56th CUMBERLAND Population Under 18: 16.9%	Child Population by R 1.7% <sup>2%</sup> 0.6% 2.7% 93.8%	ild Population by Hispanic Ethnicity			
	e, Including Hispanic Black, Including Hispanic ve American/Alaskan Asian/Pacific Islander r/Unknown		Published July 2024		
ECONOMIC WELL-BEING 22ND		Rank	Previous Percent/Rate	Previous Rank	
<b>Children living in poverty 20.9%</b>		46th	23.9%	67th	
Severe housing cost burden 7.7%		16th	8.7%	22nd	
Child care cost burden 25.9%		30th	22.8%	20th	
EDUCATION 39TH		Rank	Previous Percent/Rate	Previous Rank	
<b>3rd to 8th grade reading proficiency 37.1%</b>		<b>32nd</b>	36.4%	38th	
<b>3rd to 8th grade math proficiency</b>	<b>42.1</b> %	31st	37.9%	47th	
Youth graduating high school on tir	me 92.9%	54th	91.7%	65th	
HEALTH 83RD		Rank	Previous Percent/Rate	Previous Rank	
Kindergarten full immunization se	ries 95.7%	16th	90.9%	88th	
Children who lack health insurance	5.4%	65th	5.4%	21st	
Babies born at a low birth weight	9.4%	73th	9.3%	69th	
FAMILY & COMMUNITY 65TH		Rank	Previous Percent/Rate	Previous Rank	
Youth Crime Rate Per 1,000 32.8		54th	21.8	42nd	
<b>Children who are chronically absen</b>	t <b>19.5</b> %	63rd	17.3%	46th	
Victims of abuse or neglect per 1,000 17.3 FY2022-23		74th	14.8	59th	

Cumberland County	Number	Rate	Tennessee Rate	County Rank	Year			
Demographics								
Total population (state value is number not rate) Population under 18 years of age (percent of total population)	64,760 10,926	NA 16.9%	7,126,489 22.0%	22 90	2023 2023			
Economic Well-Being								
Median Household Income	\$53,388	NA	\$65,231.00	58	2022			
Youth unemployment	93	9.0%	9.8%	48	2023			
Per capita personal income (state value is dollars not rate)	\$44,540	NA	\$58,292	49	2022			
Median home sales price (state value is dollars not rate)	\$303,061	NA	\$325,000	27	2022			
Children receiving Families First grants (TANF)	179	1.6%	1.5%	46	FY23			
Children receiving Supplemental Nutrition Assistance (SNAP)	2,736	25.0%	22.4%	58	FY23			
Fair market rent (percent of monthly median household income)	\$1,083	24.3%	21.4%	55	FY23			
WIC participation (percent of children under 5)	1079	40.1%	29.0%	68	FY23			
Education								
School age special education services (age 3 to 21)	870	7.8%	8.0%	21	2022-23			
TEIS participation (percent of children age 0 to 4)	174	6.5%	4.4%	86	2022-23			
Economically disadvantaged students	3,170	46.0%	30.2%	91	2022-23			
School suspensions	81	1.2%	4.6%	14	2022-23			
Graduating seniors scoring 21 or better on the ACT at least once	182	39.1%	35.4%	14	2022-23			
Young adult college enrollment (percent of graduating seniors)	NA	45.9%	54.3%	75	2022			
Health								
Neonatal abstinence syndrome (per 1,000 live births)	21	39.25	7.1	38	2022			
Births to mothers who smoked during pregnancy	82	15.8%	9.1%	48	2021			
Children on TennCare (Medicaid)	7,994	65.4%	53.1%	76	Dec-23			
Total TennCare (Medicaid) enrollees	14,334	22.1%	23.0%	20	Dec-23			
Births covered by TennCare (Medicaid)	394	73.6%	54.5%	82	2022			
Children qualified for Medicaid/CHIP but uninsured	389	5.9%	6.1%	51	2021			
Infant mortality (per 1,000 live births)	*	*	6.2	*	2021			
Neonatal death (per 1,000 live births)	*	*	3.2	*	2021			
Child deaths (per 100,000 children age 1 to 14)	*	*	20.7	*	2021			
Teen violent deaths (per 100,000 youth age 15 to 19)	*	*	69.7	*	2021			
Adequate prenatal care	401	77.7%	73.9%	48	2021			
Pediatric physicians (per 100,000 children)	6	54.9	76.1	19	2022-23			
Children who are food insecure	1,830	17.6%	17.9%	62	2022			
Teens with STDs (per 1,000 youth age 15 to 17)	13	7.5	16.1	17	2022			
Confirmed elevated blood lead level (per 1,000 screened)	7	2.6%	4.7%	11	2019-23			
Breastfeeding initiation at birth	396	74.0%	83.3%	74	2022			
Individuals scoring for severe depression (all ages) PHQ-9 (per 100K)	80	35.0	44.8	33	2020-23			
Individuals reporting frequent suicidal ideation (all ages) PHQ-9 (per 100K)	74	32.4	43.6	37	2020-23			
Individuals scoring positive for PTSD (all ages) PTSD Screeen (per 100K)	60	26.3	22.1	75	2020-23			
Individals scoring at risk for psychotic-like experiences PQ-B (per 100K)	57	24.9	27.7	34	2020-23			

# Family & Community

Reported child abuse cases	726	6.6%	4.2%	90	FY23
Commitment to state custody (per 1,000 children)	72	6.0	2.5	81	FY23
Remaining in state custody (per 1,000 children)	120	10.1	5.1	75	FY23
Juvenile court referrals	296	2.8%	1.8%	72	2022
Child restriant use in crashes (age 0 -12)	NA	99.5%	NA	17	2023
Regulated child care spaces (percent of children age 0 to 12)	1,128	15.0%	29.8%	78	FY23

# Cumberland

#### **Overall**

At 56th, Cumberland County is in the bottom half of Tennessee counties in child well-being. The county's strongest area was Economic Well-Being.

#### Strengths

Cumberland's strongest indicator is the percent of households in the county experiencing a severe housing cost burden, where the county ranks 16th. The county also performs well in the percent of public school kindergartenders with the full immunization series at 16th.

### **Opportunities**

The county's biggest challenge is the number of children who were victims of abuse or neglect, where it ranks 74th. There are opportunities for improvement in the percent of babies who were born at a low birthweight as well.

#### Policy/Practice/Program Options to Improve Outcomes

Many of these policies have multiple models for delivery, including public-private partnership, non-profit partners and community engagement.

Two-generation programs such as evidence-based home visiting have been shown to reduce instances of child abuse and neglect. Ensuring quality child care and offering preschool programs with family enrichment continues this support. Helping families access services for addiction and mental health challenges may also reduce stresses that can cause family dysfunction, as will strengthening economic supports through family-friendly work policies. Changing social norms to promote positive parenting through public engagement and education campaigns can help parents find alternatives to physical discipline that can go too far. Taking corporal punishment out of schools may contribute to a changing mindset. When abuse and neglect do occur, intervention to lessen harms and prevent future risk through enhanced primary care, behavioral parent training programs and treatment is important. Programs in schools and communities aimed at creating positive childhood experiences and improving resiliency also help mitigate effects.

Babies are born at a low birthweight either because they are born too early or they did not grow as much as they should. Ensuring women of childbearing age have access to treatment for chronic physical and mental health and substance abuse conditions creates an environment for healthy pregnancies. While the state has not expanded TennCare to close some of these access gaps, improving outreach to ensure those who do qualify are aware of those benefits, as well as others such as SNAP, WIC and TANF, contributes to general good health prior to pregnancy. Once a woman is pregnant, access to regular prenatal care is key. Preexisting risks are properly managed and unexpected complications are found and treated early when pregnant women receive regular care. Community-based doulas have been shown to improve health outcomes for babies, including reducing the number of babies born at a low birthweight.

## **Indicator Definitions and History**

**Children living in poverty** - Percent of children living in a household below the federal poverty line. In 2022, the federal poverty level for a family of 3 was \$23,030. Source: US Census Bureau Small Area Income and Poverty Estimates (2022).

**Severe housing cost burden** - Percent of households (including rented, owned and mortgaged) spending 50% or more of their income on housing. Source: American Community Survey, 5-year estimates (2018-2022). Table B25140.

**Child care cost burden** - Child care cost burden reflects the average estimate market-rate price for care for full-time care of an infant and 2+ year old but less than school age child as a percentage of the county's estimated median household income. The market-rate is calculated by taking an average of the median market-rate fee for licensed providers in the county. When available, this includes Child Care Centers, Group Homes, and Family Homes. In instances where the county does not have all three, the providers existing in the county averaged. In instances where there are no licensed providers providing care to that age group in the county, the statewide average of Tier 2 market-rates are used. This average rate for infant care and 2+ care is then combined to get the total cost of care. Source: Determining Child Care Market Rates in the State of Tennessee (FY2022-23).

**3rd to 8th grade reading proficiency -** Percent of third- to eighth-grade students who scored "on-track" or "mastered" on the Tennessee Comprehensive Assessment Program (TCAP) reading and language test.

Source: Tennessee Department of Education (2023-24).

**3rd to 8th grade math proficiency** - Percent of third- to eighth-grade students who scored "ontrack" or "mastered" on the Tennessee Comprehensive Assessment program (TCAP) math test. Source: Tennessee Department of Education (2023-24).

**Youth graduating high school on time -** Percent of ninth-grade cohort that graduates in four years. Source: Tennessee Department of Education (2022-23).

**Kindergarten Immunization** - Percent of public-school kindergarten students fully immunized for all required vaccine series at the time of survey completion. Required series includes: Diphtheria-Tetanus-Pertussis vaccine (DTaP), Measles, Mumps, Rubella vaccine (MMR), Hepatitis A Virus vaccine (HAV)2 Hepatitis B Virus vaccine (HBV), Poliomyelitis vaccine (IPV or OPV), and Varicella (chickenpox) vaccine/credible history of disease. Source: Tennessee Department of Health Vaccine-Preventable Diseases and Immunization Program. Kindergarten Immunization Compliance Assessment. (2022-23).

**Children who lack health insurance -** Percent of children who lack health insurance. Source: US Census Bureau Small Area Health Insurance Estimates (2021).

**Babies born at a low birth weight -** Percent of live births where baby weighs less than 2,500 grams (5.5 pounds), averaged over three years. Source: Tennessee Department of Health (2020-22).

Youth Crime Rate Per 1,000- Rate of reported crimes alleged to have been committed by someone under 18 to county population of youth 12 to 17. Source: Tennessee Bureau of Investigation, Tennessee Incident Based Reporting System (2022). Accessed May 28, 2024.

**Children who are chronically absent** - Children who are absent 10 percent or more of school days for any reason, including excused/unexcused absences and out-of-school suspensions. Source: Tennessee Department of Education (2022-23).

**Victims of abuse or neglect per 1,000** - Child victims of abuse or neglect. In cases with multiple children each child is counted individually. The total is the number of children associated with substantiated cases of severe abuse and of determinations of "Services Court Ordered" or "Services Needed" in cases of non-severe abuse or neglect. The rate is per 1,000 children. Source: Tennessee Department of Children's Services (FY2022-23).