	1,746	12%	1,253	21%
Colorado River Indian Tribes (entire)	3,710	17%	2,356	14%	1,354	20%
All Arizona Reservations	52,248	13%	35,840	12%	16,408	16%
La Paz County	8,678	22%	6,230	21%	2,448	24%
Arizona	2,683,557	29%	1,765,658	21%	917,899	45%
United States	124,010,992	30%	80,152,161	22%	43,858,831	46%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B25106

Table 12. Students experiencing homelessness (McKinney-Vento), 2019-20 to 2021-22

Geography	Number of	students ex hom	periencing elessness	Percent of students who were experiencing homelessness		
	2019-20	2020-21	2021-22	2019-20	2020-21	2021-22
Parker Unified School District	<11	<11	<11	<2%	<2%	<2%
La Paz County schools	12	17	<11	<2%	<2%	<2%
Arizona Schools	12,931	8,542	11,161	<2%	<2%	<2%

Source: Arizona Department of Education (2023). [Oct 1 Enrollment Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

Note: The McKinney-Vento Act provides funding and supports to ensure that homeless children and youth have access to education. Under the McKinney-Vento Act, children are defined as homeless if they lack a "fixed, regular, and adequate nighttime address." This includes children living in shelters, cars, transitional housing, campgrounds, motels and trailer parks, as well as children who are living 'doubled up' with another family due to loss of housing or economic hardship. More information can be found on the ADE website: <a href="https://www.azed.gov/homeless">https://www.azed.gov/homeless</a>

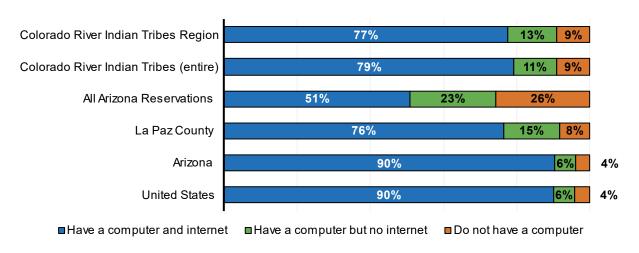
Table 13. Households with a computer and broadband internet connectivity, 2017-2021 ACS

Geography	Estimated number of households		seholds with a computer and padband internet connectivity
Colorado River Indian Tribes Region	2,999	2,208	74%
Colorado River Indian Tribes (entire)	3,710	2,814	76%
All Arizona Reservations	52,248	22,993	44%
La Paz County	8,678	6,130	71%
Arizona	2,683,557	2,350,265	88%
United States	124,010,992	106,957,995	86%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B28008.

Note: In this table, "computer" includes desktops, laptops, tablets and smartphones.

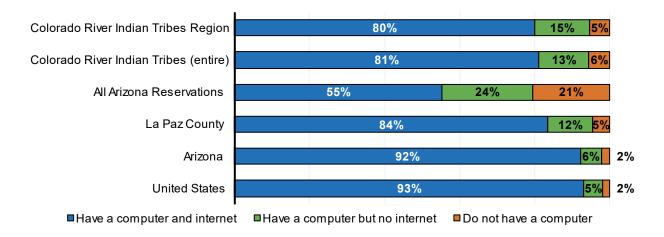
Figure 20. Persons of all ages in households with and without computers and internet connectivity, 2017-2021 ACS



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B28005

Note: The three percentages in each bar should sum to 100%, but may not because of rounding.

Figure 21. Children birth to age 17 in households with and without computers and internet connectivity, 2017-2021 ACS



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B28005

Note: The three percentages in each bar should sum to 100%, but may not because of rounding.

Additional data tables related to Economic Circumstances can be found in Appendix 1 of this report.



**EDUCATIONAL INDICATORS** 

# **EDUCATIONAL INDICATORS**

## **Why it Matters**

A community's K-12 education system can support positive outcomes for children, families and the overall well-being of the community. Individuals who have higher levels of education tend to live longer and healthier lives. 160 Graduating from high school, in particular, is associated with better health, financial stability and socio-emotional outcomes as well as a lower risk for incarceration compared to dropping out of high school. 161, 162 Children with parents that have attained higher levels of education are more likely to do well in school, such as score higher in reading, math and science in their first four years of school and attain higher levels of education themselves. 163, 164, 165 High-quality early learning experiences also set a strong foundation for children's learning in kindergarten, elementary school and beyond. 166 When children participate in high-quality early education, they are more likely to perform better in reading and math in later grades. 167 Given these lifetime and intergenerational impacts of educational attainment, it is critical to provide substantial support for early education and promote policies and programs that encourage the success of Arizona's children.

## What the Data Tell Us

#### School attendance and absenteeism

School attendance is an important factor in predicting the academic performance and future health of children. Chronic absenteeism, defined as missing 10% of school days in a school year, predicts a student experiencing academic difficulties and even dropping out of school entirely. 168 Children who are part of a racial or ethnic minority group, have disabilities or other health conditions or are economically disadvantaged are at increased risk of absenteeism. <sup>169, 170</sup> These are also the children who are most likely to benefit from resources available through schools. Elementary school absenteeism among Native youth, in particular, may be influenced by a number of factors including a historically-rooted distrust of educational institutions, low use of culturally-relevant teaching methods and curricula as well as infrastructure-related issues (e.g., road conditions, bus availability and distances to schools). 171, 172, 173

#### How the Colorado River Indian Tribes Region is faring

- The Colorado River Indian Tribes Region includes the Parker Unified School District and a small corner of Quartzsite School District. Parker Unified School District has three elementary schools: Blake Primary School (serving preschool through second grade), Wallace Elementary School (serving third through fifth grade) and Le Pera Elementary School (serving kindergarten through eighth grade). 174
- In the 2021-22 school year, there were 619 students enrolled in preschool through third grade in the Parker Unified School District. While only 32 students were enrolled in public preschools, enrollment in kindergarten was notably higher with 142 students (Table 14).

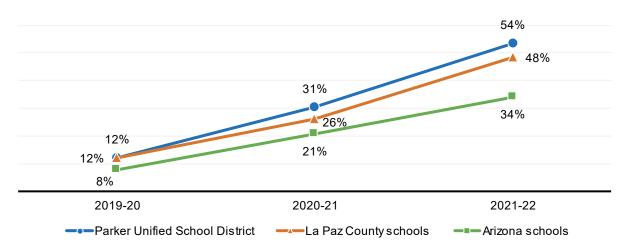
• Between 2019-20 and 2021-22, kindergarten through 3rd grade chronic absence rates across all schools in Arizona more than quadrupled, from 8% in 2019-20 to 34% in 2021-22. Chronic absence rates followed similar patterns in Parker Unified School District and La Paz County schools, increasing from the baseline-elevated 12% to 54% and 48%, respectively (Figure 22). This means that more than half of early elementary students in the region missed more than 10% of the school days in 2021-22.

Table 14. Preschool to 3rd grade students enrolled in public and charter schools, 2021-22

Geography	Preschool	Kindergarten	1st Grade	2nd Grade	3rd Grade
Parker Unified School District	32	142	140	155	150
La Paz County schools	50	184	174	202	188
Arizona schools (American Indian students only)	541	2,924	3,042	3,130	3,221
Arizona schools	17,840	79,423	79,202	82,342	82,243

Source: Arizona Department of Education (2023). [Oct 1 Enrollment Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

Figure 22. Kindergarten to 3rd grade students with chronic absences, 2019-20 to 2021-22



Source: Arizona Department of Education (2023). [Absenteeism Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

Note: Students are considered chronically absent if they miss more than 10% of the school days in a school year. This table includes children who are absent due to chronic illness. Data in this table are for students of all races and ethnicities. The off-reservation schools with enrolled K-3rd graders were Miller Elementary School (in Tucson Unified School District), EC Nash School (in Amphitheatre Unified School District) and Summit View Elementary and Santa Clara Elementary schools (in Sunnyside Unified School District).

## Achievement on standardized testing

All Arizona public schools, including both district and charter schools, are required to administer state and federally mandated standardized tests. Between 2019 and 2022, the statewide English Language Arts (ELA) and Math assessment tool for 3<sup>rd</sup> through 8<sup>th</sup> graders in public schools was Arizona's Statewide Achievement Assessment for English Language Arts and Math (AzM2), previously called Arizona's Measurement of Educational Readiness to Inform Teaching (AzMERIT). xi,175,176 The Move on When Reading policy, enacted by the Arizona legislature in 2010, states that a 3<sup>rd</sup> grade student shall not be promoted to 4<sup>th</sup> grade if their reading score falls far below the 3<sup>rd</sup> grade level, as established by the State Board of Education. xii, 177 These policies are intended to help identify struggling readers who may benefit from more targeted literacy interventions. Children's reading comprehension and proficiency skills when in the 3<sup>rd</sup> grade can predict their future academic success, such as their likelihood of graduating high school and attending college. <sup>178</sup> Poor reading skills are associated with a six-fold increase in the likelihood of dropping out of high school compared to proficient readers. 179 However, it is important to note that standardized tests have been found to have lower cultural relevancy to non-White students, which has contributed to a disparity in achievement on standardized tests across racial and ethnic groups. 180

## How the Colorado River Indian Tribes Region is faring

- In the 2021-22 school year, only 23% of students in Parker Unified School District achieved a passing score on the 3rd grade English Language Arts (ELA) assessment, including 16% meeting expectations and 7% exceeding expectations. This is lower than a passing rate of 41% across all Arizona schools. Notably, almost half of all third-graders in Arizona schools (47%) and twothirds in Parker Unified School District schools (67%) fell far below expectations on the ELA assessment that school year (Table 15).
- Looking across recent years, ELA passing rates in Parker Unified School District have trended differently from Arizona schools as a whole. In 2018-19, the last year of the AzMERIT assessment, passing rates were 7% lower in Parker Unified School District (39%) than all Arizona schools (46%). In 2020-21, the first year of the AZM2 assessment, ELA passing rates in Parker Unified School District exceeded all Arizona schools (40% and 35%, respectively). While

xi In 2022, AzM2 was replaced by Arizona's Academic Standards Assessment (AASA).

 $x^{ii}$  Exceptions exist for students identified with or being evaluated for learning disabilities or reading impairments, English Language Learners and those who have demonstrated reading proficiency on alternate forms of assessment approved by the State Board of Education. Students who test in the 'far below' proficiency range can also be promoted to 4th grade if they complete summer school and then demonstrate reading at a proficient level. Given these exceptions, historically very few 3<sup>rd</sup> grade students (<1%) have been retained due to Move on When Reading, As of 2022, schools with early elementary grade students are now required to screen all kindergarten and first grade students for dyslexia and have at least one teacher who has complete ADE-approved trainings in reading instruction, intensifying instruction and understanding and recognizing dyslexia.

- passing rates then began rebounding to pre-pandemic levels across Arizona in 2021-22 (41%), they plummeted to 23% in the region. In La Paz County schools, passing rates on the ELA assessment declined from 36% in 2018-19 to 24% in 2021-22 (Figure 23).
- Compared to ELA passing rates, 10% more students in Parker Unified School District schools passed the 3rd grade Math assessment in 2021-22 (33%). This is lower than the passing rates for all students in Arizona schools (40%) but more than twice that for American Indian 3<sup>rd</sup> graders across the state (16%) (Table 16).
- Math passing rates in Parker Unified School District followed similar trends to ELA passing rates from 2018-19 to 2021-22. In 2018-19, half of 3rd graders in Parker Unified School District schools passed the Math assessment (50%), close to the passing rate across Arizona (51%). Passing rates then decreased to 39% in 2020-21, then 33% in 2021-22. Math passing rates in La Paz County schools also decreased over these years from a high of 45% in 2018-19 to a low of 30% in 2021-22 (Figure 24).

Table 15. Assessment results: Third Grade English Language Arts, 2021-22

Geography Parker Unified School District	Students Tested		Approaches	Meets	Exceeds 7%	Passing 23%
La Paz County schools	DS	66%	10%	18%	6%	24%
Arizona schools (American Indian students only)	3,100	74%	10%	13%	3%	16%
Arizona schools	79,586	47%	12%	26%	15%	41%

Source: Arizona Department of Education (2023). [AZMERIT Dataset]. Custom tabulation of unpublished data by the UArizona CRED

Note: Data on the number of students tested are suppressed (shown as "DS") in Parker USD and La Paz County in order to protect student privacy.

Table 16. Trends in passing rates for Third Grade English Language Arts Assessments, 2018-19 to 2021-22

Coorrephy	Percent of 3rd grade students passing Math assessment			
Geography	2018-19	2019-20	2020-21	2021-22
Parker Unified School District schools	39%	N/A	40%	23%
La Paz County schools	36%	N/A	25%	24%
Arizona schools (American Indian students only)	22%	N/A	12%	16%
Arizona schools	46%	N/A	35%	41%

Source: Arizona Department of Education (2023). [AZMERIT Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

Table 17. Assessment results: Third Grade Math, 2021-22

Geography	Students Tested	Falls Far Below	Approaches	Meets	Exceeds	Passing
Parker Unified School District schools	DS	35%	32%	23%	11%	33%
La Paz County schools	DS	37%	33%	22%	8%	30%
Arizona schools (American Indian students only)	3,100	57%	27%	13%	3%	16%
Arizona schools	80,445	33%	27%	28%	12%	40%

Source: Arizona Department of Education (2023). [AZMERIT Dataset]. Custom tabulation of unpublished data by the UArizona CRED

Note: Data on the number of students tested are suppressed (shown as "DS") in Parker USD and La Paz County in order to protect student privacy.

Table 18. Trends in passing rates for Third Grade Math, 2018-19 to 2021-22

Geography	Percent of 3rd grade students passing Math assessment			
	2018-19	2019-20	2020-21	2021-22
Parker Unified School District schools	50%	N/A	39%	33%
La Paz County schools	45%	N/A	32%	30%
Arizona schools (American Indian students only)	27%	N/A	12%	16%
Arizona schools	51%	N/A	36%	40%

Source: Arizona Department of Education (2023). [AZMERIT Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

#### Graduation rates and adult educational attainment

Understanding the current high school graduation and dropout rates within a region provides insight into the assets within and challenges faced by a community and its future workforce. Adults who graduated from high school have higher rates of employment, higher incomes and better overall health compared to adults who dropped out of high school, even if they received a high school equivalency degree (GED). 181 Maternal education is associated with an array of child outcomes starting with infant health, <sup>182, 183, 184</sup> and both targeted and universal programs serving children from families with lower educational backgrounds can support child development. 185, 186

In contrast to the U.S. as a whole, Arizona has a larger proportion of disconnected youth, defined as teenagers ages 16 to 19 who are neither attending school nor employed, xiii which has been linked to negative physical and mental health outcomes and higher rates of unemployment. 187 Native youth, both nationally and in Arizona, are disproportionately disconnected and therefore particularly vulnerable to negative outcomes and may need additional outreach and supports. 188

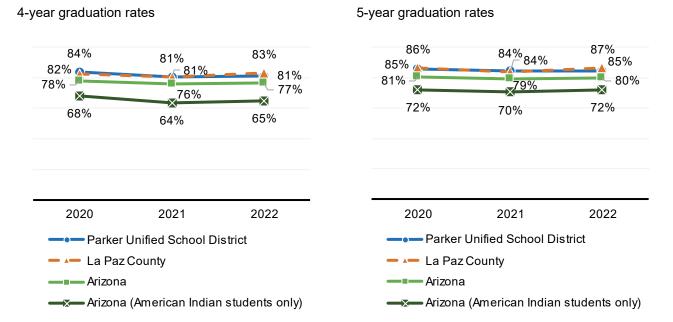
## How the Colorado River Indian Tribes Region is faring

 From 2020 to 2022, both four- and five-year graduation rates in Parker Unified School District schools, which closely followed La Paz County schools, were consistently higher than statewide (Figure 25). In 2022, 81% of Parker Unified School District students graduated in four years, compared to 83% in La Paz County schools and 77% statewide, while 85% of students graduated within five years, compared to 87% in La Paz County schools and 80% statewide (Figure 25 & Table 17).

xiii Age ranges used for 'disconnected youth' vary by source, with some estimates including both teenagers ages 16-19 and young adults ages 20-24 and others focusing on only teenagers or young adults.

- In Parker Unified School District schools, dropout rates for 7<sup>th</sup> to 12<sup>th</sup> grade students tripled from 2% in 2019-20 to 6% in 2021-22. This is similar to the increases seen in La Paz County schools (+3%) and Arizona schools (+2%) (Table 18).
- Among adults in the Colorado River Indian Tribes Region, 80% had at least a high school education. This was higher than across all Arizona reservations (77%) but lower than statewide (88%). Educational attainment looks similar between the Colorado River Indian Tribes Region, Colorado River Indian Tribes reservation, all Arizona reservations and La Paz County. The largest differences between these areas and statewide educational attainment were a larger proportion with a high-school degree or less (50-59% compared to 35% statewide) and a smaller proportion with a bachelor's degree or higher (9-12% compared to 31% statewide) (Figure 26).
- Compared to all adults, mothers giving birth in 2019 to 2022 in the region were more likely to have less than a high school education (23% compared with 20% of all adults) or a high school diploma as their highest degree (45% compared with 34%) (Table 19 & Figure 26).

Figure 23. Trends in 4-year and 5-year graduation rates, 2020 to 2022



Source: Arizona Department of Education (2023). [Graduation Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

Table 19. 4-year and 5-year graduation rates, 2022

Geography	4-Year senior cohort (2022)	4-Year graduates (2022)	4-Year graduation rate (2022)	5-Year graduates (2022)	5-Year graduation rate (2022)
Parker Unified School District	139	113	81%	120	85%
La Paz County schools	168	140	83%	147	87%
Arizona schools (American Indian students only)	4,213	2,739	65%	3,040	72%
Arizona schools	90,880	69,623	77%	71,277	79%

Source: Arizona Department of Education (2023). [Oct 1 Enrollment Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

Note: 2022 5-year graduation rates had yet to be released at the time that ADE data were accessed for this report. The 4-year graduation rate reflects the percentage of students who graduated high school within 4 years of entry; the 5-year graduation rate reflects the percentage of students who graduated high school within five years of entry. See https://www.azed.gov/sites/default/files/2017/08/2018%2006%2001%20Graduation%20DO%20and%20Persistence%20Rate%20Tech %20Manual.pdf?id=598a34233217e10ce06647ff

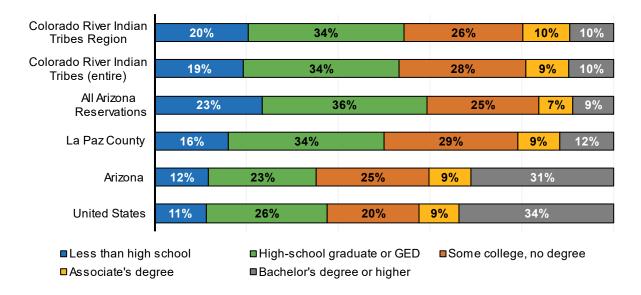
Table 20. 7th to 12th grade dropout rates, 2019-20 to 2021-22

Geography	Dropout Rate, 2019-20	Dropout Rate, 2020-21	Dropout Rate, 2021-22
Parker Unified School District	2%	5%	6%
La Paz County schools	3%	5%	6%
Arizona schools (American Indian students only)	5%	10%	9%
Arizona schools	3%	4%	5%

Source: Arizona Department of Education (2021). [Dropout Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

Notes: Dropout rates for American Indian students alone in off-reservation schools were not available for 2019-20 (the dropout rate for students of all races and ethnicities in these schools was 3%). Dropouts are defined by ADE as students who were enrolled in school at any time during the school year but were not enrolled at the end of the year and who did not transfer to another school, graduate, or die. Dropout rates are calculated by dividing the number of dropouts by the total enrollment. In many elementary districts, dropout rates reflect students who transferred out and were lost to follow-up.

Figure 24. Level of education for the adult population (ages 25 and older), 2017-2021 ACS



Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B15002

Note: The five percentages in each bar should sum to 100% but may not because of rounding.

Table 21. Level of education for the mothers of babies born in 2020 and 2021

Geography	Calendar year	Number of births	Mother had less than a high-school education	Mother finished high school or had GED	Mother had more than a high-school education
	2020	100	22 to 26%	49%	25 to 29%
Colorado River Indian Tribes	2021	103	23 to 27%	39%	34 to 38%
Region	2019-2022 combined	439	23%	45%	31%
All Arizona	2020	1,900	27%	38%	35%
Reservations	2021	Di	ata for All Arizona Res	servations not availab	le
	2020	154	29 to 31%	42%	27 to 30%
La Paz County	2021	165	25 to 28%	39%	33 to 36%
Avizana	2020	76,781	12%	27%	57%
Arizona	2021	77,857	12%	27%	58%

Source: Arizona Department of Health Services (2023). [Vital Statistics Births dataset]. Unpublished data. Arizona Department of Health Services (2022). Health status profile of American Indians in Arizona 2020. Retrieved from https://pub.azdhs.gov/healthstats/report/hspam/index.php

Note: Mothers of twins are counted twice in this table. 'All Arizona Reservations' row reflects only births to American Indian mothers residing on Arizona reservations. The Health Status Profile of American Indian in Arizona for 2021 has not yet been released. A small number of births are missing data on maternal educational attainment, so percentages in this table may not sum to 100%.

Additional data tables related to *Educational Indicators* can be found in Appendix 1 of this report.



**EARLY LEARNING** 

# **EARLY LEARNING**

# **Why it Matters**

Early childhood is a pivotal time when crucial physical, cognitive and social-emotional skills are built. 189,190 Early experiences are important for healthy brain development and set the stage for lifelong learning and well-being. 191, 192, 193 Just as rich, stimulating environments can promote healthy development, early negative experiences can also have lasting effects. 194, 195 However, considering the major COVID-19 pandemic-related challenges experienced by many Arizona families, including disproportionate numbers of deaths and losses of family member and caregivers in American Indian and Alaska Native communities, <sup>196</sup> it remains important to remember that while these short- and long-term effects may be more likely, they are not inevitable. 197, 198 Access to quality early care and learning environments can be a powerful protective factor for every child, and the effects can be particularly lifechanging for children facing chronic stressors and for children with disabilities. 199, 200

Quality early care and educational experiences help children develop into capable learners by supporting many crucial systems in the body. 201 In addition to brain development, positive and adverse experiences in the first few years of life can shape a child's immune functioning, ability to handle stress in a healthy way and capacity to learn and thrive. 202 Each of these factors contribute to being a skillful learner and well-adjusted person.<sup>203</sup>

## What the Data Tell Us

#### Access to early care and education

Early childhood systems play a key role in supporting children, parents, caregivers and communities as a whole. 204, 205 In Native nations, early care and education services are provided at center-based, homebased and school-based settings that are funded through a combination of tribal, state and federal grants in addition to privately-owned and operated child care facilities.<sup>206</sup> Unfortunately, many Arizona families, both Native and non-Native, continue to face obstacles when seeking quality early care and education. Communities in both urban and rural areas of Arizona face a gap between the number of young children and licensed child care slots. <sup>207, 208, 209, 210</sup> According to the Center for American Progress, almost half of Arizonans (48%), including the majority of rural, low-income and Hispanic or Latino families, live in a "child care desert," defined as areas where there are three times as many children as there are available child care opportunities. 211, 212

Analyses by the Bipartisan Policy Center indicate that Arizona needed an additional 76,740 licensed or registered early care and education slots to have enough for all young children in working families in 2019.<sup>213</sup> Because the COVID-19 pandemic forced many child care centers and home-based providers to close either temporarily or permanently, care has been disrupted for many more families in Arizona and nationwide. 214

Availability and cost are especially challenging for parents seeking care for infants and young children in Arizona. For example, a family with one infant and one preschooler can expect to pay about \$1,670 per month for a licensed child care provider. This monthly cost exceeds what many Arizonans pay per month for housing, creating potential financial challenges that are further compounded for families with multiple children under the age of 6. xiv, 215, 216 The Arizona Department of Economic Security (DES) provides child care assistance to financially eligible families, including specific funding for families involved with the Arizona Department of Child Safety (DCS). 217 However, families that are eligible to receive funding may not have access to child care services in their community that are licensed or that accept assistance payments, leaving them unable to utilize the funding. 218, 219

### How the Colorado River Indian Tribes Region is faring

- Early care and education opportunities in the region include the Colorado River Indian Tribes Head Start, Blake Primary School's preschool program and the Early Learning Academy. According to community members, the Sonshine Center and Ms. Buni's Gingerbread House both closed in recent years. In 2020, the Colorado River Indian Tribes Regional Partnership Council and Colorado River Indian Tribes collaborated to establish the Early Learning Academy in Parker, which initially provided care as an Arizona Enrichment Center to provide care and scholarships to families of essential service providers during the COVID-19 pandemic. In addition to center-based care, key informants consulted in prior Regional Needs and Assets Reports have noted that families in the region often rely on informal care arrangements through friends and family members. 220, 221
- The National Data System for Child Care indicates that the three early care and education centers in the region had the combined capacity to serve 320 students, or approximately 46% of the region's young children based on Census estimates. However, early care options were much more limited compared to Census population estimates for children birth to age 2 (n=317) for infants (ratio of 1 slot per 11.3 infants) and toddlers (ratio of 1 slot per 6.6 toddlers). 222 This is because only the Early Learning Academy had licensed capacity for infants (n=8) and toddlers (n=16) (Table 20 & Table 39).
- The Colorado River Indian Tribes Head Start has 183 funded slots. Cumulative enrollment in the program has steeply declined in recent years, from 191 in 2019 to 99 in 2023 (-48%). The bulk of the decline in enrollment can be seen in the number of enrolled 3-year-olds, which decreased by 88% over these four years (Table 21). Community members indicated that this was due to following tribal protocols regarding the number of children able to attend in-person in a group

xiv In addition to the financial challenges faced by parents paying for child care, the early care and education workforce is one of the most underpaid fields in the country. Nationally, educators working with infants and toddlers are 7.7 times more likely to live in poverty compared to K-8 teachers. The median hourly wage for a child care worker in Arizona (\$11.97) is \$13.19 less per hour than what is considered a living wage for a single parent with 1 child (\$25.16). For more information on early care and education workforce wages visit https://cscce.berkeley.edu/workforce-index-2020/the-early-educator-workforce/early-educator-pay-economic-insecurity-across-thestates/

EARLY LEARNING 75

- setting as well as difficulty finding qualified staff. Additionally, the Colorado River Indian Tribes recently broke ground on a new Head Start site, estimated to be completed by August 2025, which will enroll up to 500 students.
- In La Paz County, the median monthly cost of center-based early care and education has been lower than statewide. Costs are highest for infants (\$788 in La Paz County, \$949 in Arizona), followed by 1- to 2-year-olds (\$714 and \$826, respectively) and 3- to 5-year-olds (\$651 and \$727, respectively). From 2018 to 2022, monthly child care costs at licensed centers increased by one-quarter for infants (+25%) and almost as much for 1- to 2-year-olds (+21%) and 3- to 5year-olds (+24%) (Figure 26).
- In 2022, full-time center-based child care for an infant cost 18% of the median family income in the Colorado River Indian Tribes Region. This percentage drops slightly for a 1- to 2-year-old (16%) and a 3- to 5-year-old (15%). As a percentage of median income, the cost of care is 3% higher in the region than across the state (Figure 28).
- Assistance from the Arizona Department of Economic Security (DES) can help families manage the cost burden of child care. Patterns in the number of children eligible for and receiving assistance have changed in recent years. The number of children eligible for assistance increased from 12 in 2017 to a peak of 48 in 2021 before decreasing again to 25 in 2022. From 2017 to 2019, the number of children on the waitlist (between 1-9 and 12) exceeded the number of children receiving assistance (between 1-9 and 11) each year. Due to increased Child Care and Development Fund (CCDF) funding during the COVID-19 pandemic, the assistance waitlist was suspended in 2020,<sup>223</sup> and the number of children receiving assistance in the region jumped to a high of 25 (100% of eligible children). However, only 44% of eligible children in 2021 and 60% in 2022 were receiving assistance (Figure 29).

Table 22. Number and Capacity of Early Care & Education Providers active in the National Data System for Child Care, May 2023

	Total ECE	E Providers	viders Child care centers		Family child care providers		Nannies or individual providers	
Geography Colorado River Indian Tribes Region	Number 3	Capacity 320	Number 3	Capacity 320	Number 0	Capacity 0	Number 0	Capacity 0
La Paz County	6	385	6	385	0	0	0	0
Arizona	2,454	211,860	1,933	208,407	516	3,435	5	18

Source: Arizona Department of Economic Security (2023). [Child Care Administration dataset]. Unpublished data.

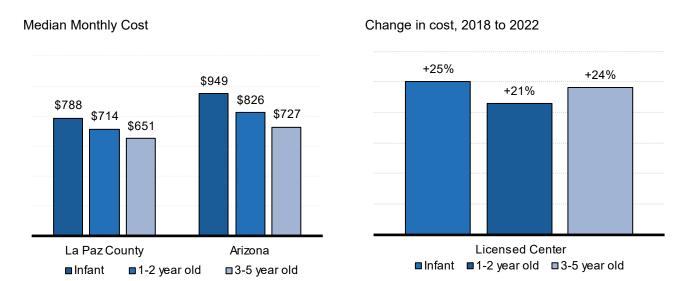
Note: Early care and education providers in the region include Colorado River Indian Tribes Head Start, Blake Primary School's preschool program, and Early Learning Academy.

Table 23. Funded and cumulative enrollment in Colorado River Indian Tribes Head Start, fiscal years 2019, 2021 & 2023

	FY 2019	FY 2021	FY 2023
Funded Slots	183	183	183
Cumulative Enrollment	191	147	99
Enrolled children age 3	90	67	11
Enrolled children age 4	101	80	77

Source: Office of Head Start (2023). 2023 Program Information Report, 2021 Program Information Report & 2019 Program Information Report. Retrieved on Dec 1, 2023 from https://hses.ohs.acf.hhs.gov

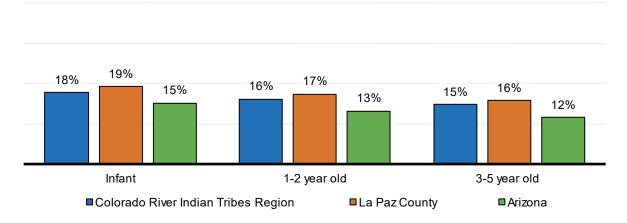
Figure 25. Median monthly charge for full-time center-based child care, 2022, and increase in cost of care from 2018 to 2022



Source: Health Management Associates (2022). 2022 Child Care Market Rate Survey. Arizona Department of Economic Security. Retrieved from https://des.az.gov/sites/default/files/media/2022-Market-Rate-Survey.pdf?time=1670616239540

Note: Median monthly charges are calculated by multiplying the daily median cost of care by 21 to approximate a full month of care.

Figure 26. Cost of center-based child care as a percentage of income, 2022



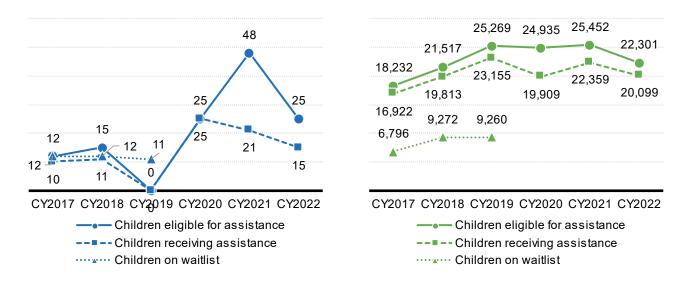
Source: Sources: Health Management Associates (2022). 2022 Child Care Market Rate Survey. Arizona Department of Economic Security. Retrieved from https://des.az.gov/sites/default/files/media/2022-Market-Rate-Survey.pdf?time=1670616239540 & U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B19126.

Note: Annual child care costs are calculated by multiplying the daily median cost of care by 252 to approximate a full year of care. Calculations for the Colorado River Indian Tribes Region compare the median cost of care in La Paz County to the median family income for families with children under age 18 in the Colorado River Indian Tribes Region.

Figure 27. Children receiving DES child care assistance, 2017 to 2022

Colorado River Indian Tribes Region

Arizona



Source: Arizona Department of Economic Security (2023). [Child Care Administration dataset]. Unpublished data.

## High quality early care and education

Children who begin their education in high-quality preschool programs tend to repeat grades less frequently, obtain higher scores on standardized tests, experience fewer behavior problems and are more likely to graduate from high school.<sup>224</sup> This provides a return on investment to society through increased educational achievement and employment, reductions in crime and better overall health of children as they mature into adults. <sup>225, 226</sup> The key ingredients in positive early experiences include responsive relationships, core adaptive skills development, reduced sources of stress and appropriate nutrition – all things that quality early care and education are in a unique position to provide at the critical time to encourage optimal learning and well-being for years to come.<sup>227</sup> Early care and education shapes far more than a child's future academic achievement, and an investment in early childhood can be one of the most productive investments a community can make. <sup>228</sup>

One way that the quality of early child care and education is measured in Arizona is through the Quality First program.<sup>229</sup> The Quality First program rates the quality of child care providers and preschools on a scale of one to five stars, with providers considered high quality when they have received a three-star rating or higher. Quality First also offers training and funding for participating schools and providers to improve their services.<sup>230</sup> Quality First providers are supported by regional funding.

### How the Colorado River Indian Tribes Region is faring

- As of 2023, the Colorado River Indian Tribes Head Start program and the Early Learning Academy were participating in Quality First in the Colorado River Indian Tribes Region (Table 23).
- Both of these programs received a 3-star rating in 2023, indicating they meet quality standards. Of the 703 young children in the region according to the 2020 Census (see Table 1), 151 were enrolled in a high-quality early care and learning environment (21%) (Table 24 & Figure 30).

Table 24. Quality First child care providers by funding source, state fiscal year 2023

Geography Colorado River Indian Tribes Region	Child care providers served	Regional Funding	DES Expansion	Buy-In 0		
La Paz County	County data not available					
Arizona	1,434	1,045	384	5		

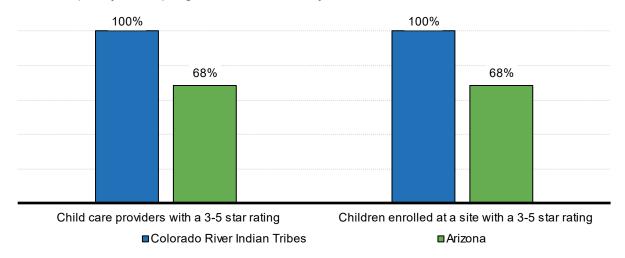
Source: First Things First (2023). Quality First Summary Data. Unpublished data.

Table 25. Children served by Quality First child care providers, state fiscal year 2023

Geography	Children enrolled at a Quality First provider site	Children enrolled at a Quality First provider site with a star rating	Children enrolled at a Quality First provider site with a 3-5 star rating	% of Children in a Quality- Level Setting (3-5 Stars)	Children served by Quality First Scholarships			
Colorado River Indian Tribes Region	151	151	151	100%	0			
La Paz County	County data not available							
Arizona	70,837	54,155	48,379	68%	8,262			

Source: First Things First (2023). Quality First Summary Data. Unpublished data.

Figure 28. Percent of Quality First programs with a 3-5 star-rating and percent of children enrolled in quality-level programs, state fiscal year 2023



Source: First Things First (2023). Quality First Summary Data. Unpublished data.

Note: Quality First considers providers with a 3-star rating and above to be 'quality level.' Percents are of total Quality First providers and children enrolled in Quality First sites.

## Young children with special needs

Timely intervention can improve the language, cognitive and socio-emotional developmental outcomes of young children who have, or are at risk for, developmental delays. 231, 232, 233 Early intervention also reduces educational costs by decreasing the need for special education.<sup>234</sup> Ensuring that children have access to timely and adequate screening and intervention services from birth to age 5 can be key for preparing children for kindergarten.

In Arizona, the Arizona Early Intervention Program (AzEIP), xv the Division of Developmental Disabilities (DDD)<sup>xvi</sup> and the Arizona Department of Education Early Childhood Special Education Program are designed to provide services to families with children who have special needs. xvii AzEIP is a division of DES that provides early intervention and a variety of supportive services to Arizona children birth to age 2 with disabilities and their families. 235 The goal of these services is to improve the learning and development of children and inform their family members of how they can best support their child.<sup>236</sup> DDD is a division of DES that provides supportive services to people of all ages with a

xv For more information on AzEIP (which is a division of the Department of Economic Security), visit https://www.azdes.gov/azeip/

xvi For more information on DDD (which is a division of the Department of Economic Security), visit https://des.az.gov/services/disabilities/developmental-disabilities

xvii For more information on ADE's Early Childhood Special Education program, visit http://www.azed.gov/ece/early-childhood-specialeducation/ and http://www.azed.gov/special-education/az-find/

qualifying developmental disability, including cerebral palsy, autism spectrum disorder, down syndrome, epilepsy and cognitive disabilities.<sup>237</sup> Children under the age of 6 that have been assessed by AzEIP to have a qualifying disability may also receive DDD services. At age 3, children with special needs transition from AzEIP services to their local education agency (LEA), usually a school district. Each Arizona school district is mandated to participate in Child Find<sup>xviii</sup> and to provide preschool services to children with special needs either through their own schools or through agreements with other programs such as Head Start.

The availability of early learning opportunities and services for young children with special needs is an ongoing concern across the state, particularly in the more geographically remote communities and tribal nations. According to national research, insufficient funding and staffing of these programs are the greatest obstacles to identifying and providing resources for all children who would benefit from early intervention, and Arizona already falls in the bottom 10 states in the nation for early intervention service provision. <sup>238</sup> Fewer children in Arizona are accessing critical early intervention services that can identify disabilities, provide parent-coaching and encourage optimal development at home. <sup>239</sup> This matters because, while early education discussions often center around pre-kindergarten for 4-year-olds, research continues to point to the impact of experiences during the first 3 years of life as being just as crucial for healthy brain and body development.<sup>240</sup> Positively, Arizona has taken steps toward improving funding for early intervention, including being 1 of 10 states to cross-reference Medicaid and Early Intervention data to maximize federal Medicaid matching of funds.<sup>241</sup>

### How the Colorado River Indian Tribes Region is faring

- The AzEIP provider for the Colorado River Indian Tribes Region is A to Z Therapies. <sup>242</sup> In 2022, there were 12 children birth to age 2 in the region receiving services from AzEIP (Table 25).
- The sources of referrals to AzEIP in the region changed between federal fiscal years (FFY) 2019 and 2022. In FFY 2019, the largest referral source was "other," which can include early care providers, child welfare, family friends and others. In FFY 2020 (31%) and FFY 2022 (16%), substantial proportions of referrals were made by public health and social service agencies. In FFY 2021 and FFY 2022, the proportion of referrals made by physicians increased to over half (63% and 56%, respectively). Compared to the state, there are very few self-referrals by parents or family members of the child; only 8% of referrals originated with parents or family members in FFY 2022 in the region compared to 21% statewide (Figure 31).
- In the region, 28% of children (birth to age 2) who were referred to AzEIP in federal fiscal year 2022 were found eligible and received services, higher than in Arizona overall (21%). A much smaller share of assessed children were found not eligible (4%) compared to the state (22%).

xviii The Arizona Child Find program is a component of the Individuals with Disabilities Education Act (IDEA) that requires states to identify and evaluate all children with disabilities (birth through age 21) to attempt to ensure that they receive the supports and services they need.

About one-third (32%) of children in the region referred to AzEIP were either in families where a service coordinator could not make contact (24%) or where families did not proceed with screening for eligibility (8%); it was less common in the region for families to not proceed with screening than in the state as a whole (14%) (Figure 32).

- Fewer than 10 children received services from DDD in any year between state fiscal years (SFY) 2019 and 2022 (Table 26).
- Qualifying children may receive services from AzEIP and/or DDD, a number which can be used to estimate the total number of young children receiving early intervention services in a region. The number of children receiving AzEIP and/or DDD services fell slightly in the region from 10 in SFY 2019 to between 1 and 9 in SFY 2022. Based on the population of children birth to age 2 in the region per the 2020 Census, this suggests that 0.3% to 2.8% of children of these ages in the region may be receiving early intervention services, compared to 2.6% of children statewide (Table 27).
- Between 2018 and 2022, a total of 152 students in preschool through 3<sup>rd</sup> grade in the Parker Unified School District were enrolled in special education. This included 24 preschoolers, 22 kindergarteners, 34 1st graders, 31 2nd graders and 41 3rd graders (Table 28).
- The number of preschoolers with disabilities served by a local educational agency (LEA) has been relatively stable from 2018 to 2022 at 24 or 25 preschoolers. The exception was 2020, when the number increased by 10 (to 34 preschoolers) (Figure 33).
- Of the preschoolers with disabilities receiving services through LEAs between 2018 and 2022, the majority were diagnosed with a developmental delay (75%), with much smaller percentages diagnosed with a speech or language impairment (17%), preschool severe delay (4%) and other disabilities (4%). The proportion of preschoolers with a developmental delay is much higher than that seen statewide (43%), while the share with preschool severe delay is much lower than the state (24%) (Figure 34).
- The number of kindergarten through 3<sup>rd</sup> grade students enrolled in special education has steadily increased from SFY 2018 (n=97) to SFY 2022 (n=128) (Figure 35). Primary diagnoses were relatively similar in the region and the state as a whole, with 30% in the region diagnosed with a speech or language impairment, 26% a developmental delay, 25% a specific learning disability, 6% autism and 13% another disability. Compared to the state, a larger proportion of early elementary students were diagnosed with a specific learning disability (25% compared to 12%), and a smaller proportion were diagnosed with autism (6% compared with 11%) (Figure 36).

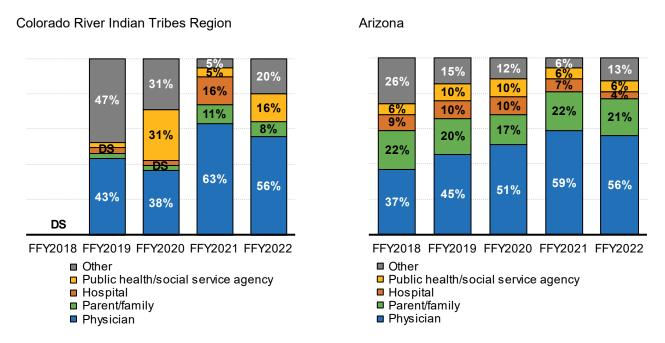
Table 26. Number of children birth to age 2 receiving services from AzEIP as of October 1, 2018 to 2022

Geography	Oct 2018	Oct 2019	Oct 2020	Oct 2021	Oct 2022
Colorado River Indian Tribes Region	11	1 to 9	11	10	12
La Paz County	1 to 20	1 to 20	1 to 19	14	16
Arizona	5,974	5,828 to 5,836	5,403	5,275	5,473

Sources: Arizona Department of Economic Security (2023). [Arizona Early Intervention Program dataset]. Unpublished data.

Note: These data reflect the Oct 1 snapshot of AzEIP services, not a cumulative total throughout the year. In 2018 to 2020, La Paz County totals were suppressed along with Greenlee County values to prevent the back-calculation of a value less than 10; hence there is a larger range of possible values because more than 10 children were likely served in La Paz County.

Figure 29. Children birth to age 2 referred to AzEIP by referral source, federal fiscal years 2018 to 2022



Sources: Arizona Department of Economic Security (2023). [Arizona Early Intervention Program dataset]. Unpublished data.

Note: Other referral sources include audiologists, child care or early learning programs, foster care or adoption agencies, homeless shelters or programs, public health facilities, schools, Department of Child Safety, or referrals without a recorded sources. These referrals reflect unique children (duplicates have been removed). "DS" indicates that too few children were referred from that source to calculate an accurate percentage under data suppression policies. In FFY 2018, no single source made 6 or more referrals. In FFY 2019, the largest number of "other" referrals were from public health facilities; in all other years, fewer than 6 referrals came from a single "other" source.

Ineligible Eligible Colorado River Indian Tribes 24% 8% 8% 4% 28% 28% Region 3% 19% 13% 6% 29% La Paz County 3% 26% 0.1% 19% 14% 7% 22% 16% 21% Arizona ■ No contact ■ Not Interested Screened out ■ Assessed, Not Eligible

Figure 30. Outcomes for children birth to age 2 referred to AzEIP, federal fiscal year 2022

Sources: Arizona Department of Economic Security (2023). [Arizona Early Intervention Program dataset]. Unpublished data.

■ Found eligible

Invalid or Other

Note: These referral outcomes are recorded by AzEIP service providers. "No contact" means that a service coordinator made multiple attempts to contact a child's family but was unsuccessful. "Not interested" indicates that when contacted the family of the child did not proceed with screening for eligibility. Children who are "screened out" were not suspected to have a qualifying developmental delay based on an initial developmental screening with a service coordinator; children who are "assessed, not eligible" are those with a formal evaluation who were found to not have a qualifying developmental delay. "Invalid or Other" refers to cases where the child was over-age (age 3 or older) or residing outside Arizona, the referral was a duplicate, the referral was for information-only, or the outcome was listed as "other."

■ Eligible, declined IFSP

■ Receved Services

Table 27. Number of children (birth to age 5) receiving DDD services, state fiscal years 2019 to 2022

Geography Colorado River Indian	SFY 2019 1 to 9	SFY 2020 1 to 9	SFY 2021 1 to 9	SFY 2022 1 to 9	Percent change from 2019 to 2022 DS
La Paz County	1 to 9				
Arizona	4,005	4,078	2,438	3,691	-8%

Source: Arizona Department of Economic Security (2023). [Division of Developmental Disabilities dataset]. Unpublished data.

Table 28. Number of children (ages 0-2) receiving AzEIP and/or DDD services, state fiscal years 2019 to 2022

	Number	of children ag		ving services and/or DDD		Estimated percent of children (ages 0-2)
	SFY		SFY		Population ages 0-2	receiving AzEIP and/or DDD services,
Geography	2019	SFY 2020	2021	SFY 2022	(Census 2020)	SFY 2022
Colorado River Indian Tribes Region	10	1 to 9	1 to 9	1 to 9	317	0.3 to 2.8%
La Paz County	10	1 to 9	1 to 9	1 to 9	429	0.2 to 2.1%
Arizona	6,376	5,721	5,916	5,876	225,737	2.6%

Source: Arizona Department of Economic Security (2023). [Arizona Early Intervention Program dataset]. Unpublished data.

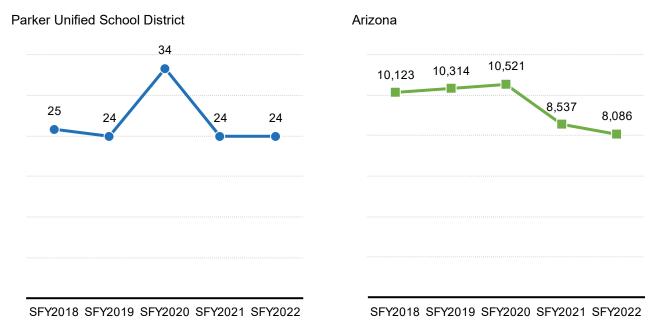
Table 29. Preschool to 3rd grade students enrolled in special education, state fiscal years 2018-2022 combined

	Students enrolled in special education, SFY 2018-2022				
	Preschool	Kindergarten	1st Grade	2nd Grade	3rd Grade
Parker Unified School District	24	22	34	31	41
La Paz County	County data suppressed				
Arizona	47,581	35,592	47,046	50,498	54,448

Source: Arizona Department of Education (2023). [Special Needs Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

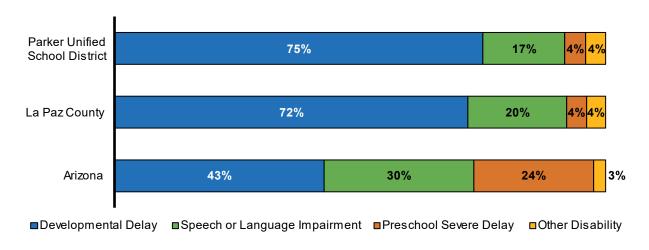
Note: County data cannot be shown as there were fewer than 11 students in each grade who were enrolled in districts in the county other than Parker Unified School District.

Figure 31. Preschoolers with disabilities receiving services from local education agencies (LEAs), state fiscal years 2018 to 2022



Source: Arizona Department of Education (2023). [Special Needs Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

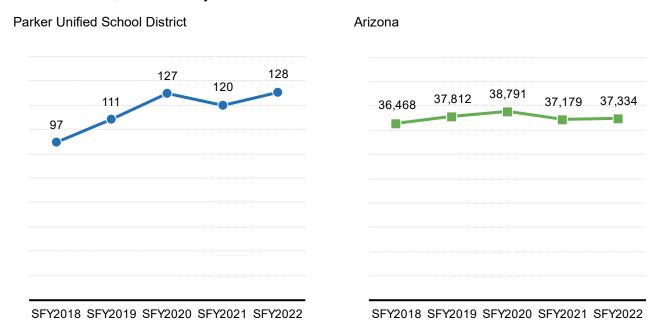
Figure 32. Preschoolers with disabilities receiving services through Local Education Agencies (LEAs) by type of disability, state fiscal years 2018-2022 combined



Source: Arizona Department of Education (2023). [Special Needs Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

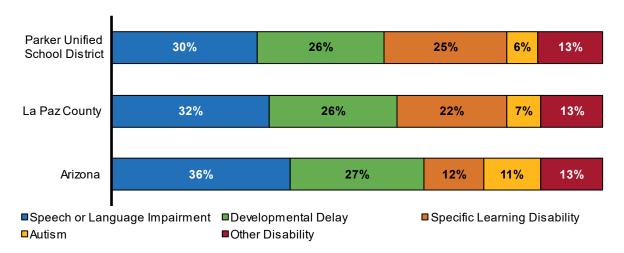
Note: The "Other Disability" category includes children with hearing impairment, visual impairment, or deaf-blindness.

Figure 33. Kindergarten to 3rd grade students enrolled in special education in public and charter schools, state fiscal years 2018 to 2022



Source: Arizona Department of Education (2023). [Special Needs Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

Figure 34. Kindergarten to 3rd grade students enrolled in special education in public and charter schools by primary disability, state fiscal year 2018-2022 combined



Source: Arizona Department of Education (2023). [Special Needs Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

Note: The "Other Disabilities" category includes children with emotional disturbance, deafness, deaf-blindness, hearing impairment, intellectual disability, multiple disabilities, orthopedic impairment, other health impairments such as chronic medical conditions that affect a child's ability to participate in the educational setting, traumatic brain injury, or visual impairment.

Additional data tables related to Early Learning can be found in Appendix 1 of this report.



**CHILD HEALTH** 

# CHILD HEALTH

# **Why it Matters**

The physical and mental health of both children and their caregivers are important for optimal child development and well-being. Early childhood health, and even maternal health before pregnancy, has lasting impacts on an individual's quality of life. 243, 244 Experiences during the prenatal and early childhood periods can result in lifelong impacts on immune functioning, brain development and risk for chronic diseases. <sup>245, 246</sup> Poor health in childhood can also result in lower educational attainment and socioeconomic status in adolescence, adulthood and even inter-generationally. <sup>247, 248</sup> Therefore, adequate access to preventive care and treatment services is vital to support a child's long-term health, development and success. <sup>249, 250, 251</sup> Members of federally-recognized tribes have access to health care services provided through the Indian Health Services (IHS) and/or tribally-administered health care facilities. 252, 253

## What the Data Tell Us

#### Access to health services

Health insurance coverage is an important indicator of whether families can access, afford and utilize medical care. In Arizona, children up to 19 years of age can enroll in health insurance through the Arizona Health Care Cost Containment System (AHCCCS), Arizona's Medicaid program. Children whose families earn too much to qualify for AHCCCS but do not earn enough to afford private health insurance may also be enrolled in KidsCare, Arizona's Children's Health Insurance Program. xix During the COVID-19 pandemic, uninsured rates declined due to federal policies prohibiting states from disenrolling people from Medicaid.<sup>254</sup> Despite these efforts, uninsured rates in the overall population are still high.<sup>255</sup> One primary reason for this is perceived cost, with more than two-thirds (69.6%) of uninsured U.S. adults citing their inability to pay for health insurance as the primary reason they were uninsured. 256 Families who qualify for low- or no-cost health insurance may not be aware that they qualify or they may face administrative barriers to enrolling.<sup>257</sup>

A variety of health outcomes for both mothers and infants depend on access to quality health care and support before, during and after pregnancy. Early initiation of prenatal care reduces the risk of prenatal smoking, pregnancy complications, xx premature births and maternal and infant mortality. 258, 259, 260, 261, <sup>262</sup> Poor access to maternal health care (e.g., hospitals with labor and delivery units, birth centers and obstetric providers) is one factor that can contribute to these outcomes. 263, 264, 265 Black, Hispanic,

xix For more information on AHCCCS and KidsCare see: https://www.azahcccs.gov/Members/GetCovered/Categories/KidsCare.html

xx One such complication is congenital syphilis, where untreated maternal syphilis is passed to the fetus and can lead to stillbirth or infant death. The number of babies born in Arizona with congenital syphilis increased more than 10-fold in the last 6 years, even though congenital syphilis can be prevented with adequate prenatal care. For more information, see: https://www.azdhs.gov/preparedness/epidemiology-disease-control/disease-integration-services/std-control/congenital-syphilis/index.php

American Indian and Alaska Native mothers experience a disproportionate lack of access to quality health care and support for their pregnancies. 266, 267 Lack of access to this care has contributed to considerably higher rates of low birth weight births, preterm births and maternal and infant mortality compared to non-Hispanic White Americans. <sup>268, 269, 270</sup> Efforts to increase the number of women in Arizona with access to early prenatal care, such as expanding access to telehealth care and midwifery care, could improve the health outcomes of the state's mothers and babies, especially in counties with lower access to maternal health care services.<sup>271</sup>

Like many rural communities, Native communities often have lower access to high-quality health care. Hospitals and specialty services are fewer and further-between on reservations and in rural areas than in urban areas, and factors such as poor road conditions and lower transportation and internet access can further worsen access issues. Additionally, a report from 2022 estimated that the IHS, through which many tribal members access services, is chronically underfunded by as much as 50% compared to health care needs. 272, 273 Significant and sustained investment is needed to reduce this gap in adequate health care services for Native communities.

## How the Colorado River Indian Tribes Region is faring

- In the Colorado River Indian Tribes Region, health care services are available through the county-operated La Paz Regional Hospital and the Indian Health Service (IHS)-operated Parker Indian Health Center. Colorado River Indian Tribes Health and Social Services Department also provides health care services through Behavioral Health Services, Diabetes Prevention, WIC, Community Health Representatives and other programs. There is no Labor and Delivery unit within the region, so women give birth outside of the region in Lake Havasu City (40 miles), Phoenix (155 miles) or Blythe, California (50 miles).<sup>274</sup>
- In addition to members of the Colorado River Indian Tribes, Parker Indian Health Center also serves members of Chemehuevi Indian Tribe, Fort Mojave Indian Tribe, Hualapai Tribe, Havasupai Tribe and Moapa Paiute Tribe (in Nevada). <sup>275</sup> In 2022, there were 4,517 active IHS users from the Colorado River Indian Tribes, 510 of whom were young children birth to age 5 (Table 29).
- The caregiver survey administered as part of the 2022 Regional Needs and Assets Report in 2021-2022 asked parents and caregivers where they typically access health care services for their child(ren). Over half of caregiver respondents indicated they seek care at a pediatrician's office or private practice (53%), and about a third indicated using IHS for their child's health care (32%). Another 4% each accessed child health care services at an urgent care or health department (such as for immunizations).<sup>276</sup>
- Health insurance coverage plays an important role in access to health care. In the Colorado River Indian Tribes Region, the proportion of young children birth to age 5 who did not have health insurance increased from an estimated 8% according to the 2012-2016 American Community Survey (ACS) to 14% in the 2017-2021 ACS. In this time period, rates of young children without health insurance increased by 3% across all Arizona reservations (from 17% to 20%) and by

15% in La Paz County (from 6% to 21%) but decreased by 1% in Arizona (from 8% to 7%) and nationally (from 5% to 4%). It is important to note that the U.S. Census Bureau does not consider coverage by IHS to be insurance coverage. Members of the Colorado River Indian Tribes with or without health insurance may access health care services at the Parker Indian Health Center.

- Most births in the region were covered by AHCCCS in 2020 (79%) and 2021 (73%), which is similar to AHCCCS coverage across all Arizona reservations (71%) and La Paz County (74-76%) but much higher than statewide (46-48%). On average, about one in 10 births in the region were covered by IHS between 2020 and 2021 (Table 30).
- Between 2018 and 2022, the proportion of births in the Colorado River Indian Tribes Region paid for by AHCCCS ranged from a low of 68% in 2018 to a high of 79% in 2020 (Figure 38). Facilitating enrollment in AHCCCS can have positive outcomes for both individuals and communities by increasing access to health care services and increasing funds available for health care provision to all community members.<sup>277</sup>
- In 2021, under half of births in the Colorado River Indian Tribes Region (45.6%) and in La Paz County (48.5%) were to mothers who began prenatal care in the first trimester, compared to 71.7% of births across the state. In the region, 4% of births that year were to mothers who had fewer than five prenatal visits, which was similar to the county and state (both 5%) and much lower than on all Arizona reservations (14% in 2020), and 5% were to mothers who had no prenatal care, which was higher than the state (2%) (Table 31).
- Looking over time, the proportion of births to mothers with fewer than five prenatal care visits peaked at a high of 9.6% in 2019 and then declined steadily to 2.0% in 2022, a positive improvement. In contrast, the share of births with no prenatal care fluctuated during these years but generally increased (+2.4% from 2018 to 2022) (Figure 39).
- Positively, the share of births in the Colorado River Indian Tribes region to mothers who began prenatal care in the first trimester steadily increased from 37% in 2018 to 52% in 2022, however this was still 19% behind the state as a whole (71%) (Figure 40). This indicates an ongoing need for timely prenatal care in the region.

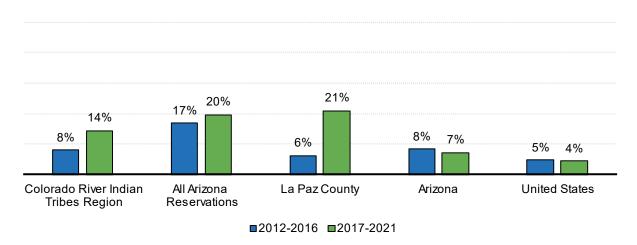
Table 30. Active IHS Users from the Colorado River Indian Tribes, 2022

	CY 2022
Children ages 0-5	510
Total (all ages)	4,517

Source: First Things First (2022). First Things First Colorado River Indian Tribes Regional Needs and Assets Report. Retrieved from https://files.firstthingsfirst.org/regions/Publications/Regional%20Needs%20and%20Assets%20-%202022%20-%20CRIT.pdf

Note: Active user is defined as someone who had one or more visits over the previous 3 years.

Figure 35. Children birth to age 5 without health insurance, 2012-2016 and 2017-2021 ACS



Source: U.S. Census Bureau. (2021). American Community Survey 5-year estimates 2012-2016 & 2017-2022, Table B27001

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

Table 31. Insurance coverage for babies born in 2020 and 2021

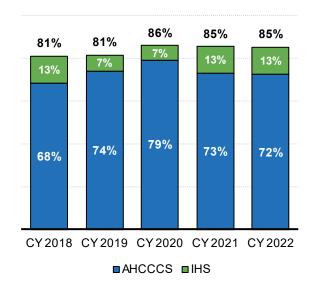
Geography	Calendar year	Number of births	Birth was covered by AHCCCS	Birth was covered by IHS	Birth was covered by AHCCCS or IHS	
Colorado River Indian Tribes	2020	100	79%	7%	86%	
Region	2021	103	73%	13%	85%	
	2020	1,900	71%	16%	86%	
All Arizona Reservations	2021	Data for All Arizona Reservations not available				
La Bar Causta	2020	154	74%	5%	79%	
La Paz County	2021	165	76%	8%	85%	
Arizona	2020	76,781	48%	1%	49%	
	2021	77,857	46%	1%	47%	

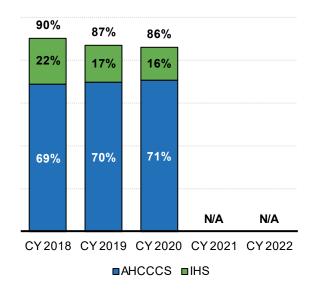
Note: Mothers of twins are counted twice in this table. Percentages may not sum to 100% due to rounding. 'All Arizona Reservations'  $row\ reflects\ only\ births\ to\ American\ Indian\ mothers\ residing\ on\ Arizona\ reservations.\ The\ Health\ status\ profile\ of\ American\ Indian\ in$ Arizona for 2021 has not yet been released.

Figure 36. Births paid for by AHCCCS or IHS, 2018 to 2022

Colorado River Indian Tribes Region

All Arizona Reservations





Source: Arizona Department of Health Services (2023). [Vital Statistics Births dataset]. Unpublished data.

Note: Mothers of twins are counted twice in this figure. 'All Arizona Reservations' figure reflects only births to American Indian mothers residing on Arizona reservations. The Health status profiles of American Indian in Arizona for 2021 and 2022 have not yet been released.

Table 32. Prenatal care for the mothers of babies born in 2020 and 2021

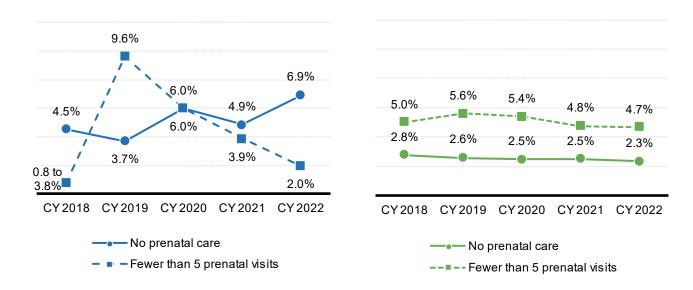
Geography	Calendar year	Number of births	Mother had no prenatal care	Mother had fewer than five prenatal visits	Mother began prenatal care in the first trimester	
Colorado River Indian Tribes	2020	100	6%	6%	42.0%	
Region	2021	103	5%	4%	45.6%	
	2020	1,900	5%	14%	55.8%	
All Arizona Reservations	2021	Data for All Arizona Reservations not available				
La Baz Caustu	2020	154	7%	5%	45.5%	
La Paz County	2021	165	6%	5%	48.5%	
Arizona	2020	76,781	2%	5%	68.8%	
	2021	77,857	2%	5%	71.7%	

Note: Mothers of twins are counted twice in this table. 'All Arizona Reservations' row reflects only births to American Indian mothers residing on Arizona reservations. The Health status profile of American Indian in Arizona for 2021 has not yet been released.

Figure 37. Births to mothers with inadequate prenatal care, 2018 to 2022

Colorado River Indian Tribes Region

Arizona



Source: Arizona Department of Health Services (2023). [Vital Statistics Births dataset]. Unpublished data.

Note: Mothers of twins are counted twice in these figures

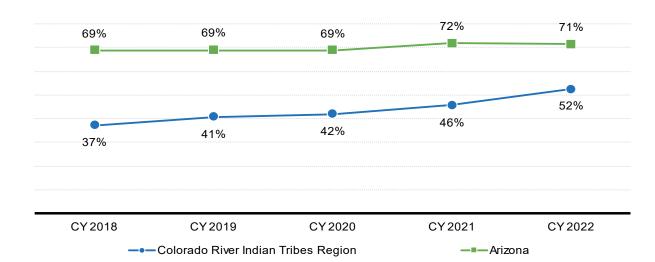


Figure 38. Births to mothers who began prenatal care in the first trimester, 2018 to 2022

Note: Mothers of twins are counted twice in this figure. Due to data suppression of counts of births between 1 and 5, some values are shown as a range, with the true value falling somewhere within the range.

#### Maternal age and substance abuse

Infants' immediate and long-term health can be influenced by maternal characteristics including age and substance use during or after pregnancy. For example, teenage parents often experience increased stress and hardship in comparison to older parents and other non-parent teenagers as they are less likely to complete high school or college and more likely to maintain a lower socioeconomic status and require public assistance to make ends meet. <sup>278, 279, 280, 281, 282</sup>

The use of substances during pregnancy can cause negative health complications for fetuses and babies. For example, babies born to mothers who smoked cigarettes during pregnancy are more likely to be born preterm, have low birth weight, die from sudden infant death syndrome (SIDS) and have weak lungs. 283, 284 The use of opioids, whether prescribed or illicit, during pregnancy also poses health risks to developing fetuses including preterm birth, stillbirth and birth defects. 285 It may also cause infants to experience withdrawal symptoms after birth, which is referred to as neonatal abstinence syndrome (NAS). Symptoms of NAS include sleep problems, seizures, poor feeding, dehydration, loose stool, sweating, tremors and vomiting. In Native communities, substance abuse issues can be linked to historical trauma and adverse childhood experiences (ACEs). Protective factors, which are also important elements of effective substance use interventions, include cultural and family connection and traditional healing. 286, 287

### How the Colorado River Indian Tribes Region is faring

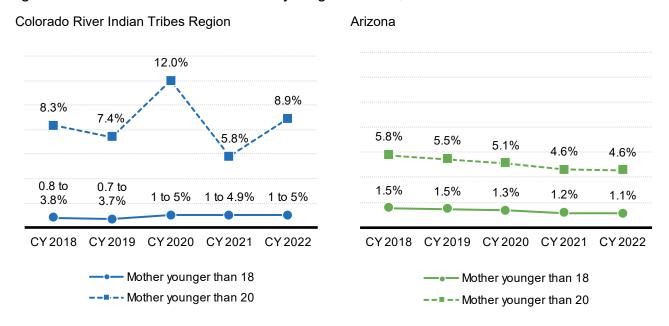
- In 2020 and 2021, 6-12% of births in the Colorado River Indian Tribes Region were to mothers younger than age 20 and 1-5% were to mothers younger than 18. This is comparable to 9% of births to mothers younger than 20 and 4% to mothers younger than 18 across reservations statewide (Table 32).
- Looking at births to teenaged mothers between 2018 and 2022, the proportion of births to mothers younger than 20 has fluctuated more in the region (due to small numbers) but always exceeded the state rates (5.8-12% compared with 4.6-5.8%). Births to mothers younger than 18 in the region increased slightly (+1-5%) while this proportion fell slightly across Arizona (-0.4%) (Figure 41).
- The proportion of births to mothers who smoked cigarettes during pregnancy was smaller in the region in 2020 (6%) than in all Arizona reservations (11.1%) and La Paz County (6.5%) but higher than Arizona overall (3.6%) (Table 32). The Colorado River Indian Tribes Region did not meet the Healthy People 2030 target of no more than 4.3% of women using tobacco during pregnancy in 2020 or 2021 but did meet it in 2019 (0.7-3.7%) (Figure 42).
- Between 2018 and 2022, 45 newborns were hospitalized because of maternal drug use during pregnancy in the Colorado River Indian Tribes Region. Based on the total number of births, this equates to 7.9 newborns hospitalized per 100 births, more than twice the statewide rate of 3.3 newborns hospitalized per 100 live births. The average length of hospital stay was shorter in the region (6.8 days) than in Arizona as a whole (9.5 days) (Table 33).

Table 33. Selected characteristics of mothers giving birth, 2020 to 2021

Geography	Calendar year	Number of births	Mother was younger than 18	Mother was younger than 20	Mother smoked cigarettes during pregnancy	
Colorado River Indian	2020	100	1 to 5%	12%	6.0%	
Tribes Region	nion	1 to 5%	6%	6.8%		
All Arizona Reservations	2020	1,900	4%	9%	11.1%	
	2021	Data for All Arizona Reservations not available				
La Paz County	2020	154	0.6 to 3%	11%	6.5%	
	2021	165	0.6 to 3%	8%	9.1%	
Arizona	2020	76,781	1%	5%	3.6%	
	2021	77,857	1%	5%	3.2%	
Healthy People 2030 target 4.						

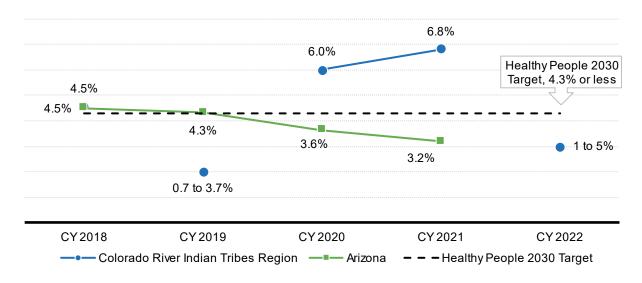
Note: Mothers of twins are counted twice in this table. The Healthy People 2030 target for maternal use of tobacco during pregnancy is 95.7% of females reporting abstaining from smoking during pregnancy. 'All Arizona Reservations' row reflects only births to American Indian mothers residing on Arizona reservations. The Health Status Profile of American Indian in Arizona for 2021 has not yet been released.

Figure 39. Births to mothers who were younger than 20, 2018 to 2022



Note: Mothers of twins are counted twice in this figure. Data for births to mothers younger than 18 for the region is not presented because the percentages are suppressed in most years.

Figure 40. Births to mothers who smoked cigarettes during pregnancy, 2018 to 2022



Source: Arizona Department of Health Services (2023). [Vital Statistics Births dataset]. Unpublished data.

Note: Data for 2018 and 2019 are presented as a range because the number of births with maternal smoking was less than 6 in these years.

Table 34. Newborns hospitalized because of maternal drug use during pregnancy, 2018-2022 combined

Geography	Newborns hospitalized	Average length of stay (days)
Colorado River Indian Tribes Region	45	6.8
La Paz County	59	6.9
Arizona	12,939	9.5

Source: Arizona Department of Health Services (2023). [Hospital Discharge dataset]. Unpublished data.

Note: Data on newborns hospitalizations were geocoded to FTF regions using the address provided by parents at the time of hospitalization; however, in cases where the address provided was not valid, hospitalizations could not be assigned to a region. County of residence is captured separately from addresses, meaning that counts in the county often exceed those seen in a particular region because they include all newborns regardless of address validity.

### Maternal health and well-being

A pregnant woman's health and well-being are closely linked to infant and child health and development. Gestational diabetes (i.e., diabetes that only presents during the pregnancy) increases the likelihood of an infant having low blood sugar, being born preterm, being larger than average at birth, needing to be delivered through cesarean section and even developing type 2 diabetes and cardiovascular diseases later in life. 288, 289 Children of mothers categorized as having maternal obesity have increased risk of birth complications, asthma, diabetes, heart disease and neonatal and infant mortality. 290, 291, 292 A variety of social determinants of health have been linked to the development of diabetes and obesity, including low socioeconomic status, employment struggles, lack of health insurance and living in rural areas with fewer resources. 293, 294, 295, 296 Risks associated with these conditions can be reduced through increased access to maternal health care before, during and after childbirth as well as planning high-risk deliveries at hospital facilities with more resources and technical expertise. 297, 298

Postpartum depression has a clear link to negative outcomes in infant health and development. Untreated postpartum depression can lead to infant sleeping, eating and behavioral problems, issues with maternal and infant bonding and infant developmental delays. <sup>299,300</sup> Groups that have higher rates of postpartum depression include American Indian and Alaska Native mothers, mothers who are under the age of 19 and mothers who smoked during or after pregnancy. 301 The United States Preventive Services Task Force and the American Congress of Obstetricians and Gynecologists recommend assessing mothers' mental health both during pregnancy and after giving birth to facilitate early identification and intervention. 302 In 2022, AHCCCS implemented a policy requiring depression screenings during prenatal and postpartum visits as well as well-child visits within the first 6 months of an infant's life for all enrolled mothers in Arizona. 303 Mothers who screen positively for depression must be referred to a case manager or treatment services. 304 These screenings, as well as the ability to bill AHCCCS for the

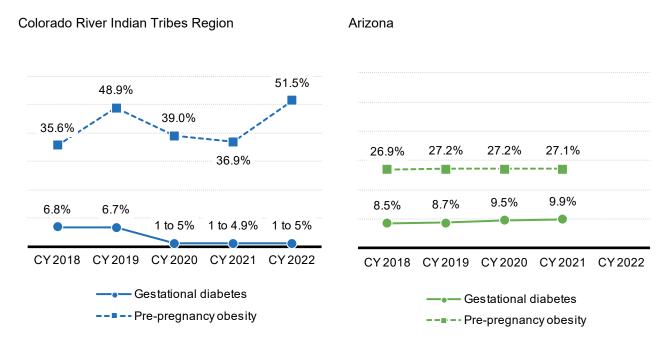
cost of screenings, will hopefully increase the likelihood that mothers experiencing postpartum depression are referred to appropriate mental health services.

In a recent study, American Indian mothers shared that their experiences of postpartum depression were shaped by their medical experiences just before and after giving birth and a feeling that historical factors and colonized perspectives have limited their ability to birth and mother fully in their culture. 305 Additionally, mothers expressed needing to remain resilient for their families and communities, which may increase the feeling of isolation common in postpartum disorders. Integrating cultural birthing practices into healthcare services and considering cultural-specific factors in follow-up treatment services is a key need to support Native mothers and their families. 306

## How the Colorado River Indian Tribes Region is faring

- Between 2018 and 2022, rates of gestational diabetes decreased from 6.8% to between 1% and 5% while rates of pre-pregnancy obesity fluctuated but generally increased, reaching a five-year high at more than half of births in 2022 (51.5%). While rates of gestational diabetes were lower in the region than statewide, rates of pre-pregnancy obesity were higher during these years (Figure 43).
- Statewide, about 1 in 7 mothers (13.7%) of all race and ethnicities reported experiencing postpartum depressive symptoms in 2020, nearly the same rate as that seen nationwide (13.4%). 307 National data show that more than one in five (22%) American Indian and Alaska Native mothers in the U.S. experienced postpartum depressive symptoms in 2018, suggesting that Native mothers may be at higher risk of postpartum depression. 308, 309

Figure 41. Births to mothers diagnosed with pre-pregnancy obesity or gestational diabetes, 2018 to 2022



Note: Mothers of twins are counted twice in this figure. Data on pre-pregnancy obesity and gestational diabetes were not available for Arizona in 2022.

#### Infant health

Health in early infancy shapes childhood health for many years to come. Infants who are born preterm or at a low birthweight have a higher possibility of short- and long-term health complications. Preterm birth is defined as birth at less than 37 weeks of gestation. Risks related to preterm births include respiratory, immune, neurological, vision, hearing and intestinal developmental issues. Infants born preterm also have increased rates of mortality during their first 28 days to 1 year of life, longer hospitalization after birth, more health care costs and physical impairments. Preterm births are more likely among mothers who are under age 20, over the age of 35, low income, experience infections during pregnancy or engage in substance use. In a low birthweight have a higher possibility of short- and long-term health complications. Preterm birth is defined as birth at less than 37 weeks of gestation. Risks related to preterm births include respiratory, immune, neurological, vision, hearing and intestinal developmental issues. In a low birthweight have a higher possibility of short- and long-term health complications. Preterm births include respiratory, immune, neurological, vision, hearing and intestinal developmental issues. In a long-term births include respiratory, immune, neurological, vision, hearing and intestinal developmental issues. In a long-term birth include respiratory, immune, neurological, vision, hearing and intestinal developmental issues. In a long-term birth include respiratory, immune, neurological, vision, hearing and intestinal developmental issues. In a long-term birth include respiratory, immune, neurological, vision, hearing and intestinal developmental issues. In a long-term birth include respiratory, immune, neurological, vision, hearing and intestinal developmental issues. In a long-term birth include respiratory, immune, neurological, vision, hearing and intestinal developmental issues. In a long-term birth in a long-term birth in a long-term birth in a long-term birth in a long-te

Low birthweight is defined as weighing less than 5 pounds and 8 ounces (2,500 grams) at birth. Babies born with this condition have a higher risk of infant mortality and long-term health problems such as diabetes, hypertension and cardiac disease. <sup>314, 315</sup> Low birthweight risk factors include low maternal weight during pregnancy, preterm birth, teen pregnancy, pregnancy over the age of 35, high blood pressure, diabetes, substance use and air pollution. <sup>316</sup>

Newborns are admitted into neonatal intensive care units (NICUs) in hospitals for numerous reasons that can vary across medical providers and have implications for the short- and long-term health of babies

and families. 317 NICU stays can take a large emotional and financial toll on families, especially families living far from the hospital. However, although NICU admissions may be an indicator of important health concerns in newborns, including low birthweight, they can also be a site of family-based interventions that can positively impact infant development and parent-child relationships. 318

For parents who are able to breastfeed, the American Academy of Pediatrics recommends breastfeeding infants exclusively for the first 6 months after birth, followed by a combination of breastfeeding and other foods for up to 2 years or longer. 319 Breastfeeding offers a variety of benefits to infants due to the nutrition and antibodies that human breast milk provides. These benefits include lowering an infant's risk of type 1 diabetes, obesity, ear infections, SIDS, asthma and gastrointestinal infections. 320 Robust data on breastfeeding rates are only available for children served through the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) program.

### How the Colorado River Indian Tribes Region is faring

- In 2021, a larger proportion of babies were born preterm in the Colorado River Indian Tribes Region (13.6%) than in Arizona overall (10.0%), while the proportions of low birth weight births (1-4.9%) and babies admitted to the NICU (1-5%) were lower in the region than in the state (9.6% and 8%, respectively) (Table 34).
- Between 2018 and 2022, the proportion of low birth weight births in the region generally increased, with the exception of 2021 when it dipped below state rates (1-4.9% compared to 7.9%). In 2022, the share of births that were low birth weight was 2.1% higher in the region (9.9%) than the state (7.8%) (Figure 44).
- The Healthy People 2030 target for the percentage of preterm births is 9.4% or lower. The Colorado River Indian Tribes Region did not meet that target between 2018 and 2022, though the percent of preterm births reached a recent low of 11.9% in 2022. The state of Arizona only met the Healthy People 2020 target in 2019 (9.3%) (Figure 45).
- According to data from the 2022 Regional Needs and Assets Report, between about half and two-thirds of infants enrolled in the Colorado River Indian Tribes WIC program in 2017 to 2020 were ever breastfed (51%-67%). This percent ranged from 4-14% below rates in all ITCA WIC programs and 12-26% below rates in all Arizona WIC programs (Figure 46).

Table 35. Selected birth outcomes, 2020 to 2021

Geography	Calendar year	Number of births	Baby weighed less than 2500 grams	Baby was preterm (less than 37 weeks)	Baby was admitted to a NICU
Colorado River Indian Tribes Region	2020	100	9.0%	13.0%	6%
	2021	103	1.0 to 4.9%	13.6%	1 to 5%
	2019-2022	439	9.9%	11.9%	7%
All Arizona Reservations	2020	1,900	8.9%	12.6%	N/A
	2021	Data for All Arizona Reservations not available			
La Paz County	2020	154	8.4%	13.0%	6%
	2021	165	6.1%	10.3%	0.6 to 3%
Arizona	2020	76,781	7.4%	9.5%	8%
	2021	77,857	9.6%	10.0%	8%
Healthy Peo	ple 2030 targets			9.4%	

Note: 'All Arizona Reservations' row reflects only births to American Indian mothers residing on Arizona reservations. The Health Status Profile of American Indian in Arizona for 2021 has not yet been released.

Figure 42. Low birth weight births, 2018 to 2022

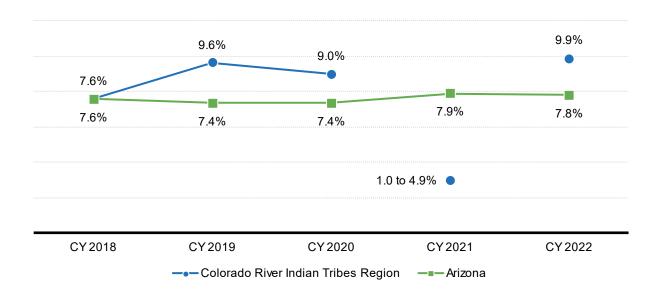
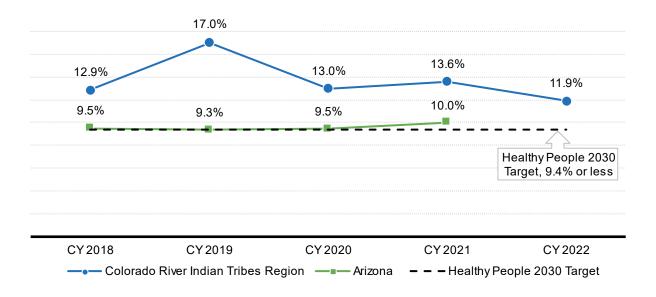


Figure 43. Preterm births, 2018 to 2022



Source: Arizona Department of Health Services (2023). [Vital Statistics Births dataset]. Unpublished data.

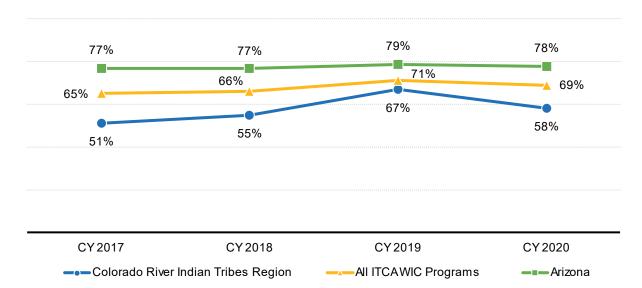


Figure 44. Breastfeeding rates for WIC-enrolled infants

Source: First Things First (2022). First Things First Colorado River Indian Tribes Regional Needs and Assets Report. Retrieved from https://files.firstthingsfirst.org/regions/Publications/Regional%20Needs%20and%20Assets%20-%202022%20-%20CRIT.pdf

#### Childhood infectious disease and immunization

Immunization against preventable diseases protects both children and the surrounding community from potential illness and death. Immunization protects not only the vaccinated person but also individuals who are unable to be vaccinated through "community immunity." <sup>321</sup> In order to attend state-licensed child care programs and public or charter schools, children are required to receive specific vaccinations or obtain an official exemption, which can be requested for medical, personal or religious reasons.<sup>322</sup> Statewide and nationally, childhood immunization rates have been declining in recent years. The COVID-19 pandemic exacerbated disparities in health care access, including routine immunizations, that specifically impacted children who are Black, Hispanic, low-income, live in rural areas or lack health insurance. 323 National survey data from the Pew Research Center also show that declining childhood immunization rates, particularly for the Measles, Mumps and Rubella (MMR) vaccine, can be linked to parents' shifting attitudes towards vaccines. While most U.S. parents continue to express confidence in the value of childhood vaccination for MMR, a sizable proportion expressed concerns about the necessity of vaccines and showed declining support for vaccine requirements for children to attend public schools.<sup>324</sup>

Respiratory syncytial virus (RSV) and influenza (flu) are leading causes of serious illness in young children, and following the COVID-19 pandemic in 2020, recent flu and RSV seasons have been more severe nationwide. 325, 326 RSV is the most frequent cause of hospitalization in children under 1 year of age. 327 In 2023, two new preventative therapies for RSV were approved—a single-dose antibody medication for infants, and an adult immunization for pregnant people administered in the 3<sup>rd</sup> trimester of pregnancy. 328, 329 These new treatments have the potential to prevent severe illness in infants and

young children, but shortages of the antibody medication have led the Centers for Disease Control and Prevention (CDC) to recommend prioritizing access for the highest-risk infants. This includes infants under 6 months of age, those with underlying health conditions such as lung or heart disease and American Indian or Alaska Native infants under 8 months of age, as well as older American Indian or Alaska Native infants who live in remote areas with limited access to health care facilities. The flu can also cause serious illness in young children under age 5, particularly for children birth to age 2, who are the most likely to be hospitalized with flu complications. The American Academy of Pediatrics recommends that all children ages 6 months and older be vaccinated against influenza each year.

#### How the Colorado River Indian Tribes Region is faring

- While no regional child care centers reported into the Arizona Department of Health Services
   (ADHS) immunization dataset in recent years, the fiscal year (FY) 2023 Program Information
   Report indicated that 94% of enrolled children in Colorado River Indian Tribes Head Start were
   up-to-date on immunizations at the end of the year. Only 3% were not yet fully immunized, and
   another 3% had exemptions. 333
- Kindergarten immunization rates in schools in the region (DTaP, 93.2%; Polio, 93.9%; MMR, 93.9%) were higher than statewide rates (DTaP, 89.6%; Polio, 90.3%; MMR, 89.9%) in the 2022-23 school year. Neither the region nor the state met the Healthy People 2030 kindergarten MMR immunization target of 95% or more. Rates of personal belief exemptions (4.5%) and exemptions from all required vaccines (3.8%) were lower than in Arizona overall (7.3% and 4.6%, respectively) (Table 35).
- The pattern of confirmed and probable cases of influenza in young children birth to age 5 fell to 0 in 2021 before increasing to a recent high of 23 in 2022. Confirmed and probable cases of RSV increased from fewer than 6 in 2020 to 14 in 2022. This is relatively similar to the patterns of influenza and RSV cases statewide during these years (Figure 47).

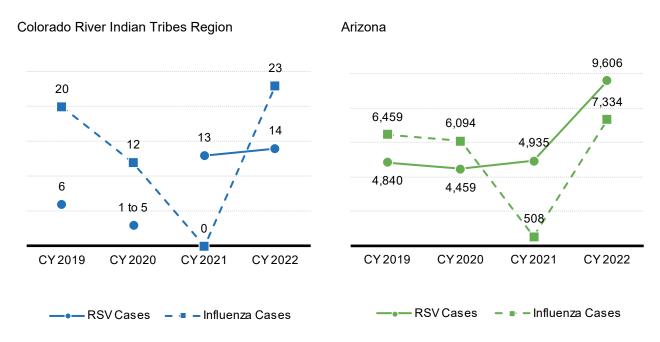
Table 36. Kindergarteners with selected required immunizations, 2022-23

Geography Colorado River Indian Tribes Region	Number Enrolled 132	DTaP 93.2%	Polio 93.9%	MMR 93.9%	Personal belief exemption 4.5%	Medical exemption 0.0%	Exempt from every required vaccine 3.8%
La Paz County	149	92.6%	93.3%	92.6%	4.0%	0.0%	3.4%
Arizona	78,937	89.6%	90.3%	89.9%	7.3%	0.2%	4.6%
Healthy People 2030 targets			·	95.0%			

Source: Arizona Department of Health Services (2023). Kindergarten Immunization Coverage, 2022-23 School Year. Unpublished data received by request & aggregated by the Community, Research, & Development Team. Arizona Department of Health Services (2023). Kindergarten Immunization Coverage by County, 2022-23 School Year. Retrieved from

https://www.azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage

Figure 45. Confirmed and probable cases of infectious diseases in children birth to age 5, 2019 to 2022



Source: Arizona Department of Health Services (2023). [FTF VPD Flu RSV dataset]. Unpublished data.

#### Infant and child hospitalization and mortality

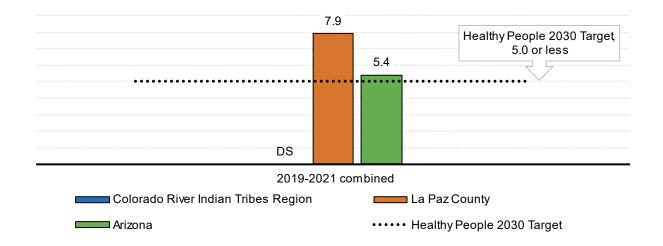
Infant mortality refers to the death of infants under 1 year of age. Some of the most common causes of infant mortality in Arizona and the U.S. include congenital abnormalities, low birth weight, preterm birth, pregnancy complications, sudden infant death syndrome (SIDS) and unintentional injuries. 334, 335, <sup>336</sup> According to provisional CDC data, infant mortality increased between 2021 and 2022 by 3% nationally, 13% in Arizona for all infants and 21% for American Indian or Alaska Native infants nationwide, the highest increase seen for any group. <sup>337</sup> In addition to increasing, the infant mortality rates for American Indian or Alaska Native (9.1 deaths per 1,000 live births) and Black infants (10.9) were also notably higher than White (4.52) or Hispanic (4.9) infants in 2022, racial disparities that have been linked to maternal care deserts, which are particularly prevalent on tribal lands. <sup>338, 339</sup> This indicates a serious need to increase access to timely prenatal care, newborn screening and home visiting programs in rural and tribal areas to begin to reduce infant mortality rates. <sup>340</sup>

The leading cause of death for children birth to age 17 in the United States is unintentional injuries.<sup>341</sup> The most prevalent accidental injuries are car crashes, drowning, falls, suffocation, fires and poisoning.<sup>342</sup> Deaths from unintentional injuries are more common for children living in rural areas, as well as among American Indian and Alaska Native children.<sup>343, 344</sup> Increased awareness and safety precautions have helped reduce childhood deaths in the last decade, including child swimming lessons, proper infant sleeping position, installing smoke detectors, keeping medications out of reach, practicing gun safety and utilizing seatbelts and helmets.<sup>345</sup>

#### How the Colorado River Indian Tribes Region is faring

- There were between 1 and 5 infant deaths in the Colorado River Indian Tribes Region from 2019 to 2021. Neither Arizona (at 5.4) nor La Paz County (at 7.9) met the Healthy People 2030 target of 5.0 or fewer infant deaths per 1,000 live births during that time (Figure 48).
- The types of unintentional injuries leading to non-fatal emergency department visits among young children (birth to age 4) are similar in the Colorado River Indian Tribes Region to the state as a whole. Between 2018 and 2022, the majority of emergency department visits among young children in the region were due to falls (n=102), followed by smaller numbers due to natural or environmental reasons (n=26), being struck by or against an object (n=19) or other causes (n=26). Natural or environmental reasons made up 12% of emergency visits in the region compared to 7% in the state (Figure 49).
- There were 7 deaths of children birth to age 17 in the Colorado River Indian Tribes Region between 2019 and 2021 due to accidents, congenital malformations (birth defects), low birthweight, intentional self-harm or suicide and cancer/malignant neoplasms.<sup>346</sup>

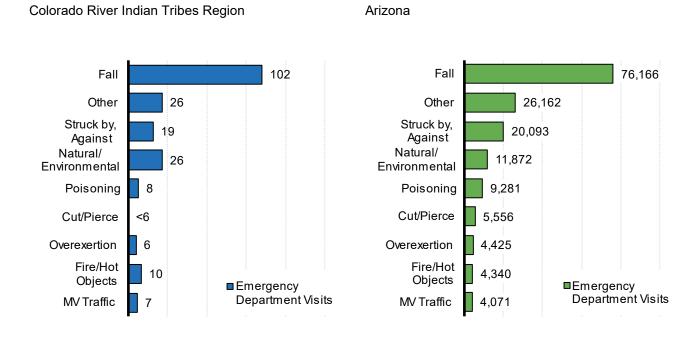
Figure 46. Infant mortality rates, 2019 to 2021 combined



Source: Arizona Department of Health Services (2023). [Vital Statistics Mortality Report dataset]. Unpublished data.

Note: Infant mortality rates are the number of infant deaths (babies under age 1) per 1,000 live births.

Figure 47. Non-fatal emergency department visits due to unintentional injuries for children birth to age 4 by selected mechanism of injury, 2018-2022 combined



Source: Arizona Department of Health Services (2023). [Hospital Discharge dataset]. Unpublished data.

Additional data tables related to *Child Health* can be found in Appendix 1 of this report.



# **FAMILY SUPPORT AND LITERACY**

# FAMILY SUPPORT AND LITERACY

## **Why it Matters**

Children's long-term well-being and success is tied to their relationships and experiences with their caregivers. Adverse childhood experiences (ACEs) refer to childhood experiences of abuse, neglect and other life events that can negatively impact children's immediate and long-term well-being. xxi, 347 ACEs have been associated with negative effects on development, educational achievement, future employment, mental health, drug and alcohol use and overall increased health care utilization. 348, 349, 350 ACEs are more prevalent among Arizona children with special health care needs and children living in poverty.<sup>351</sup>

Social, physical, academic and economic outcomes are positively influenced by healthy relationships and interactions with family members and caregivers during childhood. 352, 353, 354, 355, 356 An understanding of, and ability to utilize, positive parenting skills is an important protective factor that reduces the likelihood of abuse and neglect, leading to better childhood and long-term outcomes.<sup>357</sup> Positive Childhood Experiences (PCEs), including positive parent-child relationships and feelings of safety and support, have been shown to have positive long term impacts on mental and relational health. 358 Even if children have experienced multiple ACEs, if their families show high levels of resilience and connection (e.g., working together to solve problems, staying hopeful in difficult times and talking together about things that matter to their family) they show higher rates of flourishing, characterized by healthy social and emotional development and an open and engaged approach to learning. 359 These higher flourishing scores coupled with higher ACE scores point to the reality that childhood flourishing can, and does, exist amid adverse experiences and can potentially help mitigate their negative health effects. <sup>360</sup> Supporting families with the knowledge and skills to promote resilience and connection can therefore be critical for ensuring children's long-term well-being.

### What the Data Tell Us

#### Early literacy and developmental support

Parents and families can play an important role in promoting early academic skills. When families read, sing and tell stories together, it can help young children develop reading and writing fluency as well as their capacity for reading comprehension. <sup>361, 362, 363</sup> Literacy practices at home have also been found to increase children's motivation to learn.<sup>364</sup> These early literacy skills are important because they are linked to durable outcomes including elementary school performance and overall educational achievement.<sup>365</sup>

xxi ACEs include 8 categories of traumatic or stressful life events experienced before the age of 18 years. The 8 ACE categories are sexual abuse, physical abuse, emotional abuse, household adult mental illness, household substance abuse, domestic violence in the household, incarceration of a household member, and parental divorce or separation.

Some families may face challenges to implementing literacy practices with their young children, especially when they are low-resourced. Barriers include being unfamiliar with child development benchmarks, having limited free time to spend with children, and lower access to books in the home. 366 In Arizona, reading scores have been slowly approaching the national average, however American Indian students still have the lowest scores as a group. 367 Community programs, family resources centers, home visitation and larger-scale initiatives can help caregivers implement home-based literacy practices to improve children's reading scores. Recognizing the influence caregivers can have, the American Academy of Pediatrics suggests that pediatricians provide information to families about the benefits of early literacy practices. Doctor's offices and other community locations are also places where initiatives like Read on Arizona and Reach Out & Read may provide books and other materials that families can bring home. <sup>368</sup>

#### How the Colorado River Indian Tribes Region is faring

 A caregiver survey was administered between 2021 and 2022 as part of 2022 Regional Needs and Assets Report to understand the characteristics and experiences of parents and other primary caregivers in the Colorado River Indian Tribes Region. When asked what types of services and support they most need for their child(ren), caregiver respondents most frequently answered child development (53%), nutrition and physical activity (44%), early literacy (44%) and behavior (40%). <sup>369</sup> Fewer responded health services (22%), guardianship (18%), special education (13%) and legal (13%).

#### Substance use disorders

Parental substance use has major implications for children's health and well-being. Children of parents with substance use disorders are frequently referred to child welfare services due to neglect or abuse and face a higher risk of later mental health and behavioral health issues, including developing substance use disorders themselves. 370, 371 Access to treatment for substance use disorders and supports for parents and families grappling with these issues can help to ameliorate the short and long-term impacts on young children. 372, 373

#### How the Colorado River Indian Tribes Region is faring

- Between 2018 and 2021, there were fewer than 6 deaths with opiates or opioids contributing in the Colorado River Indian Tribes Region (Table 36). However, it is important to note that this only includes deaths occurring within the region and with address data that allowed the death to be properly assigned to a FTF region, meaning this may be an undercount.
- In La Paz County, there were fewer than 6 deaths with opiates or opioids contributing per year from 2018 to 2021, with 0 deaths in 2021. La Paz County had fewer than 10 nonfatal overdoses per year, which then increased to 12 nonfatal overdoses in 2021.<sup>374</sup>

Table 37. Number of deaths with opiates or opioids contributing, 2018-2021 combined

Geography	Number of deaths with opiates or opioids contributing, 2018-2021
Colorado River Indian Tribes Region	<6
La Paz County	10
Arizona	6,315

Source: Arizona Department of Health Services (2023). [Vital Statistics dataset]. Unpublished data.

Note: About 35% of overdose deaths statewide were missing address information and thus could not be geocoded to an FTF region.

#### Child removals and foster care

In situations where the harm in remaining with their family is determined to be too great to a child, they may be removed from their home, either temporarily or permanently. In accordance with the Indian Child Welfare Act of 1978 (ICWA), nearly all tribal governments set their own child welfare laws and manage their own child welfare systems. TCWA established national standards to prevent unwarranted removals and policies for all state custody proceedings involving Indian children. Under ICWA, an Indian child's family and tribe are able and encouraged to be actively involved in the decision-making that takes place regarding the child, and they may petition for tribal jurisdiction over the custody case. TCWA also mandates that states make every effort to preserve Indian family units by providing family services before an Indian child is removed from his or her family and after an Indian child is removed through family reunification efforts. To Despite being challenged recently by several states, ICWA was upheld by the supreme court. To Despite being challenged recently by several states, ICWA was upheld by the supreme court. To Despite being challenged recently by several states, ICWA was upheld by the supreme court. To Despite being challenged recently by several states, ICWA was upheld by the supreme court. To Despite being challenged recently by several states, ICWA was upheld by the supreme court. To Despite being challenged recently by several states, ICWA was upheld by the supreme court. To Despite being challenged recently by several states, ICWA was upheld by the supreme court.

The Family First Prevention Services Act, signed into federal law on February 9, 2018, aims to ensure children are placed in the least restrictive, most family-like setting appropriate to their unique needs when foster care is needed. One effect of the Family First Prevention Services Act has been an increased focus on kinship placements, which are placements of children with relatives or close family friends. In recent years, the number of unlicensed kinship homes has even exceeded the number of foster homes in Arizona. More than half of American Indian and Alaska Native children (55%) in foster care in Arizona were in kinship placements, a much higher rate of kinship placement than that seen nationwide. Sa3

#### How the Colorado River Indian Tribes Region is faring

• Child welfare services in the Colorado River Indian Tribes Region are provided by the Colorado River Indian Tribes Department of Health and Social Services.<sup>384</sup> Referrals to social services

increased between 2019 and 2021, especially for cases of neglect (increasing from 31 in 2019 to 96 in 2020 and 99 in 2021) and cases where alcohol or substance abuse were involved (increasing from 33 in 2019 to 79 in 2020) (Table 37). The 2022 Regional Needs and Assets Report indicated that 28% of child welfare referrals were substantiated. 385

- Data provided for the 2022 Regional Needs and Assets Report by the Colorado River Indian Tribes Police Department indicated that domestic violence arrests also increased from 93 in 2019 to 119 in 2020 and stayed elevated at 117 arrests in 2021. 386
- In 2021, 137 children (under age 18) had been removed by Tribal Child Protective Services (CPS) and were in out of home placements, 31 of whom were birth to age 5. Nine young children and 15 children of all ages were in Indian Child Welfare Act (ICWA) placements (Table 38).

Table 38. Referrals to Colorado River Indian Tribes Social Services, 2019 to 2021

	2019	2020	2021
Child Abuse	22	33	26
Child Neglect	31	96	99
Alcohol or substance use involved	33	79	51

Source: First Things First (2022). First Things First Colorado River Indian Tribes Regional Needs and Assets Report. Retrieved from https://files.firstthingsfirst.org/regions/Publications/Regional%20Needs%20and%20Assets%20-%202022%20-%20CRIT.pdf

Table 39. Children removed by Tribal CPS & children in out-of-home and ICWA placements, 2021

	Children birth to age 5	Children birth to age 17
Children removed by Tribal CPS	31	137
Children in out of home placements	31	137
ICWA placements	9	15

Source: First Things First (2022). First Things First Colorado River Indian Tribes Regional Needs and Assets Report. Retrieved from https://files.firstthingsfirst.org/regions/Publications/Regional%20Needs%20and%20Assets%20-%202022%20-%20CRIT.pdf

# **APPENDIX 1: ADDITIONAL DATA TABLES**

# **Population Characteristics**

Table 40. Population of children birth to age 5 by single years of age in the 2020 Census

Geography Colorado River Indian Tribes Region	Population (Ages 0-5)	Population under age 1	Population age 1	Population age 2	Population age 3	Population age 4	Population age 5
Colorado River Indian Tribes (entire)	751	99	113	126	146	140	127
All Arizona Reservations	15,140	2,183	2,338	2,492	2,570	2,733	2,824
Arizona	480,744	72,415	75,163	78,159	82,033	84,600	88,374
United States	22,401,565	3,480,117	3,532,512	3,672,703	3,797,741	3,917,162	4,001,330

Source: U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC), Tables P1, P14. U.S. Census Bureau (2010). 2010 Decennial Census, Summary File 1, Tables P1, P14.

Table 41. Race and ethnicity of the population of all ages, 2020 Census

Geography Colorado River Indian Tribes Region	Estimated population (all ages)	Hispanic or Latino 38%	White, not Hispanic or Latino	Black or African American 2%	American Indian or Alaska Native	Asian or Pacific Islander 2%	Two or more races
Colorado River Indian Tribes (entire)	8,431	34%	36%	2%	38%	2%	16%
All Arizona Reservations	173,499	6%	5%	1%	93%	1%	3%
La Paz County	16,557	25%	58%	1%	21%	2%	12%
Arizona	7,151,502	31%	57%	6%	6%	5%	14%
United States	331,449,281	19%	62%	14%	3%	8%	10%

Source: U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC), P6, P7, P8, P9, P12, P12A-W.

Note: The six percentages in each row may sum to more or less than 100% because (a) persons reporting Hispanic ethnicity are counted twice if their race is Black, American Indian, Asian, Pacific Islander, or any combination of two or more races, (b) persons reporting any other race are not counted here unless they have Hispanic ethnicity, and (c) rounding.

Table 42. Race and ethnicity of children birth to age 4, 2020 Census

Geography	Estimated number of children (birth to age 4)	Hispanic or Latino	White, not Hispanic or Latino	Black or African American	American Indian or Alaska Native	Asian or Pacific Islander	Two or more races
Colorado River Indian Tribes Region	584	47%	16%	2%	55%	2%	23%
Colorado River Indian Tribes (entire)	624	47%	18%	2%	53%	3%	23%
All Arizona Reservations	12,316	8%	3%	1%	95%	1%	4%
La Paz County	772	48%	23%	2%	42%	3%	22%
Arizona	392,370	44%	42%	10%	8%	7%	21%
United States	18,400,235	25%	54%	18%	4%	9%	16%

Source: U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC), P6, P7, P8, P9, P12, P12A-W.

Note: The six percentages in each row may sum to more or less than 100% because (a) children reporting Hispanic ethnicity are counted twice if their race is Black, American Indian, Asian, Pacific Islander, or any combination of two or more races, (b) children reporting any other race are not counted here unless they have Hispanic ethnicity, and (c) rounding.

Table 43. Race and ethnicity for the mothers of babies born in 2020 and 2021

Geography	Calendar year	Number of births	Mother was non-Hispanic White	Latina	Mother was Black or African American	Mother was American Indian or Alaska Native	Mother was Asian or Pacific Islander
Colorado River Indian Tribes	2020	100	38%	33%	1 to 5%	27%	1 to 5%
Region	2021	103	29%	42%	0%	29%	0%
La Paz County	2020	154	42%	36%	0.6 to 3.2%	18%	0.6 to 3.2%
La Faz County	2021	165	38%	41%	0%	20%	0.6 to 3%
Arizona	2020	76,781	43%	41%	6%	5%	4%
Alizulia	2021	77,857	43%	41%	6%	5%	4%

Source: Arizona Department of Health Services (2023). [Vital Statistics Births dataset]. Unpublished data.

Note: The five percentages in each row should sum to 100%, but may not because of rounding. Mothers who report more than one race or ethnicity are assigned to the one which is smaller. Mothers of twins are counted twice in this table.

Table 44. Children birth to age 5 living with parents who are foreign-born, 2017-2021 ACS

Geography	Estimated number of children (birth to age 5) living with one or two parents	Number and percent living	with one or two foreign-born parents
Colorado River Indian Tribes Region	566	125	22%
Colorado River Indian Tribes (entire)	637	125	20%
All Arizona Reservations	14,097	191	1%
La Paz County	706	159	23%
Arizona	473,732	115,267	24%
United States	22,399,131	5,504,770	25%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B05009

Note: The term "parent" here includes stepparents.

Table 45. Language spoken at home (by persons ages 5 and older), 2017-2021 ACS

Geography	Estimated population (age 5 and older)	Speak only English at home	Speak Spanish at home	Speak languages other than English or Spanish at home
Colorado River Indian Tribes Region	6,737	69%	29%	2%
Colorado River Indian Tribes (entire)	8,114	73%	25%	2%
All Arizona Reservations	166,148	47%	3%	50%
La Paz County	16,091	81%	16%	2%
Arizona	6,666,597	73%	20%	6%
United States	310,302,360	78%	13%	8%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table C16001

Note: The three percentages in each row may not sum to 100% because of rounding. The American Community Survey (ACS) no longer specifies the proportion of the population who speak Native North American languages for geographies smaller than the state. In Arizona, Navajo and other Native American languages (including Apache, Hopi, and O'odham) are the most commonly spoken (2%), following English (73%) and Spanish (20%).

Table 46. English-language proficiency (for persons ages 5 and older), 2017-2021 ACS

Geography	Estimated population (age 5 and older)	Speak only English at home	Speak another language at home, and speak English very well	Speak another language at home, and do not speak English very well
Colorado River Indian Tribes Region	6,737	69%	22%	9%
Colorado River Indian Tribes (entire)	8,114	73%	19%	8%
All Arizona Reservations	166,148	47%	41%	12%
La Paz County	16,091	81%	12%	6%
Arizona	6,666,597	73%	18%	8%
United States	310,302,360	78%	13%	8%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table C16001

Note: The three percentages in each row should sum to 100%, but may not because of rounding.

Table 47. Limited-English-speaking households, 2017-2021 ACS

Geography	Estimated number of households		of limited-English-speaking households
Colorado River Indian Tribes Region	2,999	159	5%
Colorado River Indian Tribes (entire)	3,710	159	4%
All Arizona Reservations	52,248	6,361	12%
La Paz County	8,678	375	4%
Arizona	2,683,557	99,159	4%
United States	124,010,992	5,241,326	4%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table C16002

Note: A "limited-English-speaking" household is one in which no one over the age of 13 speaks English very well.

Table 48. Grandchildren birth to age 5 living in a grandparent's household, 2020 Census

Geography	Estimated number of children (birth to age 5) living in households	Number and percent liv	ing in their grandparent's household
Colorado River Indian Tribes Region	703	138	20%
Colorado River Indian Tribes (entire)	751	146	19%
All Arizona Reservations	15,140	6,558	43%
La Paz County	949	162	17%
Arizona	480,744	64,792	13%
United States	22,401,565	2,520,305	11%

Source: U.S. Census Bureau (2022). 2020 Decennial Census, Demographic and Housing Characteristics (DHC), Tables P14, PCT11.

Note: This table includes all children (under six years old) living in a household headed by a grandparent, regardless of whether the grandparent is responsible for them, or whether the child's parent lives in the same household.

### **Economic Circumstances**

Table 49. Median annual family income, 2017-2021 ACS

Geography	Median annual income for all families	Median annual income for all families with children under 18 years old	Median annual income for married- couple families with children under 18 years old	Median annual income for single- male-headed families with children under 18 years old	Median annual income for single- female-headed families with children under 18 years old
Colorado River Indian Tribes Region	\$57,200	\$53,000	\$69,500	\$51,400	\$33,600
Colorado River Indian Tribes (entire)	\$54,600	\$54,000	\$70,800	\$51,500	\$33,800
All Arizona Reservations		All Ariz	zona reservations data	not available	
La Paz County	\$49,900	\$49,300	\$70,600	\$49,600	\$26,000
Arizona	\$78,800	\$75,100	\$100,000	\$49,100	\$35,000
United States	\$85,000	\$82,800	\$110,000	\$50,900	\$32,600

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B19126

Note: Half of the families in the population are estimated to have incomes above the median value, and the other half have incomes below the median.

Table 50. Children birth to age 5 living at selected poverty thresholds, 2017-2021 ACS

Geography	Estimated number of children (birth to age 5) who live with parents or other relatives	Percent of children under 50% of the poverty level	Percent of children between 50% and 99% of the poverty level	Percent of children between 100% and 184% of the poverty level	Percent of children at or above 185% of the poverty level
Colorado River Indian Tribes Region	579	8%	22%	23%	47%
Colorado River Indian Tribes (entire)	650	7%	20%	26%	46%
All Arizona Reservations	15,304	27%	22%	22%	30%
La Paz County	737	11%	20%	20%	48%
Arizona	486,513	9%	11%	19%	61%
United States	22,940,195	9%	10%	16%	65%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B17024

Note: The four percentages in each row should sum to 100%, but may not because of rounding. In 2021, the poverty threshold for a family of two adults and two children was \$27,479; for a single parent with one child, it was \$18,677. The 185% thresholds are \$50,836 and \$34,552, respectively.

Table 51. Families participating in SNAP, state fiscal years 2018 to 2022

Geography Colorado River Indian Tribes Region	Households with one or more children (ages 0-5)		SFY 2019	nilies particip SFY 2020 <b>27</b> 0	ating in SNAF SFY 2021 252	SFY 2022 231	Percent of households with young children (0- 5) participating in SNAP in SFY 2022
La Paz County	708	519	471	405	383	371	52%
Arizona	345,601	151,816	140,056	132,466	131,063	128,460	37%

Sources: Arizona Department of Economic Security (2023). [Division of Benefits and Medical Eligibility dataset]. Unpublished data. & U.S. Census Bureau (2023). 2020 Decennial Census, DHC, Table P14 & P20.

Table 52. Children participating in SNAP, state fiscal years 2018 to 2022

	Number of young children (ages 0-5) in	Nun	nber of childr	en (0-5) parti	cipating in SI	NAP	Percent of young children (0-5) participating in
Geography	the population	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SNAP in SFY 2022
Colorado River Indian Tribes Region	703	573	524	454	411	395	56%
La Paz County	949	856	764	665	618	595	63%
Arizona	480,744	229,275	211,814	198,961	194,771	190,968	40%

Sources: Arizona Department of Economic Security (2023). [Division of Benefits and Medical Eligibility dataset]. Unpublished data. & U.S. Census Bureau (2023). 2020 Decennial Census, DHC, Table P14 & P20.

Table 53. Lunches served through NSLP, 2019-20 to 2021-22

	Number of sites			Number of lunches served			
Geography	2019-20	2020-21	2021-22	2019-20	2020-21	2021-22	
Parker Unified Schools	5	0	5	200,949	0	42,379	
Blake Primary School	1	0	1	48279	0	10,604	
Le Pera Elementary School	1	0	1	24672	0	8,268	
Wallace Elementary School	1	0	1	44165	0	11,818	
Wallace Jr High School	1	0	1	45731	0	7,013	
Parker High School	1	0	1	38102	0	4,676	
La Paz County Schools	N/A	3	10	255,066	21,503	68,627	
Arizona Schools	N/A	1,247	1,886	76,454,370	22,911,751	44,010,999	

Source: Arizona Department of Education (2023). [Health and Nutrition Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

Table 54. Lunches served through SFSP, 2019-20 to 2021-22

	Number of sites			Number of lunches served		
Geography	2019-20	2020-21	2021-22	2019-20	2020-21	2021-22
Parker Unified Schools	2	8	8	43,203	307,288	310,329
Blake Primary School	1	1	1	7,426	61865	63,037
Le Pera Elementary School	0	1	1	7131	40,426	42,541
Wallace Elementary School	1	1	1	28,646	116422	115,203
Parker High School	0	5	5	0	88,575	89,548
La Paz County Schools	N/A	11	10	70,828	395,658	394,051
Arizona Schools	N/A	2,926	2,346	21,786,393	148,207,987	130,780,150

Source: Arizona Department of Education (2023). [Health and Nutrition Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

Table 55. Parents of children birth to age 5 who are or are not in the labor force, 2017-2021 **ACS** 

Geography	Estimated number of children (birth to 5 years old) living with parent(s)	Living with two married parents, both in the labor force	Living with two married parents, one in the labor force and one not	Living with two married parents, neither in the labor force	Living with one parent, in the labor force	Living with one parent, not in the labor force
Colorado River Indian Tribes Region	566	25%	24%	0%	43%	8%
Colorado River Indian Tribes (entire)	637	25%	24%	0%	44%	7%
All Arizona Reservations	14,097	11%	14%	3%	38%	35%
La Paz County	706	21%	19%	1%	48%	11%
Arizona	473,732	33%	27%	1%	30%	8%
United States	22,399,131	40%	25%	1%	26%	7%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B23008

Note: The labor force is all persons who are working (employed) or looking for work (unemployed). Persons not in the labor force are mostly students, stay-at-home parents, retirees, and institutionalized people. The term "parent" here includes step-parents. The five percentages in each row should sum to 100%, but may not because of rounding. Please note that due to the way the ACS asks about family relationships, children living with two unmarried, cohabitating parents are not counted as living with two parents (these children are counted in the 'one parent' category).

Table 56. Persons of all ages in households with and without computers and internet connectivity, 2017-2021 ACS

Geography	Estimated number of persons (all ages) living in households	Have a computer and internet	Have a computer but no internet	Do not have a computer
Colorado River Indian Tribes Region	7,114	77%	13%	9%
Colorado River Indian Tribes (entire)	8,555	79%	11%	9%
All Arizona Reservations	177,201	51%	23%	26%
La Paz County	16,650	76%	15%	8%
Arizona	6,930,677	90%	6%	4%
United States	321,899,278	90%	6%	4%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B28005

Note: The three percentages in each row should sum to 100%, but may not because of rounding.

Table 57. Children birth to age 17 in households with and without computers and internet connectivity, 2017-2021

Geography	Estimated number of children (ages 0-17) living in households	Have a computer and internet	Have a computer but no internet	Do not have a computer
Colorado River Indian Tribes Region	2,014	80%	15%	5%
Colorado River Indian Tribes (entire)	2,203	81%	13%	6%
All Arizona Reservations	52,122	55%	24%	21%
La Paz County	2,784	84%	12%	5%
Arizona	1,611,069	92%	6%	2%
United States	74,041,861	93%	5%	2%

Source: U.S. Census Bureau. (2022). American Community Survey five-year estimates 2017-2021, Table B28005

Note: The three percentages in each row should sum to 100%, but may not because of rounding.

# **Educational Indicators**

Table 58. Kindergarten to 3rd grade students with chronic absences, 2019-20 to 2021-22

	K-3 Studen	ts with chroni	c absences	Percent of K-3 students with chronic absences		
Geography	2019-20	2020-21	2021-22	2019-20	2020-21	2021-22
Parker Unified School District	68	165	322	12%	31%	54%
La Paz County schools	91	181	360	12%	26%	48%
Arizona schools	25,382	56,547	100,955	8%	21%	34%

Source: Arizona Department of Education (2023). [Absenteeism Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

Note: Students are considered chronically absent if they miss more than 10% of the school days in a school year. This table includes children who are absent due to chronic illness..

# **Early Learning**

Table 59. School enrollment for children ages 3 to 4, 2017-2021 ACS

Geography	Estimated number of children (3 or 4 years old)	Number a	and percent enrolled in school
Colorado River Indian Tribes Region	196	99	51%
Colorado River Indian Tribes (entire)	225	114	51%
All Arizona Reservations	5,701	2,326	41%
La Paz County	254	99	39%
Arizona	176,033	63,974	36%
United States	8,100,136	3,719,992	46%

Source: U.S. Census Bureau. (2023). American Community Survey five-year estimates 2017-2021, Table B14003

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

Table 60. Children receiving DES child care assistance, 2017 to 2022

	Number of children receiving assistance			Percent of eligible children receiving assistance								
Geography	CY 2017	CY 2018		CY 2020	CY 2021	CY 2022	CY 2017	CY 2018	CY 2019	CY 2020	CY 2021	CY 2022
Colorado River Indian Tribes Region	10	11	1 to 9	25	21	15	83%	73%	DS	100%	44%	60%
La Paz County	1 to 9	12	1 to 9	27	12	16	DS	71%	DS	100%	43%	62%
Arizona	16,922	19,813	23,155	19,909	22,359	20,099	93%	92%	92%	80%	88%	90%

Source: Arizona Department of Economic Security (2023). [Child Care Administration dataset]. Unpublished data.

Table 61. Eligible families not using DES child care assistance, 2017 to 2022

Geography	CY 2017	CY 2018	CY 2019	CY 2020	CY 2021	CY 2022
Colorado River Indian Tribes Region	22.2%	33.3%	DS	0%	51.5%	31.3%
La Paz County	30%	30.8%	DS	0%	51.4%	29.4%
Arizona	6.7%	7.6%	7.9%	18.3%	11.7%	9.2%

Source: Arizona Department of Economic Security (2023). [Child Care Administration dataset]. Unpublished data.

Table 62. Children receiving DES child care assistance who are enrolled in quality environments, 2022

	Children ages 0-5 (non-DCS involved)			DCS-involved children ages 0-5		
		Enrolled in	Percent in		Enrolled in	Percent in
	Received	quality	quality	Received	quality	quality
Geography	assistance	environment	environment	assistance	environment	environment
Colorado River Indian Tribes Region	15	15	100%	1 to 9	1 to 9	100%
La Paz County	16	15	94%	1 to 9	1 to 9	100%
Arizona	20,099	13,619	68%	8,268	5,969	72%

Source: Arizona Department of Economic Security (2023). [Child Care Administration dataset]. Unpublished data.

Note: Quality environments are defined by DES as child care providers with a 3-, 4-, or 5-star Quality First rating, a national accreditation, or a Child Development Associate (CDA) credential for family child care providers.

Table 63. Number of children birth to age 2 receiving services from AzEIP as of October 1, 2018 to 2022

Geography	2018	2019	2020	2021	2022
Colorado River Indian Tribes Region	11	1 to 9	11	10	12
La Paz County	1 to 9	1 to 9	1 to 9	14	16
Arizona	5,974	5,828	5,403	5,275	5,473

Sources: Arizona Department of Economic Security (2023). [Arizona Early Intervention Program dataset]. Unpublished data.

Note: These data reflect the Oct 1 snapshot of AzEIP services, not a cumulative total throughout the year.

Table 64. Preschoolers with disabilities receiving services through Local Education Agencies (LEAs), state fiscal years 2018 to 2022

	Preschoolers enrolled in special education				
Geography	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
Colorado River Indian Tribes Region	25	24	34	24	24
La Paz County	25	24	36	24	25
Arizona	10,123	10,314	10,521	8,537	8,086

Source: Arizona Department of Education (2023). [Special Needs Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

Table 65. Preschoolers with disabilities receiving services through Local Education Agencies by type of disability, state fiscal years 2018-2022 combined

Geography Colorado River Indian Tribes Region	Total Preschoolers DS	Development al Delay 75%	Speech or Language Impairment	Preschool Severe Delay 4%	Other Disability 4%
La Paz County	DS	72%	20%	4%	4%
Arizona	47,581	42%	34%	21%	2%

Source: Arizona Department of Education (2023). [Special Needs Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

Note: The "Other Disability" category includes children with hearing impairment, visual impairment, or deaf-blindness. Denominators in this table are suppressed when they could be used to calculate a count of less than 11 students in a disability category. The only offreservation schools with enrolled PS-3<sup>rd</sup> graders were Sanders Elementary School (in Sanders Unified District) and Sand & Sage Academy (in Page Unified District). All other off-reservation schools included in this report are middle and high schools.

Table 66. Kindergarten to 3rd grade students enrolled in special education in public and charter schools, state fiscal years 2018 to 2022

	K-3rd grade students enrolled in special education					
Geography	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	
Colorado River Indian Tribes Region	97	111	127	120	128	
La Paz County	119	129	144	137	143	
Arizona school	36,468	37,812	38,791	37,179	37,334	

Source: Arizona Department of Education (2023). [Special Needs Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

Note: See Appendix 4 for a list of off-reservation schools serving students from the region. The only off-reservation schools with enrolled PS-3<sup>rd</sup> graders were Sanders Elementary School (in Sanders Unified District) and Sand & Sage Academy (in Page Unified District). All other off-reservation schools included in this report are middle and high schools.

Table 67. Kindergarten to 3rd grade students enrolled in special education in public and charter schools by primary disability, state fiscal years 2018-2022 combined

Geography Colorado River Indian Tribes Region	Total K-3rd grade students DS	Speech or Language Impairment 30%	Developmental	Specific Learning Disability 25%	Autism 6%	Other Disability 13%
La Paz County	DS	32%	26%	22%	7%	13%
Arizona	187,584	37%	25%	14%	10%	13%

Source: Arizona Department of Education (2023). [Special Needs Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team

Note: The "Other Disabilities" category includes children with emotional disturbance, deafness, deaf-blindness, hearing impairment, intellectual disability, multiple disabilities, orthopedic impairment, other health impairments such as chronic medical conditions that affect a child's ability to participate in the educational setting, traumatic brain injury, or visual impairment.

### **Child Health**

Table 68. Births to mothers with gestational diabetes or pre-pregnancy obesity, 2020 to 2021

Geography	Calendar year	Number of births	Mother had gestational diabetes	Mother had pre-pregnancy obesity
Colorado Biyar Indian Tribas Bagian	2020	100	1 to 5%	39%
Colorado River Indian Tribes Region	2021	103	1 to 4.9%	37%
All A : D	2020	1,900		
All Arizona Reservations	2021	Data for All A	rizona Reservatio	ns not available
La Bar Count	2020	154	3.9%	32%
La Paz County	2021	165	4.2%	22%
	2020	76,781	10%	27%
Arizona	2021	77,857	10%	27%

Source: Arizona Department of Health Services (2023). [Vital Statistics Births dataset]. Unpublished data.

Note: Mothers of twins are counted twice in this table. 'All Arizona Reservations' row reflects only births to American Indian mothers residing on Arizona reservations and does not include data on gestational diabetes or obesity. The Health status profile of American Indian in Arizona for 2021 has not yet been released.

Table 69. Confirmed and probable cases of infectious diseases in children birth to age 5, 2019 to 2022

	Confirmed & probable RSV cases			Confirmed & probable Influenza cases				
Geography	CY 2019	CY 2020	CY 2021	CY 2022	CY 2019	CY 2020	CY 2021	CY 2022
Colorado River Indian Tribes Region	6	1 to 5	13	14	20	12	0	23
La Paz County	6	1 to 5	16	14	26	16	0	31
Arizona	4,840	4,459	4,935	9,606	6,459	6,094	508	7,334

Source: Arizona Department of Health Services (2023). [FTF VPD Flu RSV dataset]. Unpublished data.

Table 70. Non-fatal hospitalizations and emergency department visits due to unintentional injuries for children birth to age 5, 2018-2022 combined

Geography	Non-fatal inpatient hospitalizations for unintentional injuries	Non-fatal emergency department visits for unintentional injuries
Colorado River Indian Tribes Region	1 to 9	209
La Paz County	1 to 9	335
Arizona	2,811	160,742

Source: Arizona Department of Health Services (2023). [Hospital Discharge dataset]. Unpublished data.

Note: Data on hospitalizations were geocoded to FTF regions using the address provided by parents or caregivers at the time of hospitalization; however, in cases where the address provided was not valid, hospitalizations could not be assigned to a region. County of residence is captured separately from addresses, meaning that counts in the county often exceed those seen in a particular region because they include all hospitalizations regardless of address validity.

# **APPENDIX 2: METHODS AND DATA SOURCES**

U.S. Census and American Community Survey Data. The U.S. Census<sup>387</sup> is an enumeration of the population of the United States. It is conducted every ten years, and includes information about housing, race, and ethnicity. The 2020 U.S. Census data are available by census block. There are about 108,000 inhabited blocks in Arizona, with an average population of 66 people each. Both the 2010 and 2020 Census data for the Colorado River Indian Tribes Region presented in this report are drawn from the Census Geography for the Arizona portion of the Colorado River Indian Reservation. Please note that the 2020 reservation geography is slightly different than the geography of the First Things First region, which is based on the reservation geography as of 2015.

The American Community Survey (ACS)<sup>388</sup> is a survey conducted by the U.S. Census Bureau each month by mail, telephone, and face-to-face interviews. It covers many different topics, including income, language, education, employment, and housing. ACS data are available by census tract. Arizona is divided into about 1,750 census tracts, with an average of about 3,900 people in each. The ACS data for the Colorado River Indian Tribes Region presented in this report are drawn from the Census Geography for the Arizona portion of the Colorado River Indian Reservation. The most recent and most reliable ACS data are averaged over the past five years; those are the data included in this report. They are based on surveys conducted from 2017 to 2021. In general, the reliability of ACS estimates is greater for more populated areas. Statewide estimates, for example, are more reliable than county-level estimates.

Education Data from ADE. Education data from the Arizona Department of Education (ADE) included in this report were obtained through a custom tabulation of unredacted data files conducted by the vendor on a secure ADE computer terminal in the fall of 2023. The vendor worked with the regional director to create a list of all public and charter schools in the region based on the school's physical location within the region as well as local knowledge as to whether any schools located outside the region served a substantial number of children living within the region. This list was used to assign schools and districts to the region and to aggregate school-level data to the region-level. This methodology differs slightly from the methods that ADE uses to allocate school-level data to counties, so county and region totals may vary in some tables. Data were presented over time where available; however, due to changes in the ADE data system as well as the effects of the COVID-19 pandemic on data collection and definitions over the past three years, some indicators could not be presented as a time series.

Change Calculations. Unless otherwise specified, changes in counts of data over time (i.e., percent increase or decrease) are calculated by subtracting the earlier number (e.g., a 2010 count) from the later number (e.g. the 2020 count) and dividing the result by the earlier number (e.g. the 2010 count). This calculation provides the percent change between the most recent count and the prior count, relative to the prior count.

Data Availability. State agency data in this report were provided to FTF by agency staff through a data request process initiated in May 2023 and extending to January 2024. Wherever possible, data were

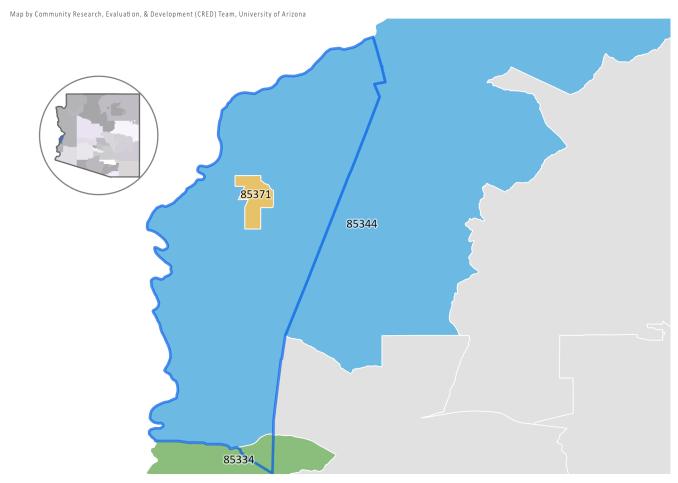
requested for multiple years to allow for the visualization of trends as well as for the most recent year available. However, due to both the constraints of agency staff and agency-maintained datasets as well as the timing of requests, not all data were available on the same time and geographic scales. This report attempts to include the most recent and complete data available, with notes indicating where data were not available for particular time periods or geographies.

Data Suppression. To protect the confidentiality of program participants, the FTF Data Dissemination and Suppression Guidelines preclude our reporting of social service and early education programming data if the count is less than 10 and preclude our reporting data related to health or developmental delay if the count is less than 6. In addition, some data received from state agencies are suppressed according to their own guidelines. ADHS does not report counts between 1 and 5; DES does not report counts between 1 and 9; ADE does not report counts less than 11. Additionally, both ADE and DES require suppression of the second-smallest value or the denominator in tables where a reader might be able to use the numbers provided to calculate a suppressed value. Throughout this report, information which is not available because of suppression guidelines is indicated by entries of "1-5" or "1-9" or "<11" for counts, or "DS" (data suppressed) for percentages. Data are sometimes not available for particular regions, either because a program did not operate in the region or because data are only available at the county level. Cases where data are not available will be indicated by an entry of "N/A" or a table row note that states "regional data not available."

For some data, an exact number was not available because it was the sum of several numbers provided by a state agency, and some numbers were suppressed in accordance with agency guidelines or because the number was suppressed as a second-smallest value that could be used to calculate a suppressed value. In these cases, a range of possible numbers is provided, where the true number lies within that range. For example, for data from the sum of a suppressed number of children enrolled in Child-only Temporary Assistance for Needy Families Cash Assistance Program (TANF) and 12 children enrolled in a household with TANF, the entry in the table would read "13 to 21." This is because the suppressed number of children in Child-only TANF is between 1 and 9, so the possible range of values is the sum of the known number (12) and 1 on the lower bound to the sum of the known number (12) plus 9 on the upper bound. Ranges that include numbers below the suppression threshold of less than 6 or 10 may still be included if the upper limit of the range is above 6 or 10. Since a range is provided rather than an exact number, the confidentiality of program participants is preserved.

# **APPENDIX 3: ZIP CODES OF THE COLORADO RIVER INDIAN TRIBES REGION**

Figure 48. Zip Code Tabulation Areas (ZCTAs) in the Colorado River Indian Tribes Region



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

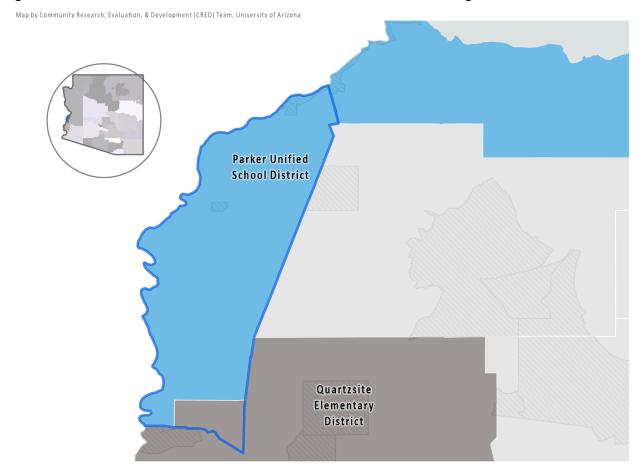
Table 71. Zip Code Tabulation Areas (ZCTAs) in the Colorado River Indian Tribes Region

Zip Code Tabulation Area (ZCTA)  Colorado River Indian Tribes Region	Population (all ages) 7,036	Percent of this ZCTA's total population living in the Colorado River Indian Tribes Region	
85344	6,770	74%	La Paz/Mohave Region
85371	266	100%	

Source: U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics, Table P1.

# **APPENDIX 4: SCHOOLS AND SCHOOL** DISTRICTS OF THE COLORADO RIVER INDIAN **TRIBES REGION**

Figure 49. School Districts in the Colorado River Indian Tribes Region



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

Table 72. School Districts and Local Education Agencies (LEAs) in the Colorado River Indian Tribes Region

Name of District or Local Education Agency (LEA)	School Name	Number of schools	
Colorado River Indian Tribes Region Schools		8	PS-12
Parker Unified School District	Blake Primary School	1	PK-2
Parker Unified School District	Wallace Elementary School	1	3-5
Parker Unified School District	Le Pera Elementary School	1	K-8
Parker Unified School District	Parker High School	1	9-12
Parker Unified School District	Wallace Jr High School	1	6-8
Parker Unified School District	Parker Alternative School	1	9-12
Western Arizona Vocational District #50	WAVE - Parker High School	1	9-12
Western Arizona Vocational District #50	WAVE- Arizona Western College	1	9-12

Source: Arizona Department of Education (2023). [Oct 1 Enrollment Dataset]. Custom tabulation of unpublished data by the UArizona CRED Team.

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