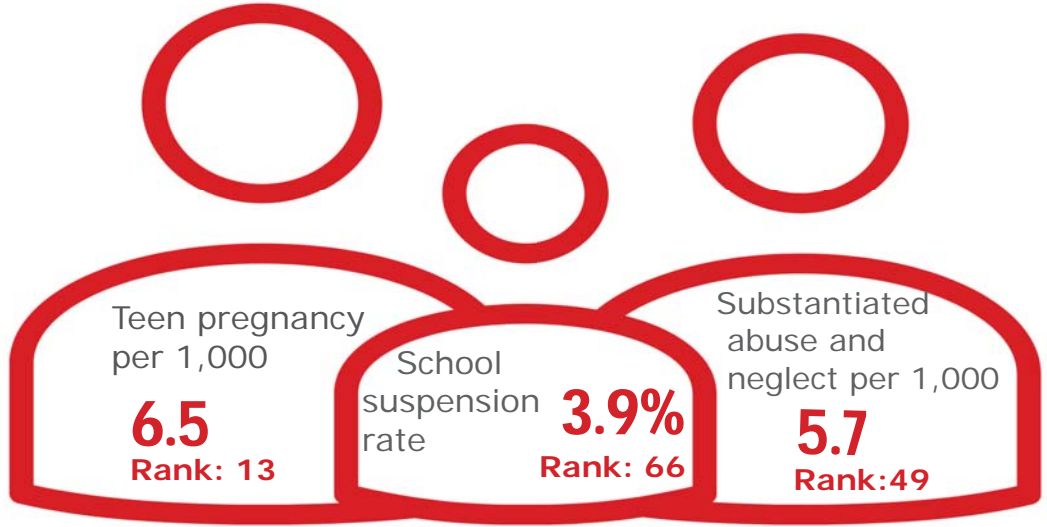


# Family & Community

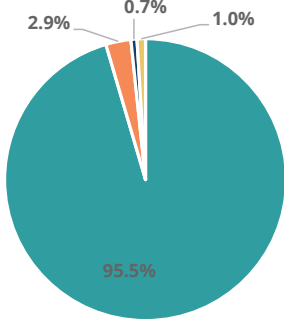
Rank: 38

# Cheatham

Rank: 39



Child Population by Race

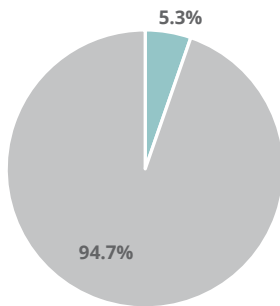


- White, Including Hispanic
- Black, Including Hispanic
- Native American/Alaskan
- Asian/Pacific Islander

# Economic Well-Being

Rank: 22

Child Population by Hispanic Ethnicity

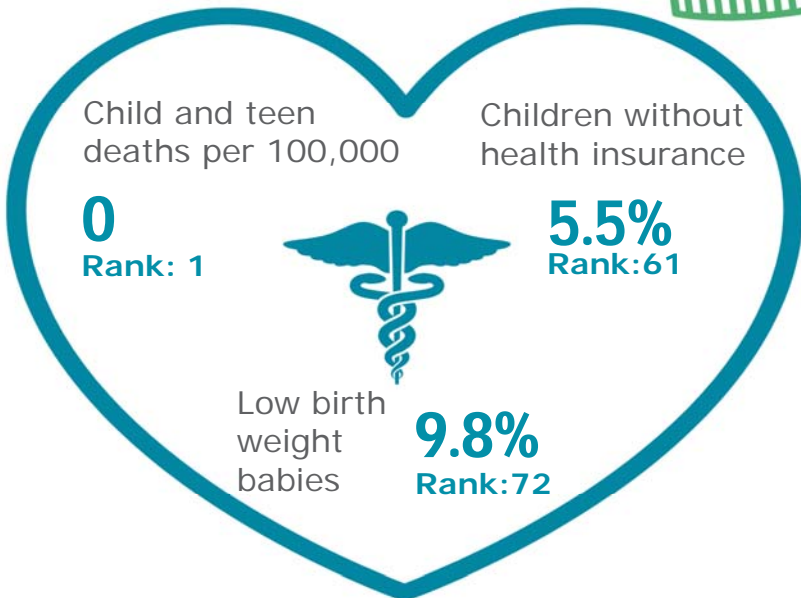


- Hispanic, All Races
- Non-Hispanic



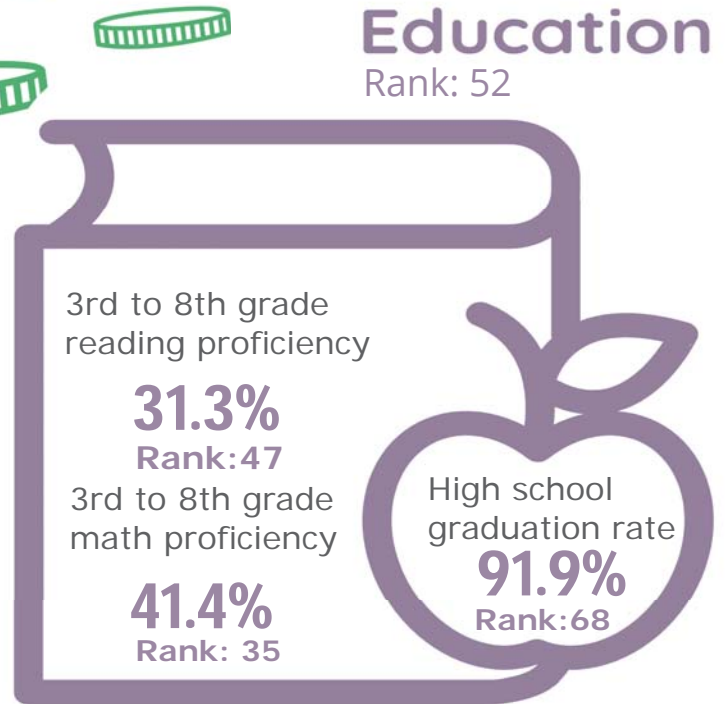
# Health

Rank: 53








# Education

Rank: 52



# Cheatham County

Published 1/2021

Demographics 	Cheatham County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Total population (state comparison is number not rate)	40,446	NA	6,769,975	0.6%	39
Population under 18 years of age	8,871	21.9%	22.2%	98.8%	31
Economic Well-Being 	Cheatham County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Youth unemployment	99	11.8%	11.2%	105.4%	47
Per capita personal income (state is dollars not rate)	\$43,932	NA	\$46,900	93.7%	10
Median home sales price (state is dollars not rate)	\$225,350	NA	\$146,000	154.3%	9
Children receiving Families First grants (TANF)	170	1.9%	2.7%	70.7%	15
Children receiving SNAP	1,831	20.6%	28.2%	73.3%	8
Children under five receiving WIC	575	24.6%	30.6%	80.4%	9
Education 	Cheatham County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
School age special education services	887	14.4%	12.3%	117.4%	73
TEIS participation (per 1,000 in age group)	37	25.78	27.9	92.5%	32
Cohort high school dropouts	40	7.9%	8.3%	95.2%	80
Event high school dropouts	20	1.0%	2.2%	45.5%	59
Economically disadvantaged students	2,835	46.6%	65.1%	71.5%	5
School expulsions (per 1,000 students)	6	1.0	2.0	50.0%	67
Chronic absenteeism	977	16.1%	13.3%	121.1%	75
Young adult college enrollment/completion rate	NA	55.2%	62.5%	88.3%	75
Health 	Cheatham County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Neonatal abstinence syndrome (per 1,000 live births)	10	22.22	11.5	193.5%	42
Births to mothers who smoked during pregnancy	87	19.3%	12.1%	159.5%	40
Children on TennCare (Medicaid)	3,765	36.6%	44.7%	81.9%	8
Total TennCare (Medicaid) enrollees	6,367	15.7%	19.9%	79.1%	8
Births covered by TennCare (Medicaid)	295	65.6%	65.5%	100.1%	14
Children qualified for Medicaid/CHIP but uninsured	323	7.1%	6.5%	109.2%	81
Infant mortality (per 1,000 live births)	3	6.70	6.9	97.1%	55
Neonatal death (per 1,000 live births)	2	4.40	4.4	100.0%	65
Child deaths (per 100,000 children age 1 to 14)	0	0.00	20.5	0.0%	1
Teen violent deaths (per 100,000 children age 15 to 19)	1	39.70	55.7	71.3%	52
Adequate prenatal care	282	62.7%	58.8%	106.6%	47
Children under age six screened for lead poisoning	349	12.5%	17.1%	73.3%	78
Public school students measured as overweight/obese	NA	33.1%	39.3%	84.2%	4
Teens with STDs (per 1,000 children age 15 to 17)	15	9.7	19.0	50.9%	23
Medical doctors by county (per 100,000 residents)	10	24.7	229.1	10.8%	82
Dentists by county (per 100,000 residents)	7	17.3	50.1	34.6%	68
Family & Community 	Cheatham County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Reported child abuse cases	502	5.7%	4.7%	121.3%	54
Commitment to state custody (per 1,000 children)	45	4.6	4.1	112.5%	42
Remaining in state custody (per 1,000 children)	49	5.0	5.2	95.9%	36
Juvenile court referrals	428	4.8%	3.5%	136.5%	63
Recorded marriages (per 1,000 residents)	229	5.7	8.0	71.3%	68
Recorded divorces (per 1,000 residents)	207	5.1	3.5	145.7%	87

## Cheatham County

At 39<sup>th</sup>, Cheatham County is in the top half of Tennessee counties in child well-being. The county's strongest ranking was 1<sup>st</sup> in child and teen death rate. Additionally, some of the county's other strongest rankings include a high median household income and a relatively low rate of child poverty. Though it is still a higher number than one would hope, Cheatham County's 13.4 percent child poverty rate is better than most counties in Tennessee. The county's biggest challenges are its high cost of housing and a high percentage of babies born at a low birth weight.

An additional strength is a relatively low rate of pregnancy among girls age 15-17.

Additional opportunities for improvement include a relatively high school suspension rate and low high school graduation percentage.

*Policy/Practice/Program Options to Improve Outcomes.* Many of these policies have multiple models for delivery, including public-private partnership and non-profit leadership.

- Pro-active housing policy that helps ensure affordable housing is available for people to live where they work can improve negative outcomes related to high housing costs.
- Low birth weight is a persistent and difficult problem, but improvements can occur when care is made available for chronic physical and mental health and substance abuse conditions for women of childbearing age, as well as improving outreach to those who may qualify to receive SNAP, WIC and/or TennCare benefits to be sure they are aware of these services. Additionally, nutrition programs that provide food for school-age children to take home can contribute to nutritionally sound diets for women in their childbearing years. Expanding services through Family Resource Centers can help reach these vulnerable populations.
- Suspension rates can be reduced through clear definitions of what constitutes suspendable behavior and a focus on restorative discipline practices that aim to improve behavior while keeping children in school.
- Making high school students aware of the community college and technical school benefits available to them through Tennessee Promise can encourage on-time high school graduation.