2024
NEEDS AND ASSETS REPORT

FIRST THINGS FIRST

Salt River Pima Maricopa Indian Community Region

SALT RIVER PIMA-MARICOPA INDIAN COMMUNITY
REGIONAL PARTNERSHIP COUNCIL
2024
NEEDS AND ASSETS
REPORT

Funded by the

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

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INTRODUCTION

Ninety percent of a child's brain growth occurs before kindergarten and the quality of a child's early experiences impacts whether their brain will develop in positive ways that promote learning. First Things First (FTF) was created by Arizonans to help ensure that Arizona children have the opportunity to start kindergarten prepared to be successful. Understanding the critical role the early years play in a child's future success is crucial to our ability to foster each child's optimal development and in turn, impact all aspects of well-being in our communities and our state.

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

The report is organized by topic areas pertinent to young children in the region, such as population characteristics or educational indicators. Within each topic area are sections that set the context for why the data found in the topic areas are important (Why it Matters), followed by a section that includes available data on the topic (What the Data Tell Us).

The FTF Salt River Pima-Maricopa Indian Community Regional Partnership Council recognizes the importance of investing in young children and ensuring that families and caregivers have options when it comes to supporting the healthy development 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 Salt River Pima-Maricopa Indian Community Region. To that end, this information may be useful to local stakeholders as they work to enhance the resources available to young children and their families and as they make decisions about how best to support children birth to age 5 in communities throughout the region.

ACKNOWLEDGEMENTS

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

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

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EXECUTIVE SUMMARY

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

The Salt River Pima-Maricopa Indian Community is a sovereign tribe located in the metropolitan area of Phoenix, Arizona. The Community was established by Executive Order on June 14, 1879, and it consists of 52,600 acres bordering the cities of Scottsdale, Tempe, Mesa and Fountain Hills. The Salt River Pima-Maricopa Indian Community is home to the Pima ('Akimel O'Odham,' River People) and the Maricopa ('Xalychidom Pipaash,' People who live toward the water). Geographically, the boundaries of the FTF Salt River Pima-Maricopa Indian Community match those of the reservation.

Population Characteristics. According to the 2020 U.S. Census, the total population of the Salt River Pima-Maricopa Indian Community Region was 6,321, of whom 521 were young children (birth to age 5). More than one in six (18%) of the 348 households in the region had one or more young children. The proportion of households with young children in the region was slightly lower than all Arizona reservations combined (20%), though higher than Maricopa County (14%) and Arizona (13%). Between 2010 and 2020 the overall population of the Salt River Pima-Maricopa Indian Community Region as counted by the Census increased by 1%, differing from the declining trend seen across all Arizona reservations (-3%). The population of young children (birth to age 5) decreased by 17% compared to the 26% decrease seen across all Arizona reservations.

Given that American Indians living on reservations and young children (birth to age 4) were specifically found to be substantially undercounted in the 2020 Census (5.6% and 3-5% nationally), tribal enrollment data is another important source of data for determining population counts in Native communities. Based on data from the Salt River Pima-Maricopa Indian Community Enrollment Office, in 2022 the Salt River Pima-Maricopa Indian Community Tribe had a total enrollment of 10,890. This included 6,173 individuals living on-reservation, of whom 457 were young children (birth to age 5). According to the 2022 FTF Salt River Pima-Maricopa Indian Community Regional Needs and Assets Report, robust data systems in the Community mean that data from the Enrollment Office are often more accurate, timely and reliable than estimates from the Census. However, enrollment data may underrepresent the number of young children in the Community, as families often wait to enroll children until they seek services.

Another way to understand potential undercounting of young children in the Salt River Pima-Maricopa Indian Community Region is to compare 2020 Census data to births by year. Census estimates of the population size of young children by age are lower than the count of births from their likely birth year,

with 640 births occurring between 2015 and 2020 compared to 521 children birth to age 5 enumerated by the Census.

A large majority of the population (82%) in the Salt River Pima-Maricopa Indian Community Region, including young children (94%), identified as American Indian. A notably larger proportion of the overall population and young children in the region identified as Hispanic or Latino (17% and 26%) compared to all Arizona reservations (6% and 8%).

Native language revitalization plays a critical role in cultural preservation and can support the cognitive and socio-emotional development of young children through exposure to multiple languages. According to the 2022 Needs and Assets Report, the Salt River Schools Native Language and Culture Program has developed a language preservation curriculum which is taught at the Early Childhood Education Center (ECEC), Salt River Elementary School, Salt River Accelerated Learning Academy and programs offered through the Tribal O'odham Piipaash Language Program. The Salt River Pima-Maricopa Indian Community's Cultural Resources Department hosts monthly O'odham Elders and Speakers Revitalization Gatherings, which are attended by the Cultural Language specialist from the ECEC. Salt River Schools has staff that speak both O'odham and Piipaash and incorporate both languages into the curriculum; they have also certified language teachers who speak O'odham and Piipaash to teach in the region's schools.

The vast majority (92%) of individuals in the Salt River Pima-Maricopa Indian Community Region speak only English at home, while the remainder speak Spanish (3%) or another language (5%), of which Native North American languages are the most common. Of those individuals speaking a language other than English at home, the majority also speak English very well, with 7% of the region proficiently bilingual or multilingual. In addition to those who are multilingual, about 1% of households in the Salt River Pima-Maricopa Indian Community Region are considered limited-English-speaking, meaning no one over the age of 13 speaks English very well.

Very few students in the Salt River Pima-Maricopa Indian Community Region were English Language Learners; in both the 2020-21 and 2021-22 school years, fewer than 11 students were identified as English Language Learners at the Salt River Accelerated Learning Academy, while 8% of students in Mesa Public Schools located outside the region were English Language Learners in both years. English Language Learners are identified through the Arizona Department of Education (ADE) Home Language Survey, which asks families what language is spoken at home most of the time or what a student's first language was. In the 2020-21 and 2021-22 school years, a total of 20 students in Mesa Public Schools that serve students from the Community were identified as living in households where a Native language is spoken.

More than three-quarters (78%) of young children (birth to age 5) in the Salt River Pima-Maricopa Indian Community Region live in a household with one unmarried parent, a larger proportion than across all Arizona reservations (65%), Maricopa County (36%) and the state (37%). A much smaller proportion live with two married parents (10%) or live with relatives other than parents (11%), such as grandparents, aunts and uncles. This suggests that kinship care is more prevalent in the region than elsewhere in the state.

More than one in three young children (37%) in the region live in a grandparent's household, a smaller proportion than seen across all Arizona reservations (40%) but a higher proportion than Maricopa County (12%) and the state (14%). Note that this includes both grandparents who are raising their grandchildren and those who live in multi-generational households where the child's parents are present. A smaller proportion of grandparents in the region are living with grandchildren (birth to age 17) without a parent also present in the household (7%) compared to all Arizona reservations (14%). According to ACS data, grandparents are considered responsible for their grandchildren if they are "currently responsible for most of the basic needs of any grandchildren under the age of 18" who live in the grandparent's household. An estimated 254 grandparents in the Salt River Pima-Maricopa Indian Community Region are living with and responsible for their grandchildren under 18 years old. In the majority of these households the parent is living in the household (90%), a much larger proportion than seen across all Arizona reservations (70%). The more than half of these grandparents are female (56%) and just one in five (20%) are in the labor force.

Economic Circumstances. Across all household types for which data are available, except for single-female-headed families with children, the median family income in the Salt River Pima-Maricopa Indian Community Region is lower than that seen at the county and state level. The median annual income for all families with children (birth to age 17) in the region is $52,700, compared to $81,300 in Maricopa County and $75,100 in Arizona. Married couple families with children in the region have the highest median annual income ($88,000) of all family types, which is below (but more closely aligns with) the median seen for married couple families in Maricopa County ($106,700) and the state ($100,000). Single-female-headed families with children have a higher median income in the region ($47,000) compared to the county ($38,300) and state ($35,000), a critical asset for the region given that the majority (78%) of young children in the region live in a single-parent household. However, this is still far below the self-sufficiency standard for a single parent with one infant and one preschooler in 2022 in Maricopa County ($74,608).

One-third (33%) of the overall population and more than half (53%) of young children (birth to age 5) in the Salt River Pima-Maricopa Indian Community Region live in poverty, rates that are more than twice those seen in Arizona (13% and 20%, respectively). According to American Community Survey (ACS) five-year estimates, rates of poverty among young children in the Salt River Pima-Maricopa Indian Community Region have decreased notably (-13%) in recent years, from 66% in 2012-2016 to 53% in 2017-2021. This aligns with declining poverty rates seen among young children during this same time period across all Arizona reservations (-6%), Maricopa County (-8%), Arizona (-8%) and the U.S. (-6%).

The majority (75%) of young children in the Salt River Pima-Maricopa Indian Community Region live in households with incomes under 185% of the federal poverty level (FPL), a commonly used threshold for safety net benefits such as the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and reduced-price school meals. In 2021, the 185% FPL threshold for a family of two adults and two children was $50,836; for a single parent with one child, it was $34,552. While the proportion of young children living below 185% FPL is similar between the region and all Arizona

reservations (70%), a much larger proportion of young children in the region live in “deep poverty” (defined as below 50% FPL) (38%) compared to young children in all Arizona reservations (27%). The region also has higher rates of deep poverty than those seen at the county (7%), state (9%) and national levels (9%).

In the Salt River Pima-Maricopa Indian Community Region, the Temporary Assistance for Needy Families (TANF) program is managed by the tribe through the Life Enhancement and Resource Network (LEARN). According to the 2022 Needs and Assets Report, LEARN provides many services to its clients in addition to cash benefits, including Fatherhood and Motherhood programs, life enhancement skill classes and a computer lab. Since state fiscal year (SFY) 2018, participation of young children and households with young children in LEARN has declined notably. In SFY 2022, 4% of households with young children (birth to age 5) and 4% of young children in the region participated in LEARN. These participation rates are slightly higher than TANF participation rates seen at the county (both 2%) and state level (both 3%), meaning a larger proportion of families with young children experiencing poverty in the region accessed needed financial assistance.

Since SFY 2018, Supplemental Nutrition Assistance Program (SNAP) participation among young children (birth to age 5) and families with young children in the Salt River Pima-Maricopa Indian Community Region has consistently declined each year. In SFY 2022, 256 young children and 159 families with young children in the region participated in SNAP.

The Salt River Pima-Maricopa Indian Community WIC program is administered by the Inter Tribal Council of Arizona (ITCA). In 2020, a total of 795 individuals in the region were enrolled in the program, including 215 women (27%), 238 infants (30%) and 342 children (ages 1-4; 43%). These proportions are relatively similar to those seen across all ITCA WIC programs, with children also making up the more than half of those enrolled (6,247; 51%). From 2017 to 2020, the number of children (birth to age 4) enrolled in WIC in the region showed similar declines to those seen across all ITCA WIC programs, from 772 children enrolled in 2017 to 580 in 2020. WIC participation rates were high in the region in 2022, with 92% of women, 95% of children, and 98% of infants enrolled in the program receiving benefits that year.

Due to transitions to remote learning in response to the COVID-19 pandemic, the number of meals served through the National School Lunch Program (NSLP) dropped in 2020-21 as Salt River Schools pivoted to new meal delivery modalities through the Summer Food Service Program (SFSP). Additionally, Salt River High School closed in June 2020, which also contributed to this decline. NSLP meals increased in the 2021-22 school year to 48,758 meals, though still under half of the meals served prior to the onset of the COVID-19 pandemic (110,040 in 2019-20). In total, more than 150,000 lunches were served through both programs in the 2021-22 school year.

The unemployment rate is the proportion of the total number of people in the civilian labor force who are unemployed and looking for work. Unemployment rates do not include people who have dropped out of the labor force entirely, including those who wanted to work but could not find a suitable job and have stopped looking for employment. The ACS estimates that the average unemployment rate for the Salt River Pima-Maricopa Indian Community Region over the five years from 2017 to 2021 was 27%.

This is well above the unemployment rate for all Arizona reservations (14%), as well as Maricopa County (5%), Arizona (6%) and the U.S. (5%).

An additional metric of employment is the labor-force participation rate. This rate is the fraction of the population who are in the labor force, whether employed or unemployed. The labor force participation rate in the region (45%) mirrors all Arizona reservations (45%), though it is notably below Maricopa County (65%). This means that just under half of working-age teens and adults in the Salt River Pima-Maricopa Indian Community Region are working (33%) or actively looking for work (12%), while the other half are not (which includes students, retirees, stay-at-home parents and others).

Seventy percent of young children (birth to age 5) in the Salt River Pima-Maricopa Indian Community Region live in a household where at least one parent is in the labor force, compared to 65% of young children across all Arizona reservations and 92% of young children in Maricopa County. More than half (59%) of young children in the region live in a single-parent household where that parent is in the labor force, meaning they will likely require some form of child care.

According to the 2022 Needs and Assets report, the Salt River Pima-Maricopa Indian Community Resident Resources and Services department manages six housing developments and properties through the low-income housing program. Families who urgently need housing are referred outside the Community for emergency shelter. Key informants in the 2022 report indicated that there is not a sufficient supply of housing for all families who want to live in the Community, and off-reservation housing in metropolitan Phoenix is much more expensive. Because of this shortage and high housing costs outside the Community, many families live 'doubled-up' with multiple or extended families sharing the same house.

Traditionally, housing has been deemed affordable for families if it costs less than 30% of annual household income. According to recent ACS estimates, almost one-third (31%) of households in the Salt River Pima-Maricopa Indian Community Region spent more than 30% of their income on housing, impacting a slightly larger proportion of homeowners (33%) than renters (26%) in the region. Housing cost burden is similar in the region compared to Maricopa County (30%) and the state (29%), though notably higher than all Arizona reservations (13%).

Eighty-three percent of households in the Salt River Pima-Maricopa Indian Community Region have both a computer (i.e., a desktop, laptop, tablet or smartphone) and broadband internet connectivity. While this proportion is lower than Maricopa County (90%) and Arizona (88%), it is notably higher than seen across all Arizona reservations (44%). At the individual level, 85% of individuals in the Salt River Pima-Maricopa Indian Community Region, including 95% of children (birth to age 17), have access to both a computer and internet in their household. This is a slightly larger proportion of children with access than Maricopa County (93%) and the state (92%), and notably higher than across all Arizona reservations (51%).

Educational Indicators. According to the 2022 Needs and Assets Report, children in the region attend school at Salt River Schools, Mesa Public Schools (MPS), Scottsdale Unified School District, charter schools, private schools, Bureau of Indian Education boarding schools and various nearby public school

districts through open enrollment. Salt River Pima-Maricopa Indian Community has been operating Salt River Elementary School, which receives Bureau of Indian Education (BIE) funding, since 1996. [1] Students who attend schools outside the Community, including MPS, are still eligible to receive support services such as tutoring through the Community's Education Division. [2]

The average number of children enrolled at Salt River Schools decreased each year from 2017-18 to 2020-21, with the largest drop between 2019-20 to 2020-21 due to the closure of Salt River High School in June 2020 as well as the effects of the COVID-19 pandemic and transition to remote learning. According to the 2022 Needs and Assets Report, many families in the region reported moving their children to schools outside of the region when the high school closed in order to keep all their children within the same school district. Although the average daily attendance at Salt River Schools decreased steeply from 2017-18 to 2020-21, this matches the enrollment trend, and attendance rates actually improved during this time period. The difference between the number of students enrolled and the number of students in attendance fell from 118 in 2017-18 to only 16 in 2020-21, indicating a marked improvement.

The number of students enrolled at Salt River Elementary also declined from 2017-18 to 2020-21, which may be attributed to families transferring younger siblings to off-reservation schools along with their high school-age siblings. [3] The greatest declines in enrollment were in kindergarten, first and sixth grade. Attendance rates also improved for elementary students. While 23 fewer students were in daily attendance than were enrolled in 2017-18, all enrolled students were reported as in attendance during remote learning in 2020-21.

The total number of kindergarten through sixth-grade students from the Salt River Pima-Maricopa Indian Community enrolled in Mesa Public Schools decreased slightly from 468 in 2019-20 to 457 in 2020-21. The number of children in lower grades increased (with the largest increase among first graders), while the number of children in the upper elementary grades declined. According to the 2022 Needs and Assets Report, a total of 1,055 students from the Community were enrolled in Mesa Public Schools in the 2020-21 school year. [4] Attendance rates for Salt River Pima-Maricopa Indian Community students attending Mesa Public Schools also improved across all grades from 2019-20 to 2020-21. In 2019-20, all grades had below 90% attendance rates, and grades 8 through 10 had below 80% attendance rates. In 2020-21, all besides grade 12 had above 90% attendance rates.

In 2020, the Bureau of Indian Education (BIE) published a new Standards, Assessments and Accountability Systems Final Rule, which means that BIE will use a single unified assessment in all BIE-funded schools nationwide.[5] Prior to 2020, BIE-funded schools in Arizona had used the same assessment as Arizona public schools. In both the 2017-18 and 2018-19 school years, only 19% of third graders at Salt River Elementary School passed the English Language Arts (ELA) assessment. Notably, 74% of students achieved minimally proficient scores on the ELA assessment in 2017-18, which decreased slightly to 63% in 2019-20. Students showed improvements in Math assessment scores, with the percentage of students achieving passing scores increasing by 9%. The portion of students scoring minimally proficient in Math decreased from 43% to 19%. According to the 2022 Needs and Assets Report, Salt River Schools began using the new Pearson ELA and Math assessments in fiscal year (FY)

2021. Future Needs and Assets reports for the region are expected to present data from these assessments.[6]

Pre-pandemic passing rates for American Indian students in Mesa Public Schools were slightly lower than those for Salt River Elementary School. In 2017-18 and 2018-19, 24% of students passed the math assessment, and slightly fewer passed the ELA assessment (17% and 22%, respectively). In 2020-21, Arizona schools switched from using the AzMERIT assessment to the AZM2, with no third-grade testing happening in 2019-20 due to school transitions to remote learning. In the first year of AZM2 assessments, fewer than 2% of American Indian students in Mesa Public Schools that serve Salt River Pima-Maricopa Indian Community students achieved a passing score on the ELA assessment. However, passing rates increased substantially between 2020-21 to 2021-22, with 25% of American Indian students in these schools achieving a passing score. This improvement in passing rates outpaces the improvement in passing rates seen for all American Indian students in Arizona, but still falls substantially below passing rates for all students in Maricopa County (43%) and Arizona (41%). Similarly, Math assessment passing rates were extremely low (3%) for American Indian students in Mesa Public Schools that serve Salt River Pima-Maricopa Indian Community students in the 2020-21 school year. Like the trend seen in ELA passing rates, Math passing rates improved substantially in the 2021-22 school year, with 12% of American Indian students in these schools achieving passing scores. However, even with this improvement, passing rates for these students still fall slightly below the passing rates for all American Indian students in Arizona (16%) and substantially below passing rates for all students in Maricopa County (42%) and Arizona (40%).

According to the 2022 Needs and Assets Report, before Salt River High School closed in 2020, four- and five-year graduation rates in the region had often been higher than statewide.[7] The Accelerated Learning Academy (ALA), an alternative school serving students who have fallen behind on credits and may be working towards their diploma on an extended timeline, has had expectedly lower four- and five-year graduation rates. In 2022, 8% of students at ALA graduated in four years, and 41% graduated in five years. Four-year graduation rates decreased for American Indian students at Mesa Public Schools from 76% in 2020 to 63% in 2022, while five-year graduation rates increased slightly from 76% to 80% in 2021 (with no data available for 2022). In 2022, four-year graduation rates for American Indian students in these schools were lower than those for American Indian students statewide (65%), as well as graduation rates for all students in Maricopa County and Arizona (77% for both). However, five-year graduation rates were slightly higher for American Indian students in Mesa Public Schools (80%) compared to those for all students statewide (79%).

From 2019-20 to 2020-21, 7th to 12th grade drop-out rates increased sharply for students at ALA, from 10% to 50%. In 2021-22, drop-out rates were highest at ALA (32%), followed by American Indian students statewide (9%) and American Indian Students in Mesa Public Schools serving Salt River Pima-Maricopa Indian Community students (7%). From school year 2019-20 to 2020-21, graduation rates for Salt River Pima-Maricopa Indian Community students enrolled in Mesa Public Schools increased from 57% to 75%. Drop-out rates were below 1% each year. Comparing these data to those available for all

American Indian students enrolled in select Mesa Public Schools suggests that students from the Community are graduating at higher rates and dropping out at lower rates than many of their peers.

Among adults in the Salt River Pima-Maricopa Indian Community Region, 75% have at least a high school education. This is a similar proportion as across all Arizona reservations (77%), though a smaller proportion compared to the county (89%), state (88%) and national level (89%). About one in every 10 adults (10%) in the Community has a bachelor's or more advanced degree. A higher portion of mothers giving birth between 2019 and 2022 in the Community had less than a high school education (37% compared to 25% of all residents). This rate is much higher than for mothers in all Arizona reservations (27% in 2020), Maricopa County (13% in 2021) and Arizona (12% in 2021).

Early Learning. According to the ACS, the proportion of children ages 3-4 enrolled in preschool nearly doubled from 32% in 2012-2016 to 59% in 2017-2021. Across all Arizona reservations, preschool enrollment rates also increased slightly over this timeframe (2%). In contrast, preschool enrollment rates declined between 2012-2016 and 2017-2021 in Maricopa County (-2%), Arizona (-1%), and the US as a whole (-1%), likely due to the effects of the pandemic on the early care and education system. According to the 2022 Needs and Assets Report, early childhood care and education in the Salt River Pima-Maricopa Indian Community Region are available through the ECEC, the Family and Child Education (FACE) Program at Salt River Elementary, the Early Enrichment Program under the Community's Youth Services Department and the tribal Child Care Development Fund (CCDF) Certificate program.[8]

The ECEC offers multiple program options that parents can choose from, including the Head Start preschool program, Early Head Start infant-toddler program and the Early Childhood Education Center (CCDF and tribally-funded component). The Head Start preschool program offers free preschool to children ages 3-4 residing in the Community from 7:30 a.m. to 2:00 p.m. in August through May. The Early Head Start infant-toddler program offers free services to expectant mothers and children ages birth to 3 residing in the Community and operates from 7:30 a.m. to 2:00 p.m. year-round. The CCDF-funded component of the ECEC provides wraparound care for children from 6 weeks old to age 5, with care available from 7:00 a.m. to 5:30 p.m., which means that child care is available before and after the regular school hours funded by Head Start and Early Head Start. The wraparound care component (outside of Head Start and Early Head Start hours) requires a parent co-pay based on family size and income. The ECEC's "blended" funded model allows for provision of high-quality early care and education in one facility.[9]

The ECEC had 258 total children enrolled in school year 2019-20 before the onset of the COVID-19 pandemic. According to the 2022 Needs and Assets report, the center had been operating at full capacity up until March 2020. In 2020-21, due to the constraints of remote learning, the ECEC did not enroll any new students from the waiting list.[10] This meant that the number of children enrolled decreased to 187 children in 2020-21. Average daily students and average daily attendance were stable between 2017-18 and 2019-20 before decreasing in 2020-21. Average daily students decreased by 82 students (from 267 to 185), and average daily attendance decreased by 42 students (from 218 to 176). This indicates that

nearly all children who were enrolled in the ECEC were regularly participating in learning activities remotely and engaging with teachers by phone or online. [11]

According to the 2022 Needs and Assets Report, the ECEC uses The Creative Curriculum to promote language, literacy skills and social-emotional learning and the TSG Objectives for Development and Learning Assessment to evaluate school readiness.[12] While the percent of children meeting or exceeding all six GOLD targets increased from fall 2018 to the end of the school year in spring 2019, this percent fluctuated or decreased from fall 2020 to spring 2021. This may reflect differences in evaluation, as teachers were assessing students through check-ins with parents during the pandemic, as well as challenges of remote learning generally.[13] These data also suggest that children who participated in remote learning through the early years of the pandemic may need additional supports as they transition to kindergarten.

As mentioned above, the ECEC is funded through multiple sources including Head Start and Early Head Start grants, Tribal CCDF, and the Salt River Pima-Maricopa Indian Community's General Fund.[14] In both 2019-20 and 2020-21, the ECEC also received substantial funding through the Coronavirus Aid, Relief, and Economic Security (CARES) Act, which was funneled through Head Start, Early Head Start and CCDF. Total funding for the ECEC increased from over $14.27 million in 2019-20 to over $15.23 million in 2020-21, mostly due to increased CARES CCDF funding.

According to the 2022 Needs and Assets report, Tribal CCDF also supports off-reservation child care services through its Certificate program, which pays for a portion of child care costs with parents contributing a co-payment based on a sliding scale.[15] In FY 2020, the average parent co-pay was $48 per month. The average monthly CCDF assistance amount was $646, which was a substantial increase from $376 in FY 2019. The number of children in the region receiving care through the certificate program increased from 292 in FY 2018 to 330 in FY 2019, then decreased slightly to 325 in FY 2020.

BIE sponsors the Family and Child Education (FACE) program for American Indian families in 15 communities across Arizona, including the Salt River Pima-Maricopa Indian Community. FACE has both center- and home-based components, as well as programming to specifically support children and their caregivers.[16] The total number of children and adults participating in the Salt River Elementary FACE program decreased from 86 in 2018 to 38 in 2019.

According to the 2022 Needs and Assets report, center-based early care and education services are also typically available through the Early Enrichment Program, which is housed at the Salt River Pima-Maricopa Indian Community Youth Services Department and serves children ages 4 and older. The program focuses on developing kindergarten readiness and social skills and is located in the Way of Life Facility (WOLF). The program transitioned to a virtual format between March 2020 and March 2021 due to the COVID-19 pandemic, but it transitioned back to in-person instruction in spring 2021.[17]

Looking across all the early care and education programs in the region, 475 total children ages 0 to 5 were enrolled in early care and education in 2018-19, the last year when data were available for all programs.[18] Most of these children were enrolled in center-based care (440 children), with 39 children enrolled in home-based care. The largest number of children in center-based care were enrolled at ECEC

(n = 246), followed by families funded to attend off-reservation early care and education centers through the CCDF Certificate Program (n =175). In the 2022 Needs and Assets report, multiple key informants noted the need for greater child care capacity in the region due to high demand for both the ECEC and CCDF Certificate program services.[19]

In addition to the child care assistance provided through the CCDF Certificate program, some families in the Salt River Pima-Maricopa Indian Community may receive assistance from DES to help pay for child care. The number of children in the region ages 0-5 who were eligible for and receiving DES child care assistance decreased steadily from 2017 to 2022. While 20 children were eligible in 2017, fewer than 10 were eligible in 2021 and 2022. Similarly, 17 children were receiving assistance in 2017, which decreased to fewer than 10 in 2020 through 2022. While the proportion of eligible families not using DES child care assistance peaked in 2020 across the state, this proportion actually decreased from 18.2% in 2018 to 0% in 2021 in the Salt River Pima-Maricopa Indian Community Region. However, the proportion of eligible families not using assistance then increased to 16.7% in 2022. The number of Department of Child Security (DCS)-involved children ages 0 to 5 who were eligible for and receiving DES assistance also decreased from 2017 to 2022, with a slight recovery in 2021. Over these years, DES assistance were utilized by approximately twice as many DCS-involved children than children not involved in the child welfare system in the region.

The Salt River Pima-Maricopa Indian Community Region has one Quality First child care provider, Miro International Preschool, which was funded by the DES expansion in SFY 2023. Miro International Preschool is not tribally operated but leases land on the reservation. In 2022, between 1 and 9 children ages 0 to 5 received DES assistance, and 60% of these children were enrolled in a quality early care and education program. Almost all of the 22 DCS-involved young children receiving DES assistance were enrolled in a quality environment (n = 21, 95%).

In Arizona, the Arizona Early Intervention Program (AzEIP), the Division of Developmental Disabilities (DDD) and the ADE Early Childhood Special Education Program are designed to provide services to families with children who have special needs. In the Salt River Pima-Maricopa Indian Community Region, 26% of children (birth to 2) who were referred to the AzEIP in FFY 2022 were found eligible and received services, a larger proportion than seen in Maricopa County and Arizona (both 21%). About one in five (19%) children referred in the region were assessed and found ineligible. The families of more than one in five children who were referred did not proceed with screening for eligibility (22%), and 19% were not able to be reached. In 2021 and 2022 combined, 13 children received services from AzEIP. The largest single source of referrals was a physician’s office, accounting for nearly half of all referrals in 2021 and 2022. Other major referral sources included early learning programs, public health or social service agencies, and schools. Fewer than 10 children (birth to age 5) in the region received services from the Division of Developmental Disabilities each year from SFY 2019 to 2022.

Qualifying children may receive services from AzEIP and/or DDD, a number which can be used to estimate the total number of young children receiving early intervention services in a region. Specifically for children birth to age 2, fewer than 10 children in the Salt River Pima-Maricopa Indian Community Region received services from AzEIP and/or DDD each year between SFY 2018 and 2022.

This would amount to between 0.4% and 3.8% of the children in this age range (according to the 2020 Census) in the Community.

According to the 2022 Needs and Assets report, Child Find services are provided through Mesa Public Schools (MPS) and the tribal Child Find program. Child Find identifies children with disabilities to ensure that they receive needed supports and services. The Salt River Pima-Maricopa Indian Community Child Find Program conducts developmental screenings for young children in the region and refers children younger than age 3 to AzEIP and children ages 3-5 to MPS. Exceptional Education Services (EES) at the ECEC employs of a full-time coordinator as well as occupational, speech and physical therapists who provide services through a consultative model. Additional ECEC EES staff provide as-needed supports to students, which can include Behavior Health Intervention provided by Behavior Intervention Consultants. As a part of a memorandum of understanding with Mesa Public Schools, children have access to an early childhood special education teacher, a school psychologist, and other services on the ECEC campus as determined by their multidisciplinary education team.

The number of preschoolers with disabilities enrolled in Salt River Schools (at the ECEC) increased from 18 in SFY 2018 to 25 in SFY 2020 before dropping to fewer than 11 in SFY 2021 and 2022. This is similar to the trend across Arizona in these years where the number of preschoolers receiving services through Local Education Agencies (LEAs) fell by more than 20% between SFY 2020 and 2022. Of the preschoolers with disabilities receiving services between SFY 2018 and 2022, 73% were diagnosed with a developmental delay, 16% with a speech or language impairment, and 11% with a preschool severe delay. A larger proportion of preschoolers enrolled at Mesa Public Schools serving Salt River Pima-Maricopa Indian Community students were diagnosed with a speech or language impairment than those enrolled in Salt River Schools (27%).

According to the 2022 Needs and Assets Report, children with disabilities continue to be served by ESS as they continue on in elementary grades and beyond. [20] The ESS program at Salt River Schools served 142 students in 2018-19, 162 students in 2019-20 and 81 students in 2020-21. More than half of these students each year were at Salt River Elementary School, with smaller proportions at Salt River High School and the Accelerated Learning Academy (with no students attending the ALA in 2020-21).

Child Health. Health care services are available to residents from the Salt River Pima-Maricopa Indian Community through the River People Health Center, which opened in 2022.[21] The Center offers pediatric care, women's health and prenatal care services, specialty health services, mental and behavioral health care, dental care, optometry, physical therapy, nutrition and dietetics, medical imaging and laboratory services and public health nursing. According to the 2022 Needs and Assets Report, in FY 2019 there were 3,798 Indian Health Service (IHS) active users[i] (as defined as those who had one or more visits during the previous three years, resided within the boundaries of the Salt River Pima-

[i] *Please note that the number of active users represents all residents of the Salt River Pima-Maricopa Indian Community Region (overall and for young children birth to 5) and the town of Lehi (the community in Mesa) who received services at least once at the IHS Phoenix Service Unit during the stated time period, regardless of their tribal affiliation. This is also the case with all other indicators included in this report where the Indian Health Service is the source.- Personal Communication, Indian Health Service – Phoenix Area, April 2021*

Maricopa Indian Community or the town of Lehi and received services in the IHS Phoenix Service Unit). Of those, 350 were children ages birth to 5.

According to ACS estimates, 19% of the overall population and 3% of young children (birth to age 5) in the Salt River Pima-Maricopa Indian Community Region lack health insurance. These uninsured rates are lower than seen across all Arizona reservations, including for all ages (19%) and most notably for young children (20%). Uninsured rates among young children in the Salt River Pima-Maricopa Indian Community Region dropped substantially in recent years, from 27% in 2012-2015 to just 3% in 2017-2022 (-24%). While Maricopa County and Arizona also saw slight declines in the proportion of uninsured young children during this time, there was an increase in uninsured young children across all Arizona reservations (17% to 20%). Insurance coverage for babies born in recent years highlights the high rates of Arizona Health Care Cost Containment System (AHCCCS) coverage in the Salt River Pima-Maricopa Indian Community Region in 2020 (76%) and 2021 (66%). AHCCCS coverage for births in the region in 2020 (76%) was higher than in Maricopa County (65%), all Arizona reservations (71%) and Arizona (48%).

In 2021, just over half (53.9%) of the 89 births in the Salt River Pima-Maricopa Indian Community Region were to mothers who began prenatal care in the first trimester. Data for 2020 show notably lower proportions of births with no prenatal care in Maricopa County (2%), all Arizona reservations (5%) and Arizona (2%). Concerningly, more than one in 10 births in the region in 2021 (12%) were to mothers with no prenatal care at all. The proportion of births in the region to mothers who began prenatal care in the first trimester fluctuated in recent years, peaking at 67% in 2020 and declining to 60% in 2022.

Of the 408 births in the Salt River Pima-Maricopa Indian Community Region between 2019 and 2022, 12% were to mothers younger than 20, a higher proportion than seen in Maricopa County (5%), all Arizona reservations (9%) and Arizona (5%) in 2020. In 2022, births to mothers younger than 20 in the region declined to a five-year low of 7.5%, though well above the state overall (4.6%). Five percent of births in the region in 2019-2022 combined were to mothers who smoked cigarettes during pregnancy, above the Healthy People 2030 target of no more than 4.3%. Between 2018 and 2022, there were 49 newborns hospitalized because of maternal drug use during pregnancy in the Salt River Pima-Maricopa Indian Community Region, with an average hospital stay of 11.3 days. When compared to the number of births in the region, there were 9.7 newborns hospitalized per 100 live births in the region compared to 3.3 newborns hospitalized per 100 live births in the state.

In 2021, 14.6% of births in the Salt River Pima-Maricopa Indian Community Region were to mothers with gestational diabetes and 48% to mothers with pre-pregnancy obesity. Both rates of gestational diabetes and pre-pregnancy obesity in the region were higher than those seen for Maricopa County (9.6% and 27%, respectively). The proportion of births to mothers with pre-pregnancy obesity showed an overall increasing trend in recent years, from 17.5% in 2018 to 62.4% in 2022. Rates of gestational diabetes in the region remained more stable, showing a slight overall increase from 14.4% in 2018 to 15.1% in 2022.

In 2020, almost one in ten (9.9%) births in the Salt River Pima-Maricopa Indian Community Region were low birthweight births, a higher proportion than seen in Maricopa County (7.3%), all Arizona

reservations (8.9%) and Arizona (7.4%). The Healthy People 2030 target for the percentage of preterm births is 9.4% or fewer. The region did not meet this target in four of the last five years and showed an overall increasing trend in preterm births, with 20.4% of births occurring preterm in 2022. Twelve percent of the 89 births in the Salt River Pima-Maricopa Indian Community Region in 2021 resulted in admission to the Neonatal Intensive Care Unit (NICU).

From 2017 to 2020, over half of WIC-enrolled infants in the Salt River Pima-Maricopa Indian Community Region were breastfed at least once (between 56%-61%). The region had slightly lower rates of breastfeeding than those seen across all ITCA WIC Programs, with around two-thirds of WIC-enrolled infants ever breastfed (between 65%-71%). However, the proportion of infants who were breastfed (alone or in combination with other nutrition) at 6 months increased by 10% in the region during this time, from 20% in 2018 to 30% in 2020.

Childhood immunizations protect against many diseases, including diphtheria, tetanus and pertussis (DTaP); polio; and measles, mumps and rubella (MMR). Data from the IHS Phoenix Service Unit showed that just over half (53%) of toddlers ages 19 to 35 months had completed their full immunization series on-time for their age group in FY 2020.[ii] The target set by IHS for toddlers with a complete vaccine series in this age range in FY 2020 was 45.9%, which meant that immunization rates in the Community exceeded this national target. Children enrolled in the Salt River Early Childhood Education Center (ECEC) in the Salt River Pima-Maricopa Indian Community Region had higher vaccination rates in major immunization series (DTaP, 96.5%; Polio, 99.4%; MMR, 99.4%) than the state overall (DTaP, 90.6%; Polio, 92.2%; MMR, 93%) in the 2022-23 school year. The region and state both met the Healthy People 2030 DTaP immunization target of at least 90%. No children in child care in the region received exemptions of any kind from required immunizations in the 2022-23 school year. Kindergarten immunization rates at Salt River Elementary School (DTaP, 80%; Polio, 84.4%; MMR, 88.9%) were notably lower than rates among children in child care in the 2022-23 school year, and even fell below immunization rates seen statewide (DTaP 89.6%; Polio 90.3%; MMR 89.9%). No children in kindergarten in the region received exemptions of any kind from required immunizations between the 2020-21 and 2022-23 school years.

There were fewer than six infant deaths in the Salt River Pima-Maricopa Indian Community Region between 2019 and 2021. The most recent data available on non-fatal emergency department visits due to unintentional injuries among young children (birth to age 4) in the Salt River Pima-Maricopa Indian Community Region showed similar trends to those seen statewide. Between 2016 and 2020, the majority of emergency department visits among young children in the region were due to falls (n=156), with smaller numbers due to being struck by or against an object, natural/environmental or other causes. Between 2018 and 2021, there were 9 total deaths of children birth to age 17 in the region. The most

[ii] The complete vaccine series for this age group is 4 or more doses of Diphtheria, Tetanus and Pertussis (DTaP), 3 or more doses of Polio, 1 or more doses of measles, mumps and rubella (MMR) vaccine, 3 or more doses of Haemophilus influenzae type B (hib) vaccine, 3 or more doses of hepatitis B vaccine, 1 or more dose of Varicella vaccine and 4 or more doses of Pneumococcal conjugate vaccine (PCV).

common cause was accidents, making up more than three-quarters (78%) of child deaths. This was also the most common cause of child death across the state, accounting for 20% of total child deaths.

Family Support and Literacy. According to the 2022 Needs and Assets Report, the pediatric clinic at the River People Health Center participates in Reach Out & Read, a funded strategy of the Salt River Pima-Maricopa Indian Community FTF Regional Partnership Council. The program provides a book to young children at each well-child visit while the pediatrician educates parents on the importance of reading with their child.[22] Family and parent education services are available in the region through both early learning programs and community service providers, including parenting classes at ALA funded by the FTF Regional Partnership Council; a parenting course offered by the Tribal Social Services Department; a Fatherhood program and Healthy Relationship courses offered through LEARN; and coaching and peer support offered by Behavioral Health Services. The Salt River Tribal Library at the WOLF also hosts story hours for young children and their families.

Behavioral Health Services provides mental health services for Community residents. Services for young children ages birth to 5 include mental health assessments and play therapy as well as referrals to respite care services. Behavioral Health Services has also sponsored training in infant and toddler mental health for all staff as well as the Salt River Pima-Maricopa Indian Community Social Services Department, Family Advocacy Center and ECEC.[23] Behavioral Health Services for caregivers of young children include family, couples and individual outpatient counseling; substance abuse and domestic violence counseling and victim advocate services; intensive outpatient care and psychiatric services; and a 24/7 crisis hotline.

According to the 2022 Needs and Assets Report, Child Welfare services in the Salt River Pima-Maricopa Indian Community Region are provided by Salt River Pima-Maricopa Indian Community Social Services Department, Tribal Child Protective Services (CPS) and the Family Advocacy Center (FAC). The Family Advocacy Center is a unique facility that co-locates FAC staff, Tribal CPS and tribal police and prosecution to facilitate cross-agency coordination and ensure that child victims can be cared for in a safe and welcoming environment. Key informants in the 2022 report highlighted service coordination as a major strength of the child welfare system in the Community, as Tribal CPS and Social Service staff coordinate with multiple departments and agencies to ensure that families are referred to needed services.[24]

From 2007 to 2020, the number of children (ages 0 to 17) removed by Tribal CPS declined substantially, from a high of 144 in 2012 to a low of 41 in 2020. In 2020, 21 young children (ages 0 to 51) were removed by Tribal CPS. This decrease in removals was due to changes in policy both locally and federally to prioritize family preservation and minimize child removals whenever it is safe to do so.[25] Between 2013 and 2020, the number of ICWA placements also fell from peak of 110 placements in 2013 to 77 in 2020. The number of substantiated cases of child abuse and/or neglect increased from 50 in 2019 to 98 in 2020. Children ages birth to 5 accounted for 21 of these cases in 2019 and 47 in 2020.

In 2019, there were 201 total wards of the court (ages 0 to 17) in the region, 36% of which were young children ages birth to 5. In 2020, there were 174 total wards of the court, and almost half were young

children (n=82, 47%). Children birth to 5 were most frequently placed in foster homes contracted with Salt River Pima-Maricopa Indian Community Social Services (37%), followed by placements with relatives (34%), placements in Salt River Pima-Maricopa Indian Community foster homes (11%), placements with adoptive families pending adoption (11%) and placement with parents (7%). There were 10 off-reservation foster homes with 22 beds certified by Salt River Pima-Maricopa Indian Community Social Services in 2019. This increased slightly to 12 off-reservation homes with 23 beds in 2020.

ABOUT THIS REPORT

There is growing acknowledgement of the role our physical, social, and economic environments play in our day-to-day health and wellbeing.[26] These factors, known as the social determinants of health, have an especially strong effect on the development of young children ages birth to 5 and accumulate over time.[27, 28] Measuring and addressing these conditions can significantly impact not only early health and education outcomes, but also health and economic circumstances later in life.[29, 30, 31] It is important to acknowledge that structural inequities in access to quality health care, schools, and education as well as living, working and leisure conditions lead to disparate outcomes within and between groups of people.[32] For example, the U.S.'s history of segregation, discriminatory policy and differential investment across communities has created generational disparities in outcomes for people of color.[33] Native communities have additionally experienced periods of genocide, forced relocation and assimilation leading to systemically poorer economics and health compared with other groups.[34, 35] This Needs and Assets Report covers many structural and social determinants of health including population characteristics, economic characteristics, early learning and educational indicators, child health, and family support and literacy for the First Things First Salt River Pima-Maricopa Indian Community Region.

The data in this report come from a variety of sources including federal and state agencies and local agencies or service providers. Federal government sources include publicly available data from the 2020 Census and the 2017-2021 American Community Survey (ACS) 5-Year Estimates. Data in this report from the ACS summarize the responses from samples of residents taken between 2017 and 2021. Because these estimates are based on samples rather than the entire population, ACS data should not be considered exact. Estimates for smaller geographies, such as regions, are less accurate than estimates for larger geographies, such as the state, because they are based on smaller sample sizes. Additionally, reliable data for some small sub-populations, such as grandparents responsible for their grandchildren, are not available for some regions due to small sample sizes. In cases where data are not available due to sample size limitations, entries will be marked 'N/A' and explained with a table or figure note.

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

In most tables in this report, the top rows of data correspond to the FTF Salt River Pima-Maricopa Indian Community Region. Not all data are available at the FTF regional level because not all data sources analyze their data based on FTF regional boundaries. The other table rows present data that are useful for comparison purposes, including Maricopa County, the state of Arizona and national estimates or targets where available. Data tables and graphs are as complete as possible. Data which are not available for a particular geography are indicated by the abbreviation "N/A." State agencies have varying policies about reporting small values. Entries such as "<11" are used when the count is too small to be reported and has been suppressed to protect privacy. In some cases, table entries will indicate a range of values such as "1 to 9" because the suppression policy prevented the vendor from knowing the exact value, but comparison of these ranges of possible values to other values in the table or figure may still be useful. Table entries of "DS" indicate that data have been suppressed and we are unable to provide a useful range of possible values. Additional data tables not included in the body of the report can be found in *Appendix 1: Additional Data Tables.*

THE SALT RIVER PIMA-MARICOPA INDIAN COMMUNITY REGION

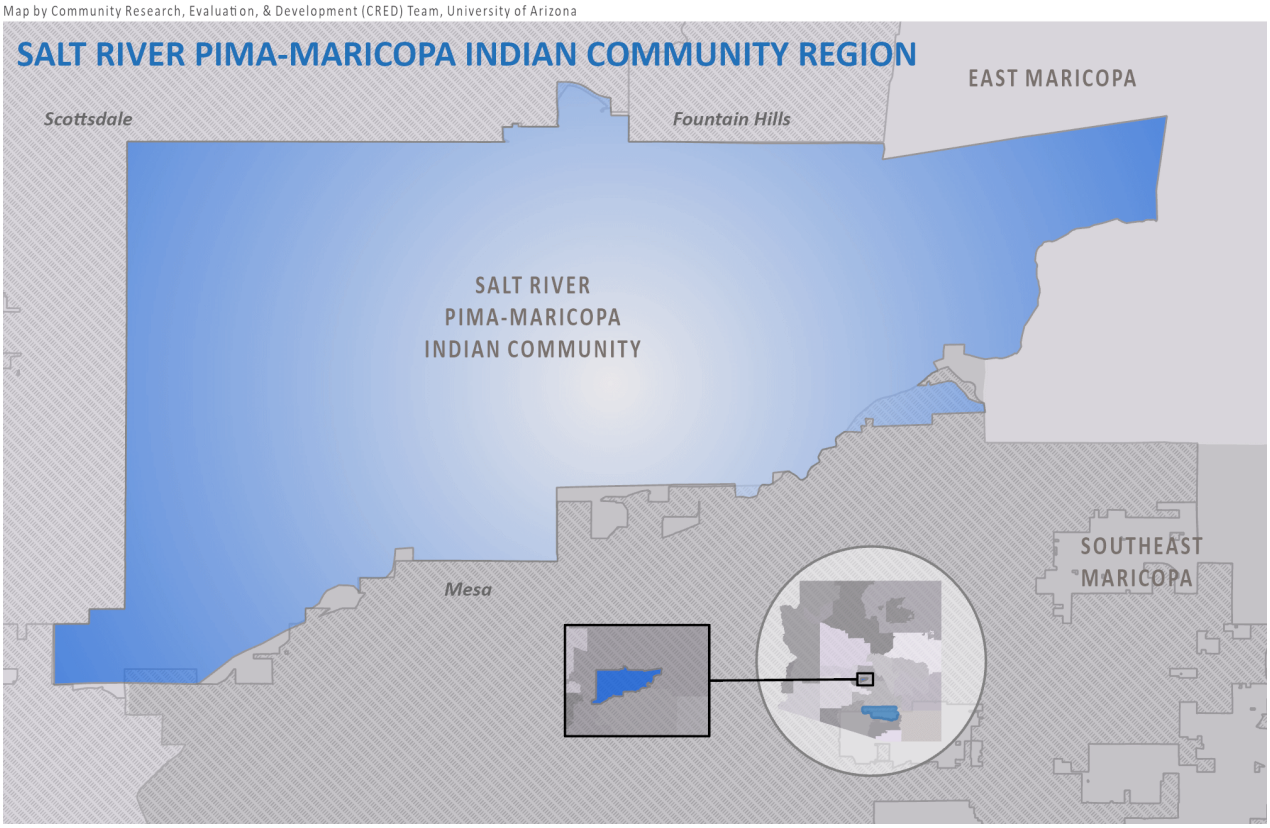
The First Things First regional boundaries were initially established in 2007, creating 31 regions which were designed to (a) reflect the view of families in terms of where they access services, (b) coincide with existing boundaries or service areas of organizations providing early childhood services,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

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

The Salt River Pima-Maricopa Indian Community is a sovereign tribe located in the metropolitan area of Phoenix, Arizona. The Community was established by Executive Order on June 14, 1879, and it consists of 52,600 acres bordering the cities of Scottsdale, Tempe, Mesa and Fountain Hills. The Salt River Pima-Maricopa Indian Community is home to the Pima (‘Akimel O’Odham,’ River People) and the Maricopa (‘Xalychidom Pipaash,’ People who live toward the water).

Geographically, the boundaries of the First Things First Salt River Pima-Maricopa Indian Community match those of the reservation (Figure 1).

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



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

POPULATION CHARACTERISTICS

POPULATION CHARACTERISTICS

Why It Matters

Accurate information about the number and characteristics of families allows policy makers and program providers to understand what resources are needed in their communities, including where services should be located and how to tailor offerings to the specific needs of those who are likely to use them.[36, 37, 38, 39] For example, identifying which communities have high numbers of families with young children can facilitate strategic investments in libraries, playgrounds, health care facilities, social services and educational systems, which can help families with young children thrive.[40, 41] Program and policy decisions that are informed by data on the composition of children's home and community environments help ensure more effective supports for families and have a greater chance to improve well-being, economic security and educational outcomes for children.

2020 Census data and its limitations

The release of 2020 Census data in 2023 provided updated information on the population of Arizona and the nation as a whole. However, the 2020 Census faced unprecedented challenges in conducting an accurate count of the population, the foremost of which included the COVID-19 pandemic and its related disruptions to institutions such as tribal and local governments, schools and health care facilities.[42, 43, 44, 45, 46] Overall, data quality reviews of the 2020 Census have concluded that the data are generally reliable and accurate for the overall population; however, specific groups that have been undercounted in the past were again undercounted, this time more severely.[47] Nationwide, American Indians living on reservations were estimated to be undercounted by 5.6% (compared to 4.9% in 2010), and Hispanic or Latino individuals were undercounted by an estimated 5.0% (compared with 1.5% in 2010). Young children birth to age 4 were also undercounted by 3-5% nationwide, meaning that as many as 1 in 20 young children birth to age 4 were missed by the Census.[48] These undercounts are important to keep in mind when using Census data, particularly data for young children and for communities with substantial American Indian and Hispanic or Latino populations. Undercounted communities risk receiving fewer resources for at least the next decade since the decennial census counts are the basis of many federal funding allocations.[49, 50]

What the Data Tell Us

Population, race and ethnicity

While young children make up a small proportion of the overall population, their well-being has 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.[51, 52]

Knowing the racial-ethnic composition of communities can inform efforts to ensure equitable access to services and resources. Many racial and ethnic minority groups in the U.S. experience reduced access to health care services, more poverty and housing inequality, poorer living conditions and increased rates of homelessness in comparison to non-Hispanic White Americans.[53, 54, 55, 56] In Native communities, these disparities have been shaped by decades of inequitable federal policies and underinvestment.[57] These inequities result in disproportionately worse overall health as indicated by higher rates of disease and illness, untreated mental and physical health conditions and lower life expectancies within these groups.[58] Understanding a community's racial-ethnic composition is also critical for identifying communities facing higher risks from environmental and public health hazards due to historic underinvestment and other factors—as the COVID-19 pandemic made woefully clear.[59]

How the Salt River Pima-Maricopa Indian Community Region is faring

- According to the 2020 U.S. Census, the total population of the Salt River Pima-Maricopa Indian Community Region was 6,321, of whom 521 were young children (birth to age 5). More than one in six (18%) of the 348 households in the region had one or more young children. The proportion of households with young children in the region was slightly lower than all Arizona reservations combined (20%), though higher than Maricopa County (14%) and Arizona (13%) (Table 1).
- According to the Census, between 2010 and 2020 the overall population of the Salt River Pima-Maricopa Indian Community Region increased by 1%, differing from the declining trend seen across all Arizona reservations (-3%). The population of young children (birth to age 5) decreased by 17% compared to the 26% decrease seen across all Arizona reservations (Table 2 & Figure 2).
- Given that, as previously mentioned in *2020 Census data and its limitations*, American Indians living on reservations and young children (birth to age 4) were specifically found to be substantially undercounted in the 2020 Census (5.6% and 3-5% nationally), tribal enrollment data is another important source for determining population counts in Native communities. Based on data from the Salt River Pima-Maricopa Indian Community Enrollment Office, in June 2022 the Salt River Pima-Maricopa Indian Community Tribe had a total enrollment of 10,890. This included 6,173 individuals living on-reservation, of whom 457 were young children (birth to age 5) (Table 3). According to the 2022 First Things First (FTF) Salt River Pima-Maricopa

Indian Community Regional Needs and Assets Report, robust data systems in the Community mean that data from the Enrollment Office are often more accurate, timely and reliable than estimates from the Census. However, enrollment data may underrepresent the number of young children in the Community, as families often wait to enroll children until they seek services.[60]

- Another way to understand potential undercounting of young children in the Salt River Pima-Maricopa Indian Community Region is to compare 2020 Census data to births by year. Census estimates of the population size of young children by age are lower than the count of births from their likely birth year, with 640 births occurring between 2015 and 2020 compared to 521 children birth to age 5 enumerated by the Census (Figure 3).
- A large majority of the population (82%) in the Salt River Pima-Maricopa Indian Community Region, including young children (94%), identified as American Indian. A notably larger proportion of the overall population and young children in the region identified as Hispanic or Latino (17% and 26%) compared to all Arizona reservations (6% and 8%) (Figure 4 & Figure 5).

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

Geography	Total population	Population (ages 0-5)	Total number of households	Number and percent of households with one or more children (ages 0-5)	
Salt River Pima-Maricopa Indian Community Region	**6,321**	**521**	**1,924**	**348**	**18%**
All Arizona Reservations	173,499	15,140	50,362	10,167	20%
Maricopa County	4,420,568	310,813	1,643,579	222,016	14%
Arizona	7,151,502	480,744	2,705,878	345,601	13%
United States	331,449,281	22,401,565	126,817,580	16,429,111	13%

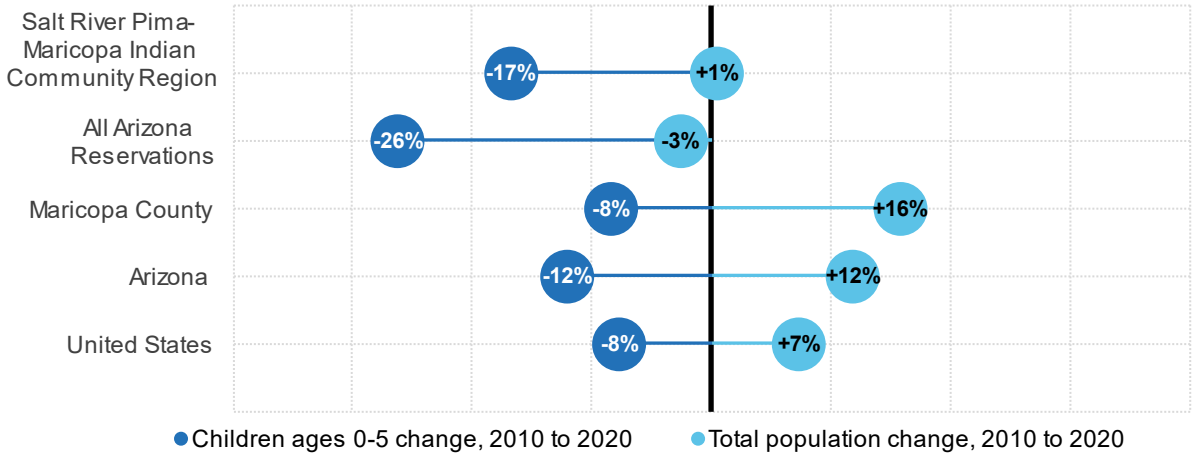
Source: U.S. Census Bureau. (2023). 2020 Decennial Census, Demographic & Housing Characteristics (DHC), Tables P1, P14, P20 & HCT3

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

Geography	Total population			Population (Ages 0-5)		
	2010	2020	% Change 2010 to 2020	2010	2020	% Change 2010 to 2020
Salt River Pima-Maricopa Indian Community Region	**6,289**	**6,321**	**1%**	**626**	**521**	**-17%**
All Arizona Reservations	178,131	173,499	-3%	20,511	15,140	-26%
Maricopa County	3,817,117	4,420,568	+16%	339,217	310,813	-8%
Arizona	6,392,017	7,151,502	+12%	546,609	480,744	-12%
United States	331,449,281	308,745,538	+7%	22,401,565	24,258,220	-8%

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

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



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

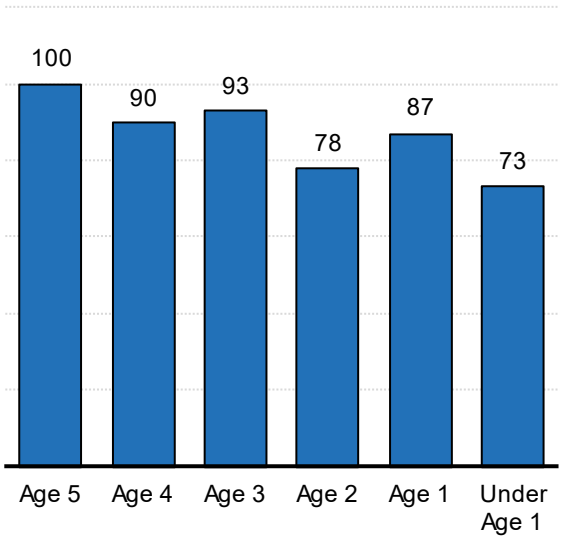
Table 3. Salt River Pima-Maricopa Indian Community Tribe Enrollment, June 2022

	Tribal Members On-Reservation	Tribal Members Off-Reservation	Total Tribal Members
Children ages 0-5	**457**	**299**	**756**
Under 1	23	12	35
Age 1	63	37	100
Age 2	68	52	120
Age 3	90	47	137
Age 4	97	64	161
Age 5	116	87	203
Ages 6 to 18	1,760	1,452	3,212
Ages 19 & older	3,956	2,965	6,921
Total Children (ages 0-18)	**2,217**	**1,751**	**3,968**
Total Population (all ages)	**6,173**	**4,716**	**10,890**

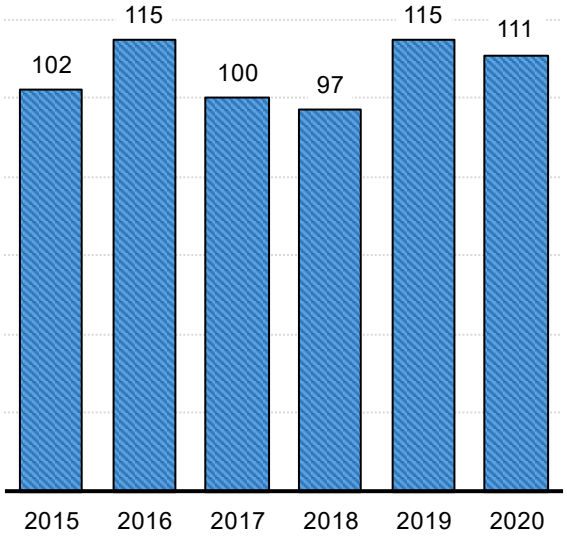
Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

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

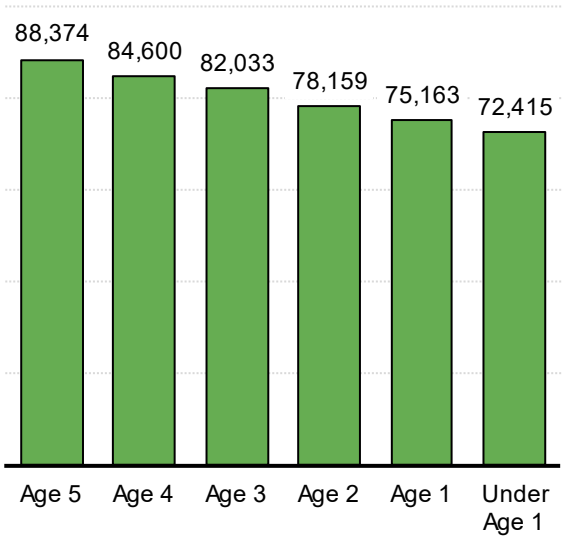
Children by age, Salt River Pima-Maricopa Indian Community Region



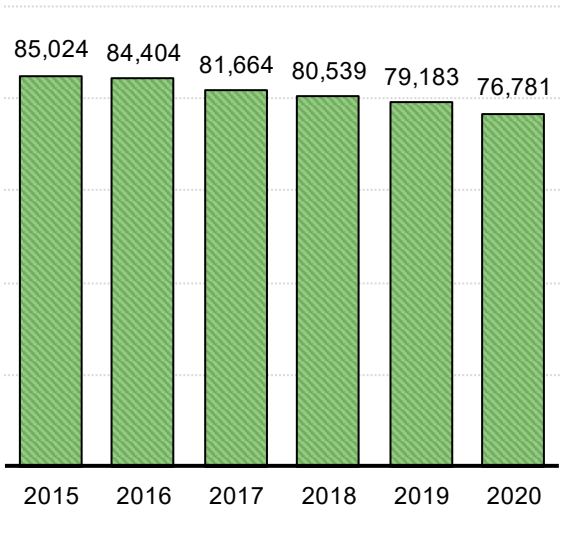
Births by year, Salt River Pima-Maricopa Indian Community Region



Children by age, Arizona



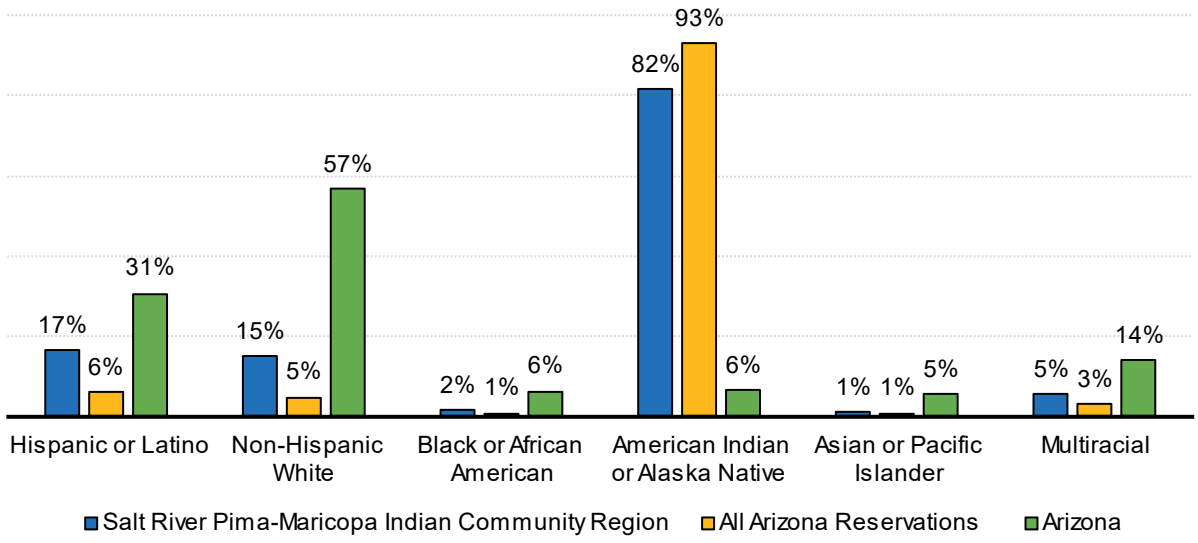
Births by year, Arizona



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

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

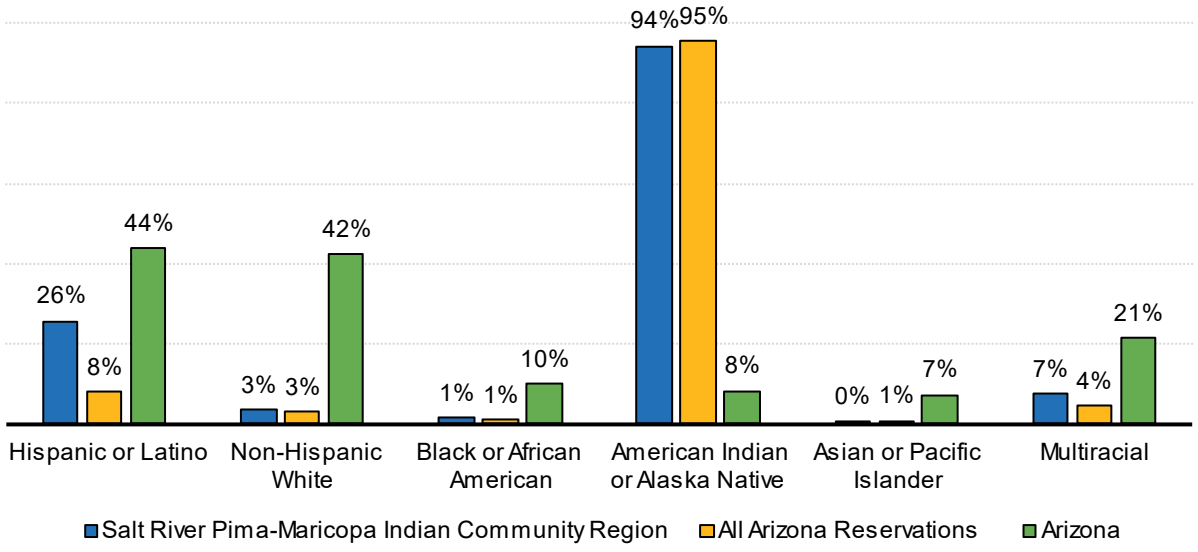
Figure 4. Race and ethnicity of the population of all ages, 2020 Census



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

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

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



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

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

Language use

Language provides an important connection to family, community and culture. Arizona is home to many sovereign tribal nations whose Native languages are a vital cultural strength. Language preservation and revitalization are critical to safeguarding traditional knowledge and promoting Indigenous self-determination, social unity and educational equity.[61, 62, 63] Unfortunately, the latest estimates for Native language use in Arizona from the American Community Survey point to a sharp decline in the number of speakers of native languages between 2019 and 2021. While the population of English-only speakers rose 0.3% between 2019 and 2021, the population of speakers of Native North American languages other than Navajo[iii] declined by an estimated 27% (from over 30,000 to about 22,500).[64] This decrease reflects the devastating losses that Native communities experienced during the COVID-19 pandemic.[65,66] These deaths, especially among Native elders, signify a loss of life and of traditional knowledge, cultural history and language.[67,68] Ongoing support for cultural preservation and language revitalization continues to be a critical need for Native communities in Arizona.

Mastery of more than one language is also an asset in school readiness and academic achievement and may offer cognitive and social-emotional benefits in early school experiences and across one's lifetime.[69, 70, 71, 72, 73] However, families with lower English proficiency may also face barriers to accessing information about health care and other services or engaging with their children's teachers. Children who do not yet have a full grasp of English may also experience difficulties in school, impeding their academic success and resulting in negative health outcomes.[74, 75] Knowing the languages spoken and level of English proficiency in a region can inform the development of resources and services in multiple languages, ensuring that they are accessible to all families.[76, 77]

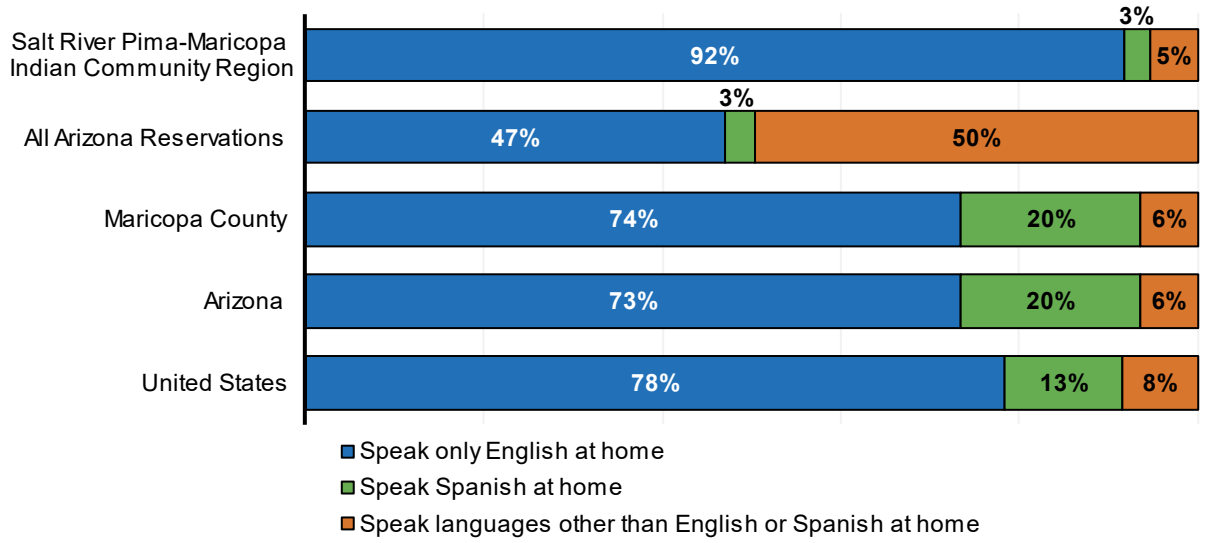
How the Salt River Pima-Maricopa Indian Community is faring

- Native language revitalization plays a critical role in cultural preservation and can support the cognitive and socio-emotional development of young children through exposure to multiple languages. According to the 2022 Needs and Assets Report, the Salt River Pia-Maricopa Community Schools Native Language and Culture Program has developed a language preservation curriculum which is taught at the Early Childhood Education Center (ECEC), Salt River Elementary School, Salt River Accelerated Learning Academy and programs offered through the Tribal O'odham Piipaash Language Program. The Salt River Pima-Maricopa Indian Community's Cultural Resources Department hosts monthly O'odham Elders and Speakers Revitalization Gatherings, which are attended by Education Native Language and Culture staff. Salt River Pima-Maricopa Community Schools has staff that speak both O'odham and Piipaash and incorporate both languages into the curriculum; they have also certified language teachers who speak O'odham and Piipaash to teach in the region's schools.[78]

[iii] The population of Navajo speakers declined by an estimated 13% (from over 90,000 to about 78,000) in Arizona between 2019 and 2021

- The vast majority (92%) of individuals in the Salt River Pima-Maricopa Indian Community Region speak only English at home, while the remainder speak Spanish (3%) or another language (5%), of which Native North American languages are the most common (Figure 6).
- Of those individuals speaking a language other than English at home, the majority also speak English very well, with 7% of the region proficiently bilingual or multilingual (Figure 7).
- In addition to those who are multilingual, about 1% of households in the Salt River Pima-Maricopa Indian Community Region are considered limited-English-speaking, meaning no one over the age of 13 speaks English very well. This is a smaller proportion than seen across all Arizona reservations (12%), but it indicates a potential need for bilingual or multilingual staff and resources to help support families whose first language is not English (Figure 8).[79]
- Very few students in the Salt River Pima-Maricopa Indian Community Region were English Language Learners; in both the 2020-21 and 2021-22 school years, fewer than 11 students were identified as English Language Learners at the Salt River Accelerated Learning Academy, while 8% of students in Mesa Public Schools that serve students from the region were English Language Learners in both years (Table 4).
- English Language Learners are identified through the Arizona Department of Education (ADE) Home Language Survey, which asks families what language is spoken at home most of the time or what a student's first language was. In the 2020-21 and 2021-22 school years, a total of 20 students in Mesa Public Schools that serve students from the Community were identified as living in households where a Native language is spoken (Table 5).

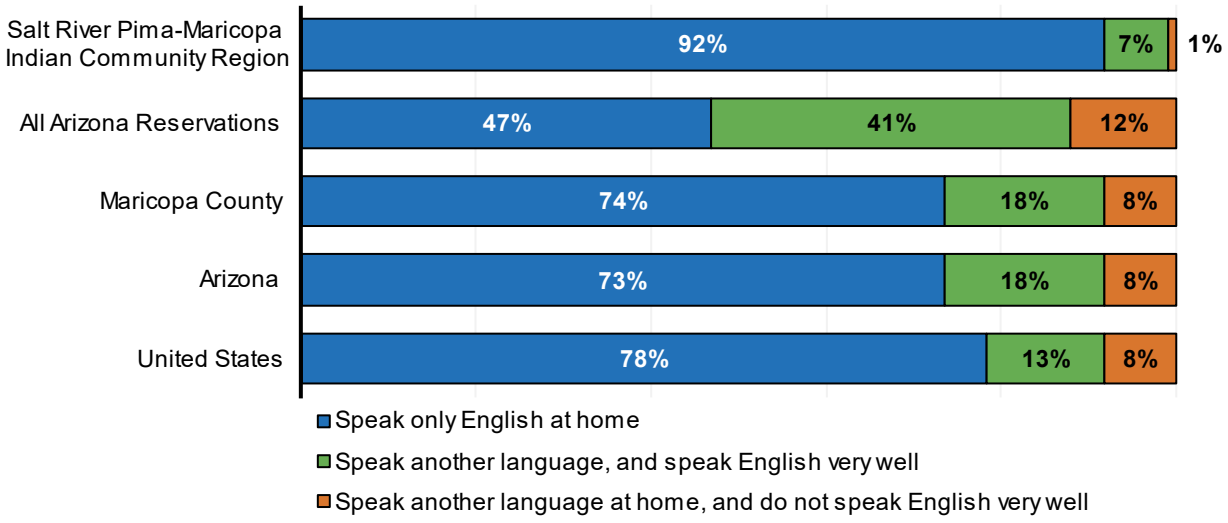
Figure 6. Language spoken at home (by persons ages 5 and older), 2017-2021 ACS



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

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

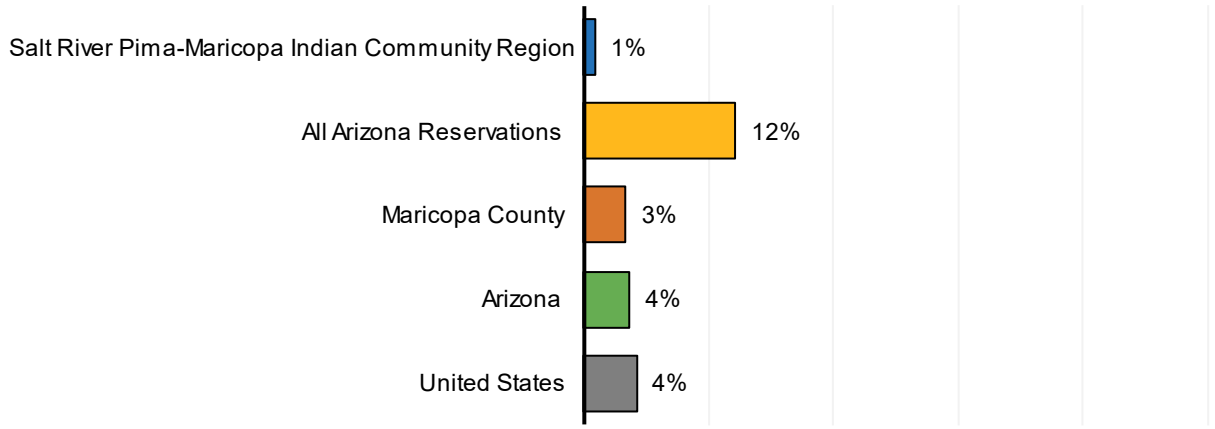
Figure 7. English-language proficiency (for persons ages 5 and older), 2017-2021 ACS



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

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

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



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

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

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

Geography	Number of PS-12 students who were English Language Learners		Percent of PS-12 students who were English Language Learners	
	2020-21	2021-22	2020-21	2021-22
Salt River Accelerated Learning Academy	<11	<11	<2%	<2%
Mesa Public Schools	895	970	8%	8%
Maricopa County	57,629	62,074	8%	8%
Arizona schools	86,405	91,881	8%	8%

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

Note: The 'Mesa Public Schools' row includes data from the following MPS Schools: Lehi Elementary, Whittier Elementary, Whitman Elementary, Ishikawa Elementary, Kerr Elementary, Carson Junior High, Stapley Junior High, Westwood High, and Mountain View High Schools. English Language Learners are students who do not score 'proficient' in the English language based on the Arizona English Language Learning Assessment (AZELLA) and thus are eligible for additional supportive services for English language acquisition. Legislation in Arizona requires children in Arizona public schools be taught in English, and English Language Learners to attend English immersion programs. Senate Bill 1014 passed in 2019, increased the flexibility districts have in structuring English Language Learners immersion programs, and lessened the duration required of this instruction. For more information see https://www.azed.gov/oelas/structured-english-immersion-models

Table 5. ADE Primary Home Language survey data, 2020-21 to 2021-22

Geography	Number of students in households where a Native language is spoken		Percent of students in households where a Native language is spoken	
	2020-21	2021-22	2020-21	2021-22
Mesa Public Schools	20	20	<2%	<2%
Maricopa County schools	*County data not available*			
Arizona schools	2,115	1,981	<2%	<2%

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

Notes: The Primary Home Language survey is completed by parents or caregivers of a student when they first enroll in school. The survey asks what language is spoken at home most of the time, what language the student speaks most of the time, and what language the student first spoke or understood. The 'Mesa Public Schools' row includes data from the following MPS Schools: Lehi Elementary, Whittier Elementary, Whitman Elementary, Ishikawa Elementary, Kerr Elementary, Carson Junior High, Stapley Junior High, Westwood High, and Mountain View High Schools. The most common Native language reported in Mesa Public Schools was the Navajo language.

Family and household composition

Young children in Arizona come from households with many potential compositions, each of which has possible implications for child development.[80, 81, 82] For example, families with two married parents tend to offer stability that promotes child well-being.[83, 84, 85] Single-parent households are common and can be linked to levels of poverty, access to health and education resources and the quality of a child's interactions with adult caregivers.[86, 87, 88, 89, 90, 91, 92] Multi-generational living, particularly arrangement where grandparents live in the home with children and parents, has long been practiced in some cultures and communities but is becoming increasingly common in U.S. families of all backgrounds.[93, 94, 95, 96] These living arrangements can offer financial and social benefits but also specific stressors, such as managing conflicts in parenting styles and family roles.[97, 98 ,99, 100, 101] It is also increasingly common for children to live in kinship care, defined as the care of children by someone other than their parents, such as relatives or close friends.[102, 103, 104] These kinship caregivers, especially grandparents who care for their grandchildren, can face unique challenges, including navigating the logistics of informal guardianship (e.g., difficulties in registering children for school), coping with parental absence and addressing the challenges of being an aging caregiver for a young child.[105, 106, 107, 108]

Though varying from one community to another, multigenerational households and kinship care are common in Native communities.[109, 110] The strengths associated with the extended family structure, including mutual help and respect, can provide family members with a network of support that can be valuable when dealing with socio-economic hardships.[111] Grandparents are often central to these households and care situations, in many cases sharing and strengthening Native language, history and culture.[112, 113]

How the Salt River Pima-Maricopa Indian Community Region is faring

- More than three-quarters (78%) of young children (birth to age 5) in the Salt River Pima-Maricopa Indian Community Region live in a household with one unmarried parent,[iv] a larger proportion than across all Arizona reservations (65%), Maricopa County (36%) and the state (37%). A much smaller proportion live with two married parents (10%). More than one in every 10 young children live with relatives other than parents (11%), such as grandparents, aunts and uncles, a higher percentage than seen across all Arizona reservations (Table 6). This suggests that kinship care is more prevalent in the region than elsewhere in the state.
- More than one in three young children (42%) in the region live in a grandparent's household, a smaller proportion than seen across all Arizona reservations (43%) but a higher proportion than Maricopa County (12%) and the state (13%) (Figure 9). Note that this includes both grandparents who are raising their grandchildren and those who live in multi-generational households where the child's parents are present.
- A smaller proportion of grandparents in the region are living with grandchildren (birth to age 17) without a parent also present in the household (7%) compared to all Arizona reservations (14%) (Figure 10). Taken together with Figure 9, this suggests that most children living in a grandparent's household are likely living in multi-generational households.
- According to ACS data, grandparents are considered responsible for their grandchildren if they are "currently responsible for most of the basic needs of any grandchildren under the age of 18" who live in the grandparent's household. An estimated 254 grandparents in the Salt River Pima-Maricopa Indian Community Region are living with and responsible for their grandchildren under 18 years old. In the majority of these households the parent is living in the household (90%), a much larger proportion than seen across all Arizona reservations (70%). The more than half of these grandparents are female (56%) and just one in five (20%) are in the labor force (Table 7).

[iv] *Note that due to the way the ACS asks about family relationships, children living with two unmarried, cohabitating parents are not counted as living with two parents (these children are counted in the 'one parent' category). New data from the 2020 Census (table P20) for children ages 0-17 shows that in the Salt River Pima-Maricopa Indian Community Region, 27% of the children living in households with an unmarried parent are actually living in cohabitating couple families where there are two parents present but they are not married. This means that for children of all ages living with their parents in 2020, 34% were living in households led by married parents, 41% were living in households led by an unmarried (and not cohabitating) mother, 18% were living in households led by cohabitating parents and 8% were living in households led by an unmarried (and not cohabitating) father.*

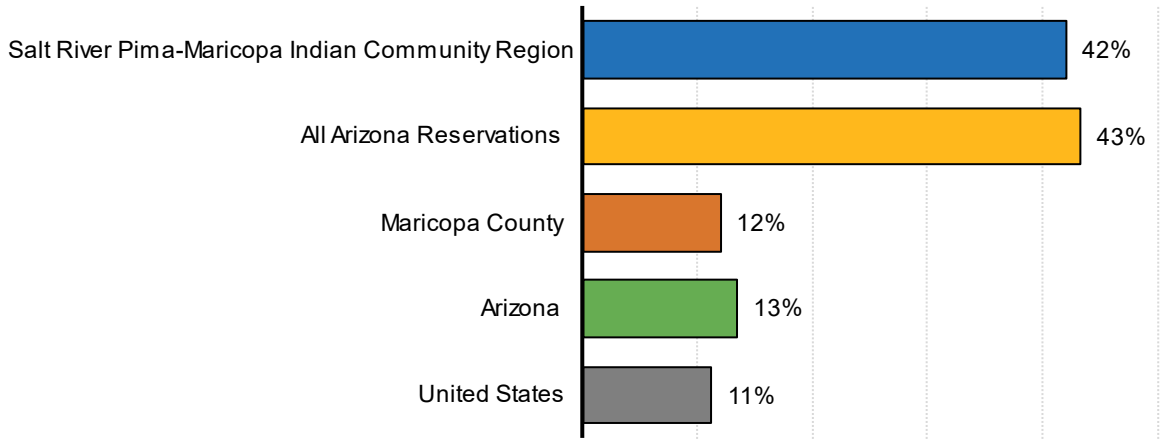
Table 6. Living arrangements for children birth to age 5, 2017-2021 ACS

Geography	Estimated number of children (birth to age 5) living in households	Living with two married parents	Living with one parent	Living not with parents but with other relatives	Living with non-relatives
Salt River Pima-Maricopa Indian Community Region	**592**	**10%**	**78%**	**11%**	**1%**
All Arizona Reservations	15,661	25%	65%	8%	2%
Maricopa County	320,211	60%	36%	2%	2%
Arizona	496,219	59%	37%	3%	2%
United States	23,353,556	64%	32%	2%	2%

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

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

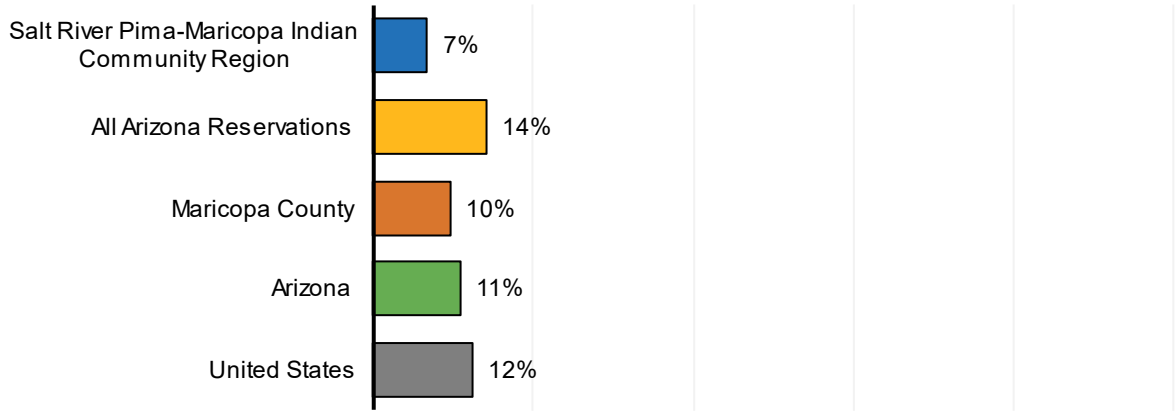
Figure 9. Grandchildren birth to age 5 living in a grandparent's household, 2020 Census



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

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

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



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

Table 7. Selected characteristics of grandparents who are responsible for one or more grandchildren under 18 in their households, 2017-2021 ACS

Geography	Estimated number of grandparents who live with and are responsible for grandchildren under 18 years old	Percent of these grandparents who: Do not have the child's parents in the household	Are 60 years old or older	Are female	Do not speak English very well	In labor force	Have an income below the poverty level
Salt River Pima-Maricopa Indian Community Region	**254**	**10%**	**44%**	**56%**	**N/A**	**20%**	**47%**
All Arizona Reservations	5,828	30%	49%	67%	18%	44%	36%
Maricopa County	29,827	32%	42%	63%	20%	61%	17%
Arizona	56,079	33%	45%	62%	21%	57%	21%
United States	2,319,443	38%	47%	63%	14%	56%	18%

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

Note: Grandparents are considered responsible for their grandchild or grandchildren if they are "currently responsible for most of the basic needs of any grandchildren under the age of 18" who live in the grandparent's household. Reliable estimates for poverty and language use for grandparents responsible for grandchildren were not available for the Salt River Pima-Maricopa Indian Tribe Region due to wide margins of error.

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

ECONOMIC CIRCUMSTANCES

ECONOMIC CIRCUMSTANCES

Why it Matters

A family's economic stability impacts children's well-being and predicts a variety of health outcomes.[114] Children who grow up in poverty and unstable economic conditions are more likely to face negative effects on their cognitive, behavioral, social and emotional development compared to those in stable economic environments.[115, 116, 117, 118, 119] The challenges they face may continue into adulthood, and such difficulties can be passed on to the next generation.[120, 121, 122] Poverty also affects children by straining parental well-being and parent-child interactions. Stressors related to poverty, like unemployment, food and housing insecurity and poor mental and physical health, make it difficult for caregivers to provide the necessary support for children's optimal development.[123] In light of these broad impacts, economic stability is a key social determinant of health and is included as a domain in the Healthy People 2030 Objectives.[v]

Economic circumstances in tribal communities have been shaped by a long history of inequitable policies and federal investment.[124, 125] The resulting economic disparity between Native and non-Native communities affects rates of employment, poverty, food security and housing stability. Especially since the passing of the Indian Self-Determination and Education Assistance Act in 1975, which gave tribes greater autonomy in administering federally-funded programs and services, tribal governments have invested in community and economic development opportunities such as health care, manufacturing, forestry, fisheries, gaming and resorts to strengthen the economic conditions of their people.[126]

What the Data Tell Us

Income and poverty

Poverty is associated with reduced access to nutrition, green space and health care and greater exposure to psychosocial stress and environmental toxins, factors that can both directly and indirectly hinder children's growth and brain development and their lifelong well-being.[127, 128, 129, 130, 131] Economic hardship is included in some definitions of adverse childhood experiences (ACEs), and children living in poverty experience other non-economic ACEs, such as parental divorce or separation, exposure to violence, parental incarceration and living with someone with mental illness or a substance use disorder, at higher rates than children in higher income households.[132, 133] Given the many negative effects of poverty on child development, programs that alleviate poverty through providing cash assistance or food, housing or health care assistance can improve child well-being.[134]

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[v] *For more information on the Economic Stability Healthy People 2030 Objectives please see https://health.gov/healthypeople/objectives-and-data/browse-objectives/economic-stability*

The Temporary Assistance for Needy Families Cash Assistance Program (TANF)[vi] provides temporary cash benefits and supportive services to children and families. Eligibility is based on citizenship or qualified resident status, Arizona residency and limits on resources and monthly income.[135] In recognition of tribal sovereignty, federally recognized tribes have the option to administer their own TANF programs.

How the Salt River Pima-Maricopa Indian Community is faring

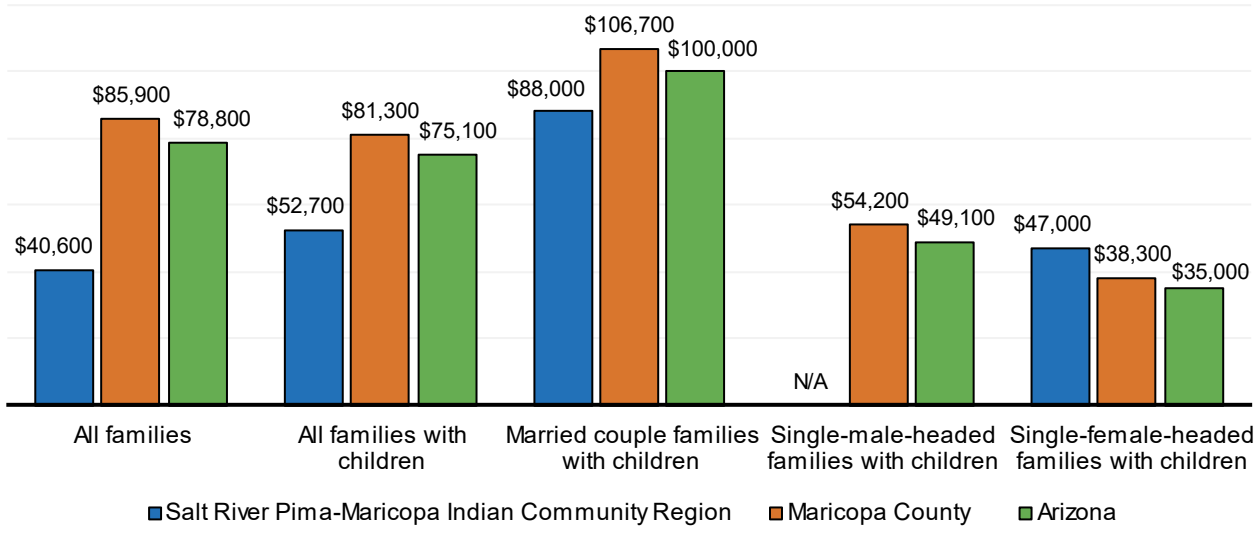
- Across all household types for which data are available, except for single-female-headed families with children, the median family income in the Salt River Pima-Maricopa Indian Community Region is lower than that seen at the county and state level. The median annual income for all families with children (birth to age 17) in the region is $52,700, compared to $81,300 in Maricopa County and $75,100 in Arizona. Married couple families with children in the region have the highest median annual income ($88,000) of all family types, which is below (but more closely aligns with) the median seen for married couple families in Maricopa County ($106,700) and the state ($100,000). Single-female-headed families with children have a higher median income in the region ($47,000) compared to the county ($38,300) and state ($35,000), a critical asset for the region given that the majority (78%) of young children in the region live in a single-parent household (Figure 11). However, this is still far below the self-sufficiency standard for a single parent with one infant and one preschooler in 2022 in Maricopa County ($74,608).[vii] Additionally, the average family size in the Salt River Pima-Maricopa Region is larger than that seen in Maricopa County; single-female-headed families contain an average of 3.8 people in the region compared to 3.2 in the county. This means that while median incomes may be higher in the region than the county, rates of poverty may also be higher as poverty calculations take into account the number of people in a household.
- One-third (33%) of the overall population and more than half (53%) of young children (birth to age 5) in the Salt River Pima-Maricopa Indian Community Region live in poverty, rates that are more than twice those seen in Arizona (13% and 20%, respectively) and the U.S. (13% and 18%) (Figure 12).
- According to American Community Survey five-year estimates, rates of poverty among young children in the Salt River Pima-Maricopa Indian Community Region have decreased notably (-13%) in recent years, from 66% in 2012-2016 to 53% in 2017-2021. This aligns with declining poverty rates seen among young children during this same time period across all Arizona reservations (-6%), Maricopa County (-8%), Arizona (-8%) and the U.S. (-6%) (Figure 13).

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

[vii] *For more information on the Arizona 2022 Self-sufficiency standard, please see https://womengiving.org/wp-content/uploads/2022/12/AZ2022_SSS_Web.pdf*

- The majority (75%) of young children in the Salt River Pima-Maricopa Indian Community Region live in households with incomes under 185% of the federal poverty level (FPL), a commonly used threshold for safety net benefits such as the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and reduced-price school meals. In 2021, the 185% FPL threshold for a family of two adults and two children was $50,836; for a single parent with one child, it was $34,552 (Figure 14).
- While the proportion of young children living below 185% FPL is similar between the region and all Arizona reservations (70%), a much larger proportion of young children in the region live in "deep poverty" (defined as below 50% FPL) (38%) compared to young children in all Arizona reservations (27%). The region also has higher rates of deep poverty than those seen at the county (7%), state (9%) and national levels (9%) (Figure 14).
- In the Salt River Pima-Maricopa Indian Community Region, the TANF program is managed by the tribe through the Life Enhancement and Resource Network (LEARN). According to the 2022 First Things First (FTF) Salt River Pima-Maricopa Indian Community Regional Needs and Assets Report, LEARN provides many services to its clients in addition to cash benefits, including Fatherhood and Motherhood programs, life enhancement skill classes and a computer lab.[136]
- Since state fiscal year (SFY) 2018, participation of young children and households with young children in LEARN has declined notably (Figure 15).
- In SFY 2022, 4% of households with young children (birth to age 5) and 4% of young children in the region participated in LEARN. These participation rates are slightly higher than TANF participation rates seen at the county (both 2%) and state level (both 3%), meaning a larger proportion of families with young children experiencing poverty in the region accessed needed financial assistance (Table 8 & Table 9).

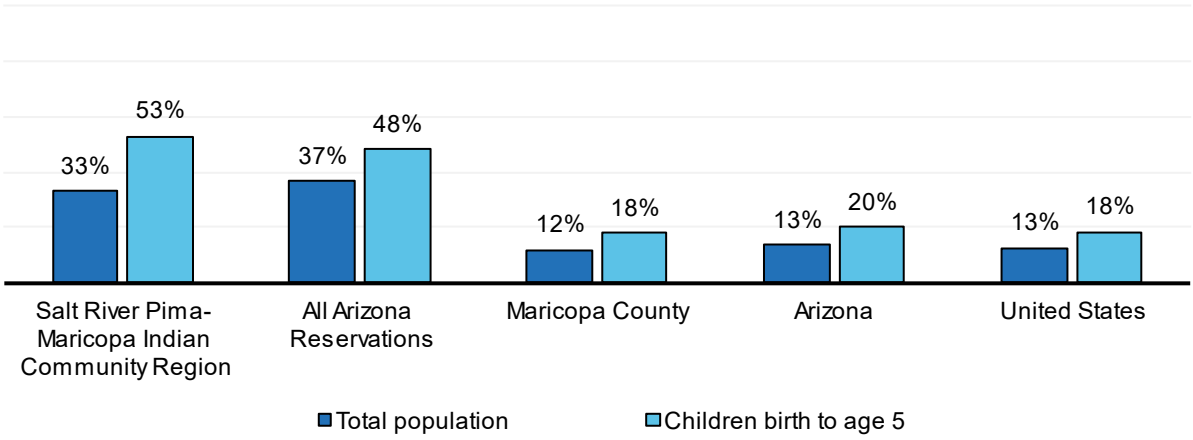
Figure 11. Median family income for families with children birth to age 17, 2017-2021 ACS



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

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

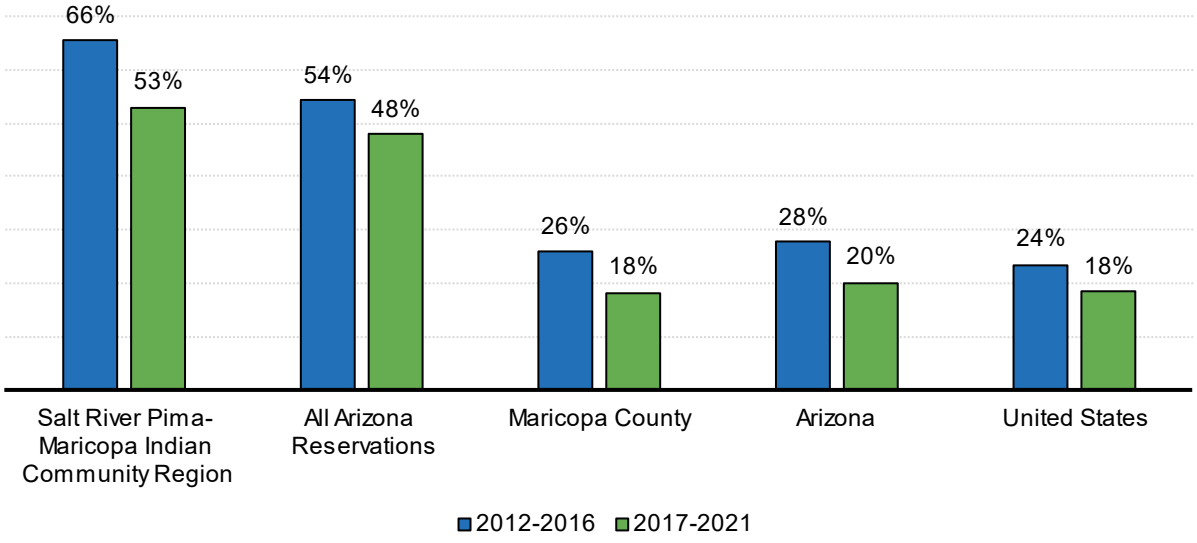
Figure 12. Rates of poverty for persons of all ages and for children birth to age 5, 2017-2021 ACS



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

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

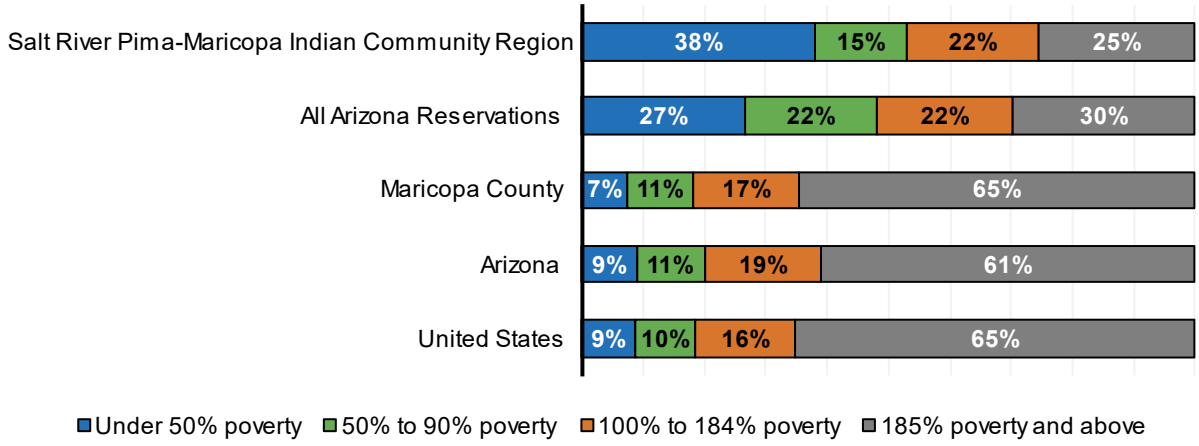
Figure 13. Rates of poverty for children birth to age 5, 2012-2016 and 2017-2021 ACS



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

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

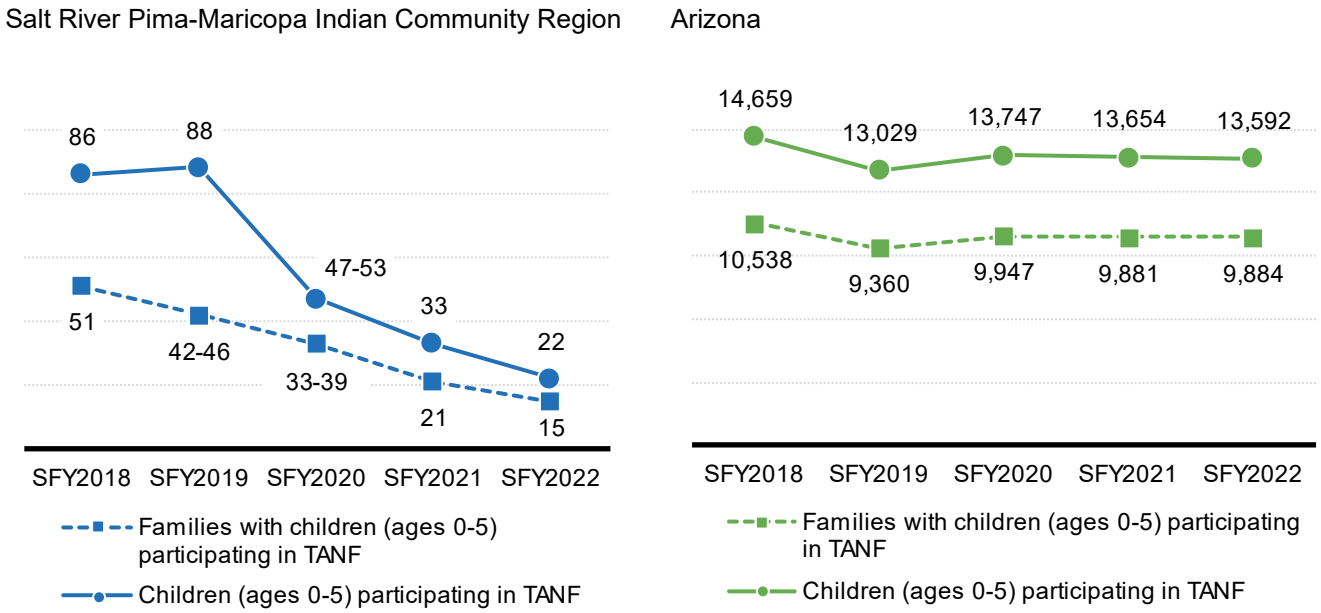
Figure 14. Children birth to age 5 living at selected poverty thresholds, 2017-2021 ACS



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

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

Figure 15. Number of children birth to age 5 and households with children birth to age 5 participating in LEARN, state fiscal years 2018 to 2022



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

Note: A range is provided when the true number is not known due to data suppression of a value between 1 and 9. The actual number of families receiving TANF is somewhere within that range.

Table 8. Families with children birth to age 5 participating in LEARN, state fiscal years 2018 to 2022

Geography	Number of households with one or more children (ages 0-5)	Number of families with children (ages 0-5) participating in TANF					Percent of households with young children (ages 0-5) participating in LEARN in SFY 2022
		SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	
Salt River Pima-Maricopa Indian Community Region	**348**	**51**	**42 to 46**	**33 to 39**	**21**	**15**	**4%**
Maricopa County	222,016	5,745	5,063	5,300	5,207	5,304	2%
Arizona	345,601	10,538	9,360	9,947	9,881	9,884	3%

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

Note: A range is provided when the true number is not known due to data suppression of a value between 1 and 9. The actual number of families receiving TANF is somewhere within that range.

Table 9. Children birth to age 5 participating in LEARN, state fiscal years 2018 to 2022

Geography	Number of young children (ages 0-5) in the population	Number of young children (ages 0-5) participating in TANF					Percent of young children (ages 0-5) participating in LEARN in SFY 2022
		SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	
Salt River Pima-Maricopa Indian Community	**521**	**86**	**88**	**47 to 53**	**33**	**22**	**4%**
Maricopa County	310,813	8,017	7,103	7,452	7,338	7,395	2%
Arizona	480,744	14,659	13,029	13,747	13,654	13,592	3%

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

Food security

Many families struggle with consistent access to "enough food for an active, healthy life," a problem known as food insecurity.[137] Food insecurity is linked with many aspects of child and parent well-being; it can be a major source of stress for parents and has been linked to health and behavioral problems for children, such as poorer parent-child attachment, decreased social skills and self-control and increased risk of depression.[138, 139, 140, 141, 142, 143]

The Supplemental Nutrition Assistance Program (SNAP; also referred to as "nutrition assistance" and "food stamps"),[viii] is administered by the Arizona Department of Economic Security and aims to support working families who are unable to afford the food necessary to sustain their health with their income alone. Nationally, about 1 in every 5 children participates in SNAP, and families on average receive a benefit of up to $2.61 per person for each meal.[144] The SNAP program has been shown to reduce hunger and improve access to healthy food options among those who utilize it.[145]

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC)[ix] is a federally funded program aimed to support economically disadvantaged women who are pregnant, postpartum, and/or breastfeeding, along with infants and young children. The program's services include directing participants to health services, nutrition and breastfeeding education and supplemental funding for food. In Arizona, WIC provided an average monthly benefit of $42 per month in 2022, lower than the national average of $48 per month.[146] The WIC program is administered in the state of Arizona by the Arizona Department of Health Services (ADHS) as well as the Inter Tribal Council of Arizona (ITCA) for 20 tribal nations in the state.

School meals provide another important nutritional safety net for children and their families. The National School Lunch Program (NSLP), administered by the Arizona Department of Education (ADE) and funded by the United States Department of Agriculture (USDA), provides meals for students of low-income families at a reduced price. The Summer Food Service Program (SFSP)[x], also funded by the USDA and administered by ADE, works to keep all children birth to age 18 fed when school is out of session by providing free meals (breakfast, lunch, supper) and snacks at community sites. SFSP unites community sponsors like camps, faith-based organizations and schools with sites like parks, libraries, community centers and apartment complexes in high-need areas to distribute food.[147] In March 2020, in response to school closures due to the COVID-19 pandemic, the USDA issued waivers allowing year-round operation of the (SFSP) to serve meals to children of all ages engaging in remote learning; these waivers remained in effect through June 2022 and led to increased meal service through SFSP compared to NSLP for many schools.[148] The Child and Adult Care Food Program (CACFP),[xi] also funded by the USDA, gives reimbursements to participating child care centers, preschools, emergency centers and after-school programs for nutritious meals and snacks served to eligible children. Eligible providers include for-profit child care centers serving at least 25% free or reduced-price lunch participants or any non-profit program.[149]

How the Salt River Pima-Maricopa Indian Community Region is faring

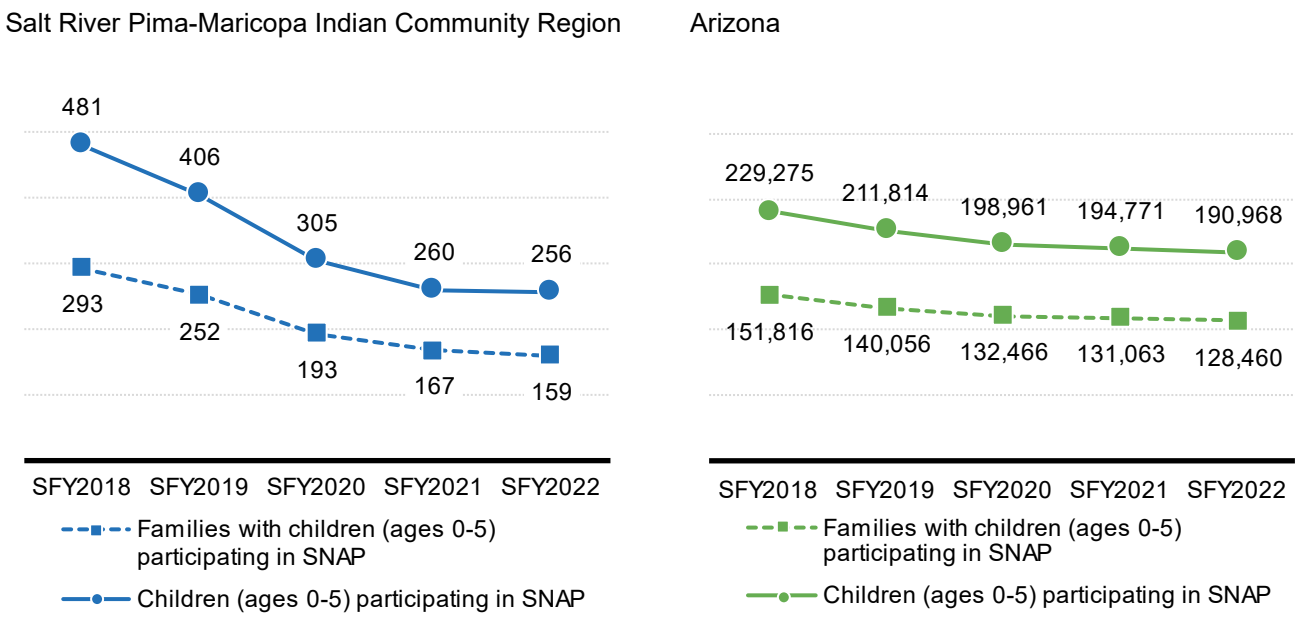
- Since state fiscal year 2018 (SFY 2018), SNAP participation among young children (birth to age 5) and families with young children in the Salt River Pima-Maricopa Indian Community Region has

[viii] *For more information see: https://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program and https://des.az.gov/na.*
[ix] *For more information see: https://www.fns.usda.gov/wic and https://www.azdhs.gov/prevention/azwic/*
[x] *For more information see: https://www.azed.gov/hns/sfsp*
[xi] *For more information see: https://www.azed.gov/hns/cacfp*

consistently declined each year. In SFY 2022, 256 young children and 159 families with young children in the region participated in SNAP (Figure 16).

- The Salt River Pima-Maricopa Indian Community WIC program is administered by the Inter Tribal Council of Arizona. In 2020, a total of 795 individuals in the region were enrolled in the program, including 215 women (27%), 238 infants (30%) and 342 children (ages 1-4; 43%). These proportions are relatively similar to those seen across all ITCA WIC programs, with children also making up the more than half of those enrolled (6,247; 51%) (Table 10).
- From 2017 to 2020, the number of children (birth to age 4) enrolled in WIC in the region showed similar declines to those seen across all ITCA WIC programs, from 772 children enrolled in 2017 to 580 in 2020 (Figure 17).
- WIC participation rates were high in the region in 2022, with 92% of women, 95% of children, and 98% of infants enrolled in the program receiving benefits that year (Figure 18).
- Due to transitions to remote learning in response to the COVID-19 pandemic, the number of meals served through the NSLP dropped in 2020-21 as Salt River Schools pivoted to new meal delivery modalities through the SFSP, which allowed them to serve children up to age 18 and receive more reimbursement per meal.[150] Additionally, Salt River High School closed in June 2020, which also contributed to this decline. NSLP meal service increased in the 2021-22 school year to 48,758 meals, but this was still under half of the meals served prior to the onset of the COVID-19 pandemic (110,040 in 2019-20). In total, more than 150,000 lunches were served through both programs in the 2021-22 school year (Figure 16).

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



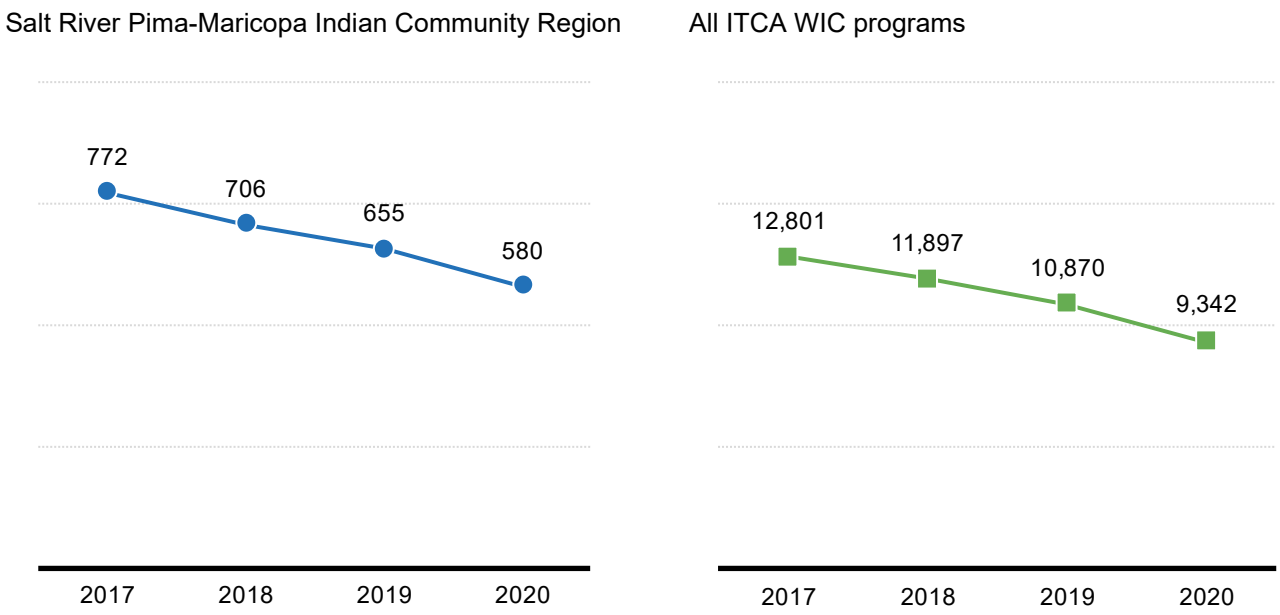
Sources: Arizona Department of Economic Security (2023). [Division of Benefits and Medical Eligibility dataset]. Unpublished data.

Table 10. Enrollment in the Salt River Pima-Maricopa Indian Community WIC program, 2020

Geography	Women Enrolled	Infants Enrolled	Children Enrolled	Total Enrolled
Salt River Pima-Maricopa Indian Community	215	238	342	795
All ITCA WIC programs	2,865	3,095	6,247	12,207

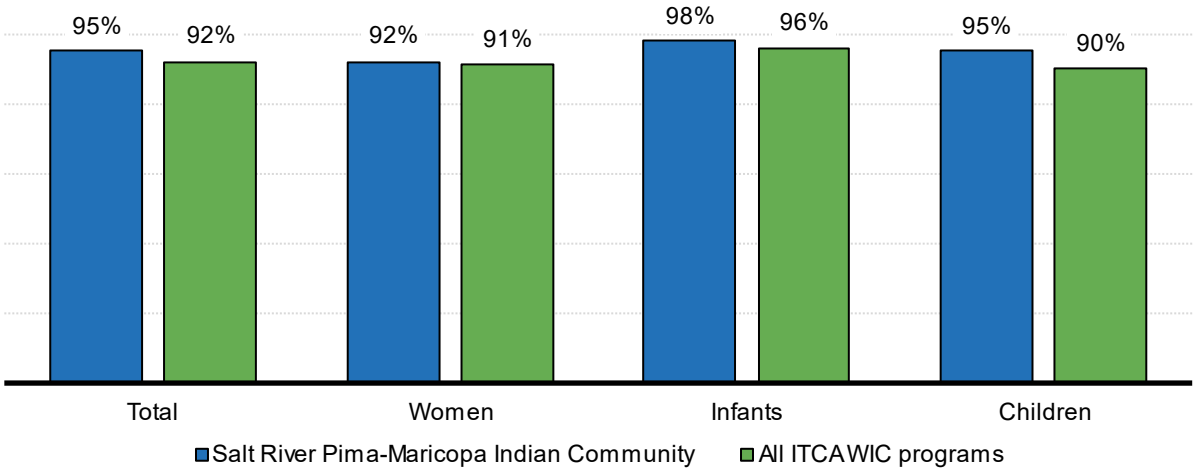
Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Figure 17. Number of children birth to age 4 enrolled in the Salt River Pima-Maricopa Indian Community WIC program, 2017 to 2020



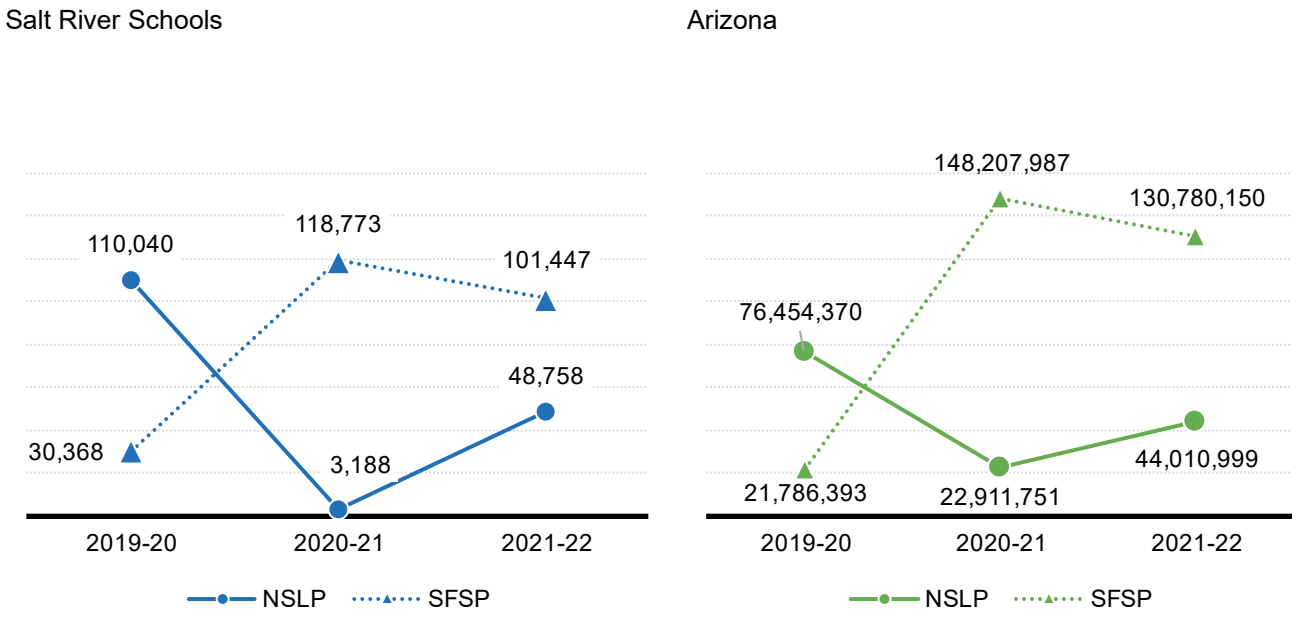
Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Figure 18. Participation rates in the Salt River Pima-Maricopa Indian Community WIC program, 2020



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Figure 19. Trends in lunches served through school nutrition programs, 2019-20 to 2021-22



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

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

Table 11. Lunches served through SFSP and NSLP, 2019-20 to 2021-22

	NSLP Lunches			SFSP Lunches		
Geography	2019-20	2020-21	2021-22	2019-20	2020-21	2021-22
Salt River Schools	**110,040**	**3,188**	**48,758**	**30,368**	**118,773**	**101,447**
Early Childhood Education Center	N/A	3,137	25,866	6,065	102,647	48,043
Salt River Elementary School	77,283	51	21,165	N/A	9,459	38,861
Salt River Accelerated Learning Academy	5,844	N/A	1,727	N/A	2,938	5,105
Salt River High School	26,913	N/A	N/A	22,503	N/A	N/A
Red Mountain Boys & Girls Club (WoLF)	*Not eligible for NSLP*			1,800	3,729	9,438
Maricopa County Schools	49,441,468	15,908,270	29,134,220	13,424,406	97,788,366	85,738,489
Arizona Schools	76,454,370	22,911,751	44,010,999	21,786,393	148,207,987	130,780,150

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

Notes: Salt River High School closed in 2020, and the Early Childhood Education Center did not participate in NSLP prior to the 2020-21 school year.

Employment

Unemployment and underemployment[xii] can impact families in ways that affect children's health and well-being.[151] 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.[152, 153] Children with parents who have lost their jobs may also experience poorer school performance and behavioral issues, resulting in grade repetition, suspension or expulsion.[154] Due to many historical and legal reasons as well as differences in practical economic structures, employment rates in Native communities can vary greatly from state rates.[155]

Education and employment support programs for parents and caregivers are important for increasing wages and improving the economic stability of families. "Two-generation" or "2Gen" approaches address the needs of both parents and children simultaneously through programs to support children and families together, such as a family literacy program that provides educational support to parents while enrolling children in free high-quality preschool.[156, 157, 158] These programs have the goal of decreasing the intergenerational effects of poverty by building parental capacity and protective factors within families.[159, 160, 161]

How the Salt River Pima-Maricopa Indian Community Region is faring

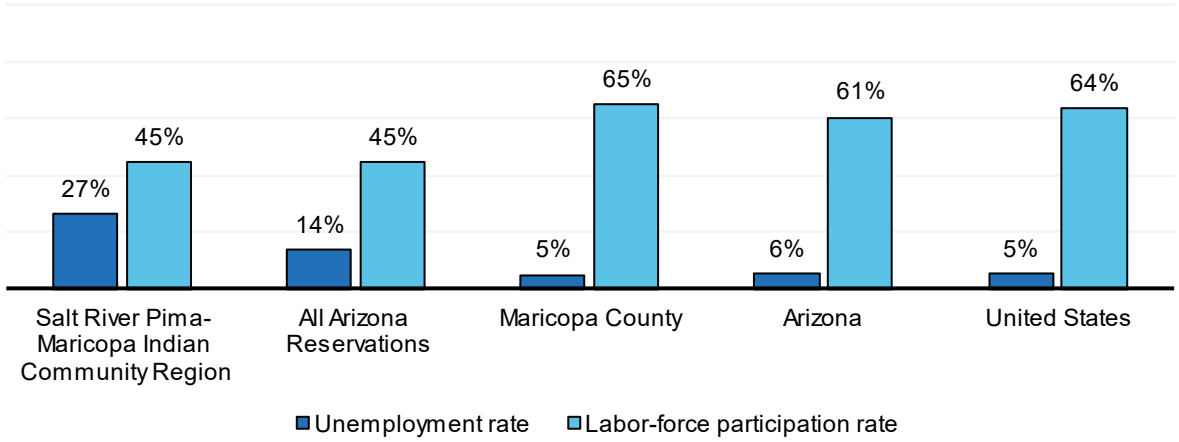
- The unemployment rate is the proportion of the total number of people in the civilian labor force who are unemployed and looking for work. Unemployment rates do not include people who have dropped out of the labor force entirely, including those who wanted to work but could not find a suitable job and have stopped looking for employment.[162] The ACS estimates that the average unemployment rate for the Salt River Pima-Maricopa Indian Community Region over the five years from 2017 to 2021 was 27%. This is well above the unemployment rate for all Arizona reservations (14%), as well as Maricopa County (5%), Arizona (6%) and the U.S. (5%) (Figure 20 & Table 12).
- An additional metric of employment is the labor-force participation rate. This rate is the fraction of the population who are in the labor force, whether employed or unemployed. The labor force participation rate in the region (45%) mirrors all Arizona reservations (45%), though it is notably below Maricopa County (65%). This means that just under half of working-age teens and adults in the Salt River Pima-Maricopa Indian Community Region are working (33%) or actively looking for work (12%), while the other half are not (which includes students, retirees, stay-at-home parents and others) (Figure 20 & Table 12).
- While unemployment rates showed a steadily declining trend nationwide since the end of the Great Recession in 2009, this pattern changed in 2020 with the onset of the COVID-19 pandemic. In recent years, unemployment rates for Maricopa County remained consistently

[xii] *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.*

below those seen statewide, peaking at 7.3% in 2020 compared to 7.8% statewide. By 2022, unemployment rates decreased to below pre-pandemic levels, dropping to 3.3% in Maricopa County (Figure 21).

- Seventy percent of young children (birth to age 5) in the Salt River Pima-Maricopa Indian Community Region live in a household where at least one parent is in the labor force, compared to 65% of young children across all Arizona reservations and 92% of young children in Maricopa County. More than half (59%) of young children in the region live in a single-parent household where that parent is in the labor force, meaning they will likely require some form of child care (Figure 22).

Figure 20. Unemployment and labor-force participation for the adult population (ages 16 and older), 2017-2021 ACS



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

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

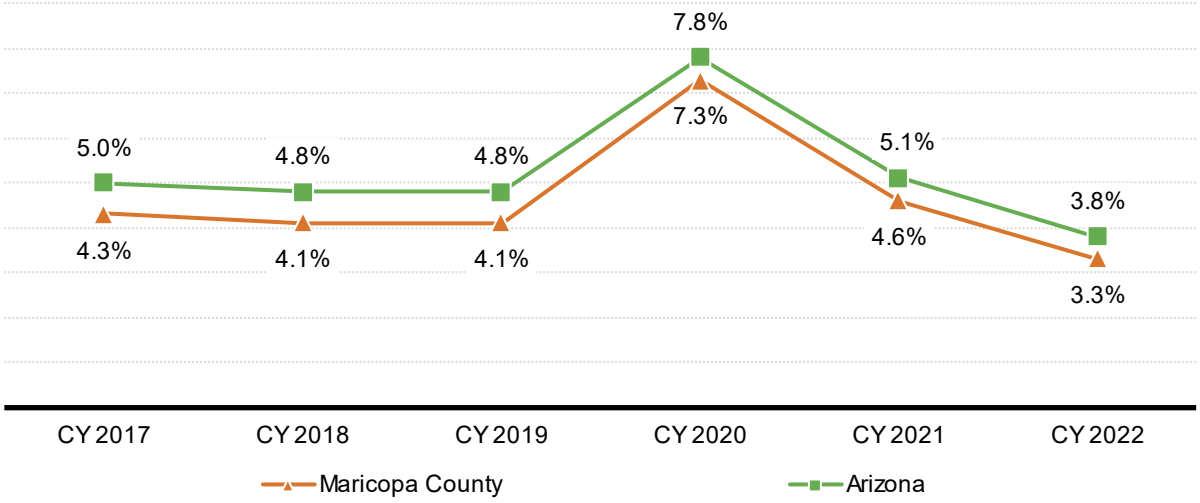
Table 12. Unemployment and labor-force participation for the adult population (ages 16 and older), 2017-2021 ACS

Geography	Estimated working-age population (age 16 and older)	Unemployment rate	Labor-force participation rate	In the labor force and employed	In the labor force but unemployed	In armed forces	Not in the labor force
Salt River Pima-Maricopa Indian Community Region	**5,470**	**27%**	**45%**	**33%**	**12%**	**0.0%**	**55%**
All Arizona Reservations	132,731	14%	45%	39%	6%	0.0%	55%
Maricopa County	3,450,881	5%	65%	62%	3%	0.2%	35%
Arizona	5,650,624	6%	61%	57%	3%	0.4%	39%
United States	264,087,642	5%	64%	60%	3%	0.5%	36%

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

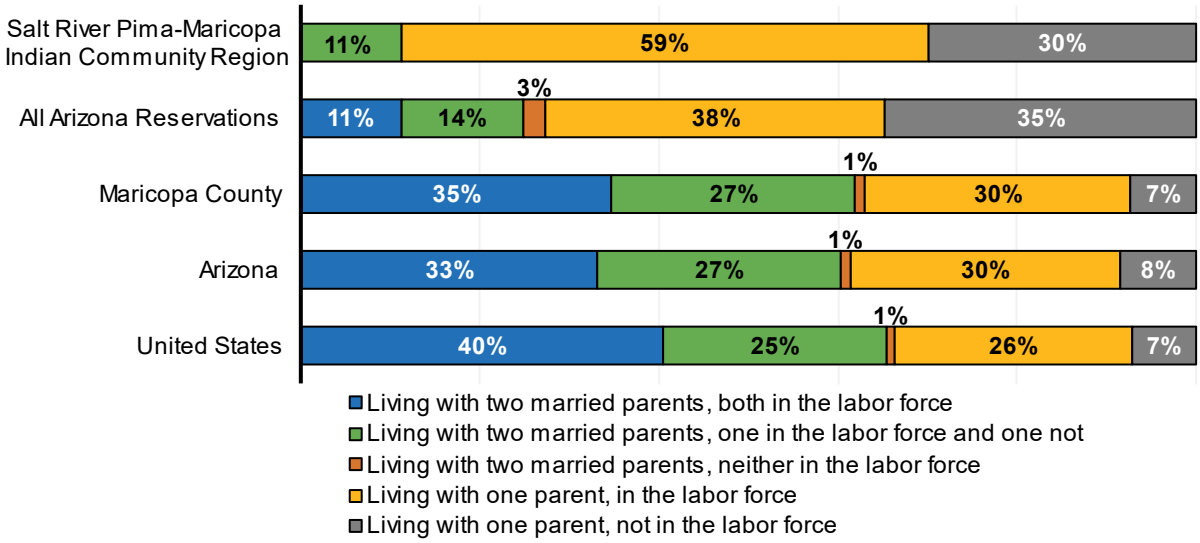
Note: The labor force is all persons who are working (employed) or looking for work (unemployed). Persons not in the labor force are mostly students, stay-at-home parents, retirees, and institutionalized people. The "labor force participation rate" is the fraction of the population who are in the labor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

Figure 21. Average annual unemployment rates (not seasonally adjusted), 2017 to 2022



Source: Arizona Commerce Authority (2023), Office of Economic Opportunity, Local Area Unemployment Survey (LAUS)

Figure 22. Parents of children birth to age 5 who are or are not in the labor force, 2017-2021 ACS



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

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

Housing instability and internet access

Housing instability can have harmful effects on the development of young children. High housing costs relative to family income are associated with increased risk for overcrowding, frequent moving, poor nutrition, declines in mental health and homelessness.[163, 164, 165] High relative housing costs leave inadequate funds for other necessities, such as food and utilities.[166] This can negatively affect the physical, social-emotional and cognitive development of children, with severe forms of housing instability associated with poorer performance in school.[167, 168]

In Native nations, land- and homeownership differs legally from other parts of the state. Native nations have experienced periods of forced relocation and assimilation as well as complex and changing policies of land ownership that have significantly reduced the total amount of land under tribal governance as well as the resources on these lands.[169] Tribal housing authorities have worked to build affordable housing options for their people, however housing availability is typically limited by funding and other critical infrastructure issues.[170] The most common housing challenges on tribal lands include overcrowding and physical housing problems such as insufficient kitchen, plumbing, electrical, heating and cooling utilities.[171] A nationwide study found that Native households are 19 times more likely to lack indoor plumbing than White households, meaning that access to safe and reliable drinking water is a major concern for many families.[172]

Another increasingly important utility in homes is reliable internet access. Access to broadband (high-speed) internet enables quick access to a far greater number of resources and information, telehealth options and other opportunities that can be critical for education and employment. Internet access has been deemed a "super determinant" of health because of its influence on more traditional social determinants of health such as education, employment, health care access and social connection.[173] Household access to computers and high-speed internet is also important for school-aged children who may need this technology for school assignments and projects, particularly during the later years of primary education and beyond.[174] Lack of access to reliable high-speed internet disproportionately occurs in rural areas and pockets of segregated urban areas, and this disparate access is known as the digital divide. Due to the importance of high-speed internet access, the federal government has instituted several funding initiatives to improve access to and affordability of high-speed internet, including for Native communities in particular, such as the Tribal Broadband Connectivity Project.[xiii, 175]

How the Salt River Pima-Maricopa Indian Community Region is faring

- According to the 2022 Needs and Assets report, the Salt River Pima-Maricopa Indian Community Resident Resources and Services department manages six housing developments and properties through the low-income housing program. Families who urgently need housing are referred outside the Community for emergency shelter. Key informants in the 2022 report indicated that there is not a sufficient supply of housing for all families who want to live in the

[xiii] *For more information, please see https://internetforall.gov/program/digital-equity-act-programs and https://www.ntia.gov/page/tribal-broadband-connectivity-program*

Community, and off-reservation housing in metropolitan Phoenix is much more expensive. Because of this shortage and high housing costs outside the Community, many families live 'doubled-up,' with multiple or extended families sharing the same house.[176]

- Traditionally, housing has been deemed affordable for families if it costs less than 30% of annual household income.[177] According to recent ACS estimates, almost one-third (31%) of households in the Salt River Pima-Maricopa Indian Community Region spent more than 30% of their income on housing, impacting a slightly larger proportion of homeowners (33%) than renters (26%) in the region. Housing cost burden is similar in the region compared to Maricopa County (30%) and the state (29%), though notably higher than all Arizona reservations (13%) (Table 13).
- Eighty-three percent of households in the Salt River Pima-Maricopa Indian Community Region have both a computer (i.e., a desktop, laptop, tablet or smartphone) and broadband internet connectivity. While this proportion is lower than Maricopa County (90%) and Arizona (88%), it is notably higher than seen across all Arizona reservations (44%) (Table 14).
- At the individual level, 85% of individuals in the Salt River Pima-Maricopa Indian Community Region, including 95% of children (birth to age 17), have access to both a computer and internet in their household. This is a slightly larger proportion of children with access than Maricopa County (93%) and the state (92%), and notably higher than seen across all Arizona reservations (51%) (Figure 23 & Figure 24).

Table 13. Households with housing costs of 30% or more of household income by home ownership status, 2017-2021 ACS

Geography	Estimated number of households	Housing costs 30 percent or more of household income	Estimated number of owner-occupied housing units	Housing costs 30 percent or more of household income	Estimated number of renter-occupied housing units	Housing costs 30 percent or more of household income
Salt River Pima-Maricopa Indian Community Region	**2,417**	**31%**	**2,003**	**33%**	**414**	**26%**
All Arizona Reservations	52,248	13%	35,840	12%	16,408	16%
Maricopa County	1,632,151	30%	1,041,572	21%	590,579	46%
Arizona	2,683,557	29%	1,765,658	21%	917,899	45%
United States	124,010,992	30%	80,152,161	22%	43,858,831	46%

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

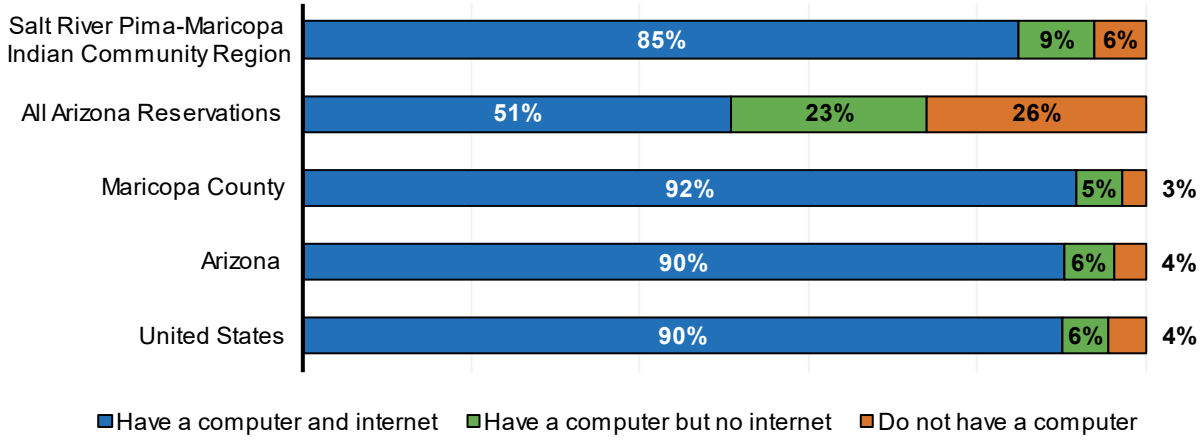
Table 14. Households with a computer and broadband internet connectivity, 2017-2021 ACS

Geography	Estimated number of households	Number and percent of households with a computer and broadband internet connectivity	
Salt River Pima-Maricopa Indian Community Region	**2,417**	**2,009**	**83%**
All Arizona Reservations	52,248	22,993	44%
Maricopa County	1,632,151	1,462,374	90%
Arizona	2,683,557	2,350,265	88%
United States	124,010,992	106,957,995	86%

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

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

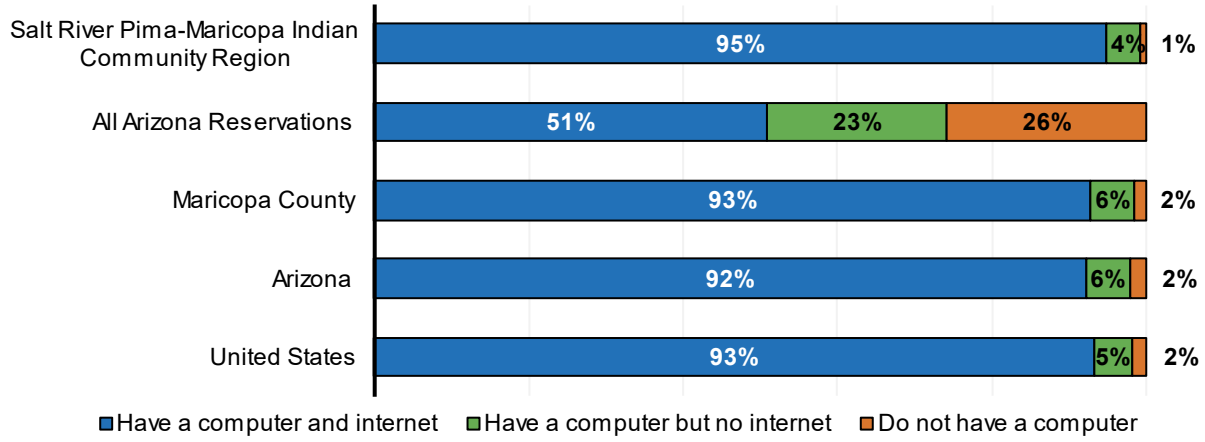
Figure 23. Persons of all ages in households with and without computers and internet connectivity, 2017-2021 ACS



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

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

Figure 24. Children birth to age 17 in households with and without computers and internet connectivity, 2017-2021 ACS



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

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

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

EDUCATIONAL INDICATORS

EDUCATIONAL INDICATORS

Why it Matters

A community's K-12 education system can support positive outcomes for children, families and the overall well-being of the community. Individuals who have higher levels of education tend to live longer and healthier lives.[178] Graduating from high school, in particular, is associated with better health, financial stability and socio-emotional outcomes as well as a lower risk for incarceration compared to dropping out of high school.[179, 180] Children with parents that have attained higher levels of education are more likely to do well in school, such as score higher in reading, math and science in their first four years of school and attain higher levels of education themselves.[181, 182, 183] High-quality early learning experiences also set a strong foundation for children's learning in kindergarten, elementary school and beyond.[184] When children participate in high-quality early education, they are more likely to perform better in reading and math in later grades.[185] Given these lifetime and intergenerational impacts of educational attainment, it is critical to provide substantial support for early education and promote policies and programs that encourage the success of Arizona's children.

What the Data Tell Us

School attendance and absenteeism

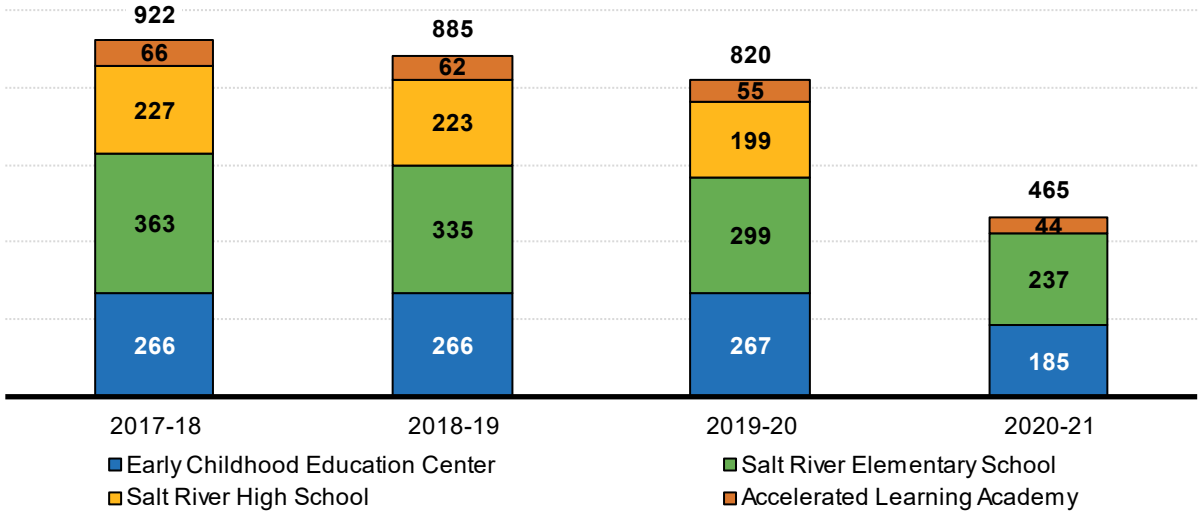
School attendance is an important factor in predicting the academic performance and future health of children. Chronic absenteeism, defined as missing 10% of school days in a school year, predicts a student experiencing academic difficulties and even dropping out of school entirely.[186] Children who are part of a racial or ethnic minority group, have disabilities or other health conditions or are economically disadvantaged are at increased risk of absenteeism.[187, 188] These are also the children who are most likely to benefit from resources available through schools. Elementary school absenteeism among Native youth, in particular, may be influenced by a number of factors including a historically-rooted distrust of educational institutions, low use of culturally-relevant teaching methods and curricula as well as infrastructure-related issues (e.g., road conditions, bus availability and distances to schools).[189, 190, 191]

How the Salt River Pima-Maricopa Indian Community is faring

- According to the 2022 First Things First (FTF) Salt River Pima-Maricopa Indian Community Regional Needs and Assets Report, children in the region attend school at Salt River Schools, Mesa Public Schools (MPS), Scottsdale Unified School District, charter schools, private schools, Bureau of Indian Education boarding schools and various nearby public school districts through open enrollment. Salt River Pima-Maricopa Indian Community has been operating Salt River Elementary School, which receives Bureau of Indian Education (BIE) funding, since 1996. [192]

- Students who attend schools outside the Community, including Mesa Public Schools, are still eligible to receive support services such as tutoring through the Community's Education Division.[193]
- The average number of children enrolled at Salt River Schools decreased each year from 2017-18 to 2020-21, with the largest drop between 2019-20 to 2020-21 due to the closure of Salt River High School on June 30, 2020 as well as the effects of the COVID-19 pandemic and transition to remote learning (Figure 25). According to the 2022 Needs and Assets Report, many families in the region reported moving their children to schools outside of the region when the high school closed in order to keep all their children within the same school district.[194]
- Although the average daily attendance at Salt River Schools decreased steeply from 2017-18 to 2020-21, this matches the enrollment trend, and attendance rates actually improved during this time period. The difference between the number of students enrolled and the number of students in attendance fell from 118 in 2017-18 to only 16 in 2020-21 (Figure 26).
- The number of students enrolled at Salt River Elementary also declined from 2017-18 to 2020-21, which may be attributed to families transferring younger siblings to off-reservation schools along with their high school-age siblings. [195] The greatest declines in enrollment were in kindergarten, first, and sixth grade. Attendance rates also improved for elementary students. While 23 fewer students were in daily attendance than were enrolled in 2017-18, all enrolled students were reported as in attendance during remote learning in 2020-21 (Table 15).
- The total number of kindergarten through sixth-grade students from the Salt River Pima-Maricopa Indian Community enrolled in Mesa Public Schools decreased slightly from 468 in 2019-20 to 457 in 2020-21. The number of children in lower grades increased (with the largest increase among first graders), while the number of children in the upper elementary grades declined (Figure 27). According to the 2022 Needs and Assets Report, a total of 1,055 students from the Community were enrolled in Mesa Public Schools in the 2020-21 school year.[196]
- Attendance rates for Salt River Pima-Maricopa Indian Community students attending Mesa Public Schools also improved across all grades from 2019-20 to 2020-21. In 2019-20, all grades had below 90% attendance rates, and grades 8 through 10 had below 80% attendance rates. In 2020-21, all besides grade 12 had above 90% attendance rates (Table 16).

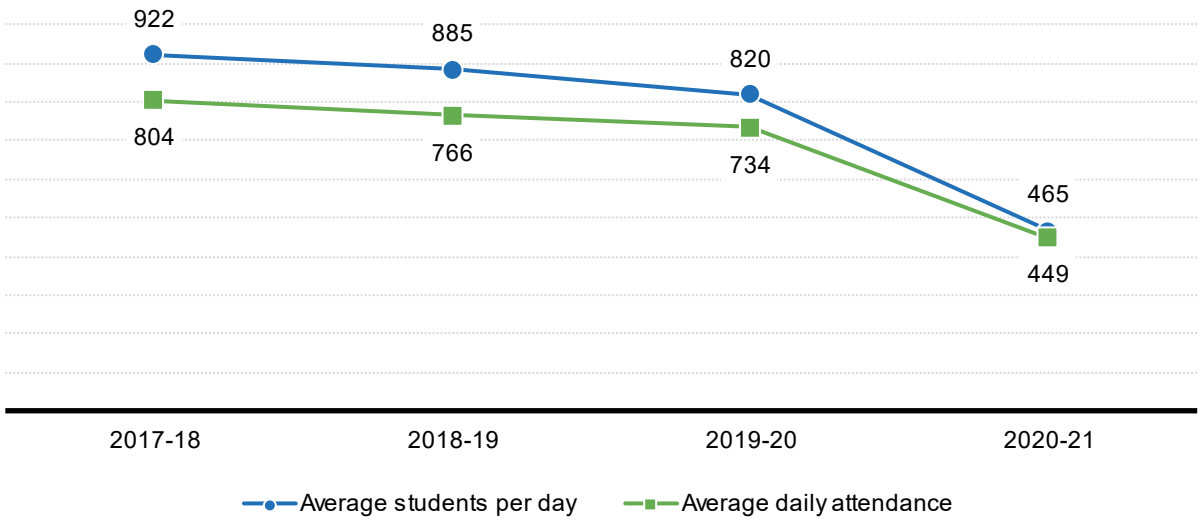
Figure 25. Average number of students in Salt River Schools, 2017-18 to 2020-21



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Note: The average number of students was calculated by dividing the sum of student membership days divided by the total number of instructional days in the school year.

Figure 26. Average daily attendance in Salt River Schools, 2017-18 to 2020-21



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Note: Average daily membership is calculated by dividing the sum of student membership days divided by the total number of instructional days in the school year.

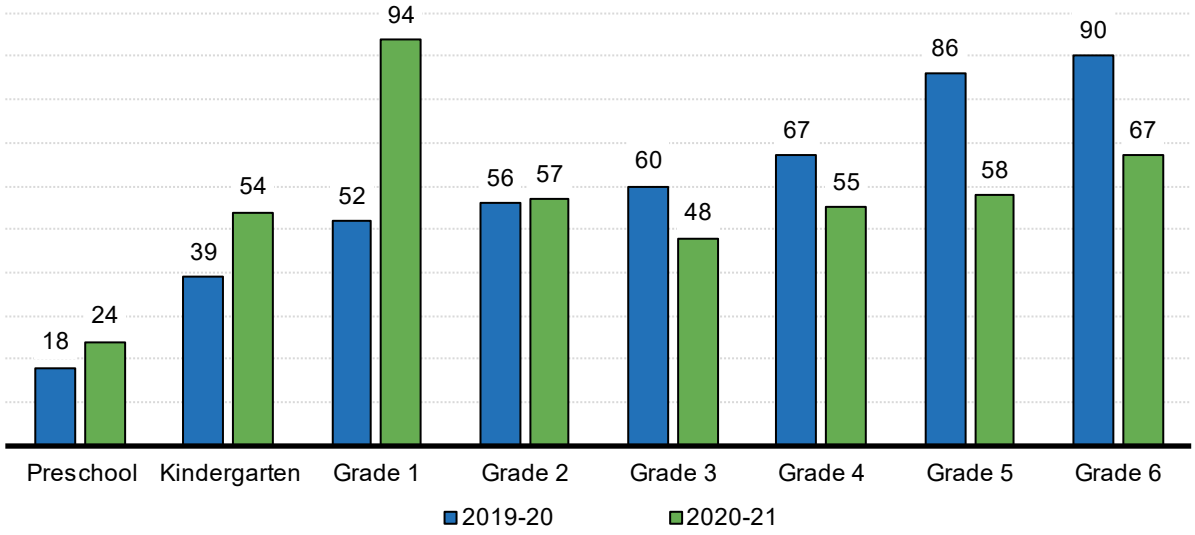
Table 15. Number of students and average daily attendance (ADA) in Salt River Elementary School, 2017-18 to 2020-21

	2017-18		2018-19		2019-20		2020-21	
	Number*	ADA*	Number	ADA	Number	ADA	Number	ADA
Total	**363**	**342**	**335**	**315**	**299**	**285**	**237**	**237**
Kindergarten	56	51	63	58	41	39	24	24
Grade 1	57	54	47	44	51	49	37	37
Grade 2	37	35	44	42	39	38	42	42
Grade 3	47	45	34	32	38	36	34	34
Grade 4	57	54	42	40	37	36	33	33
Grade 5	51	48	60	57	40	38	33	33
Grade 6	58	55	44	41	52	49	35	35

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

*Note: *Both the number of students and number attending are daily averages. The number was calculated by dividing the total number of student membership days by the number of instructional days. The average daily attendance (ADA) was calculated by dividing the total number of student attendance days by the number of instructional days.*

Figure 27. Salt River Pima-Maricopa Indian Community students in Mesa Public Schools, 2019-20 to 2020-21



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Table 16. Average attendance rates for Salt River Pima-Maricopa Indian Community students enrolled in Mesa Public Schools, 2019-20 to 2020-21

	School year 2019-20	School year 2020-21
Total	**82%**	**92%**
Preschool	81%	94%
Kindergarten	84%	91%
Grade 1	81%	91%
Grade 2	85%	92%
Grade 3	85%	91%
Grade 4	85%	94%
Grade 5	87%	94%
Grade 6	86%	95%
Grade 7	80%	94%
Grade 8	77%	93%
Grade 9	77%	94%
Grade 10	79%	92%
Grade 11	85%	92%
Grade 12	85%	89%

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Achievement on standardized testing

All Arizona public schools, including both district and charter schools, are required to administer state and federally mandated standardized tests. Between 2019 and 2022, the statewide English Language Arts (ELA) and Math assessment tool for 3rd through 8th graders in public schools was Arizona's Statewide Achievement Assessment for English Language Arts and Math (AzM2), previously called Arizona's Measurement of Educational Readiness to Inform Teaching (AzMERIT).[xiv,197,198] The *Move on When Reading* policy, enacted by the Arizona legislature in 2010, states that a 3rd grade student shall not be promoted to 4th grade if their reading score falls far below the 3rd grade level, as established by

[xiv] *In 2022, AzM2 was replaced by Arizona's Academic Standards Assessment (AASA).*

the State Board of Education.[xv, 199] These policies are intended to help identify struggling readers who may benefit from more targeted literacy interventions. Children's reading comprehension and proficiency skills when in the 3rd grade can predict their future academic success, such as their likelihood of graduating high school and attending college.[200] Poor reading skills are associated with a six-fold increase in the likelihood of dropping out of high school compared to proficient readers.[201] However, it is important to note that standardized tests have been found to have lower cultural relevancy to non-White students, which has contributed to a disparity in achievement on standardized tests across racial and ethnic groups.[202]

How the Salt River Pima-Maricopa Indian Community Region is faring

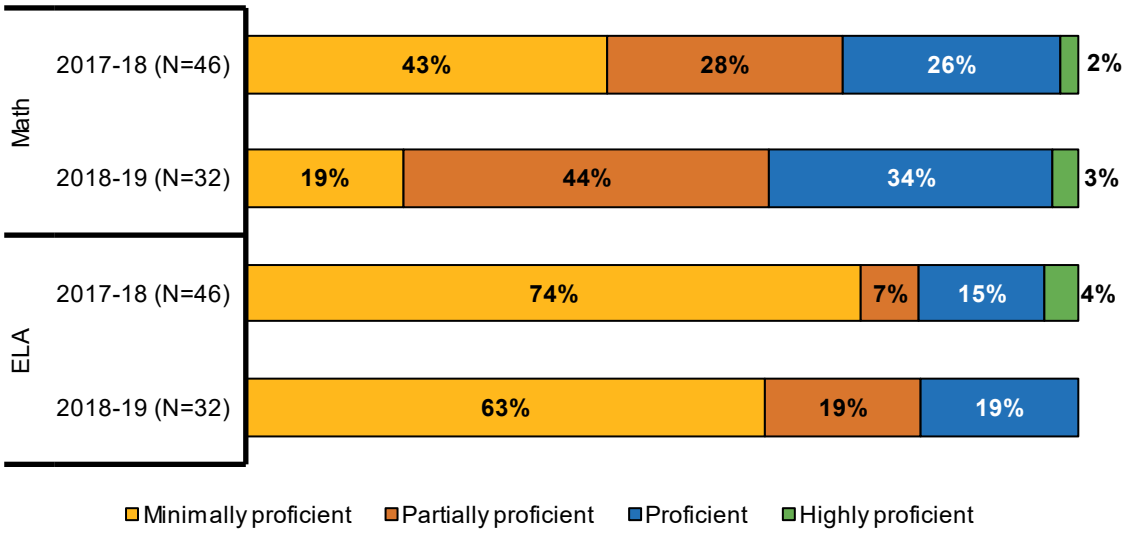
- In 2020, the BIE published a new Standards, Assessments and Accountability Systems Final Rule, which means that BIE will use a single unified assessment in all BIE-funded schools nationwide.[203] Prior to 2020, BIE-funded schools in Arizona had used the same assessment as Arizona public schools. In both the 2017-18 and 2018-19 school years, only 19% of third graders at Salt River Elementary School passed the ELA assessment, which includes 'proficient' and 'highly proficient' scores. Notably, 74% of students achieved minimally proficient scores on the ELA assessment in 2017-18, which decreased slightly to 63% in 2019-20. Students showed improvements in Math assessment scores, with the percentage of students achieving passing scores increasing by 9%. The portion of students scoring minimally proficient in Math decreased from 43% to 19% (Figure 28).
- According to the 2022 Needs and Assets Report, Salt River Schools began using the new Pearson ELA and Math assessments in fiscal year (FY) 2021. Future Needs and Assets reports for the region are expected to present data from these assessments.[204]
- Pre-pandemic passing rates for American Indian students at Mesa Public Schools were slightly lower than those for Salt River Elementary School. In 2017-18 and 2018-19, 24% of students passed the Math assessment, and fewer passed the ELA assessment (17% and 22%, respectively) (Figure 29).
- In 2020-21, Arizona schools switched from using the AzMERIT assessment to the AZM2, with no third-grade testing happening in 2019-20 due to school transitions to remote learning. In the first year of AZM2 assessments, fewer than 2% of American Indian students in Mesa Public Schools that serve Salt River Pima-Maricopa Indian Community students achieved a passing score on the ELA assessment. However, passing rates increased substantially between 2020-21

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

to 2021-22, with 25% of American Indian students in these schools achieving a passing score. This improvement in passing rates outpaces the improvement in passing rates seen for all American Indian students in Arizona, but still falls substantially below passing rates for all students in Maricopa County (43%) and Arizona (41%) (Figure 30).

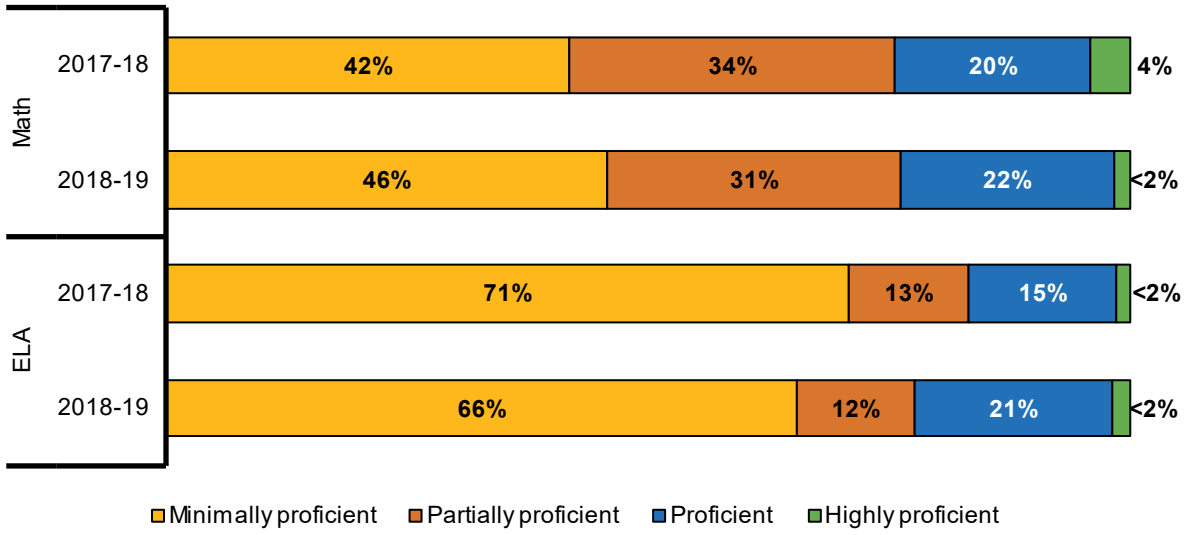
- Similarly, Math assessment passing rates were extremely low (3%) for American Indian students in Mesa Public Schools that serve Salt River Pima-Maricopa Indian Community students in the 2020-21 school year. Like the trend seen in ELA passing rates, Math passing rates improved substantially in the 2021-22 school year, with 12% of American Indian students in these schools achieving passing scores (Figure 31). However, even with this improvement, passing rates for these students still fall slightly below the passing rates for all American Indian students (16%) in Arizona and substantially below passing rates for all students in Maricopa County (42%) and Arizona (40%).

Figure 28. Third grade assessment results for Salt River Elementary School, 2017-18 to 2018-19



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

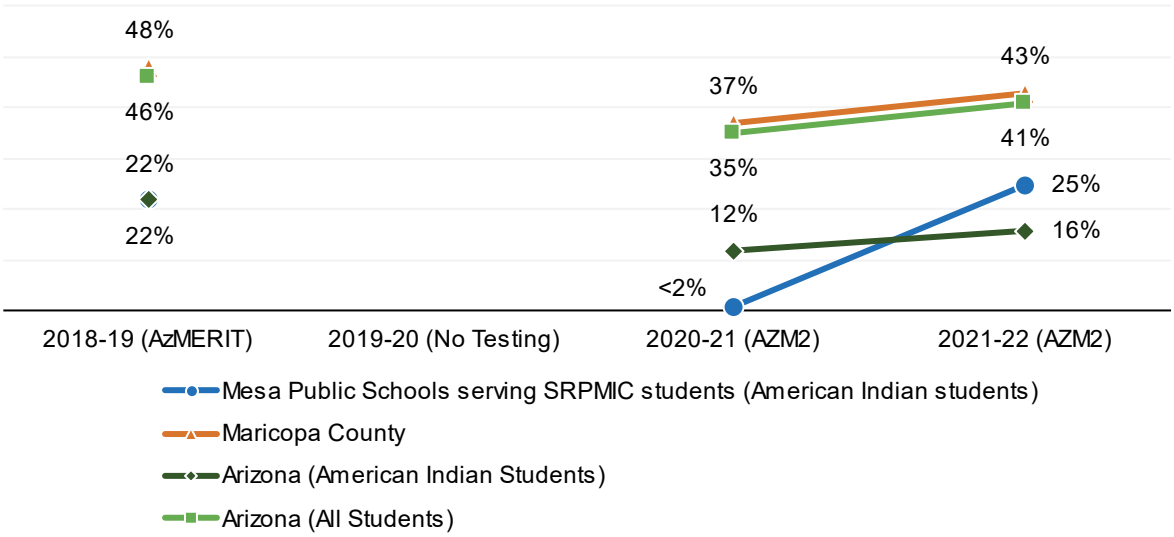
Figure 29. Third grade assessment results for American Indian students enrolled in Mesa Public Schools, 2017-18 to 2018-19



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Note: The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools.

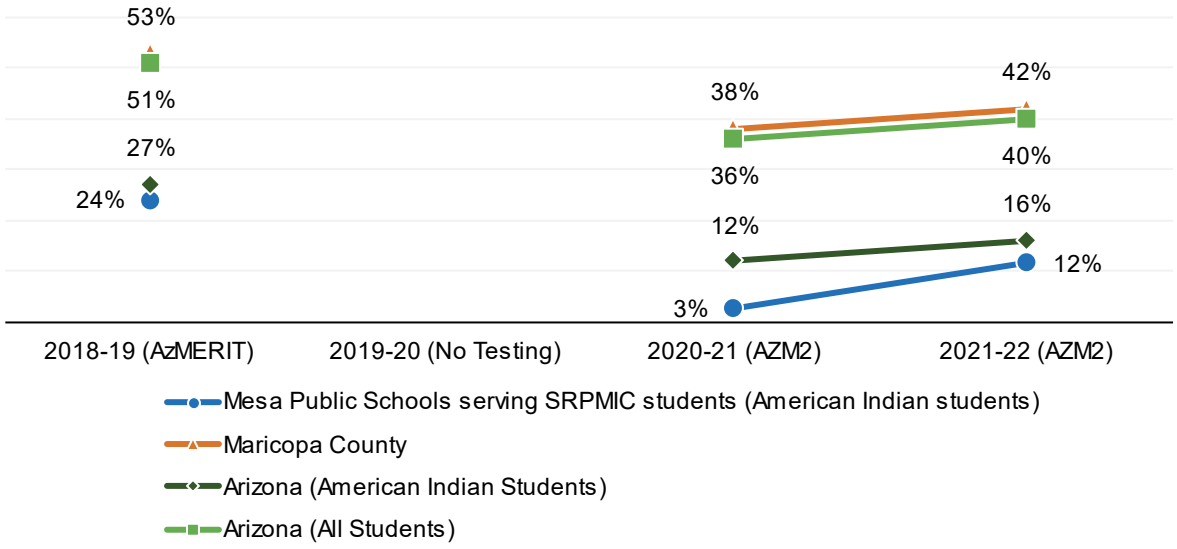
Figure 30. Trends in passing rates for Third Grade English Language Arts assessments for American Indian students, 2018-19 to 2021-22



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

Note: The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools.

Figure 31. Trends in passing rates for Third Grade Math assessments for American Indian students, 2018-19 to 2021-22



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

Note: The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools.

Graduation rates and adult educational attainment

Understanding the current high school graduation and dropout rates within a region provides insight into the assets within and challenges faced by a community and its future workforce. Adults who graduated from high school have higher rates of employment, higher incomes and better overall health compared to adults who dropped out of high school, even if they received a high school equivalency degree (GED).[205] Maternal education is associated with an array of child outcomes starting with infant health,[206, 207, 208] and both targeted and universal programs serving children from families with lower educational backgrounds can support child development.[209, 210]

In contrast to the U.S. as a whole, Arizona has a larger proportion of disconnected youth, defined as teenagers ages 16 to 19 who are neither attending school nor employed,[xvi] which has been linked to negative physical and mental health outcomes and higher rates of unemployment.[211] Native youth, both nationally and in Arizona, are disproportionately disconnected and therefore particularly vulnerable to negative outcomes and may need additional outreach and supports.[212]

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

How the Salt River Pima-Maricopa Indian Community Region is faring

- According to the 2022 Needs and Assets Report, before Salt River High School closed in 2020, four- and five-year graduation rates in the region had often been higher than statewide.[213] The Accelerated Learning Academy (ALA), an alternative school serving students who have fallen behind on credits and may be working towards their diploma on an extended timeline, has had expectedly lower four- and five-year graduation rates. In 2022, 8% of students at ALA graduated in four years, and 41% graduated in five years (Table 17).
- Four-year graduation rates decreased for American Indian students at Mesa Public Schools from 76% in 2020 to 63% in 2022, while five-year graduation rates increased slightly from 76% to 80% in 2021 (with no data available for 2022). In 2022, four-year graduation rates for American Indian students in these schools were lower than those for American Indian students statewide (65%), as well as graduation rates for all students in Maricopa County and Arizona (77% for both). However, five-year graduation rates were slightly higher for American Indian students in Mesa Public Schools (80%) compared to those for all students statewide (79%) (Table 17).
- From 2019-20 to 2020-21, drop-out rates increased sharply for 10th to 12th grade students at ALA, from 10% to 50%. In 2021-22, drop-out rates were highest at ALA (32%), followed by American Indian students statewide (9%) and American Indian Students at Mesa Public Schools serving Salt River Pima-Maricopa Indian Community students (7%) (Table 18).
- From school year 2019-20 to 2020-21, graduation rates for Salt River Pima-Maricopa Indian Community students enrolled at Mesa Public Schools increased from 57% to 75%. Drop-out rates were below 1% each year (Table 19). Comparing these data to those available for all American Indian students enrolled in select Mesa Public Schools (Table 17; Table 18) suggests that students from the Community are graduating at higher rates and dropping out at lower rates than many of their peers.
- Among adults in the Salt River Pima-Maricopa Indian Community Region, 75% have at least a high school education. This is similar to across all Arizona reservations (77%), though a smaller proportion compared to the county (89%), state (88%) and national level (89%). About one in every 10 adults (10%) in the Community has a bachelor's or more advanced degree (Figure 32).
- A higher portion of mothers giving birth between 2019 and 2022 in the Community had less than a high school education (37% compared to 25% of all residents). This rate is much higher than for mothers in all Arizona reservations (27% in 2020), Maricopa County (13% in 2021) and Arizona (12% in 2021) (Table 20).

Table 17. Trends in 4-year and 5-year graduation rates, 2020 to 2022

Geography	4-Year Graduation Rates			5-Year Graduation Rates		
	2020	2021	2022	2020	2021	2022
Salt River Accelerated Learning Academy	9%	4%	8%	44%	21%	41%
Mesa Public Schools serving SRPMIC students (American Indian students)	76%	70%	63%	76%	80%	N/A
Arizona (American Indian students)	68%	64%	65%	72%	70%	72%
Maricopa County	78%	76%	77%	81%	79%	80%
Arizona	78%	76%	77%	81%	79%	80%

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

Note: 2022 5-year graduation rates had yet to be released at the time that ADE data were accessed for this report so could not be calculated for off-reservation schools. Data for Mountain View High School and Westwood High School are included in the Mesa Public Schools row. The graduation rate for Salt River High School in 2020 was 81.8%. The 4-year graduation rate reflects the percentage of students who graduated high school within 4 years of entry; the 5-year graduation rate reflects the percentage of students who graduated high school within five years of entry. See https://www.azed.gov/sites/default/files/2017/08/2018%2006%2001%20Graduation%20DO%20and%20Persistence%20Rate%20Tech%20Manual.pdf?id=598a34233217e10ce06647ff

Table 18. 7th to 12th grade dropout rates, 2019-20 to 2021-22

Geography	Dropout Rate, 2019-20	Dropout Rate, 2020-21	Dropout Rate, 2021-22
Salt River Accelerated Learning Academy (grades 10 to 12)	10%	50%	32%
Mesa Public Schools serving SRPMIC students (American Indian students)	N/A	9%	7%
Arizona (American Indian students)	5%	10%	9%
Maricopa County	3%	4%	5%
Arizona	3%	4%	5%

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

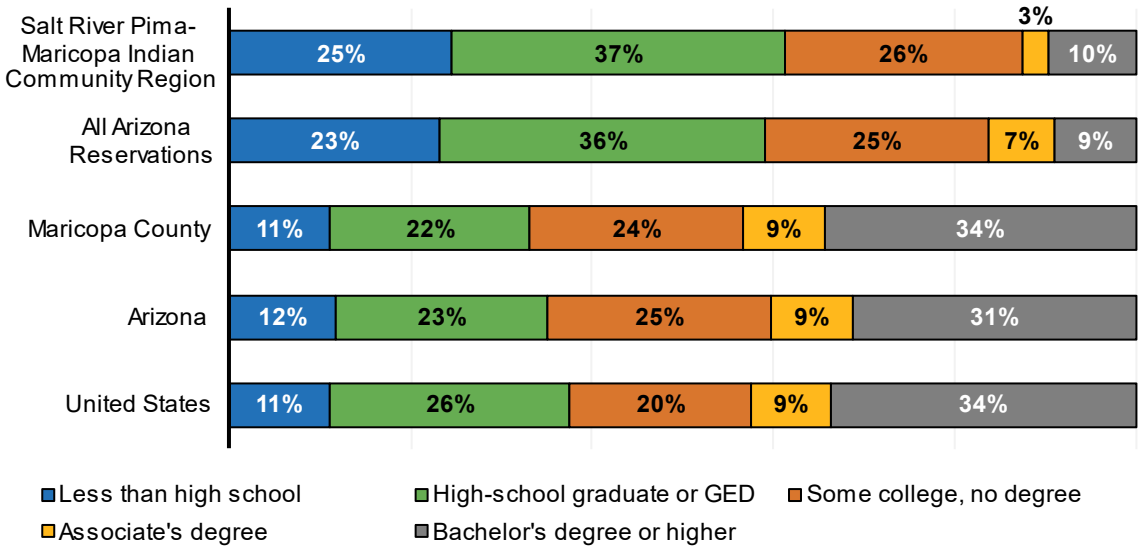
Notes: Data for American Indian students enrolled in select Mesa Public Schools (Carson Junior High, Stapley Junior High, Mountain View High, and Westwood High Schools) were not available as data pulled for prior reports only included dropout rates for all students. Dropout rates are calculated by dividing the number of dropouts by the total enrollment. In many elementary districts, dropout rates reflect students who transferred out and were lost to follow-up. Please note that the Accelerated Learning Academy only serves students in 10th to 12th grade, and thus dropout rates only reflect these grades. This may contribute to the higher rates for the ALA, as the denominator for dropout rate calculations is lower.

Table 19. Graduation and dropout rates for Salt River Pima-Maricopa Indian Community students enrolled in Mesa Public School, 2019-20 and 2020-21

	School year 2019-20	School year 2020-21
Graduation rate	57%	75%
Dropout rate	0.2%	0.3%

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Figure 32. Level of education for the adult population (ages 25 and older), 2017-2021 ACS



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

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

Table 20. Level of education for the mothers of babies born in 2020 and 2021

Geography	Calendar year	Number of births	Mother had less than a high-school education	Mother finished high school or had GED	Mother had more than a high-school education
Salt River Pima-Maricopa Indian Community Region	**2020**	**111**	**40 to 43%**	**32%**	**24 to 28%**
	2021	**89**	**36 to 40%**	**34%**	**26 to 30%**
	2019-2022 combined	**408**	**37%**	**31%**	**30 to 31%**
All Arizona Reservations	2020	1,900	27%	38%	35%
	2021	N/A	N/A	N/A	N/A
Maricopa County	2020	49,191	14%	25%	60%
	2021	50,245	13%	26%	60%
Arizona	2020	76,781	12%	27%	57%
	2021	77,857	12%	27%	58%

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

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

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

EARLY LEARNING

EARLY LEARNING

Why it Matters

Early childhood is a pivotal time when crucial physical, cognitive and social-emotional skills are built.[214,215] Early experiences are important for healthy brain development and set the stage for lifelong learning and well-being.[216, 217, 218] Just as rich, stimulating environments can promote healthy development, early negative experiences can also have lasting effects.[219, 220] However, considering the major COVID-19 pandemic-related challenges experienced by many Arizona families, including disproportionate numbers of deaths and losses of family member and caregivers in American Indian and Alaska Native communities,[221] it remains important to remember that while these short- and long-term effects may be more likely, they are not inevitable.[222, 223] Access to quality early care and learning environments can be a powerful protective factor for every child, and the effects can be particularly life-changing for children facing chronic stressors and for children with disabilities.[224, 225]

Quality early care and educational experiences help children develop into capable learners by supporting many crucial systems in the body.[226] In addition to brain development, positive and adverse experiences in the first few years of life can shape a child's immune functioning, ability to handle stress in a healthy way and capacity to learn and thrive.[227] Each of these factors contribute to being a skillful learner and well-adjusted person.[228]

What the Data Tell Us

Access to early care and education

Early childhood systems play a key role in supporting children, parents, caregivers and communities as a whole.[229, 230] In Native nations, early care and education services are provided at center-based, home-based and school-based settings that are funded through a combination of tribal, state and federal grants in addition to privately-owned and operated child care facilities.[231] Unfortunately, many Arizona families, both Native and non-Native, continue to face obstacles when seeking quality early care and education. Communities in both urban and rural areas of Arizona face a gap between the number of young children and licensed child care slots.[232, 233, 234, 235] According to the Center for American Progress, almost half of Arizonans (48%), including the majority of rural, low-income and Hispanic or Latino families, live in a "child care desert," defined as areas where there are three times as many children as there are available child care opportunities.[236, 237]

Analyses by the Bipartisan Policy Center indicate that Arizona needed an additional 76,740 licensed or registered early care and education slots to have enough for all young children in working families in 2019.[238] Because the COVID-19 pandemic forced many child care centers and home-based providers to close either temporarily or permanently, care has been disrupted for many more families in Arizona and nationwide.[239]

Availability and cost are especially challenging for parents seeking care for infants and young children in Arizona. For example, a family with one infant and one preschooler can expect to pay about $1,670 per month for a licensed child care provider. This monthly cost exceeds what many Arizonans pay per month for housing, creating potential financial challenges that are further compounded for families with multiple children under the age of 6.[xvii, 240, 241] 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).[242] However, families that are eligible to receive funding may not have access to child care services in their community that are licensed or that accept assistance payments, leaving them unable to utilize the funding.[243, 244]

How the Salt River Pima-Maricopa Indian Community Region is faring

- According to the American Community Survey, the proportion of children ages 3-4 enrolled in preschool nearly doubled from 32% in 2012-2016 to 59% in 2017-2021. Across all Arizona reservations, preschool enrollment rates also increased slightly over this timeframe (2%). In contrast, preschool enrollment rates declined between 2012-2016 and 2017-2021 in Maricopa County (-2%), Arizona (-1%), and the US as a whole (-1%), likely due to the effects of the pandemic on the early care and education system (Figure 33).
- According to the 2022 First Things First (FTF) Salt River Pima-Maricopa Indian Community Regional Needs and Assets Report, early childhood care and education in the Salt River Pima-Maricopa Indian Community Region are available through the Early Childhood Education Center (ECEC), the Family and Child Education (FACE) Program at Salt River Elementary, the Early Enrichment Program (EEP) under the Community's Youth Services Department and the tribal Child Care Development Fund (CCDF) Certificate program.[245]
- The ECEC offers multiple program options that parents can choose from, including the Head Start preschool program, Early Head Start infant-toddler program and the Early Childhood Education Center (CCDF and tribally-funded component). The Head Start preschool program offers free preschool to children ages 3-4 residing in the Community from 7:30 a.m. to 2:00 p.m. in August through May. The Early Head Start infant-toddler program offers free home-based services to expectant mothers and children ages birth to 3 residing in the Community and operates from 7:30 a.m. to 2:00 p.m. year-round. The CCDF-funded component of the ECEC provides wraparound care for children from 6 weeks old to age 5, with care available from 7:00 a.m. to 5:30 p.m., which means that child care is available before and after the regular school hours funded by Head Start and Early Head Start. The wraparound care component (outside of

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

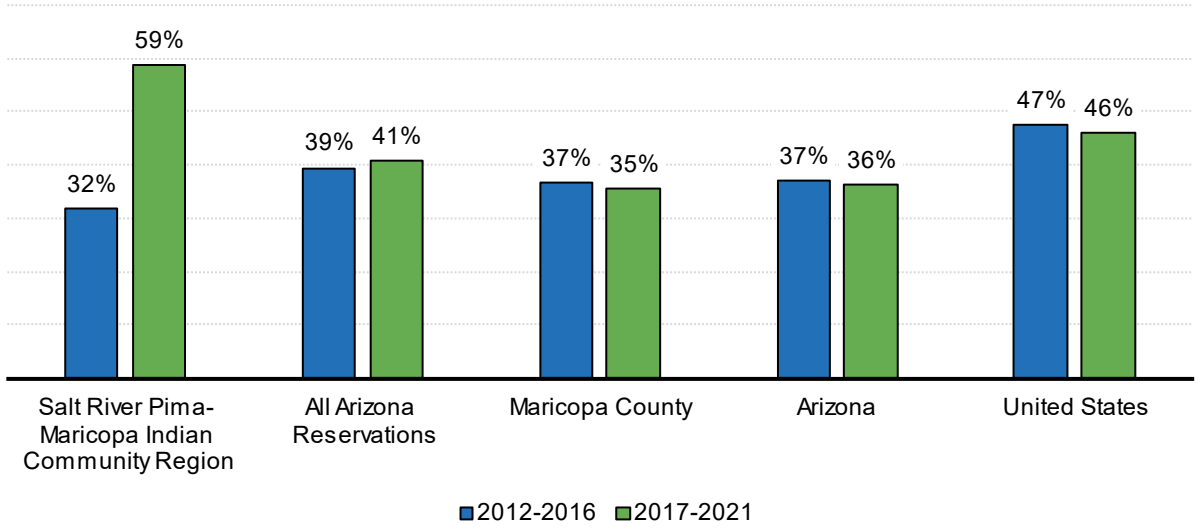
Head Start and Early Head Start hours) requires a parent co-pay based on family size and income. The ECEC's "blended" funded model allows for provision of high-quality early care and education in one facility. [246]

- The ECEC had 258 total children enrolled in school year 2019-20 before the onset of the COVID-19 pandemic. According to the 2022 Needs and Assets report, the center had been operating at full capacity up until March 2020. In 2020-21, due to the constraints of remote learning, the ECEC did not enroll any new students from the waiting list. [247] This meant that the number of children enrolled decreased to 187 children in 2020-21(Table 21).
- Figure 34 shows how the average daily students and average daily attendance were stable between 2017-18 and 2019-20 before decreasing in 2020-21. Average daily students decreased by 82 students (from 267 to 185), and average daily attendance decreased by 42 students (from 218 to 176). This indicates that nearly all children who were enrolled in the ECEC were regularly participating in learning activities remotely and engaging with teachers by phone or online. [248]
- According to the 2022 Needs and Assets Report, the ECEC uses The Creative Curriculum to promote language, literacy skills and social-emotional learning and the TSG Objectives for Development and Learning Assessment to evaluate school readiness.[249] While the percent of children meeting or exceeding all six GOLD targets increased from fall 2018 to the end of the school year in spring 2019, this percent fluctuated or decreased from fall 2020 to spring 2021 (Figure 35). This may reflect differences in evaluation, as teachers were assessing students through check-ins with parents during the pandemic, as well as challenges of remote learning generally.[250] These data also suggest that children who participated in remote learning through the early years of the pandemic may need additional supports as they transition to kindergarten.
- As mentioned above, the ECEC is funded through multiple sources including Head Start and Early Head Start grants, Tribal CCDF, and the Salt River Pima-Maricopa Indian Community's General Fund.[251] In both 2019-20 and 2020-21, the ECEC also received substantial funding through the CARES Act, which was funneled through Head Start, Early Head Start and CCDF. Total funding for the ECEC increased from over $14.27 million in 2019-20 to over $15.23 million in 2020-21, mostly due to increased CARES CCDF funding (Figure 36).
- According to the 2022 Needs and Assets report, Tribal CCDF also supports off-reservation child care services through its Certificate program, which pays for a portion of child care costs with parents contributing a co-payment based on a sliding scale.[252] In FY 2020, the average parent co-pay was $48 per month. The average monthly CCDF assistance amount was $646, which was a substantial increase from $376 in FY 2019 (Figure 37). The number of children in the region receiving care through the certificate program increased from 292 in FY 2018 to 330 in FY 2019, then decreased slightly to 325 in FY 2020 (Table 22).
- The Bureau of Indian Education sponsors the Family and Child Education (FACE) program for American Indian families in 15 communities across Arizona, including the Salt River Pima-

Maricopa Indian Community. FACE has both center- and home-based components, as well as programming to specifically support children and their caregivers.[253] The total number of children and adults participating in the Salt River Elementary FACE program decreased from 86 in 2018 to 38 in 2019 (Figure 38).

- According to the 2022 Needs and Assets report, center-based early care and education services are also typically available through the Early Enrichment Program (EEP), which is housed at the Salt River Pima-Maricopa Indian Community Youth Services Department and serves children ages 4 and older. The program focuses on developing kindergarten readiness and social skills and is located in the Way of Life Facility (WoLF). The program transitioned to a virtual format between March 2020 and March 2021 due to the COVID-19 pandemic, but it transitioned back to in-person instruction in spring 2021.[254]
- Looking across all the early care and education program in the region, 475 total children ages 0 to 5 were enrolled in early care and education in 2018-19, the last year when data were available for all programs.[255] Most of these children were enrolled in center-based care (440 children), with 39 children enrolled in home-based care. The largest number of children in center-based care were enrolled at ECEC (n = 246), followed by families funded to attend off-reservation early care and education centers through the CCDF Certificate Program (n =175) (Table 23). In the 2022 Needs and Assets report, multiple key informants noted the need for greater child care capacity in the region due to high demand for both the ECEC and CCDF Certificate program services.[256]
- In addition to the child care assistance provided through the CCDF Certificate program, some families in the Salt River Pima-Maricopa Indian Community may receive assistance from DES to help pay for child care. The number of children in the region ages 0-5 who were eligible for and receiving DES child care assistance decreased steadily from 2017 to 2022. While 20 children were eligible in 2017, fewer than 10 were eligible in 2021 and 2022. Similarly, 17 children were receiving assistance in 2017, which decreased to fewer than 10 in 2020 through 2022 (Figure 39).
- While the proportion of eligible families not using DES child care assistance peaked in 2020 across the state, this proportion actually decreased from 18.2% in 2018 to 0% in 2021 in the Salt River Pima-Maricopa Indian Community Region. However, the proportion of eligible families not using the assistance then increased to 16.7% in 2022 (Figure 40).
- The number of DCS-involved children ages 0 to 5 who were eligible for and receiving DES assistance also decreased from 2017 to 2022, with a slight recovery in 2021. Over these years, DES assistance was utilized by approximately twice as many DCS-involved children than children not involved in the child welfare system in the region (Figure 41).

Figure 33. Percent of 3- and 4-year-olds enrolled in school, 2012-2016 and 2017-2021 ACS



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

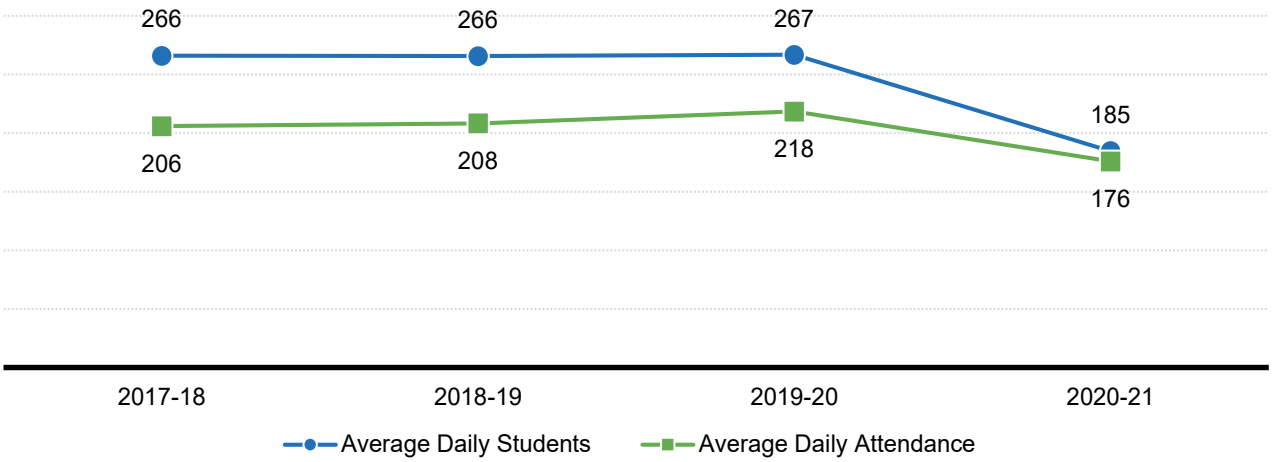
Note: In this table, "school" may include nursery school, preschool, or kindergarten.

Table 21. Enrollment in the Early Childhood Education Center by age, 2019-20 to 2020-21

	2019-20 School Year			2020-21 School Year		
	Infants/ Toddlers	Preschoolers	Total	Infants/ Toddlers	Preschoolers	Total
Total enrolled	108	150	258	62	125	187
Expectant mothers	<10	N/A	<10	0	N/A	0
Under Age 1	<10	N/A	<10	<10	N/A	<10
Age 1	29	N/A	29	25	N/A	25
Age 2	34	N/A	34	30	N/A	30
Age 3	35	17	52	<10	48	50
Age 4	N/A	67	67	N/A	76	76
Age 5	N/A	66	66	N/A	<10	<10

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf Salt River Pima-Maricopa Indian Community Early Childhood Education Center (2023). 2020-21 Annual Report. Retrieved from the ECEC website.

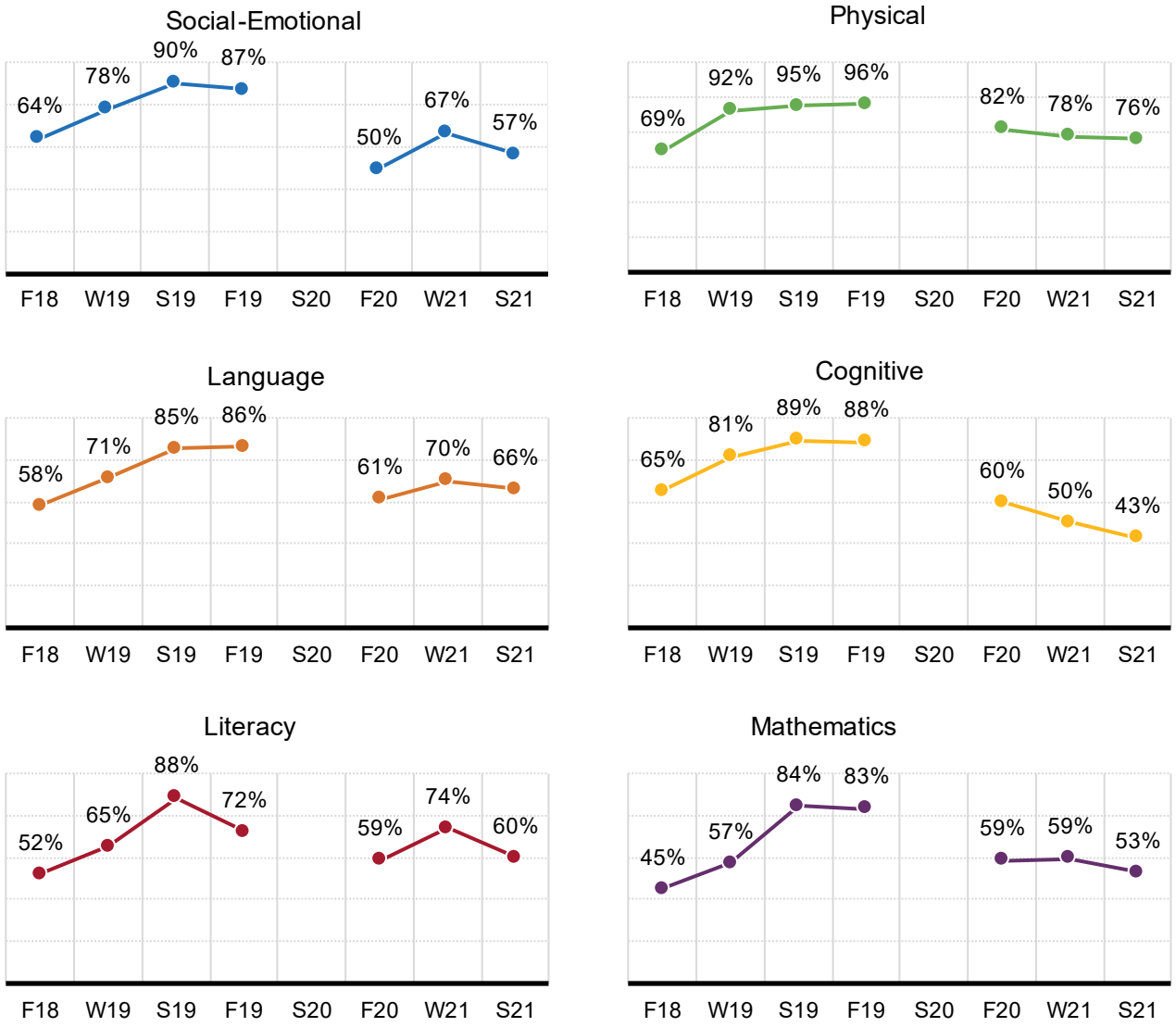
Figure 34. Average daily students and average daily attendance at the Early Childhood Education Center, 2017-19 to 2020-21



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Note: Average daily membership is the sum of student membership days divided by the total number of instructional days in the school year, and average daily attendance is the total number of attendance days divided by the total number of membership days for all students.

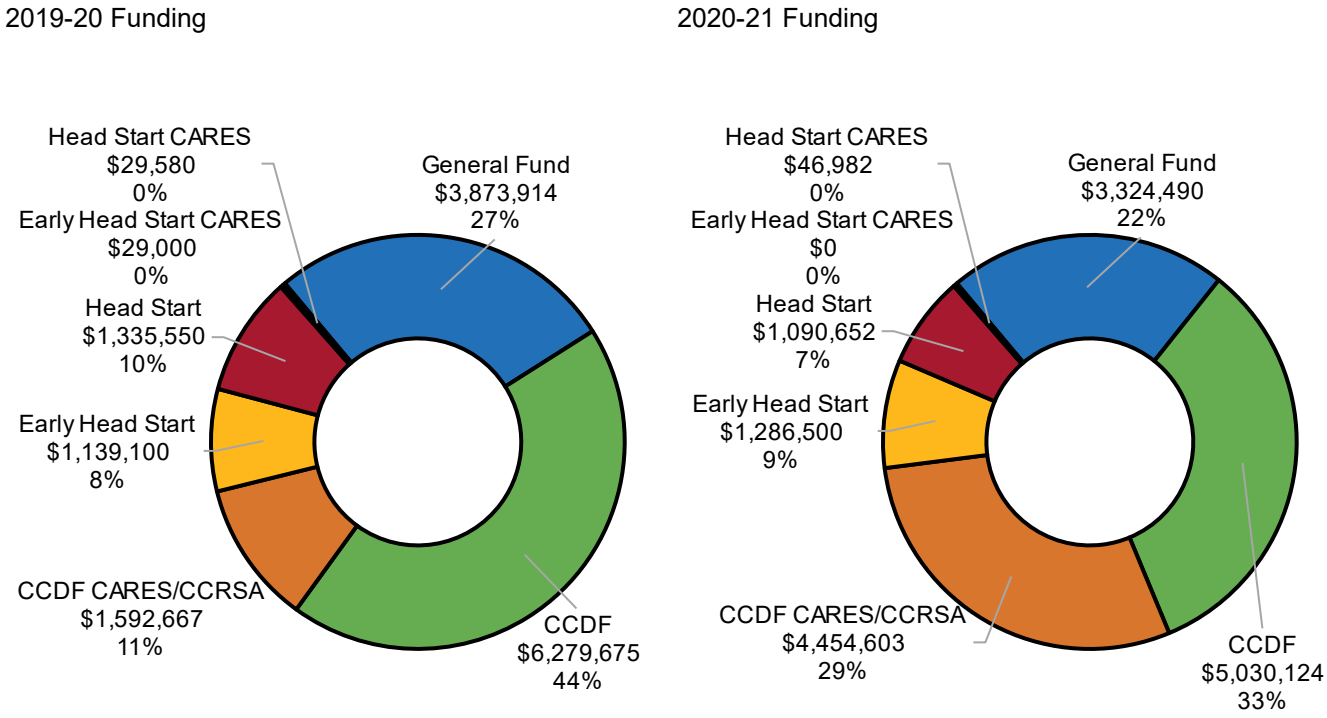
Figure 35. Children meeting or exceeding Teaching Strategies GOLD targets, Fall 2018 to Spring 2021



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf Salt River Pima-Maricopa Indian Community Early Childhood Education Center (2023). 2020-21 Annual Report. Retrieved from the ECEC website.

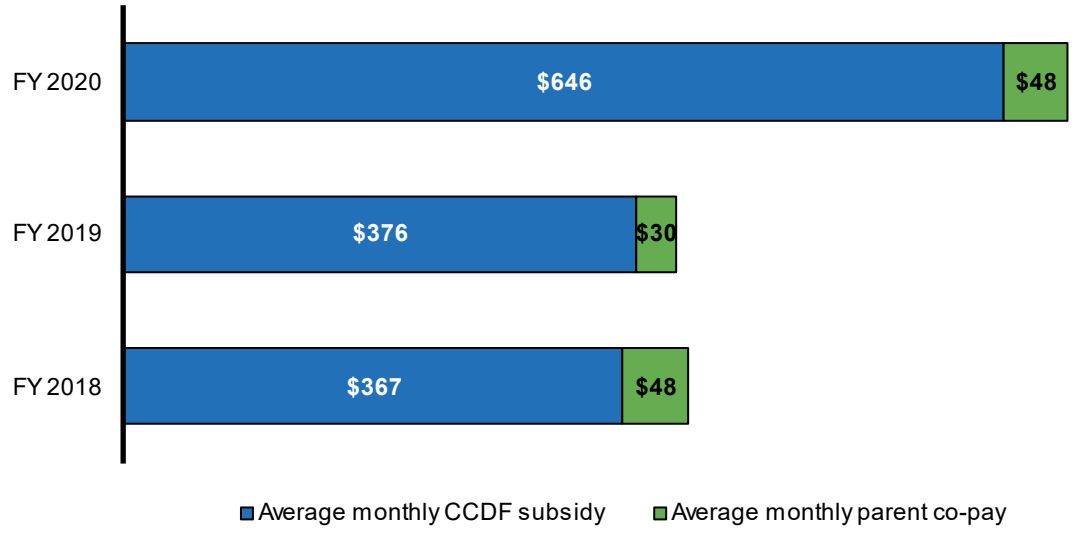
Note: Teaching Strategies Gold assessments are usually done through in-person observation, but during the pandemic, teachers continued to do assessments through twice-weekly check-ins with parents and video, pictures, and observation notes sent to teachers by parents.

Figure 36. Early Childhood Education Center funding sources, 2019-20 to 2020-21



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf Salt River Pima-Maricopa Indian Community Early Childhood Education Center (2023). 2020-21 Annual Report. Retrieved from the ECEC website.

Figure 37. Average monthly CCDF assistance and co-pays, FY 2018 to 2020



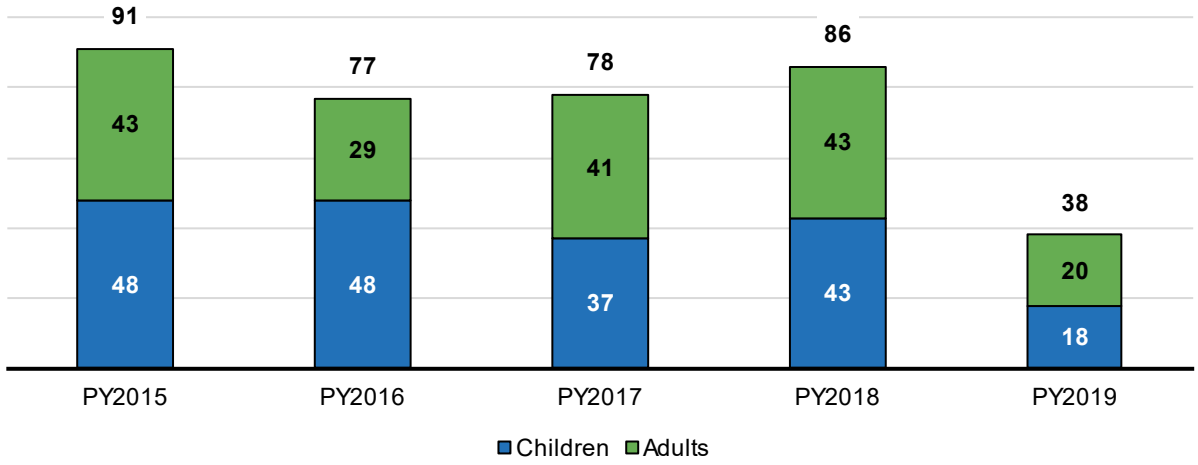
Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Table 22. Number of children served through CCDF certificate program, FY 2018 to 2020

	FY 2018	FY 2019	FY 2020
Children receiving care through certificate program	292	330	325

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Figure 38. Salt River Elementary FACE participation, program years 2015 to 2019



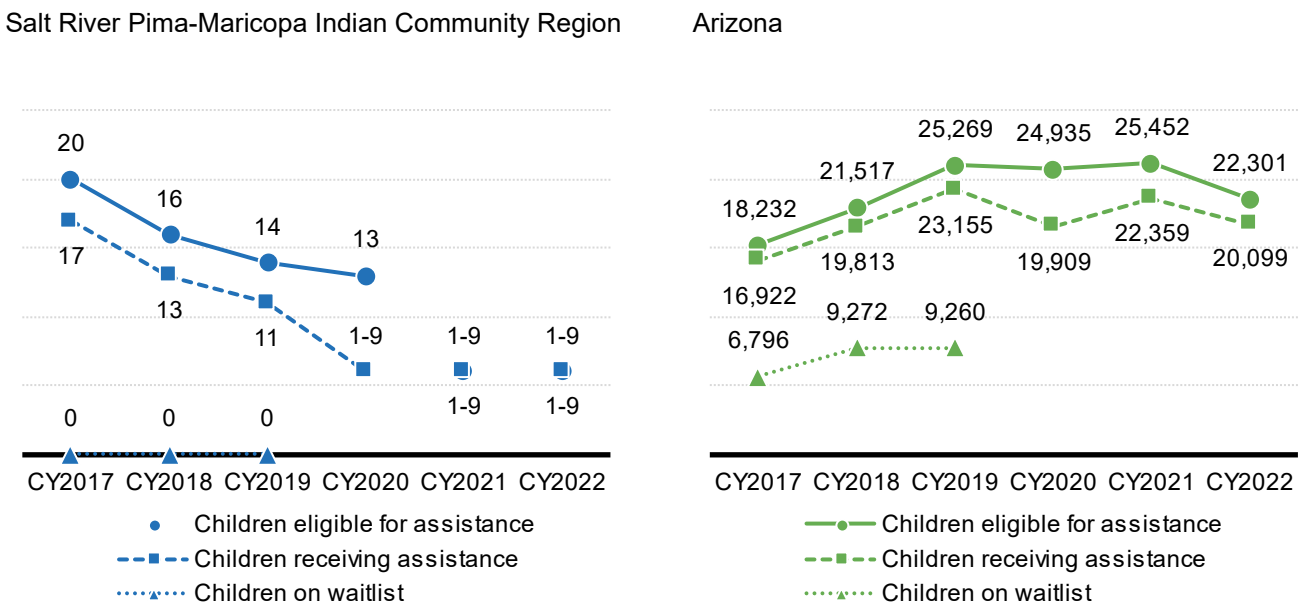
Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Table 23. Overall Early Care and Education Enrollment, 2018-19

	Center-based Ages served	Center-based Enrollment	Home-based Ages served	Home-based Enrollment	Total Enrollment
Early Childhood Education Center	Ages 0 to 5	246	Prenatal to 2	20	266
Certificate Program	Ages 0 to 5	175	N/A	N/A	175
FACE Program	Ages 3 to 8	<10	Ages 0 to 2	19	22
Early Enrichment Program*	Ages 4 to 5	12	N/A	N/A	12
Total	Ages 0 to 5	440	Ages 0 to 2	39	475

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf
Note: The enrollment data reflect pre-pandemic numbers when the EEP served children ages 3 to 5. The program currently serves children ages 4 to 5.

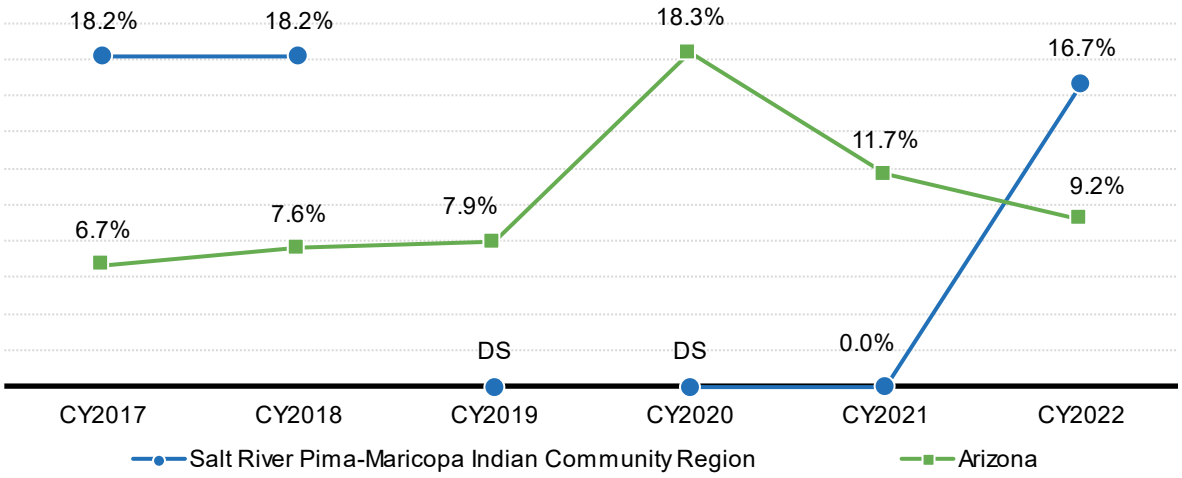
Figure 39. Children ages 0-5 eligible for, receiving, and on waitlist for DES child care assistance, 2017 to 2022



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

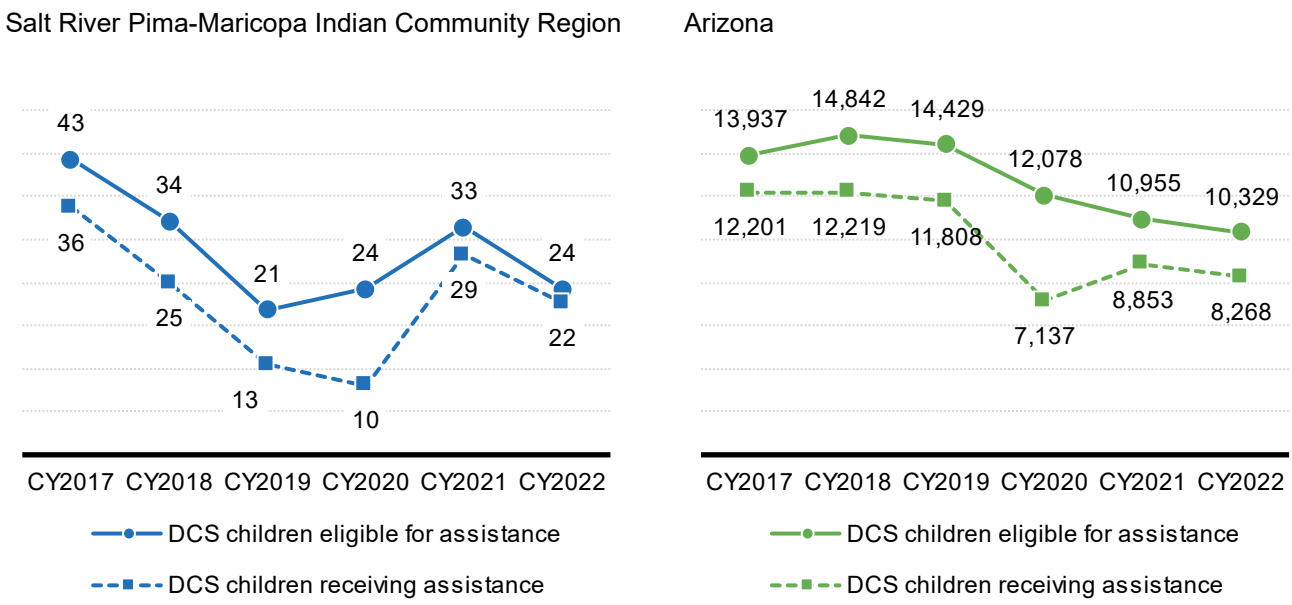
Note: The DES child care waitlist was suspended in June 2019, so there are no waitlist numbers for 2020 or beyond. DES child care assistance amounts vary based on a number of factors including the age of the child, the type of provider and the quality status of the provider. For more information please see the current DES reimbursement rates for child care at https://des.az.gov/sites/default/files/dl/CCA-1227A_1.pdf?time=1646262773961

Figure 40. Eligible families not using DES child care assistance, 2015 to 2020



Source: Arizona Department of Economic Security (2021). [Child Care Administration dataset]. Unpublished data.

Figure 41. DCS-involved children ages 0-5 eligible for, receiving, and on waitlist for DES child care assistance, 2017 to 2022



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

Note: The DES child care waitlist was suspended in June 2019, so there are no waitlist numbers for 2020 or beyond. DES child care assistance amounts vary based on a number of factors including the age of the child, the type of provider and the quality status of the provider. For more information please see the current DES reimbursement rates for child care at https://des.az.gov/sites/default/files/dl/CCA-1227A_1.pdf?time=1646262773961

High quality early care and education

Children who begin their education in high-quality preschool programs tend to repeat grades less frequently, obtain higher scores on standardized tests, experience fewer behavior problems and are more likely to graduate from high school.[257] This provides a return on investment to society through increased educational achievement and employment, reductions in crime and better overall health of children as they mature into adults.[258, 259] The key ingredients in positive early experiences include responsive relationships, core adaptive skills development, reduced sources of stress and appropriate nutrition – all things that quality early care and education are in a unique position to provide at the critical time to encourage optimal learning and well-being for years to come.[260] Early care and education shapes far more than a child's future academic achievement, and an investment in early childhood can be one of the most productive investments a community can make.[261]

One way that the quality of early child care and education is measured in Arizona is through the Quality First program.[262] The Quality First program rates the quality of child care providers and preschools on a scale of one to five stars, with providers considered high quality when they have received a three-star rating or higher. Quality First also offers training and funding for participating schools and providers to improve their services.[263] Quality First providers are supported by regional funding.

How the Salt River Pima-Maricopa Indian Community Region is faring

- The Salt River Pima-Maricopa Indian Community Region has one Quality First child care provider, Miro International Preschool, which was funded by the DES expansion in SFY 2023. Miro International Preschool is not tribally operated but leases land on the reservation.
- In 2022, between 1 and 9 children ages 0 to 5 received DES child care assistance, and 60% of these children were enrolled in a quality early care and education program. Almost all of the 22 DCS-involved young children receiving DES assistance were enrolled in a quality environment (n = 21, 95%) (Table 25).

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

Geography	Child care providers served	Regional Funding	DES Expansion	Buy-In
Salt River Pima-Maricopa Indian Community	**1**	**0**	**1**	**0**
Maricopa County	*County data not available*			
Arizona	1,434	1,045	384	5

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

Table 25. Children receiving DES child care assistance who are enrolled in quality environments, 2022

Geography	Children ages 0-5 (non-DCS involved)			DCS-involved children ages 0-5		
	Received assistance	Enrolled in quality environment	Percent in quality environment	Received assistance	Enrolled in quality environment	Percent in quality environment
Salt River Pima-Maricopa Indian Community Region	**1 to 9**	**1 to 9**	**60%**	**22**	**21**	**95%**
Maricopa County	12,230	8,749	72%	5,128	3,760	73%
Arizona	20,099	13,619	68%	8,268	5,969	72%

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

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

Young children with special needs

Timely intervention can improve the language, cognitive and socio-emotional developmental outcomes of young children who have, or are at risk for, developmental delays.[264, 265, 266] Early intervention also

reduces educational costs by decreasing the need for special education.[267] Ensuring that children have access to timely and adequate screening and intervention services from birth to age 5 can be key for preparing children for kindergarten.

In Arizona, the Arizona Early Intervention Program (AzEIP),[xviii] the Division of Developmental Disabilities (DDD)[xix] and the Arizona Department of Education Early Childhood Special Education Program are designed to provide services to families with children who have special needs.[xx] AzEIP is a division of DES that provides early intervention and a variety of supportive services to Arizona children birth to age 2 with disabilities and their families.[268] The goal of these services is to improve the learning and development of children and inform their family members of how they can best support their child.[269] DDD is a division of DES that provides supportive services to people of all ages with a qualifying developmental disability, including cerebral palsy, autism spectrum disorder, down syndrome, epilepsy and cognitive disabilities.[270] Children under the age of 6 that have been assessed by AzEIP to have a qualifying disability may also receive DDD services. At age 3, children with special needs transition from AzEIP services to their local education agency (LEA), usually a school district. Each Arizona school district is mandated to participate in Child Find[xxi] and to provide preschool services to children with special needs either through their own schools or through agreements with other programs such as Head Start.

The availability of early learning opportunities and services for young children with special needs is an ongoing concern across the state, particularly in the more geographically remote communities and tribal nations. According to national research, insufficient funding and staffing of these programs are the greatest obstacles to identifying and providing resources for all children who would benefit from early intervention, and Arizona already falls in the bottom 10 states in the nation for early intervention service provision.[271] Fewer children in Arizona are accessing critical early intervention services that can identify disabilities, provide parent-coaching and encourage optimal development at home.[272] This matters because, while early education discussions often center around pre-kindergarten for 4-year-olds, research continues to point to the impact of experiences during the first 3 years of life as being just as crucial for healthy brain and body development.[273] Positively, Arizona has taken steps toward improving funding for early intervention, including being 1 of 10 states to cross-reference Medicaid and Early Intervention data to maximize federal Medicaid matching of funds.[274]

How the Salt River Pima-Maricopa Indian Community Region is faring

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

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

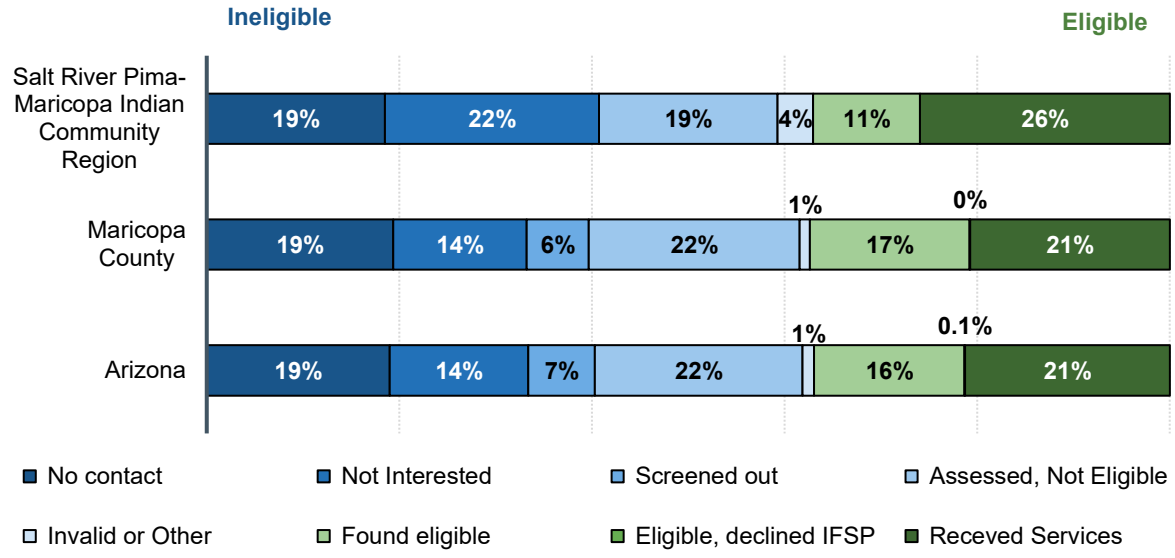
[xx] *For more information on ADE's Early Childhood Special Education program, visit http://www.azed.gov/ece/early-childhood-special-education/ and http://www.azed.gov/special-education/az-find/*

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

- In the Salt River Pima-Maricopa Indian Community Region, 26% of children (birth to 2) who were referred to AzEIP in federal fiscal year 2022 were found eligible and received services, a larger proportion than seen in Maricopa County and Arizona (both 21%). About one in five (19%) children referred in the region were assessed and found ineligible. The families of more than one in five children who were referred did not proceed with screening for eligibility (22%), and 19% were not able to be reached (Figure 42).
- Fewer than 10 children (birth to age 2) in the Salt River Pima-Maricopa Indian Community Region received services from AzEIP each year between 2018 and 2022 (Table 26). In 2021 and 2022 combined, 13 children received services from AzEIP. The largest single source of referrals was a physician's office, accounting for nearly half of all referrals in 2021 and 2022. Other major referral sources included early learning programs, public health or social service agencies, and schools.[275]
- Similarly, fewer than 10 children (birth to age 5) in the region received services from DDD each year from state fiscal year (SFY) 2019 to 2022 (Table 27).
- 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. Specifically for children birth to age 2, fewer than 10 children in the Salt River Pima-Maricopa Indian Community Region received services from AzEIP and/or DDD each year between 2018 and 2022. This would amount to between 0.4% and 3.8% of the children in this age range (according to the 2020 Census) in the Community (Table 28).
- The Salt River Pima-Maricopa Indian Community, in addition to other early intervention supports, offers free developmental milestone screenings to coincide with home and center based services to support the development for children approaching these milestones. This is provided by the Child Find Department at Salt River Schools. Child Find identifies children with disabilities to ensure that they receive needed supports and services by referring children younger than age 3 to AzEIP and children ages 3-5 to MPS. At the ECEC, Exceptional Student Services (ESS) identifies children with special needs and ensures that children receive needed services to support their healthy development. The ESS team includes a full-time ESS Coordinator and a Behavior Intervention Counselor. As part of a Memorandum of Understanding with MPS, a full-time speech/language pathologist is available to preschool students enrolled at the ECEC, and an occupational therapist and physical therapist are also available through MPS for children.[276]
- The number of preschoolers with disabilities enrolled in Salt River Schools (at the ECEC) increased from 18 in SFY 2018 to 25 in SFY 2020 before dropping to fewer than 11 in SFY 2021 and 2022. This is similar to the trend across Arizona in these years where the number of preschoolers receiving services through LEAs fell by more than 20% between SFY 2020 and 2022 (Figure 43).

- Of the preschoolers with disabilities receiving services between SFY 2018 and 2022, 73% were diagnosed with a developmental delay, 16% with a speech or language impairment, and 11% with a preschool severe delay. A larger proportion of preschoolers enrolled at Mesa Public Schools serving Salt River Pima-Maricopa Indian Community students were diagnosed with a speech or language impairment than those enrolled in Salt River Schools (27%) (Figure 44).
- According to the 2022 Needs and Assets Report, children with disabilities continue to be served by ESS as they continue on in elementary grades and beyond. [277] The ESS program at Salt River Schools served 142 students in 2018-19, 162 students in 2019-20 and 81 students in 2020-21. More than half of these students each year were at Salt River Elementary School, with smaller proportions at Salt River High School and the Accelerated Learning Academy (with no students attending the Accelerated Learning Academy in 2020-21) (Figure 45).

Figure 42. Outcomes for children birth to age 2 referred to AzEIP, federal fiscal year 2022



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

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

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

Geography	2018	2019	2020	2021	2022
Salt River Pima-Maricopa Indian Community Region	1 to 9	1 to 9	1 to 9	1 to 9	1 to 9
Maricopa County	3,922	3,787 to 3,885	3,427	3,306	3,418
Arizona	5,974	5,828 to 5,836	5,403	5,275	5,473

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

Note: These data reflect the Oct 1 snapshot of AzEIP services, not a cumulative total throughout the year. In 2021 and 2022 combined, 12 children birth to age 2 receiving AzEIP services.

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

Geography	SFY 2019	SFY 2020	SFY 2021	SFY 2022	Percent change from 2019 to 2022
Salt River Pima-Maricopa Indian Community Region	1 to 9	1 to 9	1 to 9	1 to 9	**DS**
Maricopa County	2,926	3,003	1,575	2,649	-9%
Arizona	4,005	4,078	2,438	3,691	-8%

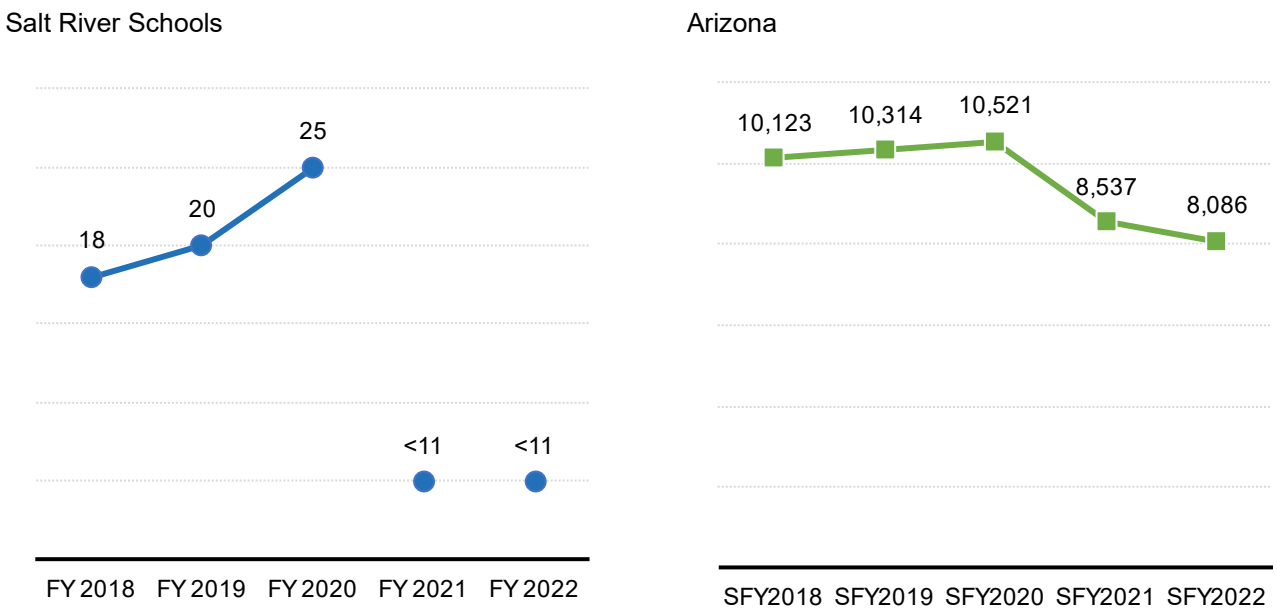
Source: Arizona Department of Economic Security (2023). [Division of Developmental Disabilities dataset]. Unpublished data.

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

Geography	Number of children ages 0-2 receiving services from AzEIP and/or DDD				Population ages 0-2 (Census 2020)	Estimated percent of children (ages 0-2) receiving AzEIP and/or DDD services, SFY 2022
	SFY2019	SFY2020	SFY2021	SFY2022		
Salt River Pima-Maricopa Indian Community	**1 to 9**	**1 to 9**	**1 to 9**	**1 to 9**	**238**	**0.4 to 3.8%**
Maricopa County	4,153	3,697	4,052	4,083	146,147	3.0%
Arizona	6,376	5,721	5,916	5,876	225,737	2.6%

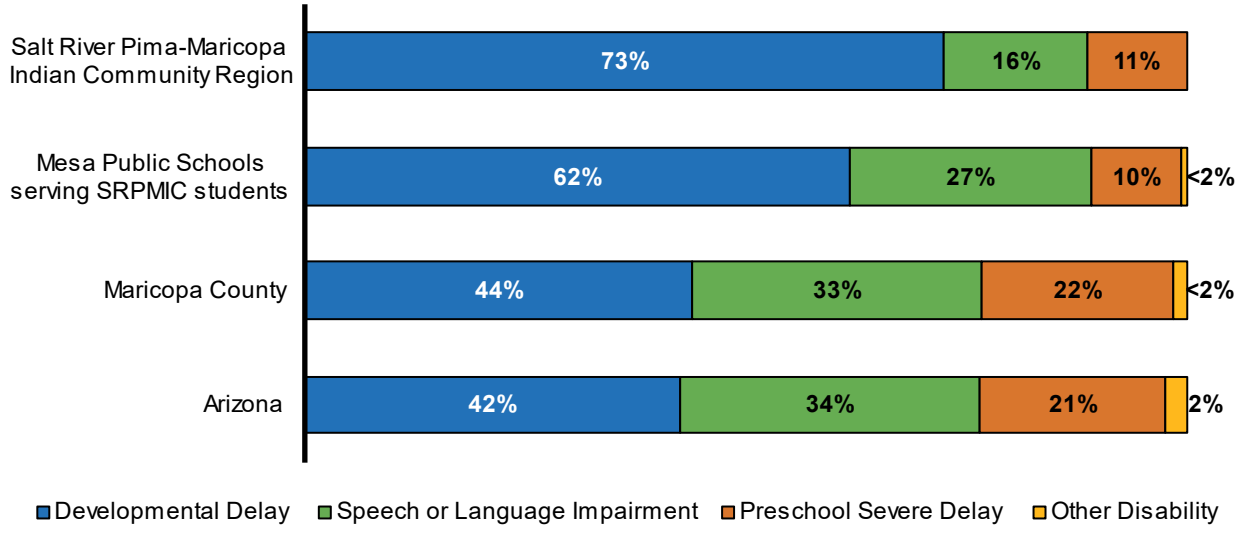
Source: Arizona Department of Economic Security (2023). [AzEIP dataset]. Unpublished data.

Figure 43. Trends in preschoolers with disabilities receiving services through Local Education Agencies (LEA), state fiscal years 2018 to 2022



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

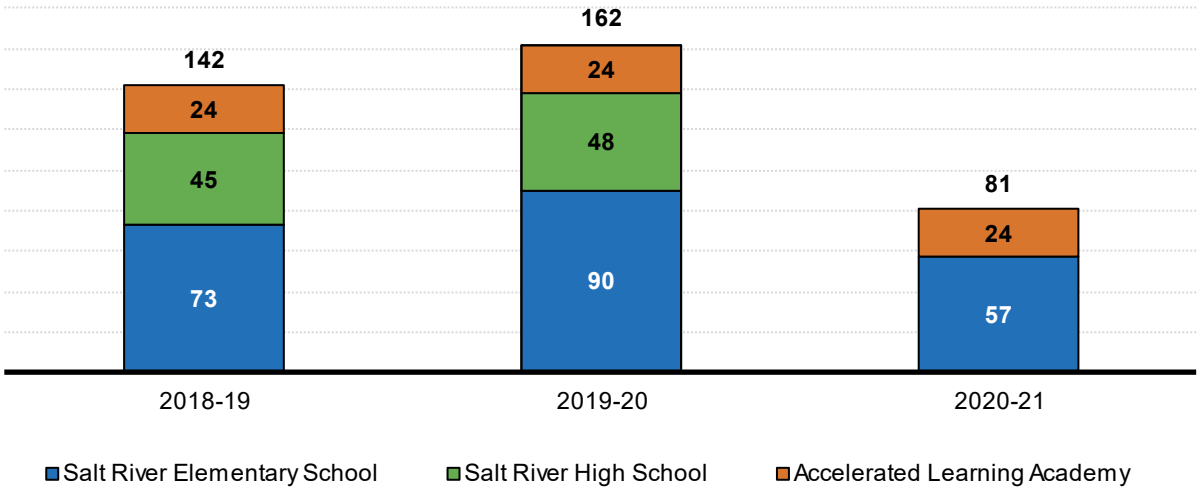
Figure 44. Preschoolers with disabilities receiving services through Local Education Agencies (LEAs) by type of disability, state fiscal years 2018-2022 combined



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

Note: The "Other Disability" category includes children with hearing impairment, visual impairment, or deaf-blindness. The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools.

Figure 45. Students served by the Exceptional Students Services Department, 2018-19 to 2020-21



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Table 29. Students served by the Exceptional Students Services Department, 2018-19 to 2020-21

	School year 2018-19	School year 2019-20	School year 2020-21
Total	142	162	81
Salt River Elementary School	73	90	57
Salt River High School	45	48	N/A
Accelerated Learning Academy	24	24	24

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

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

CHILD HEALTH

CHILD HEALTH

Why it Matters

The physical and mental health of both children and their caregivers are important for optimal child development and well-being. Early childhood health, and even maternal health before pregnancy, has lasting impacts on an individual's quality of life.[278, 279] Experiences during the prenatal and early childhood periods can result in lifelong impacts on immune functioning, brain development and risk for chronic diseases.[280, 281] Poor health in childhood can also result in lower educational attainment and socioeconomic status in adolescence, adulthood and even inter-generationally.[282, 283] Therefore, adequate access to preventive care and treatment services is vital to support a child's long-term health, development and success.[284, 285, 286] Members of federally-recognized tribes have access to health care services provided through the Indian Health Services (IHS) and/or tribally-administered health care facilities.[287, 288]

What the Data Tell Us

Access to health services

Health insurance coverage is an important indicator of whether families can access, afford and utilize medical care. In Arizona, children up to 19 years of age can enroll in health insurance through the Arizona Health Care Cost Containment System (AHCCCS), Arizona's Medicaid program. Children whose families earn too much to qualify for AHCCCS but do not earn enough to afford private health insurance may also be enrolled in KidsCare, Arizona's Children's Health Insurance Program.[xxii] During the COVID-19 pandemic, uninsured rates declined due to federal policies prohibiting states from disenrolling people from Medicaid.[289] Despite these efforts, uninsured rates in the overall population are still high.[290] One primary reason for this is perceived cost, with more than two-thirds (69.6%) of uninsured U.S. adults citing their inability to pay for health insurance as the primary reason they were uninsured.[291] Families who qualify for low- or no-cost health insurance may not be aware that they qualify or they may face administrative barriers to enrolling.[292]

A variety of health outcomes for both mothers and infants depend on access to quality health care and support before, during and after pregnancy. Early initiation of prenatal care reduces the risk of prenatal smoking, pregnancy complications, [xxiii] premature births and maternal and infant mortality.[293, 294, 295, 296, 297] Poor access to maternal health care (e.g., hospitals with labor and delivery units, birth centers and obstetric providers) is one factor that can contribute to these outcomes.[298, 299, 300] Black, Hispanic,

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[xxii] *For more information on AHCCCS and KidsCare see: https://www.azahcccs.gov/Members/GetCovered/Categories/KidsCare.html*

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

American Indian and Alaska Native mothers experience a disproportionate lack of access to quality health care and support for their pregnancies.[301, 302] Lack of access to this care has contributed to considerably higher rates of low birth weight births, preterm births and maternal and infant mortality compared to non-Hispanic White Americans.[303, 304, 305] Efforts to increase the number of women in Arizona with access to early prenatal care, such as expanding access to telehealth care and midwifery care, could improve the health outcomes of the state's mothers and babies, especially in counties with lower access to maternal health care services.[306]

Native communities often have lower access to high-quality health care. Hospitals and specialty services are fewer and further-between on reservations, and factors such as poor road conditions and lower transportation and internet access can further worsen access issues. Additionally, a report from 2022 estimated that the IHS, through which many tribal members access services, is chronically underfunded by as much as 50% compared to health care needs.[307, 308] Significant and sustained investment is needed to reduce this gap in adequate health care services for Native communities.

How the Salt River Pima-Maricopa Indian Community Region is faring

- Health care services are available to residents from the Salt River Pima-Maricopa Indian Community through the River People Health Center, which opened in 2022.[309] The Center offers pediatric care, women's health and prenatal care services, specialty health services, mental and behavioral health care, dental care, optometry, physical therapy, nutrition and dietetics, medical imaging and laboratory services and public health nursing.[310]
- According to the 2022 First Things First (FTF) Salt River Pima-Maricopa Indian Community Regional Needs and Assets Report, in fiscal year (FY) 2019 there were 3,798 IHS active users[xxiv] (as defined as those who had one or more visits during the previous three years, resided within the boundaries of the Salt River Pima-Maricopa Indian Community or the town of Lehi and received services in the IHS Phoenix Service Unit).[311] Of those, 350 were children ages birth to 5 (Table 30).
- According to American Community Survey (ACS) estimates, 19% of the overall population and just 3% of young children (birth to age 5) in the Salt River Pima-Maricopa Indian Community Region lack health insurance. These uninsured rates are lower than seen across all Arizona reservations, including for all ages (19%) and most notably for young children (20%) (Table 31). This difference is likely due to high rates of enrollment in AHCCCS in the region (see Table 32). Facilitating enrollment in AHCCCS can have positive outcomes for both individuals and communities by increasing access to health care services and increasing funds available for health care provision to all community members.[312]

[xxiv] *Please note that the number of active users represents all residents of the Salt River Pima-Maricopa Indian Community Region (overall and for young children birth to 5) and the town of Lehi (the community in Mesa) who received services at least once at the IHS Phoenix Service Unit during the stated time period, regardless of their tribal affiliation. This is also the case with all other indicators included in this report where the Indian Health Service is the source.- Personal Communication, Indian Health Service – Phoenix Area, April 2021*

- Uninsured rates[xxv] among young children in the Salt River Pima-Maricopa Indian Community Region dropped substantially in recent years, from 27% in 2012-2015 to just 3% in 2017-2022 (-24%). While Maricopa County and Arizona also saw slight declines in the proportion of uninsured young children during this time, there was an increase in uninsured young children across all Arizona reservations (17% to 20%) (Figure 46).
- Insurance coverage for babies born in recent years highlights the high rates of AHCCCS coverage in the Salt River Pima-Maricopa Indian Community Region in 2020 (76%) and 2021 (66%). AHCCCS coverage for births in the region in 2020 (76%) was higher than in Maricopa County (65%), all Arizona reservations (71%) and Arizona (48%) (Table 32).
- The proportion of births in the Salt River Pima-Maricopa Indian Community Region paid for by AHCCCS declined from 79% in 2019 to 60% in 2022, while 9% of births were covered by IHS both years. While 2022 data were not available for all Arizona reservations, data for 2018 to 2020 show that around 70% of births across all Arizona reservations were paid for by AHCCCS and between 16% and 22% paid for by IHS (Figure 47).
- In 2021, just over half (53.9%) of the 89 births in the Salt River Pima-Maricopa Indian Community Region were to mothers who began prenatal care in the first trimester. Data for 2020 show notably lower proportions of births with no prenatal care in Maricopa County (2%), all Arizona reservations (5%) and Arizona (2%) (Table 33). Concerningly, more than one in 10 births in the region in 2021 (12%) were to mothers with no prenatal care at all (Table 33).
- The proportion of births in the region to mothers who began prenatal care in the first trimester fluctuated in recent years, peaking at 67% in 2020 and declining to 60% in 2022 (Figure 48).

Table 30. Number of Active IHS users from the Salt River Pima-Maricopa Indian Community, FY 2019

	Young children (ages 0-5)	All ages
Salt River Pima-Maricopa Indian Community Region	**350**	**3,798**

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Note: Active users were allocated to Salt River Pima-Maricopa Indian Community based on their provided community of residence. Users who reported that they resided in Salt River or the town of Lehi were assigned to the Salt River Pima-Maricopa Indian Community Region by IHS for the data reported in this table.

[xxv] *Note that individuals whose only form of health care coverage is the Indian Health Service (IHS) are considered uninsured by the U.S. Census Bureau. The change in uninsured rates for young children likely represents increased AHCCCS enrollment among children who already have access to IHS health care.*

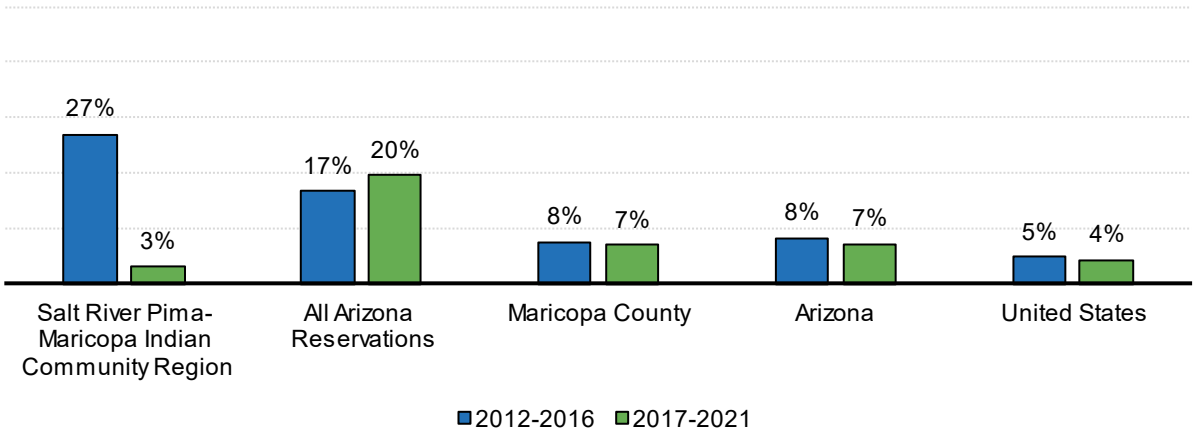
Table 31. Health insurance coverage, 2017-2021 ACS

Geography	Estimated civilian non-institutionalized population (all ages)	Without health insurance (all ages)	Estimated number of children (ages 0-5)	Without health insurance (ages 0-5)
Salt River Pima-Maricopa Indian Community Region	**6,938**	**19%**	**592**	**3%**
All Arizona Reservations	178,215	22%	15,687	20%
Maricopa County	4,335,169	11%	320,252	7%
Arizona	6,976,512	11%	496,410	7%

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

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

Figure 46. Percent of children birth to age 5 without health insurance, 2012-2016 and 2017-2021 ACS



Source: U.S. Census Bureau. (2021). American Community Survey five-year estimates 2017-2021, Table B27001

Note: This table excludes persons in the military and persons living in institutions such as college dormitories. People whose only health coverage is the Indian Health Service (IHS) are considered "uninsured" by the U.S. Census Bureau. Please note that the slight differences between bars showing the same number is due to small variations in the percentage of the population without health insurance and the percentage of young children without health insurance that round to the same number (e.g., 9.8% vs. 9.5%).

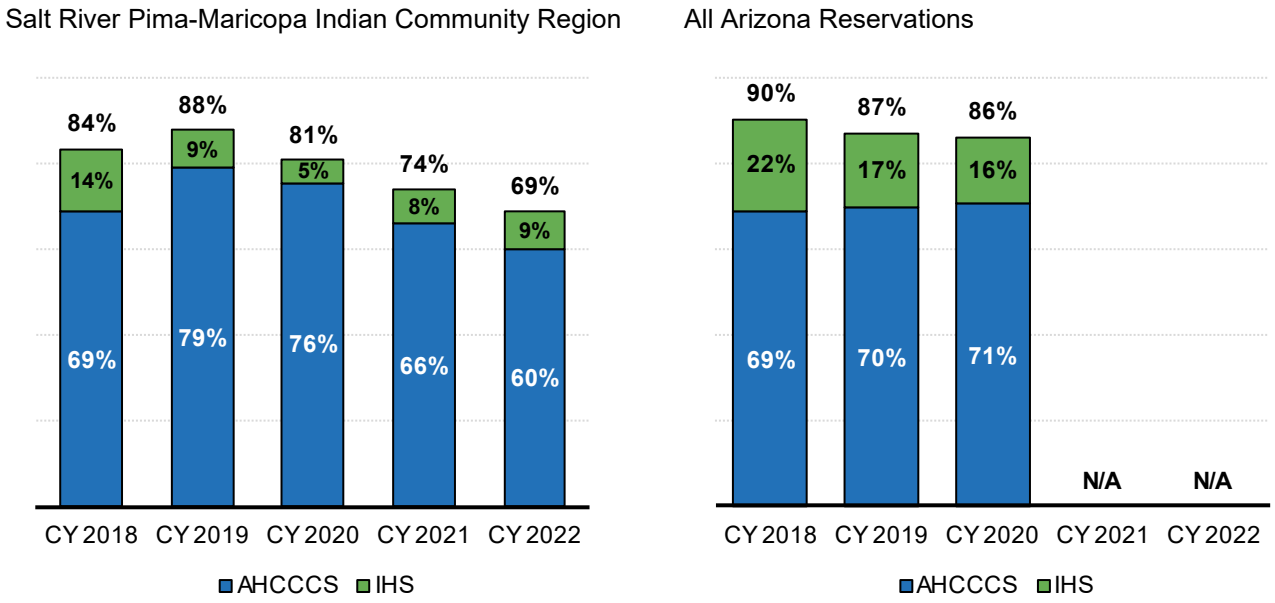
Table 32. Insurance coverage for babies born in 2020 and 2021

Geography	Calendar year	Number of births	Birth was covered by AHCCCS	Birth was covered by IHS	Birth was covered by AHCCCS or IHS
Salt River Pima-Maricopa Indian Community Region	**2020**	**111**	**76%**	**5%**	**81%**
	2021	**89**	**66%**	**8%**	**74%**
All Arizona Reservations	2020	1,900	71%	16%	86%
	2021	*Data for All Arizona Reservations not available*			
Maricopa County	2020	49,191	45%	0%	45%
	2021	50,245	43%	1%	44%
Arizona	2020	76,781	48%	1%	49%
	2021	77,857	46%	1%	47%

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

Note: Mothers of twins are counted twice in this table. Percentages may not sum to 100% due to rounding. 'All Arizona Reservations' row reflects only births to American Indian mothers residing on Arizona reservations. The Health status profile of American Indian in Arizona for 2021 has not yet been released. Due to data suppression of counts of births between 1 and 5, some values are shown as a range, with the true value falling somewhere within the range.

Figure 47. Births paid for by AHCCCS or IHS, 2018 to 2022



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

Note: Mothers of twins are counted twice in this figure. 'All Arizona Reservations' figure reflects only births to American Indian mothers residing on Arizona reservations. The Health status profiles of American Indian in Arizona for 2021 and 2022 have not yet been released. Due to data suppression of counts of births between 1 and 5, some values are shown as a range, with the true value falling somewhere within the range.

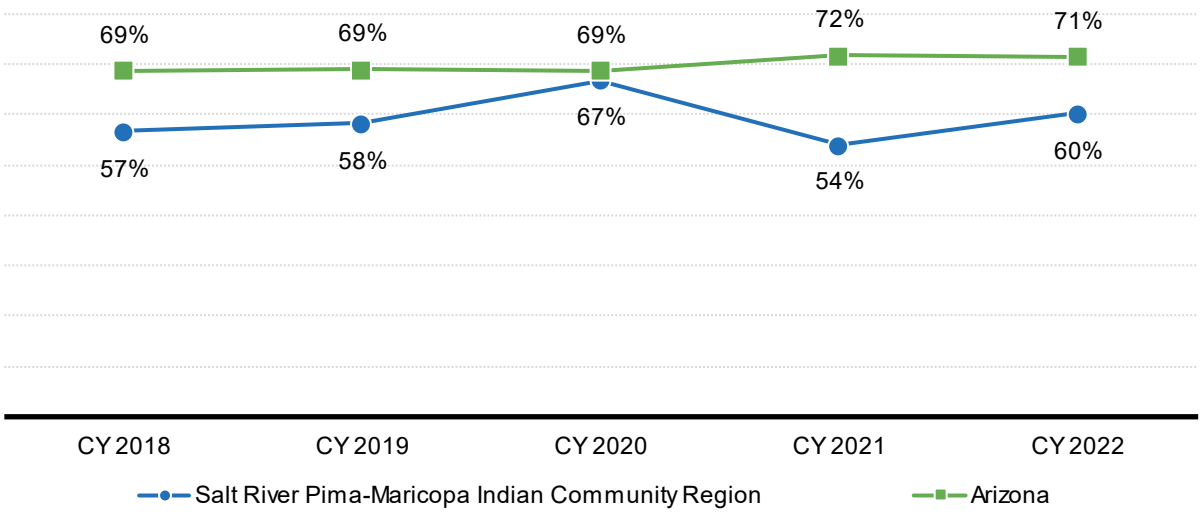
Table 33. Prenatal care for the mothers of babies born in 2020 and 2021

Geography	Calendar year	Number of births	Mother had no prenatal care	Mother had fewer than five prenatal visits	Mother began prenatal care in the first trimester
Salt River Pima-Maricopa Indian Community Region	**2020**	**111**	**0.9 to 4.5%**	**13%**	**66.7%**
	2021	**89**	**12%**	**9%**	**53.9%**
All Arizona Reservations	2020	1,900	5%	14%	55.8%
	2021	*Data for All Arizona Reservations not available*			
Maricopa County	2020	49,191	2%	4%	71.9%
	2021	50,245	2%	4%	74.0%
Arizona	2020	76,781	2%	5%	68.8%
	2021	77,857	2%	5%	71.7%

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

Note: Mothers of twins are counted twice in this table. 'All Arizona Reservations' row reflects only births to American Indian mothers residing on Arizona reservations. The Health status profile of American Indian in Arizona for 2021 has not yet been released. Due to data suppression of counts of births between 1 and 5, some values are shown as a range, with the true value falling somewhere within the range.

Figure 48. Births to mothers who began prenatal care in the first trimester, 2018 to 2022



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

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

Maternal age and substance abuse

Infants' immediate and long-term health can be influenced by maternal characteristics including age and substance use during or after pregnancy. For example, teenage parents often experience increased stress and hardship in comparison to older parents and other non-parent teenagers as they are less likely to complete high school or college and more likely to maintain a lower socioeconomic status and require public assistance to make ends meet.[313, 314, 315, 316, 317]

The use of substances during pregnancy can cause negative health complications for fetuses and babies. For example, babies born to mothers who smoked cigarettes during pregnancy are more likely to be born preterm, have low birth weight, die from sudden infant death syndrome (SIDS) and have weak lungs.[318, 319] The use of opioids, whether prescribed or illicit, during pregnancy also poses health risks to developing fetuses including preterm birth, stillbirth and birth defects.[320] It may also cause infants to experience withdrawal symptoms after birth, which is referred to as neonatal abstinence syndrome (NAS). Symptoms of NAS include sleep problems, seizures, poor feeding, dehydration, loose stool, sweating, tremors and vomiting. In Native communities, substance abuse issues can be linked to historical trauma and adverse childhood experiences (ACEs). Protective factors, which are also important elements of effective substance use interventions, include cultural and family connection and traditional healing.[321, 322]

How the Salt River Pima-Maricopa Indian Community Region is faring

- Of the 408 births in the Salt River Pima-Maricopa Indian Community Region between 2019 and 2022, 12% were to mothers younger than 20, a higher proportion than seen in Maricopa County (5%), all Arizona reservations (9%) and Arizona (5%) in 2020 (Table 34). In 2022, births to mothers younger than 20 in the region declined to a five-year low of 7.5%, though well above the state overall (4.6%) (Figure 49).
- Five percent of births in the region in 2019-2022 combined were to mothers who smoked cigarettes during pregnancy, above the Healthy People 2030 target of no more than 4.3% (Table 34).
- Between 2018 and 2022, there were 49 newborns hospitalized because of maternal drug use during pregnancy in the Salt River Pima-Maricopa Indian Community Region, with an average stay of 11.3 days (Table 35). When compared to the number of births in the region, there were 9.7 newborns hospitalized per 100 live births in the region compared to 3 newborns hospitalized per 100 live births in the state.

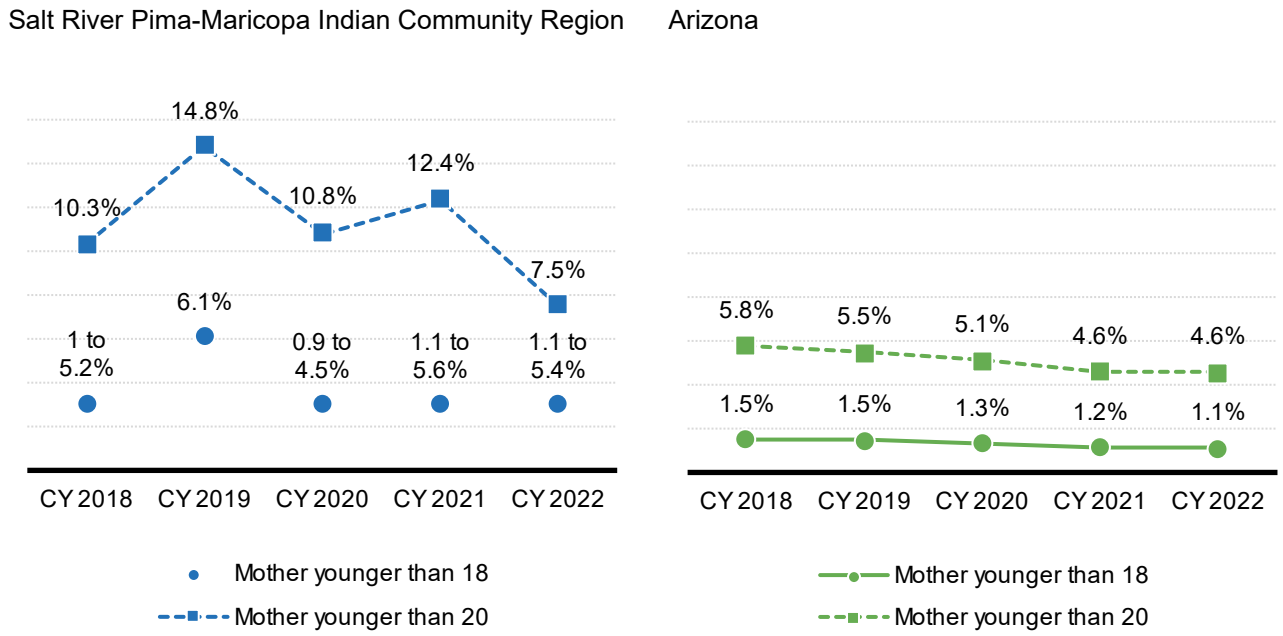
Table 34. Selected characteristics of mothers giving birth, 2020 to 2021

Geography	Calendar year	Number of births	Mother was younger than 18	Mother was younger than 20	Mother smoked cigarettes during pregnancy
Salt River Pima-Maricopa Indian Community Region	**2020**	**111**	**0.9 to 4.5%**	**11%**	**0.9 to 4.5%**
	2021	**89**	**1.1 to 5.6%**	**12%**	**10.1%**
	2019 to 2022 combined	**408**	**4%**	**12%**	**5%**
All Arizona Reservations	2020	1,900	4%	9%	11.1%
	2021	*Data for All Arizona Reservations not available*			
Maricopa County	2020	49,191	1%	5%	2.6%
	2021	50,245	1%	4%	2.3%
Arizona	2020	76,781	1%	5%	3.6%
	2021	77,857	1%	5%	3.2%
Healthy People 2030 target					4.3%

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

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

Figure 49. Births to teenaged mothers, 2018 to 2022



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

Note: Mothers of twins are counted twice in this figure. Due to data suppression of counts of births between 1 and 5, some values are shown as a range, with the true value falling somewhere within the range. Data for mothers younger than 18 could not be shown in the region because there were fewer than 6 births to these mothers in any given year over the past 5 years.

Table 35. Newborns hospitalized because of maternal drug use during pregnancy, 2018-2022 combined

Geography	Newborns hospitalized	Average length of stay (days)
Salt River Pima-Maricopa Indian Community Region	**13**	**350**
Maricopa County	1692	111,707
Arizona	12,939	9.5

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

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

Maternal health and well-being

A pregnant woman's health and well-being are closely linked to infant and child health and development. Gestational diabetes (i.e., diabetes that only presents during the pregnancy) increases the

likelihood of an infant having low blood sugar, being born preterm, being larger than average at birth, needing to be delivered through cesarean section and even developing type 2 diabetes and cardiovascular diseases later in life.[323, 324] Children of mothers categorized as having maternal obesity have increased risk of birth complications, asthma, diabetes, heart disease and neonatal and infant mortality.[325, 326, 327] A variety of social determinants of health have been linked to the development of diabetes and obesity, including low socioeconomic status, employment struggles, lack of health insurance and living in rural areas with fewer resources.[328, 329, 330, 331] Risks associated with these conditions can be reduced through increased access to maternal health care before, during and after childbirth as well as planning high-risk deliveries at hospital facilities with more resources and technical expertise.[332, 333]

Postpartum depression has a clear link to negative outcomes in infant health and development. Untreated postpartum depression can lead to infant sleeping, eating and behavioral problems, issues with maternal and infant bonding and infant developmental delays.[334,335] Groups that have higher rates of postpartum depression include American Indian and Alaska Native mothers, mothers who are under the age of 19 and mothers who smoked during or after pregnancy.[336] The United States Preventive Services Task Force and the American Congress of Obstetricians and Gynecologists recommend assessing mothers' mental health both during pregnancy and after giving birth to facilitate early identification and intervention.[337] In 2022, AHCCCS implemented a policy requiring depression screenings during prenatal and postpartum visits as well as well-child visits within the first 6 months of an infant's life for all enrolled mothers in Arizona.[338] Mothers who screen positively for depression must be referred to a case manager or treatment services. [339] These screenings, as well as the ability to bill AHCCCS for the cost of screenings, will hopefully increase the likelihood that mothers experiencing postpartum depression are referred to appropriate mental health services.

In a recent study, American Indian mothers shared that their experiences of postpartum depression were shaped by their medical experiences just before and after giving birth and a feeling that historical factors and colonized perspectives have limited their ability to birth and mother fully in their culture.[340] Additionally, mothers expressed needing to remain resilient for their families and communities, which may increase the feeling of isolation common in postpartum disorders. Integrating cultural birthing practices into healthcare services and considering cultural-specific factors in follow-up treatment services is a key need to support Native mothers and their families.[341]

How the Salt River Pima-Maricopa Indian Community Region is faring

- In 2021, 14.6% of births in the Salt River Pima-Maricopa Indian Community Region were to mothers with gestational diabetes and 48% to mothers with pre-pregnancy obesity. Both rates of gestational diabetes and pre-pregnancy obesity in the region were higher than those seen for Maricopa County (9.6% and 27%, respectively) (Table 36).
- The proportion of births to mothers with pre-pregnancy obesity showed an overall increasing trend in recent years, from 17.5% in 2018 to 62.4% in 2022. Rates of gestational diabetes in the

region remained more stable, showing a slight overall increase from 14.4% in 2018 to 15.1% in 2022 (Figure 50).

- Statewide, about 1 in 8 mothers (13.7%) reported experiencing postpartum depressive symptoms in 2020, nearly the same rate as that seen nationwide (13.4%).[342] National data show that more than one in five (22%) American Indian and Alaska Native mothers in the U.S. experienced postpartum depressive symptoms in 2018, suggesting that Native mothers may be at higher risk of postpartum depression.[343, 344]

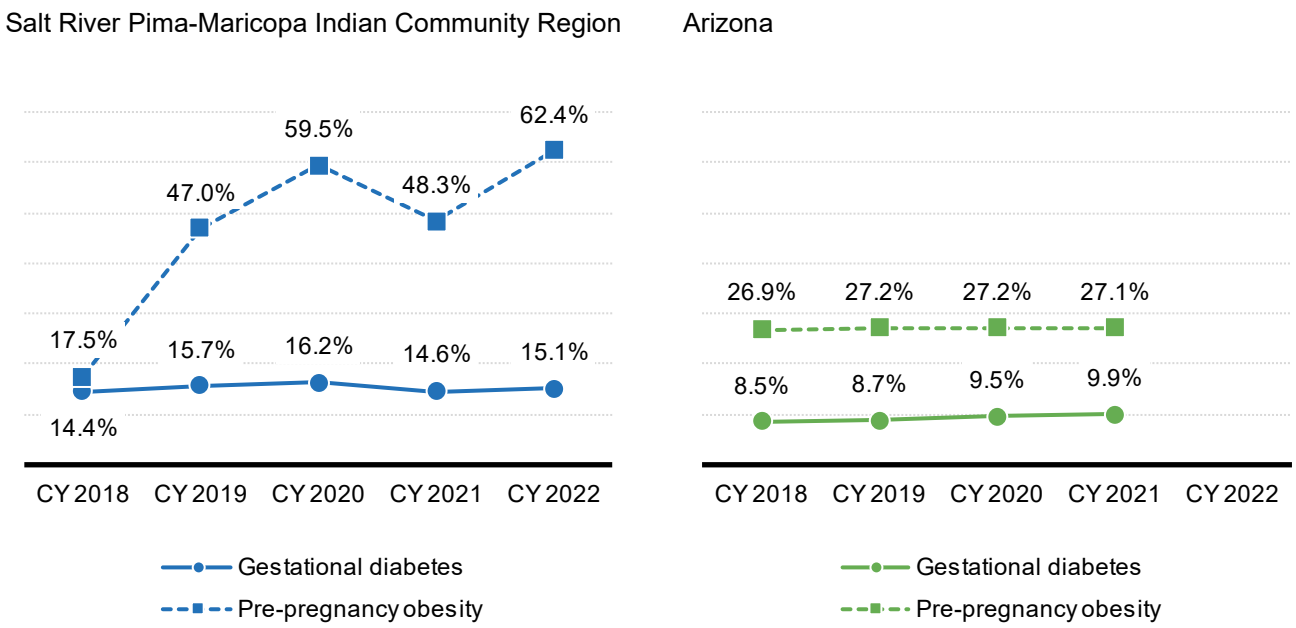
Table 36. Births to mothers with gestational diabetes or pre-pregnancy obesity, 2020 to 2021

Geography	Calendar year	Number of births	Mother had gestational diabetes	Mother had pre-pregnancy obesity
Salt River Pima-Maricopa Indian Community Region	**2020**	**111**	**16.2%**	**59%**
	2021	**89**	**14.6%**	**48%**
All Arizona Reservations	2020	1,900		
	2021	*Data for All Arizona Reservations not available*		
Maricopa County	2020	49,191	9.3%	27%
	2021	50,245	9.6%	27%
Arizona	2020	76,781	10%	27%
	2021	77,857	10%	27%

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

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

Figure 50. Births to mothers diagnosed with pre-pregnancy obesity or gestational diabetes, 2018 to 2022



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

Note: Mothers of twins are counted twice in this figure. Data on pre-pregnancy obesity and gestational diabetes were not available for Arizona in 2022. Data for the region are presented as a range if fewer than 6 births in the region were to mothers diagnosed with one of these conditions.

Infant health

Health in early infancy shapes childhood health for many years to come. Infants who are born preterm or at a low birthweight have a higher possibility of short- and long-term health complications. Preterm birth is defined as birth at less than 37 weeks of gestation. Risks related to preterm births include respiratory, immune, neurological, vision, hearing and intestinal developmental issues.[345] Infants born preterm also have increased rates of mortality during their first 28 days to 1 year of life, longer hospitalization after birth, more health care costs and physical impairments.[346, 347] Preterm births are more likely among mothers who are under age 20, over the age of 35, low income, experience infections during pregnancy or engage in substance use.[348]

Low birthweight is defined as weighing less than 5 pounds and 8 ounces (2,500 grams) at birth. Babies born with this condition have a higher risk of infant mortality and long-term health problems such as diabetes, hypertension and cardiac disease.[349, 350] Low birthweight risk factors include low maternal weight during pregnancy, preterm birth, teen pregnancy, pregnancy over the age of 35, high blood pressure, diabetes, substance use and air pollution.[351]

Newborns are admitted into neonatal intensive care units (NICUs) in hospitals for numerous reasons that can vary across medical providers and have implications for the short- and long-term health of babies and families.[352] NICU stays can take a large emotional and financial toll on families, especially families

living far from the hospital. However, although NICU admissions may be an indicator of important health concerns in newborns, including low birthweight, they can also be a site of family-based interventions that can positively impact infant development and parent-child relationships.[353]

For parents who are able to breastfeed, the American Academy of Pediatrics recommends breastfeeding infants exclusively for the first 6 months after birth, followed by a combination of breastfeeding and other foods for up to 2 years or longer.[354] Breastfeeding offers a variety of benefits to infants due to the nutrition and antibodies that human breast milk provides. These benefits include lowering an infant's risk of type 1 diabetes, obesity, ear infections, SIDS, asthma and gastrointestinal infections.[355] Robust data on breastfeeding rates are only available for children served through the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) program.

How the Salt River Pima-Maricopa Indian Community Region is faring

- In 2020, almost one in ten (9.9%) births in the Salt River Pima-Maricopa Indian Community Region were low birthweight births, a higher proportion than seen in Maricopa County (7.3%), all Arizona reservations (8.9%) and Arizona (7.4%) (Table 37).
- The Healthy People 2030 target for the percentage of preterm births is 9.4% or fewer. The region did not meet this target in four of the last five years and showed an overall increasing trend in preterm births, with 20.4% of births occurring preterm in 2022 (Table 37 & Figure 51).
- Twelve percent of the 89 births in the Salt River Pima-Maricopa Indian Community Region in 2021 resulted in admission to the NICU (Table 37).
- From 2017 to 2020, over half of WIC-enrolled infants in the Salt River Pima-Maricopa Indian Community Region were breastfed at least once (between 56%-61%). The region had slightly lower rates of breastfeeding than those seen across all ITCA WIC Programs, with around two-thirds of WIC-enrolled infants ever breastfed in three of four years (between 65%-71%). Trends in breastfeeding at 6 months did increase in the region during this time, from 20% in 2018 to 30% in 2020 (Figure 52).

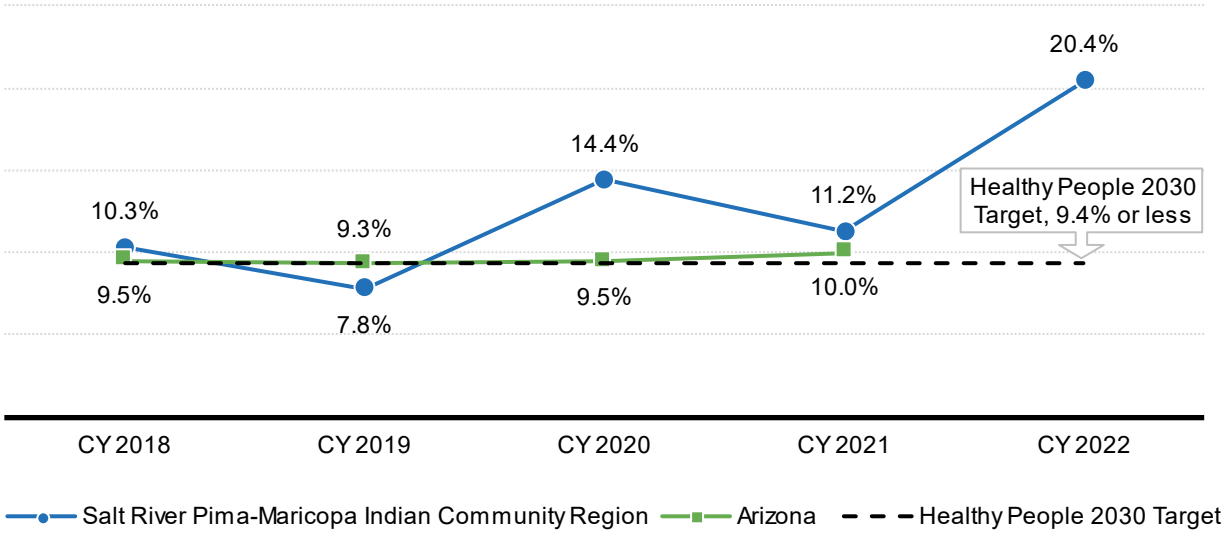
Table 37. Selected birth outcomes, 2020 to 2021

Geography	Calendar year	Number of births	Baby weighed less than 2500 grams	Baby was preterm (less than 37 weeks)	Baby was admitted to the NICU
Salt River Pima-Maricopa Indian Community Region	**2020**	**111**	**9.9%**	**14.4%**	**9%**
	2021	**89**	**9.0%**	**11.2%**	**12%**
All Arizona Reservations	2020	1,900	8.9%	12.6%	N/A
	2021	*Data for All Arizona Reservations not available*			
Maricopa County	2020	49,191	7.3%	9.5%	7%
	2021	50,245	7.8%	10.1%	7%
Arizona	2020	76,781	7.4%	9.5%	8%
	2021	77,857	9.6%	10.0%	8%
Healthy People 2030 targets				9.4%	

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

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

Figure 51. Preterm births, 2018 to 2022



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

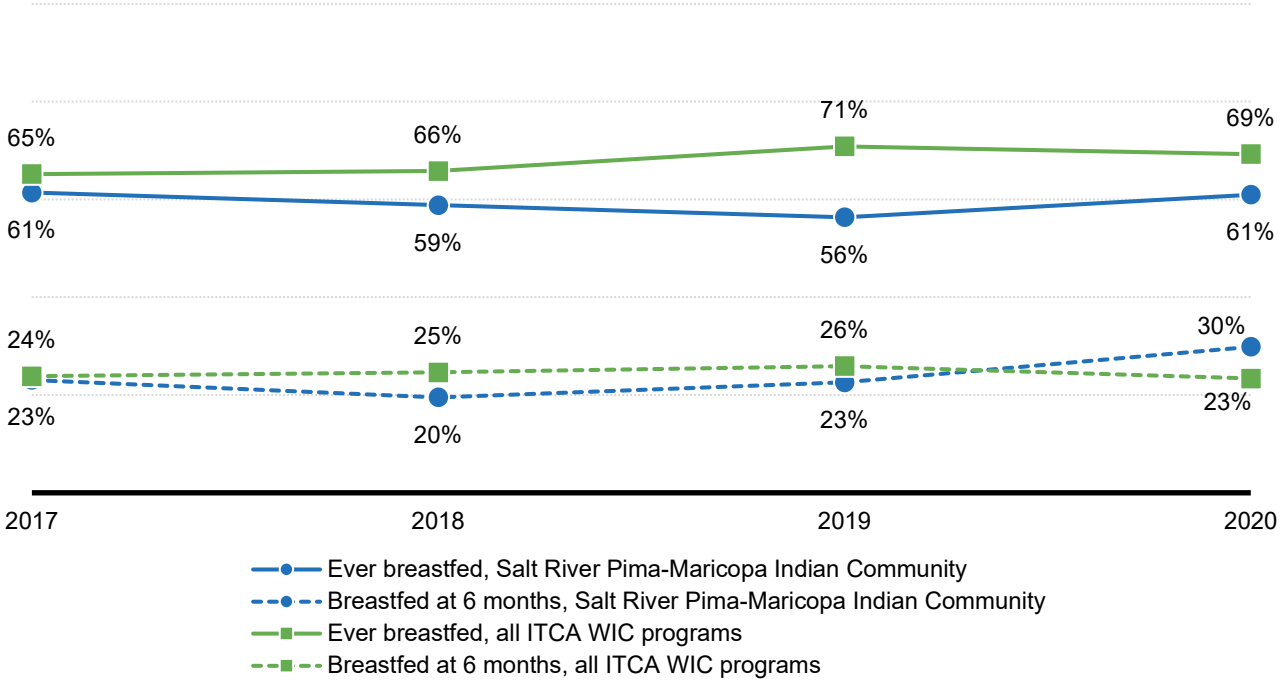
Table 38. Breastfeeding status for WIC enrolled infants, 2020

Geography	Infants for whom breastfeeding status is determined	Number and percent of infants ever breastfed		Breastfed infants who are breastfed for at least 6 months
Salt River Pima-Maricopa Indian Community	**123**	**46**	**61%**	**30%**
All ITCA WIC programs	1,754	729	69%	23%

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Note: 'Ever breastfed' means that an infant was breastfed or received human milk at birth or sometime after, for any duration of time.

Figure 52. Percent of WIC-enrolled infants ever breastfed and breastfed at 6 months, 2017 to 2020



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Childhood infectious disease and immunization

Immunization against preventable diseases protects both children and the surrounding community from potential illness and death. Immunization protects not only the vaccinated person but also individuals who are unable to be vaccinated through "community immunity."[356] In order to attend state-licensed child care programs and public or charter schools, children are required to receive specific vaccinations or obtain an official exemption, which can be requested for medical, personal or religious reasons.[357]

Statewide and nationally, childhood immunization rates have been declining in recent years. The COVID-19 pandemic exacerbated disparities in health care access, including routine immunizations, that specifically impacted children who are Black, Hispanic, low-income, live in rural areas or lack health insurance.[358] National survey data from the Pew Research Center also show that declining childhood immunization rates, particularly for the Measles, Mumps and Rubella (MMR) vaccine, can be linked to parents' shifting attitudes towards vaccines. While most U.S. parents continue to express confidence in the value of childhood vaccination for MMR, a sizable proportion expressed concerns about the necessity of vaccines and showed declining support for vaccine requirements for children to attend public schools.[359]

Respiratory syncytial virus (RSV) and influenza (flu) are leading causes of serious illness in young children, and following the COVID-19 pandemic in 2020, recent flu and RSV seasons have been more severe nationwide.[360, 361] RSV is the most frequent cause of hospitalization in children under 1 year of age.[362] In 2023, two new preventative therapies for RSV were approved—a single-dose antibody medication for infants, and an adult immunization for pregnant people administered in the 3rd trimester of pregnancy.[363, 364] These new treatments have the potential to prevent severe illness in infants and young children, but shortages of the antibody medication have led the Centers for Disease Control and Prevention (CDC) to recommend prioritizing access for the highest-risk infants. This includes infants under 6 months of age, those with underlying health conditions such as lung or heart disease and American Indian or Alaska Native infants under 8 months of age, as well as older American Indian or Alaska Native infants who live in remote areas with limited access to health care facilities.[365] The flu can also cause serious illness in young children under age 5, particularly for children birth to age 2, who are the most likely to be hospitalized with flu complications.[366] The American Academy of Pediatrics recommends that all children ages 6 months and older be vaccinated against influenza each year.[367]

How the Salt River Pima-Maricopa Indian Community Region is faring

- Data from the IHS Phoenix Service Unit show that just over half (53%) of toddlers ages 19 to 35 months had completed their full immunization series on-time for their age group in fiscal year (FY) 2020 (Table 39).[xxvi] The target set by IHS for toddlers with a complete vaccine series in this age range in fiscal year FY 2020 was 45.9%, which meant that immunization rates in the Community exceeded this national target.
- Across all required immunizations, children enrolled in the Salt River Early Childhood Education Center (ECEC) in the Salt River Pima-Maricopa Indian Community Region had higher vaccination rates (DTaP[xxvii], 96.5%; Polio, 99.4%; MMR, 99.4%) than the state overall (DTaP, 90.6%; Polio, 92.2%; MMR, 93%) in the 2022-23 school year. The region and state both

[xxvi] The complete vaccine series for this age group is 4 or more doses of Diphtheria, Tetanus and Pertussis (DTaP), 3 or more doses of Polio, 1 or more doses of measles, mumps and rubella (MMR) vaccine, 3 or more doses of Haemophilus influenzae type B (hib) vaccine, 3 or more doses of hepatitis B vaccine, 1 or more dose of Varicella vaccine and 4 or more doses of Pneumococcal conjugate vaccine (PCV).

[xxvii] *The DTaP vaccine immunizes against Diphtheria, Tetanus and Pertussis.*

met the Healthy People 2030 DTaP immunization target of at least 90%. No children in child care in the region received exemptions of any kind from required immunizations in the 2022-23 school year (Table 40).

- Kindergarten immunization rates at Salt River Elementary School (DTaP, 80%; Polio, 84.4%; MMR, 88.9%) were notably lower than rates among children in child care in the 2022-23 school year, and even fell below immunization rates seen statewide (DTaP 89.6%; Polio 90.3%; MMR 89.9%). Both the region and state failed to meet the Healthy People 2030 kindergarten MMR immunization target of 95% (Table 41). Regional immunization rates may be too low to assure community immunity of preventable infectious diseases. For measles, for example, 95% of children need to be vaccinated to ensure herd immunity in order to protect communities and achieve and maintain measles elimination.[368]
- No children in kindergarten in the region received exemptions of any kind from required immunizations between the 2020-21 and 2022-23 school years (Table 42).
- In 2022, there were 32 confirmed and probable cases of respiratory syncytial virus (RSV) and fewer than 31 cases of Influenza among young children (birth to age 5) in the Salt River Pima-Maricopa Indian Community Region, larger numbers than seen in the previous three years (Table 43).

Table 39. Children (ages 19-35 months) from the Salt River Pima-Maricopa Indian Community with complete immunizations through IHS, FY 2020

	Total number of children (ages 19-35 months) assessed	Number and percent of children (ages 19-35 months) with complete immunizations (4313*314 series)	
Salt River Pima-Maricopa Indian Community	81	43	53%

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Table 40. Children in child care with selected required immunizations, 2022-23

Geography	Number Enrolled	DTaP	Polio	MMR	Religious exemption	Medical exemption	Exempt from every required vaccine
Salt River Early Childhood Education Center	**172**	**96.5%**	**99.4%**	**99.4%**	**0.0%**	**0.0%**	**0.0%**
Maricopa County	47,152	89.6%	91.2%	92.1%	6.5%	0.2%	4.3%
Arizona	70,690	90.6%	92.2%	93.0%	5.7%	0.2%	4.0%
Healthy People 2030 targets		90.0%					

Source: Arizona Department of Health Services (2023). Childcare Immunization Coverage, 2022-23 School Year. Unpublished data received by request & aggregated by the Community, Research, & Development Team. Arizona Department of Health Services (2023). Childcare Immunization Coverage by County, 2022-23 School Year. Retrieved from https://www.azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage

Table 41. Kindergarteners with selected required immunizations, 2022-23

Geography	Number Enrolled	DTaP	Polio	MMR	Personal belief exemption	Medical exemption	Exempt from every required vaccine
Salt River Elementary School	**45**	**80.0%**	**84.4%**	**88.9%**	**0.0%**	**0.0%**	**0.0%**
Maricopa County	52,553	89.3%	90.1%	89.8%	8.0%	0.2%	4.8%
Arizona	78,937	89.6%	90.3%	89.9%	7.3%	0.2%	4.6%
Healthy People 2030 targets				95.0%			

Source: Arizona Department of Health Services (2023). Kindergarten Immunization Coverage, 2022-23 School Year. Unpublished data received by request & aggregated by the Community, Research, & Development Team. Arizona Department of Health Services (2023). Kindergarten Immunization Coverage by County, 2022-23 School Year. Retrieved from https://www.azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage

Table 42. Kindergarten immunization exemption rates, 2018-19 to 2022-23

	Kindergarteners with personal belief exemptions					Kindergarteners exempt from all vaccines				
Geography	2018-19	2019-20	2020-21	2021-22	2022-23	2018-19	2019-20	2020-21	2021-22	2022-23
Salt River Elementary School	**1.6%**	**N/A**	**0.0%**	**0.0%**	**0.0%**	**1.6%**	**N/A**	**0.0%**	**0.0%**	**0.0%**
Maricopa County	6.5%	5.9%	5.9%	7.0%	8.0%	4.0%	3.7%	3.6%	3.9%	4.8%
Arizona	5.9%	5.4%	5.4%	6.6%	7.3%	3.8%	3.4%	3.3%	3.7%	4.6%

Source: Arizona Department of Health Services (2023). Childcare Immunization Coverage, 2018-19 to 2022-23 School Years. Unpublished data received by request & aggregated by the Community, Research, & Development Team. Arizona Department of Health Services (2023). Childcare Immunization Coverage by County, 2018-19 through 2022-23 School Years. Retrieved from: https://www.azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage

Note: Data from Salt River Elementary School was not available from the ADHS dataset for the 2019-20 school year.

Table 43. Confirmed and probable cases of infectious diseases in children birth to age 5, 2019 to 2022

	Confirmed & probable RSV cases				Confirmed & probable Influenza cases			
Geography	CY 2019	CY 2020	CY 2021	CY 2022	CY 2019	CY 2020	CY 2021	CY 2022
Salt River Pima-Maricopa Indian Community Region	**20**	**13**	**20**	**32**	**27**	**13**	**<6**	**31**
Maricopa County	2,767	2,645	3,077	5,393	3,228	3,350	275	3,866
Arizona	4,840	4,459	4,935	9,606	6,459	6,094	508	7,334

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

Infant and child hospitalization and mortality

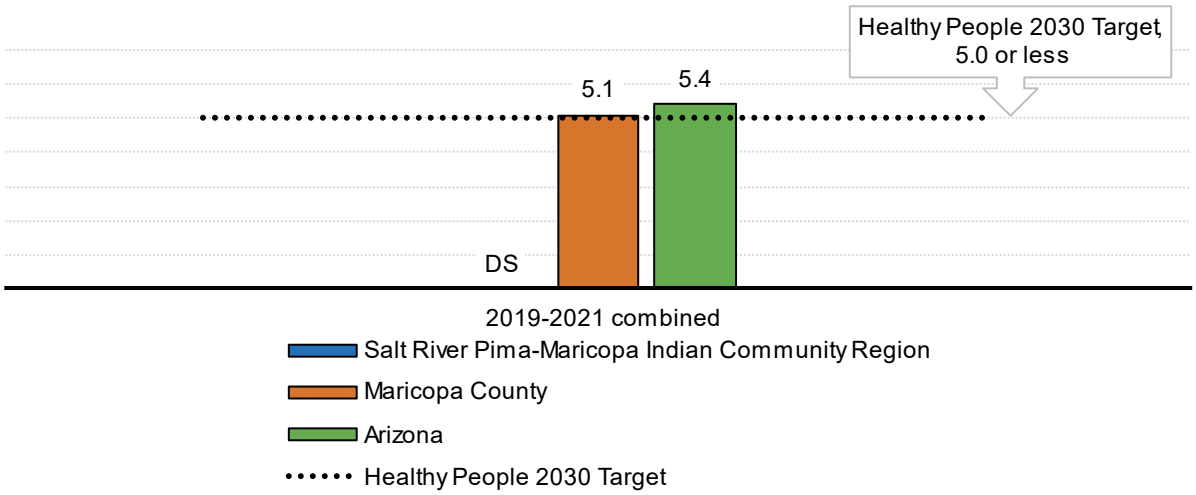
Infant mortality refers to the death of infants under 1 year of age. Some of the most common causes of infant mortality in Arizona and the U.S. include congenital abnormalities, low birth weight, preterm birth, pregnancy complications, sudden infant death syndrome (SIDS) and unintentional injuries.[369, 370, 371] According to provisional CDC data, infant mortality increased between 2021 and 2022 by 3% nationally, 13% in Arizona for all infants and 21% for American Indian or Alaska Native infants nationwide, the highest increase seen for any group.[372] In addition to increasing, the infant mortality rates for American Indian or Alaska Native (9.1 deaths per 1,000 live births) and Black infants (10.9) were also notably higher than White (4.52) or Hispanic (4.9) infants in 2022, racial disparities that have been linked to maternal care deserts, which are particularly prevalent on tribal lands.[373, 374] This indicates a serious need to increase access to timely prenatal care, newborn screening and home visiting programs in rural and tribal areas to begin to reduce infant mortality rates.[375]

The leading cause of death for children birth to age 17 in the United States is unintentional injuries.[376] The most prevalent accidental injuries are car crashes, drowning, falls, suffocation, fires and poisoning.[377] Deaths from unintentional injuries are more common for children living in rural areas, as well as among American Indian and Alaska Native children.[378, 379] Increased awareness and safety precautions have helped reduce childhood deaths in the last decade, including child swimming lessons, proper infant sleeping position, installing smoke detectors, keeping medications out of reach, practicing gun safety and utilizing seatbelts and helmets.[380]

How the Salt River Pima-Maricopa Indian Community Region is faring

- Data on infant mortality in the Salt River Pima-Maricopa Indian Community Region were suppressed for the combined years of 2019 to 2021 because there were fewer than six deaths among infants in these three years. Maricopa County's infant mortality rate (5.1 deaths per 1,000 live births) was slightly lower than Arizona (5.4) and neither met the Healthy People 2030 target (5.0 or fewer) (Figure 53).
- The most recent data available on non-fatal emergency department visits due to unintentional injuries among young children (birth to age 4) in the Salt River Pima-Maricopa Indian Community Region showed similar trends to those seen statewide. Between 2016 and 2020, the majority of emergency department visits among young children in the region were due to falls (n=156), with smaller numbers due to being struck by or against an object, natural/environmental or other causes (Figure 54).
- Between 2018 and 2021, there were 9 total deaths of children birth to age 17 in the region. The most common cause was accidents, making up more than three-quarters (78%) of child deaths. This was also the most common cause of child death across the state, accounting for 20% of total child deaths (Figure 55).

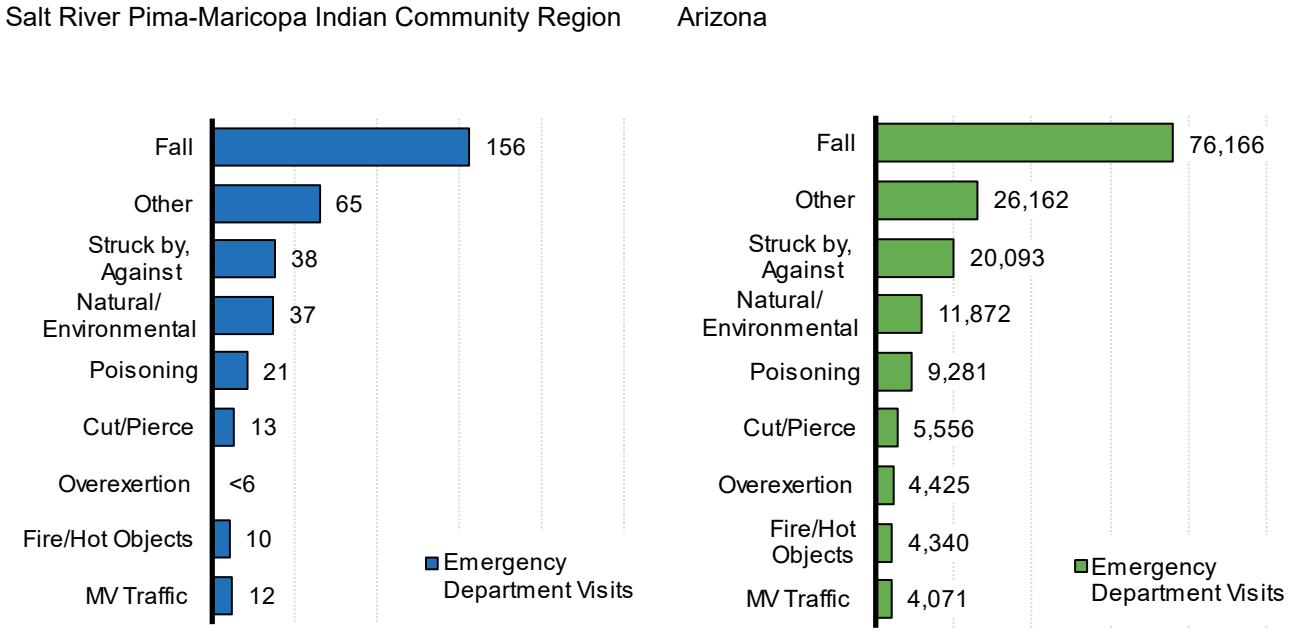
Figure 53. Infant mortality rates, 2019 to 2021 combined



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

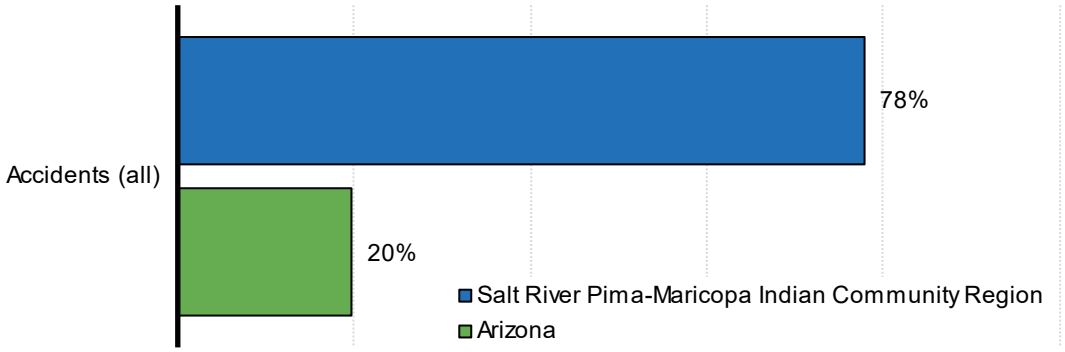
Note: There were between 1 and 5 infant deaths between 2019 and 2021 in the region, meaning that the infant mortality rate is suppressed per ADHS policy. The infant mortality rate is the number of infant deaths (under age 1) per 1,000 live births.

Figure 54. Non-fatal emergency department visits due to unintentional injuries for children birth to age 4 by selected mechanism of injury, 2016-2020 combined



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

Figure 55. Leading cause of death for children birth to age 17, 2018-2021 combined



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

Note: The leading causes of child death in Arizona are accidents (20%), congenital malformations (15%), low birthweight (9%), intentional self-harm/suicide (6%), and cancer/malignant neoplasms (5%). Causes of death in this figure are ordered by the leading causes of death in the region. No other cause of death caused more than 5 child deaths between 2018 and 2021.

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

FAMILY SUPPORT AND LITERACY

FAMILY SUPPORT AND LITERACY

Why it Matters

Children's long-term well-being and success is tied to their relationships and experiences with their caregivers. Adverse childhood experiences (ACEs) refer to childhood experiences of abuse, neglect and other life events that can negatively impact children's immediate and long-term well-being.[xxviii, 381] ACEs have been associated with negative effects on development, educational achievement, future employment, mental health, drug and alcohol use and overall increased health care utilization.[382, 383, 384] ACEs are more prevalent among Arizona children with special health care needs and children living in poverty.[385]

Social, physical, academic and economic outcomes are positively influenced by healthy relationships and interactions with family members and caregivers during childhood.[386, 387, 388, 389, 390] An understanding of, and ability to utilize, positive parenting skills is an important protective factor that reduces the likelihood of abuse and neglect, leading to better childhood and long-term outcomes.[391] Positive Childhood Experiences (PCEs), including positive parent-child relationships and feelings of safety and support, have been shown to have positive long term impacts on mental and relational health.[392] Even if children have experienced multiple ACEs, if their families show high levels of resilience and connection (e.g., working together to solve problems, staying hopeful in difficult times and talking together about things that matter to their family) they show higher rates of flourishing, characterized by healthy social and emotional development and an open and engaged approach to learning.[393] These higher flourishing scores coupled with higher ACE scores point to the reality that childhood flourishing can, and does, exist amid adverse experiences and can potentially help mitigate their negative health effects.[394] Supporting families with the knowledge and skills to promote resilience and connection can therefore be critical for ensuring children's long-term well-being.

What the Data Tell Us

Early literacy

Parents and families can play an important role in promoting early academic skills. When families read, sing and tell stories together, it can help young children develop reading and writing fluency as well as their capacity for reading comprehension.[395, 396, 397] Literacy practices at home have also been found to increase children's motivation to learn.[398] These early literacy skills are important because they are linked to durable outcomes including elementary school performance and overall educational achievement.[399]

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

Some families may face challenges to implementing literacy practices with their young children, especially when they are low-resourced. Barriers include being unfamiliar with child development benchmarks, having limited free time to spend with children, and lower access to books in the home.[400] In Arizona, reading scores have been slowly approaching the national average, however American Indian students still have the lowest scores as a group.[401] Community programs, family resources centers, home visitation and larger-scale initiatives can help caregivers implement home-based literacy practices to improve children's reading scores. Recognizing the influence caregivers can have, the American Academy of Pediatrics suggests that pediatricians provide information to families about the benefits of early literacy practices. Doctor's offices and other community locations are also places where initiatives like Read on Arizona and Reach Out & Read may provide books and other materials that families can bring home.[402]

How the Salt River Pima-Maricopa Indian Community Region is faring

- According to the 2022 First Things First (FTF) Salt River Pima-Maricopa Indian Community Regional Needs and Assets Report, the pediatric clinic at the River People Health Center participates in Reach Out & Read, a funded strategy of the Salt River Pima-Maricopa Indian Community First Things First Regional Partnership Council. The program provides a book to young children at each well-child visit while the pediatrician educates parents on the importance of reading with their child.[403]
- Family and parent education services are available in the region through both early learning programs and community service providers.[404] These services include:
    - Parenting classes at the Accelerated Learning Academy (ALA);
    - Parenting classes and a teen parent discussion group funded by the FTF Regional Partnership Council;
    - A 20-week parenting course run by the Tribal Social Services Department;
    - A 24-month Fatherhood program and Healthy Relationship courses offered through the Life Enhancement and Resource Network (LEARN); and
    - Coaching and peer support offered through Behavioral Health Services, including a Positive Indian Parenting group.[405]
- The Way of Life Facility (WoLF) is a state-of-the-art recreation facility and community gathering space run by the Salt River Pima-Maricopa Indian Community Recreation Department. The Salt River Tribal Library at the WoLF hosts story hours and other literacy activities for young children and their families.[406]

Mental and behavioral health

Early childhood experiences shape the developing brain, which in turn shapes other aspects of development including forming human connections, coping with adversity, and even how successful one

is in school, work, and community life down the road.[407] Parent and caregiver mental health and wellbeing plays an important role in the early childhood environment, the provision of essential care and availability of stable family bonds.[408, 409] Community services that support families with young children can make a lasting difference, especially when they provide a connection to culture.[410, 411, 412]

How the Salt River Pima-Maricopa Indian Community Region is faring

- According to the 2022 Needs and Assets Report, Behavioral Health Services provides mental health services for Community residents. Services for young children ages birth to 5 include mental health assessments and play therapy as well as referrals to respite care services. Behavioral Health Services has also sponsored training in infant and toddler mental health for all staff as well as the Salt River Pima-Maricopa Indian Community Social Services Department, Family Advocacy Center and Early Childhood Education Center.[413]
- Behavioral Health Services for caregivers of young children include family, couples and individual outpatient counseling; substance abuse and domestic violence counseling and victim advocate services; intensive outpatient care and psychiatric services; and a 24/7 crisis hotline. During the pandemic, Behavioral Health Services pivoted to remote services and introduced a Zoom with a Counselor monthly program open to anyone in the community. In-person counseling services resumed in April 2021, but Behavioral Health Services has continued to provide telehealth services for clients who prefer this modality.[414]

Substance use disorders

Parental substance use has major implications for children's health and well-being. Children of parents with substance use disorders are frequently referred to child welfare services due to neglect or abuse and face a higher risk of later mental health and behavioral health issues, including developing substance use disorders themselves.[415, 416] Access to treatment for substance use disorders and supports for parents and families grappling with these issues can help to ameliorate the short and long-term impacts on young children.[417, 418]

How the Salt River Pima-Maricopa Indian Community Region is faring

- Between 2018 and 2021, there were 37 deaths with opiates or opioids contributing in the Salt River Pima-Maricopa Indian Community Region (Table 44).
- Residential substance abuse treatment for adults are available in the Community through the Journey to Recovery residential treatment facility. A new building broke ground in 2023, and the new facility is expected to open soon.[419]

Table 44. Number of deaths with opiates or opioids contributing, 2018-2021 combined

Geography	Number of deaths with opiates or opioids contributing, 2018-2021
Salt River Pima-Maricopa Indian Community Region	**37**
Maricopa County	4,198
Arizona	6,315

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

Note: About 35% of overdose deaths statewide were missing address information and thus could not be geocoded to an FTF region, but county assignments were available from death certificates.

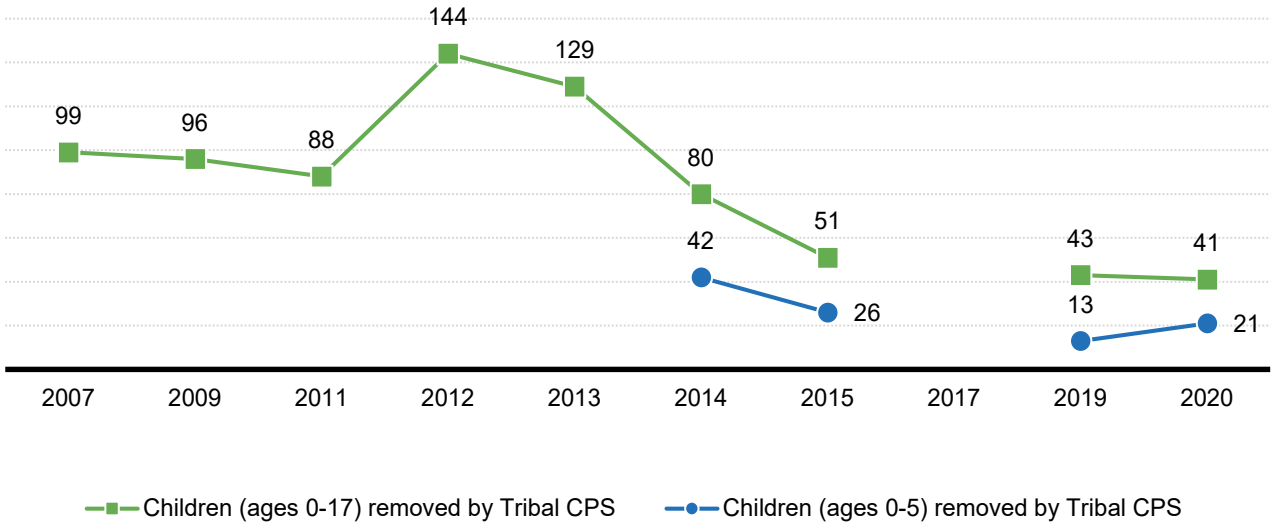
Child removals

In situations where the harm in remaining with their family is determined to be too great to a child, they may be removed from their home, either temporarily or permanently. In accordance with the Indian Child Welfare Act of 1978 (ICWA), nearly all tribal governments set their own child welfare laws and manage their own child welfare systems.[420] ICWA established national standards to prevent unwarranted removals and policies for all state custody proceedings involving Indian children. Under ICWA, an Indian child's family and tribe are able and encouraged to be actively involved in the decision-making that takes place regarding the child, and they may petition for tribal jurisdiction over the custody case.[421] ICWA also mandates that states make every effort to preserve Indian family units by providing family services before an Indian child is removed from his or her family and after an Indian child is removed through family reunification efforts.[422] Despite being challenged recently by several states, ICWA was upheld by the supreme court.[423, 424] Groups including the National Indian Child Welfare Association (NICWA) and Uniform Law Commission (ULC) are investigating whether state laws could be implemented to promote better compliance with ICWA without threatening tribal sovereignty.[425]

How the Salt River Pima-Maricopa Indian Community Region is faring

- According to the 2022 Needs and Assets Report, Child Welfare services in the Salt River Pima-Maricopa Indian Community Region are provided by Salt River Pima-Maricopa Indian Community Social Services Department, Tribal Child Protective Services (CPS) and the Family Advocacy Center (FAC). The Family Advocacy Center is a unique facility that co-locates FAC staff, Tribal CPS and tribal police and prosecution to facilitate cross-agency coordination and ensure that child victims can be cared for in a safe and welcoming environment. Key informants in the 2022 report highlighted service coordination as a major strength of the child welfare system in the Community, as Tribal CPS and Social Service staff coordinate with multiple departments and agencies to ensure that families are referred to needed services.[426]
- From 2007 to 2020, the number of children (ages 0 to 17) removed by Tribal CPS declined substantially, from a high of 144 in 2012 to a low of 41 in 2020. In 2020, 21 young children (ages 0 to 51) were removed by Tribal CPS (Figure 56). This decrease in removals was due to changes in policy both locally and federally to prioritize family preservation and minimize child removals whenever it is safe to do so.[427]
- Between 2013 and 2020, the number of ICWA placements also fell from peak of 110 placements in 2013 to 77 in 2020 (Table 45).
- The number of substantiated cases of child abuse and/or neglect increased from 50 in 2019 to 98 in 2020. Children ages birth to 5 accounted for 21 of these cases in 2019 and 47 in 2020 (Figure 57). In the 2022 Needs and Assets Report, key informants attributed at least some of this increase to the onset of the COVID-19 pandemic, which was highly stressful for many families.[428]

Figure 56. Children removed by Tribal CPS, 2007 to 2020



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Table 45. Trends in available child welfare indicators, 2007 to 2020

	2007	2009	2011	2012	2013	2014	2015	2019	2020
Children (ages 0-5) removed by Tribal CPS	N/A	N/A	N/A	N/A	N/A	42	26	13	21
Children (ages 0-17) removed by Tribal CPS	99	96	88	144	129	80	51	43	41
Children (ages 0-17) in ICWA placements	N/A	N/A	98	102	110	83	79	79	77

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Table 46. Substantiated cases of child abuse and/or neglect, 2019 and 2020

	2019	2020
Children (ages 0-5)	21	47
Children (ages 0-17)	50	98

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Foster care

The Family First Prevention Services Act, signed into federal law on February 9, 2018, aims to ensure children are placed in the least restrictive, most family-like setting appropriate to their unique needs when foster care is needed. One effect of the Family First Prevention Services Act has been an increased focus on kinship placements, which are placements of children with relatives or close family friends.[429] In recent years, the number of unlicensed kinship homes has even exceeded the number of foster homes in Arizona.[430] More than half of American Indian and Alaska Native children (55%) in foster care in Arizona were in kinship placements, a much higher rate of kinship placement than that seen nationwide.[431]

How the Salt River Pima-Maricopa Indian Community Region is faring

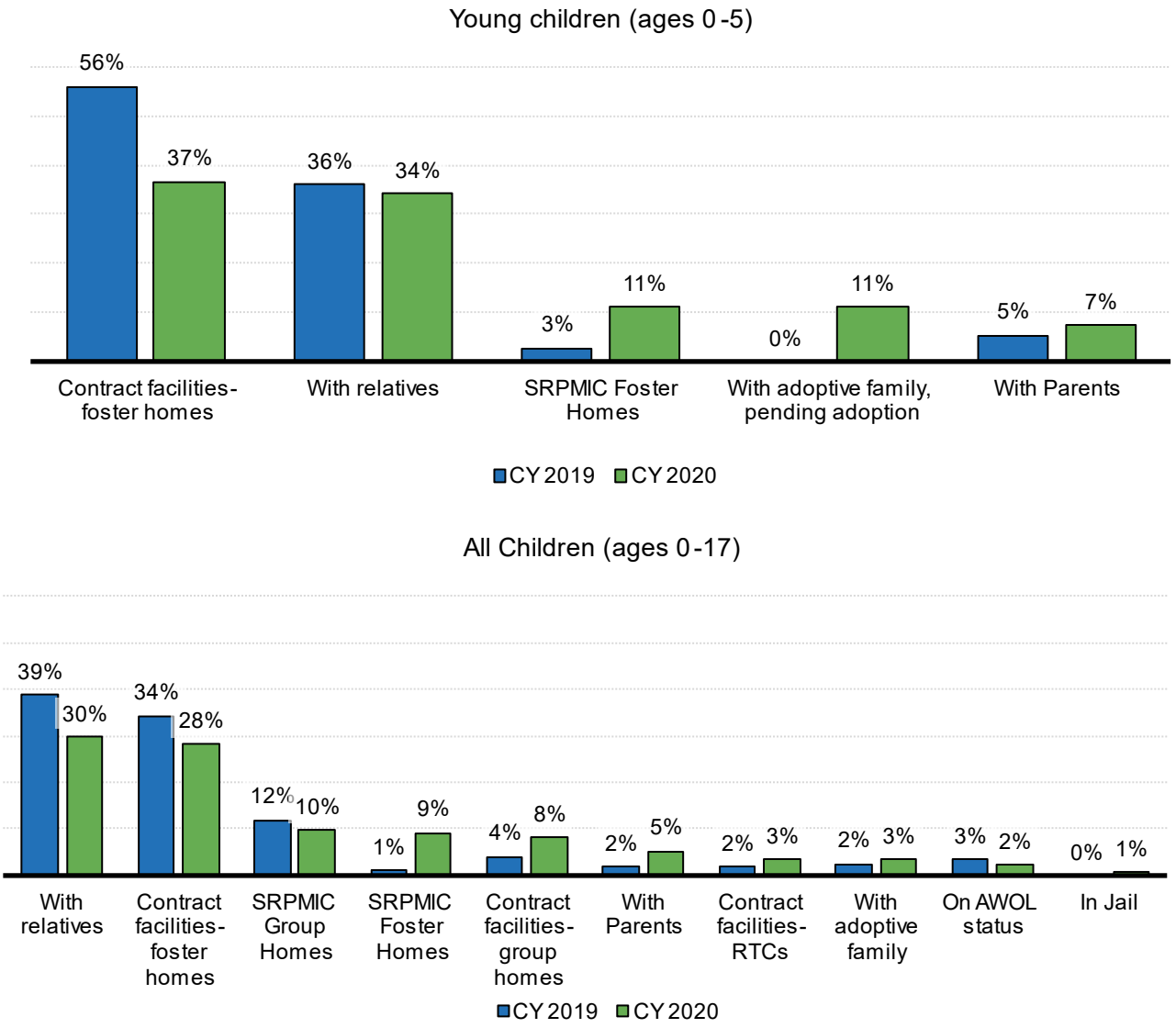
- In 2019, there were 201 total wards of the court (ages 0 to 17) in the region, 36% of which were young children ages birth to 5. In 2020, there were 174 total wards of the court, and almost half were young children (n=82, 47%) (Table 47).
- In 2020, children birth to 5 were most frequently placed in foster homes contracted with Salt River Pima-Maricopa Indian Community Social Services (37%), followed by placements with relatives (34%), placements in Salt River Pima-Maricopa Indian Community foster homes (11%), placements with adoptive families pending adoption (11%) and placement with parents (7%) (Figure 57).
- For the overall population of children birth to 17 in the care of Salt River Pima-Maricopa Indian Community in 2020, children were most often placed with relatives (30%), followed by contracted foster homes (28%), Salt River Pima-Maricopa Indian Community group homes (10%) and Salt River Pima-Maricopa Indian Community foster homes (9%) (Figure 57).
- There were 10 off-reservation foster homes with 22 beds certified by Salt River Pima-Maricopa Indian Community Social Services in 2019. This increased slightly to 12 off-reservation homes with 23 beds in 2020. There were no on-reservation foster homes during these years (Table 48).

Table 47. Placement of wards of the court, 2019 to 2020

	Young children (ages 0-5), 2019	Young children (ages 0-5), 2020	All children (ages 0-17), 2019	All children (ages 0-17), 2020
Total Wards of the Court	75	82	201	174
Placed with relatives	36%	34%	39%	30%
In SRPMIC Group Homes	0%	0%	12%	10%
In SRPMIC Foster Homes	3%	11%	1%	9%
In contract facilities- foster homes	56%	37%	34%	28%
In contract facilities- group homes	0%	0%	4%	8%
In contract facilities- residential treatment centers	0%	0%	2%	3%
With adoptive family, pending adoption	0%	11%	2%	3%
With Parents	5%	7%	2%	5%
On AWOL status	0%	0%	3%	2%
In Jail	0%	0%	0%	1%

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Figure 57. Placement of wards of the court, 2019 to 2020



Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Table 48. Foster care availability, 2019 and 2020

	On-reservation, 2019	Off-reservation, 2019	Total, 2019	On-reservation, 2020	Off-reservation, 2020	Total, 2020
SRPMIC Foster Care Homes	0	10	10	0	12	12
SRPMIC Foster Care Beds	0	22	22	0	23	23

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

APPENDIX 1: ADDITIONAL DATA TABLES

Population Characteristics

Table 49. Population ages 0-5 by single years of age in the 2020 Census

Geography	Population (Ages 0-5)	Population under age 1	Population age 1	Population age 2	Population age 3	Population age 4	Population age 5
Salt River Pima-Maricopa Indian Community Region	**521**	**73**	**87**	**78**	**93**	**90**	**100**
All Arizona Reservations	15,140	2,183	2,338	2,492	2,570	2,733	2,824
Maricopa County	310,813	46,904	48,734	50,509	52,958	54,598	57,110
Arizona	480,744	72,415	75,163	78,159	82,033	84,600	88,374
United States	22,401,565	3,480,117	3,532,512	3,672,703	3,797,741	3,917,162	4,001,330

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

Table 50. Race and ethnicity of the population of all ages, 2020 Census

Geography	Estimated population (all ages)	Hispanic or Latino	White, not Hispanic or Latino	Black or African American	American Indian or Alaska Native	Asian or Pacific Islander	Two or more races
Salt River Pima-Maricopa Indian Community Region	**6,321**	**17%**	**15%**	**2%**	**82%**	**1%**	**5%**
All Arizona Reservations	173,499	6%	5%	1%	93%	1%	3%
Maricopa County	4,420,568	31%	57%	8%	4%	7%	14%
Arizona	7,151,502	31%	57%	6%	6%	5%	14%
United States	331,449,281	19%	62%	14%	3%	8%	10%

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

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

Table 51. Race and ethnicity of children birth to age 4

Geography	Estimated number of children (birth to age 4)	Hispanic or Latino	White, not Hispanic or Latino	Black or African American	American Indian or Alaska Native	Asian or Pacific Islander	Two or more races
Salt River Pima-Maricopa Indian Community Region	**421**	**26%**	**3%**	**1%**	**94%**	**0%**	**7%**
All Arizona Reservations	12,316	8%	3%	1%	95%	1%	4%
Maricopa County	253,703	43%	43%	12%	5%	9%	21%
Arizona	392,370	44%	42%	10%	8%	7%	21%
United States	18,400,235	25%	54%	18%	4%	9%	16%

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

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

Table 52. Race and ethnicity for the mothers of babies born in 2020 and 2021

Geography	Calendar year	Number of births	Mother was non-Hispanic White	Mother was Hispanic or Latina	Mother was Black or African American	Mother was American Indian or Alaska Native	Mother was Asian or Pacific Islander
Salt River Pima-Maricopa Indian Community Region	**2020**	**111**	**7%**	**13%**	**0%**	**80%**	**0%**
	2021	**89**	**1.1 to 5.6%**	**13%**	**0%**	**81%**	**1.1 to 5.6%**
Maricopa County	2020	49,191	44%	41%	8%	3%	5%
	2021	50,245	44%	41%	8%	2%	5%
Arizona	2020	76,781	43%	41%	6%	5%	4%
	2021	77,857	43%	41%	6%	5%	4%

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

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

Table 53. Children birth to age 5 living with parents who are foreign-born, 2017-2021 ACS

Geography	Estimated number of children (birth to age 5) living with one or two parents	Number and percent living with one or two foreign-born parents	
Salt River Pima-Maricopa Indian Community Region	**520**	**0**	**0%**
All Arizona Reservations	14,097	191	1%
Maricopa County	307,353	85,793	28%
Arizona	473,732	115,267	24%
United States	22,399,131	5,504,770	25%

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

Note: The term "parent" here includes stepparents.

Table 54. Language spoken at home (by persons ages 5 and older), 2017-2021 ACS

Geography	Estimated population (age 5 and older)	Speak only English at home	Speak Spanish at home	Speak languages other than English or Spanish at home
Salt River Pima-Maricopa Indian Community Region	**6,422**	**92%**	**3%**	**5%**
All Arizona Reservations	166,148	47%	3%	50%
Maricopa County	4,101,545	74%	20%	6%
Arizona	6,666,597	73%	20%	6%
United States	310,302,360	78%	13%	8%

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

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

Table 55. English-language proficiency (for persons ages 5 and older), 2017-2021 ACS

Geography	Estimated population (age 5 and older)	Speak only English at home	Speak another language at home, and speak English very well	Speak another language at home, and do not speak English very well
Salt River Pima-Maricopa Indian Community Region	**6,422**	**92%**	**7%**	**1%**
All Arizona Reservations	166,148	47%	41%	12%
Maricopa County	4,101,545	74%	18%	8%
Arizona	6,666,597	73%	18%	8%
United States	310,302,360	78%	13%	8%

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

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

Table 56. Limited-English-speaking households, 2017-2021 ACS

Geography	Estimated number of households	Number and percent of limited-English-speaking households	
Salt River Pima-Maricopa Indian Community Region	**2,417**	**22**	**1%**
All Arizona Reservations	52,248	6,361	12%
Maricopa County	1,632,151	55,110	3%
Arizona	2,683,557	99,159	4%

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

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

Table 57. Grandchildren birth to age 5 living in a grandparent's household, 2020 Census

Geography	Estimated number of children (birth to age 5) living in households	Number and percent living in their grandparent's household	
Salt River Pima-Maricopa Indian Community Region	**521**	**219**	**42%**
All Arizona Reservations	15,140	6,558	43%
Maricopa County	310,813	37,279	12%
Arizona	480,744	64,792	13%
United States	22,401,565	2,520,305	11%

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

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

Economic Circumstances

Table 58. Median annual family income, 2017-2021 ACS

Geography	Median annual income for all families	Median annual income for all families with children under 18 years old	Median annual income for married-couple families with children under 18 years old	Median annual income for single-male-headed families with children under 18 years old	Median annual income for single-female-headed families with children under 18 years old
Salt River Pima-Maricopa Indian Community Region	**$40,600**	**$52,700**	**$88,000**	**NA**	**$47,000**
All Arizona Reservations	NA	NA	NA	NA	NA
Maricopa County	$85,900	$81,300	$106,700	$54,200	$38,300
Arizona	$78,800	$75,100	$100,000	$49,100	$35,000
United States	$85,000	$82,800	$110,000	$50,900	$32,600

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

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

Table 59. Children birth to age 5 living at selected poverty thresholds, 2017-2021 ACS

Geography	Estimated number of children (birth to age 5) who live with parents or other relatives	Percent of children under 50% of the poverty level	Percent of children between 50% and 99% of the poverty level	Percent of children between 100% and 184% of the poverty level	Percent of children at or above 185% of the poverty level
Salt River Pima-Maricopa Indian Community Region	**585**	**38%**	**15%**	**22%**	**25%**
All Arizona Reservations	15,304	27%	22%	22%	30%
Maricopa County	314,410	7%	11%	17%	65%
Arizona	486,513	9%	11%	19%	61%
United States	22,940,195	9%	10%	16%	65%

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

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

Table 60. Families participating in SNAP, state fiscal years 2018 to 2022

Geography	Households with one or more children (ages 0-5)	Number of families participating in SNAP					Percent of households with young children (0-5) participating in SNAP in SFY 2022
		SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	
Salt River Pima-Maricopa Indian Community Region	**348**	**293**	**252**	**193**	**167**	**159**	**46%**
Maricopa County	222,016	86,352	78,980	74,572	74,450	73,375	33%
Arizona	345,601	151,816	140,056	132,466	131,063	128,460	37%

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

Table 61. Children participating in SNAP, state fiscal years 2018 to 2022

Geography	Number of young children (ages 0-5) in the population	Number of children (0-5) participating in SNAP					Percent of young children (0-5) participating in SNAP in SFY 2022
		SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	
Salt River Pima-Maricopa Indian Community Region	**521**	**481**	**406**	**305**	**260**	**256**	**49%**
Maricopa County	310,813	131,473	120,427	113,174	111,568	109,794	35%
Arizona	480,744	229,275	211,814	198,961	194,771	190,968	40%

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

Table 62. Lunches served through NSLP, 2019-20 to 2021-22

Geography	Number of sites			Number of lunches served		
	2019-20	2020-21	2021-22	2019-20	2020-21	2021-22
Salt River Schools	**3**	**3**	**3**	**110,040**	**3,188**	**48,758**
Early Childhood Education Center	N/A	1	1	N/A	3,137	25,866
Salt River Elementary School	1	1	1	77,283	51	21,165
Salt River Accelerated Learning Academy	1	1	1	5,844	N/A	1,727
Salt River High School	1	N/A	N/A	26,913	N/A	N/A
Maricopa County Schools	N/A	727	1,016	49,441,468	15,908,270	29,134,220
Arizona Schools	N/A	1,247	1,886	76,454,370	22,911,751	44,010,999

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

Table 63. Lunches served through SFSP, 2019-20 to 2021-22

Geography	Number of sites			Number of lunches served		
	2019-20	2020-21	2021-22	2019-20	2020-21	2021-22
Salt River Schools	**3**	**4**	**4**	**30,368**	**118,773**	**101,447**
Early Childhood Education Center	1	1	1	6,065	102,647	48,043
Salt River Elementary School	N/A	1	1	N/A	9,459	38,861
Salt River Accelerated Learning Academy	N/A	1	1	N/A	2,938	5,105
Salt River High School	1	N/A	N/A	22,503	N/A	N/A
Red Mountain Boys & Girls Club (WoLF)	1	1	1	1,800	3,729	9,438
Maricopa County Schools	N/A	1,524	1,231	13,424,406	97,788,366	85,738,489
Arizona Schools	N/A	2,926	2,346	21,786,393	148,207,987	130,780,150

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

Table 64. Parents of children birth to age 5 who are or are not in the labor force, 2017-2021 ACS

Geography	Estimated number of children (birth to 5 years old) living with parent(s)	Living with two married parents, both in the labor force	Living with two married parents, one in the labor force and one not	Living with two married parents, neither in the labor force	Living with one parent, in the labor force	Living with one parent, not in the labor force
Salt River Pima-Maricopa Indian Community Region	**520**	**0%**	**11%**	**0.0%**	**59%**	**30%**
All Arizona Reservations	14,097	11%	14%	3%	38%	35%
Maricopa County	307,353	35%	27%	1%	30%	7%
Arizona	473,732	33%	27%	1%	30%	8%
United States	22,399,131	40%	25%	1%	26%	7%

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

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

Table 65. Persons of all ages in households with and without computers and internet connectivity, 2017-2021 ACS

Geography	Estimated number of persons (all ages) living in households	Have a computer and internet	Have a computer but no internet	Do not have a computer
Salt River Pima-Maricopa Indian Community Region	**6,938**	**85%**	**9%**	**6%**
All Arizona Reservations	177,201	51%	23%	26%
Maricopa County	4,312,788	92%	5%	3%
Arizona	6,930,677	90%	6%	4%
United States	321,899,278	90%	6%	4%

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

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

Table 66. Children birth to age 17 in households with and without computers and internet connectivity, 2017-2021

Geography	Estimated number of children (ages 0-17) living in households	Have a computer and internet	Have a computer but no internet	Do not have a computer
Salt River Pima-Maricopa Indian Community Region	**1,631**	**95%**	**4%**	**1%**
All Arizona Reservations	52,122	55%	24%	21%
Maricopa County	1,035,307	93%	6%	2%
Arizona	1,611,069	92%	6%	2%
United States	74,041,861	93%	5%	2%

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

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

Educational Indicators

Table 67. Third grade assessment results for Salt River Elementary School, 2017-18 and 2018-19

	Total tested	Minimally proficient	Partially proficient	Proficient	Highly proficient	Passing
Math, 2017-18	46	43%	28%	26%	2%	28%
Math, 2018-19	32	19%	44%	34%	3%	37%
English Language Arts, 2017-18	46	74%	7%	15%	4%	19%
English Language Arts, 2018-19	32	63%	19%	19%	0%	19%

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Table 68. Third grade assessment results for American Indian students enrolled in Mesa Public Schools, school years 2017-18 and 2018-19

	Minimally proficient	Partially proficient	Proficient	Highly proficient	Passing
Math, 2017-18	42%	34%	20%	4%	24%
Math, 2018-19	46%	31%	22%	<2%	24%
English Language Arts, 2017-18	71%	13%	15%	<2%	17%
English Language Arts, 2018-19	66%	12%	21%	<2%	22%

Source: First Things First (2022). Salt River Pima-Maricopa Indian Community Region 2022 Needs and Assets Report. Retrieved on Mar 1, 2024 from https://files.firstthingsfirst.org/regions/Publications/2022%20SRPMIC%20RNA%20FINAL%20REPORT.pdf

Note: The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools.

Table 69. Assessment results for American Indian students: Third Grade English Language Arts, 2021-22

Geography	Students Tested	Falls Far Below	Approaches	Meets	Exceeds	Passing
Mesa Public Schools serving SRPMIC students (American Indian students)	DS	69%	6%	21%	4%	25%
Arizona (American Indian Students)	DS	74%	10%	13%	3%	16%
Maricopa County	52,861	45%	12%	27%	16%	43%
Arizona	79,586	47%	12%	26%	15%	41%

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

Note: The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools.

Table 70. Assessment results for American Indian students: Third Grade Math, 2021-22

Geography	Students Tested	Falls Far Below	Approaches	Meets	Exceeds	Passing
Mesa Public Schools serving SRPMIC students (American Indian students)	DS	76%	12%	8%	4%	12%
Arizona (American Indian Students)	3,100	57%	27%	13%	3%	16%
Maricopa County	52,423	31%	27%	29%	13%	42%
Arizona	80,445	33%	27%	28%	12%	40%

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

Note: The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools.

Early Learning

Table 71. School enrollment for children ages 3 to 4, 2017-2021 ACS

Geography	Estimated number of children (3 or 4 years old)	Number and percent enrolled in school	
Salt River Pima-Maricopa Indian Community Region	**316**	**185**	**59%**
All Arizona Reservations	5,701	2,326	41%
Maricopa County	114,005	40,426	35%
Arizona	176,033	63,974	36%
United States	8,100,136	3,719,992	46%

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

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

Table 72. Children receiving DES child care assistance, 2017 to 2022

	Number of children receiving assistance						Percent of eligible children receiving assistance					
Geography	CY 2017	CY 2018	CY 2019	CY 2020	CY 2021	CY 2022	CY 2017	CY 2018	CY 2019	CY 2020	CY 2021	CY 2022
Salt River Pima-Maricopa Indian Community Region	**17**	**13**	**11**	**1 to 9**	**1 to 9**	**1 to 9**	**85%**	**81%**	**79%**	**N/A**	**100%**	**63%**
Maricopa County	10,420	12,264	14,355	12,391	13,847	12,230	92%	92%	91%	79%	87%	90%
Arizona	16,922	19,813	23,155	19,909	22,359	20,099	93%	92%	92%	80%	88%	90%

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

Note: N/A indicates that there were no children eligible for assistance in that year, meaning that a percentage could not be calculated. DS indicates that a percentage could not be shown due to data suppression guidelines.

Table 73. DCS-involved children receiving DES child care assistance, 2017 to 2022

Geography	Number of DCS children receiving assistance						Percent of DCS eligible children receiving assistance					
	CY 2017	CY 2018	CY 2019	CY 2020	CY 2021	CY 2022	CY 2017	CY 2018	CY 2019	CY 2020	CY 2021	CY 2022
Salt River Pima-Maricopa Indian Community Region	**36**	**25**	**13**	**10**	**29**	**22**	**84%**	**74%**	**62%**	**42%**	**88%**	**92%**
Maricopa County	7,796	7,773	7,516	4,572	5,470	5,128	87%	81%	81%	59%	80%	79%
Arizona	12,201	12,219	11,808	7,137	8,853	8,268	88%	82%	82%	59%	81%	80%

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

Note: N/A indicates that there were no children eligible for assistance in that year, meaning that a percentage could not be calculated. DS indicates that a percentage could not be shown due to data suppression guidelines.

Table 74. Eligible families not using DES child care assistance, 2017 to 2022

Geography	CY 2017	CY 2018	CY 2019	CY 2020	CY 2021	CY 2022
Salt River Pima-Maricopa Indian Community Region	**18.2%**	**18.2%**	**DS**	**DS**	**0.0%**	**16.7%**
Maricopa County	8.7%	8.3%	10.0%	18.8%	8.5%	8.6%
Arizona	6.7%	7.6%	7.9%	18.3%	11.7%	9.2%

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

Table 75. Quality First Programs, state fiscal year 2023

Geography	Child care providers served	Child care providers with a 3-5 star rating	Percent of child care providers with a 3-5 star rating
Salt River Pima-Maricopa Indian Community Region	**1**	**0**	**0%**
Maricopa County	N/A	N/A	N/A
Arizona	1,434	982	68%

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

Note: The quality first child care provider, Miro International Preschool, is on leased tribal land and is not operated by the tribe.

Table 76. Median monthly charge for full-time center-based child care, 2022

Geography	Licensed centers			Public schools		
	One infant	One 1 or 2 year old	One 3 to 5 year old	One infant	One 1 or 2 year old	One 3 to 5 year old
Salt River Pima-Maricopa Indian Community Region	*No regional data available*			*No regional data available*		
Maricopa County	$1,134	$1,023	$882	$1,035	$1,012	$706
Arizona	$949	$826	$727	$1,011	$880	$701

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

Table 77. Median monthly charge for full-time home-based child care, 2022

Geography	Certified family homes			Small group homes		
	One infant	One 1 or 2 year old	One 3 to 5 year old	One infant	One 1 or 2 year old	One 3 to 5 year old
Salt River Pima-Maricopa Indian Community Region	*No regional data available*			*No regional data available*		
Maricopa County	$714	$630	$630	$756	$735	$720
Arizona	$662	$627	$618	$761	$725	$713

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

Table 78. Cost of center-based child care as a percentage of income, 2022

Geography	Median family income	Cost for an infant	Cost for a 1 to 2 year old child	Cost for a 3 to 5 year old child
Salt River Pima-Maricopa Indian Community Region	**52,700**	**26%**	**23%**	**20%**
Maricopa County	$81,300	17%	15%	13%
Arizona	$75,000	15%	13%	12%

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

Note: Annual costs of care are calculated by multiplying the median daily cost of care by 252 to approximate a full year of care. Salt River Pima-Maricopa Indian Community Region data were calculated using Maricopa County child care costs and median family income for families with children under age 18 for the region.

Table 79. Preschoolers with disabilities receiving services through Local Education Agencies (LEA), state fiscal years 2018 to 2022

Geography	Preschoolers enrolled in special education				
	FY2018	FY2019	FY2020	FY2021	FY2022
Salt River Schools	**18**	**20**	**25**	**<11**	**<11**
Mesa Public Schools serving SRPMIC students	<11	13	61	51	46
Maricopa County schools	6,444	6,599	6,702	5,590	5,099
Arizona schools	10,123	10,314	10,521	8,537	8,086

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

Note: The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools.

Table 80. Preschoolers with disabilities receiving services through Local Education Agencies (LEA) by type of disability, state fiscal years 2018- 2022 combined

Geography	Total Preschoolers	Developmental Delay	Speech or Language Impairment	Preschool Severe Delay	Other Disability
Salt River Schools	DS	73%	16%	11%	<2%
Mesa Public Schools serving SRPMIC students	DS	62%	27%	10%	<2%
Maricopa County schools	30,434	44%	33%	22%	1%
Arizona schools	47,581	42%	34%	21%	2%

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

Note: The "Other Disability" category includes children with hearing impairment, visual impairment, or deaf-blindness. Denominators in this table are suppressed when they could be used to calculate a count of less than 11 students in a disability category. The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools.

Table 81. Kindergarten to 3rd grade students enrolled in special education in public and charter schools, state fiscal years 2018 to 2022

Geography	K-3rd grade students enrolled in special education				
	FY2018	FY2019	FY2020	FY2021	FY2022
Mesa Public Schools serving SRPMIC students	248	285	245	259	262
Maricopa County schools	22,753	23,809	24,485	23,693	23,645
Arizona schools	36,468	37,812	38,791	37,179	37,334

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

Note: The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools. Please note that these data include students of all races and ethnicities (not only American Indian or SRPMIC-enrolled students).

Table 82. Preschool to 3rd grade students enrolled in special education in public and charter schools by primary disability, state fiscal year 2022

Geography	Total K-3rd grade students	Speech or Language Impairment	Developmental Delay	Specific Learning Disability	Autism	Other Disability
Mesa Public Schools serving SRPMIC students	1,299	24%	34%	12%	14%	16%
Maricopa County schools	118,385	36%	26%	14%	11%	13%
Arizona schools	187,584	37%	25%	14%	10%	13%

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

Note: The "Other Disabilities" category includes children with emotional disturbance, deafness, deaf-blindness, hearing impairment, intellectual disability, multiple disabilities, orthopedic impairment, other health impairments such as chronic medical conditions that affect a child's ability to participate in the educational setting, traumatic brain injury, or visual impairment. Denominators in this table are suppressed when they could be used to calculate a count of less than 11 students in a disability category. The data for Mesa Public Schools presented here are drawn from Lehi, Whittier, Whitman, Ishikawa, and Kerr Elementary Schools. Please note that these data include students of all races and ethnicities (not only American Indian or SRPMIC-enrolled students).

Child Health

Table 83. Percent of WIC-enrolled infants ever breastfed, 2017 to 2020

Geography	2017	2018	2019	2020
Salt River Pima-Maricopa Indian Community Region	**DS**	**DS**	**89%**	**DS**
All ITCA WIC Programs	65%	66%	71%	69%
Arizona	77%	79%	78%	77%

Source: Arizona Department of Health Services (2023). [WIC Dataset]. Unpublished data.

Table 84. Child care immunization exemption rates, 2018-19 to 2022-23

	Children in child care with religious exemptions					Children in child care exempt from all vaccines				
Geography	2018-19	2019-20	2020-21	2021-22	2022-23	2018-19	2019-20	2020-21	2021-22	2022-23
Salt River Early Childhood Education Center	**N/A**	**N/A**	**0.6%**	**0.7%**	**0.0%**	**N/A**	**N/A**	**0.6%**	**0.7%**	**0.0%**
Maricopa County	5.3%	4.6%	5.5%	10.6%	11.6%	3.3%	3.5%	3.7%	3.6%	4.3%
Arizona	4.5%	5.0%	5.1%	5.7%	5.7%	3.0%	3.1%	3.3%	3.4%	4.0%

Source: Arizona Department of Health Services (2023). Childcare Immunization Coverage, 2018-19 to 2022-23 School Years. Unpublished data received by request & aggregated by the Community, Research, & Development Team. Arizona Department of Health Services (2023). Childcare Immunization Coverage by County, 2018-19 through 2022-23 School Years. Retrieved from: https://www.azdhs.gov/preparedness/epidemiology-disease-control/immunization/index.php#reports-immunization-coverage

Note: Immunization data from the ECEC were not available in the ADHS immunization dataset prior to the 2020-21 school year.

Table 85. Non-fatal hospitalizations and emergency department visits due to unintentional injuries for children birth to age 5, 2018-2022 combined

Geography	Non-fatal inpatient hospitalizations for unintentional injuries	Non-fatal emergency department visits for unintentional injuries
Salt River Pima-Maricopa Indian Community Region	**13**	**350**
Maricopa County	1,692	111,707
Arizona	2,811	160,742

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

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

APPENDIX 2: METHODS AND DATA SOURCES

U.S. Census and American Community Survey Data. The U.S. Census[432] is an enumeration of the population of the United States. It is conducted every ten years, and includes information about housing, race, and ethnicity. The 2020 U.S. Census data are available by census block. There are about 108,000 inhabited blocks in Arizona, with an average population of 66 people each. Both the 2010 and 2020 Census data for the Salt River Pima-Maricopa Indian Community Region presented in this report are drawn from the Census Geography for the Salt River Reservation and trust land.

The American Community Survey (ACS)[433] is a survey conducted by the U.S. Census Bureau each month by mail, telephone, and face-to-face interviews. It covers many different topics, including income, language, education, employment, and housing. ACS data are available by census tract. Arizona is divided into about 1,750 census tracts, with an average of about 3,900 people in each. The ACS data for the Salt River Pima-Maricopa Indian Community Region presented in this report are drawn from the Census Geography for the Salt River Reservation and trust land. The most recent and most reliable ACS data are averaged over the past five years; those are the data included in this report. They are based on surveys conducted from 2017 to 2021. In general, the reliability of ACS estimates is greater for more populated areas. Statewide estimates, for example, are more reliable than county-level estimates.

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

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

Data Availability. State agency data in this report were provided to FTF by agency staff through a data request process initiated in May 2023 and extending to January 2024. Wherever possible, data were requested for multiple years to allow for the visualization of trends as well as for the most recent year available. However, due to both the constraints of agency staff and agency-maintained datasets as well as the timing of requests, not all data were available on the same time and geographic scales. This report

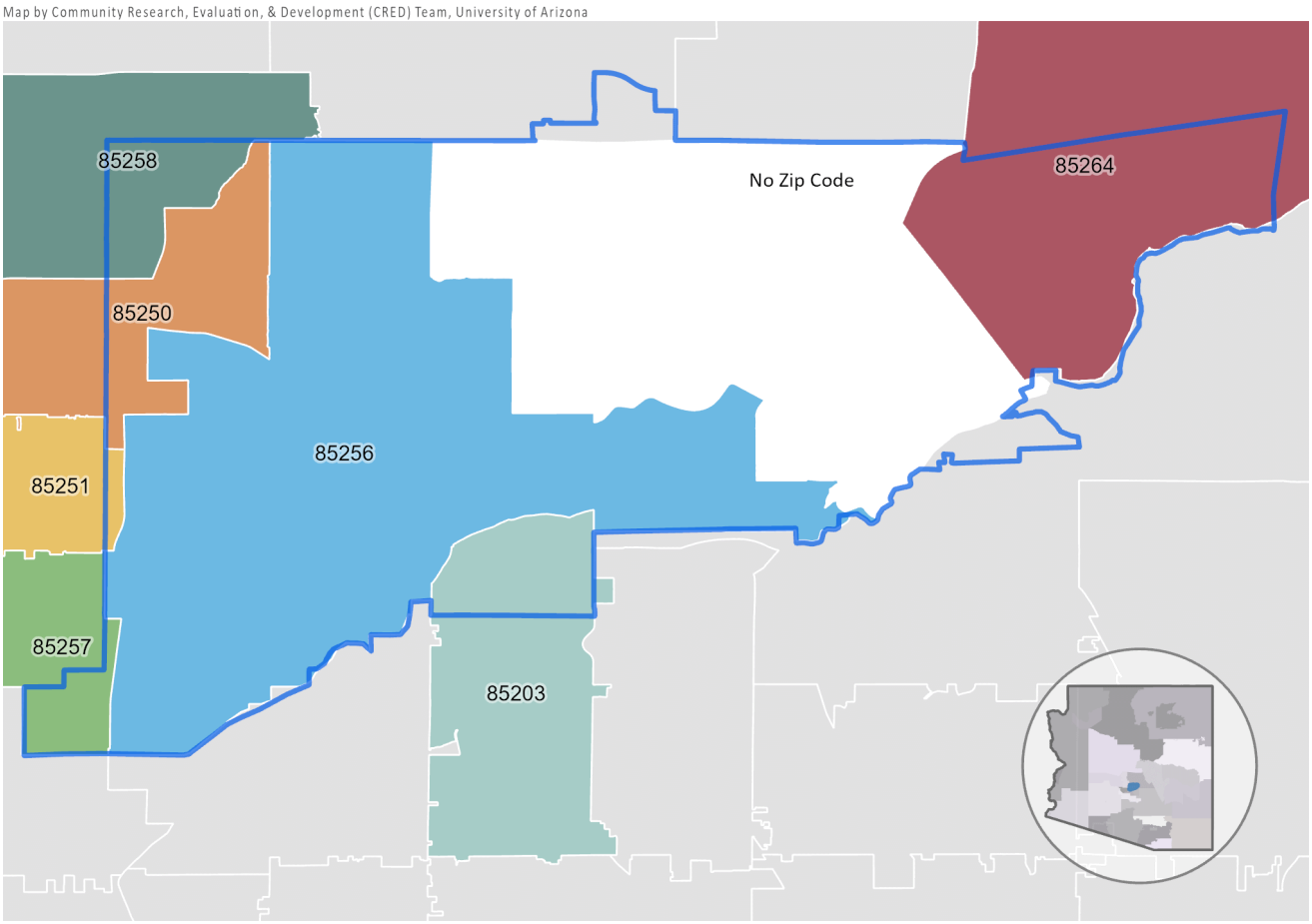
attempts to include the most recent and complete data available, with notes indicating where data were not available for particular time periods or geographies.

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

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

APPENDIX 3: ZIP CODES OF THE SALT RIVER PIMA-MARICOPA INDIAN COMMUNITY REGION

Figure 58. Zip Code Tabulation Areas (ZCTAs) in the Salt River Pima-Maricopa Indian Community Region



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

Table 86. Zip Code Tabulation Areas (ZCTAs) in the Salt River Pima-Maricopa Indian Community Region

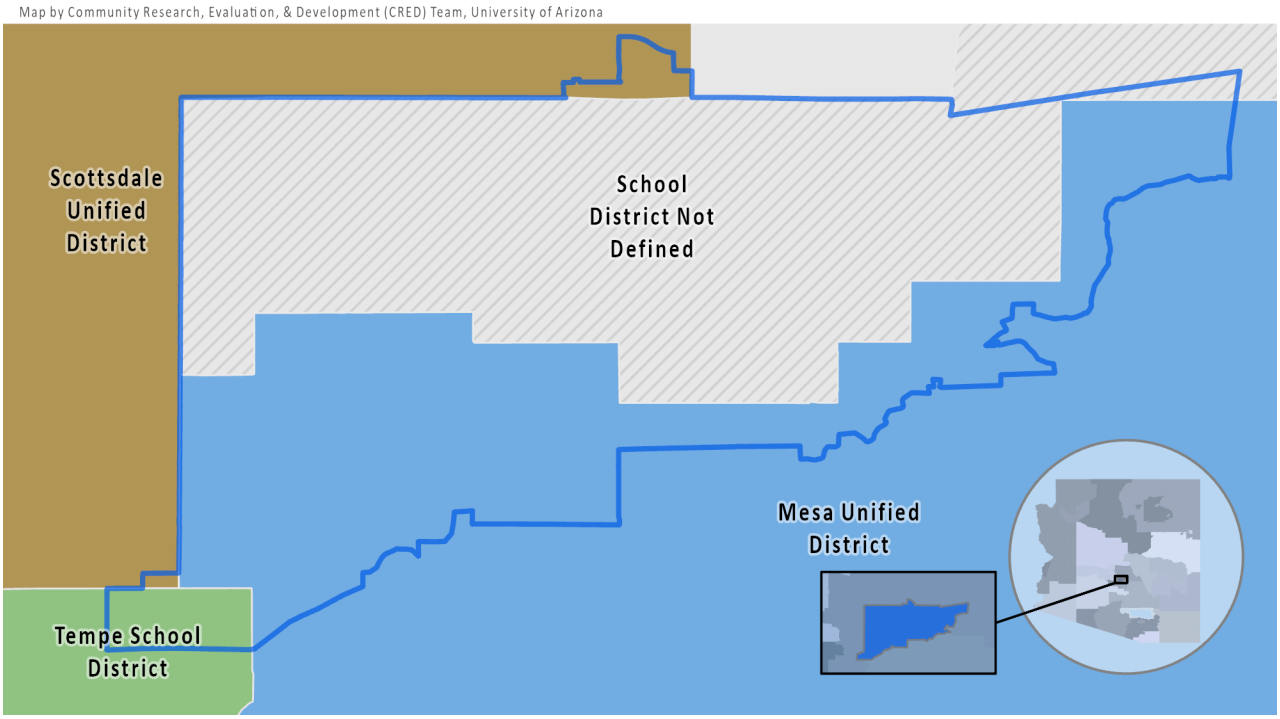
Zip Code Tabulation Area (ZCTA)	Population (all ages)	Percent of this ZCTA's total population living in the Salt River Pima-Maricopa Indian Community Region	This ZCTA is shared with
Salt River Pima-Maricopa Indian Community Region	**6,321**		
85201	18	0.0%	Southeast Maricopa
85203	583	1.5%	Southeast Maricopa
85250	18	0.1%	East Maricopa
85256	4,857	100.0%	
85257	852	3%	East Maricopa, Phoenix South
85258	11	0%	East Maricopa
85259	96	0.4%	East Maricopa

Source: U.S. Census Bureau (2023). 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. ZCTAs 85215, 85251, and 85264 overlap the Salt River Pima-Maricopa Indian Community Region, but the portions of the ZCTAs in the region are unpopulated.

APPENDIX 4: SCHOOL DISTRICTS OF THE SALT RIVER PIMA-MARICOPA INDIAN COMMUNITY REGION

Figure 59. School Districts in the Salt River Pima-Maricopa Indian Community Region



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

Table 87. School Districts and Local Education Agencies (LEAs) in the Salt River Pima-Maricopa Indian Community Region

District or LEA	School	Schools	Grades Served
Salt River Schools		**3**	**PS-12**
Salt River Schools	Salt River Early Childhood Education Center (ECEC)	1	PS
Salt River Schools	Salt River Elementary School	1	K-6
Salt River Schools	*Salt River High School (closed in 2020)*	0	7-12
Salt River Schools	Salt River Accelerated Learning Academy	1	9-12
Mesa Public Schools serving SRPMIC students		**9**	**PS-12**
Mesa Public Schools	Lehi Elementary School	1	PS-6
Mesa Public Schools	Whittier Elementary School	1	PS-6
Mesa Public Schools	Whitman Elementary School	1	PS-6
Mesa Public Schools	Ishikawa Elementary School	1	PS-6
Mesa Public Schools	Kerr Elementary School	1	K-6
Mesa Public Schools	Carson Junior High School	1	7-8
Mesa Public Schools	Stapley Junior High School	1	7-8
Mesa Public Schools	Westwood High School	1	9-12
Mesa Public Schools	Mountain View High School	1	9-12

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

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