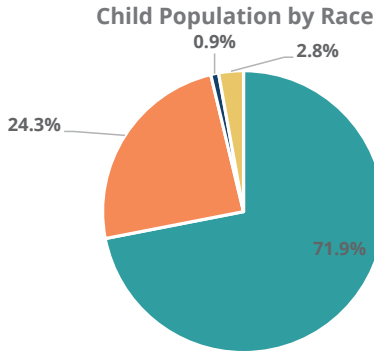
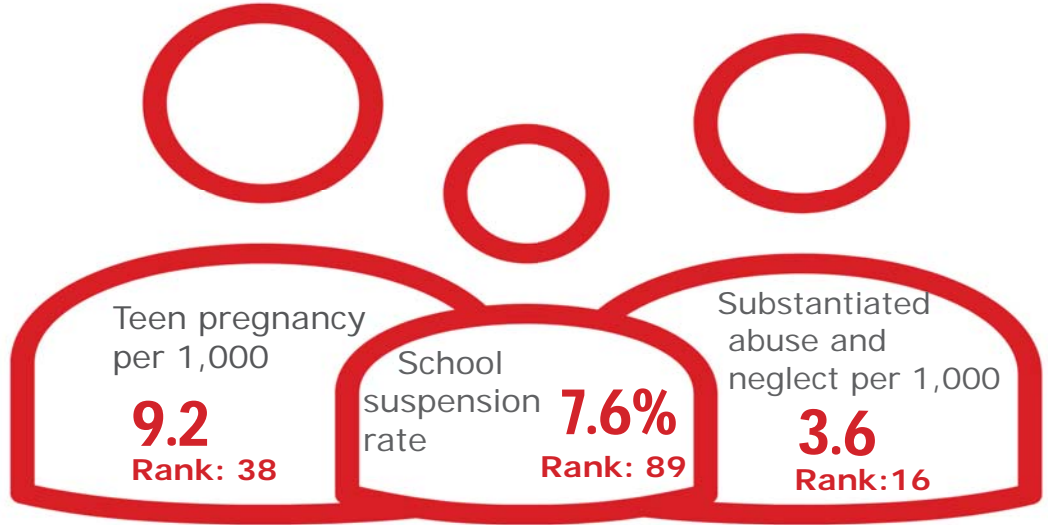


Family & Community

Rank: 59

Hamilton

Rank: 48

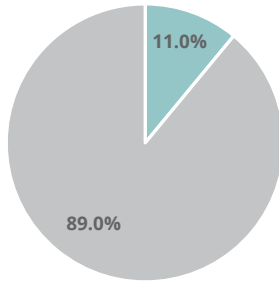


- White, Including Hispanic
- Black, Including Hispanic
- Native American/Alaskan
- Asian/Pacific Islander

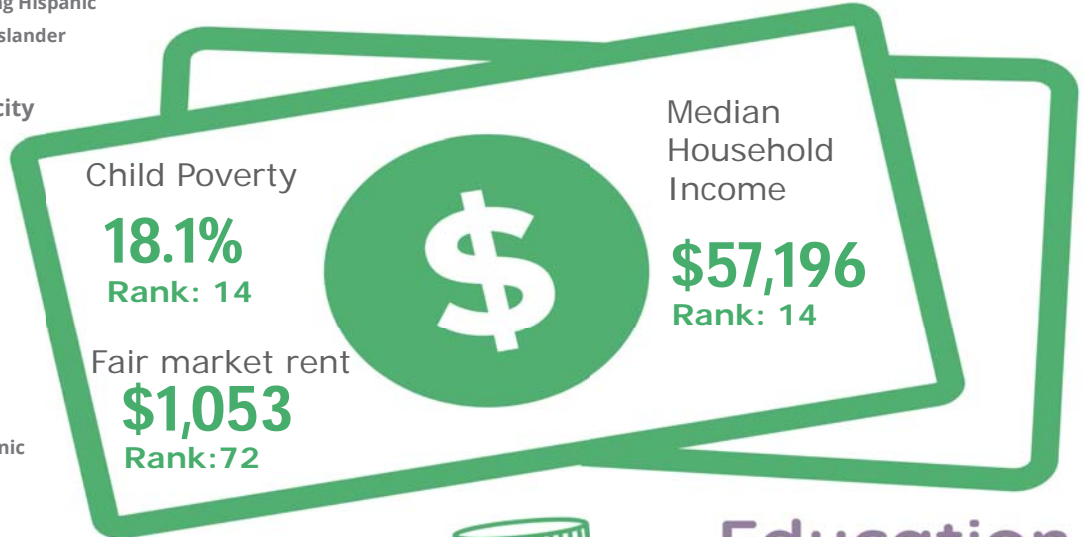
Economic Well-Being

Rank: 15

Child Population by Hispanic Ethnicity

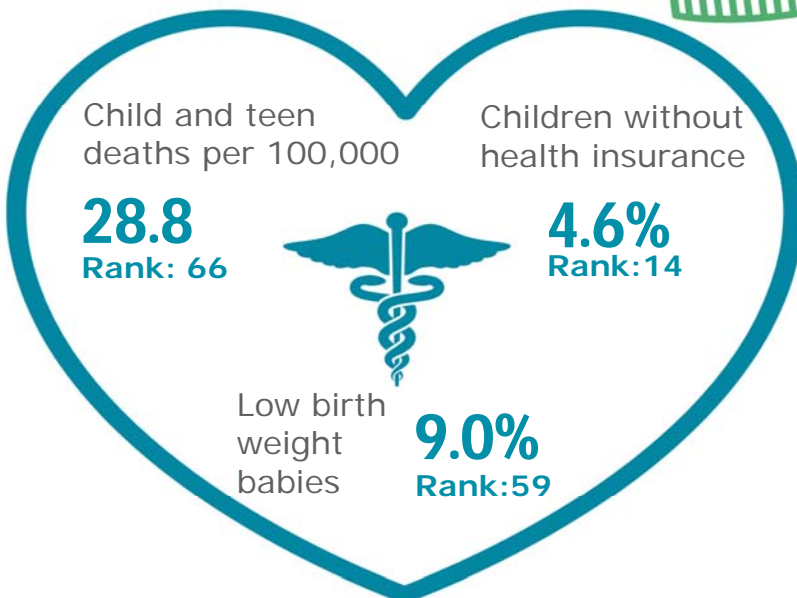


- Hispanic, All Races
- Non-Hispanic



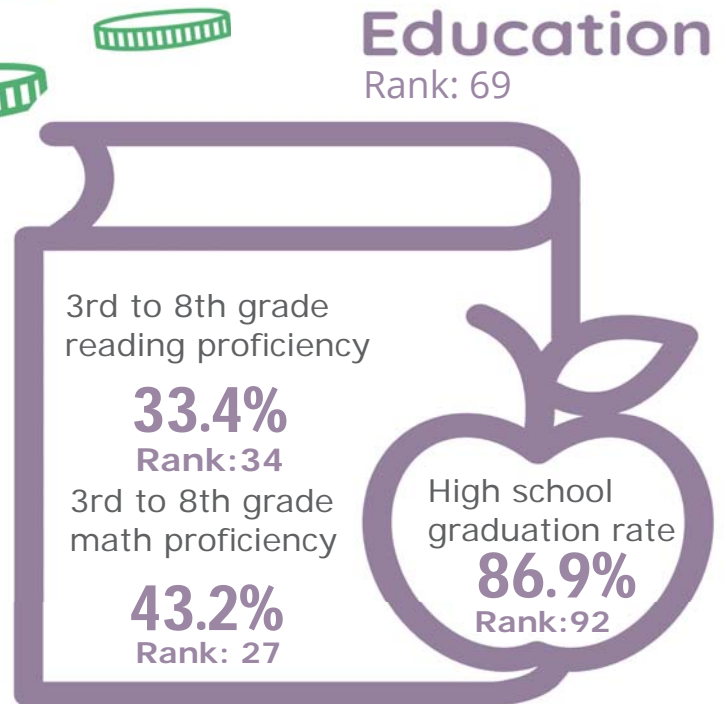
Health

Rank: 38








Education

Rank: 69



Hamilton County

Published 1/2021

Demographics 	Hamilton County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Total population (state comparison is number not rate)	364,286	NA	6,769,975	5.4%	4
Population under 18 years of age	76,024	20.9%	22.2%	94.0%	50
Economic Well-Being 	Hamilton County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Youth unemployment	608	9.2%	11.2%	82.1%	30
Per capita personal income (state is dollars not rate)	\$51,743	NA	\$46,900	110.3%	4
Median home sales price (state is dollars not rate)	\$203,600	NA	\$146,000	139.5%	13
Children receiving Families First grants (TANF)	2,096	2.8%	2.7%	101.7%	48
Children receiving SNAP	21,314	28.0%	28.2%	99.5%	33
Children under five receiving WIC	5,519	26.3%	30.6%	85.8%	10
Education 	Hamilton County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
School age special education services	5,043	11.5%	12.3%	93.5%	17
TEIS participation (per 1,000 in age group)	273	21.62	27.9	77.5%	20
Cohort high school dropouts	315	9.9%	8.3%	119.3%	89
Event high school dropouts	188	1.5%	2.2%	68.2%	80
Economically disadvantaged students	29,110	66.8%	65.1%	102.7%	43
School expulsions (per 1,000 students)	320	7.0	2.0	350.0%	95
Chronic absenteeism	6,422	14.6%	13.3%	109.8%	67
Young adult college enrollment/completion rate	NA	63.7%	62.5%	101.9%	30
Health 	Hamilton County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Neonatal abstinence syndrome (per 1,000 live births)	28	6.59	11.5	57.4%	23
Births to mothers who smoked during pregnancy	369	8.7%	12.1%	71.9%	7
Children on TennCare (Medicaid)	36,448	41.0%	44.7%	91.6%	14
Total TennCare (Medicaid) enrollees	62,218	17.1%	19.9%	85.8%	11
Births covered by TennCare (Medicaid)	2,420	57.0%	65.5%	87.0%	6
Children qualified for Medicaid/CHIP but uninsured	2,313	6.1%	6.5%	93.8%	45
Infant mortality (per 1,000 live births)	25	5.90	6.9	85.5%	47
Neonatal death (per 1,000 live births)	15	3.50	4.4	79.5%	56
Child deaths (per 100,000 children age 1 to 14)	17	28.80	20.5	140.5%	66
Teen violent deaths (per 100,000 children age 15 to 19)	8	37.50	55.7	67.3%	49
Adequate prenatal care	2,269	53.4%	58.8%	90.8%	80
Children under age six screened for lead poisoning	4,220	16.7%	17.1%	97.8%	54
Public school students measured as overweight/obese	NA	34.4%	39.3%	87.5%	5
Teens with STDs (per 1,000 children age 15 to 17)	270	21.3	19.0	111.8%	57
Medical doctors by county (per 100,000 residents)	945	259.4	229.1	113.2%	5
Dentists by county (per 100,000 residents)	202	55.5	50.1	110.7%	5
Family & Community 	Hamilton County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Reported child abuse cases	3,005	4.0%	4.7%	84.7%	10
Commitment to state custody (per 1,000 children)	210	2.5	4.1	61.0%	11
Remaining in state custody (per 1,000 children)	351	4.1	5.2	79.8%	28
Juvenile court referrals	3,507	4.6%	3.5%	130.5%	57
Recorded marriages (per 1,000 residents)	2,373	6.5	8.0	81.3%	40
Recorded divorces (per 1,000 residents)	1,271	3.5	3.5	100.0%	44

Hamilton County

At 48th, Hamilton County is right in the middle of Tennessee counties in child well-being. The county's best rankings include a high median household income and a relatively low rate of children living in poverty. At 18.1 percent—more than one in six—this child poverty rate is still too high, but it is among the lowest in the state. The county's biggest challenges include having one of the highest rates of school suspension in the state and a low high school graduation rate.

Additional strengths include a relatively low percentage of children without health insurance and a low rate of substantiated cases of abuse and neglect.

Additional opportunities for improvement include high housing costs and a high percentage of babies born at a low birth weight.

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

- 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.
- 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.