



2012

NEEDS AND ASSETS REPORT

Yuma Regional Partnership Council



FIRST THINGS FIRST

Ready for School. Set for Life.

REGIONAL PARTNERSHIP COUNCIL

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LETTER FROM THE CHAIR

The past two years have been rewarding for the First Things First Yuma Regional Partnership Council, as we delivered on our mission to build better futures for young children and their families. During the past year, we have touched many lives of young children and their families by developing and expanding our partnership with public preschools and private child care providers, expanding the scope and reach of family support programs and beginning an Oral Health strategy.

The First Things First Yuma Regional Partnership Council will continue to advocate and provide opportunities to improve access and affordability to quality childcare, provide professional development for early childhood education and provide support and services to families with children with special needs.

Our strategic direction has been guided by the Needs and Assets reports, specifically created for the Yuma Region in 2008, 2010, and the new 2012 report. The Needs and Assets reports are vital to our continued work in building a true integrated early childhood system for our young children and our overall future. The Yuma Regional Council would like to thank our Needs and Assets Vendor Applied Survey Research for their knowledge, expertise and analysis of the Yuma region. The new report will help guide our decisions as we move forward for young children and their families within the Yuma region.

Going forward, the First Things First Yuma Regional Partnership Council is committed to meeting the needs of young children by providing essential services and advocating for social change.

Thanks to our dedicated staff, volunteers and community partners, First Things First is making a real difference in the lives of our youngest citizens and throughout the entire State.

Thank you for your continued support.

Sincerely,



Rev. Darren Hawkins, Chair
Yuma Regional Partnership Council



INTRODUCTORY SUMMARY AND ACKNOWLEDGMENTS

INTRODUCTIONS

A Child's most important developmental years are those leading up to kindergarten. First Things First is committed to helping Arizona kids five and younger receive the quality education, healthcare and family support they need to arrive at school healthy and ready to succeed. Children's success is fundamental to the wellbeing of our communities, society and the State of Arizona.

This Needs and Assets Report for the Yuma Geographic Region provides a clear statistical analysis and helps us in understanding the needs, gaps and assets for young children and points to ways in which children and families can be supported. The needs young children and families face in the Yuma Region include additional quality and affordable child care services; a need for services that better prepare them for school and increased access to health insurance and preventative services.

The First Things First Yuma Regional Partnership Council recognizes the importance of investing in young children and empowering parents, grandparents, and caregivers to advocate for services and programs within the region. A strong focus throughout the Yuma Region, in the past year has been to increase access to quality child care and pre-school programs, increasing the availability of supportive services for families including those with children with special needs; and increasing public awareness of early childhood development and health. This report provides basic data points that will aid the Council's decisions and funding allocations; while building a true comprehensive statewide early childhood system.

School Readiness Indicators

In August 2011, the First Things First Board approved a set of indicators that provide a composite measure for young children as they prepare to enter kindergarten. The intent of the indicators is to provide an opportunity to achieve measureable and long-term results for children. Each region was asked to select indicators to prioritize within their region. The indicators selected by the First Things First Yuma Region are listed below.

- # and % of children demonstrating school readiness at kindergarten entry in the development domains of social-emotional, language and literacy, cognitive, and motor and physical
- # and % of children with special needs/rights enrolled in an inclusive early care and education program with a Quality First rating of 3-5 stars
- # and % of children receiving timely well-child visits



- # and % of children ages 2-5 at a healthy weight (Body Mass Index-BMI)
- # and % of children age 5 with untreated tooth decay
- % of families who report they are competent and confident about their ability to support their child's safety, health, and well-being

The data for these indicators have not been collected systematically in Arizona. First Things First and its early childhood system partners will work over the next year to develop benchmarks for these indicators and systems for tracking them over time. Data that have been identified as a proxy measure of an indicator will be identified in a green note box.

Snapshot of Community Assets

The 2012 First Things First Needs and Assets Report for the Yuma Region includes a section entitled "Snapshot of Community Assets." This section was added to the report in an effort to include community programs and groups working to address the needs of families and children ages birth through five. The information comes from community members and service providers. It is not, however, a complete list of every resource in the region.

What the Community is Saying

The 2012 First Things First Needs and Assets Report for the Yuma Region includes a section entitled "What the Community Is Saying." This section was added to the report in an effort to include information collected during key informant interviews with individuals who serve children ages birth through five in the region. This information is not meant to be representative of the opinions of all people in the region but instead, to provide a glimpse of what some service providers and community representatives identify as the needs and challenges facing children and families in the region.

ACKNOWLEDGMENTS

The First Things First Yuma Regional Partnership Council owes special gratitude to the agencies and key stakeholders who participated in numerous work sessions and community forums throughout the past two years. The success of First Things First was due, in large measure, to the contributions of numerous individuals who gave their time, skill, support, knowledge and expertise.

To the current and past members of the Yuma Regional Partnership Council, your dedication, commitment and extreme passion has guided the work of making a difference in the lives of young children and families within the region. Our continued work will only aid in the direction of building a true comprehensive early childhood system for the betterment of young children within the region and the entire State.

The Yuma Regional Partnership Council would like to thank The Arizona Department of Economic Security and the Arizona Child Care Resource and Referral, the Arizona Department of Health



Services and the Arizona State Immunization Information System, the Arizona Department of Education and School Districts across the State of Arizona, the Arizona Head Start Association, the Office of Head Start, and Head Start and Early Head Start Programs across the State of Arizona, and the Arizona Health Care Cost Containment System for their contribution of data for this report.

LEGEND

ITEM	DESCRIPTION
	Denotes a Face-to-Face Parent Survey
	Denotes a Health Care Provider Survey

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Additional Offices in the Bay Area and Southern California



EXECUTIVE SUMMARY

THE REGION AND THE PEOPLE

The First Things First Yuma Region is situated in southwestern Arizona, extending to the California border in the west, La Paz County in the north, Maricopa and Pima Counties in the east, and the border with Mexico in the south. The Colorado River runs along the western edge of the region. The First Things First Yuma Region contains all of Yuma County excluding the Cocopah Indian Tribe reservations and a portion of the Fort Yuma Reservation. Most of the population and services in the region are located in the city of Yuma. The communities of San Luis and Gadsden are along the border with Mexico.

The estimated total population of the First Things First Yuma Region was 194,934 in 2010. There is a growing population of children ages birth through five living in the First Things First Yuma Region with 15,362 children in 2000 and 17,983 in 2010, a 17% increase. The population of children ages birth through five in the First Things First Yuma Region was primarily Latino (76% in 2010), followed by White (19%), and less than 1% American Indian. The First Things First Yuma Region had a higher percentage of Hispanic or Latino children ages birth through five compared to Arizona overall (45%) in 2010. Fifty percent of the population five and over in the First Things First Yuma Region spoke English and 48% spoke Spanish in the home, according to the 2006-2010 Census estimates.

The Face of Poverty

Income

Children who grow up in poverty are more likely to lack adequate food, become victims of crime and violence, and lack basic health care. They are at significant risk for dropping out of school early, poor academic performance, behavior problems in school, lower levels of literacy, and lower educational attainment.

What does the economy look like for local children and their families?

- Nearly one-third (31%) of children ages birth through five in the First Things First Yuma Region lived below the poverty level, a higher percentage than Arizona as a whole (24%) or across the nation (22%), according to the 2006-2010 Census estimates.
- The median family income of families with children younger than 18 years old in Yuma County was \$42,718 in 2010.



- Twenty-two percent of families with children ages birth through five were in female headed households. The median income for female headed households was \$19,306 in 2010. This income was much less than the level needed to pay for basic needs in the region without any outside financial support.

Unemployment

The unemployment rate as defined by the International Labour Organization measures the number of people who are without jobs and who have actively sought work within the past four weeks. The unemployment rate is calculated as a percentage by dividing the number of unemployed individuals by all individuals currently in the labor force. While the unemployment rate provides some measure of a community's economic well-being, it does not capture those who have stopped looking for work, who are underemployed, or struggling to make ends meet.

Do families have jobs?

- The unemployment rate in Yuma County (excludes Native American Reservations) was just over 27%, almost three times the rate of Arizona, which was nearly 10% in 2011.

Basic Needs

Going without basic needs such as food, housing, child care, health care, or clothing can have short and long-term consequences to residents' health and well-being.

Are families receiving the support they need to meet their basic needs?

- Over half (58%) of First Things First Yuma Region parents who responded to a survey in 2011 reported that they or their family received some type of public assistance.
 - Parent survey respondents most commonly utilized public assistance such as Supplemental Nutritional Assistance Program (SNAP) (89%), Women, Infants, and Children (WIC) (26%), Temporary Assistance for Needy Families (TANF) (21%), and Medicare (17%) in 2011. The percentage receiving Medicaid fell steeply from 20% in 2010 to 3% in 2011; this decline is most likely the result of legislative changes to the eligibility criteria and not a reduction in actual need.
- In Yuma County, 236 families with children ages birth through five received support from TANF in January of 2011, a 55% decrease from 521 in 2007. Given the economic downturn the steep decline in TANF numbers is most likely the result of legislative changes to the eligibility criteria and not a reduction in actual need.



Food Insecurity

When children suffer from lack of food, it can lead to poor physical and mental health, difficulty learning, increased school absences, and lower test scores. This makes children more likely to suffer from poverty when they become adults.

Are children getting enough to eat?

- Households are classified as food insecure if one or more household members went hungry at least once during the year because the household could not afford enough food to eat. Nearly half (45%) of the children in Yuma County lived in households without enough food in 2009, higher than in Arizona (29%).
- The majority of children in the local school districts were eligible for free and reduced cost meals at school, indicating that they were either in poverty or very close to the poverty level.
 - The school districts with the highest percentage of children eligible to receive free and reduced price meals were Gadsden Elementary School District (97%) and Hyder Elementary Unified School District (89%) in 2011. The lowest percentages were in the Mohawk (64%) and Yuma (68%) Elementary School Districts, and in the Yuma Union High School District (68%).

Foreclosures

When foreclosures force children out of their homes, they are affected both physically and emotionally. When children change homes frequently, it can contribute to lower performance in school and more delinquent behaviors in the classroom.

Are families losing their homes to foreclosure?

- Foreclosure rates during May of 2011 were lower in many areas of Yuma County than in Arizona as a whole, with a total of 196 foreclosures in Yuma County. Within the region, Somerton had the highest rate of foreclosures at 1 foreclosure for every 286 homes.



THE EARLY CHILDHOOD SYSTEM

Quality child care helps children develop social and cognitive skills in preparation for school and life success. Child care, and in particular, subsidized care for low-income families, also provides critical support for working families.

Early Care and Education

Do parents have high quality child care available for their children?

- An estimated 1 in 4 children with working parents in the First Things First Yuma Region had child care spaces available to them in 2010.
- An estimated 18,000 children ages birth through 11 lacked child care spaces, forcing parents to look for alternative solutions such as Kith and Kin care.
- According to parent survey respondents in the First Things First Yuma Region, the primary source of child care in 2011 was an adult family member (43%), followed by a non-relative center with more than four children (25%), and a paid babysitter/nanny/au pair (12%).

Are parents able to afford quality child care?

- Only 242 families in the county were receiving child care subsidies in 2011, down from 810 families in 2009. The decrease is due to changes in funding and eligibility.
- Ninety-one percent of parent survey respondents' monthly payment for all of their children's child care was less than \$450 per month in the First Things First Yuma Region in 2011.

Child Care Professionals

Research shows that by having well educated early child care professionals, children receive increased learning and development. Well trained teachers contribute to well-trained students.

What is the education level of Head Start teachers?

- In the 2010/11 school year, 39 teachers and 11 assistant teachers/aides at WACOG Head Start had an Associate's Degree in the Early Childhood Education (ECE) field or a related field, and 6 teachers and 1 assistant teacher/aide had a Bachelor's Degree in the ECE field.



School Readiness and Success

Children who have early learning skills as they enter kindergarten do better in school, are more likely to graduate with a high school diploma, are more successful in their careers, and are less likely to be involved in crime and drugs. One way of assessing children's readiness for kindergarten is the DIBELS assessment which measures skills related to letter knowledge. Like kindergarten readiness, third grade reading scores are an excellent predictor of later school success, including high school graduation rates and career success. Beginning in the year 2013/14, students whose scores are "falling far below" on their 3rd grade AIMS reading scores will not be promoted from 3rd grade.

Are children ready for school?

- In four school districts (Crane, Gadsden, Somerton, and Yuma), between 8% and 22% of kindergarteners were at grade level when they entered kindergarten for the 2010/11 school year.
- Conversely, between 78% and 92% of kindergarteners needed intensive or additional interventions to be at grade level. In the Wellton Elementary School District, almost half of children (45%) were at grade level.

Are children learning to read?

- In 2010/11, parental notification requirements began for any student who seemed to be falling behind in their 3rd grade reading scores. In the local school districts, between 4% and 14% of students were "falling far below" on their 3rd grade reading scores.

Are youth graduating from high school?

- The high school graduation rates of the two high schools in the First Things First Yuma Region were 81% to 84% in 2010, similar to the state and national graduation rates.



Children with Special Needs

It's crucial to have early identification of children's special needs so that children can get the support and opportunities they need to achieve success in school and in the community. Developmental screenings including oral, vision, cognitive, and hearing screenings are an important practice to ensure children's optimal growth.

How many children up to 36 months old with developmental delays or at risk for delays receive AzEIP services?

- More than 150 children in the First Things First Yuma Region received services through the Arizona Early Intervention Program (AzEIP), a 92% increase from 79 in 2007. However, that number is expected to fall due to cuts in the AzEIP program, the Department of Economic Security is now implementing a family cost participation program for early intervention services.

Health

Access to Health Care and Health Insurance

Children with a regular source of primary health care and health insurance have better health, receive more preventative care, and have lower rates of hospitalization because they receive treatment for conditions before they become too serious.

Do children have access to health care as well as health insurance in the region?

- Nearly 9 out of 10 (89%) parent survey respondents in the First Things First Yuma Region with children ages birth through five said they were able to receive medical care for their child when needed "all of the time" in 2011, an increase from 60% in 2010.
- Similarly, nearly 9 out of 10 (89%) parents with children ages birth through five surveyed in the First Things First Yuma Region indicated that their child had health insurance in 2011, a 10% increase since 2010.
- KidsCare enrollment numbers have dropped significantly in recent years. An estimated 541 children were insured through KidsCare in February 2012, a 79% decrease in enrollment since February 2008. Given the economic downturn the steep decline in KidsCare numbers is most likely the result of legislative changes to the eligibility criteria and not a reduction in actual need.



Are there enough doctors/health professionals?

Yuma County is classified by the Arizona Department of Health Services as a Health Professional Shortage Area and Medically Underserved Area.

- The ratio of the population to primary care providers in Yuma County was 753 people for every one primary care provider in 2010, a decrease from 933 people for every one primary care provider in 2009; while remaining higher than the state ratio of 501 people for every one primary care provider.

Healthy Births

Women who receive adequate prenatal care are more likely to have better birth outcomes. Babies born to mothers who receive no prenatal care are three times more likely to be born at a low birth weight (less than 5.5 pounds), and have lower survival rates, than those whose mothers received prenatal care.

Are babies born healthy?

- There were 3,229 total births in Yuma County in 2010.
- Six percent of total births in Yuma County were babies born at a low birth weight (less than 2,500 grams), as compared to the state at 7% in 2010.
- Nearly 6% of pregnant women in Yuma County did not get any prenatal care, as compared to the state at 2% in 2010.

Teen Births

Teen mothers tend to give birth prematurely, have babies born at low birth weights, are less likely to complete high school, and have lower earning power in their careers. Children born to teens are 50% more likely to repeat a grade, are less likely to complete high school, and perform lower on standardized tests than children of older mothers. Arizona had the 6th highest teen birth rate in the nation in 2009.

Do teenagers have high rates of giving birth?

- Fifteen percent of all births were to teen mothers in Yuma County in 2010, as compared to 11% in the state overall.



Asthma

Many things can cause asthma, including allergens (mold, pollen, animals) and irritants (cigarette smoke and air pollution) as well as infections. Children have smaller airways than adults, which makes asthma especially serious for them. However, even severe asthma symptoms can be minimized with appropriate medical care.

Are children visiting the emergency room for asthma?

- Emergency department visits by children birth through five have increased 9% since 2006, with 544 total visits in 2010.
- There was a 525% increase of recognized carcinogens, or cancer-causing pollutants, released into the air in Yuma County from 2005 to 2010.

Oral Health

Dental and gum problems can be minimized through regular preventive dental services. Experts recommend that children as young as one year old be examined for evidence of developing early childhood tooth decay.

Do children have dental care?

- Nearly half of parent respondents (48%) in the First Things First Yuma Region survey in 2011 said that their child had seen a dentist less than one year ago, while one in four (24%) said their child had never seen a dentist or dental hygienist.

Infant Deaths

The leading causes of death for infants are birth defects, premature birth, Sudden Infant Death Syndrome (SIDS) and complications with the mother during pregnancy.

What is the infant mortality rate?

- The infant mortality rate was 6.2 per 1,000 live births for Yuma County, as compared to 6.0 per 1,000 in Arizona in 2010.



Supporting Families

Child Abuse and Neglect

Child abuse and neglect are found in families across the social and economic spectrum. Social isolation, financial stress, poverty, substance abuse, and domestic violence are all factors that can lead to adults abusing children. Children who are victims of abuse or neglect experience higher rates of suicide, depression, substance abuse, difficulties in school, and other behavioral problems later in life, including a greater risk of mistreating their own children.

Are children experiencing abuse and neglect?

- There were 57 substantiated cases of child abuse or neglect in Yuma County in 2011, down from 65 cases in 2010. However, there were widespread layoffs of CPS workers across the state in 2009 which may account for some of the difference. The most common type of abuse was neglect (39 cases), followed by physical abuse (17 cases) in 2011.

Support for Parents and Positive Parenting Practices

Community ties with friends and relatives are a principal means by which people and households get supportive resources to help raise their children. Local social services can also provide valuable support for families with children ages birth through five.

What support do parents need for their children?

- According to parent survey respondents in 2011, the most needed services for their children and families were housing assistance (42%), food assistance (40%), and parenting classes/parent education (37%).

Are parents using positive parenting practices?

- Over three-quarters of parent survey respondents reported positive parenting practices such as confidence in their ability to help their child grow and develop in 2011. In addition, there was a 10% increase since 2010 of parent survey respondents who calmed themselves down when angry before dealing with their child.



Parent Awareness of Information and Resources about Children

It is important to know the perceptions of parents about early childhood services in the region so that First Things First can work with partner agencies to improve services and supports to parents.

How satisfied are parents with child development information available to them?

- Ninety-five percent of parent survey respondents were “somewhat” or “very satisfied” with the information and resources available about children’s development and health in 2008. Less than two-thirds (62%) were satisfied with how agencies serving young children and their families worked together and communicated.

Do parents know about First Things First?

- Over half (57%) of parent survey respondents in 2011 felt “very” or “somewhat” knowledgeable about what First Things First does in their community, up from 31% in 2010.



DEMOGRAPHIC OVERVIEW: WHO ARE THE FAMILIES AND CHILDREN LIVING IN THE YUMA REGION?



About the First Things First Yuma Region

The First Things First Yuma Region is composed of all of Yuma County excluding the Cocopah Indian Tribe reservations and portions of the Fort Yuma Reservation. The region is situated in southwestern Arizona, extending to the California border in the west, La Paz County in the north, Maricopa and Pima Counties in the east, and the border with Mexico in the south. The Colorado River runs along the western edge of the region. Most of the population and services in the region are located in the city of Yuma. The communities of San Luis and Gadsden lie along the border with Mexico.



BASIC DEMOGRAPHICS

Demographics describe the region's population including gender, age, ethnicity and language. These factors are important to help First Things First provide services that fit local needs.

SELECTED INDICATORS

- Population
- Family Types
- Race/Ethnic Distribution
- Language Characteristics



Population

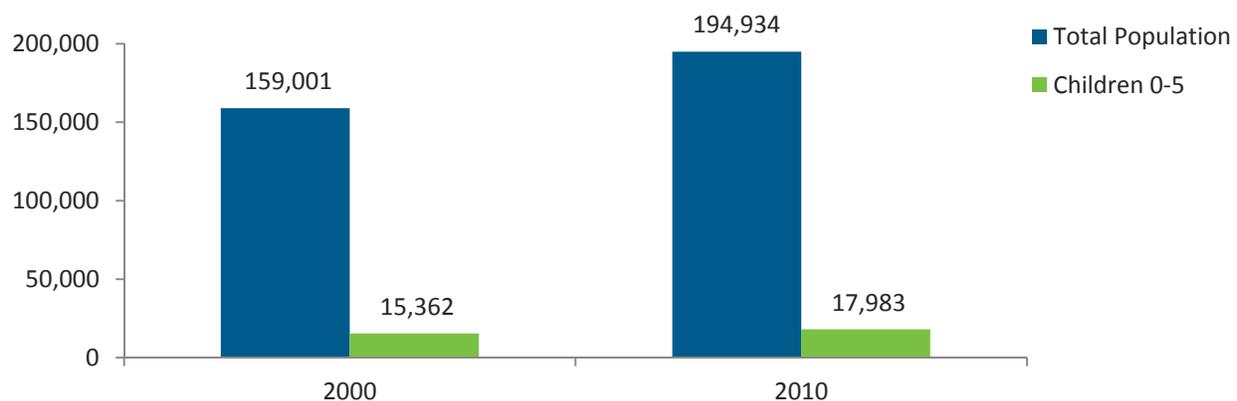
Why Is It Important

Since the 2010 First Things First Needs and Assets Report, the U.S. Census Bureau released a number of new data. Demographics of the region rely heavily on these data. While these data provide a general understanding of the region, it is important to recognize their limitations as they are self-reported and rely on the Bureau's ability to reach and build trust with local community members.

What the Data Tell Us

The estimated total population of the First Things First Yuma Region was 159,001 in 2000. Ten years later, the estimate rose to 194,934. The total population estimate of children ages birth through 5 rose slightly from 15,362 in 2000 to 17,983 in 2010.

Total Population, First Things First Yuma Region



Source: U.S. Census Bureau. (2010). QT-P1 & QT-P2- Single Years of Age. *Summary File 1*. Retrieved 2012 from <http://factfinder2.census.gov/>.
Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.

Yuma City has the largest total population and population of children ages birth through five. About half of the population ages birth through five in the First Things First Yuma Region lives in Yuma City, followed by San Luis, Somerton, and the remainder of the region.

Total Population, 2010

PLACE	TOTAL POPULATION	CHILDREN 0-5
San Luis City	25,505	2,850
Somerton City	14,287	1,878
Yuma City	93,064	8,844
Remainder of the region	62,078	4,411
First Things First Yuma Region	194,934	17,983
Arizona	6,392,017	546,609

Source: U.S. Census Bureau. (2010). QT-P2- Single Years of Age. *Summary File 1*. Retrieved 2012 from <http://factfinder2.census.gov/>.
Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.



Family Types

Why Is It Important

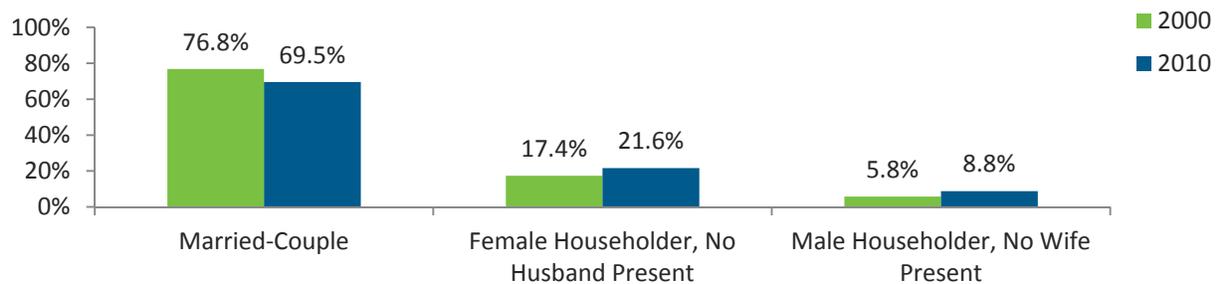
Family structure is an important factor in the health and development of young children. Household structures and family environments have been correlated with children's educational achievement and physical well-being.¹ A 2008 study by McLanahan and Percheski suggest that the links between family structure, income inequality and ethnicity are not only compounded by one another but increase generationally. Income inequality, may lead to increases in single motherhood; single motherhood decreases children's economic mobility, and these in turn are exacerbated by already existing racial inequalities.²

The effects of single parent households on the health and well-being of children have been long recognized. However, recent economic challenges have added new pressures to families across the country, creating new alternative family structures, including multigenerational households and households in which grandparents are raising children. In Arizona, 6% of children were living in grandparent households in 2009. These grandfamilies require unique programs and services targeted at bridging the generation gap.³

What the Data Tell Us

The percentage of married-couple families decreased from 77% in 2000 to 70% in 2010 in the First Things First Yuma Region but increased for single mother (from 17% to 22%) and single father households (from 6% to 9%).

Types of Families with Children Ages Birth Through Five, First Things First Yuma Region



Source: U.S. Census Bureau. (2010). Table P034 and Table P38-Family Type by Presence and Age of Children. Retrieved 2012 from <http://factfinder2.census.gov>.

Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.

¹ Fields, J. & Smith, K. (1998). Poverty, family structure, and child well-being: Indicators from the SIPP. *U.S. Census Bureau, Population Division, Working Paper 23*. Retrieved 2012 from <http://www.census.gov/population/www/documentation/twps0023/twps0023.html>

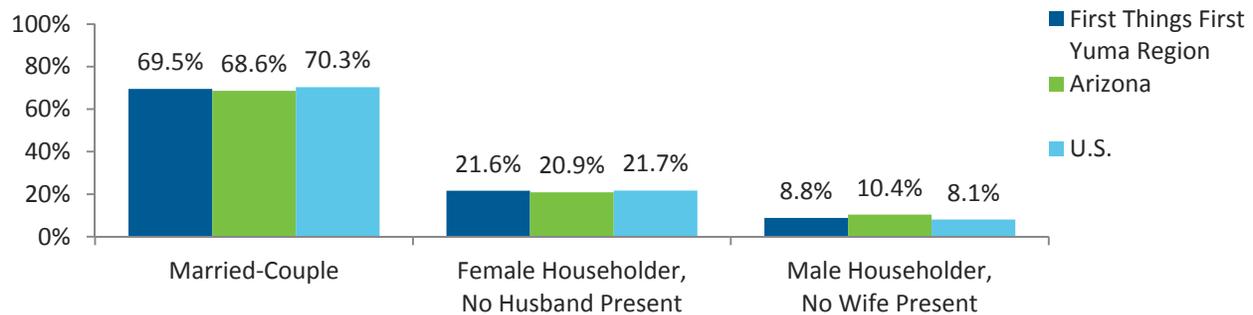
² McLanahan, S. & Percheski, C. (2008). Family Structure and the Reproduction of Inequalities. *Annual Review of Sociology*, Vol. 34: 257 -276.

³ Edwards, Oliver W.; Taub, Gordon E. (2009). A conceptual pathways model to promote positive youth development in children raised by their grandparents. *School Psychology Quarterly*, Vol 24(3), Sep 2009, 160-172. doi: 10.1037/a0016226



When compared to Arizona, the First Things First Yuma Region had slightly higher percentages of married-couple families and of single mother households in 2010 but slightly lower percentages of single father households.

Types of Families with Children Ages Birth Through Five, 2010



Source: U.S. Census Bureau. (2010). Table P38-Family Type by Presence and Age of Own Children. Retrieved 2012 from <http://factfinder2.census.gov>.

Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.

San Luis City had the highest percentage of married-couple families in 2010 (75%), compared to Somerton and Yuma cities. Yuma City had the highest percentage of single mother households (24%) in 2010.

Types of Families with Children Ages Birth Through Five, 2010

PLACE	MARRIED-COUPLE	FEMALE HOUSEHOLDER	MALE HOUSEHOLDER
San Luis City	74.6%	19.1%	6.3%
Somerton City	68.2%	23.0%	8.8%
Yuma City	66.7%	24.1%	9.2%
First Things First Yuma Region	69.5%	21.6%	8.8%
Arizona	68.6%	20.9%	10.4%

Source: U.S. Census Bureau. (2010). Table P38-Family Type by Presence and Age of Own Children. Retrieved 2012 from <http://factfinder2.census.gov>.

Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.

Nineteen percent of children ages birth through five in the First Things First Yuma Region lived in a household with a grandparent householder in 2010, a higher percentage than Arizona (14%).

Grandchildren Ages Birth through Five Living with a Grandparent Householder¹

	2010
First Things First Yuma Region	
Number of Children 0-5 Living with a Grandparent Householder	3,415
Percent of Children 0-5 Living with a Grandparent Householder	19.0%
Arizona	
Number of Children 0-5 Living with a Grandparent Householder	74,153
Percent of Children 0-5 Living with a Grandparent Householder	13.6%

Source: U.S. Census Bureau. (2010). Table P41- Age of Grandchildren Under 18 Years Living with a Grandparent Householder. Retrieved June 2012 from <http://factfinder2.census.gov>.

U.S. Census Bureau. (2010). Table P14- Sex by Age for the Population Under 20 Years. Retrieved June 2012 from <http://factfinder2.census.gov>.

Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.

¹ Household maintained by a grandparent.



Race/Ethnic Distribution

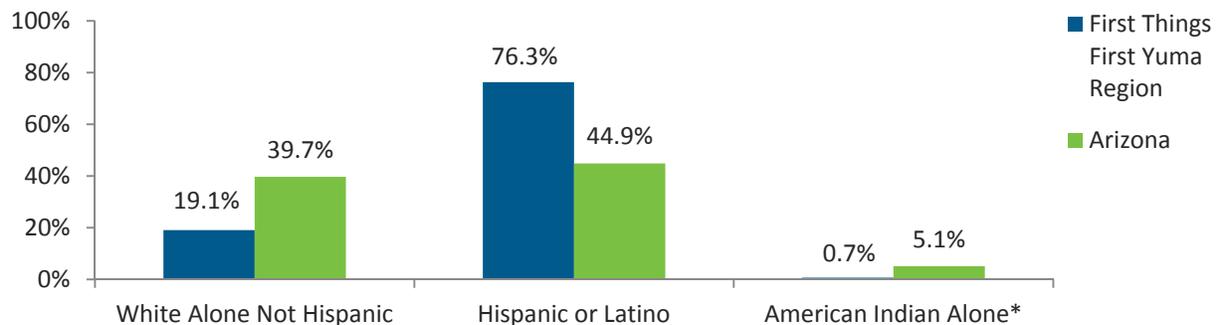
Why Is It Important

Arizona is a very ethnically diverse state with large percentages of Whites, Latinos and American Indians. Understanding racial and ethnic diversity within the region allows First Things First to provide culturally appropriate services to families of different backgrounds.

What the Data Tell Us

The population of children ages birth through five in the First Things First Yuma Region was primarily Hispanic or Latino (76%), followed by White (19%) and less than 1% American Indian in 2010. The First Things First Yuma Region (76%) had a higher percentage of Hispanic or Latino children ages birth through five as compared to Arizona overall (45%) in 2010.

Race/Ethnicity of Children Ages Birth Through Five, 2010



Source: U.S. Census Bureau. (2010). Table PCT12H- Sex by Age (Hispanic or Latino), PCT12I- Sex by Age (White Alone, not Hispanic or Latino), PCT12J- Sex by Age (American Indian and Alaska Native Alone). Retrieved 2012 from <http://factfinder2.census.gov>.

* The U.S. Census combines Native American and Alaska Native. The term Alaska Native has been omitted from our report for relevance.

Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.

Most children ages birth through five living in San Luis and Somerton were Hispanic or Latino in 2010. In Yuma City, 69% were Hispanic or Latino, and 25% were White.

Race/Ethnicity of Children Ages Birth Through Five, 2010

PLACE	WHITE ALONE, NOT HISPANIC	AMERICAN INDIAN	HISPANIC OR LATINO
San Luis City	0.8%	0.0%	99.0%
Somerton City	2.0%	0.0%	97.1%
Yuma City	24.5%	0.9%	68.6%

Source: U.S. Census Bureau. (2010). Table PCT12H- Sex by Age (Hispanic or Latino), PCT12I- Sex by Age (White Alone, not Hispanic or Latino), PCT12J- Sex by Age (American Indian and Alaska Native Alone). Retrieved 2012 from <http://factfinder2.census.gov>.

Note: There are American Indian children 0-5 in both San Luis and Somerton; percentages round to 0.0% due to small population size.



Language Characteristics

Why Is It Important

In Arizona, English is the most commonly spoken language, followed by Spanish and Native American languages such as Navajo and Apache.⁴ Non-English speakers tend to be less likely to access health care, preventive care, and prenatal care unless services are in their own language and culturally sensitive.

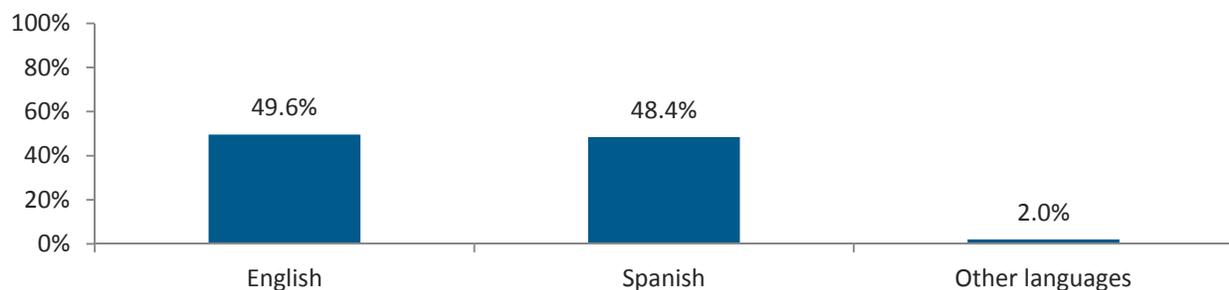
Snapshot of Community Assets

- *Chicanos Por La Causa* provides classes for adults in English as a Second Language, citizenship, and basic adult education.

What the Data Tell Us

Fifty percent of the population five and over in the First Things First Yuma Region spoke English in the home and 48% spoke Spanish in the home in 2010. Two percent reported speaking other languages.

Language Spoken at Home, First Things First Yuma Region, 2006-2010 5-Year Estimates



Source: U.S. Census Bureau. (2010). Table DP02-Language Spoken at Home. American Community Survey 2006-2010 5-Year Estimates. Retrieved 2011 from <http://factfinder.census.gov>.

Note: These categories are derived from the U. S. Census. Spanish and other language speakers may or may not also speak English in the home.

Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.

⁴ The Center for Public Education. (2000). Top Five Languages by State. Retrieved 2012 from <http://www.centerforpubliceducation.org>



In the San Luis border community, the majority (88%) of the population five and over spoke Spanish in the home, similar to Somerton City (87%). In Yuma City, 42% of the population five and over spoke Spanish and 56% spoke English.

Language Spoken at Home, Yuma County, 2006-2010 5-Year Estimates

PLACE	ENGLISH	SPANISH
San Luis City	12.1%	87.7%
Somerton City	11.0%	87.4%
Yuma City	55.7%	41.6%
First Things First Yuma Region	49.6%	48.4%

Source: U.S. Census Bureau. (2010). Table S1601-Language Spoken at Home. American Community Survey 2006-2010 5-Year Estimates. Retrieved 2011 from <http://factfinder.census.gov>.

Note: These categories are derived from the U. S. Census. Spanish and other language speakers may or may not also speak English in the home. Other language data not displayed.

Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.

The U.S. Census Bureau describes households where no one speaks English “very well,” or where no one over the age of 14 speaks English as “linguistically isolated households” or Non-English speaking households. Sixteen percent of children ages 5 through 17 in the First Things First Yuma Region were living in Non-English speaking households compared to 9% in the state, according to the 2006-2010 Census estimates. In the San Luis border community, about one quarter (26%) of children ages 5 to 17 lived in a Non-English speaking household.

Children Ages 5 through 17 Living in Non-English Speaking Households¹, 2006-2010 5-Year Estimates

PLACE	PERCENT
San Luis City	26.3%
Somerton City	26.2%
Yuma City	9.3%
First Things First Yuma Region	15.8%
Arizona	8.6%

Source: U.S. Census Bureau. (2010). Table B16003-Age by language spoken at home for the population 5 years and over in linguistically isolated households. *American Community Survey 2006-2010 5-Year Estimates*. Retrieved 2012 from www.factfinder2.gov/.

Note: Values are the number of children ages 5 through 17 living in linguistically isolated households divided by the total number of children ages 5 through 17 living in households.

¹A “non-English speaking,” or “linguistically isolated,” household is one “in which no person 14 years old and over speaks only English and no person 14 years old and over who speaks a language other than English speaks English ‘Very well.’ In other words, a household in which all members 14 years old and over speak a non-English language and also speak English less than ‘Very well’ (have difficulty with English)” (U.S. Census Bureau).

Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.

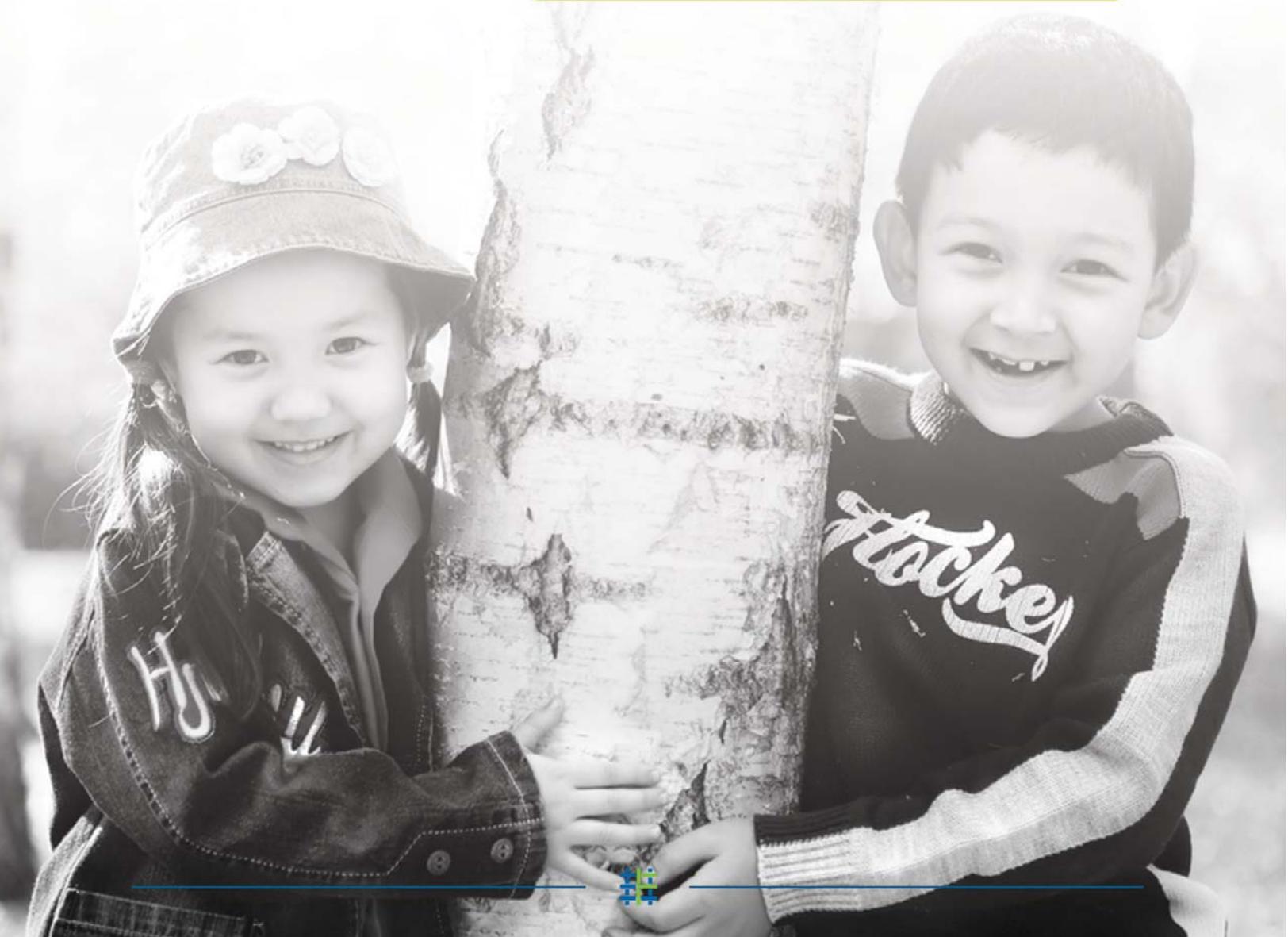


ECONOMIC CIRCUMSTANCES

It is important to consider the current national economic climate when assessing the needs and assets of local regions. The nation still faces economic challenges that greatly impact families and their children. Cuts in federal and state spending have major effects on health status, child care and the educational needs of young children.

SELECTED INDICATORS

- Income
- Unemployment
- Poverty
- Economic Supports
- Food Insecurity
- Homelessness
- Foreclosure



Income

Why Is It Important

Income levels are important for understanding the vitality of a community and the well-being of its residents. The income of families is related to the health, well-being, educational attainment and future economic success of children.

What the Data Tell Us

Median family income means that half of family households earn more than the median family household income, and half earn less. The median family income of families with children younger than 18 years old in Yuma County was \$42,718 in 2010. Married couple families had a much higher median income (\$50,324) than male householders with no wife present (\$33,757) and female householders with no husband present (\$19,306).

Median Family Income of Families with Children Under 18 Years, Yuma County

YEAR	MARRIED COUPLE FAMILY	MALE HOUSEHOLDER, NO WIFE PRESENT	FEMALE HOUSEHOLDER, NO HUSBAND PRESENT	ALL FAMILIES
2009	\$50,735	\$33,920	\$18,236	\$41,809
2010	\$50,324	\$33,757	\$19,306	\$42,718

Source: U.S. Census Bureau. (2011). Table B19126- Median family income in the past 12 months by family type by presence of own children under 18 years. *American Community Survey 2006-2010 5- Year Estimates*. Retrieved 2011 from <http://factfinder.census.gov>.

San Luis and Somerton cities had a median family income that was much lower than Yuma City.

Median Family Income of Families with Children Under 18 Years, 2010

PLACE	MARRIED COUPLE FAMILY	MALE HOUSEHOLDER, NO WIFE PRESENT	FEMALE HOUSEHOLDER, NO HUSBAND PRESENT	ALL FAMILIES
San Luis	\$35,351	\$33,170	\$20,851	\$27,233
Somerton	\$40,750	\$28,261	\$18,300	\$31,310
Yuma City	\$59,165	\$33,505	\$19,475	\$46,026

Source: U.S. Census Bureau. (2011). Table B19126- Median family income in the past 12 months by family type by presence of own children under 18 years. *American Community Survey 2006-2010 5- Year Estimates*. Retrieved 2011 from <http://factfinder.census.gov>.



The Self-Sufficiency Standard is used as an indicator of how much income is needed for a family to meet its minimal basic needs without the need for public or private assistance. The Self-Sufficiency Standard is dependent on geographic location, family structure, and the age of the children. The Self-Sufficiency Standard is based on 2012 income and expense, and provides a helpful estimate of a families' financial situation.

In Yuma County, the median income of female single parent households (\$19,306 in 2010) was less than the level needed to be self-sufficient (e.g., \$33,457 for a family with one adult and one preschooler in 2012).

Self-Sufficiency Income Standards, Yuma County, 2012

MONTHLY EXPENSE	FAMILY TYPE			
	Adult + Preschooler	Adult + Preschooler + School-age	2 Adults + Preschooler	2 Adults + Preschooler + School-age
Housing	\$732	\$732	\$732	\$732
Child Care	\$536	\$893	\$536	\$893
Food	\$386	\$578	\$624	\$794
Transportation	\$280	\$280	\$533	\$533
Health Care	\$424	\$446	\$480	\$502
Miscellaneous	\$236	\$293	\$290	\$345
Taxes	\$387	\$493	\$452	\$539
Earned Income Tax Credit (-)	-\$46	-\$14	-\$0	-\$0
Child Care Tax Credit (-)	-\$63	-\$105	-\$53	-\$100
Child Tax Credit (-)	-\$83	-\$167	-\$83	-\$167
Self-Sufficiency Wage				
Hourly	\$15.84	\$19.48	\$9.97 per adult	\$11.57 per adult
Monthly	\$2,788	\$3,429	\$3,510	\$4,071
Annual	\$33,457	\$41,151	\$42,118	\$48,851

Source: Women's Foundation of Southern Arizona. (2012). How Much Is Enough in Your County? Retrieved 2012 from http://www.womengiving.org/wp-content/uploads/2012/05/AZ12_SSS_Web_050212.pdf



Unemployment

Why Is It Important

Healthy communities require an adequate supply of jobs that generate enough income to pay for basic needs. The unemployment rate as defined by the International Labor Organization measures the number of people who are without jobs and who have actively sought work within the past four weeks.⁵ The unemployment rate is calculated as a percentage by dividing the number of unemployed individuals by all individuals currently in the labor force. Since the economic recession began, much attention has been paid to the unemployment rate and its inability to capture data on individuals that are underemployed or have stopped searching for work. However, it remains the primary indicator of a community's economy. Job growth is an additional indicator of economic well-being and Arizona has added jobs at a slower rate than the U.S. as a whole for the past three years (2010 to 2012).⁶

Snapshot of Community Assets

- ***The Yuma Private Industry Council (YPIC)*** offers job search help, resume assistance, life skills workshops, on-the-job training, and more at its Yuma and Somerton offices.
 - YPIC also has a ***Youth Services Department*** that offers tutoring, mentoring, summer employment opportunities, career planning, and on the job training to youth ages 14-21.
- ***The Greater Yuma Economic Development Corporation (EDC)*** seeks to attract new commerce and industry to the greater Yuma area and develop the area's existing industry to its fullest potential.

⁵ International Labour Organization. (1982). Resolution concerning statistics of the economically active population, employment, unemployment and underemployment adopted by the Thirteenth International Conference of Labour Statistics. Thirteenth International Conference on Labour Statistics.

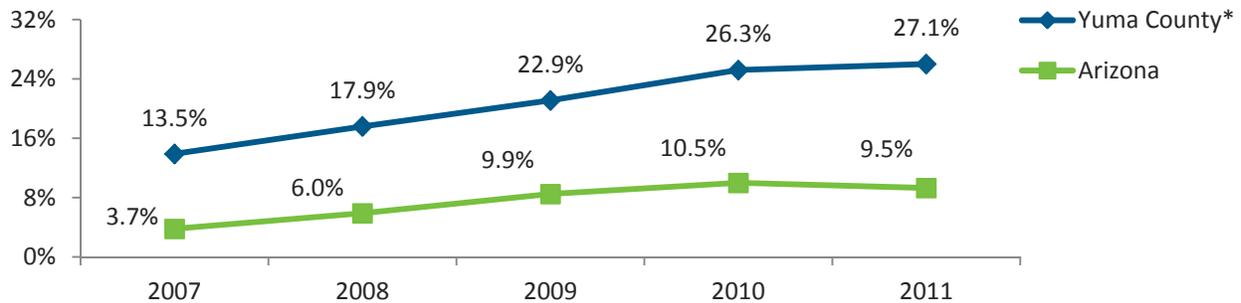
⁶ Arizona Directions. (2012). Arizona Indicators. Retrieved 2012 from Arizonaindicators.org



What the Data Tell Us

The unemployment rate in Yuma County was just over 27%, nearly three times the rate of Arizona, which was about 10% in 2011.

Unemployment Rate



Source: Arizona Department of Commerce Research Administration. (2012). Special Unemployment Report. Retrieved 2012 from <http://www.workforce.az.gov/>.

*Data for Yuma County excludes unemployment on Native American Reservations.

Note: Unemployment rates are not seasonally adjusted.

Note: Arizona Department of Economic Development updates previous years of data in 2012. Data presented reflect those changes.

The 2011 rate of unemployment varied within the region, from 14% in Tacna to 63% in San Luis.

Unemployment Rate by Community

PLACE	2007	2008	2009	2010	2011
Fortuna Foothills	7.1%	9.7%	12.8%	14.9%	15.5%
Gadsden	20.6%	26.4%	32.8%	37.0%	37.9%
San Luis	30.1%	37.5%	45.0%	49.6%	63.3%
Somerton	21.3%	27.4%	34.0%	38.2%	39.2%
Tacna	6.4%	8.8%	11.3%	13.5%	14.1%
Wellton	14.9%	19.7%	25.0%	28.7%	29.6%
Yuma City	10.3%	13.8%	17.9%	20.7%	18.1%
Yuma County*	13.5%	17.9%	22.9%	26.3%	27.1%
Arizona	3.7%	6.0%	9.9%	10.5%	9.5%

Source: Arizona Department of Commerce Research Administration. (2011). Special unemployment Report. Retrieved 2012 from <http://www.workforce.az.gov>

*Data for Yuma County excludes unemployment on Native American Reservations.

Note: Sub-county figures are calculated using a census share methodology; by multiplying current estimates of county-wide employment and unemployment by the respective employment and unemployment shares (percentages) for each sub-county area at the time of the 2000 Census. This method assumes that the rates of change in employment and unemployment, since 2000, are exactly the same in each sub-county area as at the county level (i.e., that the shares are still accurate). If this assumption is not true for a specific sub-county area, then the estimates for that area may not be representative of the current economic conditions. Since this assumption is untested, caution should be employed when using these data.

Note: Unemployment rates are not seasonally adjusted.



Poverty

Why Is It Important

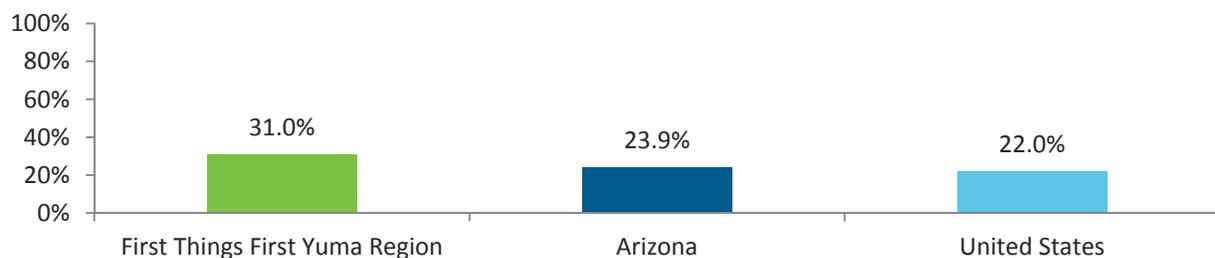
Developed in the early 1960s, the Federal Poverty Thresholds (more commonly known as Federal Poverty Levels) were based on three times the cost of a nutritionally adequate food plan, as determined by the Department of Agriculture. This figure presupposes that the average family spends one-third of their income on food. Annual adjustments for inflation occur, based on changes in the Consumer Price Index, but the Federal Poverty Thresholds do not consider other factors besides food, such as child care, and housing costs. The Federal Poverty Thresholds are used mainly for statistical purposes – including estimates of the number of Americans in poverty each year. Each person or family is assigned to one of 48 possible poverty thresholds based on the size of the family and ages of the family members.⁷

Arizona had the 5th highest child poverty rate in the nation in 2010.⁸ Living in poverty puts children at risk for a wide variety of challenges with both immediate and lasting effects. Children who grow up in poverty are more likely to lack adequate food, become victims of crime and violence, and lack basic health care. They are at significant risk for dropping out of school early, poor academic performance, behavior problems in school, lower levels of literacy, and lower educational attainment.⁹

What the Data Tell Us

Nearly one-third (31%) of children ages birth through five in the First Things First Yuma Region lived below the poverty level, a higher percentage than statewide (24%) or across the nation (22%), according to the 2006-2010 Census estimates.

Children Birth Through Five Living Below the Poverty Level, 2006-2010 5-Year Estimates



Source: U.S. Census Bureau. (2011). Table B17001 & B09001- Poverty Status in the Past 12 Months by Sex by Age. *American Community Survey 2006-2010 5-Year Estimates*. Retrieved 2011 from <http://factfinder.census.gov>.

Note: The First Things First Yuma Regional data is calculated by removing Cocopah Reservation from Yuma County.

⁷ U.S. Department of Health and Human Services. (n.d.). Poverty Guidelines and Poverty Measurement. Retrieved January 5, 2011. <http://aspe.hhs.gov/poverty/index.shtml>.

⁸ Arizona Directions. (2012). Arizona Indicators. Received 2012 from arizonaindicators.org

⁹ Winsler, A., Tran, H., Hartman, S. C., Madigan, A. L., Manfra, L., & Bleiker, C. (2008). School readiness gains made by ethnically diverse children in poverty attending center-based childcare and public school pre-kindergarten programs. *Early Childhood Research Quarterly*, 23(3), 314-329.



At least one in five children ages 5 through 17 were part of a family living in poverty in each of the areas served by the regional school districts, except for Wellton Elementary School District in 2010. The area served by Gadsden and Somerton Elementary School Districts had the highest percentage of children ages 5 through 17 living in families in poverty (39% and 37%, respectively), while the area served by Wellton Elementary School District had the lowest (18%).

Children Ages 5 through 17 in Families Living in Poverty, 2010

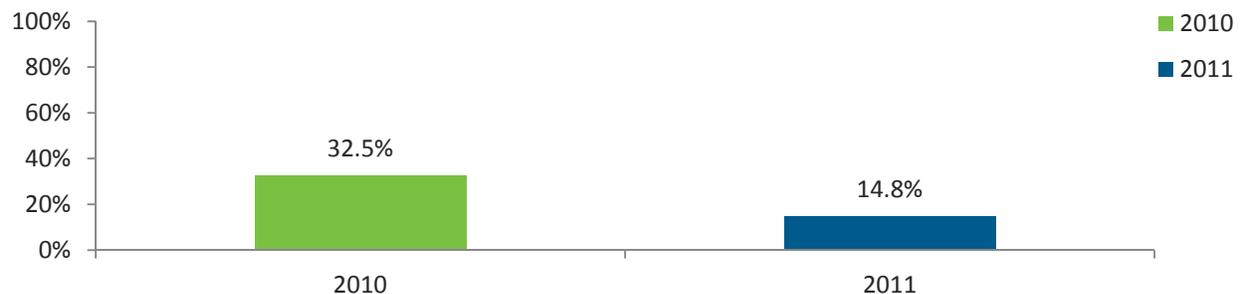
SCHOOL DISTRICT	PERCENT
Crane Elementary School District	27.7%
Gadsden Elementary School District	38.6%
Hyder Elementary School District	29.9%
Mohawk Valley Elementary School District	28.6%
Somerton Elementary School District	37.4%
Wellton Elementary School District	18.1%
Yuma Elementary School District	27.0%

Source: U.S. Census Bureau. (2011). Small Area Income and Poverty Estimates. Retrieved 2012 from <http://www.census.gov/cgi-bin/saie/saie.cgi>

According to First Things First Yuma Region parent survey respondents, 15% reported they had gone without basic needs such as child care, food, housing, or medical care in the past 12 months in 2011. This was much less than in 2010 in which nearly one-third of parents reported that they went without basic needs.



Parents Who Indicated Having Gone without Basic Needs such as Child Care, Food, Housing, or Medical Care in the Past 12 Months (Respondents answering "yes")



N: 2010=557, 2011=649.

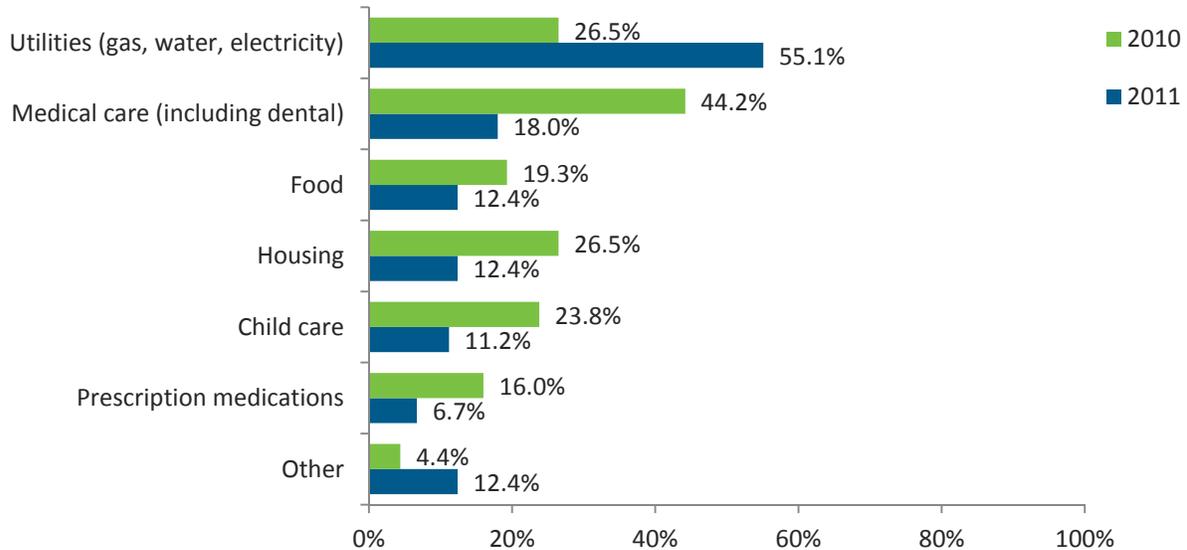
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



The most common basic needs that respondents identified having gone without include utilities, such as gas, water, and electricity (55%); medical care (18%), and food (12%) in 2011. Many more respondents went without utilities in 2011 (55%) than in 2010 (27%).



Types of Basic Needs Parents Reported Having to Go Without in the Past 12 Months



2010: Multiple response question with 181 respondents offering 291 responses. 2011: Multiple response question with 89 respondents offering 116 responses.

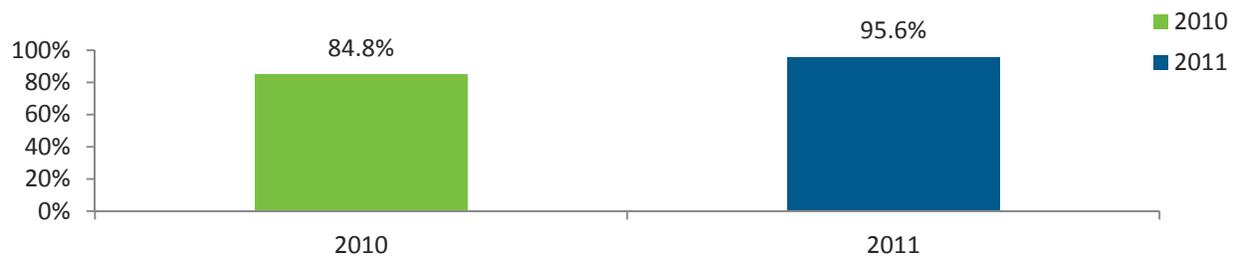
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Note: These responses are not mutually exclusive.

Less than 5% of parent survey respondents said they did not have reliable transportation to necessary services, such as the grocery store, church, school, the doctor, or child care in 2011, a decrease from 15% in 2010.



Parents Who Reported Usually Having Reliable Transportation to Services that They Need, such as the Grocery Store, Church, School, the Doctor, or Child Care (Respondents answering “yes”)



N: 2010=567, 2011=655.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



Economic Supports

Why Is It Important

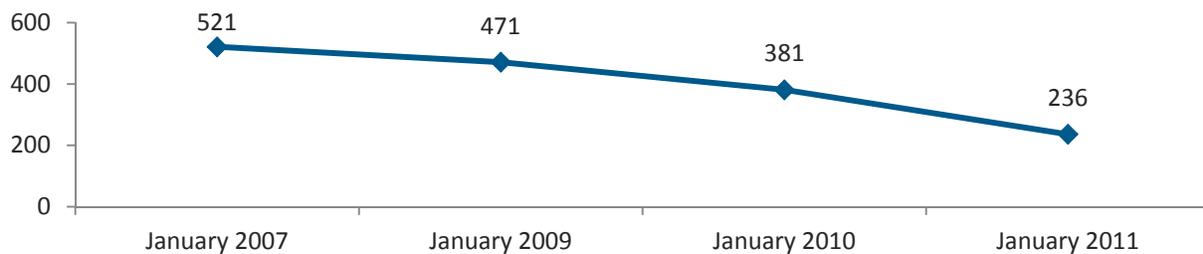
Many families need economic support to meet their basic needs during periods of reduced income, illness, or unemployment. Some families are falling into the income eligibility gap for support services. To be eligible for federal and state supports, a family has to be extremely low-income. Those who earn slightly more are not eligible for support, yet often have difficulty meeting their basic needs. There is still a need, therefore, for supplemental services like food banks and clothing for those families.

What the Data Tell Us

The Temporary Assistance for Needy Families (TANF) program provides some temporary cash assistance for struggling families with children, while the parent/parents are trying to return to work.¹⁰ The federal TANF law allows states to offer a maximum of 60 months of assistance within one's lifetime. Effective July 1, 2010, the Lifetime Benefits Limit for TANF in Arizona was reduced from 60 to 36 months. All families that had received TANF from 37 to 60 months were immediately removed from the TANF roles. Effective August 1, 2011, the Lifetime Benefits Limit for TANF in Arizona was reduced again from 36 to 24 months. All families that had received TANF for more than 24 months were immediately removed.

In Yuma County, 236 families with children ages birth through five received support from TANF in January of 2011, a 55% decrease since 521 in 2007.

Families with Children Ages Birth Through Five Receiving Temporary Assistance for Needy Families (TANF), Yuma County



Source: Arizona Department of Economic Security. (2011). DES Multidata Database. (Unpublished Data). Received 2012 from First Things First.

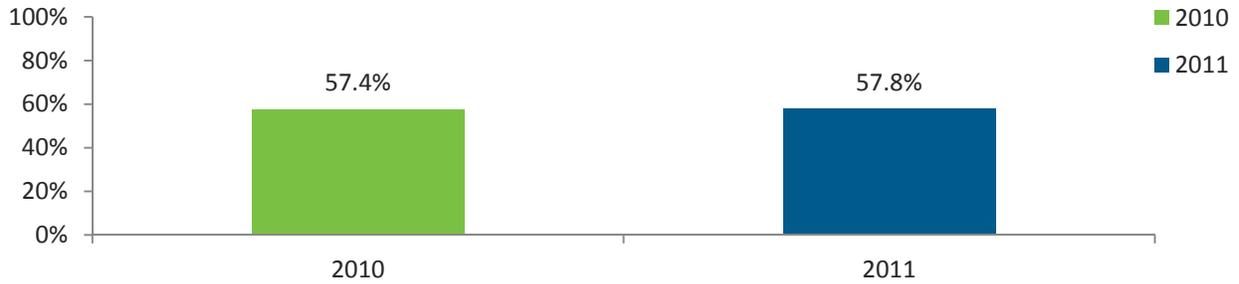
¹⁰ U.S. Department of Health and Human Services, Administration for Children and Families. (2008). About TANF. Retrieved 2012 from <http://www.acf.hhs.gov/programs/ofa/tanf/about.html>.



Among First Things First Yuma Region parent survey respondents, over half (58%) reported that they or their family received some type of public assistance in 2011.



Parents Who Indicated that They or Their Family Received Public Assistance (Respondents answering "yes")



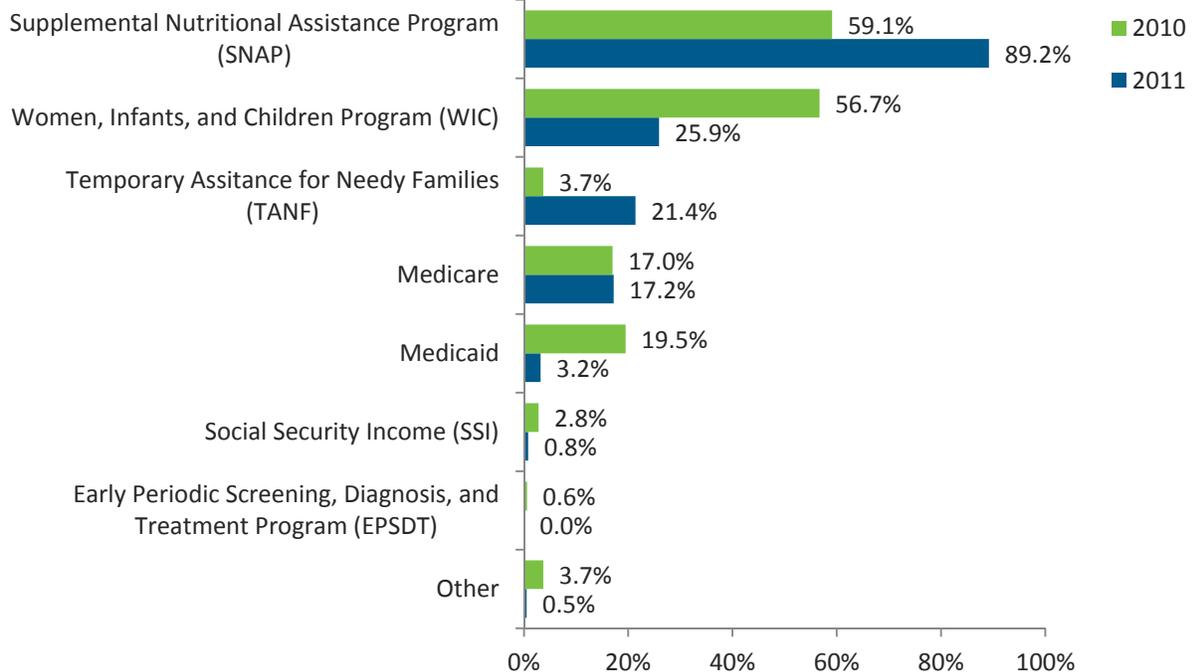
N: 2010=563, 2011=657.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Parent survey respondents most commonly utilized public assistance such as Supplemental Nutritional Assistance Program (SNAP) (89%), Women, Infants, and Children (WIC) (26%), TANF (21%), and Medicare (17%) in 2011. The percentage receiving Medicaid fell steeply from 20% in 2010 to 3% in 2011; this decline is most likely the result of legislative changes to the eligibility criteria and not a reduction in actual need.



Types of Public Assistance Received by Parents or Their Family



2010: Multiple response question with 323 respondents offering 527 responses. 2011: Multiple response question with 378 respondents offering 622 responses.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Note: These responses are not mutually exclusive.



Food Insecurity

Why Is It Important

Approximately 16 million children lived in households without enough food in the U.S. in 2010. Arizona was among the top 5 states with the highest rate of food insecure children under 18.¹¹ The lack of nutritious food is harmful to any individual, but food insecurity is particularly devastating to children and can have long-term consequences. Chronic under-nutrition, food insecurity, unhealthy foods, and hunger can lead to poorer physical and mental health, difficulty learning, lower test scores, increased school absences, tardiness, and suspensions.¹² This makes children more likely to suffer from poverty when they become adults.

Snapshot of Community Assets

- ***The Yuma Community Food Bank:***
 - Distributes ***emergency food assistance*** to low-income individuals and households using surplus commodities donated by USDA. The food bank distributes at nine sites: Carver Park, Somerton, Wellton, Dateland, Foothills, San Luis, Avenue C, Quartzsite Food Bank, and Parker Food Bank.
 - Provides ***weekend backpacks filled with food*** to students at Desert Sonora Elementary, Orange Grove Elementary, Tierra Del Sol Elementary, Valle Del Encanto, Somerton Middle School, and Dateland Elementary.
- ***The First Things First Yuma Regional Partnership Council*** funds the Yuma Community Food Bank to provide food boxes and basic necessities to families in need with children birth through five.
- ***The Child and Adult Care Food Program*** provides nutrition training and reimbursement to child care providers who serve nutritious meals to children.
- ***The Association for Supportive Child Care*** also seeks to address the issue of adequate nutrition for children. Yuma child care centers and homes participate in the food program.
- ***The First Things First Yuma Regional Partnership Council*** allocated additional funding to improve access to nutritious food during the economic and employment recession.

¹¹ Feeding America. (2012). Child Hunger Facts. Retrieved 2012 from <http://www.feedingamerica.org>.

¹² Center on Hunger and Poverty, Heller School for Social Policy and Management. (2002, June). The Consequences of Hunger and Food Insecurity for Children, Evidence from Recent Scientific Studies. Massachusetts: Brandeis University.



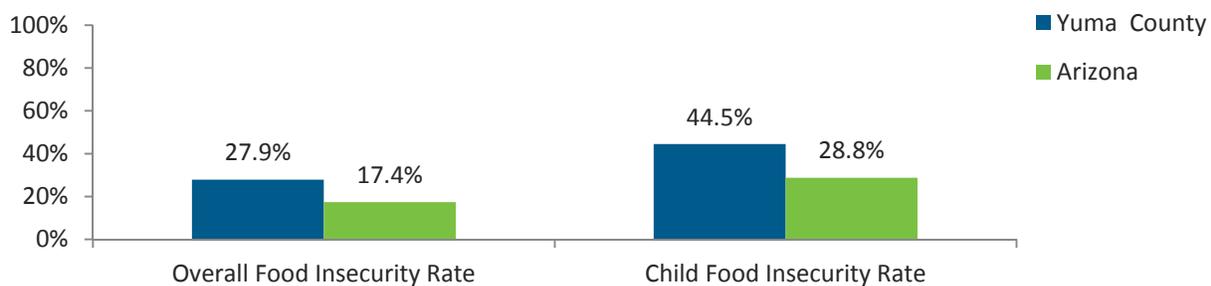
What the Community Is Saying

- The Yuma County Food Bank offers *additional monthly supplemental food boxes* to babies, children under the age of six, pregnant and postpartum women with infants, and seniors. According to a local community representative, the food bank has increased the vegetables it hands out to community members as part of this Commodity Supplemental Food Program. The food bank is also passing out food throughout Yuma County so that transportation does not prevent families from obtaining food. People are also aware that they can take as much food as they need (first come first serve basis), and they feel safe coming to the food bank without social stigma attached to needing the support.

What the Data Tell Us

Households are classified as food insecure if one or more household members went hungry at least once during the year because the household could not afford enough food to eat. Nearly half (45%) of the children in Yuma County lived in households without enough food in 2009, higher than in Arizona (29%).

Food Insecurity Rate, 2009



Source: Feeding America. (2012). Map the Gap. Retrieved 2012 from www.feedingamerica.org/mapthegap.

The Yuma Community Food Bank services two counties in Arizona and one county in California, and distributes 7,893,951 pounds of food to residents. The most common types of service agencies distributing the food were emergency (6) and youth programs (5).

Service Agencies Distributing Food by Type, Yuma Community Food Bank, 2011

TYPES OF SERVICE AGENCIES	NUMBER
Emergency	6
Soup Kitchen	1
Shelter	2
Residence	3
Day Care	1
Multi-Service	1
Senior	2
Rehabilitation	2
Youth Programs	5
Other Programs	4

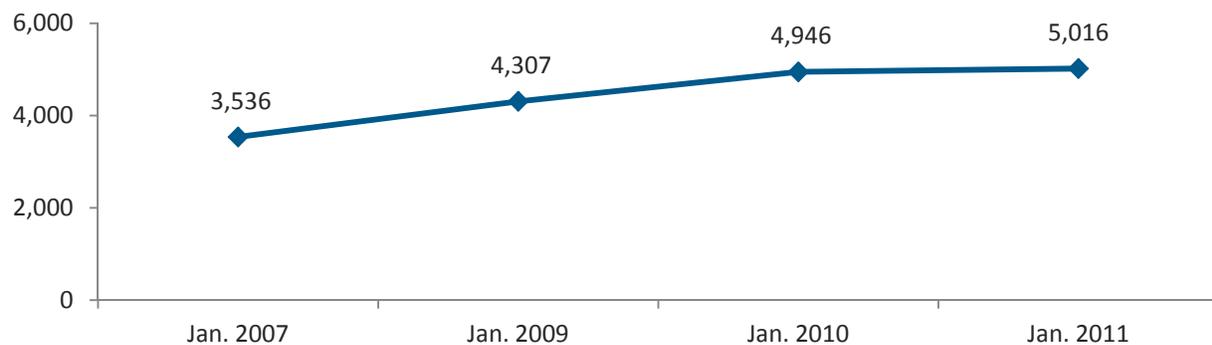
Source: Feeding America. (2012). Retrieved 2012 from www.feedingamerica.org



The Supplemental Nutrition Assistance Program (SNAP) previously called Food Stamps provides benefits to individuals struggling to obtain food for their families. The program focuses on providing nutritional assistance that can be used on any foods that can be eaten in the home. In 2009, 48% of all SNAP participants were children in the U.S. The average SNAP benefit is \$29/week for a qualifying individual.¹³

The number of families with children ages birth through five in Yuma County receiving SNAP benefits has increased steadily since 2007. Slightly more than 5,000 families with children ages birth through five were receiving benefits in 2011.

Families with Children Ages Birth Through Five Receiving Supplemental Nutrition Assistance Program (SNAP, Formally Known as Food Stamps), Yuma County



Source: Arizona Department of Economic Security. (2012). DES Multidata Database. (Unpublished Data). Received 2012 from First Things First.

¹³ Gundersen, C., E. Waxman, E. Engelhard and J. Brown. (2011). Map the Meal Gap: Child Food Insecurity 2011. Received 2012 from Feeding America.



The National School Lunch Program qualifies low-income children living in families between 130% and 185% of the Federal Poverty Level for reduced-cost meals and those at or below 130% of the poverty level for free meals.¹⁴

The school districts with the highest percentage of children eligible to receive free and reduced price meals in 2011 were Gadsden Elementary School District (97%) and Hyder Elementary Unified School District (89%). The lowest percentages were in the Mohawk Valley (64%), Yuma (68%), and Crane (74%) Elementary School Districts, and the Yuma Union High School District (68%). However those percentages still meant that the majority of children were eligible and therefore were either in poverty or very close to the poverty level.

Children Eligible for Free and Reduced Price Meals, Yuma County School Districts

SCHOOL DISTRICT	OCTOBER 2006	OCTOBER 2007	OCTOBER 2008	OCTOBER 2009	OCTOBER 2010	OCTOBER 2011
Antelope Union High School District	61.4%	67.5%	67.9%	67.4%	72.8%	76.4%
Crane Elementary District	66.9%	64.3%	65.0%	68.3%	68.2%	74.0%
Gadsden Elementary District	96.4%	96.4%	96.4%	97.1%	97.1%	97.2%
Hyder Elementary District	NA	91.1%	91.1%	91.1%	93.3%	89.0%
Mohawk Valley Elementary District	72.1%	72.0%	75.3%	73.3%	77.7%	64.1%
Somerton Elementary District	83.4%	79.8%	84.7%	84.7%	84.7%	84.4%
Wellton Elementary District	65.4%	67.5%	71.1%	74.9%	62.4%	77.0%
Yuma Elementary District	66.7%	67.8%	67.1%	69.5%	68.1%	67.7%
Yuma Union High School District	65.2%	65.0%	66.9%	66.8%	66.9%	68.4%

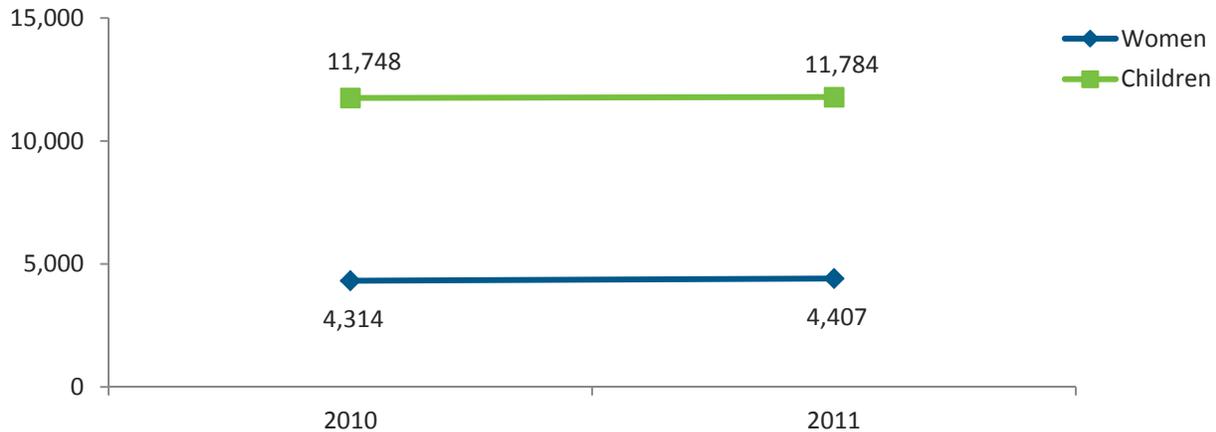
Source: Arizona Department of Education. (2011). National School Lunch program and School Breakfast Program. Retrieved 2012 from <http://www.ade.az.gov/health-safety/cnp/nslp/>.

¹⁴United States Department of Agriculture, Food and Nutrition Service. (2009, August). National School Lunch Fact Sheets. Retrieved June 22, 2010 from <http://www.fns.usda.gov/cnd/lunch/AboutLunch/NSLPFactSheet.pdf>



Participants in the Women, Infants, and Children (WIC) program receive nutritious supplemental foods, health screening services, age-appropriate nutrition information, and referrals to health and human services. In 2011, nearly 11,800 children and 4,400 women were receiving WIC services in the First Things First Yuma Region, similar to 2010.

Women, Infants, and Children (WIC) Recipients, First Things First Yuma Region



Source: Arizona Department of Economic Security. (2012). DES Multidata Database. (Unpublished Data). Retrieved 2012 from First Things First. Note: First Things First Yuma Region data are the combination of zip codes in this region (see Methodology for list of zip codes). Data shown for First Things First Yuma Region only includes ZIP codes that had at least 30 WIC participants per category within them. The following zip codes were excluded: 85333, 85336, 85347, 85352, 85366, and 85369.

Homelessness

Why Is It Important

Homelessness among young children, and the high mobility often associated with homelessness, can lead to behavior problems and reduced academic success in school.¹⁵ The McKinney-Vento Act ensures that homeless children receive transportation to and from school free of charge, allowing children to attend their school of origin (the last school in which they were enrolled or the school they attended when they first became homeless), regardless of what district the family resides in. It requires schools to register homeless children even if they lack normally required documents, such as immunization records or proof of residence.^{16, 17}

¹⁵ Zerger, S. (2004, February). Health care for homeless Native Americans. *National Health Care for the Homeless Council*. Retrieved June 2010 from <http://www.nhchc.org/Publications/FINALHnNativeHealth.pdf>

¹⁶ McKinney-Vento Homeless Assistance Act of 1986, 42 U.S.C. § 11317 (1987).

¹⁷ Though the definition of homeless was expanded in 2012 to include those who are unstably housed, or in imminent danger of losing their nighttime residence. The data presented reflects information collected prior to the definitional change.



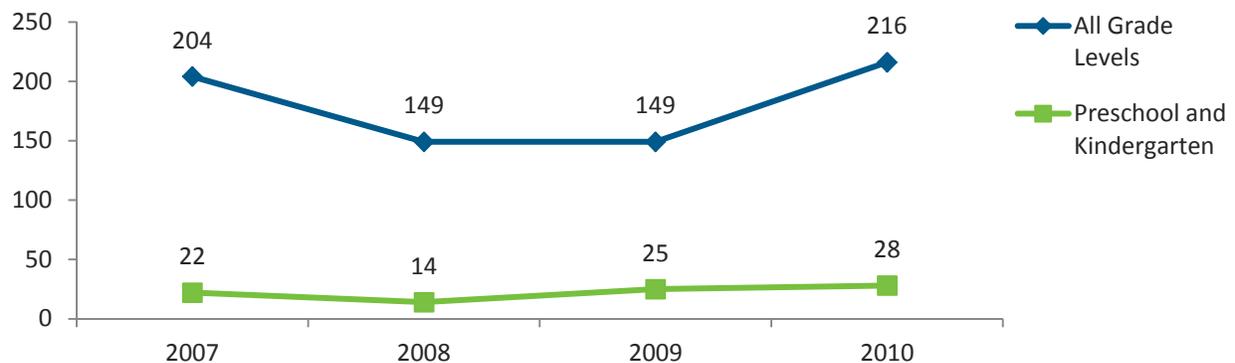
The McKinney-Vento Act defines homeless children as individuals who lack a fixed, regular, and adequate nighttime residence. The act provides examples of children who would fall under this definition:

1. Children sharing housing due to economic hardship or loss of housing;
2. Children living in motels, hotels, trailer parks, or camp grounds due to lack of alternative accommodations;
3. Children living in emergency or transitional shelters;
4. Children awaiting foster care placement;
5. Children whose primary nighttime residence is not ordinarily used as a regular sleeping accommodation (e.g. park benches, etc.);
6. Children living in cars, parks, public spaces, abandoned buildings, substandard housing, a bus or train station.

What the Data Tell Us

There were 216 students reported as homeless during the 2010/11 school year in Yuma County, 28 of them were in preschool or kindergarten.

Homeless Students (McKinney-Vento Eligible), Yuma County



Source: Arizona Department of Economic Security. (2010). Current Status of Homelessness in Arizona. Received 2010 from First Things First.



Most First Things First Yuma Region elementary schools (4 of 7) saw an increase in homeless children from 2010 to 2011.

Homelessness, by School District, First Things First Yuma Region

SCHOOL DISTRICT	PRESCHOOL		KINDERGARTEN		DISTRICT TOTAL	
	2010	2011	2010	2011	2010	2011
Crane Elementary School District	NA	NA	5	14	81	109
Gadsden Elementary School District	0	0	1	0	4	6
Hyder Elementary School District	0	0	0	0	0	0
Mohawk Valley Elementary School District	0	0	0	0	0	0
Somerton Elementary School District	0	0	0	4	7	17
Wellton Elementary School District	NA	NA	1	7	12	40
Yuma Elementary School District	7	0	14	5	86	68

Source: First Things First Yuma Region School Districts. (2012). Correspondence with District Representatives. Received 2012 from First Things First Yuma Regional School Districts.

Note: Preschool homeless children include only students attending preschools associated with public school districts. Not applicable is indicated where school districts do not have preschools.

Foreclosure

Why Is It Important

Many families across the country have been negatively affected by the mortgage crisis. When foreclosures force children out of their homes, they are affected both physically and emotionally. While not all children who experience a foreclosure will become homeless, they often experience the same increased mobility associated with homelessness. This increased mobility has been shown to be associated with lower performance in math and reading, and more delinquent behaviors in the classroom.

Snapshot of Community Assets

- **Housing America Corporation** in Somerton provides:
 - **Housing and rental location assistance** for very low-income families of Yuma County
 - **Down payment assistance and education** for first time home buyers
 - **Home ownership education, counseling, and technical assistance** to support low and very low-income families in *retaining their own homes*.



What the Data Tell Us

Foreclosure rates during May of 2011 were lower in Yuma County than in Arizona as a whole, with a total of 196 foreclosures in Yuma County. Within the region, Somerton had the highest rate of foreclosures (1 foreclosure for every 286 homes).

Foreclosure Rate

PLACE (ZIP CODES)	MAY 2011	
	Number of Foreclosures	Rate of Foreclosures
San Luis (85349)	19	1 in 344
Somerton (85350)	19	1 in 286
Wellton (85356)	4	1 in 742
Yuma City (85364)	75	1 in 399
Yuma City (85365)	55	1 in 449
Yuma City (85367)	21	1 in 813
Yuma County	196	1 in 448
Arizona	9,330	1 in 305

Source: RealtyTrac. (May 2011). National Real Estate Trends. Retrieved 2012 from <http://www.realtytrac.com/tendcenter/>.

Note: The foreclosure rate is calculated by dividing the total housing units (based on the most recent estimate from the U.S. Census Bureau) by the total number of properties that received foreclosure filings during the month.



THE EARLY CHILDHOOD SYSTEM



EARLY CARE AND EDUCATION

Over forty years of research has shown that children begin learning at birth and they need quality learning environments that support optimal growth and development.²⁰ For example, children exposed to high quality early childhood education are less likely to need special education or be held back a grade. They score higher on school-readiness tests and are more likely to advance to college and successful careers.²¹

Parents need options for their children to be cared for in quality early care and educational settings. Quality early care and education settings include: safe, healthy environments; highly educated teachers; classrooms and materials that stimulate children at different stages of learning; low staff turnover rates; and, small child to staff ratios so that kids get the attention and support they need. All of these can contribute to a child's development and have long term effects that extend into adolescence and adulthood.²²

SELECTED INDICATORS

Early Child Care & Education

- Child Care Access and Enrollment
- Cost of Child Care
- Child Care Providers
- Parent Knowledge of Child Development

Special Needs

- Children with Disabilities: Identification & Services

Education

- School Enrollment
- School Readiness
- 3rd Grade Test Scores
- Graduation Rate
- Educational Attainment
- Family Literacy

²⁰ Enterprise Community Partners, Inc. (2006). The importance of Early Care and Education. Retrieved 2010 from <http://www.practitionerresources.org/cache/documents/639/63935.doc>

²¹ First Things First. (2010). Quality Early Learning. 2010 Annual Report. Retrieved 2012 from http://www.azftf.gov/WhoWeAre/Board/Documents/FTF_Annual_Report_FY2010_web.pdf

²² Ibid.



Early Child Care and Development

Child Care Access and Enrollment

Why Is It Important

Quality child care helps children develop social and cognitive skills in preparation for school and life success.²¹ Child care, and in particular, subsidized care for low-income families, provides critical support for working families. Child care options include center-based facilities, family and child care homes, and informal care by friends (kith) and family (kin).

Family, friend, and neighborhood child care programs (kith and kin) are a likely option for parents who cannot afford licensed child care centers. In Arizona, as many as 50% of children ages birth through five are being cared for by relatives or neighbors in settings which are exempt from regulations aimed at serving to protect and enrich these children. The Arizona Kith and Kin Project, sponsored by the Association for Supportive Child Care and funded by a First Things First grant, is used to provide relatives and friends with access to information and training on child development, health, and safety issues.²²

Quality First was started by First Things First in 2009 to increase the availability of quality early care and education in child care centers and homes. It is a voluntary quality improvement and rating system for programs serving children ages birth through five. This system helps providers to develop lessons focused on early literacy; support teachers in becoming better trained to work with infants, toddlers, and preschoolers; and purchase age-appropriate learning materials. Approximately 36,000 Arizona children had access to a higher standard of child care through Quality First in 2010. The ratings of nearly 1,000 providers will be publicly advertised to parents across the state in 2012.²³

The Child Care Resource and Referral Network (CCR&R) helps parents to find quality early care programs in their community. CCR&R maintains a list of child care providers who are licensed by the Department of Health Services, certified by the Department of Economic Security, or registered with the CCR&R. There are providers that are registered with the CCR&R that are not licensed or certified but do meet the minimum requirements of passing a Child Protective Services background check and receiving CPR and First Aid training. CCR&R helps to match children to programs that fit their needs based on age, personality, special needs, and location. Parents are also provided with a checklist to use when visiting potential child care providers.

²¹ National Institute of Child Health and Human Development. (n.d.). Link Between Child Care and Academic Achievement and Behavior Persists Into Adolescence. Retrieved 2010 from <http://www.nichd.nih.gov/>

²² First Things First. (2010). Annual Report. Retrieved 2012 from http://www.azftf.gov/WhoWeAre/Board/Documents/FTF_Annual_Report_2011.pdf

²³ First Things First. (2011). Annual Report. Retrieved 2012 from http://www.azftf.gov/WhoWeAre/Board/Documents/FTF_Annual_Report_FY2010_web.pdf



Snapshot of Community Assets

- **The Yuma First Things First Regional Partnership Council:**
 - Provides funding for early care and education centers to **increase their quality of care**. Funded services and materials include on-site coaching, program assessment, teacher education scholarships, developmentally appropriate learning materials, early literacy curriculum, and financial resources.
 - Also provides funding to **help child care providers meet high health and safety standards** for the children in their care.
 - Funds the **expansion of child care slots and quality** through assistance with **planning, licensing, or certification**, and support for increased quality in existing programs.
- **The Arizona Kith and Kin Project** aims to improve the quality of care provided by friends and family. The project offers home visits and provides support-training groups in partnership with Western Arizona Council of Governments (WACOG) Head Start in Yuma County.

What the Data Tell Us

The First Things First Yuma Region lost a total of 37 child care programs in one year (2010 to 2011). There were an estimated 5,026 licensed spaces available in 2011 within the First Things First Yuma Region.

Child Care Programs and Capacity, First Things First Yuma Region

	2010		2011	
	NUMBER OF PROGRAMS	APPROVED CAPACITY	NUMBER OF PROGRAMS	APPROVED CAPACITY
ADHS Licensed Programs				
Child Care Centers	47	4,051	49	3,955
Child Care Public Schools	13	1,453	12	901
Child Care Small Group Homes	23	220	17	170
ADES Certified Programs				
Child Care Homes	118	464	88	NA
Child Care Resource and Referral (CCR&R)				
Unregulated Child Care Homes	12	60	10	NA
Total Programs	213	6,248	176	5,026
Quality First Programs	26 (8 Centers, 18 Homes)	NA	30 (12 Centers, 18 Homes)	NA

Source: Arizona Department of Health Services. (2011). Child Care Centers and Small Groups Homes by Zip Code. Retrieved April, 2011 from <http://www.azdhs.gov/als/databases/index.htm>.

Child Care Resource and Referral Network. (2011). Received 2011 from First Things First.

Note: Approved capacity includes slots for children ages birth through 12 years. Therefore, the capacity for children ages birth through five may be less than the values presented.

¹Providers registered with Child Care Resource and Referral are not licensed or certified but do meet the minimum requirements of passing a Child Protective Services background check and receiving CPR and First Aid training.



An estimated 1 in 4 children with working parents in the First Things First Yuma Region had child care spaces available to them in 2010. This leaves an estimated 18,000 children ages birth through 11 without licensed child care spaces, forcing parents to look for alternative solutions such as Kith and Kin care.

Estimated Child Care Need and Availability, First Things First Yuma Region, 2010

CHILD CARE INDICATOR	2010
Estimated Number of Children (Ages 0-11) with Parents in the Labor Force ¹	24,644
Estimated Number of Child Care Spaces (Ages 0-12)	6,248
Estimated Percent of Children (Ages 0-11) with Parents in the Labor Force with Licensed Child Care Available	25.4%

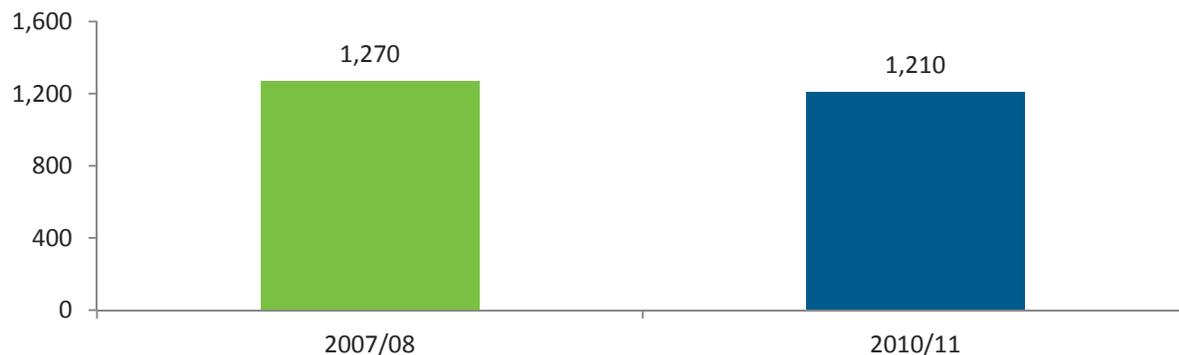
Source: U.S. Census Bureau. (2011). Table B23007- Presence of Own Children Under 18 Years by Family Type by Employment Status. *American Community Survey 2010 1-Year Estimates*. Retrieved 2012 from <http://factfinder2.census.gov>.

¹Percentage of children under 6 and children 6 to 17 living with both parents or a single parent in the labor force applied to the total number of children under 6 and 6 to 11 respectively.

Western Arizona Council of Governments (WACOG) is the grantee for Head Start programs in the First Things First Yuma Region, along with the partner organization Chicanos Por La Causa. WACOG encompasses Yuma, La Paz, and Mohave Counties.

During the 2010/11 school year, 1,210 children were enrolled in WACOG Head Start programs, 60 fewer children than in 2007/08.

Total Head Start Enrollment, Western Arizona Council of Governments (WACOG)



Source: Western Arizona Council of Governments. (2011). Head Start Information Report. Received 2011 from Western Arizona Council of Governments.



Of children enrolled in Head Start from August 2010 to May 2011, 71% were four years old, 73% were Hispanic, 86% were eligible by income, and 57% spoke English as their primary language.

Head Start Enrollment Demographics, Western Arizona Council of Governments (WACOG)

DEMOGRAPHICS	AUG-DEC 2009	AUG 2010-MAY 2011
Age		
3 years old	35.3%	29.4%
4 years old	64.6%	70.6%
Ethnicity		
Hispanic	89.2%	73.1%
Eligibility		
Income Eligible	85.7%	86.2%
Receipt of Public Assistance	8.3%	10.4%
Foster Children	1.1%	1.1%
Homeless	1.5%	1.2%
Over Income	3.4%	1.2%
Primary Language		
English	46.8%	57.1%
Spanish	52.8%	42.3%
Other	0.4%	0.6%

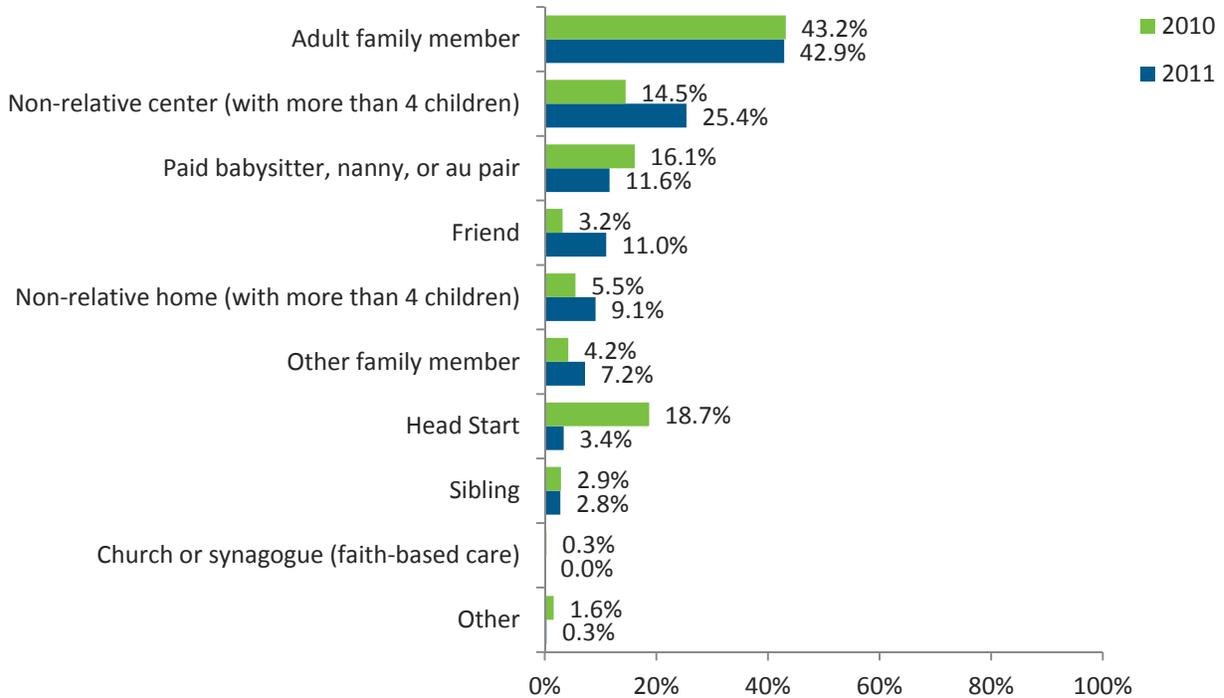
Source: Western Arizona Council of Governments. (2011). Personal Communication with Representative. Received 2011 from Western Arizona Council of Governments.



According to parent survey respondents in the First Things First Yuma Region, the primary source of child care in 2011 was an adult family member (43%), followed by a non-relative center with more than 4 children (25%), and a paid babysitter/nanny/au pair (12%).



Primary Source of Child Care



2010: Multiple response question with 380 respondents offering 420 responses. 2011: Multiple response question with 319 respondents offering 363 responses.

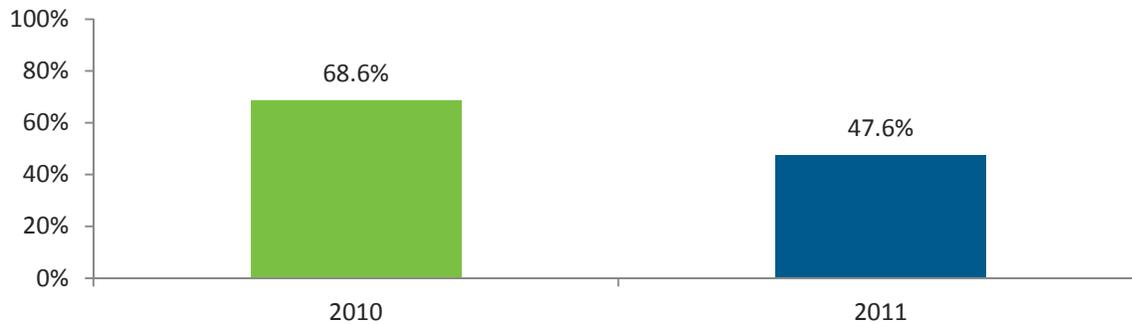
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Note: These responses are not mutually exclusive.

There was a 21% decrease of parent survey respondents in the First Things First Yuma Region who used child care from 2010 to 2011.



Parents Who Use Child Care When They Need to Work, Go to School, or for Other Reasons (Respondents answering “yes”)



N: 2010=570, 2011=656.

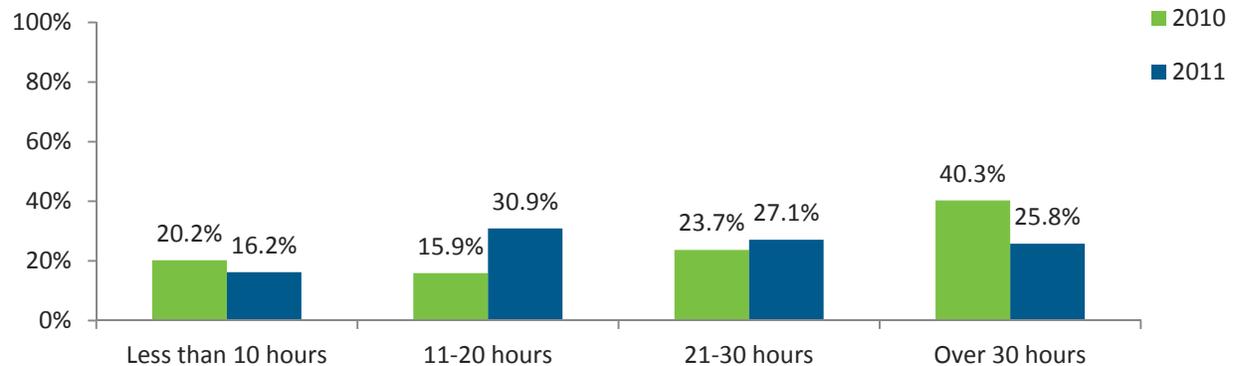
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



The number of hours that parent survey respondents had their children in child care per week decreased between 2010 and 2011. Parent respondents who had children in care for more than 20 hours per week decreased from 64% in 2010 to 53% in 2011.



Number of Hours Child is in Child Care per Week



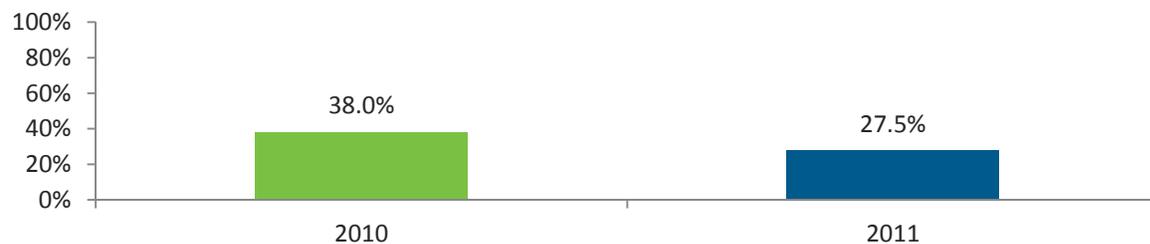
N: 2010=372, 2011=314.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

The number of parent survey respondents who had to make adjustments to accommodate their child care situation decreased by 11% from 2010 to 2011.



Parents Who Indicated Ever Having to Make Adjustments to Accommodate Their Child Care Situation (Respondents answering “yes”)



N: 2010=379, 2011=314.

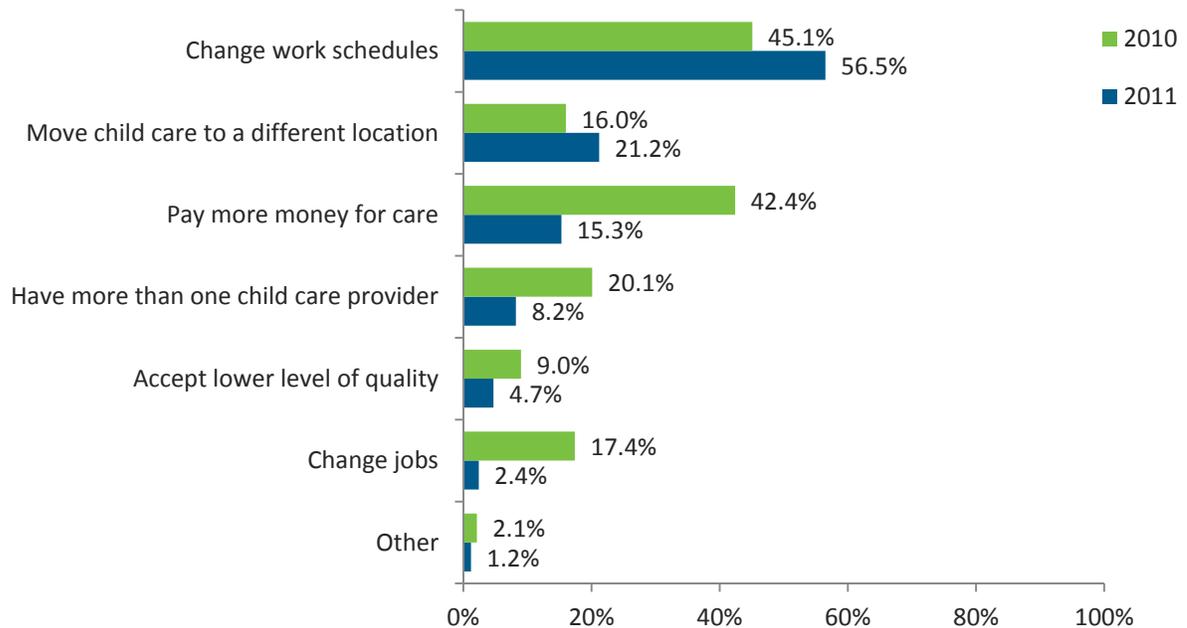
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



Of parent survey respondents who had to make adjustments, the most common adjustment was a "change of work schedules" which accounted for 57% of respondents in 2011. The second highest adjustment for parent respondents was to "move child care to a different location" which represented 21% of parent respondents in 2011.



Types of Adjustments Parents Have Ever Made to Accommodate Their Child Care Situation



2010: Multiple response question with 144 respondents offering 219 responses. 2011: Multiple response question with 85 respondents offering 93 responses.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

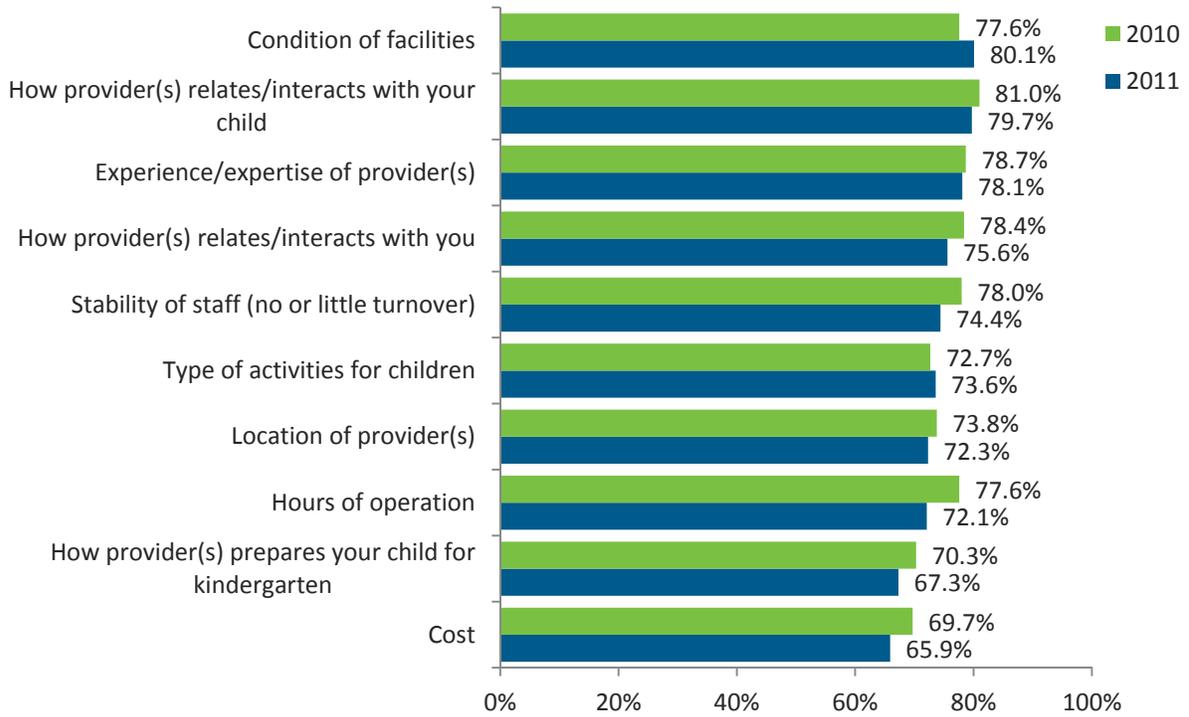
Note: These responses are not mutually exclusive.



Overall, parent survey respondents were very satisfied with all aspects of their child care arrangement. Parent respondents were most satisfied with the "condition of facilities" and "how providers relate/interact with their child, with each making up at least 80% of respondents who were very satisfied. Parent respondents were less satisfied with the cost and how providers prepare their children for kindergarten.



Parents Who Indicated Being "Very Satisfied" with the Following Aspects of Their Child Care Arrangement



2010 N: Condition=348, interaction with child=337, experience/expertise=338, interaction with you=334, stability of staff=328, activities=337, location=340, hours=339, preparation for kindergarten=330, cost=347.
 2011 N: Condition=311, interaction with child=311, experience/expertise=311, interaction with you=303, stability of staff=308, activities=311, location=311, hours=312, preparation for kindergarten=312, cost=311.
 Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



Cost of Child Care

Why Is It Important

Child care can be very costly for families. The cost of child care has grown twice as fast as the median income of families with children in the United States since 2000.²⁴ However, many families are benefiting from local child care programs and subsidies that significantly lessen these costs. For those who qualify, Head Start child care is provided at no cost to parents. Low-income parents who are working, in job training, or in school can receive child care subsidies through the Federal Child Care and Development Fund (CCDF). The statutory limit for eligibility for child care assistance is 85% of the state median income. In Arizona, the Department of Economic Security (DES) administers CCDF subsidies.

In addition to CCDF subsidies, Arizona was the first in the nation to launch a statewide scholarship program through its First Things First emergency Child Care Scholarships. Implemented in April 2009, it allocated \$23 million, totaling more than 11,600 children who could benefit from the program.

Snapshot of Community Assets

- *The Yuma First Things First Regional Partnership Council* funds Quality First Child Care Scholarships that enable children from low-income families to attend quality early care and education programs. As of the third quarter of the FY 2012, 295 children were receiving scholarships.

What the Community Is Saying

- The Department of Economic Security has reduced its assistance to families that are income-eligible for child care subsidies. It is estimated that these cuts impacted approximately 700 Yuma County children who were eligible by income but unable to receive support, according to a Head Start Representative.
- Funding changes have impacted both individual families and the overall landscape of child care availability. Child care costs are so high that some parents—including mothers who are on unemployment—find that it makes more financial sense to stay home and care for their children themselves. With fewer families able to pay for their services, child care centers have left staff go and some small family home care providers have gone out of business, according to a Head Start Representative.

²⁴ McSweeney, T. (January 29, 2010). Helping Middle Class Families with Soaring Child Care Costs. In the White House. Retrieved July 1, 2010 from www.thewhitehouse.gov/blog/2010/01/29/helping-middle-class-families-with-soaring-child-care-costs.



What the Data Tell Us

A family with a median family income and a child 3 to 5 years old would spend approximately 13% of the families' annual income on center-based preschool in Yuma County in 2010.

Estimate of Percent of Family Income Spent on Center-Based Preschool (Ages 3 to 5)



Source: Arizona Department of Economic Security. (2011). Child Care Market Rate Surveys. Retrieved 2011 from <https://www.azdes.gov/appreports.aspx?category=136>.

Note: Data presented are the cost of child care for one child age 3, 4, or 5 years old attending a child care center. Annual cost of child care assumes 5 days of child care per week for 52 weeks per year and is based on the average daily cost of child care: full-time for Yuma, La Paz, and Mohave Counties. The percent is calculated by dividing the annual cost of child care by the median annual family income in Yuma County.

The median daily cost of full-time child care was between \$20 and \$26 per day in Yuma, La Paz, and Mohave Counties in 2010. The most expensive care was for children under one at centers (\$26 per day), followed by unregulated home care (\$25 per day for all ages).

Median Daily Cost of Child Care: Full-Time, Yuma, La Paz, and Mohave Counties

AGE OF CHILD	2002	2004	2006	2008	2010
Children Under One Year					
Centers	\$20.00	\$20.00	\$21.60	\$25.00	\$26.00
Approved Homes	\$18.00	\$18.00	\$18.00	\$20.00	\$20.00
Certified Group Homes	\$18.00	\$20.00	\$20.00	\$22.00	\$23.00
Unregulated Homes	\$16.00	\$16.00	\$16.00	\$25.00	\$25.00
1 and 2 Year Olds					
Centers	\$19.00	\$19.00	\$20.00	\$22.00	\$23.00
Approved Homes	\$17.00	\$17.00	\$18.00	\$19.50	\$20.00
Certified Group Homes	\$18.00	\$18.00	\$20.00	\$21.00	\$22.00
Unregulated Homes	\$16.00	\$16.00	\$16.00	\$25.00	\$25.00
3, 4, and 5 Year Olds					
Centers	\$17.75	\$18.00	\$19.00	\$21.00	\$22.00
Approved Homes	\$17.00	\$16.00	\$18.00	\$18.00	\$20.00
Certified Group Homes	\$18.00	\$18.00	\$20.00	\$20.00	\$20.00
Unregulated Homes	\$16.00	\$16.00	\$16.00	\$23.50	\$25.00

Source: Arizona Department of Economic Security. (2011). Child Care Market Rate Surveys. Retrieved 2011 from <https://www.azdes.gov/appreports.aspx?category=136>

Note: Full-time is 6 or more hours a day.



The median daily cost of part-time child care was between \$12 and \$20 per day in Yuma, La Paz, and Mohave Counties in 2010. The most expensive care was unregulated homes and centers.

Median Daily Cost of Child Care: Part-Time, Yuma, La Paz, and Mohave Counties

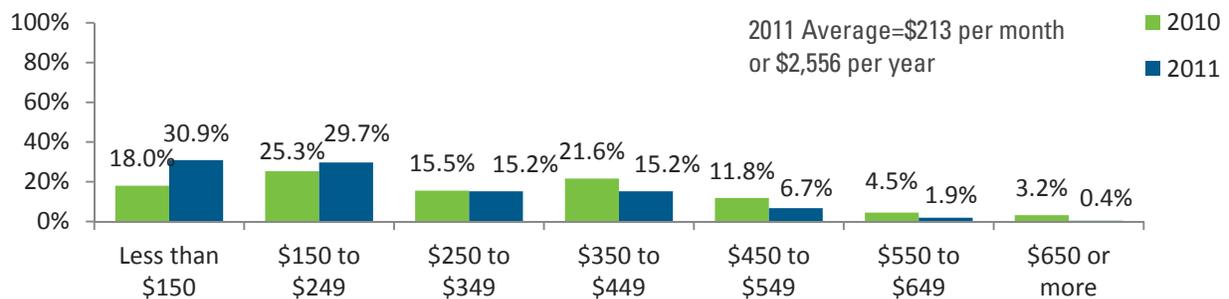
AGE OF CHILD	2002	2004	2006	2008	2010
Children Under One Year					
Centers	\$15.00	\$16.00	\$17.00	\$17.00	\$18.00
Approved Homes	\$10.00	\$10.00	\$10.00	\$12.00	\$12.00
Certified Group Homes	\$12.00	\$13.00	\$15.00	\$16.00	\$17.00
Unregulated Homes	\$12.00	\$8.00	\$16.00	\$15.00	\$20.00
1 and 2 Year Olds					
Centers	\$14.40	\$16.00	\$16.00	\$17.60	\$18.00
Approved Homes	\$10.00	\$10.00	\$10.00	\$11.03	\$12.00
Certified Group Homes	\$12.00	\$13.00	\$15.00	\$15.50	\$16.00
Unregulated Homes	\$12.00	\$8.00	\$16.00	\$15.00	\$20.00
3, 4, and 5 Year Olds					
Centers	\$12.00	\$12.60	\$14.00	\$15.75	\$16.00
Approved Homes	\$10.00	\$10.00	\$10.00	\$11.00	\$12.00
Certified Group Homes	\$12.00	\$13.00	\$15.00	\$15.00	\$16.00
Unregulated Homes	\$12.00	\$8.00	\$16.00	\$15.00	\$20.00

Source: Arizona Department of Economic Security. (2011). Child Care Market Rate Surveys. Retrieved 2011 from <https://www.azdes.gov/appreports.aspx?category=136>
 Note: Part-time is fewer than 6 hours a day.

Ninety-one percent of parent survey respondents' monthly payment for all their children's child care was less than \$450 per month in the First Things First Yuma Region in 2011.



Parents' Monthly Payment* for All of Their Children's Child Care Combined



N: 2010=245, 2011=215.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

*Minus any subsidies- round to the nearest hundred



Approximately 318 families were eligible for child care subsidies in 2011, much lower than the 1,007 families eligible in 2009, due to changes in eligibility. Only 242 families were receiving subsidies in 2011, down from 810 families in 2009 in the county.

Families Eligible and Receiving Child Care Subsidies

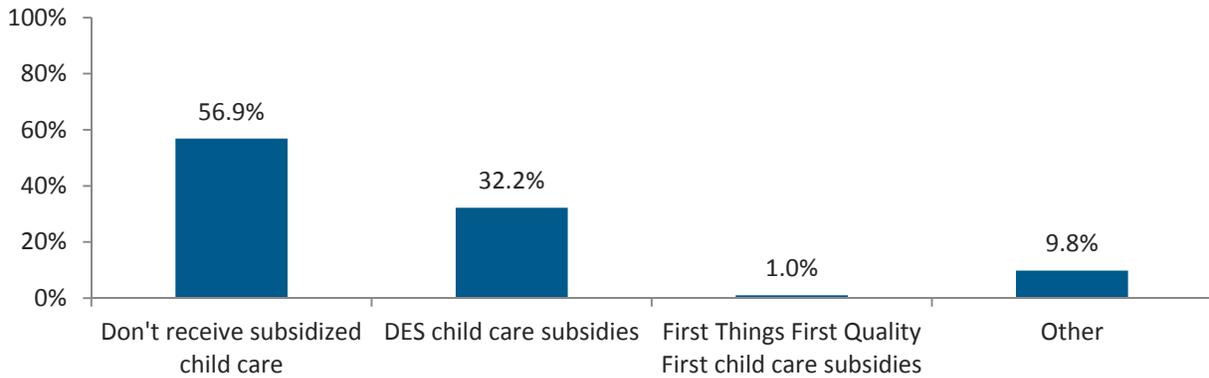
	JANUARY 2009	JANUARY 2010	JANUARY 2011
Number of Families			
Number of Families Eligible for Subsidies: Yuma County	1,007	531	318
Number of Families Receiving Subsidies: Yuma County	810	428	242
Percent of Eligible Families Receiving Subsidies: Yuma County	80.4%	80.6%	76.1%
Percent of Eligible Families Receiving Subsidies: Arizona	81.3%	82.2%	82.2%
Number of Children			
Number of Children Eligible for Subsidies: Yuma County	1,406	756	438
Number of Children Receiving Subsidies: Yuma County	1,073	562	339
Percent of Eligible Children Receiving Subsidies: Yuma County	76.3%	74.3%	77.4%
Percent of Eligible Children Receiving Subsidies: Arizona	76.4%	77.0%	77.0%

Source: First Things First. (2011). Department of Economic Security Child Care Subsidy Report. Received 2011 from First Things First.

Over half (57%) of parent survey respondents did not receive subsidized child care in 2011. Those who did receive subsidies most commonly received them from the Department of Economic Security (32%).



Do you receive subsidized child care? (2011)



2011: N=295.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



Child Care Providers

Why Is It Important

The preparation and ongoing professional development of early child care professionals is closely linked to increased student learning and development.²⁵ According to the National Association of Early Childhood Teacher Educators, teachers who have good preparation in early childhood education can apply their knowledge of child development, use appropriate teaching strategies, meet the social/emotional demands of young children, understand children's thinking, know how to build student learning over time, and understand language and literacy developments. However, it is often too costly for those who want to seek further education in the area of child development to obtain advanced degrees.

Snapshot of Community Assets

- ***The Yuma First Things First Regional Partnership Council:***
 - Offers Teacher Education and Compensation Help (TEACH) ***scholarships*** to early care and education teachers for higher education and credentialing.
 - ***Professional Career Pathway Project*** is a scholarship program offered at community colleges throughout Arizona for early childhood education classes. The program pays tuition and registration fees for specific courses in Early Childhood education, including those necessary for the Child Development Associate (CDA).
 - Funds ***education and training*** in community settings for early care and education professionals.
 - Provides ***mental health consultations and tuition reimbursements*** to child care staff.
- ***Arizona Department of Economic Services and Western Arizona Council of Governments (WACOG)*** provides free early child care professional development trainings with funding from First Things First. Topics from WACOG Head Start Spring 2011 trainings included ***speech and language development*** and ***math and science activities***.
 - In July 2011, WACOG reported that they had trained 300 early childhood educators during their grant period and met their initial goal in doing so.

²⁵ Bowman, B. T., Donovan, M. S., & Burns, M. S. (2000). Eager to learn: Educating our preschoolers. Washington DC: National Academy Press.



- Awarded 15 Northern Arizona University-Yuma summer tuition scholarships in April 2011 to Head Start teachers in their last year of their BAS-ECE degree program.

What the Data Tell Us

There are several Early Childhood Education (ECE) professional development programs in the First Things First Yuma Region, including programs through Arizona State University, Arizona Western College, Northern Arizona University, and the University of Phoenix.

Early Childhood Education (ECE) Professional Development Programs, First Things First Yuma Region, 2012

COLLEGE OR INSTITUTION	DEGREE	DEGREE NAME	LOCATION
Arizona State University	M.Ed.	Curriculum and Instruction – Concentration in Early Childhood Education	Online
Arizona Western College	Occupational Certificate	Early Childhood Education	Yuma, Somerton, San Luis, Wellton
	Occupational Degree	Early Childhood Education	
	Transfer Degree	Elementary Education: Early Childhood Emphasis	
Childcare Education Institute	C.D.A. Certificate	Child Development Associate	Online
Grand Canyon University	B.S.	Elementary Education: Early Childhood Education	Phoenix, Online
	M.A.	Elementary Education	
Northern Arizona University	B.A.S.	Early Childhood Education	Online
	M.Ed.	Special Education: Early Childhood	Yuma
	M.Ed.	Early Childhood Education	
Prescott College	B.A.	Early Childhood Education	Locally with one trip to Prescott, AZ; Online
	B.A.	Early Childhood Special Education	
Rio Salado College	Certificate	Early Childhood Education	Online
	A.A.S.	Early Childhood Education	
	A.A.S.	Early Learning and Development	
	A.A.S.	Early Childhood Administration and Management	
	A.T.P.	Early Childhood Teacher Education	
University of Phoenix	M.Ed.	Early Childhood Education	Online

Source: College or Institution website searches. (2012).



Western Arizona Council of Governments (WACOG) is the grantee for Head Start programs in the First Things First Yuma Region, along with the partner organization Chicanos Por La Causa. WACOG encompasses Yuma, La Paz, and Mohave Counties.

In the 2010/11 school year, 39 teachers and 11 assistant teachers/aides at WACOG Head Start had an Associate's Degree in the Early Childhood Education field or a related field. Six teachers and 1 assistant teacher/aide had a Bachelor's Degree.

Level of Education of Head Start ECE Professionals, WACOG, 2010/11 School Year

ECE PROFESSIONALS	HIGH SCHOOL GRADUATE	CHILD DEVELOPMENT ASSOCIATE (CDA)	ASSOCIATE'S DEGREE	BACHELOR'S DEGREE	ADVANCED DEGREE
Classroom/Child Development Staff					
Teachers	0	8	39	6	0
Assistant Teachers/Part-time Aides	0	33	11	1	0
Supervisory Child Development Staff					
Child Development Supervisors	16	1	11	3	1
Home Based Supervisors	0	0	0	0	0
Family and Community Partnerships Staff					
Family Workers	6	0	11	7	1
Family and Community Partnerships Supervisors	0	1	10	3	1

Source: Head Start. (2011). Head Start Program Information Report. (Unpublished data). Received 2011 from Head Start.

Note: Associate's, Bachelor's, and Advanced Degrees were in Early Childhood Education or related fields.

Note: Data are presented for the Western Arizona Council of Governments (WACOG) Head Start Grantee level and includes Yuma, La Paz, and Mohave Counties.

The average salary of WACOG Head Start teachers in 2008/09 was between \$22,464 and \$23,285, depending on one's level of education. The average salaries of WACOG Head Start teachers with a BA or an AA in the ECE field were less than national Head Start teachers with those same degrees in 2008/09.

Average Salary of Head Start Teachers

	2007/08	2008/09
Teacher with Child Development Associate Credential Only		
National Head Start	\$21,600	\$22,300
WACOG Head Start	\$21,072	\$22,464
Teacher with Associate Degree in ECE or Related Field		
National Head Start	\$23,700	\$26,000
WACOG Head Start	\$21,147	\$22,951
Teacher with Baccalaureate in ECE or Related Field		
National Head Start	\$28,000	\$29,300
WACOG Head Start	\$21,861	\$23,285

Source: Head Start. (2011). Head Start Program Information Report for the 2008/09 Program Year. (Unpublished data). Received 2012 from Head Start.

For National Head Start: National Head Start. (2011). Basic Head Start Facts. Retrieved 2012 from <http://www.nhsa.org/>

Note: Data are presented for the Western Arizona Council of Governments (WACOG) Head Start Grantee level and includes Yuma, La Paz, and Mohave Counties.

Note: Data presented are the most recent available.



There were several community based trainings hosted by WACOG and the First Things First Yuma Regional Council during April-June of 2011. Each training held at least 16 people, with the Family Child Care Provider Training Conference reaching 115 people.

Community Based Trainings, April-June 2011

ACTIVITY/TRAINING	NUMBER ATTENDED
Teaching Tolerance Conference Part 2	56
Infant/Toddler Environment Rating Scale Trainings Parts 1 & 2	17
Infant/Toddler Creative Curriculum Training	23
Early Childhood Environment Rating Scale Trainings Parts 1 & 2	37
Family Child Care Environment Rating Scale Trainings Parts 1 & 2	24
Math and Science Activities for Young Children	53
Pre-School Creative Curriculum Training Parts 1 & 2	36
Speech, Language and Hearing Milestones: Birth to Age 5; Special Education Training	64
Family Child Care Provider Training Conference	115
NAEYC-Professional Development Awards	16

Source: Western Arizona Council of Governments (WACOG). (2011). Community Based Training Narrative Report. *First Things First Quarterly Professional Development*. Received 2012 from personal correspondence with WACOG Representative.

Parent Knowledge of Child Development

Why Is It Important

Parents provide the emotional and physical support that children need to succeed in school and life. Having a basic understanding of child development allows parents to provide the right kind of support at the right time.²⁶ The Arizona Parent Kit is offered to families statewide, including new parents in hospitals. It includes instructional DVDs, resource guides, helpline information, and a baby book to inform and empower new parents.

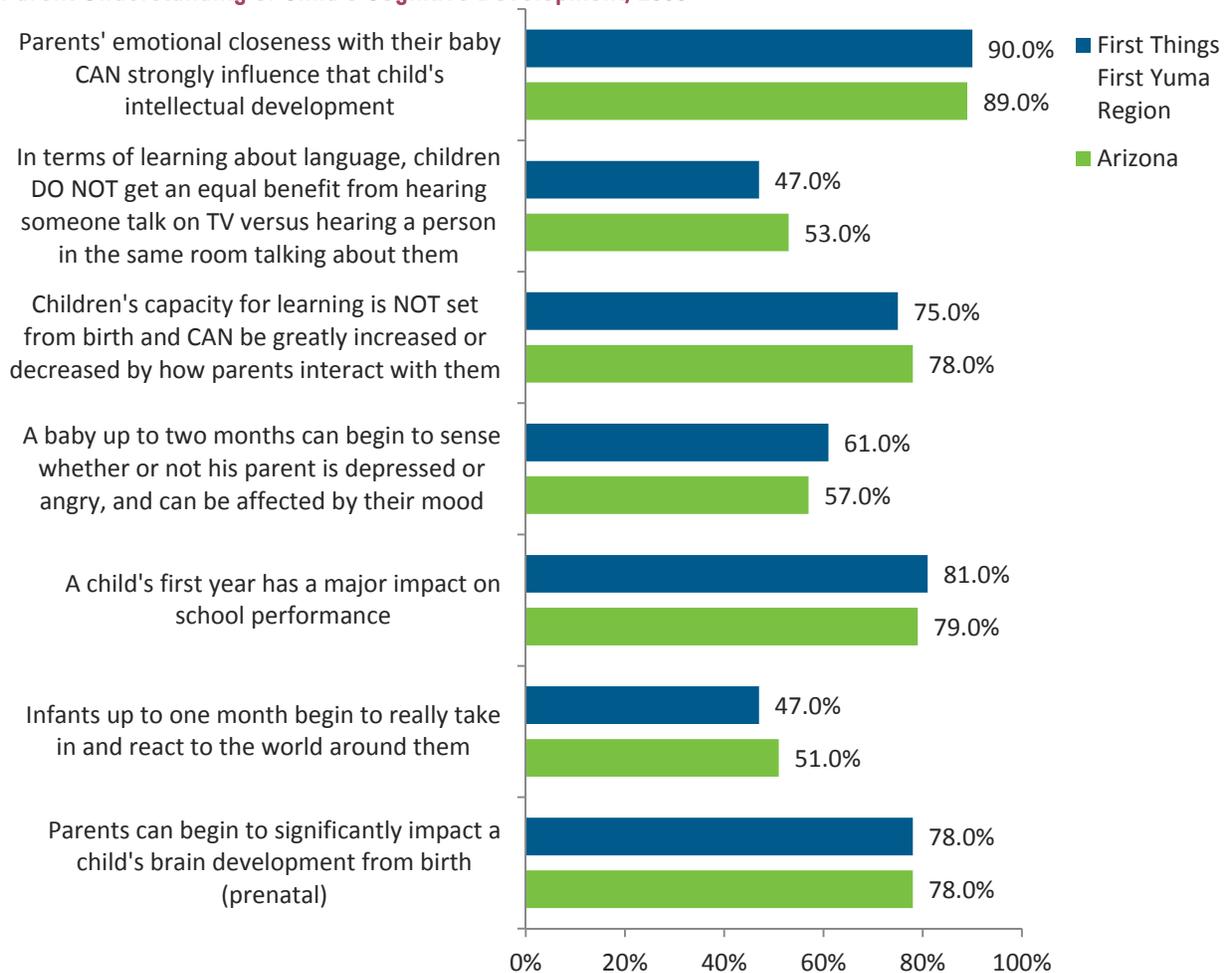
²⁶The Child Development Institute. (n.d.). Home Page. *Child Development Institute*. Retrieved 2012 from <http://www.childdevelopmentinfo.com>



What the Data Tell Us

The large majority of parents in the First Things First Yuma Region agreed with the statement that a parent's emotional closeness with their baby can strongly influence that child's intellectual development (90%), while only 47% of parents believed that infants at one month begin to take in and react to the world around them in 2008. The majority of parents didn't know that hearing a person speak in the same room with a child is better for the child's language development than having the child watch television.

Parent Understanding of Child's Cognitive Development, 2008



N=192.

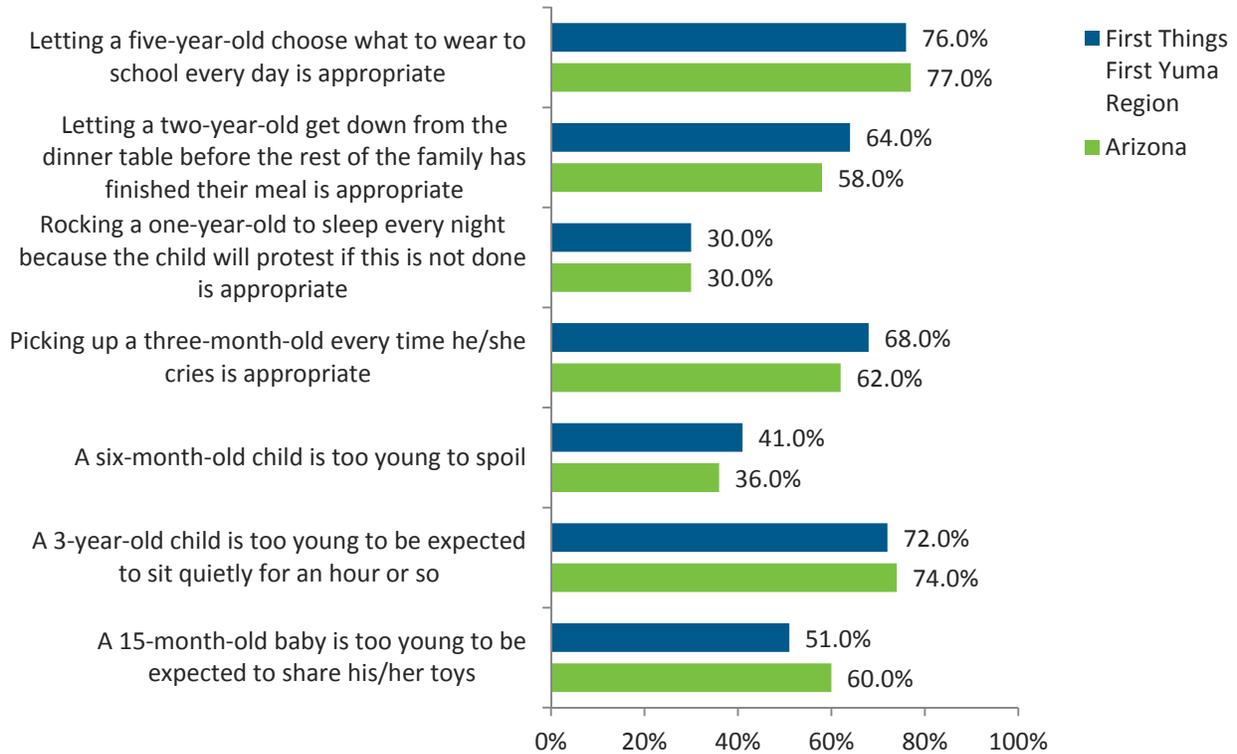
Source: First Things First. (2008). Family and Community Survey. Received 2010 from First Things First.

Note: Responses shown are the percent of parents who accurately identified that the given statement was true or appropriate.



When parents were asked about children's social and emotional development, 76% of parents in the First Things First Yuma Region agreed that letting a five-year-old choose what to wear to school every day is appropriate in 2008. Only 30% of parents in the region believed that rocking a one-year-old to sleep every night because the child will protest if this is not done is appropriate.

Parent Understanding of Child’s Social and Emotional Development, 2008



N=192.

Source: First Things First. (2008). Family and Community Survey. Received 2010 from First Things First.

Note: Responses shown are the percent of parents who accurately identified that the given statement was true or appropriate.

Note: Data presented are the most recent available.



Special Needs

Children with Disabilities: Identification

Why Is It Important

Early identification of children with special needs helps ensure these children get the support and opportunities they need to achieve success in school and in the community.²⁷ Developmental screenings including oral, vision, cognitive, and hearing screenings are an important practice to ensure children's optimal growth, setting them up for success by identifying early on when services are needed.

What the Data Tell Us

By the middle of the 2010/11 school year, 1,093 Head Start children had been screened for developmental disabilities in Yuma County, with 11% of those children needing follow-up or a formal evaluation. This is an increase since 2009 with 7% of screened children needing follow-up or a formal evaluation.

Head Start Developmental Screenings, Yuma County

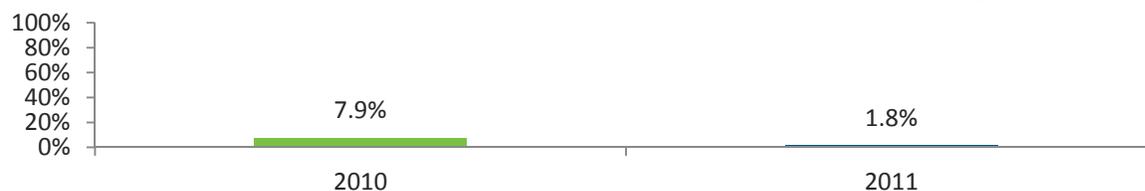
HEAD START CHILDREN	AUG-DEC 2009	AUG-DEC 2010
Number of Children Screened	781	1,093
Number of Screened Children Needing Follow-up or Formal Evaluation	51	116
Percent of Screened Children Needing Follow-up or Formal Evaluation	6.5%	10.6%

Source: Western Arizona Council of Governments. (2011). Personal Communication with Representative. Received 2011 from Western Arizona Council of Governments.

There was a decrease in the percentage of parent survey respondents who reported that a doctor or other professional had ever told them that their child was developmentally delayed, or had a disability or special need, from 8% in 2010 to 2% in 2011.



Parents Who Reported that a Doctor or Other Professional Had Ever Told Them that Their Child was Developmentally Delayed, or Had a Disability or Special Need (Respondents answering "yes")



N: 2010=581, 2011=657.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

²⁷ Steele, M.M. (2004). Making the Case for Early Identification and Intervention for Young Children at Risk for Learning Disabilities. *Early Childhood Education Journal*, Vol. 32, 2, 75-79.



In December of 2011 and January of 2012, ASR staff administered a survey to health care providers practicing medicine in the First Things First Yuma Region with patients birth to five. The surveys were developed to identify the most critical health issues facing the children of the region. Questions investigated physicians' perspectives on health care service needs for children birth to five; access to services; health care information and education; and patient caseload information.

A total of nine health care providers and five office staff offered their insight. Caution should be used throughout the report when interpreting the numbers due to the small sample size; however the survey provides valuable information, painting a picture of First Things First Yuma Region health issues.

Two health care provider survey respondents estimated that about 5% to 15% of their patients ages birth to five experienced a type of developmental delay in 2011.



The subsequent questions are regarding your best estimate for the percent of patients within your practice ages birth to five with the following diagnoses in 2011:

DIAGNOSIS	ESTIMATE	NUMBER
Hearing Impaired (HI)	0-5%	2
Preschool Severe Disability (PSD)	0-10%	2
Severe Learning Impairment (SLI)	5-10%	2
Visual Impairment (VI)	0%	1
Preschool Delay (PD)	0%	1
Developmental Delay (All Types)	5-15%	2

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to the small number of respondents.

Over half (3 of 5) of health care provider survey respondents in 2011 said that the trend of developmental disabilities was increasing in recent years and no health care provider reported that developmental disabilities were decreasing.



Overall, how would you describe the trend of developmental disabilities in recent years? 2011

RESPONSES	NUMBER
Increasing	3
Decreasing	0
Uncertain	2
Total	5

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to the small number of respondents.



Children with Disabilities: Services

Why Is It Important

Assuring that the needs of children with disabilities are appropriately met is an important priority in the First Things First Yuma Region. While children generally receive developmental and health screening and diagnosis in a timely manner, there is a severe shortage of therapeutic services for children identified with special needs. As of May 2010, there was one speech therapy provider for all of Yuma County with a waitlist of more than 200 individuals. The waitlist for this provider was very long and has little movement. According to a local community member, this still stands true for parents of children with special needs in 2012. The result is that some children who may be diagnosed by Arizona Early Intervention Program (AzEIP) may never receive therapy through AzEIP services, because they will no longer be eligible by age when the opportunity for care becomes available for them. For children ages birth to three, the AzEIP is responsible for identifying and serving children with disabilities. In light of this severe shortage, there is a constant search to recruit new providers to Yuma County. Advertisements in medical journals, local and state newspapers, and constant communication with interested parties are some of the methods used. However, the most promising incentive has been financial incentives including student loan stipends.

The Comprehensive System of Personnel Development unit supports all Arizona districts and charter schools with teacher recruitment, retention, and professional development for improving the knowledge, skills, and services of staff to improve outcomes for students with disabilities.

The Arizona State Performance Plan is dedicated to improving achievement for students with disabilities and assisting schools in complying with indicators like preschool placements and outcomes.

The Parent Information Network Specialists serve every county in Arizona to provide essential information to parents to be active participants in all areas of their child's special education (free resources, trainings, workshops, and consultations).

State budget cuts have led to dramatic reductions or complete eliminations in behavioral health services (also known as mental health services). Over 4,600 children have lost behavioral health services completely. Four thousand children served by Children's Rehabilitation Services program lost medical services and therapies in 2009 that may result in long-term health impairment.



Snapshot of Community Assets

- ***The First Things First Yuma Regional Partnership Council*** funds:
 - ***Coaching, group activities, and other services*** to parents of children with special needs. This funding assists children with special needs who don't qualify for publicly funded early intervention programs. As of the third quarter of FY 2012, 90 families were served.
 - Consultation and training for early education and care providers on best meeting the needs of special needs children, and including those children in early education activities.
 - ***The Early Childhood Therapist Incentives Program*** offers loan repayment and stipends as incentives to physical therapists, speech/language pathologists, occupational therapists, child psychologists, and mental health specialists to provide developmentally appropriate services to children in specified areas of Yuma County, considered a high need region. Service providers who participate in the program must commit to providing services at an approved site for two years. The program has a goal of five speech-language pathologists, one occupational therapist, and one physical therapist.
 - ***Supportive coaching and training*** to parents to increase parent capacity for creating activities and experiences for their child to address delays and advocating for better supportive services.
 - **WACOG Head Start's** early childhood education training series which has included special education among its training topics.

What the Community Is Saying

- The school district's special needs therapists cover multiple districts in Yuma County and children receive only about 20 to 25 minutes of speech and occupational therapy once a month, according to a local development specialist. Paperwork may be part of those minutes—one therapist reported spending only half of the time allotted to each child on therapy, with the other half spent on paperwork.
- The wait list for early intervention services has been up to 300+ families at a time. If parents want services sooner, they have to seek services outside of Yuma County, according to one parent of a special needs child.
 - This parent also commented that her child is doing well because his parents have pushed hard and have very actively sought alternatives—but many families don't know to do that and are simply waiting for services because waiting is what they have been told to do. In the meantime, said this parent, "children are getting more and more behind to the point where they will never catch up."





What the Data Tell Us

The Arizona Department of Health Services reports that there were 18 Speech Language Pathologists, 10 Hearing Aid Dispensaries, and 3 Audiologists available in the First Things First Yuma Region in 2010.

Speech Language and Hearing Service Providers, First Things First Yuma Region, 2010

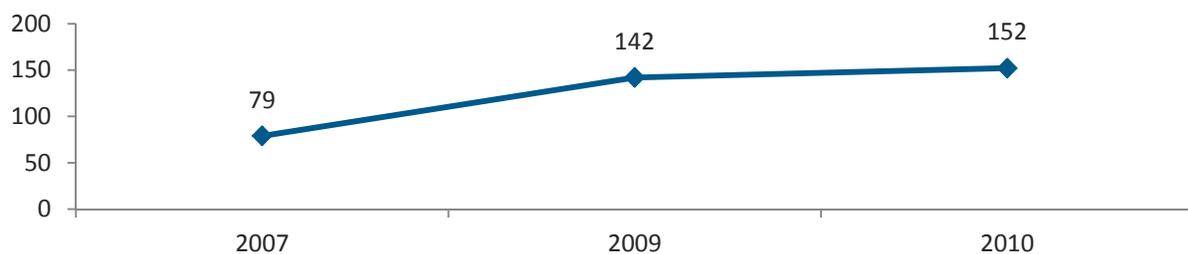
TYPE OF PROVIDER	NUMBER OF PROVIDERS
Temporary Speech Language Pathology	2
Speech Language Pathology Limited	11
Speech Language Pathologist	18
Speech Language Assistants	11
Hearing Aid Dispensaries	10
Audiologists	3

Source: Arizona Department of Health Services. (2010). Provider Databases. (Unpublished data). Received 2012 from First Things First.

The Arizona Early Intervention Program (AzEIP) provides services for children with special needs. However, state funding for early intervention services was eliminated effective November 1, 2010 and federal stimulus was used to backfill state funding cuts. As a result, families must share some cost in order to receive services, a practice which may deter many from obtaining services until children turn three years old, when the local school districts assume responsibility for services for children with disabilities.

More than 150 children in the First Things First Yuma Region received services through the AzEIP, a 92% increase since 2007. However, that number is expected to fall due to the severe cuts in the AzEIP program.

Children Receiving Arizona Early Intervention Program (AzEIP) Services, Yuma County



Source: Arizona Department of Economic Security. (2011). Arizona Early Intervention Program. (Unpublished data). Received 2012 from First Things First.

Note: 2007 data includes cases serviced between 07/01/2006 and 06/30/2007. 2009 data includes cases serviced between 07/01/2008 and 06/30/2009. 2010 data includes cases serviced between 07/01/2009 and 06/30/2010.



One hundred percent of health care providers surveyed said that they referred patients with a developmental disability to AzEIP for services. However, 6 out of 9 Yuma health care providers said that they were “not at all” satisfied with the availability of providers who could take the referral. This supports the information provided by local program representatives who suggested that waitlists in Yuma County for receiving AzEIP services are too long to effectively address developmental delays before children enter the public school system.



Level of satisfaction with the availability (or number of) local referrals available for these patients, 2011

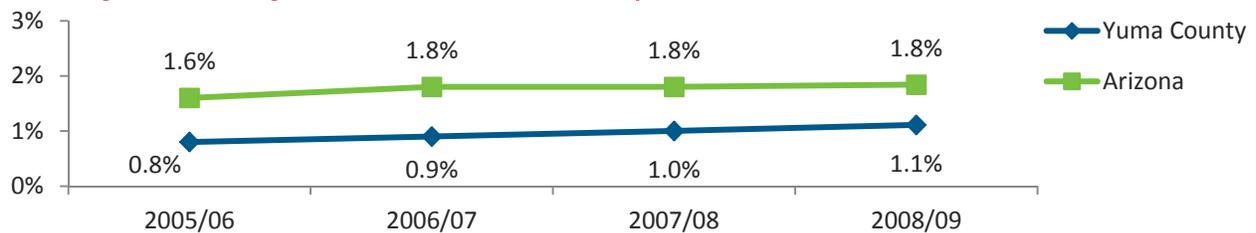
Satisfaction				Total
Extremely	Somewhat	Very Little	Not at All	
1	1	1	6	9

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to the small number of respondents.

One critical component of AzEIP services is the development of an Individualized Family Service Plan (IFSP) within 45 days of referral to AzEIP. In Yuma County, the percentage of all children ages birth to three with an IFSP stayed constant between 2005/06 and 2008/09 at about 1%, less than the state at closer to 2%.

Infants Ages Birth through 3 with an Individualized Family Service Plan (IFSP)

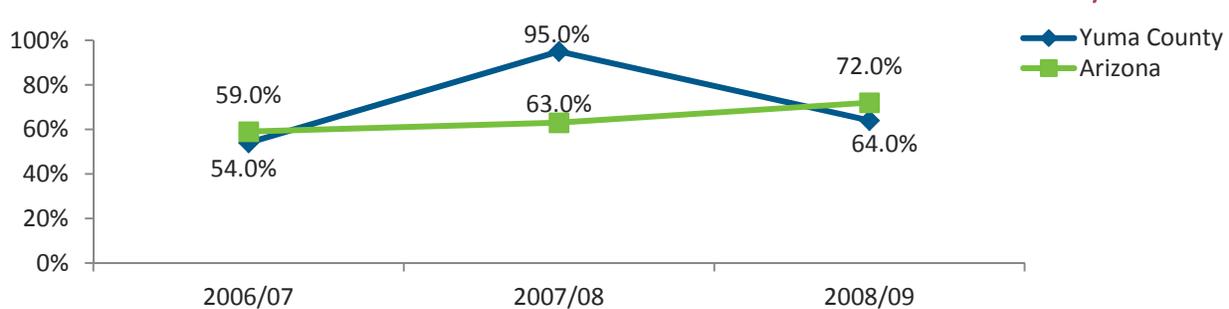


Source: Arizona Department of Economic Security. (2010). Early Intervention Program Reports. Retrieved 2012 from <https://www.azdes.gov/appreports.aspx>.

Note: Data presented are the most recent available.

Of infants and toddlers in Yuma County with an IFSP, the percentage who received an evaluation or assessment and IFSP within 45 days of referral decreased from 95% in 2007/08 to 64% in 2008/09.

Infants and Toddlers with IFSPs Who Received an Evaluation Assessment and IFSP Within 45 Days of Referral



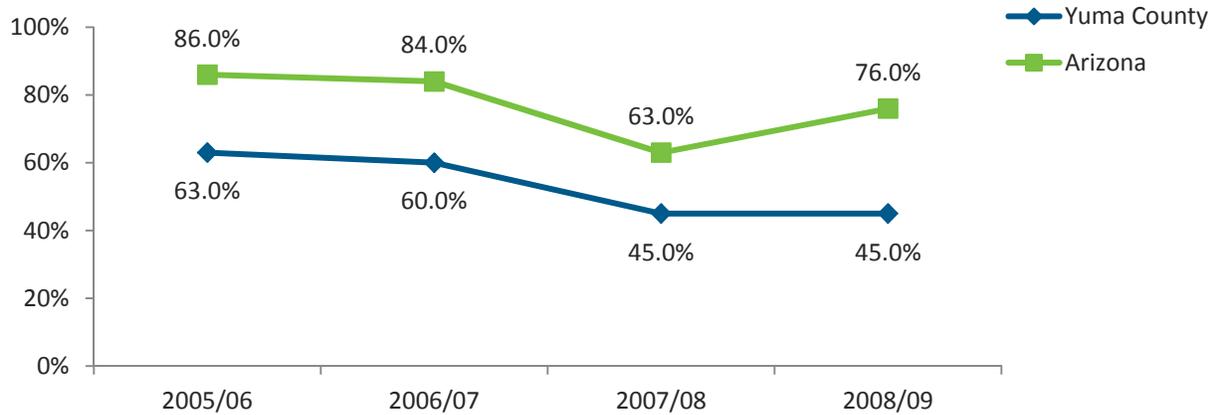
Source: Arizona Department of Economic Security. (2010). Early Intervention Program Reports. Retrieved 2012 from <https://www.azdes.gov/appreports.aspx>.

Note: Data presented are the most recent available.



The percentage of Yuma County children receiving services at home or in programs for typically developing children (children who are not receiving special education services) was 45% in 2008/09, lower than the state overall (76%).

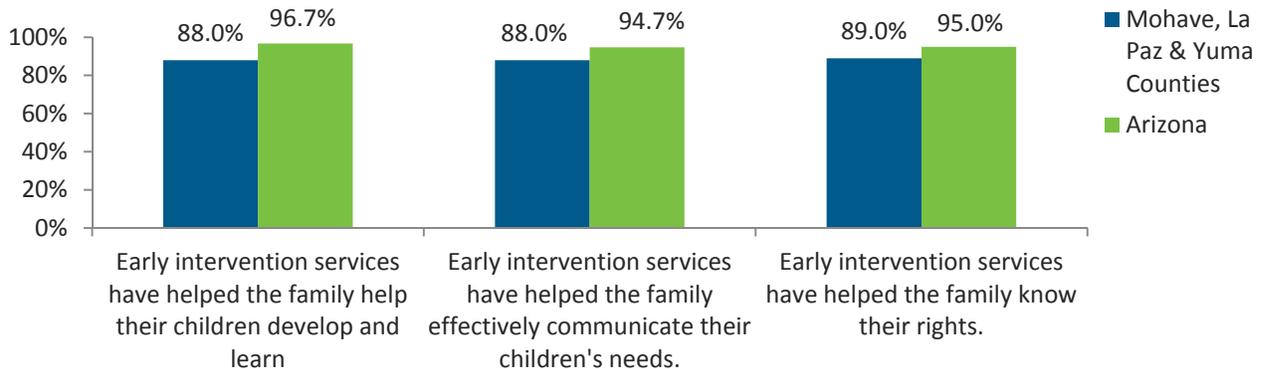
Infants and Toddlers with IFSPs Who Primarily Receive Early Intervention Services in the Home or in Programs for Typically Developing Children



Source: Arizona Department of Economic Security. (2010). Early Intervention Program Reports. Retrieved 2012 from <https://www.azdes.gov/appreports.aspx>.
 Note: Data presented are the most recent available.

Nevertheless, according to the Department of Economic Security Early Intervention Program Reports, close to 90% of families in Mohave, La Paz and Yuma Counties participating in AzEIP services reported that services in 2008/09 had helped the family know their rights, helped the family effectively communicate their children’s needs, and helped the family help their children develop and learn.

Perceptions of Families Participating in Early Intervention Services, 2008/09

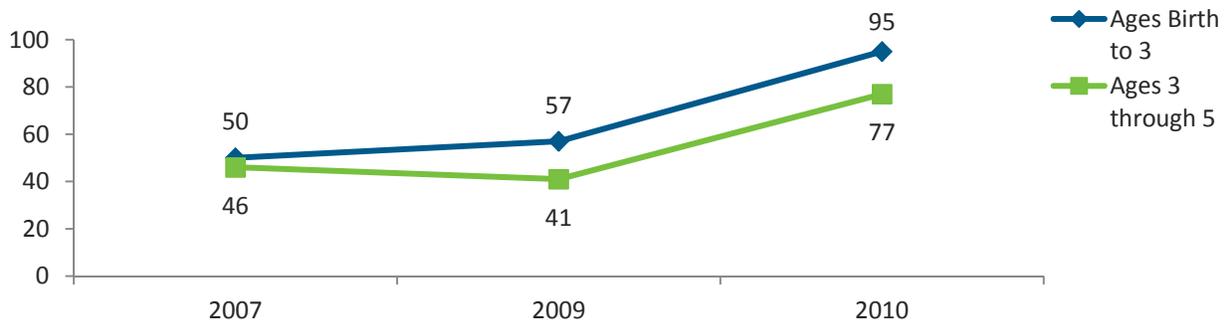


Source: Arizona Department of Economic Security. (2010). Early Intervention Program Reports. Retrieved 2012 from <https://www.azdes.gov/appreports.aspx>.
 Note: Data presented are the most recent available.

An additional 172 children ages birth through five received services from the Department of Developmental Disabilities (DDD) in 2010. Only children who are considered at risk for epilepsy, cerebral palsy, cognitive disability, or autism qualify for DDD services (in addition to AzEIP services).



Children Receiving Division of Developmental Disabilities (DDD) Services, Yuma County



Source: Arizona Department of Economic Security. (2011). Division of Developmental Disabilities. DES Multidata Database. (Unpublished Data). Received 2012 from First Things First.

Note: Children are eligible for DDD services if they are considered at risk for epilepsy, cerebral palsy, cognitive disability, or autism.

According to Health Care Provider Survey results, none of the health care providers knew of local referrals serving children with developmental disabilities that participated in the First Things First Early Childhood Therapist Incentives Program.



Do you know of local referrals serving children with developmental disabilities that participate in the First Things First Early Childhood Therapist Incentives Programs? 2011

RESPONSES	NUMBER
Yes	0
No	6
I don't know about this program	3
Total	9

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to the small number of respondents.

Six out of the nine survey respondents (67%) reported that if their patient was diagnosed with developmental disabilities, and did not have health insurance, they would talk to parents about available service options for low-income families.



If a patient is diagnosed with developmental disabilities and does not have health insurance, do you talk to parents about services available for low-income families? 2011

RESPONSES	NUMBER
Yes	6
No	0
I don't know which services are available	3
Total	9

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

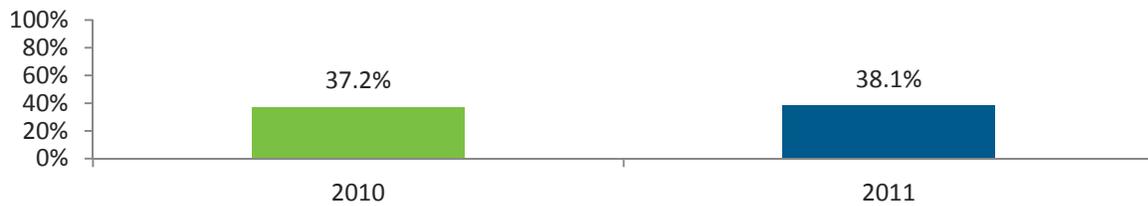
Note: Caution should be used when interpreting results due to the small number of respondents.

More than one-third (38%) of parents indicated that their child was referred to and was receiving services to address his/her developmental delay, disability, or special need in 2011. This was consistent with the findings from 2010.





Parents Who Indicated that Their Child Was Referred to Services to Address Her/His Developmental Delay, Disability, or Special Need, and Is Receiving Those Services (Respondents answering “yes”)



N: 2010=43, 2011=42.

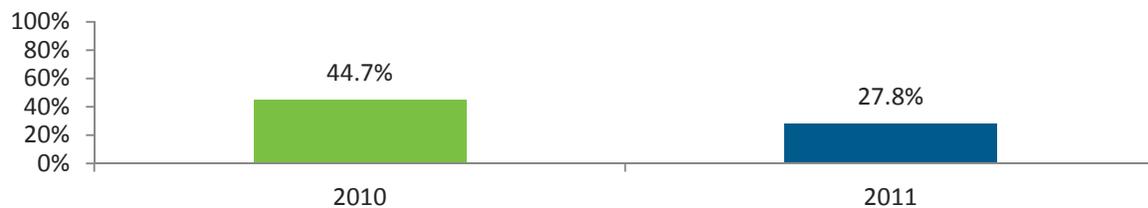
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Note: Due to the low number of respondents, caution should be used when interpreting these survey results.

Children with disabilities may receive special services at or above those prescribed by a doctor. More than a quarter (28%) of parents reported that their child received the amount or more than the amount of service prescribed by their doctor in 2011. This percentage was a large decrease from 45% in 2010.



Parents Who Indicated that Their Child is Receiving Special Services for Their Disability at the Amount Prescribed by the Doctor or More (Respondents answering “yes”)



N: 2010=38, 2011=36.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Note: Due to the low number of respondents, caution should be used when interpreting these survey results.



There were 57 preschoolers with disabilities enrolled in Crane Elementary School District, 77 in Gadsden School District, 5 in Wellton Elementary School District, and 216 in Yuma Elementary School District during the 2011/12 school year. The largest numbers of children with disabilities displayed a Developmental Mental Delay (DD) or Speech Language Impaired (SLI).

Preschool Enrollment by Disability, First Things First Yuma Region School Districts, 2010/11 School Year-

SCHOOL DISTRICT	HEARING IMPAIRED (HI)	VISUALLY IMPAIRED (VI)	SPEECH LANGUAGE IMPAIRED (SLI)	PRESCHOOL SEVERE DELAY (PSD)	DEVELOPMENTAL DELAY (DD)	PRE-SCHOOL TOTAL	DISTRICT TOTAL
Crane Elementary	0	0	12	3	42	57	636
Gadsden Elementary	3	0	73	0	35	77	559
Hyder Elementary	0	0	0	0	0	0	0
Mohawk Valley Elementary	0	0	0	0	0	0	18
Wellton Elementary	0	0	2	0	3	5	68
Yuma Elementary	2	0	77	8	112	216	1,412

Source: First Things First Yuma Region School District. (2012). Personal Correspondence with Representatives. Received 2012 from First Things First Yuma Region School District.

Note. Numbers are not representative of all preschool-aged children in the First Things First Yuma Region. Beginning at age three, public school districts must assume responsibilities for children with special needs; therefore, students with special needs are overrepresented in the school district data.

Note: Somerton Elementary School District did not provide information on the number of preschoolers with disabilities



Education

Children's success in school is improved by a combination of promoting physical and mental health, increasing literacy, and enhancing social and emotional skills. Typically, children who do well in school have early literacy skills and higher social and emotional skills at entry to kindergarten. However, Arizona students scored below the national average on every subject at every grade level tested, according to the National Assessment of Educational Progress (NAEP).²⁸

School Enrollment

Why Is It Important

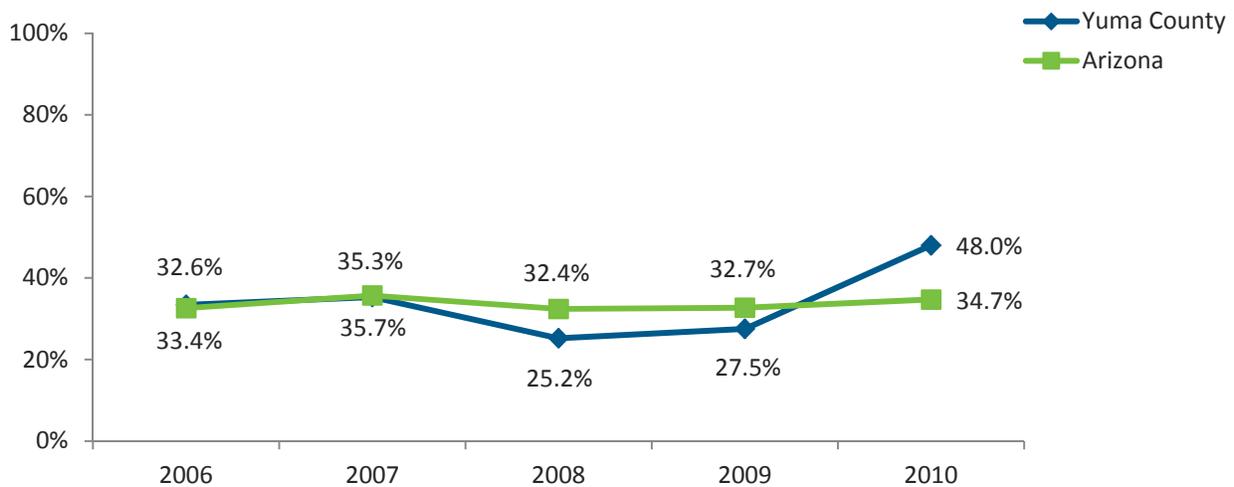
School enrollment data are used to determine school funding and to plan for services and programs for students.

The First Things First Yuma Region is composed of nine public school districts: Antelope Union High, Crane Elementary, Gadsden Elementary, Hyder Elementary, Mohawk Valley Elementary, Somerton Elementary, Wellton Elementary, Yuma Elementary, and Yuma Union High.

What the Data Tell Us

As an indicator of preschool enrollment, nearly half (48%) of children ages three through four in Yuma County were enrolled in public school in 2010, greater than the statewide enrollment (35%).

Percentage of Three and Four Year Olds Enrolled in School



Source: U.S. Census Bureau. (2010). Table S1401- School Enrollment. *American Community Survey One Year Estimates*. Retrieved 2012 from <http://factfinder2.census.gov>

²⁸ Arizona Directions. (2012). Arizona Indicators. Received 2012 from Arizonaindicators.org



Overall, the school enrollment for First Things First Yuma Region school districts decreased from 36,018 students in 2009/10 to 35,730 students in 2010/11. Yuma Union High School District and Yuma Elementary School District had the highest enrollment in both 2009/10 and 2010/11.

School Enrollment, First Things First Yuma Region School Districts

SCHOOL DISTRICT	PRESCHOOL	KINDERGARTEN	DISTRICT TOTAL
2009/2010			
Antelope Union High School District	0	0	322
Crane Elementary School District	46	614	6,049
Gadsden Elementary School District	117	407	4,952
Hyder Elementary School District	0	12	124
Mohawk Valley Elementary School District	0	12	152
Somerton Elementary School District	81	315	2,754
Wellton Elementary School District	21	41	384
Yuma Elementary School District	208	1,022	10,007
Yuma Union High School District	0	0	11,274
First Things First Yuma Region Total	473	2,423	36,018
2010/2011			
Antelope Union High School District	0	0	303
Crane Elementary School District	34	630	6,082
Gadsden Elementary School District	129	393	5,143
Hyder Elementary School District	0	13	123
Mohawk Valley Elementary School District	0	19	158
Somerton Elementary School District	100	303	2,767
Wellton Elementary School District	0	34	338
Yuma Elementary School District	199	1,110	9,687
Yuma Union High School District	0	0	11,129
First Things First Yuma Region Total	462	2,502	35,730

Source: Arizona Department of Education. (2011). Research and Evaluation. Retrieved 2011 from <http://www.ade.state.az.us/researchpolicy/AZEnroll/>.

Note: Preschool enrollment includes only students attending preschools associated with public school districts.



School Readiness

Why Is It Important

Children who have early learning skills as they enter kindergarten do better in school, are more likely to graduate with a high school diploma, are more successful in their careers, and are less likely to be involved in crime and drugs.²⁹ A recent study in high needs schools showed that of children who were ready for kindergarten, 62% of them performed well on standardized tests at 3rd grade. Of children who were not ready for kindergarten, only 6% of them performed well on standardized tests at 3rd grade. Typically, children will not make up the learning gap that they started off with when they entered kindergarten.³⁰

In Arizona, one method of assessing children's literacy and reading skills, between kindergarten and 6th grade, is the Dynamic Indicators of Basic Early Literacy Skills (DIBELS). While the DIBELS assessments only measure skills related to the letter knowledge component of kindergarten readiness, they provide some picture of how well children are prepared when beginning school.

Snapshot of Community Assets

- ***The First Things First Yuma Regional Council*** funds pre-kindergarten scholarships to increase the number of three and four year olds enrolled in high quality preschool programs that will prepare them to succeed in kindergarten and beyond. As of the third quarter of FY 2012, 333 children received pre-kindergarten scholarships.

What the Data Tell Us

Across all the kindergarten classrooms in the local elementary schools in the First Things First Yuma Region, between 8% and 45% of students were at grade level at the beginning of the school year according to DIBELS assessments in 2010/11. In the Gadsden Elementary School District, only 8% of students entered kindergarten at grade level and only 10% of children tested at grade level in the Somerton Elementary School District in the 2010/11 school year. In both Gadsden Elementary and Somerton Elementary School Districts, more than half (57% and 58%, respectively) needed substantial intervention. Gadsden Elementary School was a recipient of a School Improvement Grant. Forty-five percent of students at the Wellton Elementary School District were at grade level at the beginning of the school year.

School Readiness Indicator

#/% of children demonstrating school readiness at kindergarten entry in the developmental domains of social emotional, language and literacy, cognitive and motor and physical

²⁹ Rolnick, A., & Grunewald, R. (2003). Early Childhood Development: Economic Development with a High Public Return. *Big Ideas for Children*. First Focus, Washington, D.C.

³⁰ Applied Survey Research. (2008). Does readiness matter: How kindergarten readiness translates into academic success. San Jose, California: Applied Survey Research.



Kindergarten DIBELS Scores, Beginning of School Year, First Things First Yuma Region School Districts

SCHOOL DISTRICT	2006/07	2007/08	2008/09	2009/10	2010/11
Crane Elementary School District					
Benchmark - At Grade Level	16%	19%	19%	20%	21%
Strategic - Additional Intervention	35%	38%	39%	36%	36%
Intensive - Needs Substantial Intervention	49%	44%	42%	44%	44%
Gadsden Elementary School District					
Benchmark - At Grade Level	6%	8%	9%	8%	8%
Strategic - Additional Intervention	32%	29%	33%	32%	35%
Intensive - Needs Substantial Intervention	63%	63%	58%	60%	57%
Somerton Elementary School District					
Benchmark - At Grade Level	NA	11%	12%	NA	10%
Strategic - Additional Intervention	NA	35%	31%	NA	31%
Intensive - Needs Substantial Intervention	NA	54%	56%	NA	58%
Wellton Elementary School District					
Benchmark - At Grade Level	14%	25%	45%	37%	45%
Strategic - Additional Intervention	51%	39%	36%	37%	18%
Intensive - Needs Substantial Intervention	34%	36%	18%	27%	36%
Yuma Elementary School District					
Benchmark - At Grade Level	17%	19%	17%	19%	22%
Strategic - Additional Intervention	36%	39%	41%	40%	39%
Intensive - Needs Substantial Intervention	47%	43%	42%	41%	39%

Source: First Things First Yuma Region School District. (2011). Personal Correspondence with District Representative. Received 2011 from First Things First Yuma Region School District.

Note: School districts that did not provide data included Hyder Elementary and Mohawk Valley Elementary School Districts.



In general, every year since 2006/07 there has been an increase in students at kindergarten grade level by the end of the school year when compared with the year's start. For example, 8% of students at Gadsden Elementary School District began the 2010/11 school year at grade level and 56% ended the year at grade level; the need for substantial intervention dropped in 2010/11 from 57% at the start of that year to 26% by year's end.

Kindergarten DIBELS Scores, End of School Year, First Things First Yuma Region School Districts

SCHOOL DISTRICT	2006/07	2007/08	2008/09	2009/10	2010/11
Crane Elementary School District					
Benchmark - At Grade Level	79%	86%	93%	88%	87%
Strategic - Additional Intervention	10%	6%	3%	6%	6%
Intensive - Needs Substantial Intervention	11%	8%	4%	7%	7%
Gadsden Elementary School District					
Benchmark - At Grade Level	70%	82%	78%	61%	56%
Strategic - Additional Intervention	13%	11%	10%	15%	18%
Intensive - Needs Substantial Intervention	17%	8%	11%	24%	26%
Somerton Elementary School District					
Benchmark - At Grade Level	NA	98%	97%	NA	76%
Strategic - Additional Intervention	NA	1%	2%	NA	13%
Intensive - Needs Substantial Intervention	NA	1%	1%	NA	11%
Wellton Elementary School District					
Benchmark - At Grade Level	60%	80%	97%	88%	85%
Strategic - Additional Intervention	29%	18%	3%	2%	8%
Intensive - Needs Substantial Intervention	11%	3%	0%	10%	8%
Yuma Elementary School District					
Benchmark - At Grade Level	78%	82%	83%	79%	85%
Strategic - Additional Intervention	10%	8%	8%	9%	8%
Intensive - Needs Substantial Intervention	12%	9%	9%	12%	8%

Source: First Things First Yuma Region School District. (2011). Personal Correspondence with District Representative. Received 2011 from First Things First Yuma Region School District.

Note: School districts that did not provide data included Hyder Elementary and Mohawk Valley Elementary School Districts.



3rd Grade Test Scores

Why Is It Important

One of the most powerful indicators of later academic success is a child's reading level at the end of third grade. In third grade it is expected that children will show evidence of reading comprehension and be able to read unfamiliar words through various strategies. Reading proficiency at this point prepares the student for fourth grade, where the focus of reading instruction changes from "learning to read" to "reading to learn."³¹ The Arizona Instrument to Measure Standards (AIMS) is the tool used to measure third grade academic proficiency in Arizona.

What the Data Tell Us

Beginning in the school year 2013/14, students whose scores are "falling far below" on their 3rd grade AIMS reading will not be promoted from 3rd grade. In 2010/11, parental notification requirements began for any student who seemed to be falling behind. Gadsden Elementary School District had the highest percentage of students who were "falling far below" on their 3rd grade AIMS reading scores in 2011 at 14%.

Percentage of Students "Falling Far Below" on 3rd Grade AIMS Reading by District, First Things First Yuma Region, 2011

SCHOOL DISTRICT	PERCENT FALLING FAR BELOW
Crane Elementary School District	5%
Gadsden Elementary School District	14%
Hyder Elementary School District	6%
Mohawk Valley Elementary School District	4%
Somerton Elementary School District	9%
Wellton Elementary School District	6%
Yuma Elementary School District	5%

Source: Arizona School Boards Association. (2012). Personal Correspondence with Representative. Received 2012 from Arizona School Boards Association.

³¹ Annie E. Casey Foundation. (2010). Early Warning! Why Reading by the End of Third Grade Matters. Retrieved June 23, 2010 from <http://datacenter.kidscount.org/>



Mohawk Valley Elementary School District consistently had the highest percentages of students meeting or exceeding the 3rd grade reading standards (84% in 2011) compared to other school districts in the region, and was higher than the state (76%).

AIMS Reading: 3rd Grade Students Meeting or Exceeding the Standard

SCHOOL DISTRICT	2007	2008	2009	2010	2011
Crane Elementary School District	66%	62%	70%	68%	77%
Gadsden Elementary School District	46%	43%	46%	52%	55%
Hyder Elementary School District	55%	47%	-	33%	50%
Mohawk Valley Elementary School District	73%	82%	83%	93%	84%
Somerton Elementary School District	57%	54%	68%	62%	64%
Wellton Elementary School District	65%	78%	77%	66%	74%
Yuma Elementary School District	66%	62%	65%	68%	72%
Arizona	69%	69%	72%	73%	76%

Source: Arizona Department of Education. (2011). School Report Cards. Retrieved 2011 from <http://www10.ade.az.gov/ReportCard/>.

Note: A dash (-) indicates that AIMS Scores for the district were unavailable for the school year.

AIMS math scores were generally lower than reading or writing, ranging from 52% (Wellton Elementary School District) to 84% (Mohawk Valley Elementary School District) in 2011.

AIMS Math: 3rd Grade Students Meeting or Exceeding the Standard

SCHOOL DISTRICT	2007	2008	2009	2010	2011
Crane Elementary School District	65%	59%	66%	59%	66%
Gadsden Elementary School District	55%	51%	52%	48%	53%
Hyder Elementary School District	64%	65%	-	67%	63%
Mohawk Valley Elementary School District	87%	96%	78%	87%	84%
Somerton Elementary School District	62%	53%	64%	48%	54%
Wellton Elementary School District	68%	60%	68%	53%	52%
Yuma Elementary School District	67%	66%	64%	57%	68%
Arizona	72%	71%	73%	65%	68%

Source: Arizona Department of Education. (2011). School Report Cards. Retrieved 2011 from <http://www10.ade.az.gov/ReportCard/>.

Note: A dash (-) indicates that AIMS Scores for the district were unavailable for the school year.



Graduation Rate

Why Is It Important

High school graduation is an important indicator of future economic and personal success. Youth who leave high school prior to graduation are more likely to experience lower earnings and unemployment.³² Dropping out of high school may be a result of several risk factors including child abuse, substance abuse, unaddressed learning disabilities, mental health problems, pregnancy, homelessness, and poverty.³³

There are differences in graduation rates by ethnicity in Arizona which may be due to language and cultural barriers, as well as higher poverty rates. It is important to identify the contributing factors to these low graduation rates to ensure greater success for all children.³⁴

What the Data Tell Us

The high school graduation rates of the two high schools in the First Things First Yuma Region were 84% and 81%, the highest rate in the past five years. Both Antelope and Yuma Union High School Districts increased their graduation rates by 5% or more between 2009 and 2010, and exceeded the state graduation rate.

Graduation Rate, Yuma Region School Districts

SCHOOL DISTRICT	2006	2007	2008	2009	2010
Antelope Union High School District	70%	77%	72%	77%	84%
Yuma Union High School District	70%	75%	71%	75%	81%
Arizona	70%	73%	75%	76%	75%

Source: Arizona Department of Education. (2010). Research Evaluation Section. Retrieved 2010 from <https://www.ade.state.az.us/researchpolicy/grad//>.

Educational Attainment

Why Is It Important

Educational attainment is an important indicator of future economic success because those with at least a high school diploma have better employment opportunities. Limited education and employment can also impact other quality of life areas including access to health care and life expectancy. Low educational attainment is often associated with lower income or poverty, less access to good quality child care, poorer health.

³² United States Department of Education. (n.d.). Promoting Educational Excellence for all Americans. *Questions and Answers on No Child Left Behind*. Retrieved 2012 from <http://www.ed.gov/>

³³ U. S. Department of Health and Human Services. (2010). Trends in the Well-being of America's Youth. Retrieved 2012 from <http://www.aspe.hhs.gov/hsp/00trends/EA1.pdf>

³⁴ Arizona Directions. (2012). Arizona Indicators. Received 2012 from Arizonaindicators.org



Snapshot of Community Assets

- **Arizona Western College** is based in Yuma and has satellite campuses in Somerton, San Luis, and Wellton. Degree programs include occupational certificates, occupational degrees, and transfer degrees.
- **Northern Arizona University**, one of Arizona's three public four-year universities, has a Yuma campus where students can pursue a wide range of opportunities. The other two public universities are located in Phoenix and Tucson.
- **The Arizona Department of Education** offers classes in Adult Basic Education in Basic Reading, Writing, and Mathematics Skills, and GED Preparation Classes. In the First Things First Yuma Region, the programs are offered through Adult Literacy Plus of Southwest Arizona, Crane Adult Education, and South Yuma County Adult Education Consortium. Adults can take these classes face-to-face or through a distance learning approach.

What the Data Tell Us

Educational attainment in Yuma County was lower than in Arizona overall. In Yuma County, 29% of the population 25 years and over had less than a high school degree, as compared to 15% in Arizona overall, according to 2006-2010 Census estimates. Conversely, 72% of the population 25 years and over had at least a high school diploma or a GED, which was less than that of Arizona (85%). A lower percentage (13%) of the Yuma County population went on to obtain a Bachelor's, graduate, or professional degree than the state population (26%).

Educational Attainment, Population 25 Years and Older

EDUCATIONAL ATTAINMENT LEVEL	2005-2009	2006-2010
Less than High School Graduate		
Yuma County	29.2%	28.5%
Arizona	16.1%	15.0%
High School Graduate		
Yuma County	28.3%	27.0%
Arizona	25.6%	25.1%
Some College or Associate's Degree		
Yuma County	29.5%	31.2%
Arizona	32.6%	33.5%
Bachelor's Degree		
Yuma County	8.2%	8.7%
Arizona	16.4%	16.7%
Graduate or Professional Degree		
Yuma County	4.8%	4.6%
Arizona	9.3%	9.6%

Source: U.S. Census Bureau. (2011). Table S1501-Educational Attainment. *American Community Survey 2006-2010 5-Year Estimates*. Retrieved 2011 from <http://factfinder2.census.gov>.



Mothers who have attained higher levels of education tend to have healthier children who are more ready for school and who perform better in school when compared to their counterparts. Over three-quarters of women (77%) who gave birth in the past 12 months had some college or an Associate's degree, Bachelor's degree, or advanced degree in 2010. This was higher than the level for the general population ages 25 and older, which was 45% in Yuma County in 2010.

Educational Attainment for Women Who Gave Birth in the Past 12 Months, All Ages, Yuma County

EDUCATIONAL ATTAINMENT LEVEL	2006	2007	2008	2009	2010
Less than High School Graduate	6%	41%	14%	36%	20%
High School Graduate	46%	26%	31%	22%	4%
Some College, Associate's Degree	42%	31%	49%	26%	61%
Bachelor's Degree	1%	0%	2%	14%	16%
Graduate or Professional Degree	6%	2%	5%	1%	0%

Note: Educational attainment for mother who gave birth in the past year includes all births including births to teen mothers. Although this might influence the data slightly the total number of births to teen mothers is relatively small.

Source: U.S. Census Bureau. (2010). Table B13014- Women 15 to 50 years who had a birth in the past 12 months by marital status and educational attainment. *American Community Survey One Year Estimates*. Retrieved 2012 from <http://www.factfinder2.census.gov>.

Family Literacy

Why Is It Important

One important component of parenting knowledge is understanding the importance of reading to and with children from an early age. When families read to their infants and preschool children, children learn crucial skills such as how to recognize letters, words, and sounds. Young children who have these early literacy skills are more successful later in school and life.³⁵ Other key activities such as playing games and exercising also help children learn and develop.

The national Reach Out and Read program promotes early literacy and school readiness by giving new books to children and educating parents about the importance of reading to children. The program partners with doctors in 185 locations in Arizona (as of 2011) as the primary point of contact with children and families. In a 2010 parent survey of the program, 99% of respondents reported receiving a book from their doctor or nurse during their first well child visit and 87% said their child's doctor provided advice about early literacy that inspired parents and children to read together.³⁶

³⁵ Levy, B. A., Gong, Z., Hessels, S., Evans, M. A., & Jared, D. (2006). Understanding print: Early reading development and the contributions of home literacy experiences. *Journal of Experimental Child Psychology*, 93(1), 63-93.

³⁶ Ready for School. (2012). Personal Correspondence with Representative. *Reach out and Read Arizona*. Received February 2012 from Ready for School.



Snapshot of Community Assets

- ***The First Things First Yuma Regional Partnership Council*** funds:
 - ***Reach Out and Read***, a program that provides books for pediatricians and their staff to distribute to families with young children.
 - Education and training for parents on language and literacy development for their young children.
- ***The Yuma County Library District*** has three branches in Yuma and additional locations in San Luis, Somerton, Wellton, Dateland and Roll.
 - Each library branch in the county offers ***StoryTimes for preschoolers, toddlers, and babies*** several times per week.
 - Other programs include ***summer reading*** and an annual spring “***Cover to Cover Reading Program***” for children ages 4-12.
 - According to a library staff member, community members are seeking more and more ***free programs*** given the economic hard times; given this need, the library system is trying to do more while keeping its programs at a low cost or free.
 - ***The Somerton Family Literacy Program*** is open to parents of children in preschool to third grade. Parents follow the same reading curriculum as their children so that they are familiar with the topics and can continue working with their child at home.
 - The participating parents attend classes for ***adult education***, English as a second language, GED preparation, citizenship preparation, and parenting.
 - ***Parent and Child Together Time*** allows the parent and child to work together in the classroom for an hour and eat lunch together.

What the Community Is Saying

- ***Reach Out and Read*** provided bilingual books to families in South County (San Luis and Somerton especially) at local clinics and these books have been more popular than single-language offerings. In some families, the child is able to hear both languages from family members because parents read to the child in Spanish while older siblings learning English in school provide English exposure, according to a community representative.
- ***Reach Out and Read*** is successful in raising parent awareness in part because when a doctor promotes early literacy, parents take the information particularly seriously. Parents involved with Reach Out and Read learn that reading is important not only for fun, but also for their child’s brain development; this is a key factor in the program’s success.



What the Data Tell Us

There were four Reach Out and Read sites in Yuma County in 2010, distributing nearly 3,000 books that year. As of the third quarter of the FY 2012, there were five participating practices and 1,650 books were distributed.

Reach Out and Read Arizona, Yuma County, 2010

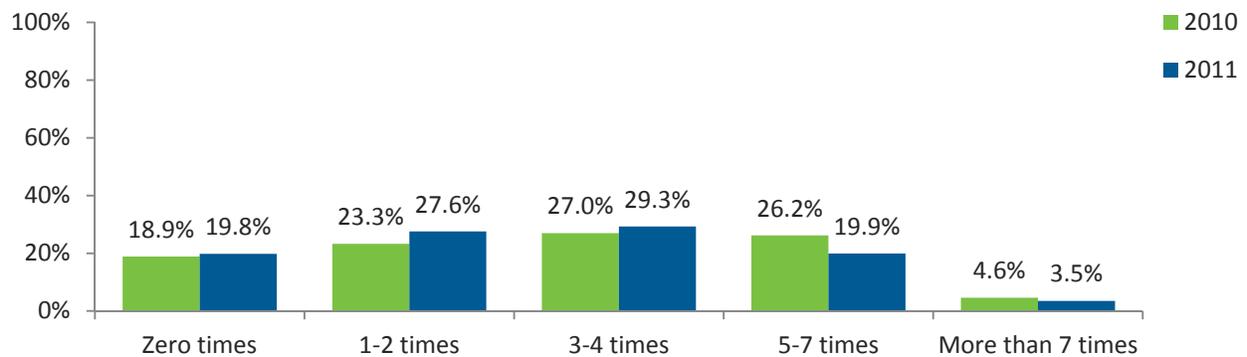
	NUMBER
Number of sites	4
Number of children served	1,225
Number of books distributed in 2010	2,950

Source: Arizona Department of Economic Security. (2010). Child Protective Profiles. Received 2011 from First Things First.

One in five parent survey respondents in 2011 said that they did not spend any time reading or sharing books with their child in the last week. Almost one in four parents (23%) reported reading 5 or more times in the last week.



Number of Times in the Last Week Parents or Another Adult in the Home Spent Time Reading or Sharing Books with Their Child



N: 2010=549, 2011=652.

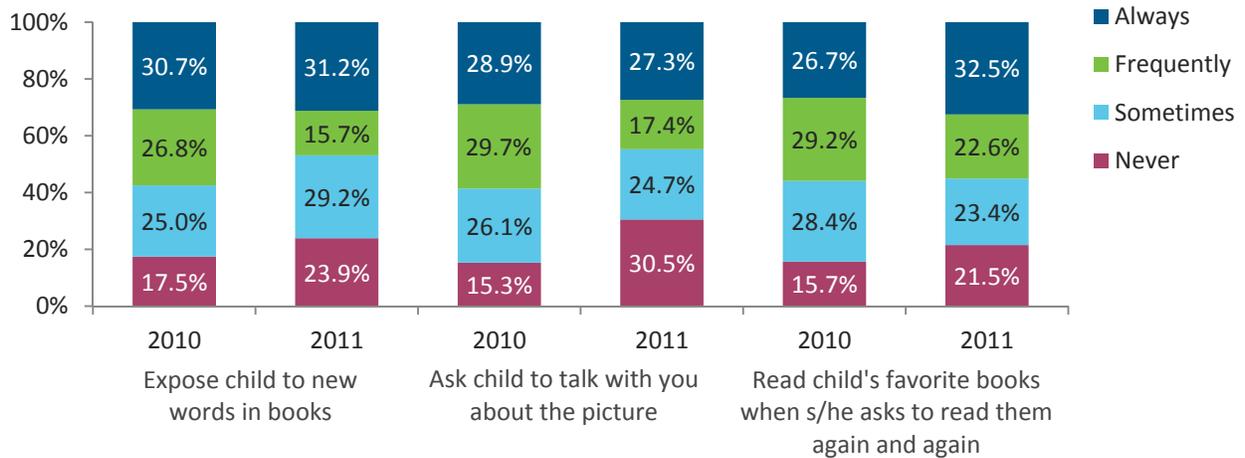
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



Approximately one-third of parent survey respondents in the First Things First Yuma Region reported that they “always” spent time doing recommended early literacy activities with their child when they looked at or read a book to their child in the last week. Literacy activities included exposing the child to new words in books, asking the child to talk about the picture, and reading the child’s favorite books again and again.



Frequency that Parents Did the Following Activities When They Looked at or Read a Book to Their Child in the Last Week



2010 N: Expose child to new words=527; Ask child to talk about picture=529; Read child’s favorite book when asked to read them again and again=528.

2011 N: Expose child to new words=654; Ask child to talk about picture=655; Read child’s favorite book when asked to read them again and again=655.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



SUPPORTING FAMILIES

All families need support of one kind or another. Families experiencing the strain of substance abuse or family violence may need extra resources. At the same time, every family has strengths. We need to recognize and build on the capacity and resiliency of our families, while helping to provide them with the supports needed to best care for their children. The identified indicators within this section help us understand how well we are doing to keep our families strong.

SELECTED INDICATORS

Community Supports

- Family and Community Supports

Social Services

- Child Abuse
- Foster Care
- Children of Incarcerated Parents



Community Supports

Family and Community Supports

Why Is It Important

Community ties with friends and relatives are a principal means by which people and households get supportive resources. Local social services can also provide valuable support for families with children ages birth through five.

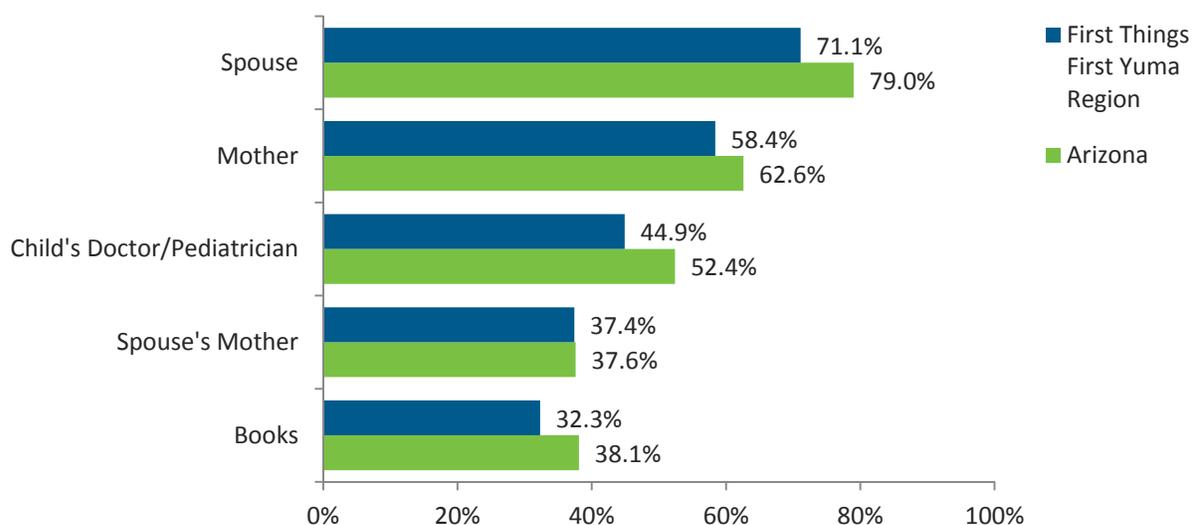
Snapshot of Community Assets

- **The First Things First Yuma Regional Partnership Council** funds voluntary in-home visitation services that provide parents with information, education and support. Topics and resources include parenting skills, early physical and social development, literacy, health and nutrition, community resources, and brain development.
- **KARE Family Centers** support family members raising grandchildren, nieces, nephews, cousins, adopted children, children with a family member in jail, or any child under 18 not born to them. KARE offers Spanish and English advocacy, support groups, referrals, and help with guardianship.

What the Data Tell Us

The most commonly reported source of support for First Things First Yuma Region parent survey respondents was their spouse (71%), followed by their mother (58%) and the child's doctor/pediatrician (45%) in 2008.

Parents who Reported that they "Frequently" Rely on Family and Community Members (Top 5 Responses), 2008



N=192.

Source: First Things First. (2008). Family and Community Survey. Received 2010 from First Things First.

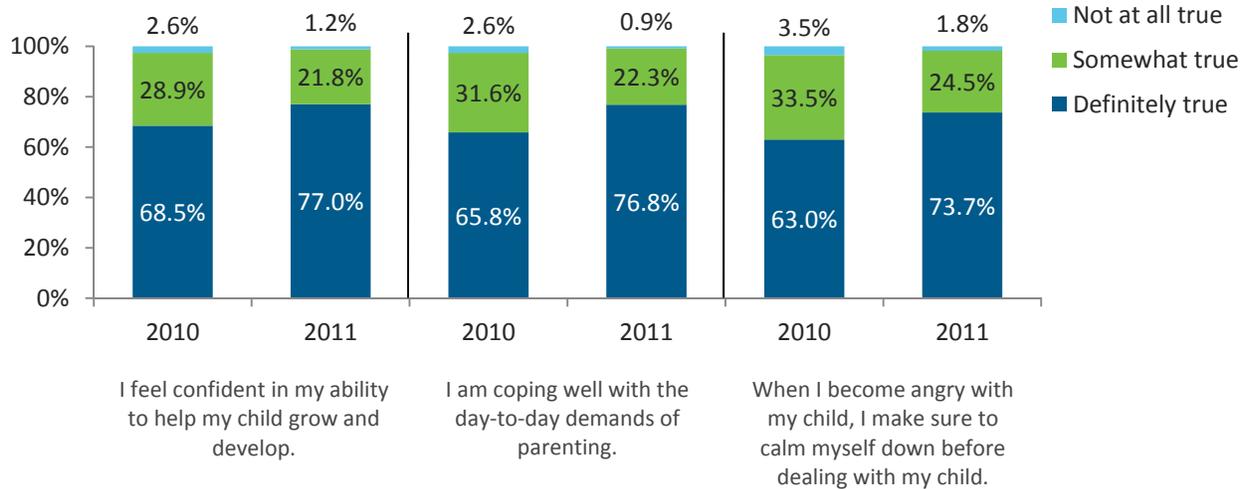


Over three-quarters of parent survey respondents reported positive parenting practices like confidence in their ability to help their child grow and develop in 2011. In addition, there was a 10% increase since 2010 in parent survey respondents who calmed themselves down before dealing with their child when angry.

School Readiness Indicator
 76.8% of families who report they are confident and confident about their ability to support their child's safety, health and well-being



Parents Who Felt that the Following Statements about Parenting Are "Definitely True," "Somewhat True," or "Not at all True" for Them



2010 N: Confident in ability to help child grow and develop=578; Coping well with day-to-day demands of parenting=573; Calm myself down before dealing with child=571.

2011 N: Confident in ability to help child grow and develop=657; Coping well with day-to-day demands of parenting=654; Calm myself down before dealing with child=657.

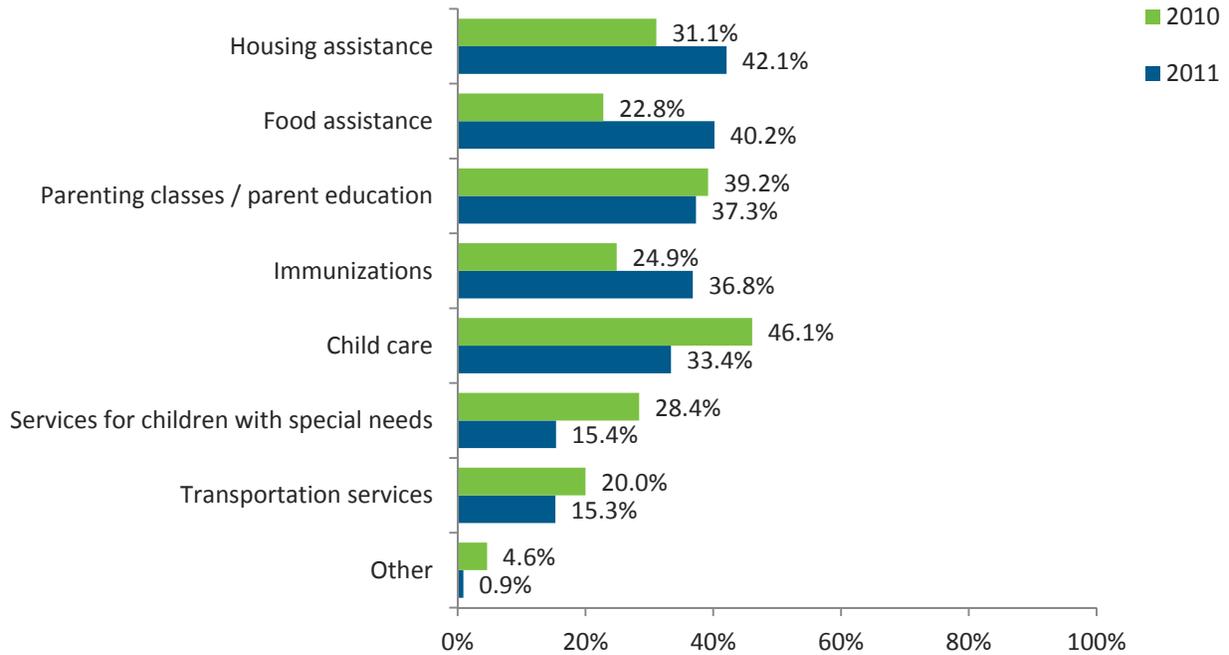
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



The most needed services for children ages birth through five, according to parent survey respondents in 2011 was housing assistance (42%), food assistance (40%), and parenting classes/parent education (37%). Housing and food assistance increased by at least 10% since 2010.



Parents Who Felt that the Following Services for Children Under the Age of 6 and Their Families Are Most Needed in Yuma



2010: Multiple response question with 566 respondents offering 1,229 responses. 2011: Multiple response question with 655 respondents offering 1,450 responses.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Note: These responses are not mutually exclusive.



Social Services

Child Abuse

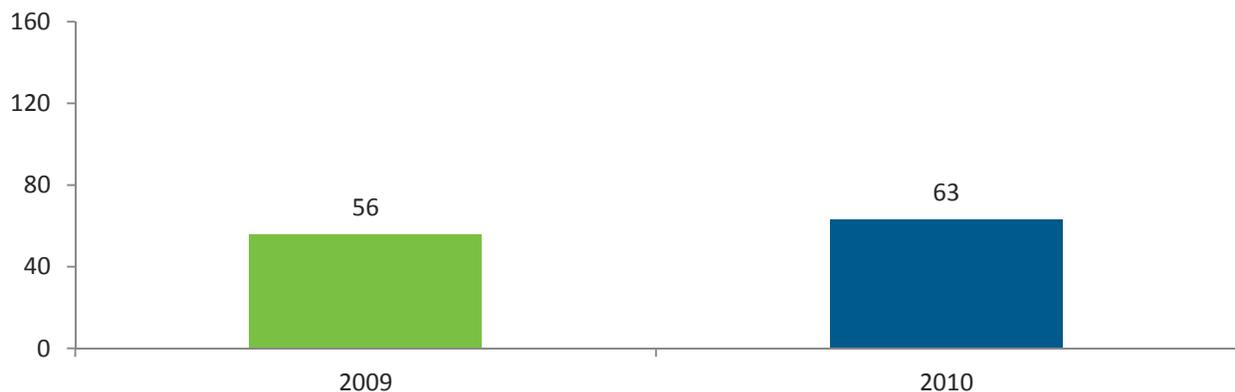
Why Is It Important

Child abuse and neglect are found in families across the social and economic spectrum. Social isolation, financial stress, poverty, substance abuse, and domestic violence are all factors that can lead to adults abusing children.³⁷ Children who are victims of abuse or neglect experience higher rates of suicide, depression, substance abuse, difficulties in school, and other behavioral problems later in life, including a greater risk of mistreating their own children.³⁸ The estimated average lifetime cost per victim of nonfatal child maltreatment is \$210,012 in 2010 dollars, including \$32,648 in childhood health care costs. It is therefore essential that communities work to prevent child abuse and neglect so as to end this cycle of abuse.

What the Data Tell Us

There were 63 children removed from home by Child Protective Services (CPS) in Yuma County in 2010, up from 56 children in 2009.

Children Removed from Home by Child Protective Services (CPS), Yuma County



Source: Arizona Department of Economic Security, Child Protective Services. (2010). Substantiated Cases of Child Abuse/Neglect, Yuma County. (Unpublished data). Received 2011 from First Things First.

³⁷ Child Welfare Information Gateway. (2004, February). Risk and protective factors for child abuse and neglect. Retrieved 2012 from <http://www.childwelfare.gov/preventing/pdfs/riskprotectivefactors.pdf>

³⁸ Kolbo, J. R. (1996). Risk and resilience among children exposed to family violence. *Violence & Victims*, 11, 113-128; and Child abuse: The hidden bruises. (2008, May). *American Academy of Child and Adolescent Psychiatry*. Retrieved 2012 from http://www.aacap.org/cs/root/facts_for_families/child_abuse_the_hidden_bruises



There were 57 substantiated cases of child abuse or neglect in Yuma County in fiscal year (FY) 2011, down from 65 cases in FY 2010. However, there were widespread layoffs of CPS workers across the state in 2009, which may account for some of the difference. The most common type of abuse was neglect (39 cases), followed by physical abuse (17 cases).

Substantiated Cases of Child Abuse/Neglect by Type, Yuma County

TYPE OF MALTREATMENT	FY 2007	FY 2008	FY 2009	FY 2010	FY 2011
Emotional Abuse	0	0	0	0	0
Neglect	28	17	17	53	39
Physical Abuse	27	16	5	11	17
Sexual Abuse	6	3	2	1	1
Total	61	36	24	65	57

Source: Arizona Department of Economic Security. (2011). Child Protective Profiles. Received 2012 from First Things First.

Foster Care

Why Is It Important

Children who are victims of child abuse or neglect may be placed in foster care by the court. Foster care is care for children ages birth through 17 who are removed from their parents' or guardians' home and placed in a different setting such as a family foster care home, relatives' home, group residential home, or an institutional care facility. It is generally held that the child's best interests are served by being with their parents, and there is often an effort to address the issues at home so as to reunite the family.³⁹

Snapshot of Community Assets

- **Arizona's Children's Association** provides support to foster families through its Western Region office headquartered in Yuma. Its services include quarterly support groups, advanced training, 24-hour crisis intervention, as well as monthly home visits for advocacy, support, and feedback.
- **Child and Family Services of Yuma** offers residential and outpatient services for children birth through 18 who have been removed from their family or foster home and are experiencing problems with everyday life and coping skills. Services include an 18 bed residential program, crisis intervention, peer support groups, and counseling.

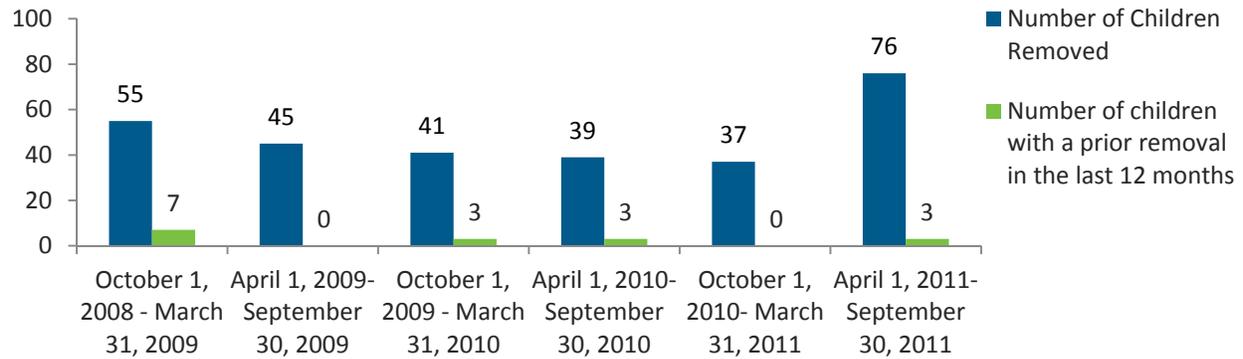
³⁹ Department of Health and Human Services, Administration for Children and Families. (2010). Family Preservation Services. Retrieved 2010 from <http://www.childwelfare.gov/supporting/preservation/>



What the Data Tell Us

The number of children entering out-of-home care is reported in 6 month increments. Between April 1st and September 30th of 2011, there were 76 children removed from homes in Yuma County. Between April 1st and September 30th of 2011, 4% of those children had a prior removal in the 12 months previous.

Number of Children Entering Out-of-Home Care, Yuma County



Source: Arizona Department of Economic Security. (2011). Child Protective Services. (Unpublished Data). Received 2012 from First Things First.
Note: Fiscal year goes from October to September.



Children of Incarcerated Parents

Why Is It Important

Children of incarcerated parents are more likely to experience poverty and household instability, especially due to the increased likelihood of single parent households or grandfamilies. These children are more likely to witness drug and alcohol abuse and domestic violence and they are more likely to exhibit higher levels of emotional and behavioral problems than children whose caregivers have never been arrested. They are also more likely to later be incarcerated themselves if preventive steps are not taken.⁴⁰ Arizona had the highest rate of incarceration nationally. There were an estimated 95,669 minor children in Arizona affected by parental incarceration in 2007, and an additional 80,398 children had at least one parent on probation.

What the Data Tell Us

There were more than 2,600 children of incarcerated parents in the correctional system in Yuma County in 2011, with over 5,000 affected by parental incarceration in 2011.

Population of Children of Incarcerated Parents in the Correctional System, 2011

	YUMA COUNTY	ARIZONA
Total population of children of incarcerated parents	2,640	93,245
Total population of children affected by parental incarceration	5,318	171,662

Source: Coconino County CIP Task Force. (2011). Study and Recommendations for Coconino County's Children with Incarcerated Parents. Received 2012 from Coconino County CIP Task Force.

⁴⁰ Nickel, J. Garland, C., and Kane, L. (2009). Children of Incarcerated Parents: An Action Plan for Federal Policymakers. Retrieved June 29, 2010 from http://www.thecrimereport.org/wp-content/uploads/2009/10/Children_Incarcerated_Parents_v8.pdf



HEALTH

Ensuring that children and youth are in good physical health provides an essential foundation for healthy development so that children can become successful, healthy and thriving adults. It is critical that children have access to health care to ensure that they have a chance at obtaining optimum health. However, Arizona's general fund budget has been reduced by more than 20%, from \$10.6 billion in fiscal year (FY) 2008 to \$8.5 billion in FY 2011. Cuts to health and human services have been especially profound.⁴⁹

According to the 2008 FTF Family and Community Survey, more than 1/3 of parents were dissatisfied with the health information and resources available, and 70% of parents of children with health issues expressed dissatisfaction with available information and resources. The cuts that have occurred to date are beginning to take their toll on children and their families, especially the most vulnerable populations, such as children with behavioral health conditions and special health needs.

SELECTED INDICATORS

Maternal and Child Health

- Prenatal Care
- Birth Characteristics
- Substance Abuse During Pregnancy
- Teen Births
- Breastfeeding
- Immunizations

Special Needs

- Health Insurance
- Health Providers
- Oral Health Care

Education

- Asthma
- Overweight and Obesity
- Illness
- Leading Causes of Death

⁴⁹ Arizona Health Futures. (2011). After the Dust Settles. Retrieved 2012 from <http://slhi.org/wp-content/uploads/2011/05/ib-2011-April.pdf>



Maternal and Child Health

Prenatal Care

Why Is It Important

Prenatal care is comprehensive medical care for pregnant women, including screening and treatment for medical conditions and identification and interventions for behavioral risk factors like tobacco, alcohol, and substance abuse that are associated with poor birth outcomes. Women who receive adequate prenatal care are more likely to have better birth outcomes, such as full term births and babies born weighing more than 5.5 pounds. Babies born to mothers who receive no prenatal care are three times more likely to be born at a low birth weight (less than 5.5 pounds), and have lower survival rates, than those whose mothers received prenatal care.⁴² Lack of prenatal care is often associated with lack of health insurance and other barriers to health care, including communication difficulties, lack of child care, and transportation obstacles.⁴³

It is essential for women to receive prenatal care early in their pregnancy (first trimester) and to have regular prenatal visits throughout the pregnancy. Timely and consistent visits allow for the identification of medical problems. Health providers are also able to provide pregnancy and delivery education, education service referrals, and prevent maternal health risks including death.⁴⁴

Snapshot of Community Assets

- *The Yuma County Health Start/Comienzo Sano Program* provides free home visits and free prenatal classes to pregnant women and those who support them. **Home visits** may continue up to two years after the child is born. **Prenatal classes** are offered in English and Spanish and in Yuma, Somerton, and San Luis.

⁴² U.S. Department of Health Services, Maternal and Child Health Bureau. (n.d.) A Healthy start: Begin before baby's born. Retrieved June 28, 2010 from <http://www.mchb.hrsa.gov/programs/womeninfants/prenatal.htm>

⁴³ American Congress of Obstetricians and Gynecologists. (2010). Universal maternity care. Retrieved June 23, 2010 from http://www.acog.org/acog_districts/dist_notice.cfm?recno=1&bulletin=2893

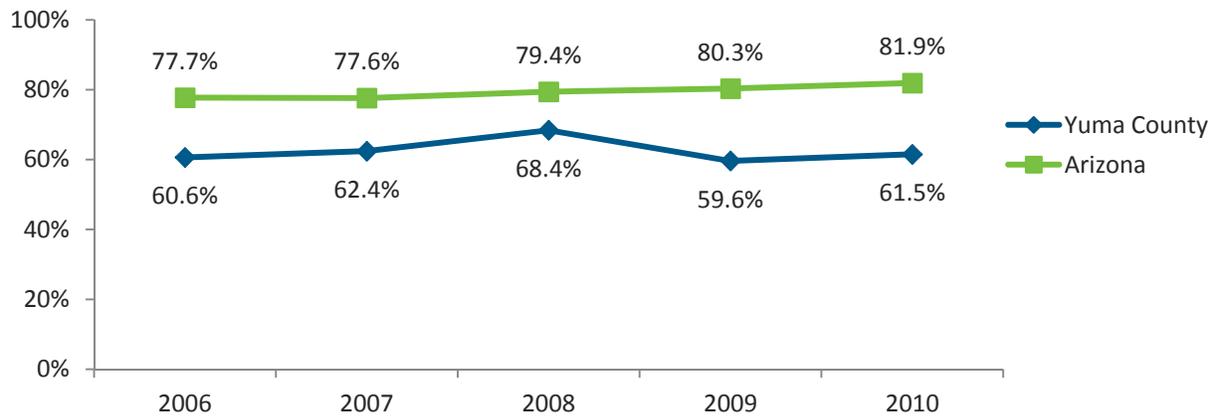
⁴⁴ Kotelchuck, M. (1994). An evaluation of the Kessner Adequacy of Prenatal Care Index and a Proposed Adequacy of Prenatal Care Utilization Index. *American Journal of Public Health*, 84(9), 1414-1420. Retrieved 2012 from <http://ajph.aphapublications.org/cgi/reprint/84/9/1414.pdf>



What the Data Tell Us

A lower percentage (62%) of pregnant women in Yuma County began prenatal care in their first trimester of pregnancy, than in the state overall (82%) in 2010. Yuma County showed a slight increase in first trimester prenatal care from 60% in 2009 to 62% in 2010.

Women Who Began Prenatal Care in First Trimester of Pregnancy



Source: Arizona Department of Health Services. (2011). *Health Status and Vital Statistics*, Retrieved 2011 from <http://www.azdhs.gov/>; Arizona Department of Health Services, Bureau of Epidemiology and Disease Control Services, Office of Infectious Disease Service.

More than half (55%) of pregnant women in San Luis did not begin prenatal care in their first trimester of pregnancy, as compared to one-third of pregnant women in Yuma City. Overall, the percentage (39%) of pregnant women in Yuma County who did not begin prenatal care in their first trimester was more than double the percentage of Arizona as a whole (18%).

Women Who Did Not Begin Prenatal Care in the 1st Trimester, By Selected Community, 2006-2010

PLACE	2006	2007	2008	2009	2010
San Luis	53.7%	50.6%	49.5%	63.6%	55.1%
Somerton	40.0%	44.3%	38.8%	41.2%	43.7%
Yuma City	35.4%	33.7%	25.8%	34.1%	33.1%
Yuma County	39.4%	37.6%	31.6%	40.4%	38.5%
Arizona	22.3%	22.4%	20.6%	19.7%	18.1%

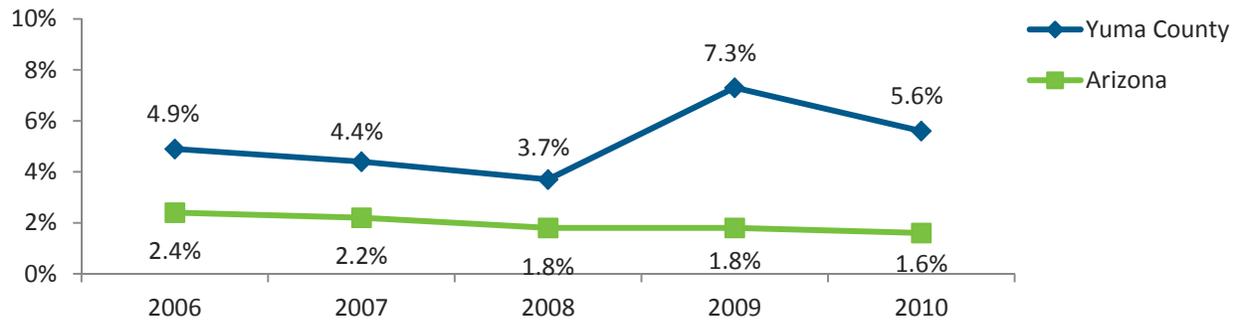
Source: Arizona Department of Health Services. (2012). *Health and Vital Statistics*. Retrieved 2012 from <http://www.azdhs.gov/>

Note: Only communities with more than 50 total births are presented.



Almost 6% of pregnant women in Yuma County did not receive any prenatal care during their pregnancy, as compared to the state at less than 2% in 2010.

Women Who Received No Prenatal Care During Pregnancy



Source: Arizona Department of Health Services. (2011). Health Status and Vital Statistics. Retrieved 2011 from <http://www.azdhs.gov/>.

Note: Percentage of total births.

One in ten pregnant women in Somerton and 9% in San Luis did not receive any prenatal care during their pregnancy, as compared to 4% of pregnant women in Yuma City.

Women Who Received No Prenatal Care During Pregnancy, By Selected Community

PLACE	2006	2007	2008	2009	2010
San Luis	9.6%	5.1%	6.7%	15.2%	8.6%
Somerton	4.5%	5.2%	4.4%	7.5%	9.5%
Yuma City	3.9%	3.9%	2.7%	5.3%	4.2%
Yuma County	4.9%	4.4%	3.7%	7.3%	5.6%
Arizona	2.4%	2.2%	1.8%	1.8%	1.6%

Source: Arizona Department of Health Services. (2012). Health and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/>

Note: Only communities with more than 50 total births are presented.

Birth Characteristics

Why Is It Important

There are many factors surrounding a child's birth that are related to infant and child survival, health, and development. Low birth weight in particular is a risk factor for developmental delays, visual and hearing defects, chronic respiratory problems, autism, and learning difficulties.⁴⁵ Low birth weights are commonly associated with pre-term births which also increase the risk of serious lasting disabilities like cerebral palsy and increased infant mortality.⁴⁶

⁴⁵ U.S. Department of Health and Human Services, Health Resources and Services and Administration. (2009, September). Child health USA 2008-2009. Retrieved 2012 from <http://mchb.hrsa.gov/chusa08/>

⁴⁶ March of Dimes Foundation. (2010). Preterm Births. Retrieved June 22, 2010 from http://www.marchofdimes.com/professionals/14332_1157.asp#head4



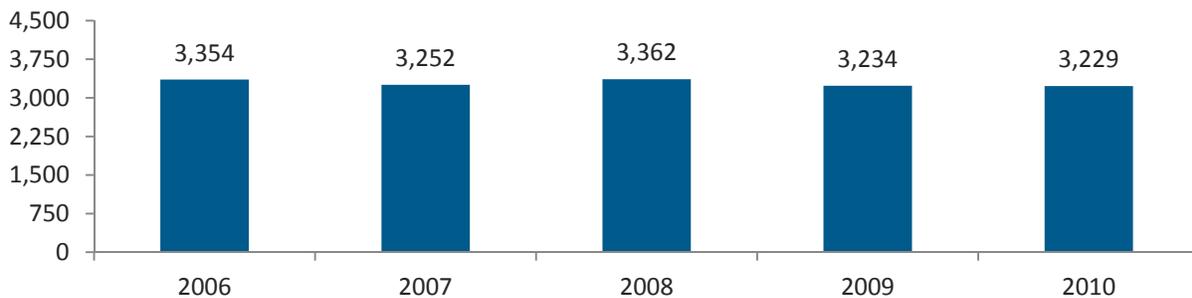
Snapshot of Community Assets

- *The Yuma County Public Health Services District* offers home visits by public health nurses to provide exams and guidance about child development, nutrition and other topics. The program focuses on children birth through 17 who were premature at birth, had birth defects, were exposed to street drugs during pregnancy, or other situations that would place them at high risk.
- *The Yuma Regional Medical Center* holds a variety of classes related to childbirth. These include childbirth preparation, breastfeeding, newborn care, and a class for siblings.

What the Data Tell Us

There was a 4% decrease in total births in Yuma County from 2006 to 2010, with 3,229 births in 2010.

Total Births, Yuma County



Source: Arizona Department of Health Services. (2011). Community Vital Statistics. Retrieved 2011 from <http://www.azdhs.gov/>.

Births By Selected Community

PLACE	2006	2007	2008	2009	2010
San Luis	585	596	596	593	626
Somerton	335	325	343	335	316
Yuma City	2,346	2,313	2,351	2,226	2,220
All Births, Yuma County	3,354	3,252	3,362	3,234	3,229
All Births, Arizona	102,042	102,687	99,215	92,616	87,053

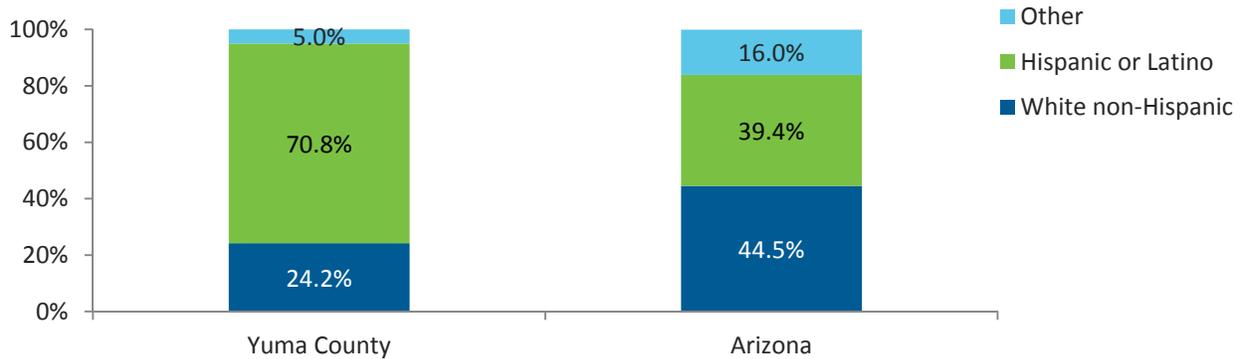
Source: Arizona Department of Health Services. (2011). Health and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/>.

Note: Only communities with more than 50 total births are presented.



More than two-thirds (71%) of the births in Yuma County were to Hispanic or Latino mothers, higher than the state at 39% in 2010.

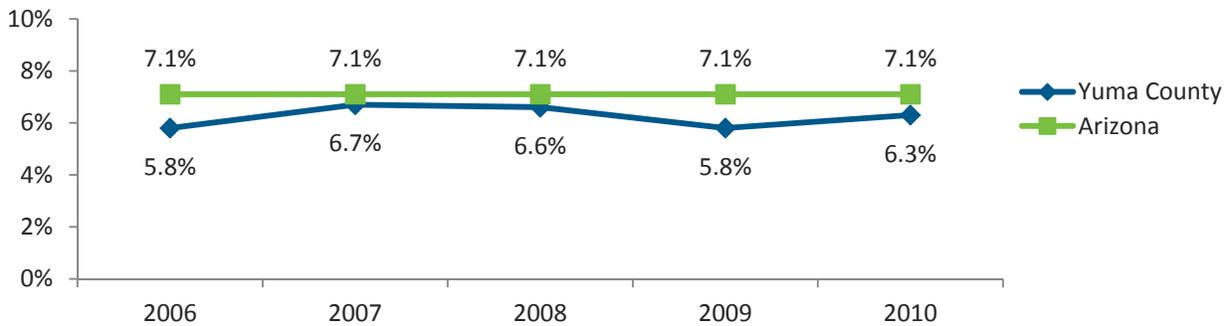
Births by Mother's Race/Ethnicity, 2010



Source: Arizona Department of Health Services. (2011). Health and Vital Statistics. Retrieved 2011 from <http://www.azdhs.gov/>.
 Note: Percentages may not total to 100% due to rounding.

Six percent of total births in Yuma County were babies born at a low birth weight (less than 2,500 grams), as compared to the state at 7% in 2010.

Births with Low Birth Weight (Less than 2,500 Grams)



Source: Arizona Department of Health Services. (2011). Health Status and Vital Statistics. Retrieved 2011 from <http://www.azdhs.gov/>.

Eight percent of pregnant women in Somerton, 6% in Yuma, and 5% in San Luis had low birth weight babies in 2010.

Births with Low Birth Weight By Selected Community

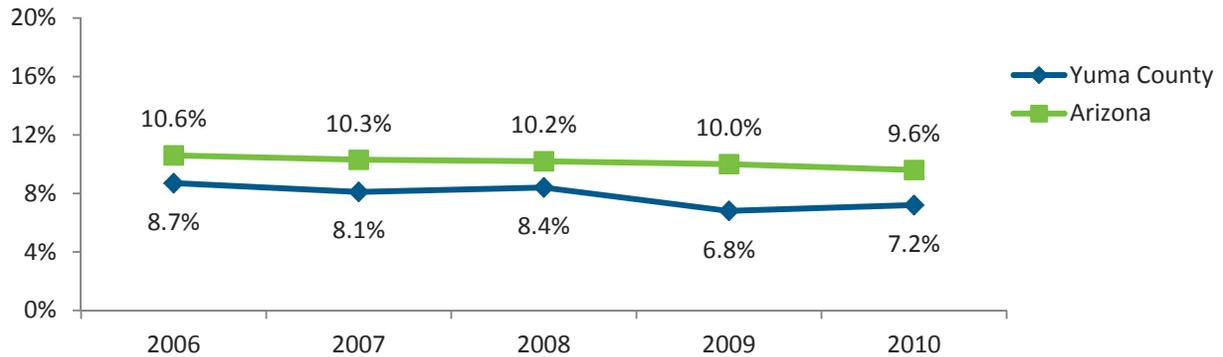
PLACE	2006	2007	2008	2009	2010
San Luis	5.6%	5.7%	5.7%	6.7%	5.4%
Somerton	6.0%	6.2%	7.3%	6.0%	8.2%
Yuma City	5.9%	7.2%	6.8%	5.6%	6.3%
Yuma County	5.8%	6.7%	6.6%	5.8%	6.3%
Arizona	7.1%	7.1%	7.1%	7.1%	7.1%

Source: Arizona Department of Health Services. (2011). Health and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/>.
 Note: Only communities with more than 50 total births are presented.



Seven percent of babies were born prematurely (at a gestational age of less than 37 weeks) in Yuma County in 2010. This was lower than the state overall at 10%.

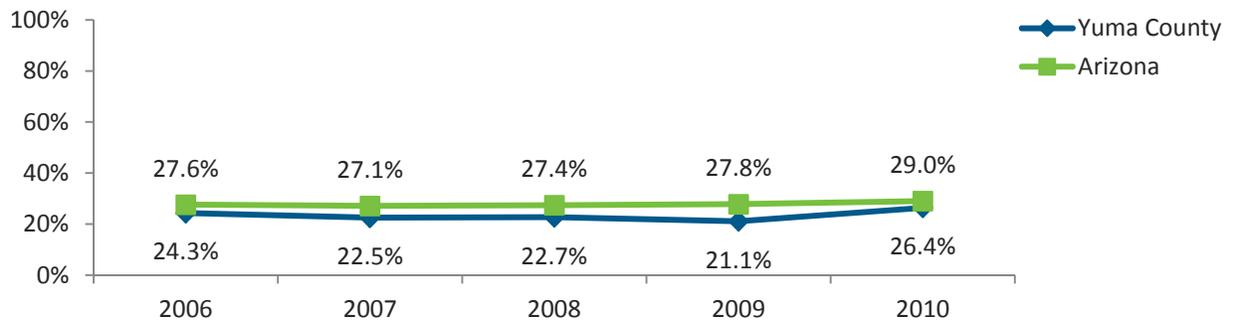
Preterm Births (Gestational Age of Less Than 37 Weeks)



Source: Arizona Department of Health Services. (2012). Health and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/>.

Births with medical complications of labor and delivery include such things as long delivery, uncoordinated contractions, and overstretching of the uterus. Twenty-six percent of births had complications of labor and delivery in Yuma County, lower than the state overall at 29% in 2010.

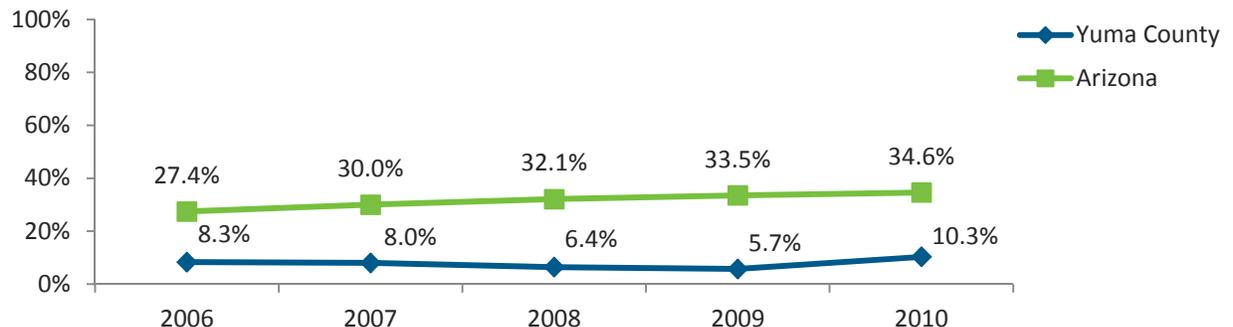
Births with Complications of Labor and Delivery



Source: Arizona Department of Health Services. (2012). Health and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/>.

Births with medical risk factors apply to the mother and include such things as anemia, heart disease, diabetes, hypertension and kidney disease. Ten percent of births had medical risk factors in Yuma County in 2010. This was much lower than the state overall at 35%.

Births with Medical Risk Factors



Source: Arizona Department of Health Services. (2012). Health and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/>.



A larger percentage (62%) of labor and deliveries in Yuma County were paid for by AHCCCS compared to the state of Arizona overall (53%) in 2010.

Source of Payment for Labor and Delivery

PAYEE	2005	2006	2007	2008	2009	2010
AHCCCS						
Yuma County	62.2%	63.0%	61.0%	61.0%	61.7%	62.0%
Arizona	52.6%	52.1%	52.2%	52.5%	53.5%	53.3%
Indian Health Service						
Yuma County	0.1%	0.1%	0.2%	0.1%	0.2%	0.2%
Arizona	1.8%	1.8%	1.9%	1.9%	1.8%	2.0%
Private Insurance						
Yuma County	31.9%	31.7%	33.3%	34.5%	32.1%	32.0%
Arizona	41.6%	42.3%	42.0%	42.0%	41.0%	41.0%
Self						
Yuma County	5.3%	5.0%	4.4%	4.0%	5.8%	5.3%
Arizona	2.8%	3.0%	2.8%	2.6%	2.7%	3.0%
Unknown						
Yuma County	0.4%	0.1%	1.0%	0.5%	0.3%	0.4%
Arizona	1.2%	0.9%	1.0%	1.0%	1.1%	0.7%

Source: Arizona Department of Health Services. (2012). Health and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/>.

Note: Percent of total births

Substance Abuse During Pregnancy

Why Is It Important

Tobacco and alcohol use by pregnant women has a number of serious consequences. Infants prenatally exposed to alcohol may develop fetal alcohol spectrum disorders which may include developmental delays in thinking, speech, movement or social skills, poor coordination, and heart defects.⁴⁷ Furthermore, smoking tobacco during pregnancy is the single most preventable cause of illness and death among mothers and infants. Babies born to smokers are more likely to be born prematurely, with a low birth weight and reduced life expectancy.⁴⁸

⁴⁷ Centers for Disease Control and Prevention. (2007). Fetal Alcohol Spectrum Disorders. Retrieved 2007 from <http://www.cdc.gov>.

⁴⁸ Centers for Disease Control and Prevention. (2007). Tobacco Use and Pregnancy. Retrieved 2007 from <http://www.cdc.gov>.



Approximately 3% of the 4.1 million women of child-bearing age who abuse drugs are believed to continue drug use during pregnancy. Maternal substance abuse, the cause of prenatal neonatal abstinence syndrome, is a leading preventable cause of mental, physical, and psychological problems in infants and children. Substance use by pregnant women has both medical and developmental consequences for the newborn, in addition to the legal, health, and economic consequences for the mother.⁴⁹

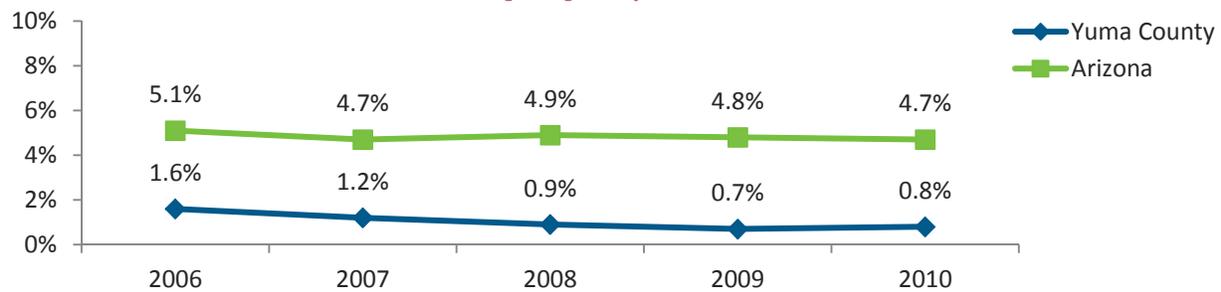
Snapshot of Community Assets

- **The Yuma County Public Health Services District** offers home visits by public health nurses to provide exams and guidance about child development, nutrition and other topics. The program focuses on children birth through 17 who were premature at birth, had birth defects, were exposed to street drugs during pregnancy, or other situations that would place them at high risk.

What the Data Tell Us

Less than 1% of births were to mothers who used tobacco while pregnant in Yuma County as compared to 5% overall in the state in 2010.

Births To Mothers Who Used Tobacco During Pregnancy



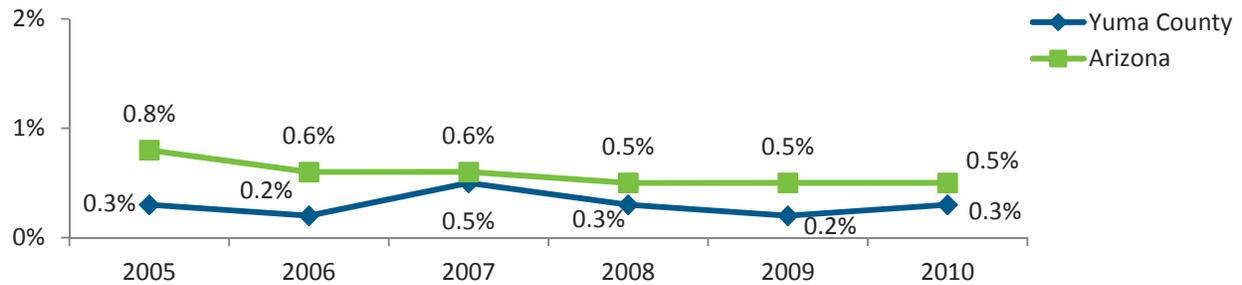
Source: Arizona Department of Health Services. (2012). Health and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/>.

⁴⁹ Substance Abuse and Mental Health Services Administration Office of Applied Studies. (2003). National Survey on Drug Use & Health: Results. Retrieved December 2007 from <http://www.drugabusestatistics.samhsa.gov/>.



Less than one percent of births in both Yuma County and the state were to mothers who used alcohol while pregnant in 2010.

Births To Mothers Who Used Alcohol During Pregnancy



Source: Arizona Department of Health Services. (2012). Health and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/>.

Teen Births

Why Is It Important

Teen parents and their children are often at greater risk of experiencing short- and long-term health, economic, social, and academic challenges than parents who delay childbirth. Teen mothers tend to give birth prematurely and have babies born at low birth rates. Teen mothers are less likely to complete high school and therefore have lower earning power in their careers. Children born to teens are 50% more likely to repeat a grade, are less likely to complete high school, and perform lower on standardized tests than children of older mothers.⁵⁰ Arizona had the 6th highest teen birth rate in the nation in 2009.⁵¹

Snapshot of Community Assets

- **The Yuma County Public Health Services District** offers a nurse case management program for pregnant teens under 20 years of age. The program identifies pregnant teens and encourages them to begin prenatal care early in the pregnancy. The program also engages in outreach to prevent teen pregnancy.
- The **Choices for Teen Parents Program** provides parenting and life skills instruction, parent/child activity groups, and ongoing case management to young parents under 21.
- **The Teen Pregnancy Task Force** of Planned Parenthood seeks to reduce the rate of teen pregnancies in Yuma County.

⁵⁰ National Campaign to Prevent Teen and Unplanned Pregnancy. (2002). Not Just Another Single Issue: Teen Pregnancy Prevention's Link to Other Critical Social Issues. Retrieved 2004 from <http://www.teenpregnancy.org/resoures/data/pdf/notjust.pdf>.

⁵¹ Arizona Department of Health Services and National Center for Health Statistics.



What the Data Tell Us

The percentages of births to teen mothers varied between 14% and 17% in San Luis, Somerton, and Yuma City in 2010. The percentage in the county (15%) was higher than the state of Arizona (11%) in 2010.

Births to Teen Mothers (19 Years and Younger) By Community, 2006-2010

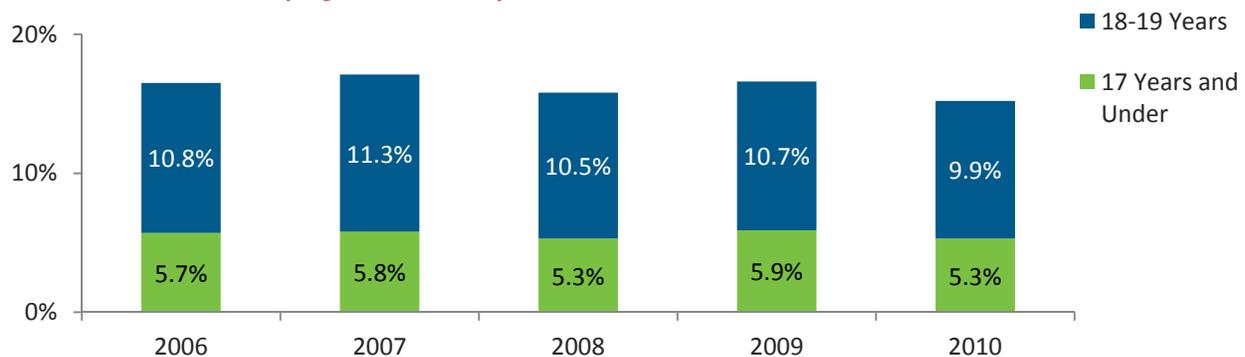
PLACE	2006	2007	2008	2009	2010
San Luis	21.2%	18.3%	20.6%	20.9%	17.3%
Somerton	17.9%	18.5%	15.5%	14.6%	16.8%
Yuma City	15.1%	17.0%	14.6%	15.8%	14.3%
Yuma County	16.5%	17.2%	15.8%	16.6%	15.2%
Arizona	12.7%	12.6%	12.3%	11.8%	10.8%
United States	10.4%	10.5%	10.4%	10.0%	NA

Source: Arizona Department of Health Services. (2012). Health and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/>.

Note: Only communities with more than 30 total births are presented.

The percentage of births to Yuma County's teen population decreased slightly between 2009 and 2010. Five percent of all Yuma County births were to mothers 17 years and under in 2010.

Births to Teen Mothers by Age, Yuma County



Source: Arizona Department of Health Services. (2011). Health and Vital Statistics. Retrieved 2011 from <http://www.azdhs.gov/>.

Immunizations

Why Is It Important

Immunization requirements help to prevent against a number of serious and sometimes fatal vaccine-preventable diseases in young children. In Arizona, immunizations are a requirement for entry into kindergarten and children must be up-to-date with age-appropriate vaccinations in order to attend preschool or child care. The required vaccinations protect against hepatitis B, polio, measles, mumps, rubella, diphtheria, tetanus, pertussis, influenza, and varicella (chickenpox).



A standard measure of vaccinations, as measured by the National Immunization Survey, is the percentage of children ages 19 to 35 months who have received the appropriate number of vaccines across a wide range of diseases; it is referred to as the 4:3:1:3:3:1 immunization schedule.⁵²

Snapshot of Community Assets

- *The Yuma County Public Health Services District* provides vaccinations to the public, including children 18 years or younger. There is a \$10 visit fee for children to be immunized, but the vaccinations themselves are free.
- *The Regional Center for Border Health, Inc.'s Nuestros Niños* project includes health fairs and free immunization clinics in San Luis, Somerton, and Yuma. The fairs and clinics provide free vaccinations to children, provide families with information about resources in the community, and assist with enrollment into public assistance programs.

What the Data Tell Us

About one percent of kindergarten children in Yuma County did not have immunizations due to their parent's personal reasons. This was lower than the state overall at 3%.

Kindergarteners with Required Immunizations, 2010/11

	YUMA COUNTY	ARIZONA
4+ DTap	98.3%	95.6%
3+ Polio	98.3%	95.6%
2+ MMR	97.8%	95.3%
3+ Hep B	99.0%	96.6%
2 Varicella	84.9%	81.2%
1 Varicella or Hx	14.5%	16.1%
Personal Exempt	0.6%	3.2%
Medical Exempt	0.0%	0.3%

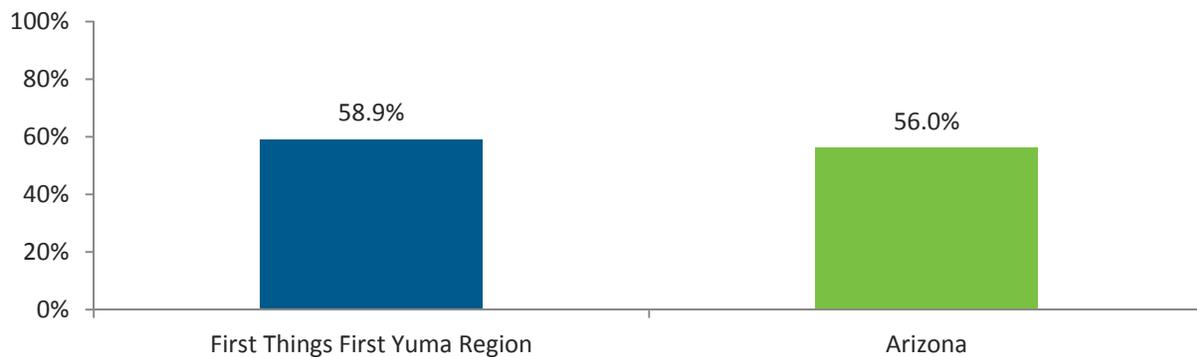
Source: Arizona Department of Health Services. (2011). Arizona State Immunization Information System Data Base (ASIS). (Unpublished data). Retrieved 2012 from First Things First.

⁵² U.S. Centers for Disease Control. (May 2010). National Immunization Survey. Retrieved June 2010 from <http://www.cdc.gov/vaccines/stats-surv/imz-coverage.htm#nis>.



Fifty-nine percent of children ages 19 through 35 months in the First Things First Yuma Region had a completed vaccination schedule in 2010, compared to 56% of children of the same age in the state.

Children Ages 19 Through 35 Months with Completed Vaccination Schedule, 2010



Source: Arizona Department of Health Services. (2011). Arizona State Immunization Information System Data Base (ASIIIS). (Unpublished Data). Received 2012 from First Things First.

U.S. National Immunization Survey. (2011). Estimated Vaccination Coverage with Individual Vaccines and Selected Vaccination Series Among Children 19-35 Months of Age by State and Local Area. Retrieved 2012 from <http://www.cdc.gov/vaccines/stats-surv/nis/nis-2010-released.htm>

Note: First Things First Yuma Region based on sum of Arizona Department of Health Services zip codes within region.

Note: Children with completed schedule have received all vaccines in the 4:3:1:3:3:1 combination. Data only include children who have been entered into the Arizona State Immunization Information System, and do not capture children who have never seen a doctor or whose doctor did not enter them into the system.

Health Care

Health Care Need and Access

Why Is It Important

Children with a regular source of primary health care have better health. They receive more preventative care, have increased access to care, receive continuous care, have lower rates of hospitalization, and lower health care costs.⁵³ An inability to receive medical care has the potential to cause adverse health consequences for children. People foregoing health care at the first cause for concern are more likely to require later hospitalization.⁵⁴

⁵³ U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. (2008). Women's Health USA 2008. Rockville, Maryland.

⁵⁴ Billings, J., J.D., Bindman, A. B., M.D., Grumbach, K., M.D., et al. (1995). Preventable Hospitalizations and Access to Health Care. JAMA (274(4): 305-311.



Snapshot of Community Assets

- ***The Regional Center for Border Health, Inc. (RCBH)*** provides primary care, community outreach, and health education. Its programs include:
 - ***CAPAZ-MEX (the Community Access Program of Arizona and Mexico)*** is a discount network that helps to provide primary and preventive health care to residents of Yuma County at reduced prices.
 - ***Nuestros Niños*** conducts an annual door-to-door outreach campaign in the border communities of San Luis, Somerton, Gadsden, and Yuma. The program collects information on children in need of health care coverage, children in need of immunizations, pregnant women needing prenatal care, and migrant families without health insurance. The campaign has been conducted annually since 1998, and in 2009, 974 homes were visited; 463 children and 606 adults were identified as in need of assistance with the Arizona Health Care Cost Containment System and KidsCare enrollment process.
 - ***The RCBH Mobile Unit*** sponsors health fairs, immunization campaigns, and health career promotion throughout rural communities in Western Arizona.
- ***The San Luis Walk-In Clinics*** in San Luis and Somerton offer primary care and other health services to the families of Yuma County, including those who would otherwise be unable to afford care.
 - ***Health and educational services*** include immunizations, physical exams, primary health care, laboratory services, women’s health, diabetes prevention, and breast cancer support groups.
 - ***The San Luis Walk-In Clinic, Inc. Medical Mobile Unit*** provides medical exams in the Nutrition Center in Yuma County and sponsors health fairs, immunization campaigns, health career promotion, and asthma camps. The mobile health unit serves rural communities and other areas throughout Western Arizona where health care is limited because of issues of distance and lack of transportation.
- ***The Sunset Community Health Center*** offers primary care and other services in Dateland, Foothills, Yuma, Somerton, and San Luis. Sunset’s sliding fee program assists families who do not have medical insurance and do not qualify for AHCCCS.

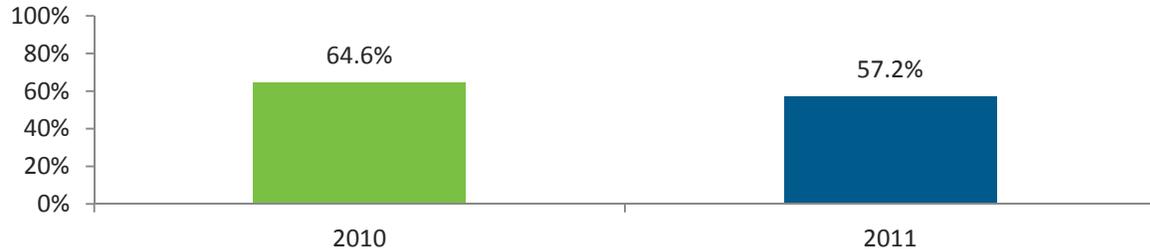


What the Data Tell Us

Over half (57%) of parent survey respondents indicated that their child needed medical care in 2011.



Parents Who Indicated that Their Child Needed Medical Care (Respondents answering “yes”)



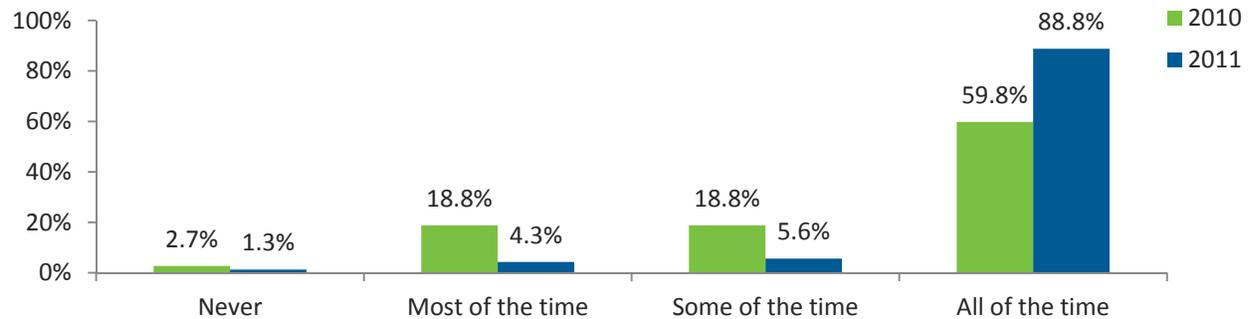
N: 2010=570, 2011=657.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Nearly 9 out of 10 (89%) parent survey respondents said they were able to receive medical care for their child when needed “all of the time” in 2011.



Frequency of Child’s Ability to Receive Medical Care When Needed



N: 2010=368, 2011=376.

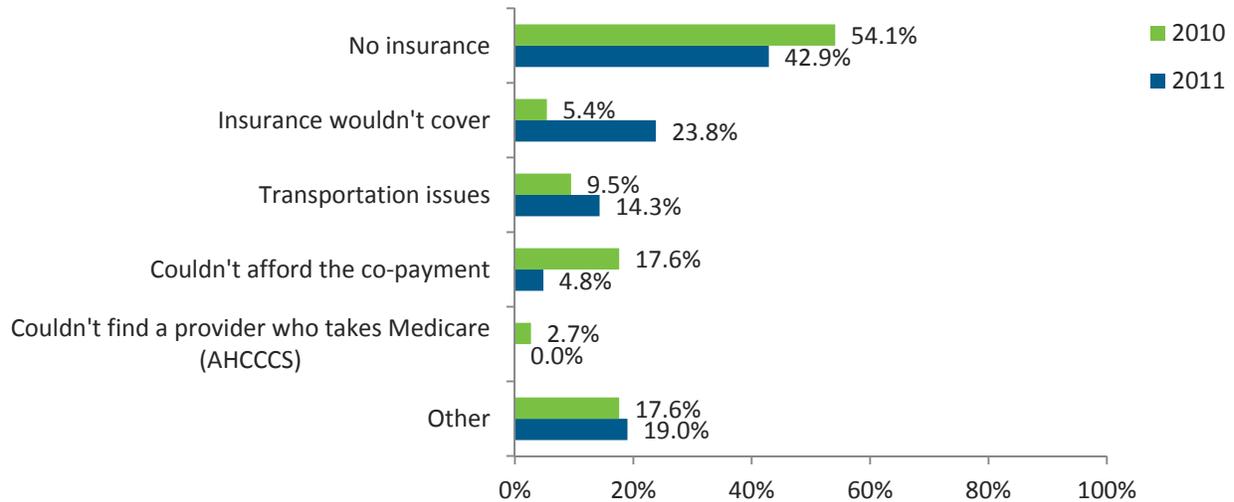
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



Parents who reported their child was unable to receive needed care “some of the time” or “never” said it was due to no insurance (43%), insurance not covering the needed care (24%), and/or transportation issues (14%).



Reason Child was Unable to Receive Needed Care Some of the Time or Never



2010: Multiple response question with 74 respondents offering 79 responses. 2011: Multiple response question with 21 respondents offering 22 responses.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

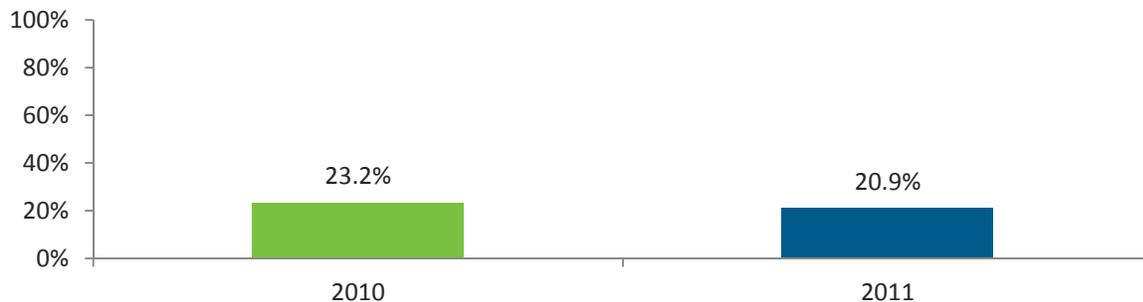
Note: These responses are not mutually exclusive.

Note: Use caution when comparing results as 2011 sample size is less than 30 responses.

One in five (21%) parents responding to the parent survey indicated that their child had a health problem in the last year.



Parents Who Indicated that Their Child Had a Health Problem in the Last 12 Months (Respondents answering “yes”)



N: 2010=565, 2011=657.

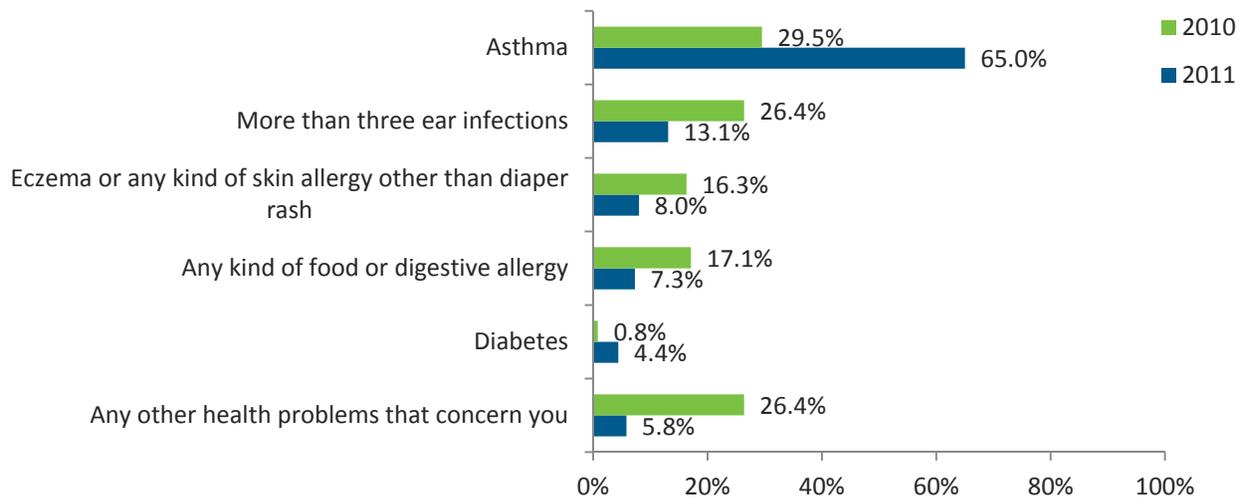
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



There were two times as many parents reporting that their child had experienced asthma from 2011 (65%) to 2010 (30%).



Type of Child's Health Condition in the Last 12 Months Reported by Parents



2010: Multiple response question with 129 respondents offering 150 responses. 2011: Multiple response question with 137 respondents offering 142 responses.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Note: These responses are not mutually exclusive.

In December of 2011 and January of 2012, ASR staff administered a survey to health care providers practicing medicine in the First Things First Yuma Region with patients birth to five. The surveys were developed to identify the most critical health issues facing the children of the region. Questions investigated physicians' perspectives on health care service needs for children birth to five; access to services; health care information and education; and patient caseload information.

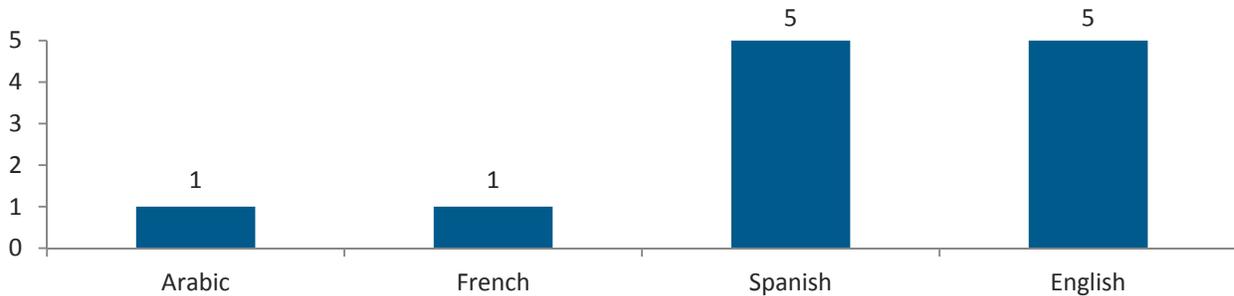
A total of nine health care providers and five office staff offered their insight. Caution should be used throughout the report when interpreting the numbers due to the small sample size, however the survey provides valuable information, painting a picture of First Things First Yuma Region health issues.



The Yuma health care provider offices responding to the provider survey indicated that they offered services in both English and Spanish (5 out of 5 offices), allowing more families to seek services in their primary language to improve patient understanding and wellness.



Which language do you provide services in (mark all that apply)? 2011



N: Multiple response question with 5 providers giving 12 responses.

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: These responses are not mutually exclusive.

Note: Caution should be used when interpreting results due to small sample size (N<20).

Due to shortages in primary care providers, many offices are unable to meet the demand of the patient population seeking care. This especially affects those seeking care for the first time or moving to a new area as new patients. Of the health care providers surveyed, 100% said that they accepted new patients, with one provider accepting only newborns.

The ability to make same-day appointments is important for families who have emergencies or sudden illnesses and need to see their pediatrician as soon as possible. One-hundred percent of health care providers surveyed said their patients had the ability to make same-day appointments if needed.

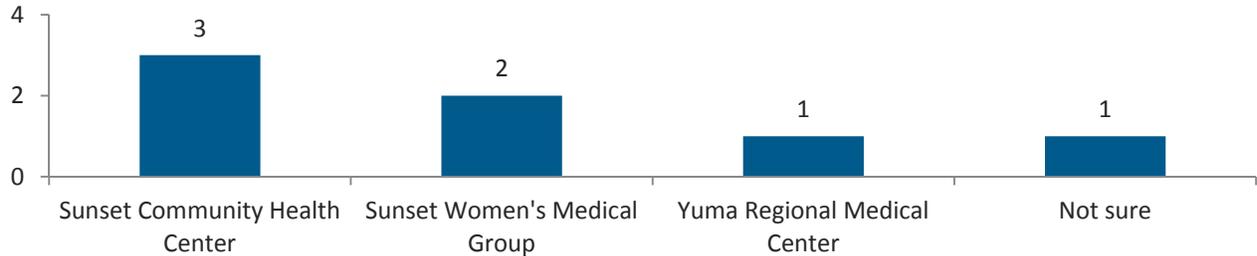
Two of five health care provider offices partnered with *promotoras*, or other local community health outreach workers, to reach the local Yuma patient population. Of those offices that do, 100% discuss ways of increasing community knowledge of local services.



Four out of 5 health care provider offices surveyed provided information and referrals to sources of free or reduced cost care, including Sunset Community Health Center (3), Sunset Women’s Medical Group (2), and Yuma Regional Medical Center (1).



If your office provides information and referrals to sources of free or reduced cost care, please mark all the following referral sites, 2011



N=Multiple response question with 5 providers giving 7 responses.
 Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).
 Note: These responses are not mutually exclusive.
 Note: Caution should be used when interpreting results due to small sample size (N<20).

Information and referrals to sources of free and reduced cost care was most commonly provided verbally (3 of 5 respondents) by office staff or the health care provider.



If your office provides information and referrals to sources of free or reduced cost care, how is this information disseminated? 2011

RESPONSES	NUMBER
Verbally by office staff or provider	3
Handout by office staff or provider	0
Medical assistant or front desk	2
Pamphlet or poster in waiting room	0
Online through provider website	0
Total	5

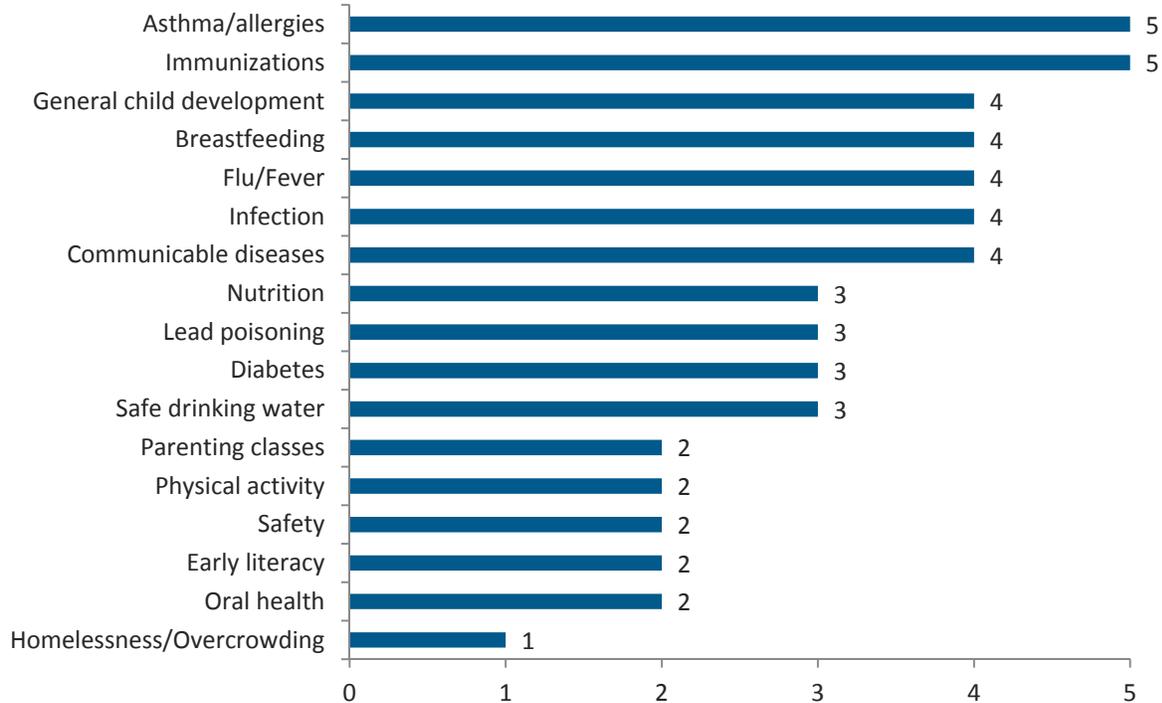
N: Multiple response question with 4 providers giving 5 responses.
 Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).
 Note: These responses are not mutually exclusive.
 Note: Caution should be used when interpreting results due to small sample size (N<20).



All (5 of 5 respondents) health care provider office survey respondents had educational materials on asthma/allergies and immunizations for children. Only two offices provided educational materials on parenting classes, physical activity, safety, early literacy, and oral health.



Please check the following health issues for which your practice provides educational materials during office visits, 2011



N: Multiple response question with 5 providers giving 53 responses.

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: These responses are not mutually exclusive.

Note: Caution should be used when interpreting results due to small sample size (N<20).

All (5 of 5 respondents) the offices surveyed responded that at least some of the educational materials were available in Spanish, with three offices having all educational materials in both languages.



Are these educational materials available in Spanish? 2011

RESPONSES	NUMBER
All materials	3
Some materials	2
No materials	0
Total	5

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

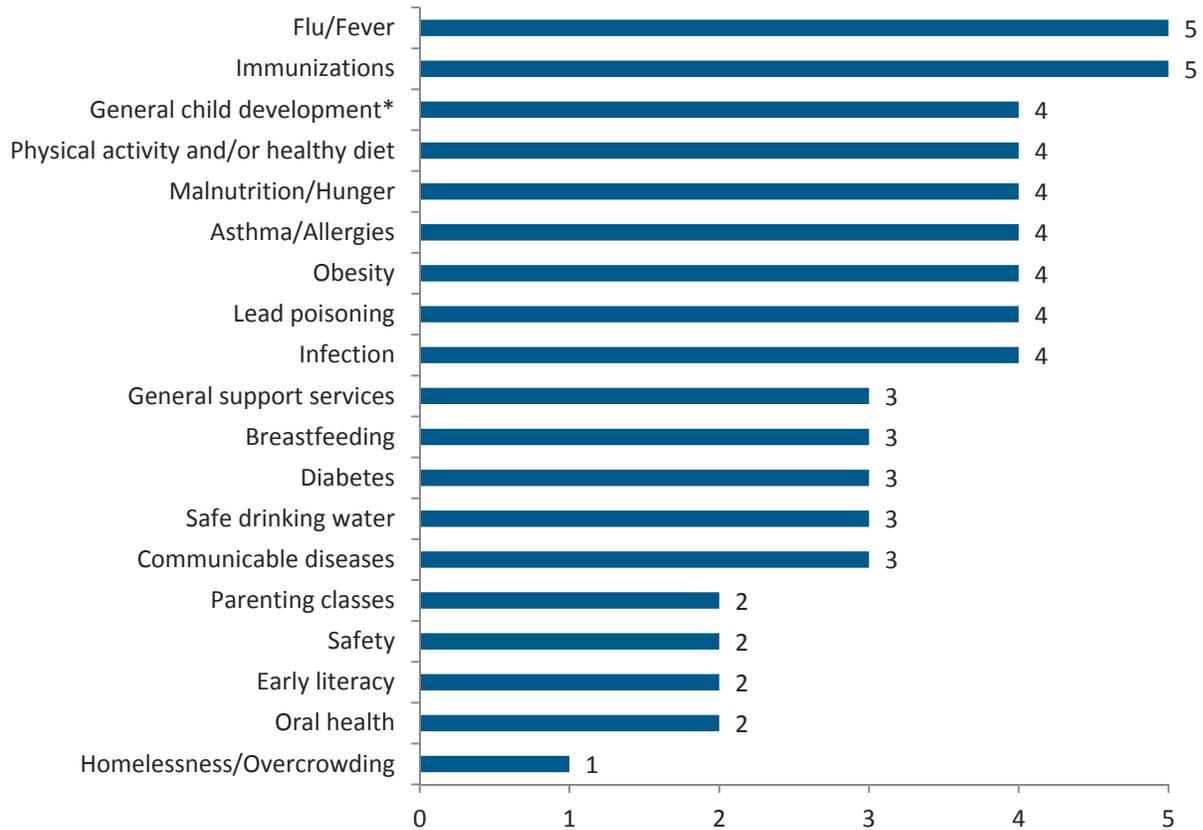
Note: Caution should be used when interpreting results due to small sample size (N<20).



Health care providers reported that their top interventions programs/services were for flu/fever (5), immunizations (5), general child development (4), physical activity and/or healthy diet (4), malnutrition/hunger (4), asthma/allergies (4), obesity (4), lead poisoning (4), and infections (4). Of the health care provider practices surveyed, 3 out of 4 had the previously mentioned intervention program/services available in Spanish.



For which of the following health issues does your practice provide intervention programs/services (mark all that apply): 2011



N: Multiple response question with 5 providers giving 62 responses.

*including delay or disabilities

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: These responses are not mutually exclusive.

Note: Caution should be used when interpreting results due to small sample size (N<20).



Are these intervention program/services available in Spanish? 2011

RESPONSES	NUMBER
All services	3
Some services	1
No services	0
Total	4

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to small sample size (N<20).



More than half (3 out of 5) of the health care provider offices surveyed accepted Medicare or Medicaid (AHCCCS).



Does your health care practice accept Medicare/Medicaid (AHCCCS)? 2011

RESPONSES	NUMBER
Yes	3
No	2
Total	5

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to small sample size (N<20).

Health Insurance

Why Is It Important

A key measure of access to the health care system is whether a child has health insurance. Children who have health insurance learn better in school and miss fewer days of school.⁵⁵ Children who don't have health insurance are four times more likely to have delayed medical care and are more likely to be hospitalized for conditions that could have been treated by a primary care physician.⁵⁶ Uninsured children are less likely to have a regular source of primary care and access both medical and dental care less often. To help parents get insurance for their children, there is a toll-free hotline in Arizona to request an application for KidsCare/AHCCCS.

There has been an increase in enrollment of children in public programs like KidsCare and AHCCCS, but the economic recession has made it harder for many families to obtain this coverage. These programs provide health coverage for approximately 1 in 4 Arizona residents. As many Arizona residents have lost their jobs or health coverage, they have turned to AHCCCS for insurance. However, AHCCCS faces significant budget cuts from the state, including a freeze in KidsCare in 2009 which resulted in over 22,000 children losing KidsCare insurance.⁵⁷

⁵⁵ Mathematica Policy Research, Inc. (2004). Evaluation of the Santa Clara County Children's Health Initiative. *Brief Number 4*. Retrieved June 22, 2010 from <http://www.mathematica-mpr.com/>.

⁵⁶ American Academy of Pediatrics. (2010). MediKids Fact Sheet. Retrieved June 22, 2010 from <http://www.aap.org/>.

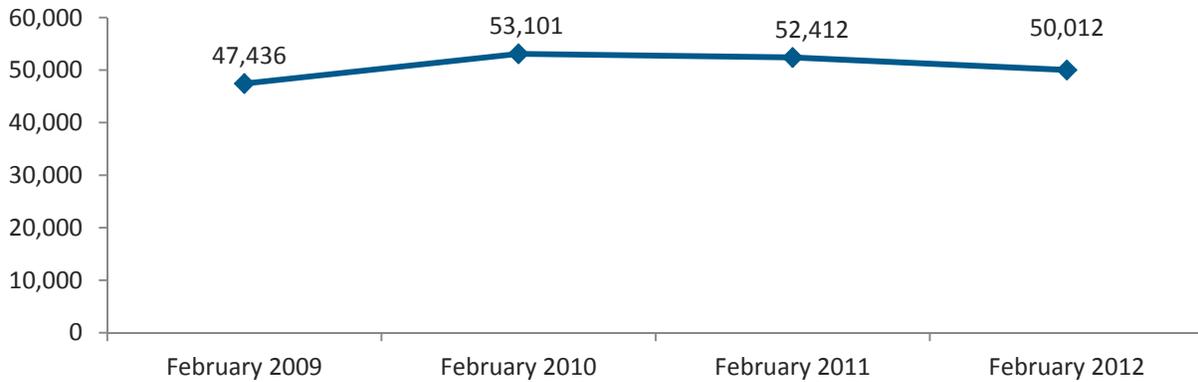
⁵⁷ Arizona Health Futures. (2011). After the Dust Settles. Retrieved 2012 from <http://slhi.org/wp-content/uploads/2011/05/ib-2011-April.pdf>.



What the Data Tell Us

The Arizona Health Care Cost Containment System (AHCCCS) provided health insurance coverage to 50,012 people in Yuma County in February of 2012.

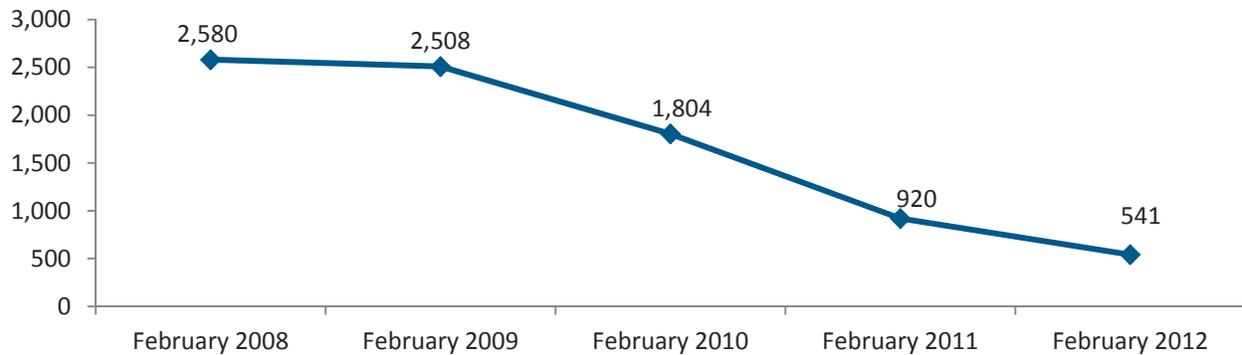
Arizona Health Care Cost Containment System (AHCCCS) Enrollment, Yuma County



Source: Arizona Health Care Cost Containment System. (2011). AHCCCS Population by County. Retrieved 2012 from <http://www.azahcccs.gov/reporting/enrollment/population.aspx>.

An estimated 541 children were insured through KidsCare in February 2012 in Yuma County. This was a dramatic decrease in enrollment since February 2008 (2,580). This decline was caused by reduced funding and changes to state legislation.

KidsCare Enrollment, Yuma County



Source: Arizona Health Care Cost Containment System. (2011). KidsCare Enrollment. Retrieved 2011 from <http://www.azahcccs.gov/reporting/enrollment/population.aspx>.

Of the health care provider offices surveyed, 4 out of 5 accepted KidsCare.



Does your health care practice accept KidsCare? 2011

RESPONSES	NUMBER
Yes	4
No	1
Total	5

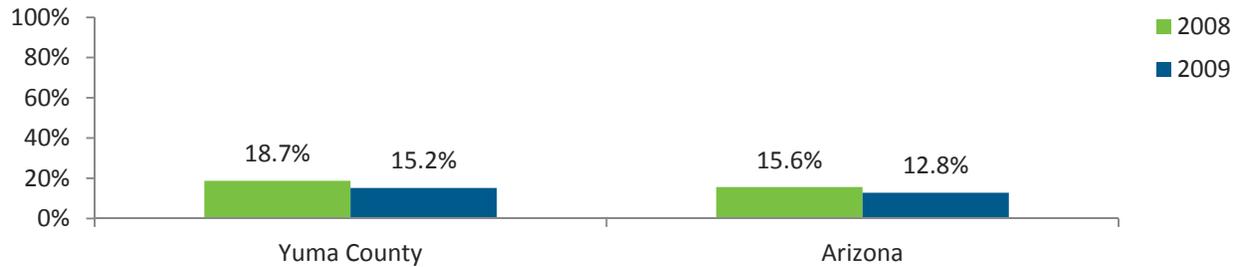
Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to small sample size (N<20).



There were 15% of children under 19 without health insurance coverage in Yuma County in 2009, compared to 13% in the state.

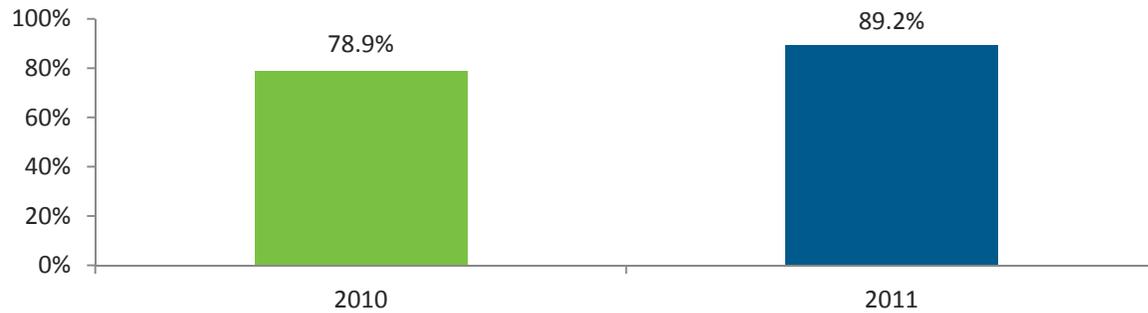
Children Under 19 Years Without Health Insurance Coverage



Source: U. S. Census Bureau. (2010). Small Area Health Insurance Estimates (SAHIE). Retrieved 2011 from <http://www.factfinder2.census.gov/>. Note: Data presented are the most recent available.

Nearly 9 out of 10 (89%) parents surveyed indicated that their child had health insurance in 2011, a 10% increase since 2010.

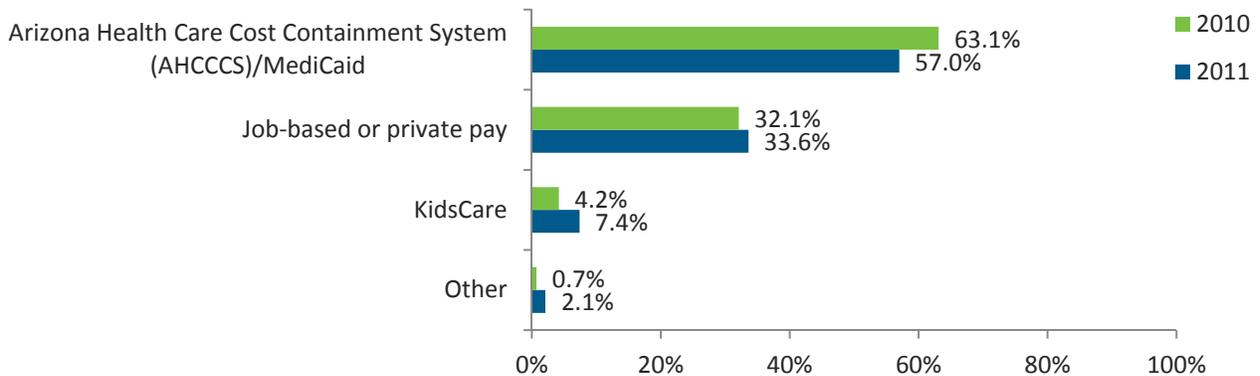
Parents Who Indicated that Their Child Has Health Insurance (Respondents answering "yes")



N: 2010=578, 2011=655. Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

More parent respondents had job-based or private pay insurance (34%) and KidsCare (7%) in 2011 compared to 2010.

Type of Child's Health Insurance Reported by Parents



N: 2010=455, 2011=584. Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



Health Providers

Why It Is Important

Communities across the nation are facing shortages of healthcare professionals. As the population ages and continues to increase in number, concern over provider shortfalls are increasing. The Arizona Healthcare Workforce is working to track and find ways of addressing these shortfalls across the state. Yuma County is classified by the Arizona Department of Health Services as a Health Professional Shortage Area and Medically Underserved Area. These designations identify the region as having a need for medical services based on demographic data, including provider to population ratio, the number of people living in poverty, uninsured births, low birth weight, access to prenatal care, infant mortality rate, and unemployment.⁵⁸

Snapshot of Community Assets

- ***The Regional Center for Border Health, Inc.*** holds an annual National *Promotoras* and Community Health Outreach Workforce Conference. This conference provides *promotoras* and community health outreach workers a forum to network, support, discuss, and enhance knowledge and efforts to promote health within local communities.
- ***The Yuma First Things First Regional Partnership Council*** offers financial incentives to encourage health care professionals to work in underserved communities.
- **Promotoras⁵⁹ of the Western Arizona Health Education Center** reach out to border communities, where many residents do not have access to or do not have knowledge about the services that are available in the area. They offer a range of services from conducting breast cancer awareness sessions to door-to-door sign-ups for children who are eligible to apply for KidsCare low-cost health insurance plan.

⁵⁸ Arizona Department of Health Services. Bureau of Health Systems Development and Oral Health. (2010). Arizona Medically Underserved Areas. Retrieved 2012 from <http://www.azdhs.gov/hsd/azmuadesignation.htm>.

⁵⁹ *Promotoras* are health outreach workers that are members of local communities, acting as liaisons between the community and health, human, and social service organizations. They help to bring positive change to the community through culturally competent and familiar methods, an important means of access to underserved populations.



What the Data Tell Us

The ratio of the population to primary care providers in Yuma County was 753 people for every one primary care provider in 2010, a decrease from 933 people for every one primary care provider in 2009; while remaining higher than the state ratio of 501 people for every one primary care provider.

Population to Provider Ratio, Yuma County

TYPE OF PROVIDER	2008	2009	2010
Yuma County	699:1	933:1	753:1
Arizona	478:1	639:1	501:1

Source: Arizona Department of Health. (2010). Arizona Primary Care Area Statistical Profiles. Retrieved 2012 from <http://www.azdhs.org/hsd/profiles/profiles1.htm>.

There was a 94% increase in primary care physicians, 66% decrease in physician assistants, and a slight increase in registered nurses in Yuma County between 2008 and 2010. There were several different types of primary care providers throughout the First Things First Yuma Region, including Registered Nurses (1,057), Emergency Medical transport personnel (504) Primary Care Physicians (260), Dentists (42), Nurse Practitioners (54), and Physician Assistants (51) in 2010.

Type of Health Care Providers, Yuma County

TYPE OF PROVIDER	2008	2009	2010
Primary Care Providers (MDs and DOs)	134	221	260
Physician Assistants	152	44	51
Nurse Practitioners	45	47	54
Registered Nurses	1,040	1,134	1,059
Dentists	57	54	42
Licensed and Certified Nurse Midwives	8	8	7
Emergency Medical Transport Personnel	486	546	505

Source: Arizona Department of Health Services. (2012). Statistical Profile. Retrieved 2012 from <http://www.azdhs.gov/hsd/profiles/datadocu.pdf>.

Primary Care Providers by Type, 2010

TYPE OF PROVIDER	DATELAND	SAN LUIS	SOMERTON	WELLTON	YUMA*
Primary Care Physicians (MDs and DOs)	0	11	11	2	236
Physician Assistants	0	2	2	0	47
Nurse Practitioners	0	1	8	0	45
Registered Nurses	10	20	53	10	964
Dentists	0	0	1	0	41
Licensed and Certified Nurse Midwives	0	0	3	0	4
Emergency Medical Transport Personnel	8	23	35	10	428

Source: Arizona Department of Health Services. (2012). Statistical Profile. Retrieved 2012 from <http://www.azdhs.gov/hsd/profiles/datadocu.pdf>.

*Yuma data includes statistical profiles for Yuma-South, Yuma-North, Yuma-West and Yuma-East Primary Care Areas.



San Luis, Somerton, and Yuma all have at least one medical facility in their city boundaries. Yuma has six different types of facilities, while Somerton has only one outpatient treatment center.

Medical Facilities, First Things First Yuma Region, 2011

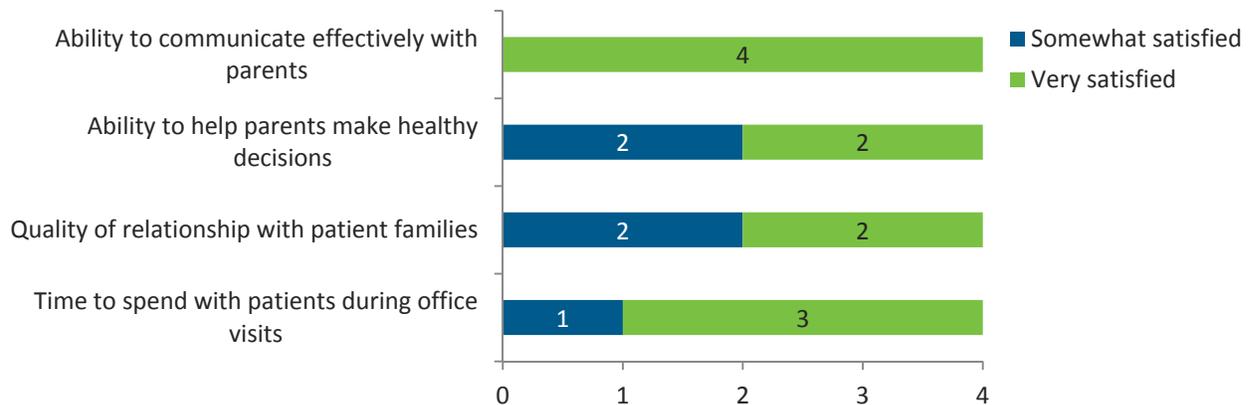
	SAN LUIS	SOMERTON	YUMA
Ambulatory Surgical Center	0	0	3
Outpatient Treatment Center	4	1	17
Home Health Agency	0	0	4
Hospice	0	0	2
Hospitals	0	0	2
Medical Single Group Licensure/OTC	0	0	4

Source: Arizona Department of Health Services. (2011). Provider and Facility Databases. Received 2012 from First Things First.

All (100% N=4) of the First Things First Yuma Region health care provider survey respondents said that they were “very satisfied” with their ability to communicate effectively with parents, and 3 of 4 were “very satisfied” with the length of time that they spent with patients during office visits.



How satisfied are you with the following aspects of your practice? 2011



N=4.

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to small sample size (N<20).



Primary Care and Medical Homes

Why Is It Important

Access to primary care is tied to many financial, physical, and cultural factors, such as employment, health insurance, transportation, language, and education.⁶⁰ Children's access to primary health care is especially important to monitor healthy growth and development and to prevent illnesses from progressing into more serious health problems. However, there are not enough doctors or therapists in the state to serve many communities, especially children with special health care or socio-emotional needs. Yuma County is classified by the Arizona Department of Health Services as a Health Professional Shortage Area and Medically Underserved Area.⁶¹

Snapshot of Community Assets

- ***The Yuma Regional Medical Center Foundation's School-Based Health Care Program*** provides comprehensive community-based health care services for uninsured elementary school students through school-based clinics and a mobile van.
- ***The Yuma Regional Medical Center Foundation*** supports many community programs that promote health and encourage primary care. One particular program is the School Health Care Program which provides comprehensive community-based primary care services to elementary school students through four programs at six school districts in Yuma County.

⁶⁰ U.S. Department of Health and Human Services. (2003). National Healthcare Disparities Report 2003. Retrieved June 22, 2010 from <http://www.ahrq.gov/qual/nhdr03/nhdrsum03.htm#ref6>

⁶¹ The Arizona Department of Health Services defines *Health Professional Shortage Areas and Medically Underserved Areas* as having a need for medical services based on demographic data, including the ratio of providers to the population, the number of people living in poverty, uninsured births, low birth weight babies, access to prenatal care, infant mortality rates, and unemployment rates.

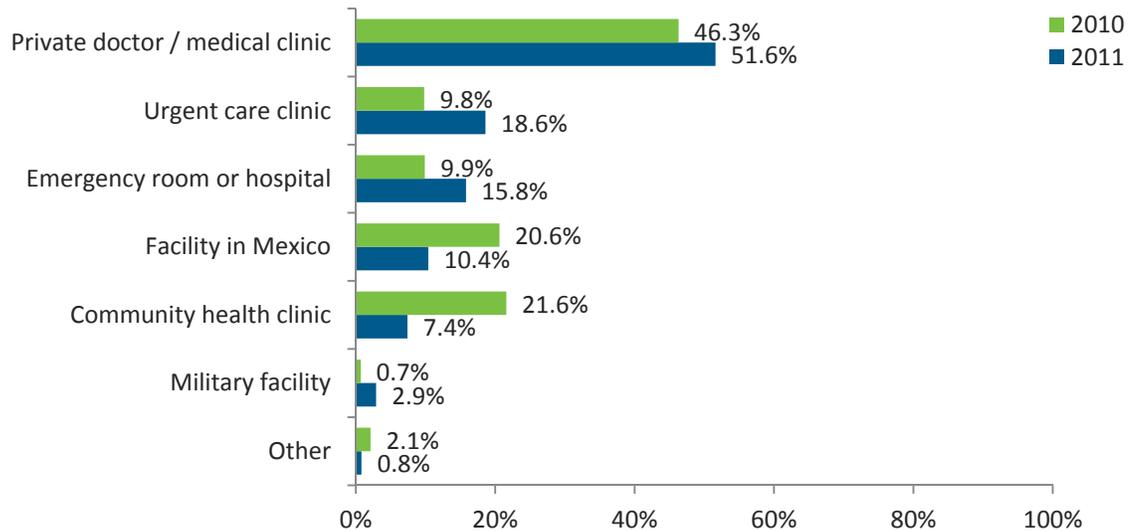


What the Data Tell Us

Over half (52%) of parent survey respondents indicated their usual source of health care was a private doctor or medical clinic, followed by urgent care clinic (19%), and emergency room or hospital (16%) in 2011.



Child's Usual Source of Health Care



2010: Multiple response question with 574 respondents offering 638 responses. 2011: Multiple response question with 651 respondents offering 700 responses.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Note: 2010 and 2011 “Other” responses included VA hospital or clinic, native health facility, alternative care practice.

Note: These responses are not mutually exclusive.

Four of the five health care provider offices had parents fill out typical development surveys at well-baby checkups.



Do you have parents (guardians) fill out a typical development survey at well-baby checkups? 2011

RESPONSES	NUMBER
Yes	4
No	0
Uncertain	1
Total	5

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to small sample size (N<20).



The most that patients would need to schedule a well-baby check or vaccination appointment in advance was one month according to the care provider survey.

School Readiness Indicator
 #/% of children receiving well-child visits



For well-baby checks/vaccinations, how far in advance do patients need to schedule an appointment? 2011

schedule

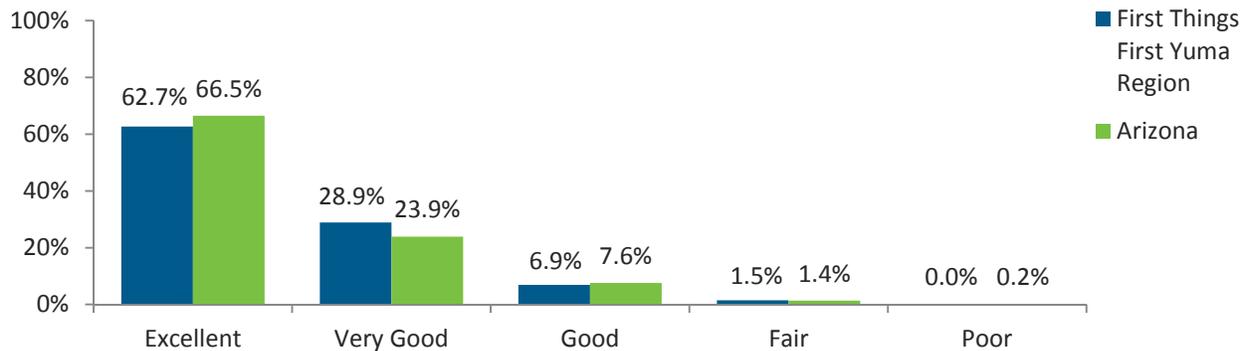
RESPONSES	NUMBER
Less than 2 weeks	2
2 weeks to one month	3
One month	0
More than one month	0
Total	5

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to small sample size (N<20).

Ninety-two percent of Family and Community Survey parent respondents in the First Things First Yuma Region said that their child’s health was “excellent” or “very good” in 2008.

Parent Perceptions of the Statement “Compared with Other Children Age 5 and Under, Would You Say that Your Child’s Health Is...,” 2008



N: First Things First Yuma Region=192; Arizona=5,193.

Source: First Things First. (2008). Family and Community Survey. (Unpublished data). Received 2010 from First Things First.

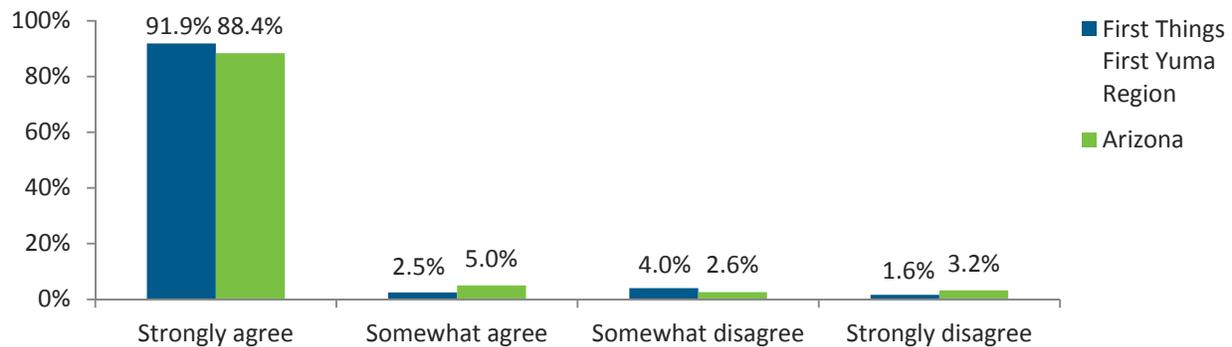
Note: Totals may not add to 100% due to respondents answering “don’t know” or “declining to respond.”

Note: Data presented are the most recent available.



Ninety-two percent of parent respondents said their child five and under had regular visits to the same doctor's office in 2008, greater than the state percentage (88%).

Parent Responses to the Statement "My Child/Children Age Five and Under Have Regular Visits at the Same Doctor's Office," 2008



N: First Things First Yuma Region=192; Arizona=5,193.

Source: First Things First. (2008). Family and Community Survey. (Unpublished data). Received 2010 from First Things First.

Note: Totals may not add to 100% due to respondents answering "don't know" or "declining to respond."

Note: Data presented are the most recent available.

Oral Health Care

Why Is It Important

Many pediatricians highlight dental problems as a major health problem. Arizona has substantial disparities in oral health where low income children, Hispanic children, and children of color have more dental needs.⁶² Dental diseases can be serious and are linked to premature birth, low birth weight infants, failure to thrive, diabetes, cardiovascular diseases, and stroke. Dental care is the most common unmet health need in children, and is the cause of impaired speech development, inability to concentrate in school, poor social relationships, and reduced self-esteem.⁶³ Experts recommend that children as young as one year old be examined for tooth decay.⁶⁴

⁶² Arizona Department of Health Services, Office of Oral Health. (2005). The Oral Health of Arizona's Children. Received November 2005 from the Arizona Department of Health Services, Office of Oral Health.

⁶³ Arizona Department of Health Services, Bureau of Women and Children's Health, Office of Oral Health. (2011). The State of American Indian Children's Oral Health in Arizona. Retrieved May 2011 from Arizona Department of Health Services, Bureau of Women and Children's Health, Office of Oral Health.

⁶⁴ American Association for Pediatric Dentistry. (2004). Policy on the Dental Home. Retrieved June 22, 2010 from http://www.aapd.org/media/Policies_Guidelines/P_DentalHome.pdf



Snapshot of Community Assets

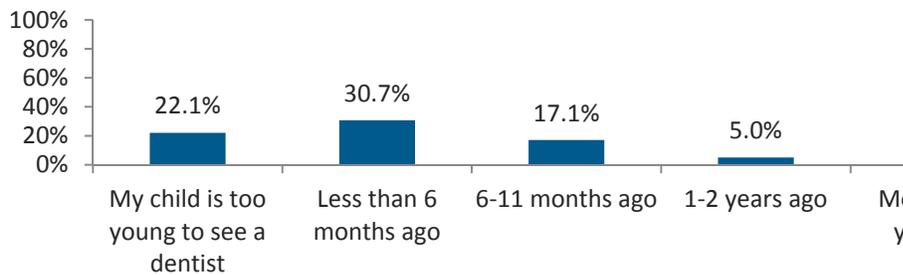
- **The Yuma First Things First Regional Partnership Council** funds oral health education for families, oral health screenings and fluoride varnishes for children, outreach to dentists to encourage first dental visits by age one and education to improve dental providers’ ability to serve young children and children with special needs.
- **The Sunset Community Health Center** includes dental care as one of the service areas in its Dateland, Foothills, Yuma, Somerton and San Luis locations. Sunset’s sliding scale fee program assists families who do not have medical insurance and do not qualify for AHCCCS.

What the Data Tell Us

Twenty-two percent of parent survey respondents said that their child was too young to see a dentist, despite recent changes in the recommendations for a child’s first visit to occur at the time of their first tooth. One-fourth (24%) said their child had never seen a dentist or dental hygienist.



Length of Time Since Child Last Saw a Dentist or Dental Hygienist for Dental Care, 2011



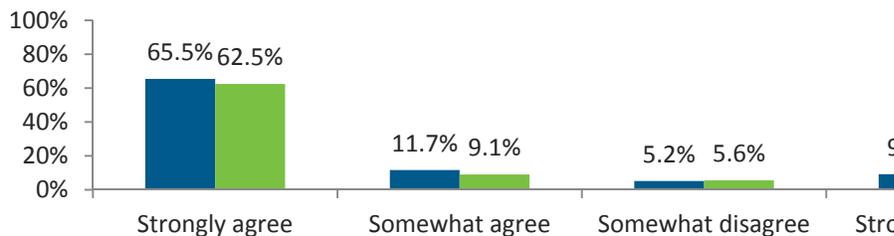
N=656.

Note: 2010 data question is not comparable due to changes in the recommendations of dental care by age. Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Over three-quarters (77%) of parent survey respondents in 2008 agreed” or “agreed” that their child age five and under had the same dental provider, compared to 72% of Arizona parents.

School Readiness Indicator
 #/ % of children age 5 with untreated tooth decay
 strongly visits with

Parent Responses to the Statement “My Child/Children Age Five and Under Have Regular Visits with the Same Dental Provider,” 2008



N: First Things First Yuma Region=192; Arizona=5,193

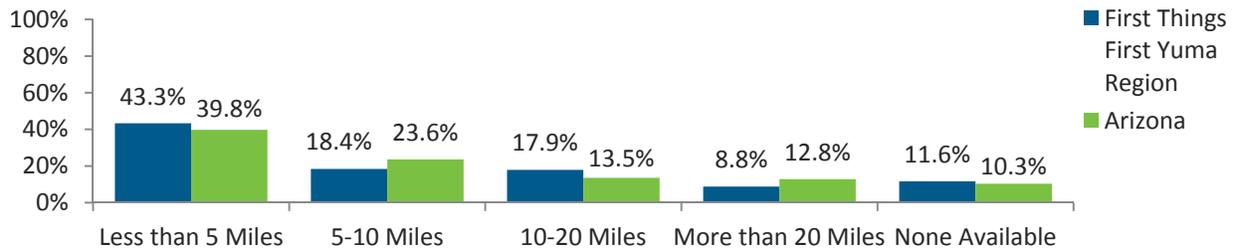
Source: First Things First. (2008). Family and Community Survey. (Unpublished data). Received 2010 from First Things First.

Note: Totals may not add to 100% due to respondents answering “not sure.”



Sixty-two percent of parent respondents in the Yuma First Things First Region traveled 10 miles or less to take their child to the dentist in 2008, similar to 63% of Arizona parents.

Distance Parents Travel to Get Dental Care for Children Ages Birth Through Five, 2008

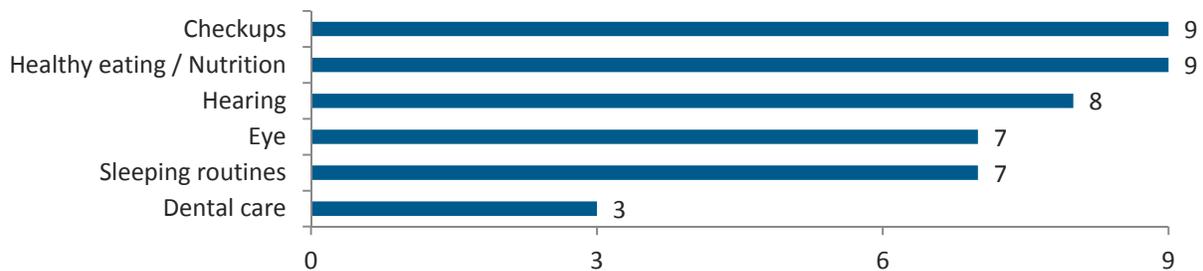


N: First Things First Yuma Region=192; Arizona=5,193.
 Source: First Things First. (2008). Family and Community Survey. (Unpublished data). Received 2010 from First Things First.
 Note: Data presented are the most recent available.

Only three health care provider survey respondents saw a need for preventive dental care services.



For which of the following prevention services do you see a need to provide (mark all that apply): 2011



N: Multiple response question with 9 providers giving 43 responses.
 Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).
 Note: These responses are not mutually exclusive.
 Note: Caution should be used when interpreting results due to small sample size (N<20).

Chronic Disease and Mortality

Injury and Illness

Why Is It Important

Injuries among children can be intentional or unintentional. Intentional injuries, including child abuse, assault, and self-inflicted injuries require intervention by the authorities to protect the child and prevent recurrence. Unintentional injuries or accidents, are more common, and are generally preventable. Parent education on the importance of child-proofing the home, appropriate use of car/booster seats, placing fences around pools and yards, bicycle helmet use, animal safety, and safe storage of firearms can reduce the likelihood of accidents.



Communicable diseases are conditions that can be transmitted directly or indirectly to a person from an infected person or animal. Reporting cases of communicable diseases is essential to preventing further spread and protecting the public health of the community. State and federal agencies have certain diseases that are required by law to be reported. An awareness of prevalent diseases within the area can allow health care providers and families to take necessary precautions in order to protect their health and reduce the spread of illnesses.

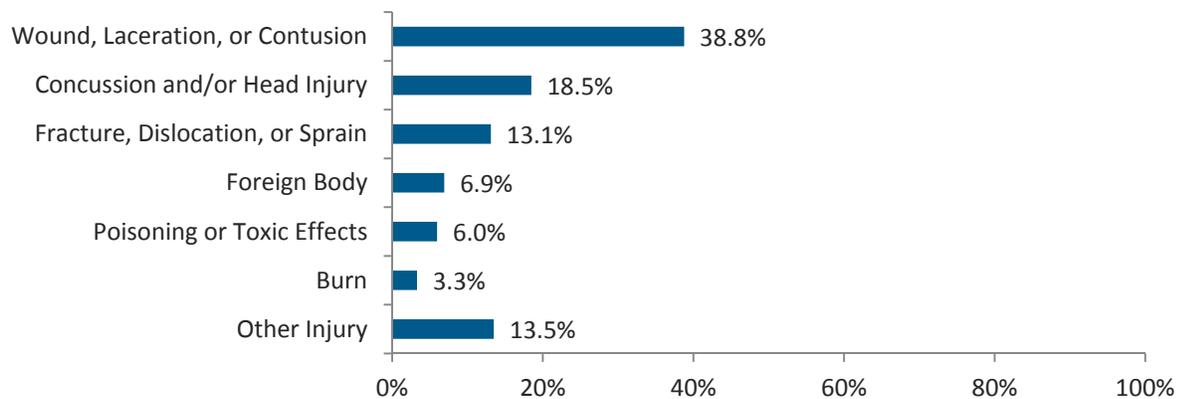
Snapshot of Community Assets

- **The Yuma County SAFE KIDS Coalition** works to reduce the number of unintentional injuries in children. The Coalition offers programs related to motor vehicle safety, bicycle safety, water safety, burn and fire prevention, child abduction, and falls and choking prevention. One notable achievement of the Coalition was the initiation of the City of Yuma's bicycle helmet ordinance which requires all children under age 18 to wear a helmet when riding a bicycle.
- **The Kids in Safety Seats (KISS) Program** holds one hour trainings on the proper use and installation of infant and child safety seats at the Yuma County Public Health District, Yuma Regional Medical Center, and in Wellton.
- **Yuma Regional Medical Center** is the primary hospital for the First Things First Yuma Region. It operates the sole emergency department in the county.

What the Data Tell Us

At Yuma Regional Medical Center, wounds, lacerations, or contusions were the most common injury diagnoses for emergency department visits by children ages birth through five, representing 39% of all injury diagnoses in the 2009 fiscal year. Concussions and other head injuries (19%) were the next most common cause of injury to children in the emergency department.

Cause of Injury-Related Emergency Department Visits for Children Ages Birth through five, Yuma Regional Medical Center, 2009



N=1,764.

Source: Yuma Regional Medical Center. (2010). Inpatient and Outpatient Emergency Department Visits Ages 0 to 5. *Personal Correspondence with Representative*. Received 2011 from Yuma Regional Medical Center.

Note: Data presented are the most recent available.



The leading emergency department diagnosis for Yuma Regional Medical Center patients birth through five was diseases of the respiratory system (29%) (including asthma-related illnesses), followed by injuries and poisoning (19%) in 2009.

Emergency Department Utilization for Children Ages Birth Through Five by Diagnosis Category, Yuma Regional Medical Center, 2009

DIAGNOSIS	2009
Diseases of the Respiratory System (Includes Acute Respiratory Infections)	28.7%
Injuries and Poisoning	19.3%
Diseases of the Digestive System (Includes Dental Conditions)	10.4%
Ear Infections and Other Ear Complaints	9.7%
Unclassified Symptoms (Includes Fever)	9.3%
Infectious or Parasitic Disease	5.4%
Diseases of the Skin	4.6%
Routine or Scheduled Visits	2.8%
Examination with No Diagnosis	1.4%
Congenital Anomalies and Conditions Originating in the Perinatal Period	1.4%
Other	7.0%
Total	9,150

Source: Yuma Regional Medical Center. (2009). Personal Correspondence with Representative. Received 2011 from Yuma Regional Medical Center. Note: Data presented are the most recent available.

Health care provider survey respondents estimated small percentages of their patients birth to five had communicable diseases. Two physicians said 0-5% of patients had communicable diseases (e.g. Hepatitis, tuberculosis, E Coli, and vaccine preventable diseases).

In Yuma County, enteritides such as E. coli, salmonella, and cryptosporidia, were the most common types of notifiable diseases (with 82 cases in 2010). There were also cases of hepatitis (6) and tuberculosis (44) that same year.

Reported Cases of Notifiable Diseases, All Ages, Yuma County

NOTIFIABLE DISEASE	2006	2007	2008	2009	2010
Vaccine Preventable	1	2	1	0	4
Enteritides	70	81	110	102	82
Hepatitides	21	15	11	7	6
Tuberculosis	99	46	57	40	44

Source: Arizona Department of Health Services. (2011). Health Status and Vital Statistics Report. Retrieved 2011 from <http://www.azdhs.gov/plan/report/ahs/index.htm>.

Notes: Vaccine Preventable includes cases of measles, mumps, pertussis, rubella, congenital rubella syndrome, and *H. influenzae*. Enteritides includes cases of amebiasis, campylobacteriosis, cholera, cryptosporidiosis, *E. coli*, Salmonellosis, *Salmonella*, shigellosis, and typhoid fever. Hepatitides include cases of Hepatitis A, B, C, D, and E.

Note: Data presented are the most recent available.



Asthma

Why Is It Important

In the United States, nearly 9 million children have asthma. Children have smaller airways than adults, which makes asthma especially serious for them. Many things can cause asthma, including allergens (mold, pollen, animals, and irritants such as, cigarette smoke and air pollution), weather (cold air, changes in weather), exercise, and infections, including the flu and the common cold.⁶⁵ Asthma is treated with two kinds of medicines: quick-relief medicines to stop asthma symptoms and long-term control medicines to prevent symptoms.⁶⁶ Even severe asthma symptoms can be minimized with appropriate medical care. Well-controlled asthma allows for less symptoms and decreases interference with normal activities, including sleep, work, and school.⁶⁷

Snapshot of Community Assets

- *The Regional Center for Border Health, Inc.* sponsors *Camp Not-A-Choo*, an overnight camp for children ages 8 to 11 who suffer from asthma. The camp teaches children how to use self-management techniques to control their asthma.
- *The Gotitas de Aire* program helps people with asthma understand how they can better control their condition and it works with schools to positively affect children's health.

⁶⁵ U.S. National Library of Medicine and the National Institutes of Health. (2010). Asthma. *Mediline Plus*. Retrieved June 23 2010 from <http://www.nlm.nih.gov/medlineplus/asthmainchildren.html>.

⁶⁶ Ibid.

⁶⁷ The Mayo Clinic. (2010). Asthma. Retrieved June 23, 2010 from <http://www.mayoclinic.com/health/asthma-treatment/AS00011/NSECTIONGROUP=2>.



What the Data Tell Us

Two times as many parents reported that their child experienced asthma from 2011 (65%) to 2010 (30%) according to the 2011 parent survey noted earlier.

Health care provider survey respondents indicated a range in their estimate of patients birth to five with asthma diagnoses, but all were above 20% or 1 in 5.

Nearly 90% (8 of 9) of providers referred patients with diagnoses to an asthma specialist.



Do you refer to an asthma specialist? 2011

RESPONSES	NUMBER
Yes	8
No	1
Uncertain	0
Total	9

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

For those making referrals, two-thirds (8 of 9) of health care providers were “somewhat” or “extremely” satisfied with the availability of asthma specialists.



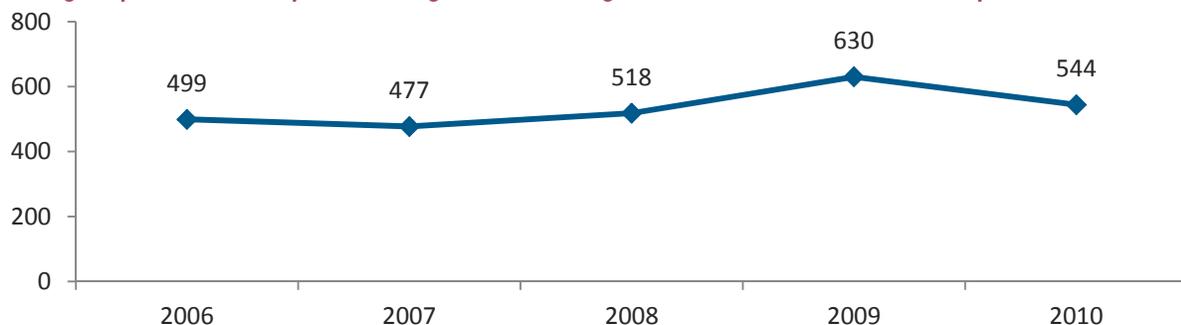
If you refer to an asthma specialist, please rate how satisfied you are with the availability of services? 2011

SATISFACTION					TOTAL
Extremely	Somewhat	Very Little	Not at All	Uncertain	
2	6	0	0	1	9

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Emergency department visits by children birth through five have increased 9% since 2006, with 544 total visits in 2010.

Emergency Room Visits by Children Ages Birth Through Five with Asthma, Yuma County



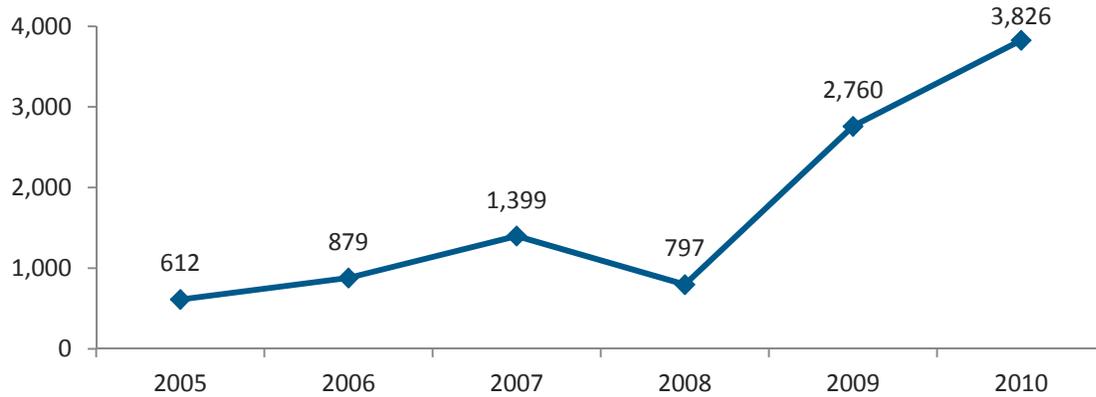
Source: Arizona Department of Health Services. (2012). Health Status and Vital Statistics. Retrieved 2012 from <http://www.azdhs.gov/plan/hip/for/asthma/index.htm>.

Note: Includes all mentioned asthma cases, not just first listed diagnosis.



There was a 525% increase of recognized carcinogens, or cancer-causing pollutants, released into the air in Yuma County from 2005 to 2010.

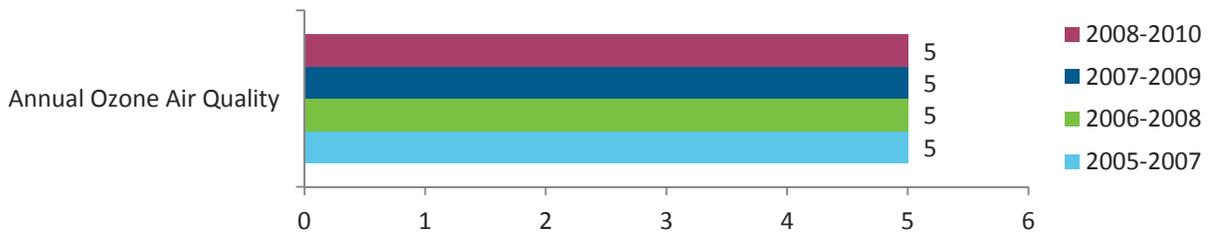
Air Quality Indicators (Measured in pounds), Recognized Carcinogens Released into Air, Yuma County



Source: U.S. Environmental Protection Agency. (2012). Recognized Carcinogens Released into Air. Retrieved 2012 from <http://www.epa.gov>.

Ozone is the primary ingredient of smog air pollution and very harmful to breathe. Annual ozone quality is assigned a grade based on the average annual number of days that ozone levels exceeded U.S. standards during the three year measurement period. The annual ozone air quality indicators have stayed at the same level (5=F grade) in Yuma County from 2005 to 2010.

Air Quality Indicators (Time Series Data), Yuma County



Source: American Lung Association. (2012). Annual Ozone Air Quality. Retrieved 2012 from <http://www.lungusa.org>.



Overweight and Obesity

Why Is It Important

Children and adolescents with a BMI between the 85th and 94th percentiles are generally considered overweight, and those with a BMI at or above the gender- and age-specific 95th percentile of the population on this growth chart are typically considered obese. Overweight and obese conditions in children can lead to severe physical and emotional health effects, including a greater risk of hospitalization, type II diabetes, cardiovascular disease, low self-esteem, and depression. Furthermore, overweight adolescents have a 70% chance of becoming overweight adults, and this increases to 80% if one or both parents are overweight.⁶⁸

According to the 2007 to 2008 National Health and Nutrition Examination Survey (NHANES), 10% of infants and toddlers in the U.S. were obese, 49% of children and adolescents aged 2 through 19 years were considered overweight or obese, and 60% of adults were obese or overweight.^{69 70 71}

Snapshot of Community Assets

- ***The Y.O.U.T.H. Initiative of the Yuma Regional Medical Center Foundation*** funds local groups and organizations working to reduce obesity among Yuma-area youth.
- ***The Arizona Nutrition Network program (AzNN)***, in partnership with the Yuma County Public Health Services District, offers school-based nutrition education and community education programs to low-income families.
- ***The City of Yuma Parks and Recreation Department*** includes nine recreation sites with activities including basketball, soccer, and baseball.
- ***The City of San Luis:***
 - Has a Recreation Department that offers a variety of physical activities including softball, soccer, and baseball tournaments.
 - Has a Youth Center for young people ages 8-21. Youth Center activities include boxing, physical fitness, dance, and an open gym.

⁶⁸ Goran, M. (2001). Metabolic precursors and effects of obesity in children: A decade of progress, 1990–1999. *American Journal of Clinical Nutrition*, 73(2), 158-171.

⁶⁹ Ogden, C.L., Carroll, M., Curtin, L., Lamb, M., & Flegal, K. (2010). Prevalence of high body mass index in US children and adolescents 2007-2008. *Journal of American Medical Association*, 303(3), 242-249.

⁷⁰ Centers for Disease Control and Prevention. National Center for Health Statistics. (2010, March). Health behaviors of adults: United States, 2005–2007. *Vital and Health Statistics*, 10(245), 1-143. Retrieved from http://www.cdc.gov/nchs/data/series/sr_10/sr10_245.pdf

⁷¹ Ogden, C.L., Carroll, M., Curtin, L., Lamb, M., & Flegal, K. (2010). Prevalence of high body mass index in US children and adolescents 2007-2008. *Journal of American Medical Association*, 303(3), 242-249.



- **The Somerton Parks and Recreation Department** offers activity classes, including Zumba, karate, Latin hip hop, boxing, and swimming. Its facilities include four parks, a pool, a ball field, and several centers.
- **Familias Sanas**, run by Campesinos Sin Fronteras, is located in the southern region of Yuma County. This program works to reduce chronic disease, including cardiovascular disease, diabetes, and childhood obesity among the Hispanic farmworker population and their families. Methods to reduce childhood obesity include involving children in healthy lifestyle education programs held at schools, community centers, boys and girls clubs, libraries, and churches.

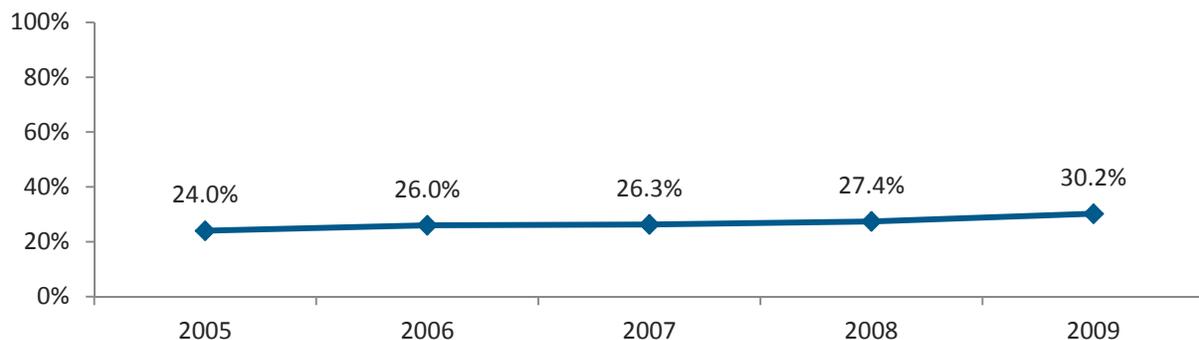
What the Data Tell Us

Yuma health care provider survey respondents estimated that between 10% to 30% of their patients ages birth to five had BMI's indicating they were obese or overweight. In addition, 100% (9 of 9) of health care provider survey respondents said they saw a need for providing healthy eating/nutrition services.

Currently, there is no recent data available on the number of children who are obese in Yuma County. Data on adults have been presented as a proxy measure as research shows that children of parents who are obese are more likely to become obese or overweight themselves.

Nearly one third (30%) of adults were obese in Yuma County in 2009; this does not include those who were overweight.

Age-Adjusted Estimates of the Percentage of Adults who are Obese, Yuma County



Source: Centers for Disease Control and Prevention. (2010). National Diabetes Surveillance System. Retrieved 2011 from <http://www.cdc.gov/chronicdisease/unavailable.htm>.

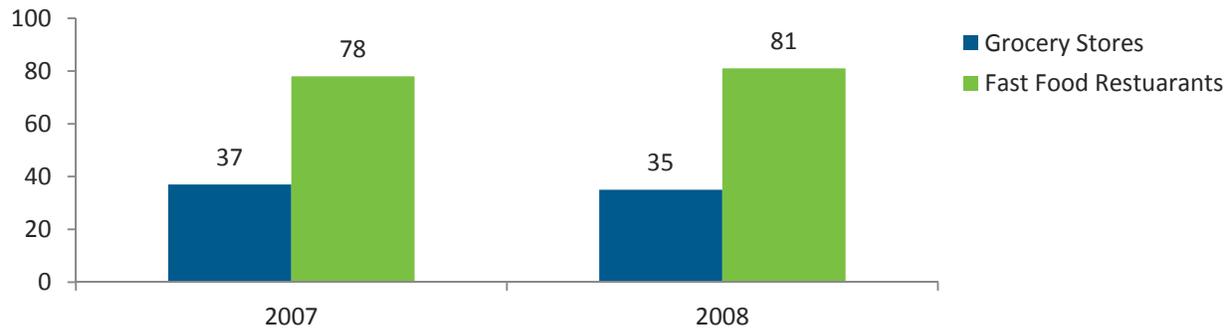
Note: Includes adults ages 20 and older.

Note: Data presented are the most recent available.



There was an increase of three fast food restaurants in Yuma County from 2007 to 2008, while the number of grocery stores decreased by two during the same time period.

Availability of Grocery Stores and Fast Food Restaurants, Yuma County



Source: Food Environment Atlas. (Various Years). Health Indicators. Retrieved 2012 from <http://maps.ers.usda.gov/Food Atlas/foodenv5.aspx>
 Note: Most recent data available.

Diabetes

Why Is It Important

While type II diabetes is primarily associated with overweight adults over age 40, inactivity, and increased obesity rates have led to greater incidence in children. Children with type II diabetes are at greater risk for the long-term complications of diabetes, including hypertension and cardiovascular disease. Early diagnosis and treatment of type II diabetes can prevent or delay the onset of diabetes complications. The cornerstones of diabetes management for children with type II diabetes are weight management and increased physical activity.⁷²

Snapshot of Community Assets

- **The Yuma Regional Medical Center Foundation** provides funding for emergency supplies, blood sugar monitors, and nutritional education materials for people with diabetes.
- **The Yuma Regional Medical Center's Diabetes Education Center** offers Diabetes 101 classes to the community. Topics include medications used to control diabetes, meal planning, and healthy behaviors to avoid complications, and the fee is a donation of a non-perishable food or a school supply.
 - Available services include individual appointments, group classes in English and Spanish, diabetes self-management skills, insulin administration training, community screening education, and a diabetes support group.

⁷² National Diabetes Education Program. (2008). Overview of diabetes in children and adolescents. Retrieved 2012 from www.yourdiabetesinfo.org



- *The Pediatric Diabetes Education Program* is for children and parents. It provides age-appropriate self-management techniques and works with the child's physician to track disease status and progress.
- *The Regional Center for Border Health, Inc.:*
 - Offers the Paso a Paso Program to help prevent diabetes and cardiovascular disease among women in Yuma County. The program offers nutrition classes and neighborhood walking clubs at community centers, churches, schools, and other locations.
 - Holds a *Diabetes Support Group* that allows people with diabetes to learn together and speak with each other about their feelings, struggles, and accomplishments.
- *The Campesinos Diabetes Management Program (CDMP)* is a Promotora-based diabetes management model that assists Hispanic community members through ongoing weekly support groups. The program primarily serves elderly former farm workers. Topics include medications, physical activity, nutrition, depression, education, family issues, stress, self-esteem, and spirituality.

What the Data Tell Us

Health care provider respondents varied in their estimates of patients birth to five with diabetes diagnoses, most likely due to differences in the type of practice and patient demographics served (private versus community health clinic).

Most (3 out of 4) health care provider respondents did not screen patients birth through five for diabetes. However, 100% of providers would refer a patient to a specialist upon diagnosis.

Most (7 out of 8) health care provider respondents were "somewhat" or "extremely" satisfied with the availability of diabetes specialist services in their area.



If you refer to a diabetes specialist, please rate how satisfied you are with the availability of services?
2011

SATISFACTION					TOTAL
Extremely	Somewhat	Very Little	Not at All	Uncertain	
2	5	0	0	1	8

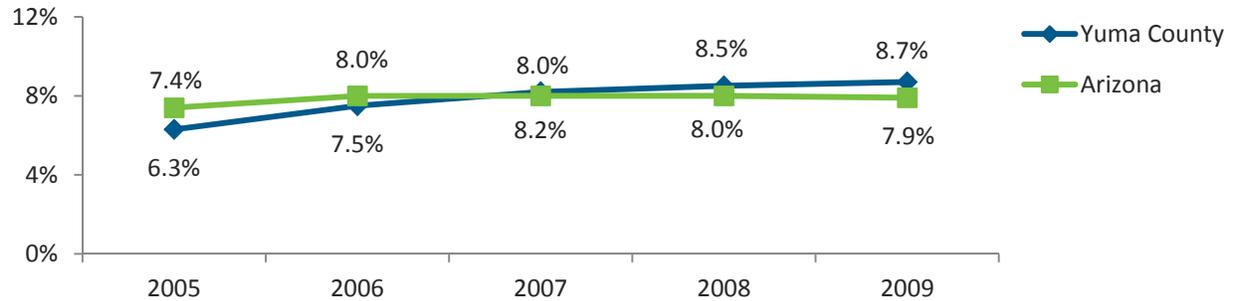
Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to small sample size (N<20).



Currently, there are no data available showing the percentage of children with diabetes in Yuma County. However, the percentage of adults ages 20 and older with diagnosed diabetes in 2009 was 9% in Yuma County, similar to the rate of Arizona. Diabetes diagnoses have steadily increased in both the county and the state since 2005.

Age-Adjusted Estimates of the Percentage of Adults with Diagnosed Diabetes



Source: Centers for Disease Control and Prevention. (2012). National Diabetes Surveillance System. Retrieved 2012 from <http://www.cdc.gov/chronicdisease/unavailable.htm>.

Note: Yuma County data includes adults ages 20 and older.

Note: Arizona data includes adults 18 and older.

Note: Data presented are the most recent available.

Leading Causes of Death

Why Is It Important

The infant mortality rate in the United States has decreased dramatically over the last 30 years from 20 deaths per 1,000 babies born to 6.9 deaths in 2003.⁷³ The leading causes of death are birth defects, premature birth, Sudden Infant Death Syndrome (SIDS), and complications with the mother.

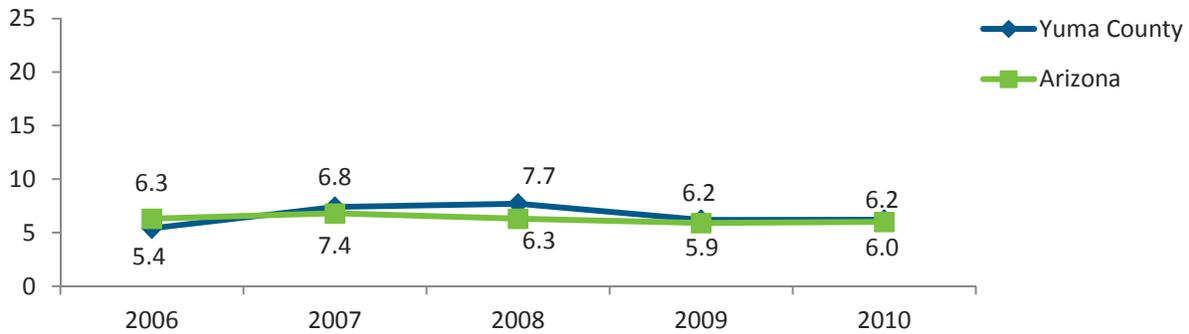
⁷³ United States Department of Health and Human Services. (2006). Preventing Infant Mortality Fact Sheet. Retrieved 2012 from <http://www.hhs.gov/news/factsheet/infant.html>



What the Data Tell Us

The infant mortality rate was 6.2 per 1,000 live births for Yuma County in 2010, a decrease since 2008 (7.7 per 1,000 live births).

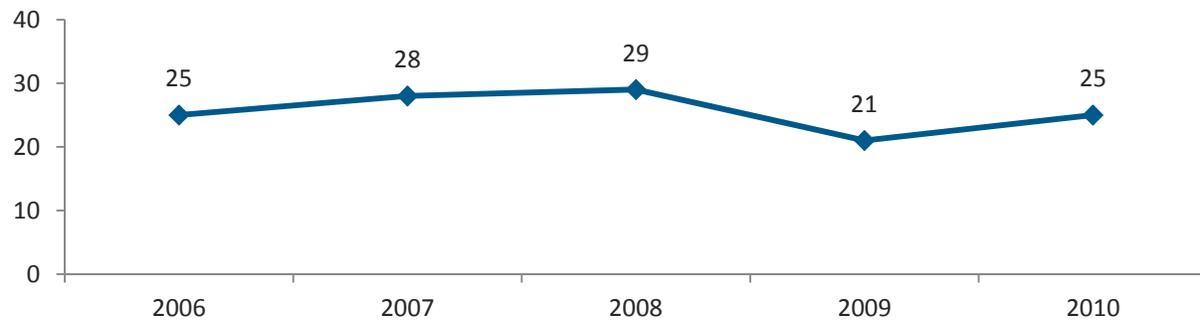
Infant Mortality Rate (per 1,000 Live Births)



Source: Arizona Department of Health Services. (2012). Health Status and Vital Statistics Report. Retrieved 2012 from <http://www.azdhs.gov/>.

The number of deaths for children birth through four in Yuma County varied over the past five years with a high of 29 in 2008 and a low of 21 in 2009.

Number of Deaths for Children Ages Birth Through Four, Yuma County



Source: Arizona Department of Health Services. (2012). Health Status and Vital Statistics Report. Retrieved 2012 from <http://www.azdhs.gov/>.

The leading cause of death for children ages birth through 18 was medical conditions, followed by prematurity in 2010.

Causes of Death for Children Ages Birth Through 18, Yuma County

CAUSE OF DEATH	2007	2008	2009	2010
Prematurity	15	15	6	9
Medical (excluding prematurity and SIDS)	7	14	15	17
Motor Vehicle Crash	5	3	2	0
SIDS – Sudden Infant Death Syndrome	3	1	2	0
Other Injury	3	5	3	4
Undetermined	2	1	0	1
Total Yuma County	35	39	28	31

Source: Arizona Department of Health Services. (2012). Health Status and Vital Statistics Report. Retrieved 2012 from <http://www.azdhs.gov/>.



The leading manner of death for children under 18 was natural causes (81%) in 2010, compared to 66% in Arizona.

Manner of Death for Children Under the Age of 18

MANNER OF DEATH	2007	2008	2009	2010
Accident				
Yuma County	23.0%	18.0%	11.0%	6.0%
Arizona (Excluding Yuma County)	18.0%	15.0%	16.0%	18.0%
Homicide				
Yuma County	0.0%	2.0%	0.0%	3.0%
Arizona (Excluding Yuma County)	6.0%	7.0%	6.0%	4.0%
Suicide				
Yuma County	0.0%	0.0%	7.0%	3.0%
Arizona (Excluding Yuma County)	3.0%	4.0%	3.0%	3.0%
Natural				
Yuma County	71.0%	77.0%	82.0%	81.0%
Arizona (Excluding Yuma County)	68.0%	68.0%	69.0%	66.0%
Undetermined or Unknown				
Yuma County	6.0%	2.0%	0.0%	6%
Arizona (Excluding Yuma County)	5.0%	6.0%	7.0%	9.0%

Source: Arizona Department of Health Services. (2012). Bureau of Women's and Children's Health. Retrieved 2012 from <http://www.azdhs.gov/>.



PUBLIC AWARENESS AND COLLABORATION

Parents are their children's first teachers and all parents can benefit from networking with other parents, sharing ideas with them, and hearing from experts about a range of topics such as child development, nutrition, positive discipline, managing a crying baby and building a child's self-esteem. Family support includes collaboration between families, programs and services with the goal of helping families reach their full potential.

The Birth to Five Helpline (1-877-705-KIDS) is a free resource open to all families with young children and professionals looking for information about their child's development. The helpline is staffed by early childhood development specialists, registered nurses, disability specialists, early literacy specialists and mental health counselors.

SELECTED INDICATORS

- Parent Satisfaction with Early Childhood Services



Parent Access to Information and Services

Why Is It Important

Parent knowledge of the services and supports available in the community is essential to ensure that children and families receive important information and assistance.

Snapshot of Community Assets

- **The First Things First Yuma Regional Partnership Council** has made improved communication with families in the region and with partner organizations a priority. One strategy involves community outreach presentations to spread the message of First Things First (FTF) and describe its impact and programs.
 - **Storybanking** compiles stories by Arizona children and families that provide a human perspective to the services provided by First Things First and places them on an online website.
 - **Palm Cards** with First Things First information and key child development points were developed for distribution at presentations and in the community.
 - **The Born Learning Campaign** works with parents, caregivers, and communities to ensure quality early learning opportunities. This campaign builds parent awareness of the importance of early childhood on a child's future success.

What the Data Tell Us

Parent survey respondents indicated that the leading way they got important information about activities and services available for their child and family was from friends and family (71%), followed by Internet/email (60%), and television (39%) in 2011. Internet/email had almost doubled as a way to get information since 2010.



Where Parents Get Important Information about Activities and Services that Are Available for Their Child and Family

RESPONSE	2010	2011
Friends and family members	68.8%	70.8%
Internet / email	32.2%	59.8%
Television	38.7%	38.7%
Doctors / clinics	16.4%	28.8%
Mail	4.9%	26.5%
Newspaper / magazines	42.2%	23.3%
Community agencies	16.7%	12.2%
Child's teacher	21.6%	5.2%
Parenting classes / groups	4.5%	4.3%
Radio	21.3%	3.8%
Child care worker	7.7%	3.8%
Other	1.7%	0.9%

2010: Multiple response question with 574 respondents offering 1,588 responses. 2011: Multiple response question with 657 respondents offering 1,826 responses.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Note: These responses are not mutually exclusive.



Most (4 out of 5) health care provider practices surveyed did not sponsor or participate in local community events like health fairs to disseminate health information.



Does your practice sponsor or participate in any local community health fairs? 2011

RESPONSES	NUMBER
Yes	1
No	4
Uncertain	0
Total	5

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: Caution should be used when interpreting results due to small sample size (N<20).

Parent Satisfaction with Early Childhood Services

Why Is It Important

It is important to know the perceptions of parents about early childhood services in the region so that First Things First can work with partner agencies to improve services and supports to parents.

Snapshot of Community Assets

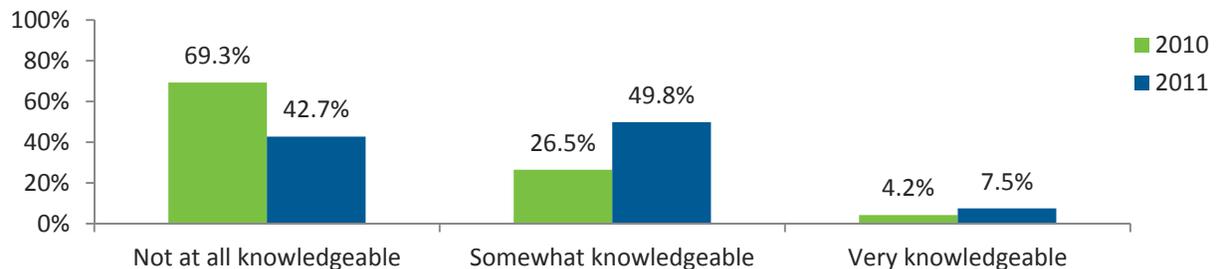
- *The Yuma First Things First Regional Partnership Council* funds media-based public awareness campaigns, community outreach, and other strategies to increase community awareness of the importance of early childhood development and health.

What the Data Tell Us

Over half (57%) of parent respondents in 2011 felt “very” or “somewhat” knowledgeable about what First Things First does in their community, up from 31% in 2010.



Parents’ Level of Knowledge of What First Things First Does in Their Community



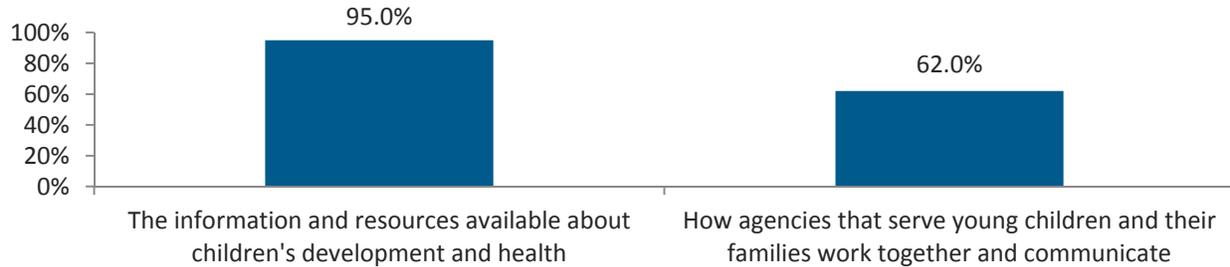
N: 2010=574, 2011=653.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



Ninety-five percent of family and community survey parent respondents were “somewhat” or “very satisfied” with the information and resources available about children’s development and health in 2008. Less than two-thirds (62%) were satisfied with how agencies serving young children and their families worked together and communicated.

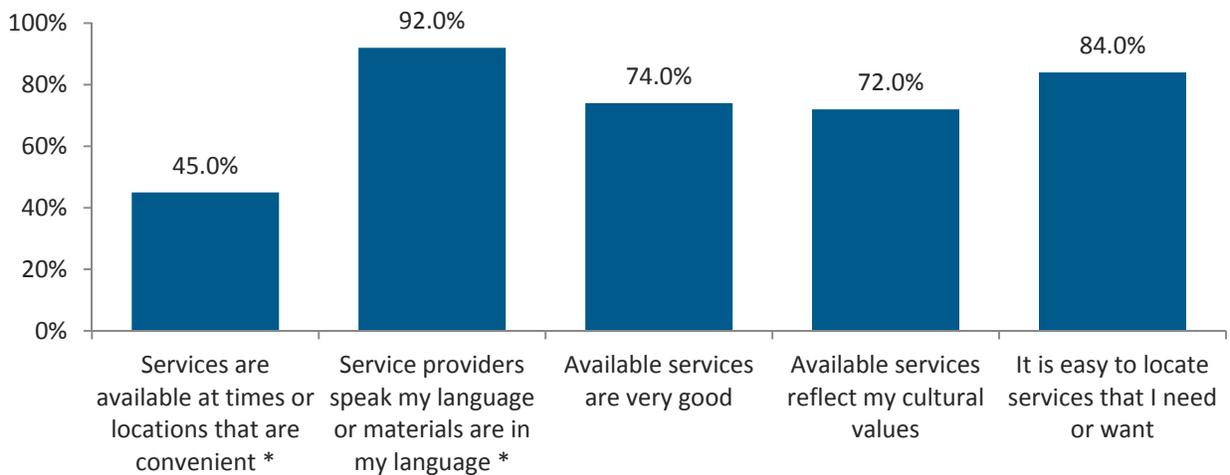
Parents Who Responded “Somewhat” or “Very Satisfied” to the Following Statements, 2008, First Things First Yuma Region



N: 2008: First Things First Yuma Region=192; Arizona=5,193
 Source: First Things First. (2008). Family and Community Survey. (Unpublished data). Received 2010 from First Things First.
 Note: Data presented are the most recent available.

Family and community survey respondents in the First Things First Yuma Region said that service providers spoke their language or materials were in their languages (92%) and it was easy to locate services they needed or wanted (84%) in 2008. However, only 45% said that services were available at times or locations that were convenient.

Early Childhood Services: Parents that “Somewhat” or “Strongly Agree” with the Following Statements, 2008, First Things First Yuma Region



N: 2008: First Things First Yuma Region=192; Arizona=5,193
 * These questions were asked of respondents in the reverse: “Service providers do not speak my language or materials are not in my language,” and “Services are not available at times or locations that are convenient.” The questions were reversed in this report for consistency.
 Source: First Things First. (2008). Family and Community Survey. (Unpublished data). Received 2010 from First Things First.
 Note: Data presented are the most recent available.



CONCLUSION



Conclusion

The families and children living within the First Things First Yuma Region

The First Things First Yuma Region is situated in southwestern Arizona, extending to the California border in the west, La Paz County in the north, Maricopa and Pima Counties in the east, and the border with Mexico in the south. The Colorado River runs along the western edge of the region. The First Things First Yuma Region contains all of Yuma County excluding the Cocopah Indian Tribe reservations and a portion of the Fort Yuma Reservation. Most of the population and services in the region are located in the city of Yuma. The communities of San Luis and Gadsden are along the border with Mexico.

The estimated total population of the First Things First Yuma Region was 194,934 in 2010. The population of children ages birth through five living in the First Things First Yuma Region rose from 15,362 children in 2000 to 17,983 in 2010, a 17% increase. The population of children ages birth through five in the First Things First Yuma Region was primarily Latino (76%), followed by White (19%) and less than 1% American Indian in 2010.

Community Assets and Areas of Strength

There are many people and organizations in the First Things First Yuma Region dedicated to making a difference in the lives of children ages birth through five and their families, and they appear to be having a positive effect.

Children have access to health care

Children with a regular source of primary health care have better health, receive more preventative care, and have lower rates of hospitalization because they get treated for conditions before they become too serious. The First Things First Yuma Region has strong outcomes in the area of access to health care. Nearly 9 out of 10 (89%) parent survey respondents in the First Things First Yuma Region with children ages birth through five said they were able to receive medical care for their child when needed “all of the time” in 2011. This is 30% more parent survey respondents than in 2010.

Children have health insurance

Children who have health insurance also tend to have better health outcomes than those who lack health insurance coverage. The First Things First Yuma Region is strong in the area of health insurance for children. Nearly nine out of 10 (89%) parent respondents reported that their child had health insurance in 2011, an increase from 79% in 2010.



Parents are using positive parenting practices with their children

Three-quarters of parent survey respondents reported positive parenting practices, like confidence in their ability to help their child grow and develop in 2011. In addition, there was a 10% increase since 2010 of parent survey respondents who calmed themselves down when they were angry before dealing with their child. The First Things First Yuma Regional Partnership Council funds voluntary in-home visitation services that provide parents with information, education and support. Topics and resources include parenting skills, early physical and social development, literacy, health and nutrition, community resources, and brain development.

Community Challenges and Areas for Improvement

Despite the concerted efforts of First Things First, community organizations, and individuals, there are areas affecting the health and well-being of children and families in the First Things First Yuma Region that need additional improvement.

The region is impacted by poverty, unemployment, and food insecurity

Children who grow up in poverty are more likely to lack adequate food, become victims of crime and violence, and are at significant risk for dropping out of school early. In the First Things First Yuma Region, nearly one in three children ages birth through five (31%) was estimated to be living in poverty, according to the 2006-2010 Census estimates. This was higher than in the state (24%) and the nation (22%). The unemployment in Yuma County was over 27% in 2011, three times higher than that of Arizona. According to First Things First Yuma Region parent survey respondents, 15% reported they had gone without basic needs such as child care, food, housing, or medical care in the past 12 months in 2011. The majority of children in the local school districts were eligible to receive free and reduced meals. While there are some resources for families and their children, such as TANF, WIC, and other food assistance programs, families and children still have many needs. Support for household costs aside from food, such as housing subsidization, economic supports for utilities and child care, and additional scholarships for higher education and job training programs to increase earning potential could be beneficial.

Yuma County is classified as a Health Professional Shortage Area

Although most children have access to health care and health insurance, the fact that the county is lacking health professionals is of some concern. The ratio of the population to primary care providers in Yuma County was 753 people for every one primary care provider in 2010, a decrease from 933 people for every one primary care provider in 2009; while remaining higher than the state ratio of 501 people for every one primary care provider. Recognizing the need for more health care professionals, the Yuma First Things First Regional Partnership Council offers financial incentives to encourage health care professionals to work in underserved communities.



Children are not ready to enter kindergarten

Children who have early learning skills as they enter kindergarten do better in school, are more likely to graduate with a high school diploma, are more successful in their careers, and are less likely to be involved in crime and drugs. One way of assessing children's readiness for kindergarten is the DIBELS assessment which measures skills related to letter knowledge. In four school districts (Crane, Gadsden, Somerton, and Yuma), between 8% and 22% of kindergarteners were at grade level when they entered kindergarten for the 2010/11 school year. Conversely, between 78% and 92% of kindergarteners needed intensive or additional interventions to be at grade level at these four school districts. First Things First is working to address issues of school readiness, but additional efforts to improve the educational system, beginning with early childhood education and continuing through higher education, are needed in Yuma County.

Some woman are not receiving adequate prenatal care

Women who receive adequate prenatal care are more likely to have better birth outcomes. Babies born to mothers who receive no prenatal care are three times more likely to be born at a low birth weight (less than 5.5 pounds), and have lower survival rates, than those whose mothers received prenatal care. Nearly 6% of pregnant women in Yuma County did not get any prenatal care, as compared to the state at 2% in 2010. A lower percentage (62%) of pregnant women in Yuma County began prenatal care in their first trimester of pregnancy, than in the state overall (82%) in 2010. Though there are many excellent organizations engaged in community outreach that work with pregnant women, such as The Yuma County Health Start/Comienzo Sano Program, more work needs to be done.

Teen birth rates remain high

Teen mothers tend to give birth prematurely, have babies born at low birth weights, are less likely to complete high school, and have lower earning power in their careers. Children born to teens are 50% more likely to repeat a grade, are less likely to complete high school, and perform lower on standardized tests than children of older mothers. Fifteen percent of all births were to teen mothers in Yuma County in 2010, as compared to 11% in the state overall. The Yuma County Public Health Services District offers a nurse case management program for pregnant teens under 20 years of age. The program identifies pregnant teens and encourages them to begin prenatal care early in the pregnancy. The program also engages in outreach to prevent teen pregnancy. In addition, the Teen Pregnancy Task Force of Planned Parenthood is seeking to reduce the rate of teen pregnancies in Yuma County. While other programs within the region are providing services to help teen parents succeed.



Conclusion

This Needs and Assets report on the health and well-being of children ages birth through five in the First Things First Yuma Region has identified the areas where children are doing well and areas that need additional investment. In general, children and families in the region are thriving. However, communities appear to be struggling to meet some of the economic and educational needs of their children, particularly in regards to poverty, hunger, early literacy, and kindergarten readiness. In light of these challenges, targeted continued collaborations are needed to help improve the situation of children and families. First Things First is committed to working with the communities in the Yuma Region to address these issues and ensure that all children have the opportunity for a bright and healthy future.



APPENDICES



APPENDIX A: METHODOLOGY

PRIMARY DATA

First Things First – Yuma Region: Face-to-Face Parent Survey

In order to better understand the needs of young children ages birth through five in the First Things First Yuma Region and gather important information on how to help provide greater opportunities for them to grow up ready to succeed, ASR conducted a face-to-face survey with parents of young children (birth through five) in the First Things First Yuma Region. In all, 657 unique self-administered surveys were completed over the month of September 2011. For the 2010 parent survey, there were 581 unique self-administered surveys completed over a three-week period, from March 26, 2010 to April 8, 2010.

A convenience sampling approach was used, whereby trained surveyors went to different locations and events in the First Things First Yuma Region and asked parents to complete the survey. Surveyors were instructed to target locations and events where they believed there would be a strong presence of the target population, including (but not limited to) community and school events, local community organizations, and child care providers. Some of these locations and events where surveys were conducted included the Yuma County Fair, library story times, flea markets, parks, schools, and child care centers throughout the First Things First Yuma Region. In addition, surveyors conducted face-to-face surveys on an individual basis, whereby trained surveyors asked eligible individuals they knew to complete the survey, including family, friends, neighbors, and coworkers who had children ages birth through five.

The team of surveyors consisted of community volunteers, service providers, and other community members, all of whom were required to attend a comprehensive training, and were compensated at a rate of \$3.00 per completed survey. In order to attract survey respondents, a children's book was offered (in both English and Spanish) as an incentive gift in appreciation for their time and participation.

It is important to note that the face-to-face survey process was subject to the limitations common to this form of convenience sampling, notably inclusion of only those parents frequenting the various survey locations or being present at the different organizations and events where surveys were distributed. Thus, survey respondents who received the survey by convenience may be less representative of the region than a sample obtained through random sampling, due to differences in the types of parents who frequent these events or are present at organizations where surveys were distributed. For example, parents who participate in these events may obtain more parent education than parents who do not attend events, such that results reflect a more educated group than is valid. However, this would skew results in the direction that would make it harder to measure parenting difficulties, such that those difficulties seen in survey results may actually be *more* prevalent.



Note: Whenever a survey question had fewer than 30 respondents, a note of caution was included with the results. This is because smaller sample sizes are less reliable, such that conclusions drawn from the data may not accurately represent the sample from which they were drawn (Yuma FTF Region). This also means that we were unable to reliably compare 2010 survey questions to 2011 when only small samples were available for comparison. In addition, where 2010 survey questions changed, 2010 data has been removed and the 2011 question is presented in this report.

First Things First – Yuma Region: Health Care Provider Survey

In December of 2011 and January of 2012, a survey was administered to health care providers practicing medicine in the First Things First Yuma Region with patients birth through five.

The surveys were developed to identify the most critical health issues facing the children of the region. Questions investigated health care service needs for children birth through five, access to services; health care information and education; and patient caseload information.

A list of physicians in the area was developed and reviewed with First Things First, with a final total of 29 health care providers to contact. In order to improve the response rate, the survey was split into two sections: one section that could be completed by the physician (5-10 minutes) and one that included remaining questions that could be completed by office staff (10-15 minutes). The survey was a mix of multiple response questions and open-ended questions.

The final sample included a total of nine health care providers and five office staff, representing six different First Things First Yuma Region practices:

PRACTICE	SURVEY CATEGORY	
	Office Staff	Physician
Pediatric Associates of Yuma	1	1
Private Clinics	1	0
Yuma Pediatrics	1	5*
San Luis Clinic	1	0
Sunset Community Health Center	0	3
Yuma Children's Clinic	1	0
Yuma Regional Medical Center	0	0
San Jose Health Clinic	0	0
Total	5	9

*Physicians at this office chose to complete the survey together, but represented 5 pediatricians.

In total: there were 5 office staff surveys completed, 5 physician surveys completed (representing 9 physicians) and 12 physicians/offices who never responded, 1 retired physician, and 5 physicians with incorrect contact information whom we were unable to reach.



All health care provider survey respondents were licensed as physicians practicing in pediatrics (N=9). One-third (3 of 9 physicians) had been in practice less than ten years. Seven of 9 practiced 40 or more hours per week.

Eight health care provider survey respondents worked in private practices, one worked in a neighborhood or community health clinic, and one worked in “other.” Eight of 9 practiced in Yuma City, and one practiced in San Luis.

Note: Some respondents commented on patient caseload survey questions such that respondents could not provide accurate estimates, or could not recall from memory. For these questions, respondents chose not to respond and a smaller sample size is available for results.

Caution should be used when interpreting health care provider survey results due to the nature of the small sample size (N<30). ASR recommends that the results be used for qualitative data purposes only, providing detailed insight on the health care issues of children birth to five from the perspective of local physicians, so that the council can look to areas of interest inspired by the survey for further study in the future.

SECONDARY DATA

Secondary (pre-existing) data were collected from a variety of sources, including but not limited to: the U.S. Census Bureau American Community Survey; the U.S. Census Bureau Census 2000 & 2010; the Arizona Department of Health Services; the Arizona Department of Economic Security; the Arizona Department of Education; Yuma Regional Medical Center; Western Arizona Council of Governments Head Start; and other local, state, and federal agencies. Additional data were provided by First Things First for inclusion in the Needs and Assets Report.

Most data were collected for Yuma County, which is generally representative of the First Things First Yuma Region. Whether county-level data include data for the Cocopah and Quechan Indian Tribes was often unknown. Whenever possible, Cocopah data were removed. While all efforts were made to identify data for the population ages birth through five in the Yuma Region, data were not always available at this level. In these cases, data were collected for other age ranges (such as ages birth through four or under 18 years). Data were also collected for multiple years when available to present trends.

Data in the report underwent extensive proofing to ensure accuracy. The data proofing protocol is a nine-step process that thoroughly checks text, numbers, and formatting in narrative, tables, charts, and graphs no fewer than three times.

First Things First Yuma Region Zip Codes

85333, 85336, 85347, 85349, 85350, 85352, 85356, 85364, 85365, 85366, 85367, 85369



First Things First Yuma Region School Districts

Public School Districts: Antelope Union High, Crane Elementary, Gadsden Elementary, Hyder Elementary, Mohawk Valley Elementary, Somerton Elementary, Wellton Elementary, Yuma Elementary, and Yuma Union High School.

First Things First Yuma Region Department of Health Services Communities

Dateland, Gadsden, Roll, San Luis, Somerton, Tacna, Wellton, Yuma.

First Things First Family and Community Survey

First Things First conducted a survey of community members and parents (or related, non-paid caregivers) of children ages birth through five in 2008. The survey assessed respondents' views of coordination among service providers, the quality and accessibility of family support programs, and their understanding of early childhood development and parenting. A randomly-selected, geographically-balanced sample of 5,193 Arizona adults (18 and older) was surveyed. The sample included 3,690 parents/caregivers of children ages birth through five and 1,503 members of the general population who did not have children under six. This randomized sample was drawn to ensure the generalizability of results to the adult Arizona population. Computer Assisted Telephone Interviews (CATIs) were conducted during August and September, 2008. The respondents were selected randomly from sample lists, and random predictive dialing was also used to supplement the purchased lists. This strategy helped to ensure that residents who were not yet listed in a directory (or who chose not to be listed) were still eligible for selection. To include "cell phone only" households, the contractor manually dialed randomly-generated cell phone numbers (based on known cell phone exchanges). Cell phone contacts were given the option of completing their interview using their calling plan minutes or scheduling a call-back (on a land line or such a time when cell phone calling plan minutes were "free"). The average length of a parent interview was 21 minutes; and the average general population interview lasted 7 minutes. Interviewers and respondents remained blind to the survey sponsor. For the First Things First Yuma Region, there were 156 surveys completed from 111 parents and 45 members of the general population.



APPENDIX B: SURVEY DEMOGRAPHICS

FACE-TO-FACE PARENT SURVEY

The following table shows the basic demographics of the *Face-to-Face Parent Survey* respondents for both 2010 and 2011.

Respondent's Age:

RESPONSE	2010	2011
Less than 18 years	1.2%	0.9%
18-24 years	22.3%	30.3%
25-34 years	50.3%	59.6%
35-44 years	20.9%	6.9%
45-54 years	3.9%	1.2%
55 years or more	1.4%	1.1%

2010: N=565, 2011: N=653.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Please identify which area you live in or are closest to:

RESPONSE	2010	2011
Yuma	43.5%	50.5%
San Luis	38.2%	26.9%
Somerton	12.6%	13.1%
Gadsden	4.4%	5.0%
Other areas	1.2%	4.4%

2010: N=563, 2011: N=657.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Are you male or female?

RESPONSE	2010	2011
Female	83.8%	91.9%

2010: N=517, 2011: N=657.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

Which of the following best describes your race or ethnic group?

RESPONSE	2010	2011
Latino or Hispanic	82.3%	74.1%
Caucasian or White	11.5%	8.7%
Other	6.2%	17.2%*

2010: N=572, 2011: N=653.

* Two (2) respondents indicated that they were American Indian, both of whom reported currently being an enrolled member, with N=1 of Cocopah Tribe.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



Which income range best describes your annual household income?

RESPONSE	2010	2011
Less than \$10,000 per year	18.8%	13.0%
\$10,000 to \$14,999 per year	16.0%	20.6%
\$15,000 to \$24,999 per year	24.4%	27.2%
\$25,000 to \$34,999 per year	14.2%	15.7%
\$35,000 to \$49,999 per year	12.5%	10.7%
\$50,000 to \$74,999 per year	8.6%	8.4%
\$75,000 or more per year	5.6%	4.3%

2010: N=570, 2011: N=654.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

What is your employment status?

RESPONSE	2010	2011
Homemaker	17.1%	29.3%
Employed full-time	37.1%	28.0%
Employed part-time	14.7%	25.3%
Unemployed	18.0%	12.2%
Student	3.8%	1.8%
Seasonal worker	6.4%	1.4%
Self-employed	2.1%	1.2%
Retired	0.9%	0.8%

2010: N=579, 2011: N=656.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

What is the highest level of education you have completed?

RESPONSE	2010	2011
Less than 9th grade	11.0%	4.3%
9th grade to 12th grade (no diploma)	19.5%	22.8%
High school diploma (includes GED or equivalent)	24.3%	46.3%
Some college, no degree	24.0%	18.1%
Associate's degree	11.2%	5.2%
Bachelor's degree	6.9%	2.9%
Graduate or professional degree	3.1%	0.5%

2010: N=580, 2011: N=657.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



If you have more than one child under 6 years old, please choose only one child to tell us about as you answer the following questions in this survey:

What is your relationship to your child?

RESPONSE	2010	2011
Parent	92.5%	95.9%
Grandparent (primary caregiver for grandchild)	3.5%	2.6%
Legal guardian	1.4%	0.8%
Other family member (primary caregiver for child)	1.4%	0.2%
Foster parent	0.3%	0.0%
Other	0.9%	0.6%

2010: N=572, 2011: N=657

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

What is your child's age?

RESPONSE	2010	2011
Less than 1 year	12.2%	10.3%
1 year	15.8%	19.3%
2 years	14.7%	20.5%
3 years	18.3%	18.2%
4 years	16.8%	20.5%
5 years	22.2%	11.2%

2010: N=564, 2011: N=653

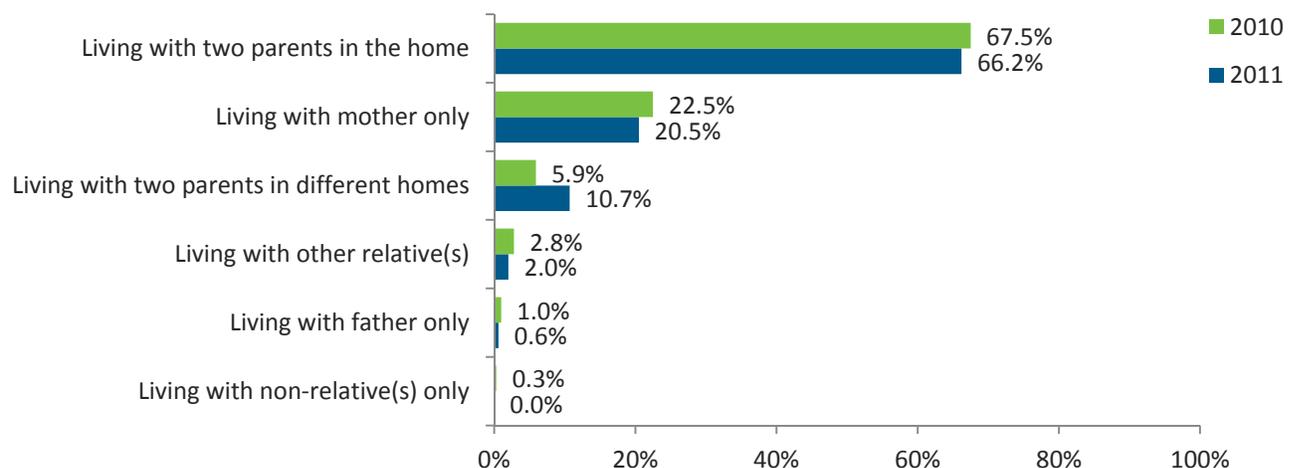
Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

RESPONSE	2010	2011
Birth through 2 years old	55.2%	50.2%
3-5 years old	67.5%	47.9%
Over 5 years old	37.3%	1.8%

2010: N=581, 2011: N=653

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).

What is your child's current living arrangement?



N: 2010=579, 2011=657.

Source: Applied Survey Research. (2011). First Things First – Yuma: Survey for Parents with Children Ages 0-5. (Unpublished data).



HEALTH CARE PROVIDER SURVEY

The following table shows the basic demographics of these survey respondents.

Licensing and Practice

- All providers were licensed as physicians (N=9).
- All providers were practicing in pediatrics (N=9).

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

How many years have you been in practice?

YEARS				TOTAL
1 – 5	5 – 10	10 or more	Not indicated	
2	1	1	5	9

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

How many hours per week do you practice?

HOURS PER WEEK		TOTAL
32	40 or more	
2	7	9

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Please indicate the type of facility in which you currently practice in Yuma County:

RESPONSES	NUMBER
Private practice	8
Neighborhood or community health clinic	1
Other	1
Total	10

N: Multiple response question with 9 providers giving 10 responses.

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Note: These responses are not mutually exclusive.

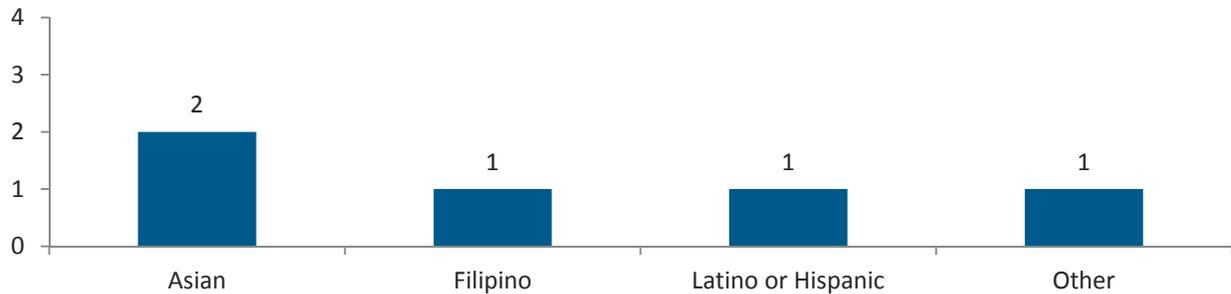
Which town or community do you currently practice in?

RESPONSES	NUMBER
Yuma City	8
San Luis	1
Total	9

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).



Which of the following best describes your race or ethnic group?



N=5

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Patient Demographics (as reported by Health Care Providers)

Please provide your best estimate for your current percent of total patients in the following age groups:

- The majority of providers (N=3/4) indicated a patient case load with more newborns than children ages 3 years or older.

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).

Please estimate for this year, about how many of your patients age birth to five fall into the following category:

CATEGORY	RESPONSE						Total
	None	About ¼	About ½	About ¾	All	Not Sure	
Live in poverty	0	1	1	1	0	1	4
Homeless	2	1	0	0	0	1	4
Live in single parent-headed households	0	1	0	2	0	1	4
Live in monolingual Spanish- speaking households	0	1	2	1	0	0	4

Source: Applied Survey Research. (2012). First Things First – Yuma: Survey for Health Care Providers with Patients Ages Birth through 5. (Unpublished data).



APPENDIX C: DATA DEVELOPMENT AGENDA

Even with publicly accessible data and collaboration with the Yuma Region, some vital information about the children ages birth through five in the region is still missing. More comprehensive, current, and representative data will help to make more informed conclusions about the state of local children and can better guide initiatives within the communities. Future efforts should be made to improve the data available for the following areas of interest:

- **Kindergarten Readiness** – There is no current source of comprehensive kindergarten readiness data in the state of Arizona. Arizona school districts use a variety of methods, including DIBELS and AIMSWeb to assess literacy skills, however; these measures do not assess many of the other skills needed for children to succeed in school such as social emotional skills, using small manipulatives and self-care. First Things First is currently working to build a common, cohesive system for measuring school readiness.
- **Quality First Child Care Centers Capacity** – Data on the capacity of Quality First Child Care spaces and special needs enrollment are not currently available. Through the efforts of First Things First, a comprehensive database of Quality First Child Care centers and homes is being created. It will provide regional data on capacity and accessibility of Quality First Child Care for children.
- **Children with Disabilities** – The data available regarding the number of Head Start children receiving developmental screenings and the number of children referred to and receiving AzEIP and DDD services do not give a comprehensive picture of the children with disabilities in the Yuma Region. More cohesive data regarding the number of children by disability type would help to identify the level of need and which services are needed.
- **Oral Health Care Data**– There is limited oral health data available at the First Things First Yuma Regional level. Service providers have provided information on the services they offer the community and their understating of the issues. However, there is not comprehensive data on the scope and scale of oral health care needs for children in the region.
- **Obesity and Diabetes** – Obesity and diabetes data are available for adults living in Yuma County. There are no current data available regarding the number of children and, in particular, the number of children ages birth through five who are considered to be overweight, obese, or diagnosed with diabetes.
- **Asthma** – The Arizona Department of Health Services collects data on hospital use for children with asthma. There are no specific data regarding the number of children actually diagnosed with asthma.

