

2026

NEEDS AND ASSETS REPORT



 **FIRST THINGS FIRST**

Yuma Region

Yuma Regional Partnership Council 2026 Needs and Assets Report

Funded by the
First Things First Yuma Regional Partnership Council

Prepared by the
Community Research, Evaluation & Development (CRED) Team

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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. Arizonans created First Things First (FTF) 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 FTF Yuma 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.

The 2026 report has been redesigned in response to stakeholder feedback. The revised structure now consists of two parts: the primary report and supplementary sub-regional fact sheets.

The main report is structured around four domains relevant to young children, their families, and the professionals who support them in the region:

- Child, Family & Community Characteristics
- Early Education
- Education & Workforce
- Child Health & Development

This main report uses an infographic and figure-based approach to analyze regional-level data trends, as well as how these regional trends compare to statewide trends. Community-level data, illustrating similarities and differences within the sub-regions of the FTF Yuma Region, is detailed separately in the Fact Sheets. The FTF Yuma Regional Partnership Council recognizes the importance of investing in young children and ensuring that families and caregivers have options in 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 FTF Yuma 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.

ACKNOWLEDGMENTS

The FTF Yuma Regional Partnership Council wishes to thank all of the federal, state and local partners whose contributions of data, ongoing support and partnership with FTF made this report possible. These partners included the Arizona Departments of Administration (Employment and Population Statistics), Child Safety, Economic Security, Education and Health Services; Child Care Resource and Referral; Arizona Health Care Cost Containment System; and the U.S. Census Bureau. We also want to thank parents and caregivers, local departments and service providers and members of the public who provided local data, 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 FTF Yuma Region. Lastly, we want to acknowledge the current and past members of the FTF Yuma 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.

ABOUT THIS REPORT

The experiences in the first few years of a child's life lay the foundation for their future. Safe and healthy neighborhood environments, accessible educational opportunities, economically stable families and nurturing social contexts for young children have long-term, positive impacts. This Needs and Assets Report examines the current conditions for young children and their families—including social and economic contexts, early learning systems, education and workforce indicators, health outcomes and supports for children with special needs—in the First Things First (FTF) Yuma Region.

Sources and Data: 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 American Community Survey (ACS) 5-Year Estimates (primarily 2019-2023). The 2020 Census faced unprecedented challenges in data collection, the foremost of which was the COVID-19 pandemic and its disruption of local institutions. Due to these challenges, the 2020 Census is widely known to have undercounted young children and particular populations such as American Indians residing on reservations.¹ Data in this report from the ACS summarize the responses from samples of residents taken between 2019 and 2023. 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 or sub-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 (ADHS) and the Arizona Department of Economic Security (DES). FTF strategy data related to quality early education, professional development and home visiting were also provided. FTF partnered with the Arizona State University Center for Health Information and Research (CHiR) to create custom tabulations of claims data for young children from the Arizona Health Care Cost Containment System (AHCCCS). 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 county and state, including from state agencies such as the Arizona Department of Commerce's Office of Economic Opportunity, Arizona Department of Education (ADE), and the Arizona Department of Child Safety (DCS) semi-annual child welfare reports. When more recent data from public or state agency datasets were not available, this report cites data from past Regional Needs and Assets Reports for the region.

The data in this report are as complete as possible, but there are cases when data for specific years were unavailable or unable to be reported. State agencies have varying policies about reporting small values. Labels such as <10, <6 or "DS" indicate that a count has been suppressed to protect privacy. When data were not available for a given year or geography, the label "N/A" is used.

Color-coding: This report uses color-coding to indicate the relevant geography for each number or percentage discussed in the text as follows: **Yuma Region**, **Yuma County**, **Arizona**, and the **U.S.** Additional important numbers in the text that do not correspond to one of these geographies have been **bolded**.

Data Interpretation Session: The data compiled in this report reflect one way of knowing about the status of young children and their families, but local perspectives on what works well and what needs improvement from community experts who live, work and care for children in the region provide another vital source of information about the needs and assets in the region. First Things First Regional Partnership Council members and other key community experts participated in a facilitated data discussion in the beginning of 2026 to review the data included in this report. During this session, participants shared local knowledge and perspectives to help interpret the data and add additional context about the region. These insights are included throughout the report, attributed to "local key informants" and "local community experts."

Limitations: This report was compiled in the fall of 2025 and spring of 2026 during a time of rapid changes in federal funding and policy. The data presented reflect a particular moment in time.

First Things First 2026 Needs and Assets Report

Where possible, potential impacts of currently known policy decisions grounded in high-quality research have been included, but the full extent of the impact of policies implemented in 2025 and 2026 on early childhood well-being will not be fully clear for years to come.

Throughout this report, state-level data is included to help understand how the region is doing in comparison to Arizona overall. For a more comprehensive discussion of needs and assets at the state level, please see the First Things First 2025 Statewide Needs and Assets Report – Building Bright Futures.^a

Analysis of data and reporting of findings contained in this report were completed by Kara Habershtock Tanoue, Rachel Leih, Madeleine deBlois, Deirdre Avery, Vicki Brown, Terrace Ewinghill, Rachel Gildersleeve, Anvi Bhakta, Beatriz Reyna, Deshawna Yazzie, April Horne, Lauren Moxley, Dora Valencia, Claudia Vega and Felicia Zhang from the Community Research, Evaluation & Development (CRED) team in the John and Doris Norton School of Human Ecology at the University of Arizona.

^a The full report can be found at <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>

THE YUMA REGION

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

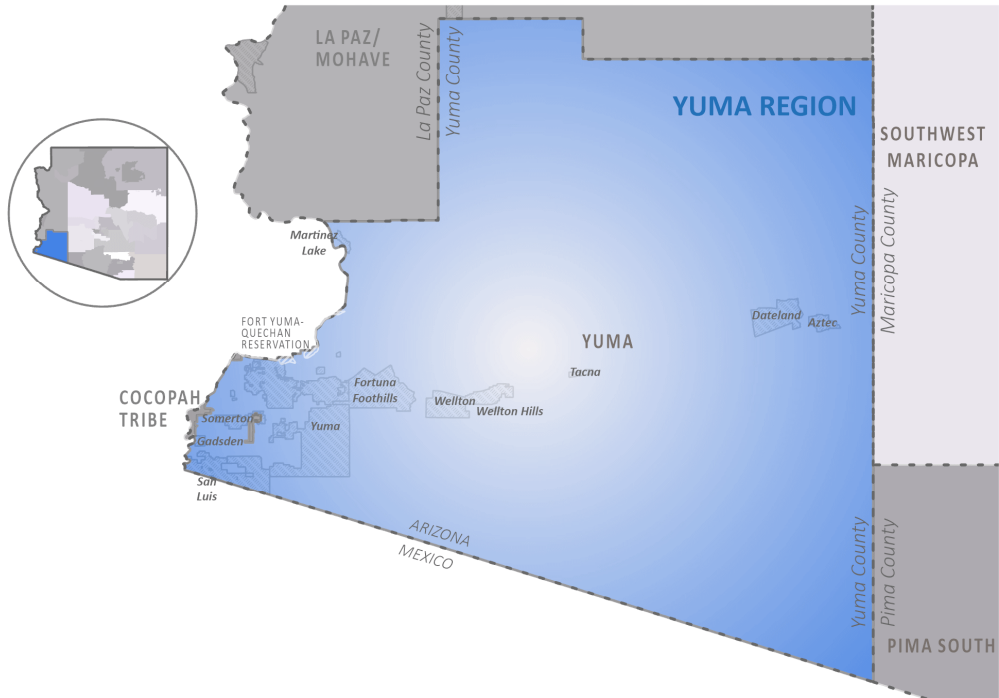
The Yuma Region lies in the southwest corner of Arizona, bordering Mexico and California. The Yuma Region has the same boundaries as Yuma County minus the Cocopah Indian Tribe reservation lands (which are included in the FTF Cocopah Tribe Region). The region does include the Arizona portion of the land belonging to the Fort Yuma Quechan Indian Tribe.

The map below shows the geographical area covered by the Yuma Region. Additional information is available at the end of this report, including a map and table of the region's zip codes and a map of Arizona public school districts in the region in the *Maps & Methods* Appendix.

First Things First 2026 Needs and Assets Report

The First Things First Yuma Region

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



FAMILY, CHILD & COMMUNITY CHARACTERISTICS

Young children in the region

While young children make up a small proportion of the overall population, their well-being has wide-reaching 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.^{2, 3} According to the 2020 Census, the Yuma Region was home to **15,249** young children birth to age 5. Between 2018 and 2023, births in the Yuma Region decreased overall from a high of **2,988** births in 2018 to a low of **2,789** births in 2023.^b Statewide, births also declined overall from 2018 to 2023, with a notable drop in 2020. Key informants noted that the rising housing and child care costs in the Yuma Region may discourage young people from having children, potentially contributing to the declining trend in births.

In line with the decrease in the number of births in recent years in the region, the number of young children counted in the 2020 Census was notably lower than in 2010, decreasing by **15%** from **17,893** young children in 2010 to **15,249** in 2020. Similarly statewide, there was a **12%** decrease in the population of young children over the same ten-year period. This contrasted with the all-age population, which increased in the region (**+4%**), although less than the **12%** increase in the overall population statewide. Key informants noted the importance of seasonality when interpreting population trends in the Yuma Region, specifically pointing to an influx in farm workers and winter visitors (or 'snowbirds') during the winter months. Recent data estimate there are almost 50,000 seasonal crop workers in Yuma County, and winter visitors increase the county population by over 70,000 people.^{4, 5} Key informants also suggested that immigration may influence population numbers. This aligns with a recent report noting a decline in population growth rates across Yuma County, largely due to declining international migration.⁶

^b Note that births are assigned to the region based on the address that parents list on the birth certificate form. This means that babies born to families residing in the region should be counted in regional birth numbers regardless of the location of the hospital where they were born.

Figure 1.

Young children in the region

The Yuma Region is home to

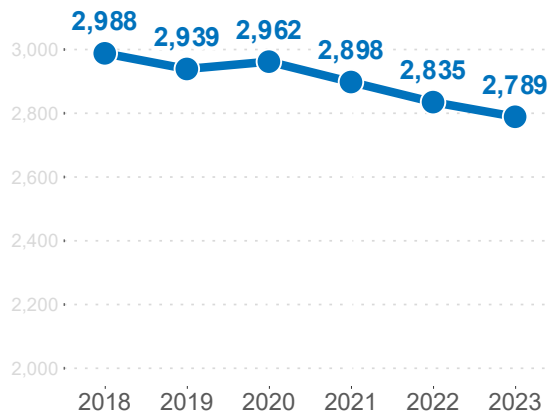
15,249

children birth to age 5 (2020)¹

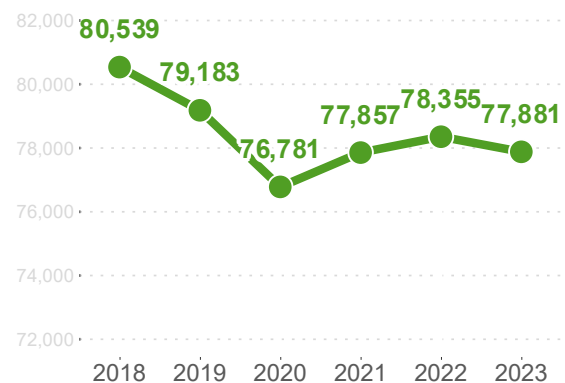


Number of births per calendar year²

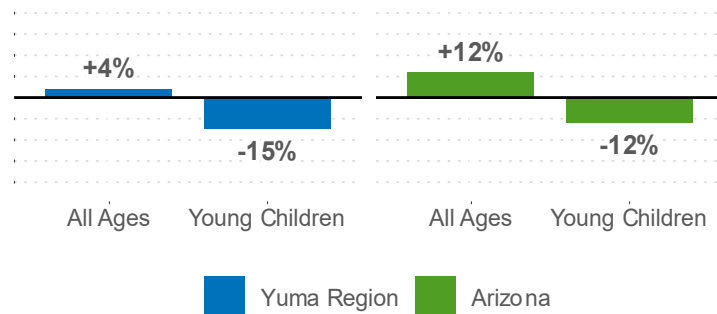
Yuma Region



Arizona



Change in population between the 2010³ and 2020¹ Census



¹ U.S. Census Bureau. (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC).

² Arizona Department of Health Services. (2024). [Vital Statistic dataset].

³ U.S. Census Bureau. (2010). 2010 Decennial Census.

Characteristics of young children and the population

According to the 2020 Census, approximately **203,024** people lived in the Yuma Region, in **69,247** households. About one in six households (**17%**) in the region included a young child birth to age 5, a higher proportion of households than across the state (**13%**) or nation (**13%**).

Understanding the racial-ethnic composition of communities can inform efforts to ensure equitable access to services and resources. According to the 2020 Census, the largest proportion of Yuma Region residents identified as Hispanic or Latino (**64%** of the total population, **79%** of young children birth to age 4). Notably more Yuma Region residents identified as Hispanic or Latino than residents statewide (**31%** of the total population and **44%** of young children).⁷ Young children in the region were less likely to be identified as non-Hispanic White (**19%**) compared to the total population (**32%**), and both were lower than these proportions across the state (**42%** of young children and **57%** of the total population identified as non-Hispanic White).⁸ Just over half (**52%**) of residents in the Yuma Region spoke Spanish at home compared to **19%** of residents statewide.⁹

Caregivers for young children

Family structure has important effects on children's development.¹⁰ For example, living in a single-parent household is often linked to implications for poverty, access to health and education resources, parental health and the quality of a child's interactions with adult caregivers.^{11, 12, 13, 14, 15,}

¹⁶ The 2023 American Community Survey (ACS) estimated that about half of children birth to age 5 in the Yuma Region lived with two married parents (**51%**), lower than the proportion statewide (**60%**). Young children in the region were more likely to reside with one unmarried parent^c (**45%**) than children across the state (**36%**).¹⁷

Multi-generational households, where grandparents, parents and children live together, are also becoming more common across all racial and ethnic groups.^{18, 19, 20, 21} These living arrangements can offer financial and social benefits, but also stressors such as differing parenting styles and family roles.^{22, 23, 24, 25, 26} According to the 2020 Census, **17%** of young children in the Yuma Region lived in a grandparent's household, with or without a parent present, which is higher than the statewide rate of **13%**. Overall, there were **1,807** grandparents in the region who reported that they were responsible for one or more grandchildren birth to age 17.

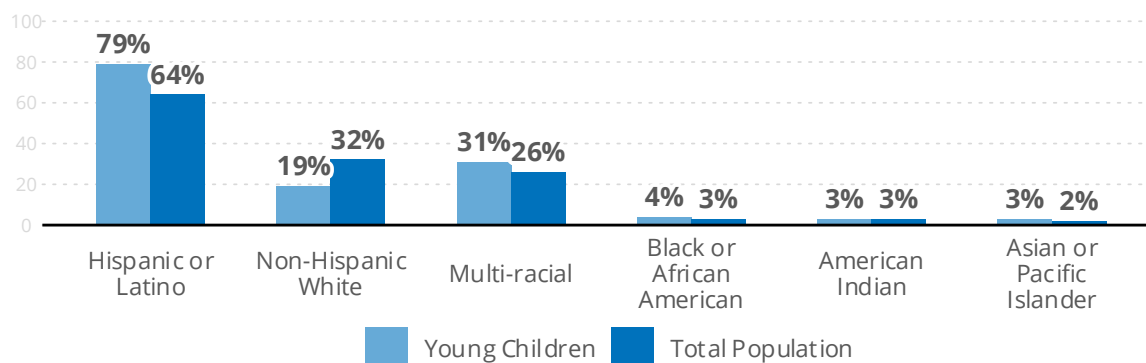
^c The term "parent" includes stepparents. Please note that due to the way the ACS asks about family relationships, children living with two unmarried, cohabitating parents are not counted as living with two parents (these children are counted in the 'one parent' category).

Figure 2.

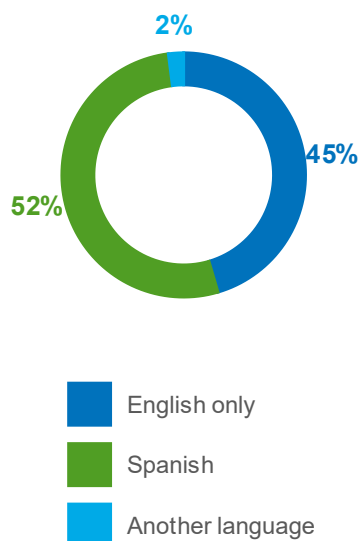
Characteristics of young children and the population

203,024 people live in the Yuma Region (2020)¹

Race and ethnicity in the Yuma Region (2020)¹



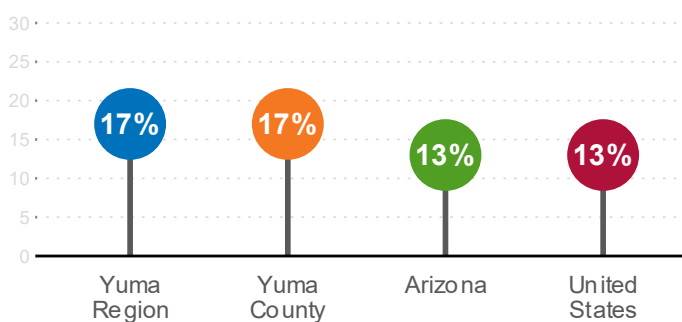
Language spoken at home in the region (2023)²



The region has

69,247
households (2020)¹

Households with young children (2020)¹



¹ U.S. Census Bureau (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC).

² U.S. Census Bureau. (2024). 2023 American Community Survey Five-Year Estimates, 2019-2023.

Notes: Race and ethnicity data are non-exclusive, meaning that individuals are counted in each category in which they identify. Language data are for the population ages 5 and older. 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%).

Kinship care, where children live with someone other than their parents (such as grandparents, other relatives or close friends), may bring challenges related to informal guardianship (e.g., difficulties in registering children for school), coping with parental absence and being an aging caregiver for a young child.^{27, 28, 29, 30, 31, 32, 33} In the Yuma Region, **3%** of young children resided with relatives other than parents (e.g., grandparent, aunt or uncle) and **1%** lived with a non-relative caregiver, similar to the rates seen statewide (**3%** with non-parental relatives and **2%** with non-relatives).³⁴

Participation in the labor force can impact families in ways that affect children's health and well-being. For example, unemployment can limit access to resources that support children's physical and mental health.³⁵ An estimated **87%** of young children birth to age 5 in the Yuma Region lived in families with at least one parent in the labor force. More than half of all young children (**57%**) lived with all parents in the labor force, making it likely that these families need some form of child care.

Income and poverty among families with children

Poverty is associated with reduced access to nutrition, green space and health care and greater exposure to psychosocial stress and environmental toxins; together, these factors may have implications for children's growth and brain development.^{36, 37, 38} According to the U.S. Department of Health and Human Services, in 2025, a family of two adults and two children was considered to be in poverty if their income fell below \$32,150, while for a single parent with one child the threshold was \$21,150.³⁹ Between 2019 and 2023, an estimated **24%** of young children in the Yuma Region lived in poverty, a **3%** decline from the region's poverty rate between 2014 and 2018 (**27%**). Young child poverty rates statewide, while lower than the region, declined more notably during this same time (**25%** to **18%**), a phenomenon largely attributed to pandemic relief funding and policies.⁴⁰

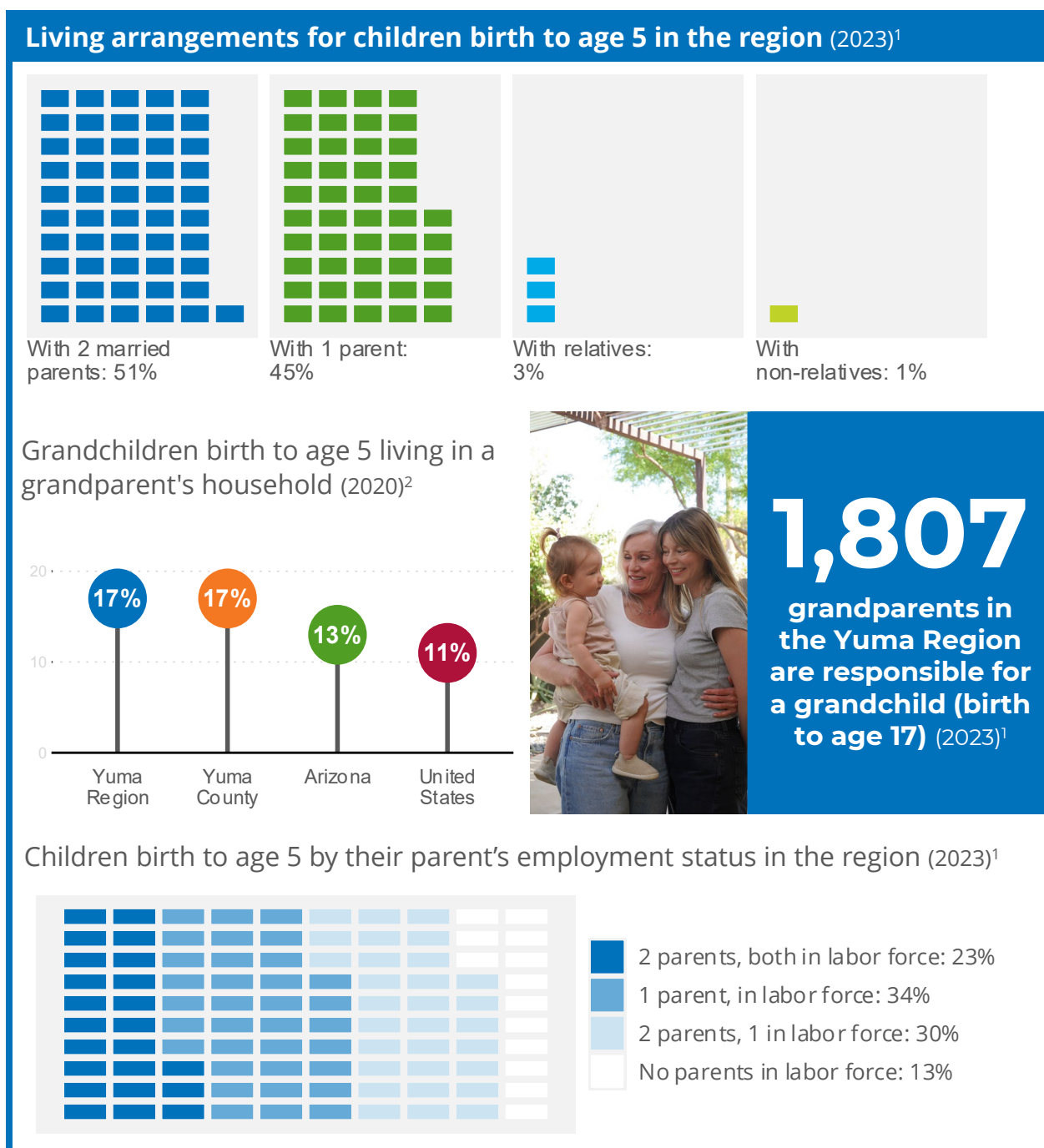
Overall, single-parent families across Arizona earned less than married-couple families in 2023. Married-couple family median incomes in Yuma County (**\$85,912**) were more than double the median income for both single-male-headed families (**\$36,602**) and single-female-headed families (**\$31,268**). Across all family types, median incomes in Yuma County was lower than median incomes statewide.

While median family income is a measure of how much families earn, the self-sufficiency standard^d attempts to estimate how much families actually need to earn to fully support themselves. These standards vary by family type and differences in costs of housing,

^d For more information on the Arizona 2022 Self-sufficiency standard, please see https://womensgiving.org/wp-content/uploads/2022/12/AZ2022_SSS_Web.pdf

Figure 3.

Caregivers for young children



¹ U.S. Census Bureau. (2024). 2023 American Community Survey Five-Year Estimates, 2019-2023.

² U.S. Census Bureau. (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC).

Notes: The 4 percentages for living arrangements and employment status should sum to 100% but may not because of rounding. The term "parent" here includes stepparents. 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 unmarried parent' category).

transportation, child care and other budget items across counties and states.^{41, 42} In 2022, the self-sufficiency standard for two parents, one preschooler and one infant was **\$68,870** in Yuma County, lower than the median income for married couples with children. In contrast, the self-sufficiency standard for one parent and one preschooler was **\$46,744** in Yuma County, higher than both the median income for single-male-headed families with children (**\$36,602**) and single-female-headed families with children (**\$31,268**). These data highlight the likelihood that many single parents in Yuma County may not be earning enough income to support their families.

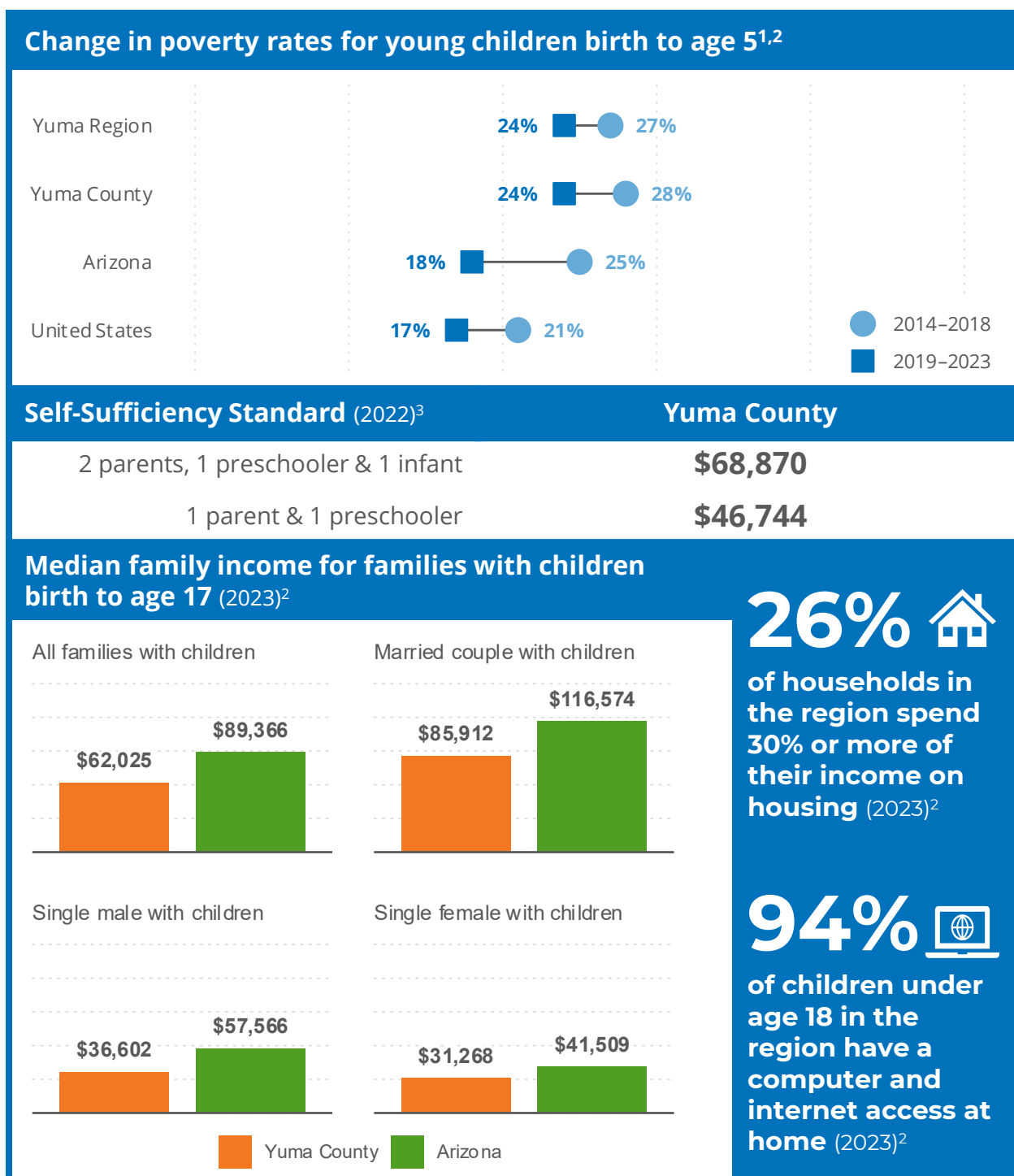
The Arizona self-sufficiency standards were updated in 2025 and reflect a significant increase in the cost of basic needs across Arizona since they were first published in 2002.⁴³ Yuma County's self-sufficiency standards increased by **19%** for two parents, one preschooler and one infant (**\$81,911**) and **13%** for one parent and one preschooler (**\$53,030**) between 2022 and 2025.⁴⁴ Key informants noted that increases in family income have not kept pace with the rising cost of living, particularly for housing, food, and child care. They also shared that because of the “benefits cliff,” even a small rise in income can make families ineligible for local child care programs.⁴⁵

These rising costs have real implications for families' well-being in the Yuma Region. When housing costs consume a large percentage of family income, limited funds for basic needs such as food and utilities can influence young children's development.^{46, 47, 48} Traditionally, housing has been deemed affordable for families if it costs less than 30% of annual household income. About one-quarter of households (**26%**) in the Yuma Region were considered housing cost-burdened. Although lower than the **30.8%** of cost-burdened households statewide, the region did not meet the Healthy People 2030^e target of **25.5%** or fewer households with a high housing cost burden.⁴⁹ Internet access is a vital utility in homes in today's interconnected world. Reliable broadband enables access to education, employment, telehealth and social connection, highlighting its importance as a “super determinant” of health.⁵⁰ In the Yuma Region, the vast majority (**94%**) of children under age 18 had access to a computer and internet at home, pointing to a strength of the region in connectivity for families.

^e Healthy People identifies science-based targets to guide national health promotion and disease prevention efforts. For more information see https://www.cdc.gov/nchs/healthy_people/index.htm

Figure 4.

Income and poverty among families with children



¹ U.S. Census Bureau. (2020). American Community Survey 5-Year Estimates, 2014-2018.

² U.S. Census Bureau. (2024). American Community Survey 5-Year Estimates, 2019-2023.

³ Kucklick, A., Manzer, L., and Mast, A.. (2022). [The Arizona 2022 Self-Sufficiency Standard].

Food security among young children and families

The Special Supplemental Nutrition Assistance Program for Women, Infants and Children, known as WIC, provides food assistance, breastfeeding support, nutrition education and referral to other health and community services for women and children, starting in pregnancy until children turn age 5.^f WIC, along with other programs like free and reduced-price school meals, Temporary Assistance for Needy Families (TANF) and the Supplemental Nutrition Assistance Program (SNAP), can be a key resource for low-income families to ensure they have access to affordable, nutritious food that promotes well-being. Families in Arizona are financially eligible for WIC if their income is at or below 185% of the federal poverty level.^{g,51} According to 2023 American Community Survey (ACS) estimates, there were **9,094** children birth to age 5 in the Yuma Region living in households with qualifying incomes for WIC. This equates to more than half (**55%**) of the young child population in the region. The region had a much higher proportion of young children whose households financially qualified for WIC compared to Arizona (**38%**) and the U.S. (**35%**).

Between 2018 and 2021, the number of young children (birth to age 4) enrolled in WIC in the Yuma Region steadily declined, to a low of **9,055** young children enrolled in 2021. However, enrollment increased overall in recent years, reaching **9,487** young children enrolled in 2024. The region also had consistently high participation rates among young children enrolled in WIC in recent years, evident in the small gap between the number of children enrolled versus the number of children participating in the program. These high participation rates have even increased in recent years, from **91%** in 2019 and 2020, to a high of **97%** of enrolled young children in 2023, before dipping below the statewide rate (**95%**) in 2024 (**94%**).

Families' neighborhood environments also influence their access to affordable, nutritious food. Low-income, low-access areas, also known as "food deserts," are geographic areas with high rates of poverty and limited access to fresh food options, a challenge often compounded by limited access to adequate transportation.⁵² Just under one in five children birth to age 5 (**19%**) in the Yuma Region^h lived in a community in the region classified as a low-income, low-access area by the U.S. Department of Agriculture in 2019, higher than the **15%** across the state.⁵³ Key informants noted that challenges with transportation, particularly limited public transit options in the Yuma

^f For more information see <https://www.fns.usda.gov/wic>

^g In 2026, the 185% FPL threshold was \$61,050 for a family of four and \$40,034 for a family of two. For more information, see <https://aspe.hhs.gov/sites/default/files/documents/b1bfa16b20ae9b89d525bc35de7c1643/detailed-guidelines-2026.pdf>

^h To view a map of low income and low access census tracts, see <https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas>

Region, make it difficult for families to access grocery stores, especially for single families or those living in east Yuma.

Child maltreatment response and prevention

Traumatic or stressful life events experienced in childhood, referred to as Adverse Childhood Experiences or ACEs,ⁱ can have lasting impacts on health and life trajectory beyond childhood, with risk increasing as an individual's number of adverse childhood experiences increases.⁵⁴ In situations of abuse or neglect, the Arizona Department of Child Safety (DCS) is required to intervene to ensure the safety and well-being of children. When DCS determines that the harm in remaining with their family is too great, a child may be removed from their home, either temporarily or permanently. In recent years, DCS has set an overarching goal of safely reducing the number of children removed from their homes and placed in out-of-home care.⁵⁵ In line with this goal, the number of children reported to DCS who were removed from their homes and placed in out-of-home care has substantially declined in recent years in Arizona, from a recent high of **13,465** children age birth to 17 in state fiscal year (SFY) 2021 to **8,305** in SFY 2024. Out-of-home placements in Yuma County also showed an overall pattern of decline and reached a five-year low of **158** children birth to age 17 in SFY 2024.

DCS also aims to place children into a permanent, stable housing situation within 12 months, whether that is through reunification, living with other relatives (known as kinship care) or any type of guardianship or adoption.⁵⁶ In 2024, almost half (**47%**) of young children birth to age 17 exiting out-of-home care in Arizona were reunified with their families, one in four (**25%**) were adopted^j and one in six (**16%**) were placed in guardianship.^k The other **12%** exited out-of-home care for some other reason, including children who aged out of the out-of-home care system, transferred to another agency, ran away or exited for another reason.

Home visitation programs are a proven strategy for equipping families with needed resources and referrals to promote healthy child development, reduce parental stress and prevent future child maltreatment.^{57, 58, 59, 60} In SFY 2025, **618** families in the Yuma Region participated in home visitation programs, including the Healthy Families Arizona, Health Start, High-Risk Perinatal Program,

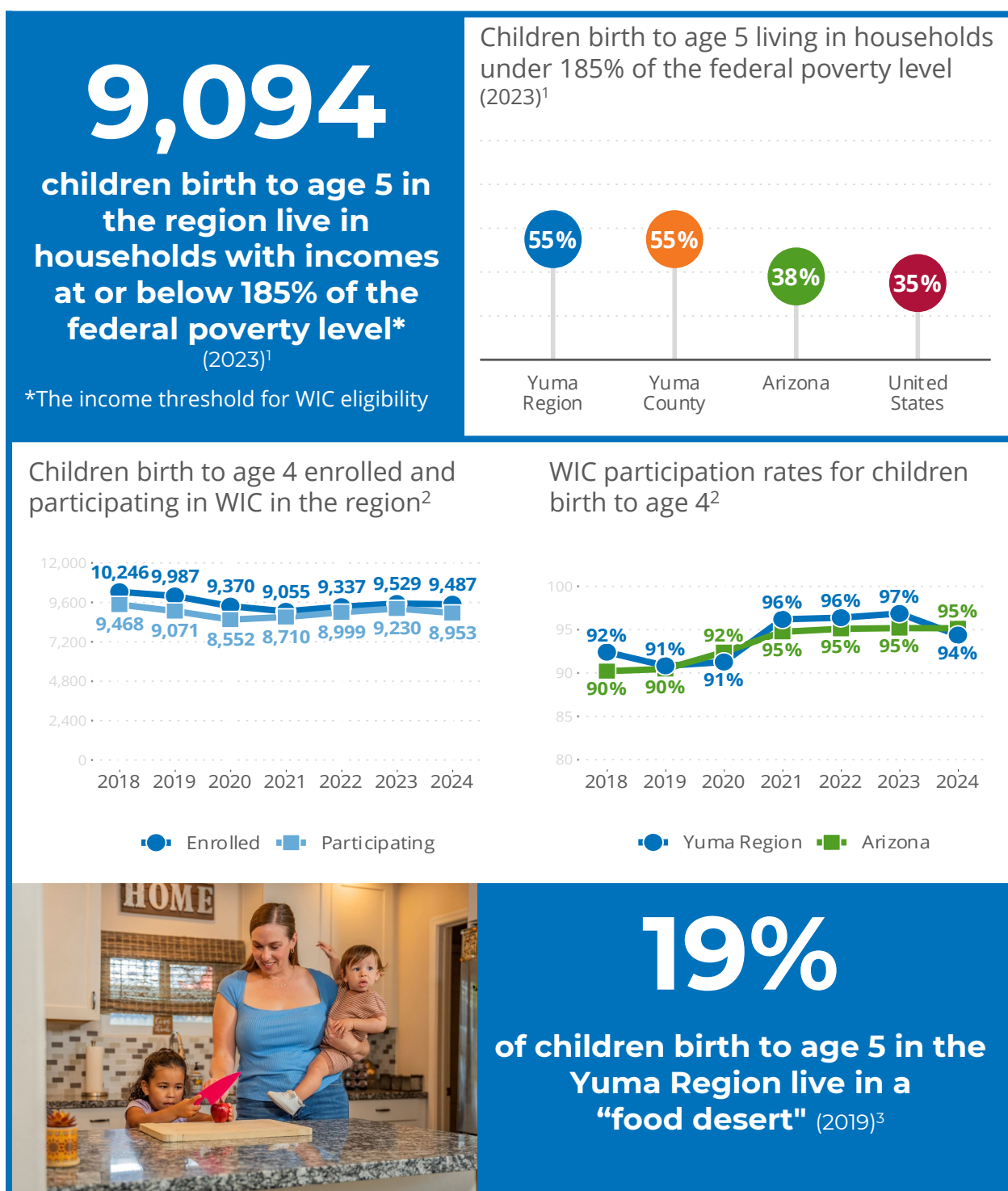
ⁱ Adverse Childhood Experiences (ACEs) include eight categories of traumatic or stressful life events experienced before the age of 18 years. The eight ACE categories are sexual abuse, physical abuse, emotional abuse, household adult mental illness, household substance abuse, domestic violence in the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

^j Adoption by a relative, foster parent or other non-relative

^k Guardianship by a foster parent or other non-relative

Figure 5.

Food security among young children and families



¹ U.S. Census Bureau. (2024). 2023 American Community Survey Five-Year Estimates, 2019-2023.

² Arizona Department of Health Services. (2025). [WIC dataset].

³ Economic Research Service, U.S. Department of Agriculture. (2022). Food Access Research Atlas.

Note: WIC participation rates reflect the percent of children already enrolled in WIC who attend visits and receive benefits. These do not reflect the share of potentially-eligible children enrolled in WIC.

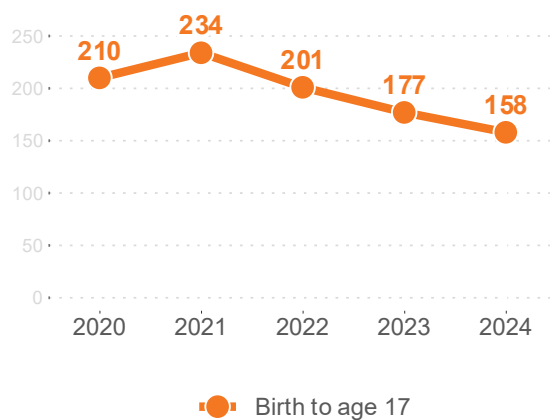
Maternal Early Childhood Sustained Home Visiting (MECSH) and FTF-funded Parents as Teachers programs.

Figure 6.

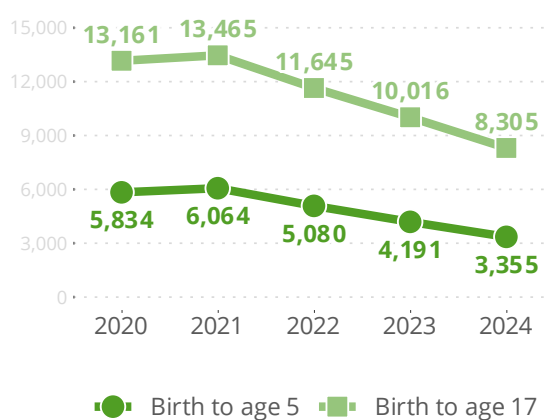
Child maltreatment response and prevention

Children in out-of-home placements with the Department of Child Safety¹

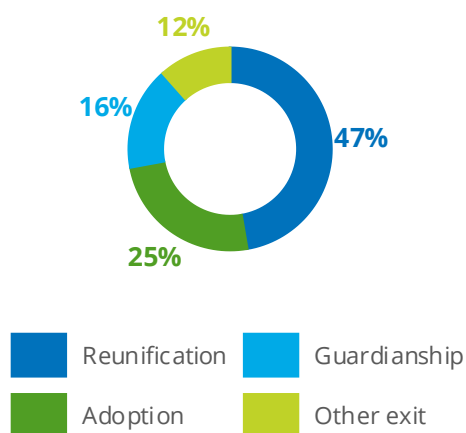
Yuma County



Arizona



Case outcomes for children birth to age 17 exiting out-of-home care in Arizona (2024)¹



In the Yuma Region,

618 families participated in home visitation programs (2025)²

¹ Arizona Department of Child Safety. (2025). Monthly Operational Outcomes Report, May 2025.

² First Things First. (2025). [Home Visitation & Screenings Reach datasets].

Note: Home visitation program data reflects families in the Health Start, Healthy Families AZ, High-Risk Perinatal Program, Maternal Early Childhood Sustained Home Visiting (MECSH) and FTF-funded Parents as Teachers programs. Families may participate in more than one program (and be counted more than once).

EARLY LEARNING

Availability of quality early care and education

Participating in quality preschool programs can provide children with the equivalent of one-third to a full year of additional early learning in language, reading and math, increasing the academic readiness of children when they enter kindergarten.⁶¹ According to 2023 American Community Survey (ACS) estimates, **38%** of 3- and 4-year-olds were enrolled in school^l in the Yuma Region, slightly higher than the proportion across the state (**36%**).⁶² In the 2024-25 school year, **804** children were enrolled in preschool in public schools in Yuma County, representing a seven year high in enrollment. However, there is likely more capacity in school-based preschool programs in the county than reflected in these numbers. Not all preschool students are well-captured in ADE enrollment data, particularly typically-developing students in part-day programs and preschool students whose families pay a fee for care at a school. Key informants noted the importance of First Things First's (FTF) bilingual resources and presence in the community as critical for promoting preschool enrollment in the Yuma Region.

In 2025, there were **193** early care and education providers in the region with the capacity to serve **10,082** children. Most of this capacity was provided by **106** child care centers with a capacity to serve **8,387** children, followed by **16** schools (n = **1,200**), and **71** home-based providers (n = **495**). Between 2023 and 2025, **16** new child care providers opened in the Yuma Region, and **5** child care providers closed.

An area is labeled a child care desert if there are three times as many children as there are available child care slots (a ratio of 3.0 or more).⁶³ Communities in both urban and rural areas of Arizona face a gap between the number of young children and licensed child care slots.^{64, 65, 66} Collectively across all children birth to age 5, the Yuma Region was not considered a child care desert, with a ratio of **2.8** children birth to age 5 per available slot, though the region had a higher ratio than the state (**2.0** children birth to age 5 per available slot).⁶⁷ However, the region was considered a child care desert for its youngest children. For 1-year-olds, the ratio was higher and above the child care desert threshold, with **6.0** 1-year-olds per available slot. The ratio for regulated infant care was highest, with **15.5** infants per available slot, indicating more scarce licensed infant child care in the region.

Key informants noted that staff capacity and a lack of large, licensed centers may contribute to the scarcity of infant care in the region. Staffing ratio requirements mean that each provider can care

^l School includes nursery school, preschool or kindergarten.

for a limited number of infants, and demand may exceed the number of staff available. In addition, they noted that larger, licensed centers in the region are typically dedicated to Head Start programs or school districts, which serve older children. As a result, infant care in the Yuma Region is most often provided through more informal family, friend and neighbor (FFN) care. Through FTF's Family, Friend and Neighbor Care program, these informal care providers can receive weekly home visits from a parent educator who can offer key guidance on promoting healthy growth and development.⁶⁸

Key informants in the region also highlighted two community initiatives focused on addressing the lack of overall child care availability. After recognizing child care as a barrier for parents returning to the workforce after the COVID-19 pandemic, the Greater Yuma Economic Development Corporation partnered with FTF to launch a Child Care Task Force, aimed at developing innovative solutions for the child care shortage in Yuma County.⁶⁹ Arizona Western College also offers a free, bilingual business development course called DreamBuilder, intended to guide residents through planning and building their child care businesses.⁷⁰

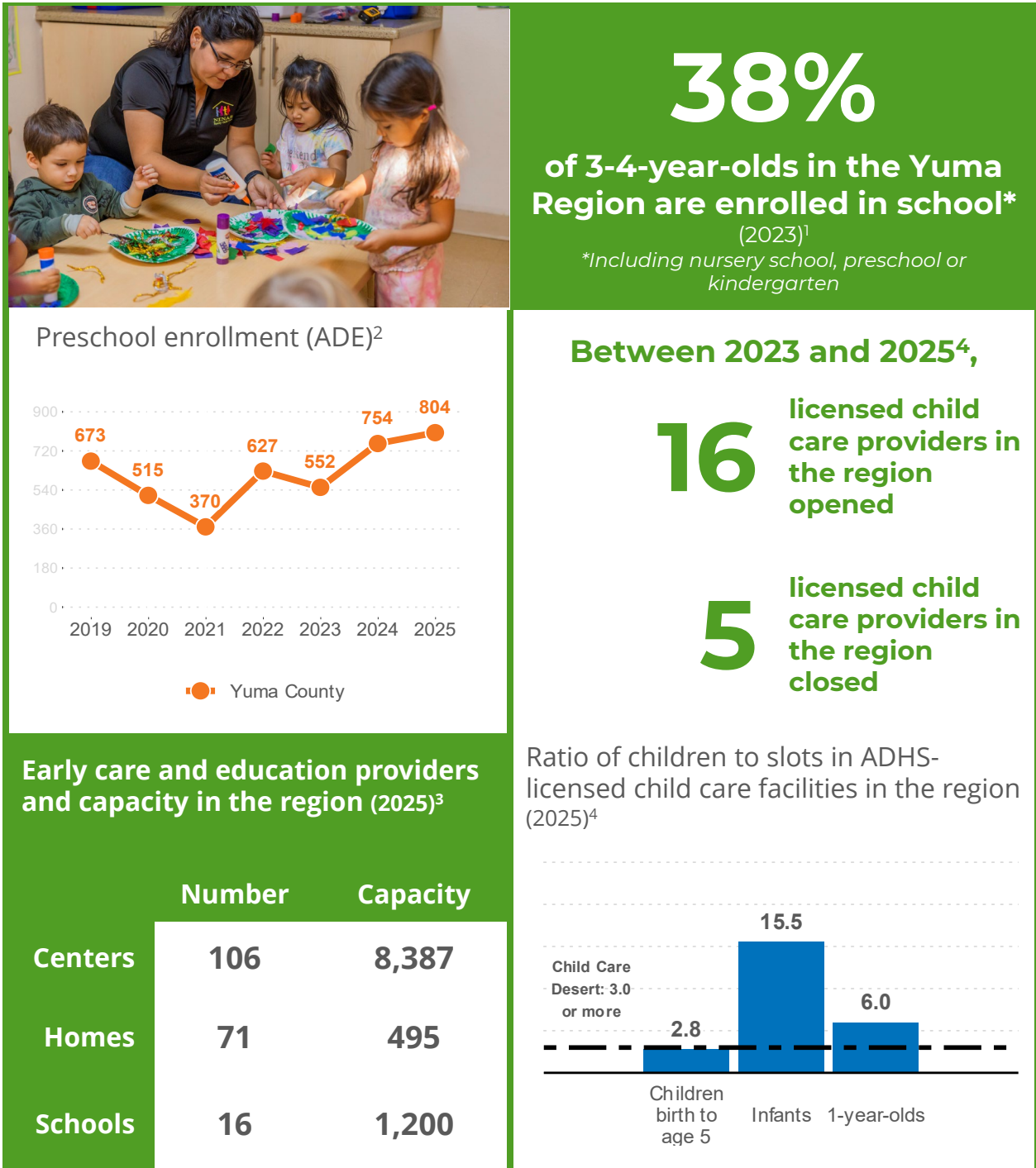
Increasing access to quality early care and education

High-quality early learning experiences lay a strong foundation for children's success in kindergarten, elementary school and beyond.⁷¹ One way that the quality of early child care and education is measured in Arizona is through the Quality First (QF) program.⁷² The QF program rates the quality of child care providers and preschools on a scale from one to five stars, with providers considered high quality when they have received a 3-star rating or higher.⁷³ In the Yuma Region, the **72** providers served by QF enrolled a total of **2,351** young children in 2025, and **68** of these child care providers had 3-5-star ratings. Four-year-olds were most often enrolled in quality settings (n = **902**), followed by 5-year-olds (n = **494**), 3-year-olds (n = **476**), 2-year-olds (n = **248**), 1-year-olds (n = **159**) and infants (n = **72**).

Child care providers enrolled in QF offer scholarships to eligible families to allow those children to access care and to reimburse providers for some of their extra expenses for providing quality care. These scholarships are allocated based on the child care provider's capacity and QF star rating.⁷⁴ However, due to the end of federal pandemic relief funds, statewide allocations for scholarships have decreased by over 3,000 slots from 2024 to 2025.⁷⁵ The number of QF scholarships provided in the Yuma Region followed the same downward trend from 2024 (n = **347**) to 2025 (n = **165**).

Figure 7.

Availability of quality early care and education



¹ U.S. Census Bureau. (2024). 2023 American Community Survey Five-Year Estimates, 2019-2023.

² Arizona Department of Education. (2025). [October 1 Enrollment, Graduation Rates, Dropout Rates, State Assessment dataset].

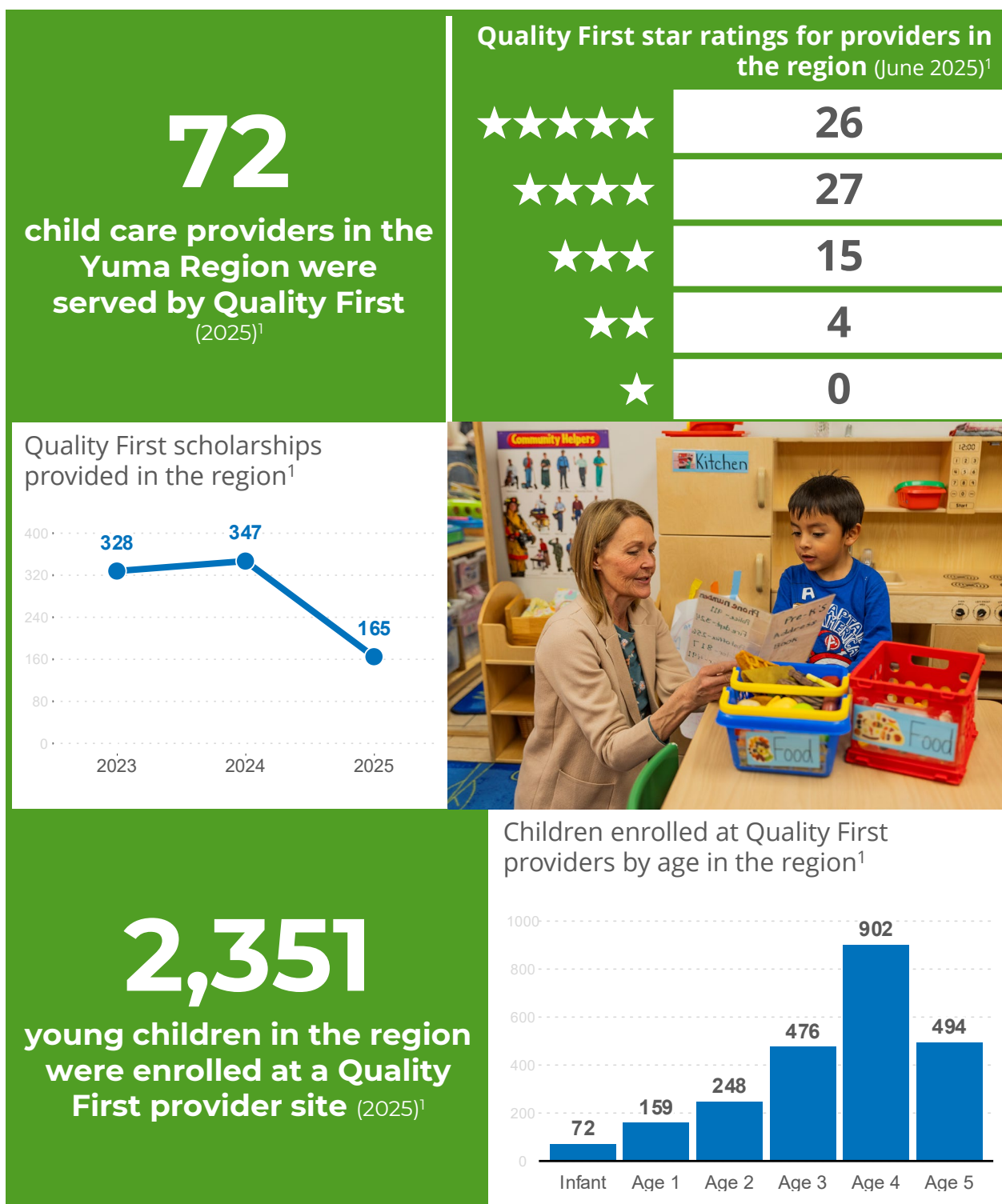
³ Arizona Department of Economic Security. (2025). [National Child Care Data System NCCRAwaredatabase extract].

⁴ Arizona Department of Health Services. (2025). [Child Care Licensing dataset].

Note: Please note that the capacity estimates are based on licensed capacity of the facility (frequently determined by physical building capacity) and may overstate the number of children that are actually enrolled in early education (due to staffing limitations and provider preferences).

Figure 8.

Increasing access to quality early care and education



¹ First Things First. (2025). [Quality First dataset].

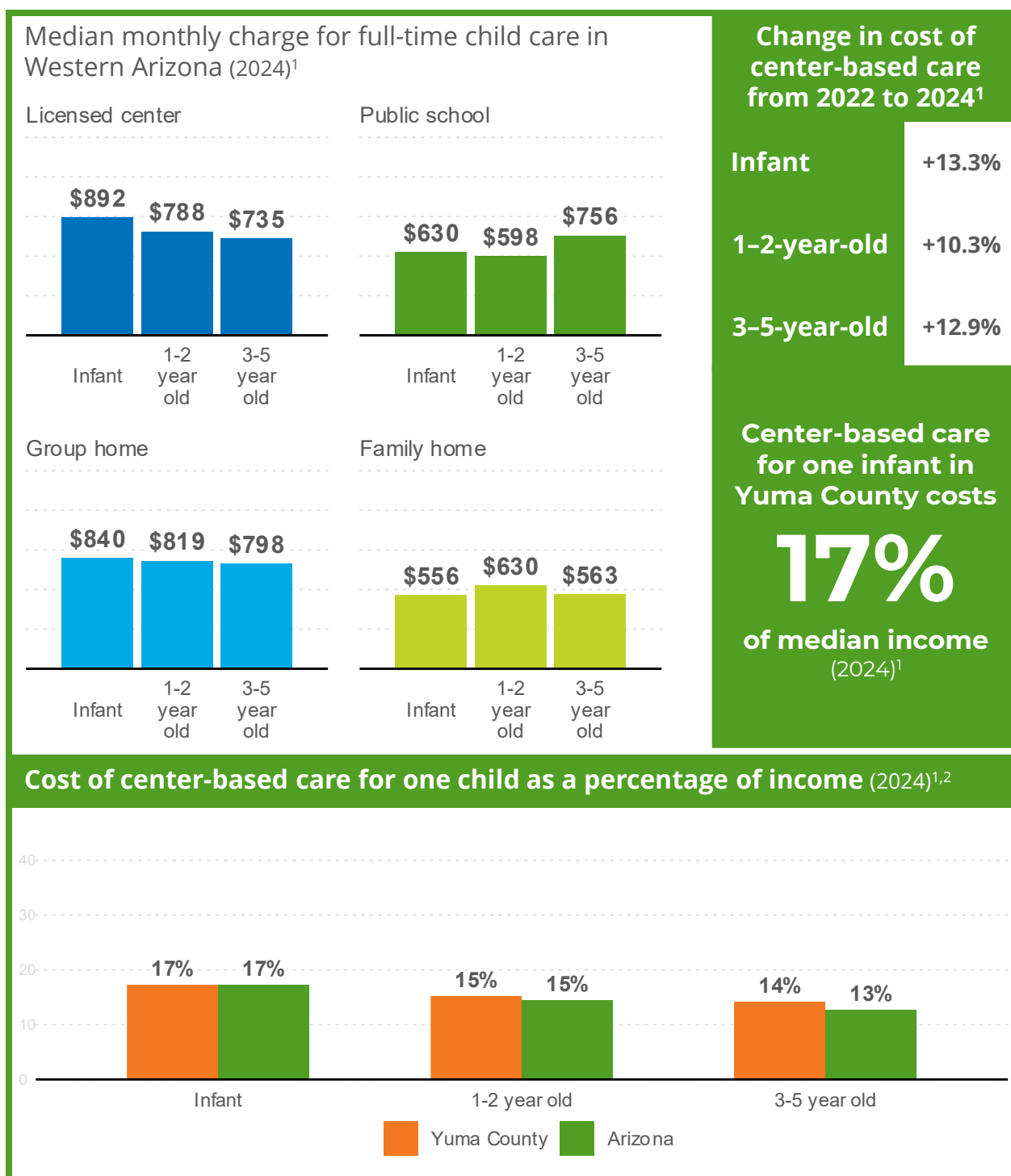
Cost of early care and education

The high cost of formal early care and education can place it out of reach for many families. The average cost of care in Arizona varies by the type of provider and the age of the child, with licensed centers and care for infants being the most expensive, largely due to the higher operational costs of center-based care.⁷⁶ The median cost of care for an infant in a licensed center in Arizona in 2024 was **\$1,289** per month.⁷⁷ In Western Arizona (Mohave, La Paz and Yuma counties), this type of care was also the most expensive at **\$892** per month, followed by group home care for infants (**\$840/month**). The least expensive type of care for infants and 3-5-year-olds was in family-home providers (**\$556/month** and **\$563/month** respectively), and for 1-2-year-olds, in public schools (**\$598/month**). However, as mentioned above, registered home-based providers (n = **495**) and schools (n = **1,200**) made up only **17%** of registered child care capacity in the region, meaning that these care settings, while more affordable in Western Arizona, may not be a realistic option for many families.

According to the U.S. Department of Health and Human Services, to be considered affordable, a family should spend no more than **7%** of their income on child care.⁷⁸ In Arizona, both married and single-parent families are estimated to spend well above the “affordable” share of their income on infant care.^{79, 80} In Yuma County, center-based care for one infant costs at least **17%** of median income for families with children, the same as across Arizona. Care for older children costs a lower percentage of a family’s income (**15%** for 1–2-year-olds; **14%** for 3-5-year-olds) again, similar to families across the state. The cost of care has also risen in recent years, with the cost of care for infants increasing the most (**+13.3%**) between 2022 and 2024. The cost of care for 3–5-year-olds rose **12.9%** during the same period, while care for 1–2-year-olds increased by **10.3%**. Key informants in the Yuma Region emphasized affordability as a major barrier to accessing child care. They noted that while providers in the region have opened, the cost of care remains a burden for families. This has ripple effects on employment, where one parent may quit the workforce to avoid child care costs.

Figure 9.

Cost of early care and education



¹ Health Management Associates. (2024). 2024 Child Care Market Rate Survey. Arizona Department of Economic Security.

² U.S. Census Bureau. (2024). 2023 American Community Survey Five-Year Estimates, 2019-2023.

Note: Western Arizona includes Mohave, La Paz & Yuma counties.

Early care and education assistance and quality

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).⁸¹ This assistance can make child care possible for families who may not otherwise be able to afford it. Eligibility for and receipt of DES child care assistance among non-DCS-involved families recently reached record highs due to recent statewide investments.^{82, 83} The Yuma Region differed from these statewide trends of record-high participation in 2024, with a high of **1,101** non-DCS-involved children birth to age 5 found eligible and **1,008** of those children receiving DES child care assistance in 2021. Following this high, enrollment and participation fluctuated, ending at **954** non-DCS-involved young children found eligible and **895** of those children receiving DES child care assistance in 2024. Positively, nearly all (**95%**) non-DCS-involved eligible families used child care assistance in 2024. The proportion of these children receiving child care assistance in quality environments in the region (**80%**) equaled that across the state (**80%**). Key informants attributed these positive trends to efforts from FTF staff, whose consistent community presence and resource sharing may have increased parent awareness and use of child care assistance. Unfortunately, due to insufficient funding, the DES child care assistance waitlist was reinstituted statewide in August 2024.^m

Children are automatically eligible for DES child care assistance when they are involved with DCS.ⁿ For DCS-involved children, the number of children birth to age 5 eligible for child care assistance in the Yuma Region decreased slightly overall from **160** in 2019 to **152** in 2024. The number of DCS-involved young children receiving child care assistance also decreased overall, with **122** receiving assistance in 2024. Positively, those children in the region were more likely to receive this child care assistance in quality environments (**94%**) compared to DCS-involved children across the state (**84%**).

To expand access to quality child care, DES provides enhanced reimbursement rates to child care providers that are considered high quality, including having a 3- to 5-star Quality First rating, national accreditation or applying Head Start Performance Standards. As of November 2025, quality child care providers across Arizona were reimbursed an additional **40%** above the standard reimbursement.

^m As of May 1, 2026, there were more than 12,000 children waitlisted statewide. For more information, see <https://des.az.gov/services/child-and-family/child-care/how-apply-for-child-care-assistance>

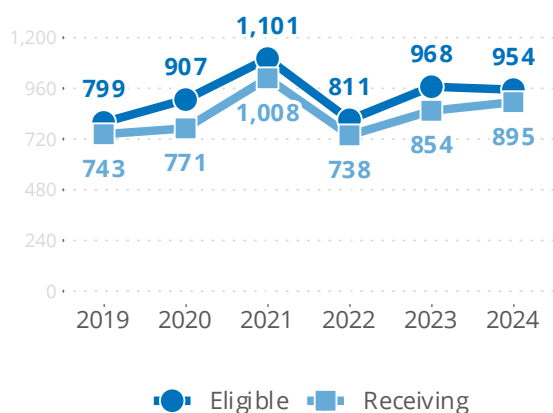
ⁿ Children involved with DCS include children who have been removed by DCS and placed with a foster family or kinship caregiver as well as children who are residing with their own family but receiving services from DCS (such as in-home family support and counseling). Families of these children are not required to pay a co-pay for child care.

Figure 10.

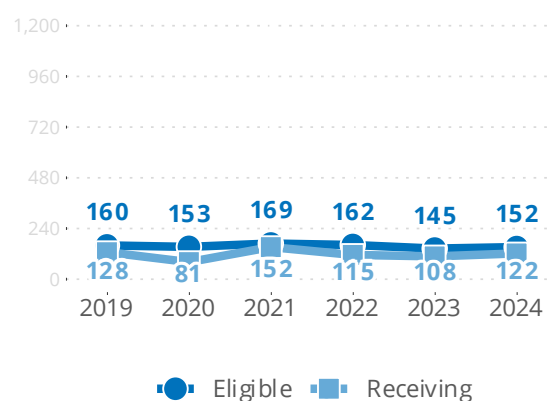
Early care and education assistance and quality

Children receiving child care assistance in the Yuma Region¹

Non-DCS-involved children



DCS-involved children



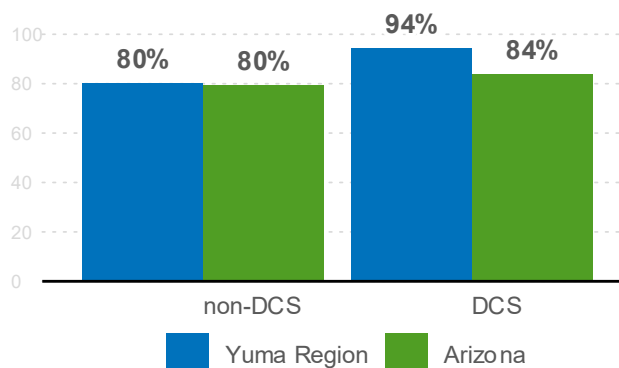
95%

of eligible families* in the region used child care assistance (2024)¹

*Non-DCS-involved families



Children receiving child care assistance in quality providers (2024)¹



+40%

Increased reimbursement rate for quality providers

defined by DES as providers with a 3-5 star Quality First Rating, national accreditation, or applying Head Start Performance Standards (Nov 2025)¹

¹ Arizona Department of Economic Security. (2024). [Child Care Assistance dataset].

EDUCATION & WORKFORCE

K-12 education attendance and achievement

In addition to a quality early childhood education system, 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, and graduating from high school, in particular, is associated with better health, financial stability and socio-emotional outcomes.^{84, 85} Across Yuma County, kindergarten through 3rd grade enrollment varied slightly year-to-year but decreased overall from **11,161** students in the 2018-19 school year, to **10,698** students enrolled in the 2024-25 school year.

Some Arizona families use Arizona's Empowerment Scholarship Account (ESA) to pay for eligible educational expenses, including private or online school tuition, individual public school classes and extracurriculars.⁸⁶ This program was established in 2011 for students with disabilities and expanded to universal eligibility in 2022.^{87, 88} These funds can also be spent on other approved education costs, such as tutoring, technology, textbooks, supplies and national standardized test fees.^{89, 90} In the 2024-25 school year, **2,833** students (preschool through grade 12) in Yuma County used ESAs, accounting for **3%** of Arizona's **94,600** ESA participants.⁹¹ By comparison, there were **10,698** total students (preschool through grade 12) enrolled in public and charter schools in Yuma County in the 2024-25 school year. Key informants expressed concerns, noting their uncertainty around how ESA funds influence students' long term educational outcomes. They also observed that ESA funds tend to be used by well-resourced families, which aligns with findings suggesting that funds tend to serve students from more affluent backgrounds.⁹²

Children's 3rd grade reading comprehension and proficiency skills can predict their future academic success, such as their likelihood of graduating high school and attending college.⁹³ Although they remain distressingly low, 3rd grade math assessment passing rates increased in recent years in Yuma County and across the state. Yuma County 3rd grade math passing rates increased from **33%** in the 2021-22 school year to **37%** in the 2023-24 school year, while the state rate rose from **40%** to **43%**. In Yuma County, 3rd grade reading assessment passing rates decreased from the 2021-22 to 2023-24 school years from **34%** to **31%** and the statewide reading passing rate declined from **41%** to **39%**.

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.⁹⁴ Following the COVID-19 pandemic, chronic absenteeism has become a major issue in school districts nationwide.⁹⁵ One-third of kindergarten students (**33%**) and almost one-quarter of 3rd

grade students (24%) in Yuma County were chronically absent from school in the 2022-23 school year, similar to statewide chronic absence rates that year (kindergarten, 25.5%; 3rd grade 23.8%) but much higher than the 17% of kindergarten students and 10% of 3rd grade students who were chronically absent in Yuma County pre-pandemic in the 2018-19 school year. Increasing attendance among kindergarten students presents a particular challenge because the state mandated age of school enrollment is 6 years. Absences in kindergarten are often not considered truancy, meaning schools have fewer resources to address them.

Graduation and adult educational attainment

Understanding current high school graduation and dropout rates within the state provides insight into the assets and challenges faced by a community and its future workforce. In contrast to adults who dropped out of high school and even those that received a high school equivalency diploma (HSE, also commonly referred to as a GED), adults who graduated from high school have higher rates of employment, higher incomes and better overall health.⁹⁶ Four-year and five-year graduation rates in Yuma County have exceeded the state's rates in recent years.⁹⁷ In the 2023-24 school year, the four-year graduation rate was 91% in Yuma County, much higher than the statewide rate of 78%.⁹⁸ In that same year, the five-year graduation rate was 94% in Yuma County, again, well above the 81% statewide.⁹⁹

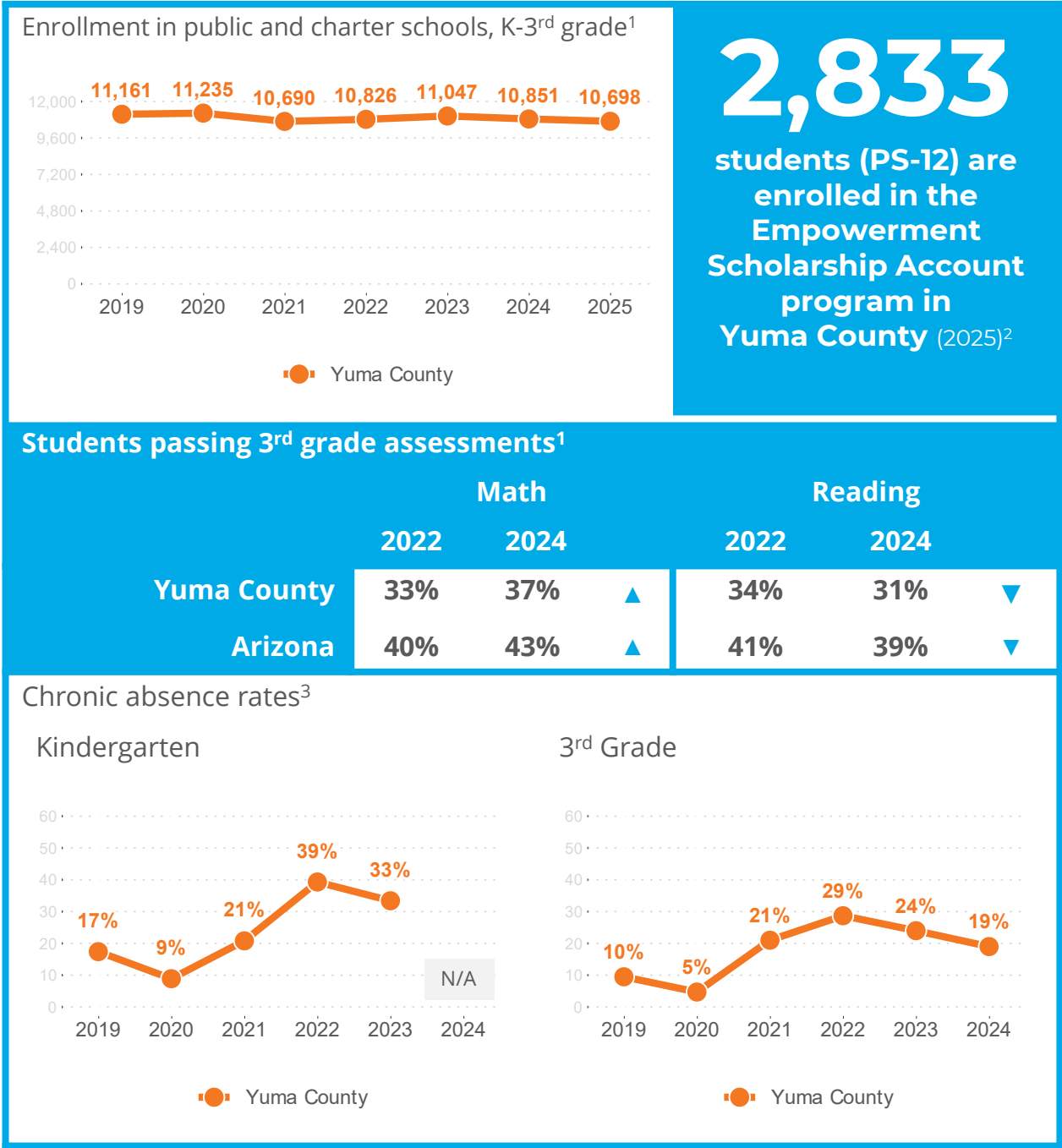
Compared to the U.S. as a whole, Arizona has a larger proportion of disconnected youth, defined as teenagers ages 16 to 19 who are neither attending school nor employed,^o which has been linked to negative physical and mental health outcomes and higher rates of unemployment.¹⁰⁰ Dropout rates for 7th to 12th grade students in Yuma County remained relatively stable since the COVID-19 pandemic, varying between 2% and 3% since the 2018-19 school year, compared to dropout rates between 3% and 6% across the state over those years.¹⁰¹

Education is a key mechanism for upward economic mobility. As educational attainment in a population increases, wages increase and rates of unemployment decrease.¹⁰² Of U.S. adults working full time in 2021, median earnings for those with a bachelor's degree were \$29,000 higher than those with a high school degree.¹⁰³ According to 2023 American Community Survey (ACS) estimates, more than three-quarters of adults ages 25 and older (77%) in the Yuma Region had at least a high school education and about one in six (17%) had a bachelor's degree or more. Statewide, 89% of adults had at least a high school education.¹⁰⁴ In addition in the Yuma Region, one in four (25%) adults, had some college but no degree; this includes individuals who received a Child Development Associate (CDA) credential or other similar post-secondary credential.

^o Age ranges 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.

Figure 11.

K-12 education attendance and achievement



¹ Arizona Department of Education. (2025). [October 1 Enrollment, Graduation Rates, Dropout Rates, State Assessment dataset].

² Arizona Department of Education. (2025). [Empowerment Scholarship Account Enrollment].

³ Maricopa Association of Governments. (2026). [ReadOn Arizona MapLIT dashboard reports: enrollment, chronic absences, assessments].

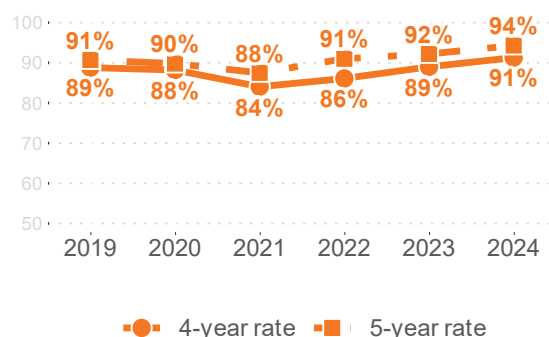
Notes: Chronic absences are defined as children missing 10% or more school days. Schools reported absences data very differently in school year 2019-20 due to the onset of the COVID-19 pandemic and the shift to remote learning. Absences data were not available for kindergarteners in school year 2023-24.

Figure 12.

Graduation and adult educational attainment

Trends in 4-year and 5-year graduation rates¹

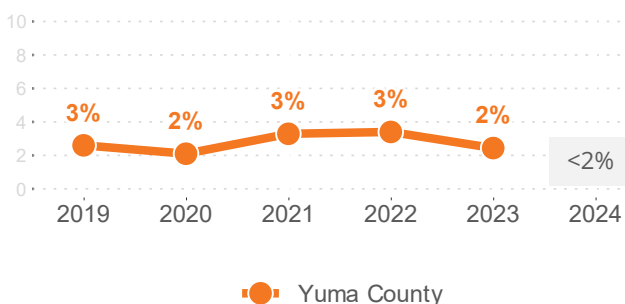
Yuma County



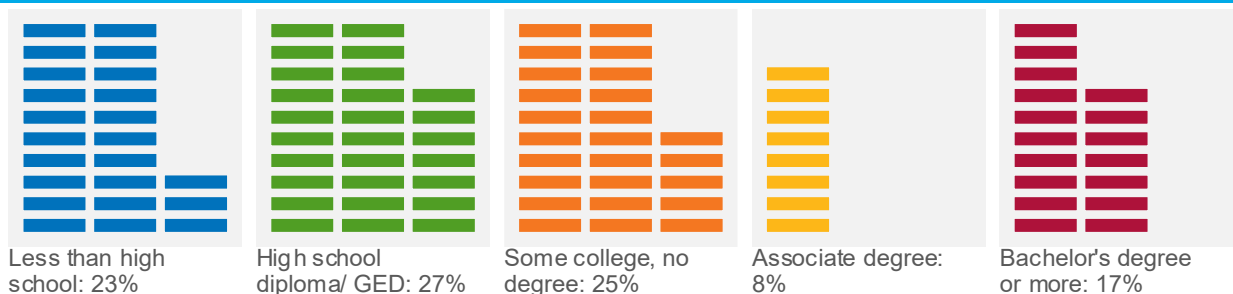
Arizona



Trends in 7th to 12th grade dropout rates¹



Level of education of adults in the Yuma Region (2023)²



¹ Arizona Department of Education. (2025). [October 1 Enrollment, Graduation Rates, Dropout Rates, State Assessment dataset].

² U.S. Census Bureau. (2024). 2023 American Community Survey Five-Year Estimates, 2019-2023.

Notes: Graduation rates are calculated as the percentage of students in a cohort (typically those who enter ninth grade together) who graduate within 4 or 5 years. "Dropouts are defined as students who are enrolled in school at any time during the school year, but are not enrolled at the end of the school year and did not transfer, graduate or die" [State of Arizona Department of Education Graduation, Dropout & Persistence Rate Technical Manual].

Adult employment

Unemployment and underemployment^p can impact families in ways that affect children's health and well-being.¹⁰⁵ 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.^{106, 107} Children with parents who have lost their jobs may also experience poorer school performance and behavioral issues, resulting in grade repetition, suspension or expulsion.¹⁰⁸ Unemployment rates in Yuma County have consistently been much higher than state rates in recent years. After a high of **17%** in 2019 and 2020 in the county, unemployment rates improved and were mostly constant since 2022. In 2024, the unemployment rate was **12%** in Yuma County and **4%** across Arizona. It is important to note that these unemployment rates are not seasonally-adjusted. Yuma County's largest industry, agriculture, has significant seasonal shifts, with a large influx of agricultural work in the winter months, causing dramatically different unemployment rates depending on the time of year.¹⁰⁹

The labor force participation rate includes all persons who are working (employed) or looking for work (unemployed). Persons not in the labor force are largely students, stay-at-home parents, retirees and institutionalized people. According to 2023 American Community Survey (ACS) estimates, more than half (**54%**) of the population ages 16 and older was participating in the labor force in the Yuma Region. This labor force participation rate was lower than that for the state (**61%**) and U.S. (**64%**), and the region's unemployment rate (**8%**) was higher than that in the state (**5%**). Some key employment sectors in Yuma County, according to the Occupational Employment and Wages Statistics (OEWS) include retail trade, health care and social services, accommodation and food services, public administration and construction. OEWS does not track agricultural employment, one of Yuma County's largest employment sectors. However, a recent study estimated that Yuma County had over **65,000** farmworkers,^q representing over **78%** of the farm worker population statewide.¹¹⁰

Quality early care and education programs rely on a strong workforce, but factors like low pay make it difficult to recruit and retain these educators. Early care and education is also a field with notable pay disparities;^r with those working as a home care provider, in a Head Start program or a public pre-K program getting paid varying amounts despite performing similar work. For example,

^p 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.

^q This estimate includes both seasonal and non-seasonal farmworkers.

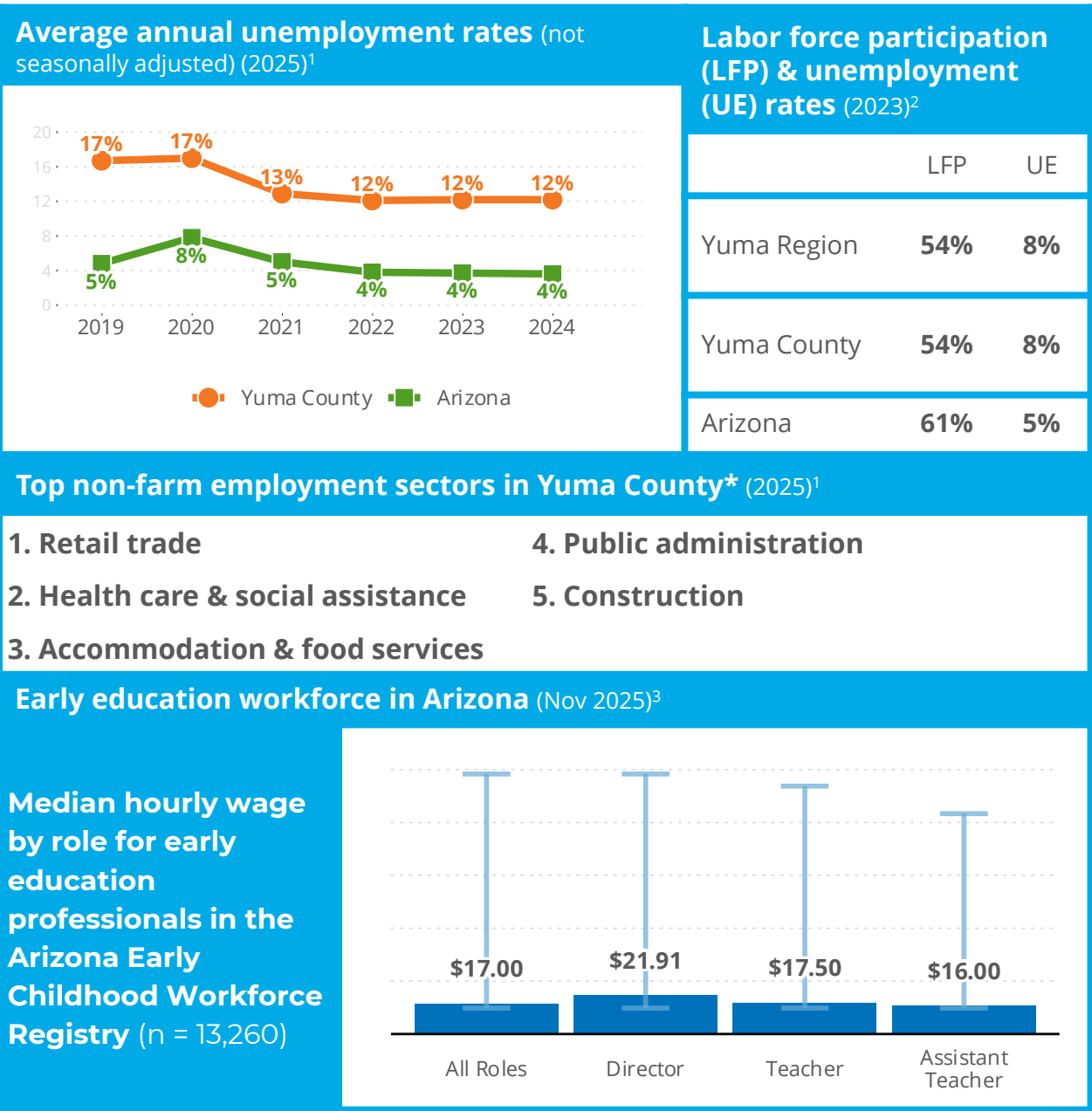
^r Programs such as Head Start and public pre-K programs receive federal funding supports that often allow for better wages and compensation in these settings compared to child care settings that don't receive these funds.

the average kindergarten teacher's salary in Arizona is about twice that of an early educator for children birth to age 5.¹¹¹ In Arizona, there were **13,260** early education professionals active in the Arizona Early Childhood Workforce Registry^s in November 2025. The median wage for registered early education professionals in the state was **\$17/hour**, ranging from **\$21.91/hour** for directors to **\$16/hour** for assistant teachers. All median wages fell below the 2025 self-sufficiency standards for one adult and one infant in Yuma County (**\$25.29/hour**), pointing to the reality that single parents working in early care in the region are likely to struggle to meet their basic needs.¹¹²

^s The Arizona Early Childhood Workforce Registry is Arizona's online hub for early childhood educators to track their employment, formal education, and professional development opportunities throughout their career. Early childhood educators access the registry to explore a directory of training, conferences, and other learning opportunities to support career development; fulfill state regulatory training requirements; apply for scholarships to pursue credentials, certificates, and degrees in early childhood education; and to establish career and professional development goals.

Figure 13.

Adult employment



¹ Arizona Office of Economic Opportunity. (2025). [Local Area Unemployment Statistics & Industry Employment datasets].

² U.S. Census Bureau. (2024). 2023 American Community Survey Five-Year Estimates, 2019-2023.

³ First Things First. (2025). [Arizona Early Childhood Workforce Registry dataset].

*These sectors reflect non-farm employment.

Notes: The "labor force" is all persons who are working (employed) or looking for work (unemployed). The "labor force participation rate" is the fraction of the population who are in the labor force, whether employed or unemployed. Persons not in the labor force are mostly students, stay-at-home parents, retirees, and institutionalized people. The "unemployment rate" is the fraction of the civilian labor force who are unemployed. Educator wage data from the Early Childhood Workforce Registry reflect wages from a sample of early educators active in the registry including teachers (n=6,054), assistant teachers (n=5,535), and directors (n=1,671).

CHILD DEVELOPMENT & HEALTH

Maternal and infant health

Access to quality health care can promote positive health outcomes for mothers and infants.¹¹³ Prenatal care is associated with reduced complications during pregnancy and birth, while also providing expectant parents with an opportunity to engage with health professionals.^{114, 115} The rate of timely prenatal care (care initiated in the first trimester) in the Yuma Region increased overall from 2020 (54.9%) to 2023 (60.1%). These rates were consistently lower than those in the state (68.8% - 71.7%). The proportion of births to mothers receiving no prenatal care in the region began and ended at 5.7% between 2019 and 2023, with a high of 6.8% in 2021. In contrast, births to mothers with some prenatal care (i.e., one to four prenatal visits) declined between 2019 and 2023, from 7.8% to 5.5%. Key informants noted that mothers in the region may be accessing prenatal care in Mexico, which may not be accurately captured by vital statistics data.

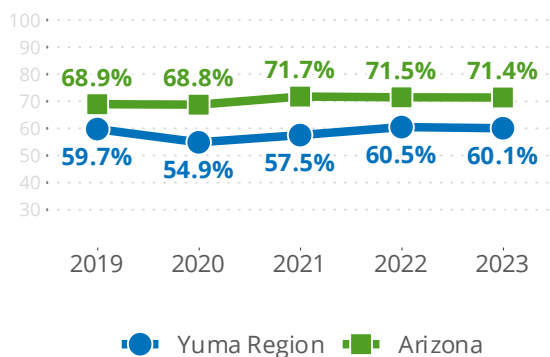
Outside of access to adequate prenatal care, other risk factors like low birth weight, preterm birth and the mother's age at birth can impact child health outcomes.^{116, 117} Low birth weight births (weighing less than 5 pounds and 8 ounces or 2,500 grams) and preterm births (those delivered before 37 weeks of pregnancy) can result in cognitive, respiratory, diabetes and gastrointestinal issues and are one of the largest drivers of infant mortality in the U.S.¹¹⁸ The proportion of low-birth-weight births in the Yuma Region increased between 2019 (6.3%) and 2023 (7.4%), but still ended below the state rate of 8.1% in 2023. Pre-term births in the region increased slightly overall from 2019 (8.7%) to 2022 (10.1%), decreasing to 8.8% in 2023. In three of the last five years, the Yuma Region met the Healthy People 2030 target for preterm births (no more than 9.4%). Arizona failed to meet the target since 2020, with 9.9% of births in the state being preterm in 2023.

Teenage parents often experience increased stress and hardship in comparison to adult parents and other non-parent teenagers. 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.^{119, 120, 121, 122, 123} Births in the Yuma Region to teenaged mothers (ages 19 and younger) decreased overall between 2019 (8.1%) and 2023 (5.8%), although the region had a consistently higher rate of births to teenage mothers than the state each year. In 2023, 4.5% of birth across the state were to teenaged mothers. Key informants suggested that the decline observed in the region may be influenced by increased education about teen pregnancy prevention and birth control, including efforts by local physicians. They also noted that the increase in four- and five-year high school graduation rates among teens may be contributing to this trend.

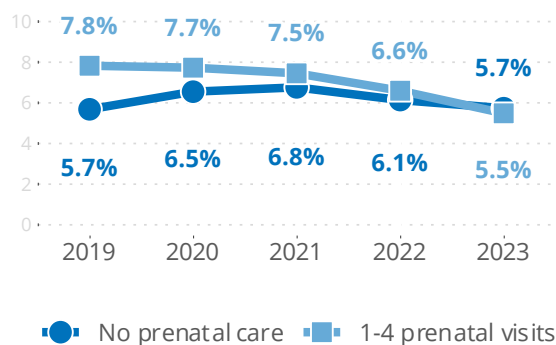
Figure 14.

Maternal and infant health

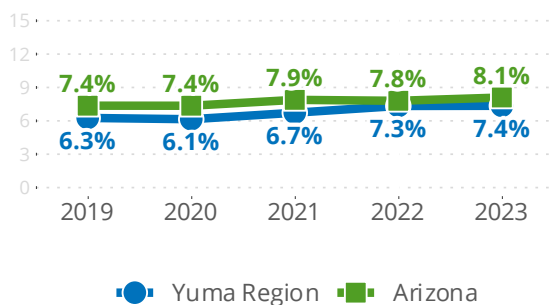
Births to mothers who began prenatal care in the first trimester¹



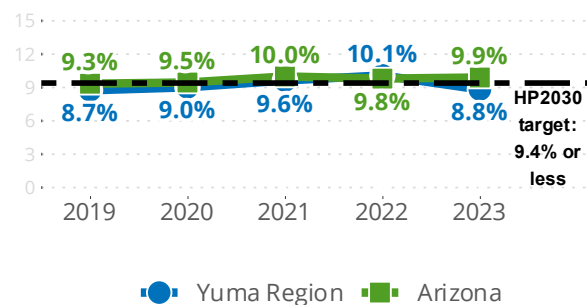
Births to mothers with inadequate prenatal care¹



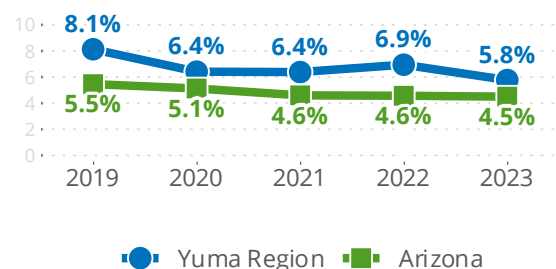
Low birth weight births (less than 2,500 grams)¹



Preterm births (less than 37 weeks gestation)^{1,2}



Births to teenaged mothers¹



¹ Arizona Department of Health Services. (2025). [Vital Statistic dataset].

² Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services. (2025). [Healthy People 2030 Objectives: MICH-02, MICH-07].

Access to care and service navigation

Health insurance coverage is an important indicator of whether families can access, afford and utilize medical care, including access to well-child visits and developmental screenings at a lower cost. According to 2023 American Community Survey (ACS) estimates, **93%** of young children birth to age 5 in the Yuma Region had health insurance, the same proportion as young children insured statewide (**93%**).¹²⁴ Between 2019 and 2022, the number of young children birth to age 5 in the region enrolled in the Arizona Health Care Cost Containment System (AHCCCS; Arizona's Medicaid program) steadily increased, reaching a high of **12,316** young children in 2021. Enrollment declined each year after 2022, following statewide trends and likely influenced by the post-pandemic requirement that all members enrolled in AHCCCS reverify their enrollment starting in April 2023.¹²⁵

Well-child visits provide scheduled opportunities for pediatricians to monitor growth and development, administer immunizations, observe familial dynamics and provide guidance to caregivers on essential topics and emerging milestones.^{126, 127, 128} From 2019 and 2024, between **67%** and **74%** of children birth to age 5 enrolled in AHCCCS in the Yuma Region had one or more well-child visits, comparable to young children statewide (**66%** - **72%**).

The American Academy of Pediatrics recommends that providers ask parents about developmental concerns at all infant and well-child visits and have parents complete a standardized developmental screening at the 9-, 18- and 30-month appointments.¹²⁹ 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 2024, **1,151** developmental screenings for children birth to 5 in the region were covered by AHCCCS. In state fiscal year (SFY) 2025, **272** children birth to age 5 in the Yuma Region received a developmental screening funded by the First Things First Home Visitation strategy. Based on the 2020 Census, this would represent **9%** of children birth to age 5 in the region.

Oral health is a fundamental component of overall health, well-being and self-confidence. Children with dental pain and lower oral health-related quality of life have more school absences and worse academic performance.^{130, 131, 132} In the Yuma Region, almost two-thirds (**65%**) of kindergarteners in public schools experienced some type of tooth decay and just over one-third (**35%**) had untreated decay during the 2018-19 through 2023-24 school year. These rates were above the state's rates for decay experience (**50%**) and untreated decay (**24%**). In addition, the Yuma Region had a smaller proportion of children who had a dental visit in the last year (**71%**) than the state (**76%**) and who had dental insurance (**64%** vs. **84%**), demonstrating that more than one-third of children in the region lacked access to dental insurance and therefore reduced opportunity for preventative care and treatment. Key informants noted that a lack of pediatric dentists, in addition to offices that stay open beyond normal working hours, can be a barrier to

oral health access in the Yuma Region. They also suggested that there is an opportunity for increased education for parents about the importance of oral health and the appropriate age to begin dental visits.

Immunization and child mortality

Immunization serves as the best method to prevent communicable childhood diseases in children and their communities. When enough children are immunized, the protection even extends to those who are unable or who choose not to be vaccinated.¹³³ In Arizona, one of the required immunizations to enroll in preschool and kindergarten is measles, mumps and rubella (MMR).¹³⁴ Arizona had declining MMR immunization rates in kindergarteners between the 2022-23 and 2024-25 school years, declining slightly from **89.9%** (2022-23) to **88.7%** (2024-25). The Yuma Region's coverage also decreased slightly from **95.7%** (2022-23) to **94.4%** (2024-25). This means that MMR coverage in the region dropped below the threshold for herd immunity of **95%** and did not meet the Healthy People 2030 target of **95%** or higher for the 2024-25 school year.¹³⁵ This is concerning as Arizona has been experiencing an active measles outbreak, although Yuma County had **no** cases of measles as of June 4, 2026.[†]

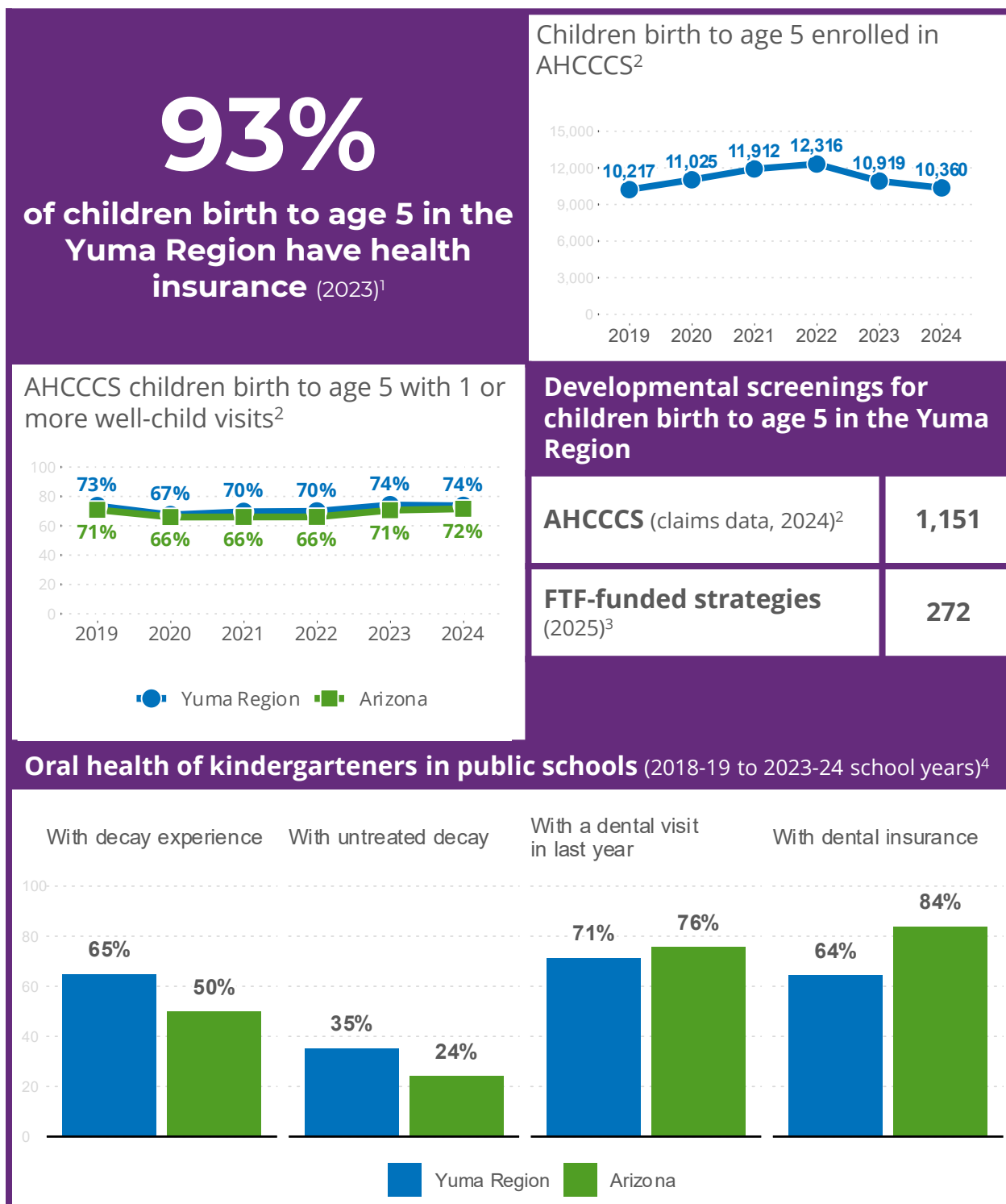
Children may be exempted from vaccination based on medical restrictions, religious beliefs or personal beliefs. Medical exemptions can apply to students of all ages, while religious belief exemptions apply to students in early care and education programs and personal belief exemptions apply to K-12 students.¹³⁶ Trends in exemptions among children in child care in the Yuma Region differed slightly from exemptions among kindergarteners through the 2024-25 school year, although both ended with low exemption rates of just around 3% in the 2024-25 school year; **2.8%** of children in child care in the region received a religious exemption and **3.2%** of kindergarteners received a personal belief exemption that year. Exemptions from all immunizations in child care settings increased from **0.9%** in the 2020-21 school year to **1.9%** in the 2024-25 school year. Rates in kindergarten also increased from **1.4%** to **1.7%** over the same period. The most recent exemption rates for children in child care (**1.9%**) and kindergarten (**1.7%**) in the region, were notably lower than those seen statewide (**4.8%** and **4.7%** respectively).¹³⁷

Healthy People 2030 set a target of no more than **5.0** infant deaths per 1,000 live births. Between 2021 and 2023, the infant mortality rate for the Yuma Region was **6.0** deaths per 1,000 live births, just above the state (**5.7**). This means that the region and the state failed to meet the Healthy People 2030 target. Between 2021 and 2023, young child mortality was slightly higher in Yuma County (**31** deaths per 100,000 children ages 1-4) compared to the state (**29.8**). Statewide, the

[†] For more up-to-date case counts see <https://www.azdhs.gov/preparedness/epidemiology-disease-control/measles/index.php>

Figure 15.

Access to care and service navigation



¹ U.S. Census Bureau. (2024). 2023 American Community Survey Five-Year Estimates, 2019-2023.

² ASU CHiR. (2025). [AHCCCS claims dataset].

³ First Things First. (2025). [Home Visitation & Screenings Reach datasets].

⁴ First Things First. (2025). [Healthy Smile Healthy Bodies survey dataset].

Note: AHCCCS data reflect children birth to age 5 with approved insurance claims– these data may not reflect all care provided in the region. Developmental screenings were provided through the FTF-funded Home Visitation strategies. Overall, 312 children received developmental, socio-emotional, hearing and vision screenings in the region

leading causes of death for infants were prematurity and suffocation, while drowning was the leading cause of death for children aged 1 to 4 years.¹³⁸

Young children with special needs

Timely connection with early intervention services—such as speech, physical, occupational and behavioral therapy— can critically shape school readiness and the developmental trajectory of young children with medical conditions, developmental delays and even certain risk factors for delays.¹³⁹ In Arizona, the Department of Economic Security's (DES) Arizona Early Intervention Program (AzEIP), the Division of Developmental Disabilities (DDD), and the Arizona Department of Education's (ADE) Early Childhood Special Education Program each play a role in providing services to families with children who have special needs.

AzEIP^u provides early intervention and a variety of supportive services to families of children birth to age 2 with developmental delays or disabilities.¹⁴⁰ In state fiscal year (SFY) 2024, children birth to age 2 in the Yuma Region were most frequently referred to AzEIP by physicians (**60%**). Parents and families were the second most common referral source (**27%**), followed by the Department of Child Safety (**5%**), a health or service agency (**4%**), or a hospital or health facility or another source (both **2%**). About four in 10 young children (**41%**) referred to AzEIP in the Yuma Region were found eligible for services, including **40%** who received services and **1%** found eligible but who had not received services within the fiscal year. **Thirty percent** of referred children were assessed as not eligible for services (**26%**) or were screened out (**4%**). In an additional **25%** of referrals, families were either not interested in services (**14%**) or could not be reached (**11%**).

In SFY 2024, the number of children birth to age 2 who received services from AzEIP in the region (n = **201**) was a notable increase since SFY 2018 (n = **147**) but fell below the recent high of **218** young children served by AzEIP in SFY 2022. The **201** children served by AzEIP in SFY 2024 represented **2.8%** of children birth to age 2 residing in the region per the 2020 Census. This is higher than the **2.5%** of children birth to age 2 receiving AzEIP services statewide but lower than the proportion of young children accessing early intervention nationally (**4.3%**).¹⁴¹ However, national research suggests that many more young children would likely benefit from early intervention than are receiving it.¹⁴²

Children who receive a diagnosis of autism, cerebral palsy, epilepsy, cognitive or intellectual disability or down syndrome may also become eligible for services through DDD.^v The number of

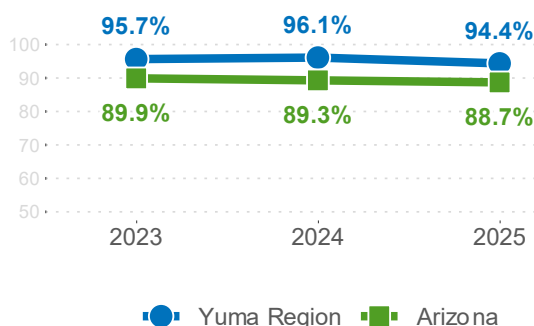
^u For more information on AzEIP (which is a division of the Department of Economic Security), visit <https://www.azdes.gov/azeip/>

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

Figure 16.

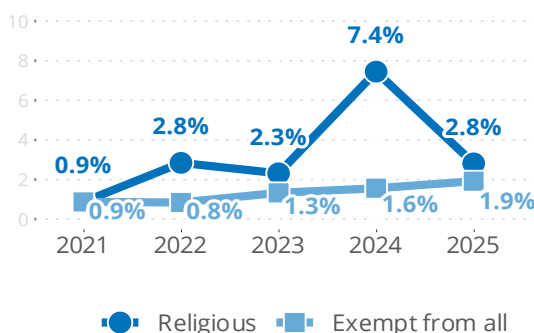
Immunization and child mortality

Kindergarten MMR immunization rates¹

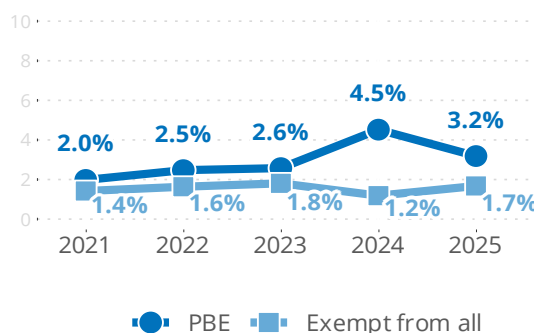


Immunization exemption rates¹

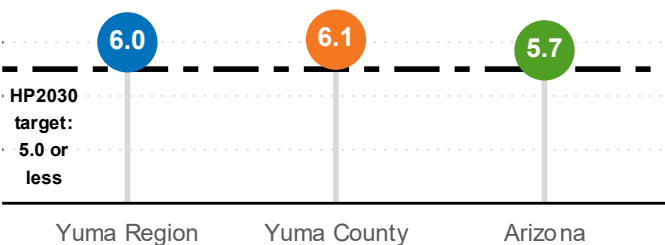
Child care



Kindergarten



Infant mortality rate, deaths per 1,000 live births (2021-2023 combined)^{2,3}



Young child mortality rate, deaths per 100,000 children ages 1-4 (2021-2023 combined)²

Yuma County	31.0
Arizona	29.8

¹ Arizona Department of Health Services. (2025). [Child Care & Kindergarten Immunizations datasets].

² Arizona Department of Health Services. (2025). [Vital Statistic dataset].

³ Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services. (2025). [Healthy People 2030 Objectives: MICH-02, MICH-07].

Note: PBE in the kindergarten exemption figure stands for personal belief exemption.

children birth to age 5 in the Yuma Region receiving DDD services decreased sharply from **109** in SFY 2018 to lows of between **67** and **70** young children served each year between SFY 2019 and SFY 2022. The number of young children receiving DDD services increased the following two years, to a high of **143** young children served in SFY 2024. 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. A total of **359** children birth to age 5 in the region received services from AzEIP and/or DDD in SFY 2024. This equates to **2.4%** of all children birth to 5 in the Yuma Region based on estimates from the 2020 Census.

Preschool to 3rd grade students with special needs

As a child with special needs approaches age 3, they can be transferred from AzEIP to the Early Childhood Special Education Program to receive services through their local education agency (LEA).^w In the Yuma Region, the number of children age 3 to 5 receiving special education services through their LEA varied over recent years, with numbers increasing from state fiscal year (SFY) 2018 (n = **215**) to a recent high of **299** in SFY 2020, before ending at **257** in SFY 2022. This represented an overall **20%** increase between SFY 2018 and SFY 2022. Across Arizona, the number decreased from a high of **10,521** in SFY 2020 to **8,086** in SFY 2022, representing a **23%** decrease over those years.

Conversely, the number of K-3rd grade students enrolled in special education across the state showed an overall increase from SFY 2018 (n = **36,468**) to SFY 2022 (n = **37,334**), as did the region, from **1,030** to **1,047** over those same years. Notably, these numbers were higher than the early intervention participation would suggest, which may reflect the number of children not getting an adequate assessment of their needs and abilities until they enter the public school system.

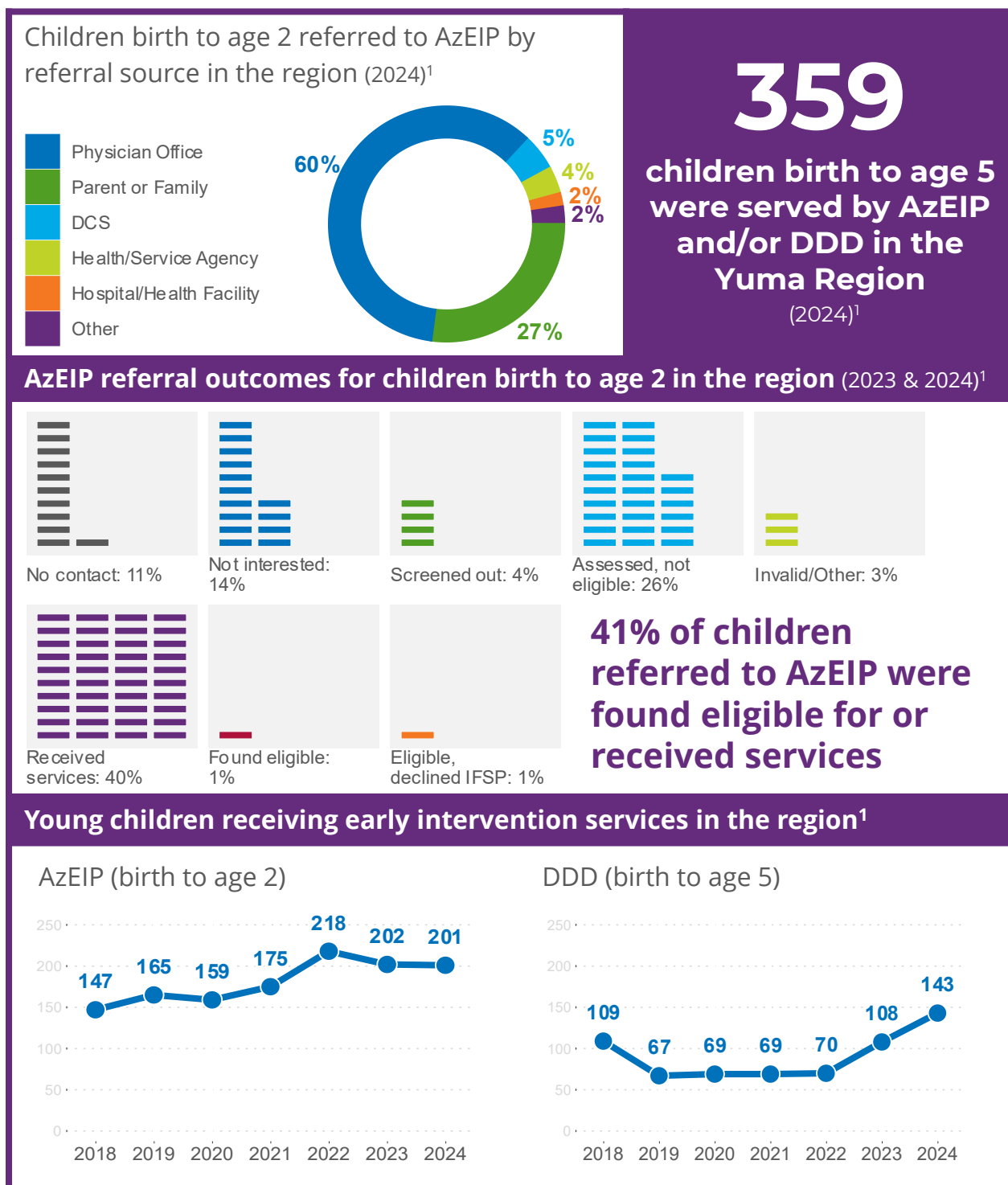
Of children ages 3 to 5 receiving special needs services, the largest proportion were diagnosed with a developmental delay (DD, **44%**), with an additional **28%** diagnosed with preschool severe delay (PSD) and **26%** diagnosed with a speech language impairment (SLI).^x Speech language impairment (**34%**) was the most common among kindergarten through 3rd grade students in

^w For more information on ADE's Early Childhood Special Education program, visit <https://www.azed.gov/specialeducation/early-childhood-special-education> and <https://www.azed.gov/specialeducation/early-childhood-special-education-child-find>

^x In Arizona, preschool severe delay is defined as performance on a norm-referenced assessment that is more than three standard deviations below the mean for typically developing children in the areas of cognitive, physical, communication, social-emotional or adaptive development.

Figure 17.

Young children with special needs



¹ Arizona Department of Economic Security. (2024). [Arizona Early Intervention Program & Division of Developmental Disabilities datasets].

Note: Data on young children receiving services reflect the Oct 1 snapshot of AzEIP services, not a cumulative total throughout the year.

special education, followed by developmental delay (**27%**), autism (**15%**), another diagnosis^y (**13%**) or a specific learning disability (SLD, **11%**).

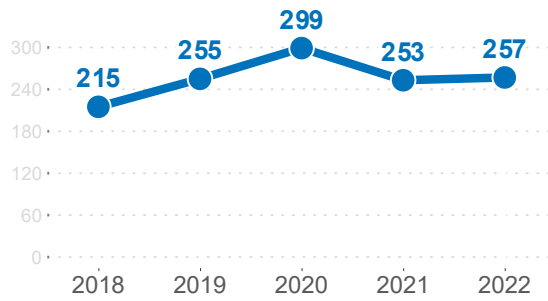
^y The most common disabilities in the “Other” category are other health impairments (these are usually chronic health conditions that affect a child’s ability to attend or participate in school), intellectual disabilities, emotional disturbance, hearing or vision impairment, multiple disabilities, orthopedic impairments and deaf-blindness.

Figure 18.

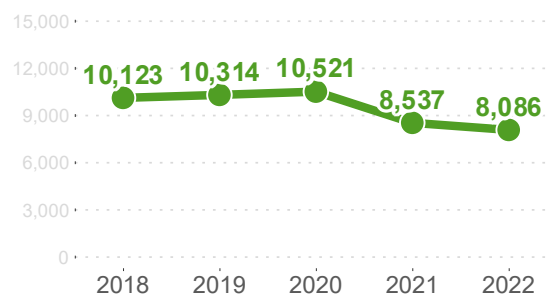
Preschool to 3rd grade students with special needs

Children age 3-5 receiving special education services from local school district¹

Yuma Region

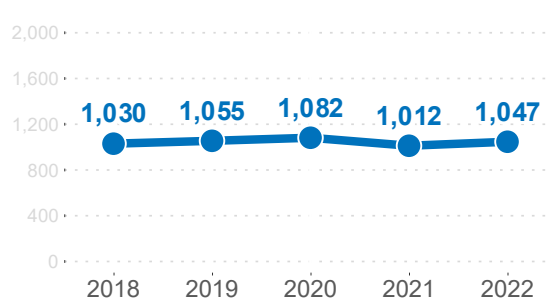


Arizona

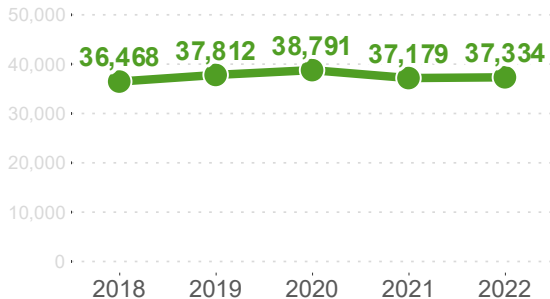


K-3rd grade students enrolled in special education in public and charter schools¹

Yuma Region

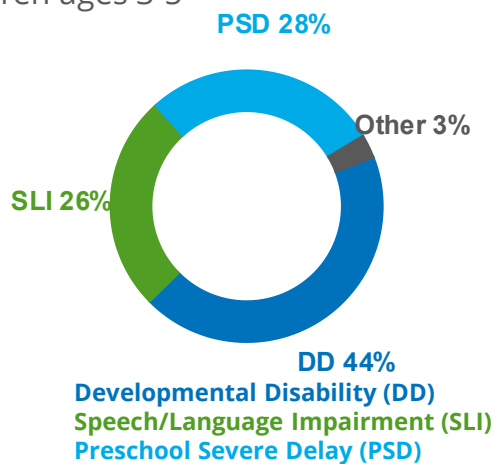


Arizona

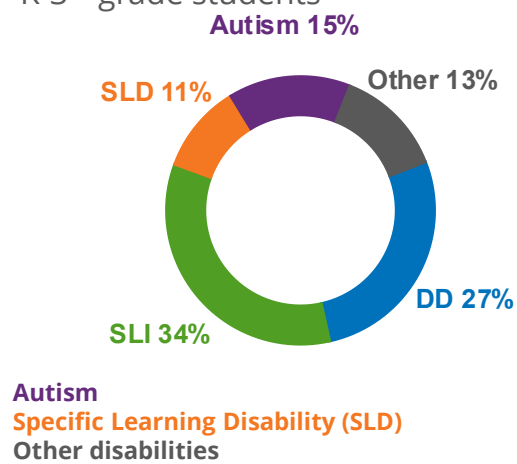


Primary disability for children receiving services in the region (2022)¹

Children ages 3-5



K-3rd grade students



¹ Arizona Department of Education. (2023). [Exceptional Student Services dataset].

Note: Most common disabilities in the "Other" category are other health impairments (these are usually chronic health conditions that affect a child's ability to attend or participate in school), intellectual disabilities, emotional disturbance, hearing or vision impairment, multiple disabilities, orthopedic impairments, and deaf-blindness.

MAPS & METHODS

Methods

U.S. Census and American Community Survey Data. The U.S. Census^z is an enumeration of the population of the United States 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, each with an average population of 66 people. The 2020 U.S. Census data for the region presented in this report were calculated by identifying each block in the region and aggregating the data across all of those blocks. With the implementation of new privacy measures by the U.S. Census, some data previously available at the block level, such as grandchildren living in a grandparent's households or counts of households with children birth to age 5, are now only published at the block group or tract level. Regional estimates for these indicators were calculated by aggregating data over the census tracts which are wholly or partially contained within the region. Data from partial census tracts were apportioned according to the percentage of the 2020 U.S. Census population in that tract living inside the region.

The American Community Survey (ACS)^{aa} 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 approximately 1,750 census tracts, each with an average population of 3,900 people. ACS data for the region were calculated by aggregating over the census tracts which are wholly or partially contained in the region. The data from partial census tracts were apportioned according to the percentage of the 2020 U.S. Census population in that tract living inside the region. The most recent and most reliable ACS data are averaged over the past five years; those are the data included in this report. They are based on surveys conducted from 2019 to 2023. In general, the reliability of ACS estimates is greater for more populated areas. Statewide estimates, for example, are more reliable than county-level estimates.

Child care capacity calculations. Lists of child care providers are maintained by multiple state agencies in Arizona, including the Arizona Department of Health Services (ADHS), which licenses child care centers; the Arizona Department of Economic Security (DES), which maintains the list of child care providers in Arizona who are active within the National Data System of Child Care NACCRRAware database; the Arizona Department of Education (ADE), which tracks preschool enrollment in public and charter schools; and First Things First (FTF), which administers the Quality First program. The ADHS child care licensing database was used as the primary source for child

^z For more information, see <https://www.census.gov/programs-surveys/decennial-census.html>

^{aa} For more information, see <https://www.census.gov/programs-surveys/acs.html>

care capacity calculations in this report, as analyses of both statewide and region-level data showed that most child care slots for regulated providers in the region are provided by centers. Centers that only serve children ages 5-12 were removed from child care capacity calculations, as these are typically before- & after-school programs that only serve school-age children. This report also used data from the DES child care provider list to estimate the number of registered care providers and their capacity by type of provider: centers (including Head Start centers), schools and homes (both group home and family home providers). For all tables, providers were geocoded to regions and sub-regions using addresses or coordinates provided in the state agency datasets to assign them to regions and sub-regions. Comparisons of child care capacity to the young child population are meant to provide a relative assessment of the abundance or scarcity of child care supply relative to potential demand. The child care data in this report do not reflect the capacity of unlicensed, unregulated or informal child care providers in the region. The estimated supply may also over-estimate availability in regulated care as it did not account for child care providers that operate under licensed capacity by choice or children who enroll in multiple facilities (e.g., a child who attends part-day Head Start or school-based preschool in the morning and a child care center in the afternoon).

First Things First (FTF) strategy data. Data related to FTF-funded strategies were provided for this report by FTF staff. These data included regional estimates of oral health indicators and hearing, vision, socio-emotional and developmental screening reach, zip code-level service data for home visitation programs, statewide workforce registry wage data and provider-level Quality First participation and enrollment data. The vendor used an apportioning file provided by FTF to create regional estimates of home visitation services from the zip-code level file.

Early education and service data from the Arizona Department of Economic Security (DES). Data related to child care assistance, Arizona Early Intervention Program (AzEIP) referrals, outcomes and services, and Division of Developmental Disabilities services were provided by DES. These data were geocoded to regions and sub-regions by staff at DES using a custom shapefile provided by the vendor.

Health data from the Arizona Department of Health Services (ADHS). Data related to births, infant and maternal health, immunization rates at child care and school facilities, infant and child mortality and enrollment and participation in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) were provided by ADHS. All data apart from immunization data were geocoded to regions and sub-regions by staff at ADHS using a custom shapefile provided by the vendor. The vendor geocoded child care and school facilities to regions using addresses or coordinates provided in the immunization datasets to create custom immunization coverage estimates.

Health data from the Arizona Health Care Cost Containment System (AHCCCS). FTF partnered with the Arizona State University Center for Health Information and Research (CHiR) to create

custom tabulations of health claims data for young children birth to age 5 enrolled in AHCCCS health care plans. These estimates, at the state, county, regional and sub-regional levels, were provided to the vendor for inclusion in this report.

Employment and industry data from the Arizona Office of Economic Opportunity (OEO). Data for unemployment rates^{bb} and major employment sectors^{cc} were obtained from the OEO for counties and multi-county areas (which combine 2-4 small counties to produce a more reliable estimate). The top five employment sectors for each county or multi-county area reflect those with the most overall employees in Quarter 4 of 2024. The Quarterly Census of Employment and Wages, the underlying data source for these employment estimates, does not capture farm employment, so agricultural workers are not reflected in these data.

Education data from the Arizona Department of Education (ADE). For past FTF Regional Needs and Assets reports, regional estimates for education data were obtained through a custom tabulation of unredacted data files provided by ADE. Access to unredacted data files was not available for this report. Instead, publicly-available data files published by ADE^{dd} were used to examine trends in enrollment, assessment results, graduation and dropout rates, and data on chronic absenteeism were obtained via the Maricopa Association of Governments and ReadOn Arizona MAPLit data tool.^{ee} Due to the frequency of data suppression in these files to protect student privacy, data could not be reliably aggregated across schools or districts to create regional estimates. Data on services for students with disabilities by grade are not publicly available for geographies smaller than the state, so custom regional estimates from the 2024 Regional Needs and Assets reports were used in this report.

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 February 2025 and extending to March 2026. 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

^{bb} For more information, see <https://o eo.az.gov/labor-market/unemployment>

^{cc} For more information, see <https://o eo.az.gov/labor-market/industry-employment>

^{dd} For more information, see <https://www.azed.gov/accountability-research/data>

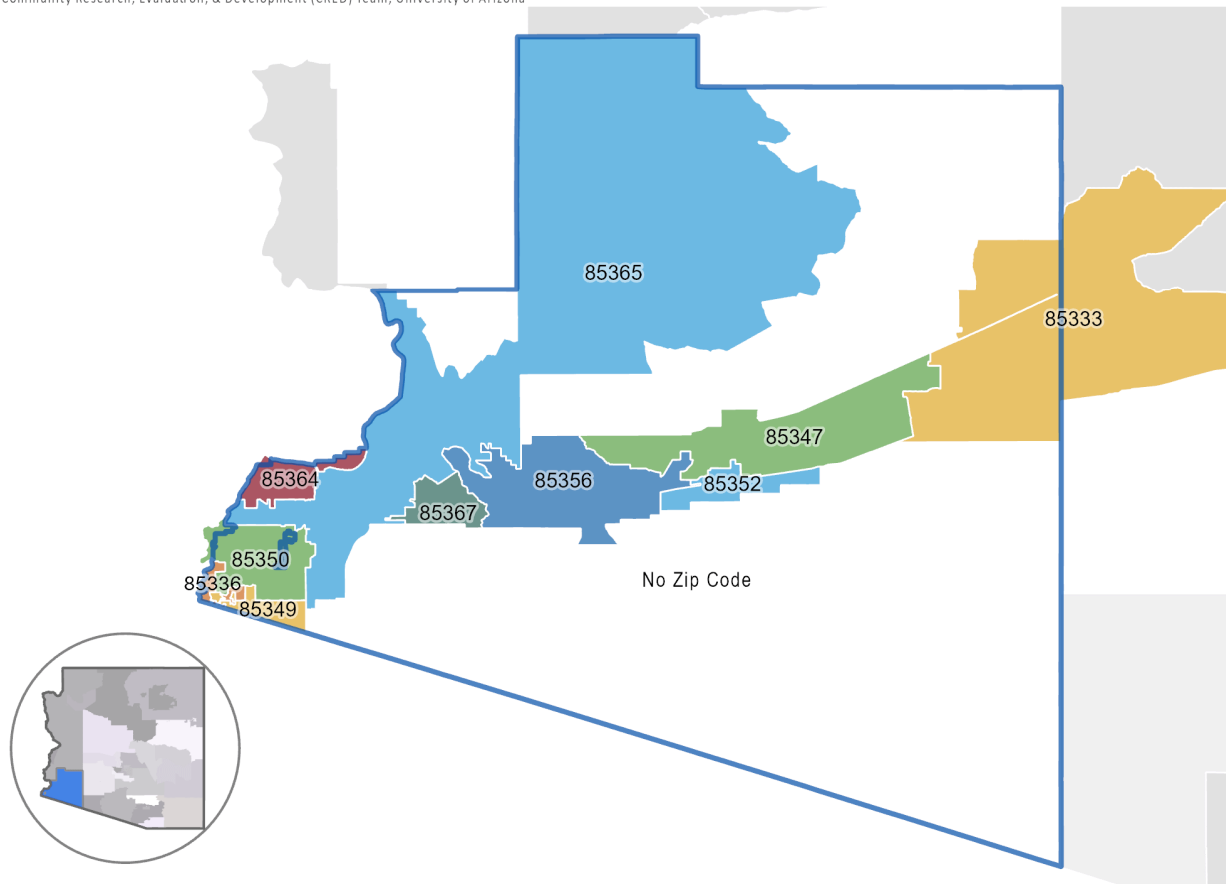
^{ee} For more information, see <https://geo.azmag.gov/maps/readonaz/>

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 reporting of social service and early education programming data if the count is less than 10 and 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, ADE requires 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 "<6" or "<10" 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", "NA" or a note that states "data not available."

Map of Zip Codes in the Region

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



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

Zip Code Tabulation Areas (ZCTAs) in the Yuma Region

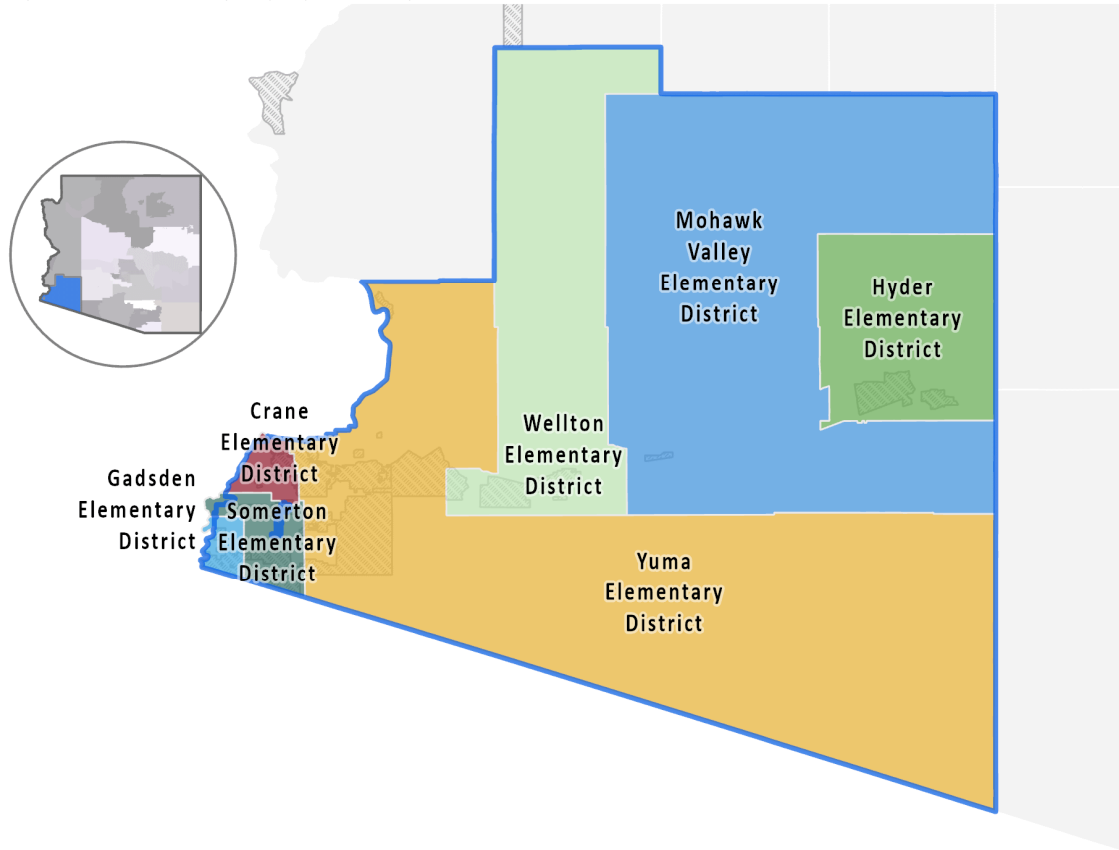
Zip Code Tabulation Area (ZCTA)	Population (all ages)	Percent of this ZCTA's total population living in the Yuma Region	This ZCTA is shared with
Yuma Region	203,024		
85333	341	80%	Southwest Maricopa Region
85336	7,810	100%	
85347	310	100%	
85349	28,039	100%	
85350	18,017	97%	Cocopah Tribe Region
85352	388	100%	
85356	3,487	100%	
85364	73,162	99%	Cocopah Tribe Region
85365	50,166	100%	
85367	21,303	100%	

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

Note: With the implementation of differential privacy in the 2020 Census, small area estimates now have injected 'noise' (error) to prevent accidental disclosure of Census responses. Geographies that are not primary census geographies, like ZCTAs, have noisier (or less accurate) estimates than primary geographies, like tracts.

Map of School Districts in the Region

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



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

DATA SOURCES

Arizona Department of Child Safety. (2025). Monthly Operational Outcomes Report, May 2025. Accessed at <https://dcs.az.gov/reports>

Arizona Department of Economic Security. (2025). [National Child Care Data System NCCRAware database extract]. Unpublished aggregated data received through the First Things First state agency data request.

Arizona Department of Economic Security. (2025). [Child Care Assistance dataset]. Unpublished aggregated data received through the First Things First state agency data request.

Arizona Department of Economic Security. (2025). [Arizona Early Intervention Program dataset]. Unpublished aggregated data received through the First Things First state agency data request.

Arizona Department of Economic Security. (2025). [Division of Developmental Disabilities dataset]. Unpublished aggregated data received through the First Things First state agency data request.

Arizona Department of Education. (2025). [Empowerment Scholarship Account Enrollment]. Accessed at <https://www.azed.gov/esa/esa-quarterly-reports>

Arizona Department of Education. (2025). [Oct 1 Enrollment, Graduation Rates, Dropout Rates, State Assessment datasets]. Accessed at <https://www.azed.gov/accountability-research/data>

Arizona Department of Education. (2025). [Exceptional Student Services dataset]. Custom tabulation of unpublished raw data produced for the 2024 Regional Needs & Assets Report.

Arizona Department of Health Services. (2025). [Child Care Licensing dataset]. Unpublished aggregated data received through the First Things First state agency data request.

Arizona Department of Health Services. (2025). [Child Care & Kindergarten Immunizations dataset]. Custom tabulation of unpublished raw data received through the First Things First state agency data request.

Arizona Department of Health Services. (2025). [Vital Statistic dataset]. Unpublished aggregated data received through the First Things First state agency data request.

Arizona Department of Health Services. (2025). [WIC dataset]. Unpublished aggregated data received through the First Things First state agency data request.

Arizona Office of Economic Opportunity. (2025). [Local Area Unemployment Statistics (LAUS) dataset]. Accessed at <https://oeo.az.gov/labor-market/unemployment>

Arizona Office of Economic Opportunity. (2025). [Industry Employment and Wages dataset]. Accessed at <https://oeo.az.gov/labor-market/industry-employment>

Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services. (2025). [Healthy People 2030 Objectives: MICH-02, MICH-07]. Accessed at <https://odphp.health.gov/healthypeople/>

Center for Health Information & Research, Arizona State University. (2026). [AHCCCS Claims dataset]. Custom aggregation of unpublished data completed by ASU CHiR.

Economic Research Service, U.S. Department of Agriculture. (2022). Food Access Research Atlas. Accessed at <https://www.ers.usda.gov/data-products/food-access-research-atlas/>

First Things First. (2025). [Home Visitation & Screenings Reach datasets]. Unpublished aggregated data received through the First Things First state agency data request.

First Things First 2026 Needs and Assets Report

First Things First. (2025). [Healthy Smiles Health Bodies survey dataset]. Unpublished aggregated data received through the First Things First state agency data request.

First Things First. (2025). [Quality First dataset]. Custom tabulation of unpublished raw data received through the First Things First state agency data request.

First Things First. (2025). [Arizona Early Childhood Workforce Registry dataset]. Unpublished aggregated data received through the First Things First state agency data request.

Health Management Associates. (2024). 2024 Child Care Market Rate Survey. Arizona Department of Economic Security. Accessed at <https://des.az.gov/sites/default/files/media/2024-AZ-Child-Care-Market-Rate-Survey.pdf>.

Kucklick, A. & Brolliar, S. (2025). [Arizona 2025 Self-Sufficiency Standard dashboard]. Produced by the Center for Women's Welfare, University of Washington on behalf of the Women's Foundation for the State of Arizona. Accessed at <https://womensgiving.org/sss2025/>

Kucklick, A., Manzer, L., and Mast, A. (2022). [Arizona 2022 Self Sufficiency Standard dataset]. Produced by the Center for Women's Welfare, University of Washington on behalf of the Women's Foundation for the State of Arizona. Accessed at <https://selfsufficiencystandard.org/arizona/>

Maricopa Association of Governments. (2026). [ReadOn Arizona MapLIT dashboard reports: enrollment, chronic absences, assessments]. Accessed at <https://geo.azmag.gov/maps/readonaz/>

Recht, H. (2023). censusapi: Retrieve Data from the Census APIs. R package version 0.9.0, <https://github.com/hrecht/censusapi>, <https://www.hrecht.com/censusapi/>.

Walker, K., Herman, M., and Eberwein, K. (2026). tidycensus: Load US Census Boundary and Attribute Data as 'tidyverse' and 'sf'-Ready Data Frames. R package version 1.7.5, <https://walker-data.com/tidycensus/>.

U.S. Census Bureau. (2012). 2010 Decennial Census, Tables P1, P14, P20. Accessed via API using the TidyCensus and CensusAPI packages.

U.S. Census Bureau. (2023). 2020 Decennial Census, Demographic and Housing Characteristics (DHC). Tables P1, P4, P6, P7, P8, P9, P11, P12A-AH, P14, P20, P21, HCT3. Accessed via API using the TidyCensus and CensusAPI packages.

U.S. Census Bureau. (2020). American Community Survey 5-Year Estimates, 2014-2018, Tables, B17001, B17002, B17006, B17022. Accessed via API using the TidyCensus and CensusAPI packages.

U.S. Census Bureau. (2024). American Community Survey 5-Year Estimates, 2019-2023, Tables B05009, B09001, B10002, B14003, B15002, B16001, B16002, B16005, B17001, B17002, B17006, B17022, B19126, B23008, B23025, B25002, B25106, B27001, B28005, B28008, B28010. Accessed via API using the TidyCensus and CensusAPI packages.

U.S. Census Bureau. (2025). 2023, 2020, & 2010 Tiger/Line Shapefiles prepared by the U.S. Census. Accessed at <http://www.census.gov/geo/maps-data/data/tiger-line.html>

REFERENCES

- ¹ Khubba, S., Heim, K., & Hong, J. (2022, March 10). National census coverage estimates for people in the United States by demographic characteristics. United States Census Bureau. Retrieved August 9, 2023 from <https://www2.census.gov/programs/surveys/decennial/coverage-measurement/pes/national-census-coverage-estimates-by-demographic-characteristics.pdf>
- ² Knudsen, E. I., Heckman, J. J., Cameron, J. L., & Shonkoff, J. P. (2006). Economic, neurobiological, and behavioral perspectives on building America's future workforce. *Proceedings of the National Academy of Sciences - PNAS*, 103(27), 10155–10162. <https://doi.org/10.1073/pnas.0600888103>
- ³ Heckman, J. J. & Mosso, S. (2014). The Economics of Human Development and Social Mobility. *Annual Review of Economics*, 6(1), 689-733. <https://doi.org/10.1146/annurev-economics-080213-040753>
- ⁴ Ellingson, K., Ruedas, P., Hawkes, B., Trujillo, A., Larson A. (2024). 2024 Arizona Farmworker Enumeration Profiles Study. Retrieved from <https://azfeps.arizona.edu/sites/default/files/2024-10/2024%20AZ-FEPS%20Final.pdf>
- ⁵ City of Yuma. Economic Development Basics. Retrieved from <https://www.yumacountyaz.gov/government/county-administrator/economic-development-plans>
- ⁶ United States Census. (2026). Slow Growth Impacts Nation's Largest Counties Hardest. Retrieved from <https://www.census.gov/newsroom/press-releases/2026/2025-poest-metro-micro-counties.html>
- ⁷ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ⁸ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ⁹ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ¹⁰ Redd, Z., Sanchez Karver, T., Murphey, D., Anderson Moore, K., Knewstubb, D., & Child Trends. (2011, November 1). Two Generations in Poverty: Status and Trends among Parents and Children in the United States, 2000-2010 - Child Trends. Retrieved January 17, 2024, from <https://www.childtrends.org/publications/two-generations-in-poverty-status-and-trends-among-parents-and-children-in-the-united-states-2000-2010-2>
- ¹¹ Amato, P. R. (2005). The impact of family formation change on the cognitive, social, and emotional well-being of the next generation. *The Future of Children*, 15(2), 75-96. <https://www.jstor.org/stable/3556564>
- ¹² Irvin, K., Fahim, F., Alshehri, S., & Kitsantas, P. (2018). Family structure and children's unmet health-care needs. *Journal of Child Health Care*, 22(1), 57-67. <https://doi.org/10.1177/1367493517748372>
- ¹³ Grafova, I. B., Monheit, A. C., & Kumar, R. (2022). Income shocks and out-of-pocket health care spending: Implications for single-mother families. *Journal of Family and Economic Issues*, 43(3), 489-500. <https://doi.org/10.1007/s10834-021-09780-6>
- ¹⁴ Taylor, Z. E., & Conger, R. D. (2014). Risk and resilience processes in single-mother families: An interactionist perspective. In Sloboda, Z. & Petras, H. (Eds.), *Defining prevention science* (pp. 195-217). Springer, Boston, MA. https://doi.org/10.1007/978-1-4899-7424-2_9

- ¹⁵ Cabrera, N. J., Volling, B. L., & Barr, R. (2018). Fathers are parents, too! Widening the lens on parenting for children's development. *Child Development Perspectives*, 12(3), 152-157. <https://doi.org/10.1111/cdep.12275>
- ¹⁶ Coles, R. L. (2015). Single-father families: A review of the literature. *Journal of Family Theory & Review*, 7(2), 144-166. <https://doi.org/10.1111/jftr.12069>
- ¹⁷ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ¹⁸ Pilkauskas, N. V., Amorim, M., & Dunifon, R. E. (2020). Historical trends in children living in multigenerational households in the United States: 1870–2018. *Demography*, 57(6), 2269-2296. <https://doi.org/10.1007/s13524-020-00920-5>
- ¹⁹ Amorim, M., Dunifon, R., & Pilkauskas, N. (2017). The magnitude and timing of grandparental coresidence during childhood in the United States. *Demographic Research*, 37, 1695–1706. <https://doi.org/10.4054/DemRes.2017.37.52>
- ²⁰ Cohn, D., & Passel, J. S. (2018, April 5). *Record 64 million Americans live in multigenerational households*. Pew Research Center. Retrieved August 16, 2023 from <https://www.pewresearch.org/short-reads/2018/04/05/a-record-64-million-americans-live-in-multigenerational-households/>
- ²¹ Cohn, D., Horowitz, J. M., Minkin, R., Fry, R., & Hurst, K. (2022, March 24). *Financial issues top the list of reasons U.S. adults live in multigenerational homes*. Pew Research Center. Retrieved August 16, 2023 from <https://www.pewresearch.org/social-trends/2022/03/24/financial-issues-top-the-list-of-reasons-u-s-adults-live-in-multigenerational-homes/>
- ²² Mustillo, S., Li, M., & Wang, W. (2021). Parent work-to-family conflict and child psychological well-being: Moderating role of grandparent coresidence. *Journal of Marriage and Family*, 83(1), 27-39. <https://doi.org/10.1111/jomf.12703>
- ²³ Barnett, M. A., Yancura, L., Wilmoth, J., & Sano, Y. (2016). Wellbeing among rural grandfamilies in two multigenerational household structures. *GrandFamilies: The Contemporary Journal of Research, Practice and Policy*, 3(1). Retrieved August 16, 2021 from <http://scholarworks.wmich.edu/grandfamilies/vol3/iss1/4>
- ²⁴ Harvey, H., & Dunifon, R. (2023). Why mothers double up: The role of demographic, economic, and family characteristics. *Journal of Marriage and Family*, 85(3), 845-868. <https://doi.org/10.1111/jomf.12903>
- ²⁵ Augustine, J. M., & Raley, R. K. (2013). Multigenerational households and the school readiness of children born to unmarried mothers. *Journal of Family Issues*, 34(4), 431–459. <https://doi.org/10.1177/0192513X12439177>
- ²⁶ Pilkauskas, N. V., Amorim, M., & Dunifon, R. E. (2020). Historical trends in children living in multigenerational households in the United States: 1870–2018. *Demography*, 57(6), 2269-2296. <https://doi.org/10.1007/s13524-020-00920-5>
- ²⁷ Livingston, G. (2018). *The changing profile of unmarried parents*. Pew Research Center. Retrieved August 16, 2021 from <https://www.pewsocialtrends.org/2018/04/25/the-changing-profile-of-unmarried-parents/>
- ²⁸ Vandivere, S., Yrausquin, A., Allen, T., Malm, K., & McKlinton, A. (2012, November 30). *Children in nonparental care: A review of the literature and analysis of data gaps*. Washington, DC: U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. Retrieved August 16, 2021 from <http://aspe.hhs.gov/basic-report/children-nonparental-care-review-literature-and-analysis-data-gaps>
- ²⁹ Rubin, D., Springer, S. H., Zlotnik, S., Kang-Yi, C. D., Szilagyi, M., Forkey, H., Harmon, D., Jandes, P., Jones, V. F., Lee, P., Nalven, L., Sagor, L., Schulte, E., & Zetlev, L. W. (2017). Needs of Kinship care families and pediatric practice. *Pediatrics (Evanston)*, 139(4). <https://doi.org/10.1542/peds.2017-0099>
- ³⁰ Dolbin-MacNab, M. L., & Stucki, B. D. (2015). *Grandparents raising grandchildren*. American Association for Marriage and Family Therapy. Retrieved August 29, 2023 from https://www.aamft.org/Consumer_Updates/grandparents.aspx

- ³¹ Ellis, R., & Simmons, T. (2014, October 22). *Co-resident grandparents and their grandchildren: 2012*. United States Census Bureau. Retrieved August 29, 2023 from <https://www.census.gov/library/publications/2014/demo/p20-576.html>
- ³² Baker, L. A., Silverstein, M., & Putney, N. M. (2008). Grandparents raising grandchildren in the United States: Changing family forms, stagnant social policies. *Journal of Societal & Social Policy*, 7, 53. Retrieved August 29, 2023 from <https://pubmed.ncbi.nlm.nih.gov/20585408/>
- ³³ Chan, K.L., Chen, M., Lo, K.M.C, Chen, Q., Kelley, S., & Ip, P. (2019). The effectiveness of Interventions for grandparents raising grandchildren: A meta-analysis. *Research on Social Work Practice*, 29(6), 607-617. <https://doi.org/10.1177/1049731518798470>
- ³⁴ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ³⁵ Isaacs, J. B. (2013, March 25). Unemployment from a child's perspective. Urban Institute. Retrieved September 14, 2021 from <https://www.urban.org/research/publication/unemployment-childs-perspective>
- ³⁶ Luby, J. L., Constantino, J. N., & Barch, D. M. (2022). Poverty and the developing brain. *Cerebrum*. Retrieved August 22, 2023 from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9224364/pdf/cer-04-22.pdf>
- ³⁷ Murphey, D., & Redd, Z. (2014, January 8). *5 Ways Poverty Harms Children*. Child Trends. Retrieved August 21, 2023 from <https://www.childtrends.org/publications/5-ways-poverty-harms-children>
- ³⁸ Hair, N. L., Hanson, J. L., Wolfe, B. L., & Pollak, S. D. (2015). Association of child poverty, brain development, and academic achievement. *JAMA Pediatrics*, 169(9), 822–829. <https://doi.org/10.1001/jamapediatrics.2015.1475>
- ³⁹ U.S. Department of Health Services, Office of the Assistant Secretary for Planning and Evaluation. (n.d.). 2025 poverty guidelines: 48 contiguous states. Retrieved October 22, 2025, from <https://aspe.hhs.gov/sites/default/files/documents/dd73d4f00d8a819d10b2fdb70d254f7b/detailed-guidelines-2025.pdf>
- ⁴⁰ Korsen, D. (2025). Federal Tax Credits in 2021 Lifted More than 2 Million Children Out of Poverty, Says New Report. National Academies. Retrieved from <https://www.nationalacademies.org/news/federal-tax-credits-in-2021-lifted-more-than-2-million-children-out-of-poverty-says-new-report>
- ⁴¹ Center for Women's Welfare at University of Washington School of Social Work. (n.d.). The self-sufficiency standard. Retrieved from <http://www.selfsufficiencystandard.org/the-standard>
- ⁴² Women's Foundation for the State of Arizona (2022). [The Arizona 2022 Self-Sufficiency Standard]. Retrieved from <https://womensgiving.org/research/>
- ⁴³ Broliar, S. & Kucklick, A. (June 2025). Arizona 2025 Self-Sufficiency Standard. The Women's Foundation for the State of Arizona. Retrieved from https://womensgiving.org/wp-content/uploads/2025/10/AZ2025_SSS-1.pdf
- ⁴⁴ Women's Foundation for the State of Arizona (2025). [The Arizona 2025 Self-Sufficiency Standard]. Retrieved from <https://womensgiving.org/research/>
- ⁴⁵ National Conference of State Legislatures. (2024). *Introduction to benefits cliffs and public assistance programs*. Retrieved from <https://www.ncsl.org/human-services/introduction-to-benefits-cliffs-and-public-assistance-programs>
- ⁴⁶ Schwartz, M., & Wilson, E. (n.d.). *Who can afford to live in a home? A look at data from the 2006 American Community Survey*. United States Census Bureau. Retrieved September 14, 2021 from <https://cdn2.hubspot.net/hubfs/4408380/PDF/General-Housing-Homelessness/who-can-afford.pdf>

- ⁴⁷ Enterprise Community Partners. (2014). *Impact of affordable housing on families and communities: A review of the evidence base*. Retrieved August 21, 2023 from <https://homeforallsmc.org/wp-content/uploads/2017/05/Impact-of-Affordable-Housing-on-Families-and-Communities.pdf>.
- ⁴⁸ McCoy-Roth, M., Mackintosh, B., & Murphey, D. (2012). When the bough breaks: The effects of homelessness on young children. *Child Health*, 3(1). Retrieved September 20, 2023 from <https://cms.childtrends.org/wp-content/uploads/2012/02/2012-08EffectHomelessnessChildren.pdf>
- ⁴⁹ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ⁵⁰ Turcios, Y. (2023, March 22). *Digital access: A super determinant of health*. Substance Abuse and Mental Health Services Administration. Retrieved August 21, 2023 from <https://www.samhsa.gov/blog/digital-access-super-determinant-health>
- ⁵¹ Arizona Department of Health Services. (2025). Arizona WIC Program Income Guidelines, Effective: April 1, 2025. Retrieved from <https://www.azdhs.gov/documents/prevention/azwic/wic-income-eng.pdf>
- ⁵² Food Empowerment Project. (2025). *Food deserts*. <https://foodispower.org/access-health/food-deserts/>
- ⁵³ Food Access Research Atlas. Retrieved from <https://www.ers.usda.gov/data-products/food-access-research-atlas/download-the-data>
- ⁵⁴ Jones, C. M., Merrick, M. T., & Houry, D. E. (2020). Identifying and preventing Adverse Childhood Experiences: Implications for clinical practice. *JAMA*, 323(1):25–26. <https://doi.org/10.1001/jama.2019.18499>
- ⁵⁵ Arizona Dept of Child Services (2025). Monthly Operational Outcomes Report, May 2025. Retrieved from <https://dcs.az.gov/content/monthly-operational-outcomes-report-may-2025>
- ⁵⁶ Arizona Dept of Child Services (2025). Monthly Operational Outcomes Report, May 2025. Retrieved from <https://dcs.az.gov/content/monthly-operational-outcomes-report-may-2025>
- ⁵⁷ Kelley, G., Gaylor, E., & Spiker, D. (2022). Impacts of Home Visiting Programs on Young Children’s School Readiness. SRI International, Center for Education and Human Services. Retrieved from <https://www.child-encyclopedia.com/pdf/expert/home-visiting/according-experts/impacts-home-visiting-programs-young-childrens-school-readiness>
- ⁵⁸ First Things First. (2025). Home Visiting: Outcomes for Arizona Families. Home Visiting Board Presentation. Provided by First Things First by request.
- ⁵⁹ Child Welfare Information Gateway. (2020). Protective factors approaches in child welfare. U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau. Retrieved from <https://www.childwelfare.gov/resources/protective-factors-approaches-child-welfare/>
- ⁶⁰ U.S. Public Health Service. (2024). Parents Under Pressure. The U.S. Surgeon Generals Advisory on the Mental Health & Well-being of Parents. Retrieved from: <https://www.hhs.gov/sites/default/files/parents-under-pressure.pdf>
- ⁶¹ Yoshikawa, H., Weiland, C., Brooks-Gunn, J., Burchinal, M. R., Espinosa, L. M., Gormley, W. T., Ludwig, J., Magnuson, K.A., Phillips, D. & Zaslow, M. J. (2013). Investing in our future: The evidence base on preschool education. Society for Research in Child Development. Retrieved from: <https://files.eric.ed.gov/fulltext/ED579818.pdf>
- ⁶² U.S. Census Bureau. (2024). 2023 American Community Survey five-year estimates, Table B14003.

- ⁶³ Malik, R., Hamm, K., Adamu, M., & Morrissey, T. (2016, October 27). Child care deserts: An analysis of child care centers by ZIP code in 8 states. *Center for American Progress*. Retrieved August 20, 2021 from <https://www.americanprogress.org/issues/early-childhood/reports/2016/10/27/225703/child-care-deserts/>
- ⁶⁴ Tanoue, K. H., DeBlois, M., Daws, J., & Walsh, M. (2017, September 14). *Child care and early education accessibility in Tucson (White Paper No. 5)*. Making Action Possible for Southern Arizona. Retrieved October 12, 2023 from <https://www.americanprogress.org/issues/early-childhood/reports/2016/10/27/225703/child-care-deserts/>
- ⁶⁵ Child Care Aware® of America. (2018). *Mapping the gap: Exploring the child care supply & demand in Arizona*. Child Care Aware of America. Retrieved August 20, 2021 from <http://usa.childcareaware.org/wp-content/uploads/2017/10/Arizona-Infant-Toddler-Brief1.pdf>
- ⁶⁶ Smith, L. K., Bagley, A., & Wolters, B. (2020, October). *Child care in 25 states: What we know and don't know (Rep.)*. Bipartisan Policy. Retrieved August 20, 2021 from https://bipartisanpolicy.org/wp-content/uploads/2020/10/BPC_Working-Family-Solutions_FinalPDFV4.pdf
- ⁶⁷ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ⁶⁸ First Things First. (2025). Caregiver program helps Yuma grandmother better understand child development. Retrieved from <https://www.firstthingsfirst.org/region-stories/caregiving-program-helps-with-child-development/>
- ⁶⁹ First Things First. (2024). *Yuma Child Care Taskforce*. Retrieved from <https://www.firstthingsfirst.org/2024/05/yuma-child-care-taskforce/>
- ⁷⁰ Arizona Western College. (n.d.). *DreamBuilder: Start Your Childcare Business*. Retrieved from <https://members.yumachamber.org/events/details/dreambuilder-start-your-childcare-business-05-26-2026-7171?memberSlug=small-business-development-center-at-arizona-western-college>
- ⁷¹ The Annie E. Casey Foundation. (2013). The first eight years: Giving kids a foundation for lifetime success. Retrieved from <https://www.aecf.org/resources/the-first-eight-years-giving-kids-a-foundation-for-lifetime-success>
- ⁷² First Things First. (n.d.). About Quality First. Retrieved from <https://www.firstthingsfirst.org/resources/quality-first/about-quality-first/>
- ⁷³ First Things First. (n.d.). About Quality First. Retrieved from <https://www.firstthingsfirst.org/resources/quality-first/about-quality-first/>
- ⁷⁴ Quality First Scholarships. Retrieved from <https://www.qualityfirstaz.com/participant-benefits/financial-incentives/quality-first-scholarships/>
- ⁷⁵ News for Quality First Participants. Retrieved from <https://www.firstthingsfirst.org/governance/ftf-regions/public-meeting-notice/>
- ⁷⁶ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ⁷⁷ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ⁷⁸ USDHHS (United States Department of Health and Human Services). 2015. Child Care and Development Fund (CCDF) Program; Proposed Rule. Federal Register, Part II, Vol. 80, No. 247, 45 CFR Part 98, December 24.

- ⁷⁹ Child Care Aware of America. (2024). 2024 – 2025 price fact sheet: Child care affordability – Arizona. Retrieved from <https://info.childcareaware.org/hubfs/Pricing%20and%20Landscape%20Infograms/Pricing%20Sheets%20PDF/2024-2025-price-fact-sheet-child-care-affordability-Arizona.pdf>
- ⁸⁰ U.S. Census Bureau. (2024). 2023 American Community Survey five-year estimates, Table B25031
- ⁸¹ Arizona Department of Economic Security. (n.d.). Child care. Retrieved from <https://des.az.gov/services/child-and-family/child-care>
- ⁸² First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ⁸³ Arizona Department of Economic Security. (2023, August). Arizona child care infrastructure plan: CCDF COVID-19 relief funding implementation (FY 2022–2024) [Report]. DES. <https://des.az.gov/sites/default/files/media/AZ-Child-Care-Infrastructure-Plan.pdf>
- ⁸⁴ Healthy People 2030. (n.d.). Education Access and Quality. Office of Disease Prevention and Health Promotion. Retrieved from <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/education-access-and-quality>
- ⁸⁵ Zajacova A., & Everett, B. G. (2013). The nonequivalent health of high school equivalents. *Social Science Quarterly*, 95(1), 221–238.
- ⁸⁶ Arizona Department of Education. (2025, July 1). Parent handbook: Empowerment Scholarship Account Program, school year 2025–2026. <https://www.azed.gov/sites/default/files/2025/06/ESA%202025-2026%20Handbook.pdf>
- ⁸⁷ Arizona Legislature. (2011). Laws 2011, Chapter 75 (S.B. 1553): Arizona empowerment scholarship accounts. <https://www.azleg.gov/legtext/50leg/1R/laws/0075.pdf>
- ⁸⁸ Arizona Legislature. (2022). Laws 2022, Chapter 388 (H.B. 2853): Arizona empowerment scholarship accounts; appropriation. <https://www.azleg.gov/legtext/55leg/2R/laws/0388.pdf>
- ⁸⁹ Arizona Empowerment Scholarship Account. (n.d.). Arizona Empowerment Scholarship Account (ESA). <https://arizonaempowermentscholarship.org/>
- ⁹⁰ Arizona Department of Education. (n.d.). Empowerment Scholarship Account (ESA). <https://www.azed.gov/esa>
- ⁹¹ Arizona Department of Education. (n.d.). Empowerment Scholarship Account (ESA). <https://www.azed.gov/esa>
- ⁹² Roy, S., Gable, A., Kim, M.J. (2025). Case study of Arizona’s K-12 education savings account program. RAND. Retrieved from https://www.rand.org/content/dam/rand/pubs/research_reports/RRA3400/RRA3431-2/RAND_RRA3431-2.pdf
- ⁹³ Lesnick, J., Goerge, R. M., Smithgall, C., & Gwynne, J. (2010). Reading on grade level in third grade: How is it related to high school performance and college enrollment? *Annie E. Casey Foundation*. Retrieved from <https://assets.aecf.org/m/resourcedoc/aecf-ReadingonGradeLevelLongAnal-2010.PDF>
- ⁹⁴ Allison, M. A., Attisha, E., Lerner, M., De Pinto, C. D., Beers, N. S., Gibson, E. J., Gorski, P., Kjolhede, C., O’Leary, S. C., Schumacher, H., & Weiss-Harrison, A. (2019). The link between school attendance and good health. *Pediatrics*, 143(2), e20183648. <https://doi.org/10.1542/peds.2018-3648>
- ⁹⁵ U.S. Department of Education. (2025, August 21). Chronic absenteeism. <https://www.ed.gov/teaching-and-administration/supporting-students/chronic-absenteeism>
- ⁹⁶ Zajacova A., & Everett, B. G. (2013). The nonequivalent health of high school equivalents. *Social Science Quarterly*, 95(1), 221–238. <https://doi.org/10.1111/ssqu.12039>

⁹⁷ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>

⁹⁸ Arizona Department of Education (2025). Cohort 2024 Four Year Graduation Rate Data. Retrieved from <https://www.azed.gov/accountability-research/data/>

⁹⁹ Arizona Department of Education. (2024, November). *Cohort 2023 five-year graduation rate data* [Data set]. Retrieved from the ADE Accountability & Research Data page under “Five-Year Graduation Rates.

¹⁰⁰ Del Campo-Carmona, B. (2022, December 19). Arizona’s disconnected youth. Making Action Possible for Southern Arizona. Retrieved from <https://www.mapazdashboard.arizona.edu/article/arizonas-disconnected-youth>

¹⁰¹ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>

¹⁰² U.S. Bureau of Labor Statistics (2024, May). Education pays, 2024, Career Outlook, Retrieved from <https://www.bls.gov/careeroutlook/2025/data-on-display/education-pays.htm>

¹⁰³ Ma, J., & Pender, M. (2023). Education Pays 2023: The benefits of higher education for individuals and society. College Board. Retrieved from <https://research.collegeboard.org/media/pdf/education-pays-2023.pdf>

¹⁰⁴ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>

¹⁰⁵ Healthy People 2030. (n.d.). Social determinants of health. Office of Disease Prevention and Health Promotion. Retrieved August 16, 2023 from <https://health.gov/healthypeople/priority-areas/social-determinants-health>

¹⁰⁶ Berger, R.P., Fromkin, J.B., Stutz, H., Makoroff, K., Scribano, P.V., Feldman, K., Tu, L.C., & Fabio, A. (2011). Abusive head trauma during a time of increased unemployment: A multicenter analysis. *Pediatrics*, 128(4), 637-643. <https://doi.org/10.1542/peds.2010-2185>

¹⁰⁷ Isaacs, J. B. (2013, March 25). Unemployment from a child’s perspective. Urban Institute. Retrieved from <https://www.urban.org/research/publication/unemployment-childs-perspective>

¹⁰⁸ National Center for Children in Poverty. (2014). Arizona demographics for low-income children. Retrieved September 20, 2023 from http://www.nccp.org/profiles/AZ_profile_6.html

¹⁰⁹ AZ Office of Economic Opportunity. (n.d.). *Economic Conditions Report: A Summary of Key Demographic, Labor Market, and Workforce Trends - Yuma County*. Retrieved from <https://oeo.az.gov/sites/default/files/data/idj/economic-profile-yumacounty.pdf>

¹¹⁰ Ellingson, K., Ruedas, P., Hawkes, B. A., Trujillo, A. & Larson, A. C. (2024). 2024 Arizona Farmworker Enumeration Profiles Study. Retrieved from <https://azfeps.arizona.edu/sites/default/files/2024-10/2024%20AZ-FEPS%20Final.pdf>

¹¹¹ Manship, K., Weinberg, E., Wallace, L., Burroughs, N., Muenchow, S., Laird, K., Stagner, N., Anthony, J., Bishop, A., and Blankenship, C. (2024). Expanding Child Care in Arizona. American Institutes for Research. Retrieved from <https://osi.az.gov/sites/default/files/2025-01/expanding-child-care-in-arizona-aca-final-report-5-31-2024.pdf>

¹¹² Kucklick, A. & Broliar, S. (2025). [The Arizona 2025 Self-Sufficiency Standard]. Retrieved from <https://womengiving.org/research/>

¹¹³ Gadson, A., Akpovi, E., & Mehta, P. K. (2017, August). “Exploring the social determinants of racial/ethnic disparities in prenatal care utilization and maternal outcome”. *Seminars in perinatology*, 41(5), 308-317. Retrieved from <https://www.sciencedirect.com/science/article/pii/S0146000517300502>

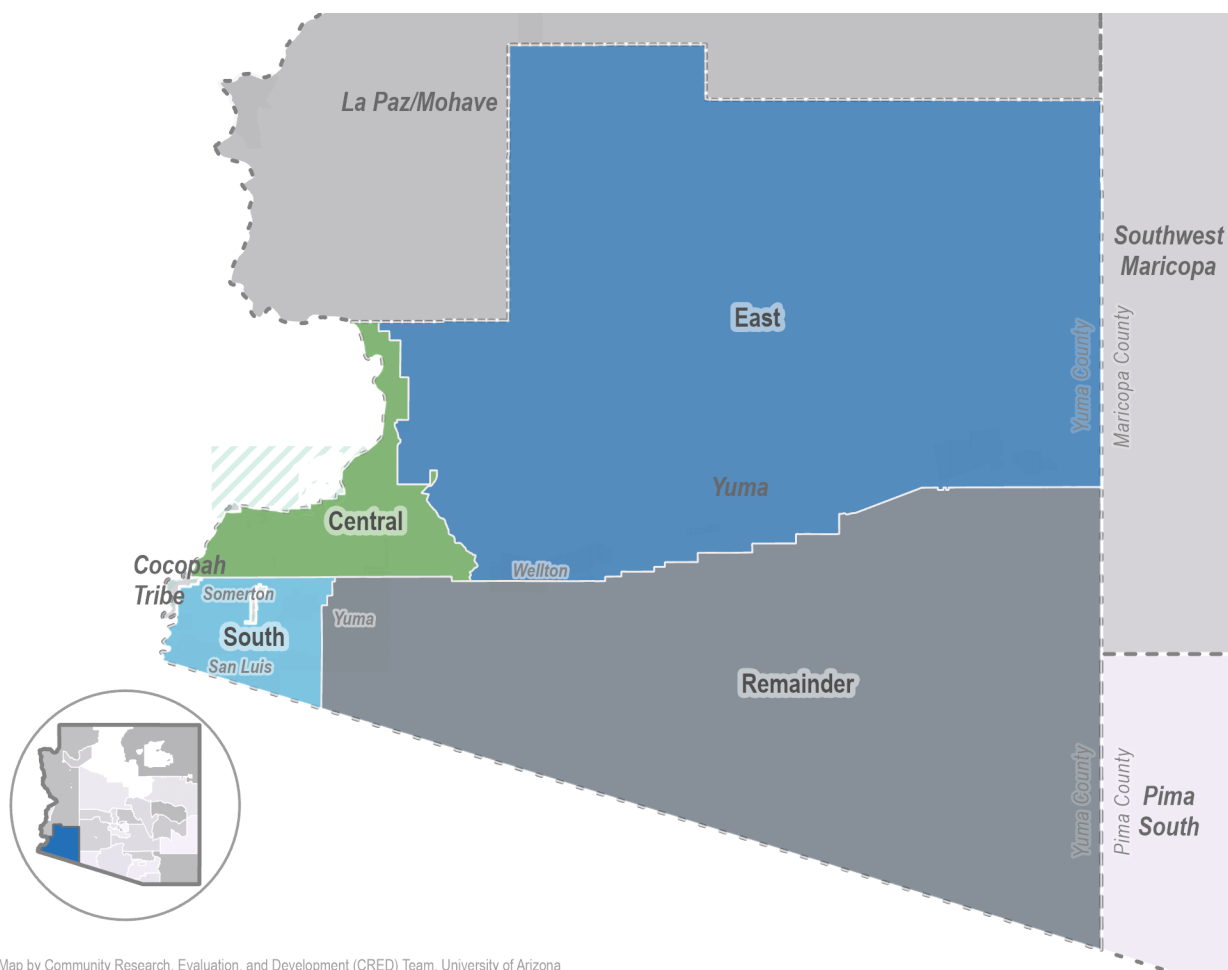
- ¹¹⁴ American Public Health Association. (n.d.) Prenatal care – adequate: Arizona. America’s Health Rankings. https://www.americashealthrankings.org/explore/measures/prenatalcare_adquate/AZ
- ¹¹⁵ Belanoff, C. Black, A., Ncube, C., Acevedo-Garica, D., et al. (2024). Neighborhood Child Opportunity and Preterm Birth Rates by Race and Ethnicity. *JAMA Network Open*, 7(9), 1-11. <https://pubmed.ncbi.nlm.nih.gov/39259538/>
- ¹¹⁶ Petrou, S., Sach, T., & Davidson, L. (2001). The long-term costs of preterm birth and low birth weight: Results of a systematic review. *Child: Care, Health and Development*, 27(2), 97–115. <https://doi.org/10.1046/j.1365-2214.2001.00203.x>
- ¹¹⁷ Diaz, C., & Fiel, J. (2016). The effect(s) of teen pregnancy: Reconciling theory, methods, and findings. *Demography*, 53(1), 85-116. <https://doi.org/10.1007/s13524-015-0446-6>
- ¹¹⁸ Petrou, S., Sach, T., & Davidson, L. (2001). The long-term costs of preterm birth and low birth weight: Results of a systematic review. *Child: Care, Health and Development*, 27(2), 97–115. <https://doi.org/10.1046/j.1365-2214.2001.00203.x>
- ¹¹⁹ Centers for Disease Control and Prevention. (2021, November 15). Reproductive health: Teen pregnancy. About teen pregnancy. Retrieved August 9, 2023 from <https://www.cdc.gov/teenpregnancy/about/index.htm>
- ¹²⁰ Diaz, C., & Fiel, J. (2016). The effect(s) of teen pregnancy: Reconciling theory, methods, and findings. *Demography*, 53(1), 85-116. <https://doi.org/10.1007/s13524-015-0446-6>
- ¹²¹ Youth.gov. (2016). Pregnancy prevention: Adverse effects. Retrieved September 10, 2021 from <http://youth.gov/youth-topics/teen-pregnancy-prevention/adverse-effects-teen-pregnancy>
- ¹²² McClay, A., & Moore, K. A. (2022, November 22). Preventing births to teens is associated with long-term health and socioeconomic benefits, according to simulation. *Child Trends*. Retrieved August 30, 2023 from <https://doi.org/10.56417/2270z3088p>
- ¹²³ Hoffman, S. D., & Maynard, R. A. (Eds.). (2008). *Kids having kids: Economic costs and social consequences of teen pregnancy* (2nd ed.). Urban Institute Press.
- ¹²⁴ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ¹²⁵ 211 Arizona. (2023). *AHCCCS Member Renewals*. Retrieved from <https://211arizona.org/ahcccs-member-renewals/>
- ¹²⁶ Centers for Medicare & Medicaid Services. Well-Child Care. <https://www.medicare.gov/medicaid/quality-of-care/quality-improvement-initiatives/well-child-care>
- ¹²⁷ Turner K. Well-Child Visits for Infants and Young Children. *Am Fam Physician*. 2018 Sep 15;98(6):347-353. PMID: 30215922. Retrieved from <https://pubmed.ncbi.nlm.nih.gov/30215922/>
- ¹²⁸ Connelly CA. *A History of The Commonwealth Fund’s Child Development and Preventive Care Program*. New York, New York: Commonwealth Fund; 2013.
- ¹²⁹ Lipkin, P. H., Macias, M. M., & Council On Children With Disabilities, Section On Developmental And Behavioral Pediatrics (2020). Promoting Optimal Development: Identifying Infants and Young Children With Developmental Disorders Through Developmental Surveillance and Screening. *Pediatrics*, 145(1), e20193449. <https://doi.org/10.1542/peds.2019-3449>
- ¹³⁰ Ruff, R. R., Senthil, S., Susser, S. R., & Tsutsui, A. (2019). Oral health, academic performance, and school absenteeism in children and adolescents: A systematic review and meta-analysis. *The Journal of the American Dental Association*, 150(2), 111-121.

- ¹³¹ Rebelo, M. A. B., Rebelo Vieira, J. M., Pereira, J. V., Quadros, L. N., & Vettore, M. V. (2019). Does oral health influence school performance and school attendance? A systematic review and meta-analysis. *International journal of paediatric dentistry*, 29(2), 138-148.
- ¹³² Seirawan, H., Faust, S., & Mulligan, R. (2012). The impact of oral health on the academic performance of disadvantaged children. *American journal of public health*, 102(9), 1729-1734.
- ¹³³ Seither, R., Yusuf, O.B., Dramann, D., Calhoun, K., et al. (2024). "Coverage with Selected Vaccines and Exemption Rate Among Children in Kindergarten – United States, 2023-24 School Year". *Morbidity and Mortality Weekly Report*, 73(41), 925-932. <https://www.cdc.gov/mmwr/volumes/73/wr/mm7341a3.htm>
- ¹³⁴ Arizona Department of Health Services. (n.d.). School & childcare immunization guide. Arizona Department of Health Services. <https://www.azdhs.gov/documents/preparedness/epidemiology-disease-control/immunization/school-childcare/nofollow/school-childcare-immunization-guide.pdf>
- ¹³⁵ U.S. Department of Health & Human Services & World Health Organization. (2022). Nearly 40 million children are dangerously susceptible to growing measles threat. Retrieved August 8, 2023 from <https://www.who.int/news/item/23-11-2022-nearly-40-million-children-are-dangerously-susceptible-to-growing-measles-threat>
- ¹³⁶ Arizona Department of Health Services. (n.d.) School & child-care immunization guide. Arizona Department of Health Services. <https://www.azdhs.gov/documents/preparedness/epidemiology-disease-control/immunization/school-childcare/nofollow/school-childcare-immunization-guide.pdf>
- ¹³⁷ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ¹³⁸ Lalani, K., Anderson, M., Newberry, S., Rimsza, M. E., Garlington, T., Glidden, M., & Celaya, M. F. (2024). *Arizona Child Fatality Review Team: Thirty-first annual report*. Arizona Department of Health Services. <https://www.azdhs.gov/documents/prevention/womens-childrens-health/reports-fact-sheets/child-fatality-review-annual-reports/cfr-annual-report-2024.pdf>
- ¹³⁹ Prenatal-to-3 Policy Impact Center. (2024). Prenatal-to-3 policy clearinghouse evidence review: Early Intervention services. Peabody College of Education and Human Development, Vanderbilt University. <https://pn3policy.org/policy-clearinghouse/early-intervention-services>
- ¹⁴⁰ Arizona Department of Economic Security. (n.d.). Arizona early intervention program. Retrieved from <https://des.az.gov/AzEIP/>
- ¹⁴¹ First Things First. (2025). 2025 Statewide Needs and Assets Report – Building Bright Futures. Retrieved from <https://www.firstthingsfirst.org/wp-content/uploads/2025/12/2025-State-Needs-and-Assets-Report.pdf>
- ¹⁴² Cogswell, M.E., Coil, E., Tian, L.H., Tinker, S.C., Ryerson, A.B., Maenner, M.J, Rice, C.E., Peacock, G. (2022). Health Needs and Use of Services Among Children with Developmental Disabilities—United States, 2014–2018. *Morbidity and Mortality Weekly Report*. 71(12):453–458.

SUB-REGIONAL FACTSHEETS

Communities vary in terms of needs and assets, even within the same First Things First (FTF) Region. In recognition of this, the following factsheets present a selection of indicators from this Regional Needs and Assets report at the sub-regional level. Examining differences within the region can help Regional Partnership Councils and local stakeholders focus their strategies and efforts to use resources effectively.

Sub-regions in the Yuma Region



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

The factsheets that follow provide information about three sub-regions within the Yuma Region. Note that the mostly un-populated census tracts 9800.03 and 9800.04 containing parts of the Cabeza Prieta Wildlife Refuge Area and Barry M. Goldwater Range are not included in the three sub-regions.

The **Central** sub-region is defined by 48 census tracts (1-10.04, 109.07, 109.10-109.16, 111.07-111.25, 117 & 9800.06) spanning as far east as Fortuna Foothills and as far north as Martinez Lake.

It contains the city of Yuma and the unincorporated communities of Buckshot, Donovan Estates, Drysdale, El Prado Estates, Padre Ranchitos and Wall Lane. It is the most populated of the three sub-regions. The northern section of the Cocopah Reservation lies in Census Tract 110 and is assigned to the First Things First Cocopah Tribe Region.

The **East** sub-region is defined as four census tracts (112.02-112.04 & 121) in the eastern part of the county, east of the Gila Mountains. It contains the town of Wellton and the unincorporated communities of Wellton Hills, Roll, Tacna, Dateland and Aztec. It is the least populated of the three sub-regions.

The **South** sub-region is defined as 13 census tracts (114.03-114.08, 115.01-118.02 & 9800.05) which lie south of County 14th St. It contains the cities of San Luis and Somerton and the unincorporated communities of Gadsden, Rancho Mesa Verde and Orange Grove Mobile Manor. Census Tract 115.01 also contains the eastern and western sections of the Cocopah Reservation (which are part of the Cocopah Tribe Region).

A guide to the factsheets

Each factsheet contains data for a selection of indicators at the state, region and sub-regional level. Where possible, two timepoints are shown for each indicator with an arrow to indicate the direction of the trend (increase, decrease, no change) in the sub-region. In some cases, data were not available for a specific sub-region, indicated with **NA**. Additionally, some data were suppressed to protect individual data privacy in accordance with the FTF Data Policy, indicated with **DS**. The data in these factsheets were obtained through custom tabulations of publicly available data from the U.S. Census Bureau and through FTF requests to state agencies, specifically the Arizona Department of Health Services (ADHS), Arizona Department of Economic Security (DES) and the Arizona Health Care Cost Containment System (AHCCCS) via a partnership with the Arizona State University Center for Health Information & Research (CHiR). More details on how these tabulations and requests were made can be found in the *Maps & Methods Appendix* of this report.

The indicators included in each tabular factsheet are defined as follows:

Indicator	Description	Source
Total population	Overall population of all ages	2020 U.S. Census
Population of children (0-5)	Population of children birth to age 5	
Population living in poverty	Percent of the overall population living in households with incomes at or below the federal poverty threshold	2014-2018 & 2019-2023 American Community
Children (0-5) living in poverty	Percent of children birth to age 5 living in households with incomes at or below the federal poverty threshold	

First Things First 2026 Needs and Assets Report

Indicator	Description	Source
Low-income children (0-5) (<185% federal poverty level)	Number of children birth to age 5 living in households with incomes at or below 185% of the federal poverty level (the income eligibility threshold for WIC)	Survey (ACS) estimates
Housing costs 30% or more of household income	Percent of households spending 30% or more of their household income on housing costs (i.e., considered "housing cost-burdened")	
Children (0-5) with all present parents in the labor force	Percent of children birth to age 5 who live in households with all present parents who work or are looking for work (i.e., live with one parent who works or live with two parents, both of whom work)	
Language other than English spoken at home	Percent of households that speak Spanish or another language (other than English or Spanish). The most common languages spoken in the "Another" language category in Arizona are Native North American languages.	
Ratio of children (0-5) to licensed child care slots	Number of children birth to age 5 per available licensed child care slots. An area is considered a child care desert when the ratio of children to slots exceeds 3.0.	2020 U.S. Census; Oct 2023 & Jan 2025 ADHS licensing datasets
Registered care providers in 2025	Number of registered early care and education providers and their licensed capacity to enroll children. Providers are shown by type: centers (including Head Start centers), schools and homes (both group home and family home providers). Please note that capacity numbers are often higher than actual enrollment.	2025 DES child care provider dataset
Children (0-5) receiving child care assistance	Number of children birth to age 5 receiving DES child care assistance (not including those involved in the child welfare system)	2023 & 2024 DES
Educational attainment (ages 25 and older)	Percent of adults with at least a high school education (i.e., a high school diploma, some college, an associate, Bachelor's or advanced degree) or a Bachelor's degree or more (i.e., a Bachelor's or advanced degree)	2014-2018 & 2019-2023 ACS estimates
Unemployment rate for the adult population (ages 16 and older)	Percent of adults who self-reported that they were unemployed	
Total births	Total number of births in the area, based on address provided on the birth certificate	2020-2021 & 2022-2023 ADHS
Maternal age 19 or younger	Percent of births to mothers age 19 or younger	

First Things First 2026 Needs and Assets Report

Indicator	Description	Source
Low birth weight (<2500 grams)	Percent of babies born weighing 2,500 grams or less	Vital Statistics dataset
Preterm births (<37 weeks)	Percent of babies born at 37 weeks of gestation or earlier. The Healthy People 2030 target is 9.4% or less.	
Prenatal care (5+ prenatal visits)	Percent of births to mothers who had at least five prenatal visits	
Number of children (0-5) with AHCCCS	Number of children birth to age 5 enrolled in an insurance plan through the Arizona Health Care Cost Containment System (AHCCCS)	2022 & 2024 AHCCCS claims data processed by ASU CHiR
AHCCCS-enrolled children (0-5) with at least 1 primary care provider visit	Percent of children birth to age 5 enrolled in AHCCCS who had a claim for at least one primary care visit	
Children (0-5) receiving AzEIP, DDD or both services	Number of children birth to age 5 who received AzEIP, DDD or both services	SFY 2023 & 2024 DES

Central	Years	Arizona	Yuma Region	Central	Change over time
Child, Family & Community Characteristics					
Total population ¹	Census 2020	7,151,502	203,024	141,899	
Population of children (0-5) ¹	Census 2020	480,744	15,249	10,425	
Population living in poverty ^{2,3}	2014-2018	16.1%	20.0%	17.5%	↓
	2019-2023	12.8%	16.4%	15.1%	
Children (0-5) living in poverty ^{2,3}	2014-2018	24.9%	27.4%	25.7%	↓
	2019-2023	17.9%	23.8%	21.6%	
Low-income children (0-5) (<185% federal poverty level) ^{2,3}	2014-2018	47.2%	57.5%	52.3%	↓
	2019-2023	38.1%	55.3%	51.5%	
Housing costs 30% or more of household income ^{2,3}	2014-2018	30.4%	29.2%	27.5%	↓
	2019-2023	29.4%	26.4%	27.1%	
Children (0-5) with all present parents in the labor force ^{2,3}	2014-2018	61.1%	56.2%	56.0%	↑
	2019-2023	64.4%	57.0%	59.7%	
Language other than English spoken at home (2019-2023) ³	Spanish	19.2%	52.5%	39.7%	
	Another	6.4%	2.1%	2.5%	
Early Education					
Ratio of children (0-5) to licensed child care slots ⁵	Oct 2023	2.0	2.8	2.4	↔
	Jan 2025	2.0	2.8	2.4	
Registered care providers in 2025 ⁴					
Centers	Number	2,427	106	75	
	Capacity	260,689	8,387	6,557	
Schools	Number	714	16	14	
	Capacity	72,967	1,200	990	
Homes	Number	755	71	42	
	Capacity	5,063	495	319	
Children (0-5) receiving child care assistance ⁴	2023	35,375	962	760	↑
	2024	35,153	1,017	781	
Education & Workforce					
Educational Attainment (ages 25 and older) ^{2,3}					
At least a high school education	2014-2018	86.8%	72.2%	78.6%	↑
	2019-2023	89.1%	76.7%	83.1%	
Bachelor's degree or more	2014-2018	28.9%	14.8%	16.6%	↑
	2019-2023	32.6%	16.7%	18.5%	
Unemployment rate for the adult population (ages 16 and older) ^{2,3}	2014-2018	6.4%	9.4%	8.7%	↓
	2019-2023	5.1%	7.7%	7.3%	
Child Health & Development					
Total births ⁵	2020-2021	154,638	5,860	3,925	↓
	2022-2023	156,236	5,624	3,705	
Characteristics of births ⁵					
Maternal age 19 or younger	2020-2021	4.9%	6.4%	5.8%	↔
	2022-2023	4.5%	6.4%	5.8%	
Low birthweight (<2500 grams)	2020-2021	7.6%	6.4%	6.5%	↑
	2022-2023	7.9%	7.3%	7.4%	
Preterm birth (<37 weeks)	2020-2021	9.7%	9.3%	9.5%	↔
	2022-2023	9.8%	9.5%	9.5%	
Prenatal care (5+ prenatal visits)	2020-2021	91.0%	85.2%	87.9%	↑
	2022-2023	91.7%	87.4%	90.1%	
Number of children (0-5) with AHCCCS ⁶	2022	277,455	12,316	7,479	↓
	2024	223,506	10,360	6,298	
AHCCCS-enrolled children (0-5) 1+ primary care provider visit ⁶	2022	83.0%	86.3%	85.7%	↑
	2024	86.0%	88.4%	88.0%	
Children (0-5) receiving AzEIP, DDD, or both services ⁴	SFY 2023	9,991	351	250	↓
	SFY 2024	10,706	359	234	

SOURCES: (1) US Census 2020; (2) American Community Survey 2014-2018; (3) American Community Survey 2019-2023; (4) Arizona Department of Economic Security; (5) Arizona Department of Health Services; (6) Arizona Health Care Cost Containment System data provided by ASU ChiR

NOTES:

DS: Data has been suppressed to protect privacy.

NA: Not available.

SUBREGION DEFINITION: The Central sub-region is defined as two census tracts (6 & 7) in the central portion of Gila County above Lake Roosevelt, excluding the White Mountain Apache Tribe reservation. It contains the CDPs of Tonto Basin, Young, Jakes Corner, Deer Creek, Gisela and Haigler Creek.

East	Years	Arizona	Yuma Region	East	Change over time
Child, Family & Community Characteristics					
Total population ¹	Census 2020	7,151,502	203,024	5,007	
Population of children (0-5) ¹	Census 2020	480,744	15,249	268	
Population living in poverty ^{2,3}	2014-2018 2019-2023	16.1% 12.8%	20.0% 16.4%	18.8% 12.9%	↓
Children (0-5) living in poverty ^{2,3}	2014-2018 2019-2023	24.9% 17.9%	27.4% 23.8%	10.9% 8.2%	↓
Low-income children (0-5) (<185% federal poverty level) ^{2,3}	2014-2018 2019-2023	47.2% 38.1%	57.5% 55.3%	33.3% 86.6%	↑
Housing costs 30% or more of household income ^{2,3}	2014-2018 2019-2023	30.4% 29.4%	29.2% 26.4%	19.9% 21.3%	↑
Children (0-5) with all present parents in the labor force ^{2,3}	2014-2018 2019-2023	61.1% 64.4%	56.2% 57.0%	22.6% 16.2%	↓
Language other than English spoken at home (2019-2023) ³	Spanish Another	19.2% 6.4%	52.5% 2.1%	26.3% 1.8%	
Early Education					
Ratio of children (0-5) to licensed child care slots ⁵	Oct 2023 Jan 2025	2.0 2.0	2.8 2.8	13.4 3.8	↓
Registered care providers in 2025 ⁴					
Centers	Number Capacity	2,427 260,689	106 8,387	6 340	
Schools	Number Capacity	714 72,967	16 1,200	0 0	
Homes	Number Capacity	755 5,063	71 495	0 0	
Children (0-5) receiving child care assistance ⁴	2023 2024	35,375 35,153	962 1,017	DS 10	
Education & Workforce					
Educational Attainment (ages 25 and older) ^{2,3}					
At least a high school education	2014-2018 2019-2023	86.8% 89.1%	72.2% 76.7%	74.0% 80.9%	↑
Bachelor's degree or more	2014-2018 2019-2023	28.9% 32.6%	14.8% 16.7%	12.4% 20.7%	↑
Unemployment rate for the adult population (ages 16 and older) ^{2,3}	2014-2018 2019-2023	6.4% 5.1%	9.4% 7.7%	7.2% 5.2%	↓
Child Health & Development					
Total births ⁵	2020-2021 2022-2023	154,638 156,236	5,860 5,624	127 117	↓
Characteristics of births ⁵					
Maternal age 19 or younger	2020-2021 2022-2023	4.9% 4.5%	6.4% 6.4%	4.7% 8.5%	↑
Low birthweight (<2500 grams)	2020-2021 2022-2023	7.6% 7.9%	6.4% 7.3%	5.5% DS	
Preterm birth (<37 weeks)	2020-2021 2022-2023	9.7% 9.8%	9.3% 9.5%	11.0% 7.7%	↓
Prenatal care (5+ prenatal visits)	2020-2021 2022-2023	91.0% 91.7%	85.2% 87.4%	86.6% 91.5%	↑
Number of children (0-5) with AHCCCS ⁶	2022 2024	277,455 223,506	12,316 10,360	237 228	↓
AHCCCS-enrolled children (0-5) 1+ primary care provider visit ⁶	2022 2024	83.0% 86.0%	86.3% 88.4%	86.9% 84.2%	↓
Children (0-5) receiving AzEIP, DDD, or both services ⁴	SFY 2023 SFY 2024	9,991 10,706	351 359	DS DS	

SOURCES: (1) US Census 2020; (2) American Community Survey 2014-2018; (3) American Community Survey 2019-2023; (4) Arizona Department of Economic Security; (5) Arizona Department of Health Services; (6) Arizona Health Care Cost Containment System data provided by ASU ChiR

NOTES:

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NA: Not available.

SUBREGION DEFINITION: The East sub-region is defined as four census tracts (112.02-112.04 & 121) in the eastern part of the county, east of the Gila Mountains. It contains the town of Wellton and the unincorporated communities of Wellton Hills, Roll, Tacna, Dateland and Aztec. It is the least populated of the three sub-regions.

South	Years	Arizona	Yuma Region	South	Change over time
Child, Family & Community Characteristics					
Total population ¹	Census 2020	7,151,502	203,024	56,113	
Population of children (0-5) ¹	Census 2020	480,744	15,249	4,555	
Population living in poverty ^{2,3}	2014-2018	16.1%	20.0%	26.7%	↓
	2019-2023	12.8%	16.4%	20.3%	
Children (0-5) living in poverty ^{2,3}	2014-2018	24.9%	27.4%	32.4%	↓
	2019-2023	17.9%	23.8%	29.7%	
Low-income children (0-5) (<185% federal poverty level) ^{2,3}	2014-2018	47.2%	57.5%	70.3%	↓
	2019-2023	38.1%	55.3%	62.6%	
Housing costs 30% or more of household income ^{2,3}	2014-2018	30.4%	29.2%	37.1%	↓
	2019-2023	29.4%	26.4%	24.9%	
Children (0-5) with all present parents in the labor force ^{2,3}	2014-2018	61.1%	56.2%	59.4%	↓
	2019-2023	64.4%	57.0%	52.7%	
Language other than English spoken at home (2019-2023) ³	Spanish	19.2%	52.5%	86.6%	
	Another	6.4%	2.1%	1.1%	
Early Education					
Ratio of children (0-5) to licensed child care slots ⁵	Oct 2023	2.0	2.8	4.4	↔
	Jan 2025	2.0	2.8	4.5	
Registered care providers in 2025 ⁴					
Centers	Number	2,427	106	25	
	Capacity	260,689	8,387	1,490	
Schools	Number	714	16	2	
	Capacity	72,967	1,200	210	
Homes	Number	755	71	29	
	Capacity	5,063	495	176	
Children (0-5) receiving child care assistance ⁴	2023	35,375	962	194	↑
	2024	35,153	1,017	226	
Education & Workforce					
Educational Attainment (ages 25 and older) ^{2,3}					
At least a high school education	2014-2018	86.8%	72.2%	52.9%	↑
	2019-2023	89.1%	76.7%	58.9%	
Bachelor's degree or more	2014-2018	28.9%	14.8%	9.6%	↑
	2019-2023	32.6%	16.7%	11.4%	
Unemployment rate for the adult population (ages 16 and older) ^{2,3}	2014-2018	6.4%	9.4%	11.7%	↓
	2019-2023	5.1%	7.7%	9.0%	
Child Health & Development					
Total births ⁵	2020-2021	154,638	5,860	1,808	↓
	2022-2023	156,236	5,624	1,802	
Characteristics of births ⁵					
Maternal age 19 or younger	2020-2021	4.9%	6.4%	7.7%	↓
	2022-2023	4.5%	6.4%	7.4%	
Low birthweight (<2500 grams)	2020-2021	7.6%	6.4%	6.3%	↑
	2022-2023	7.9%	7.3%	7.6%	
Preterm birth (<37 weeks)	2020-2021	9.7%	9.3%	8.8%	↑
	2022-2023	9.8%	9.5%	9.5%	
Prenatal care (5+ prenatal visits)	2020-2021	91.0%	85.2%	79.2%	↑
	2022-2023	91.7%	87.4%	81.6%	
Number of children (0-5) with AHCCCS ⁶	2022	277,455	12,316	4,600	↓
	2024	223,506	10,360	3,834	
AHCCCS-enrolled children (0-5) 1+ primary care provider visit ⁶	2022	83.0%	86.3%	87.3%	↑
	2024	86.0%	88.4%	89.2%	
Children (0-5) receiving AzEIP, DDD, or both services ⁴	SFY 2023	9,991	351	95	↑
	SFY 2024	10,706	359	118	

SOURCES: (1) US Census 2020; (2) American Community Survey 2014-2018; (3) American Community Survey 2019-2023; (4) Arizona Department of Economic Security; (5) Arizona Department of Health Services; (6) Arizona Health Care Cost Containment System data provided by ASU ChiR

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SUBREGION DEFINITION: The South sub-region is defined as five census tracts (8, 9, 10, 11 & 12) in the south-central portion of Gila County, south of Lake Roosevelt excluding the San Carlos Apache reservation. It contains the city of Globe, the town of Miami and the CDPs of Claypool, Central Heights-Midland City, Copper Hill, Pinal, Icehouse Canyon, Six Shooter Canyon, Wheatfields and Roosevelt, including the portion of Top-of-the-World CDP within Gila County. The South sub-region is home to the largest number of young children in the region.