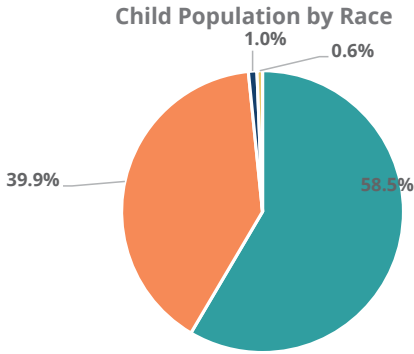
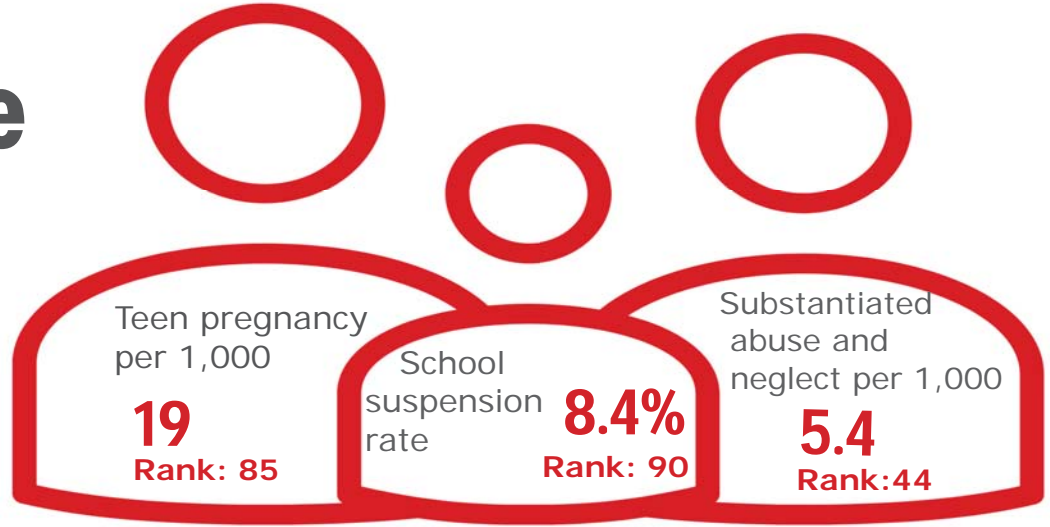


Family & Community

Rank: 91

Lauderdale

Rank: 81

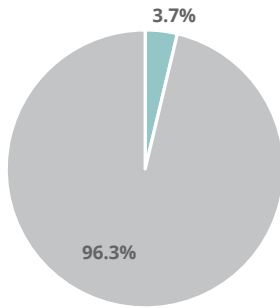


- White, Including Hispanic
- Black, Including Hispanic
- Native American/Alaskan
- Asian/Pacific Islander

Economic Well-Being

Rank: 90

Child Population by Hispanic Ethnicity

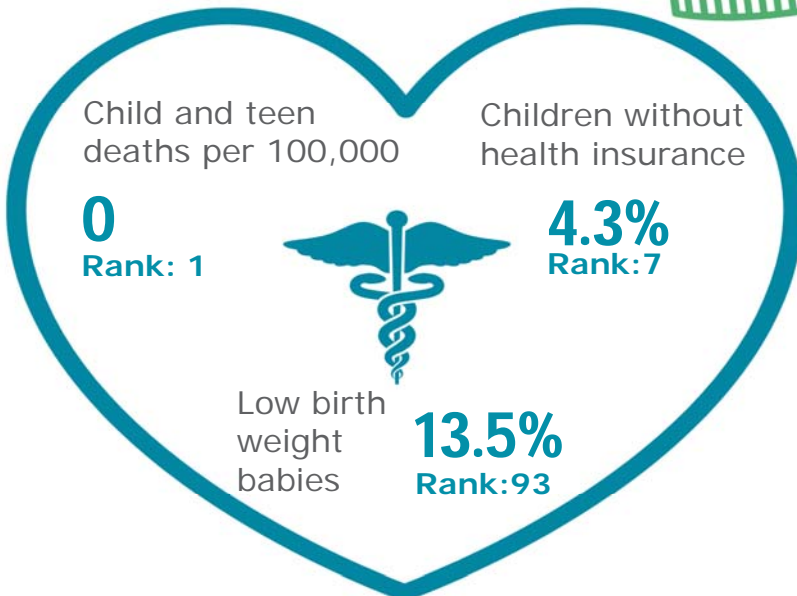


- Hispanic, All Races
- Non-Hispanic



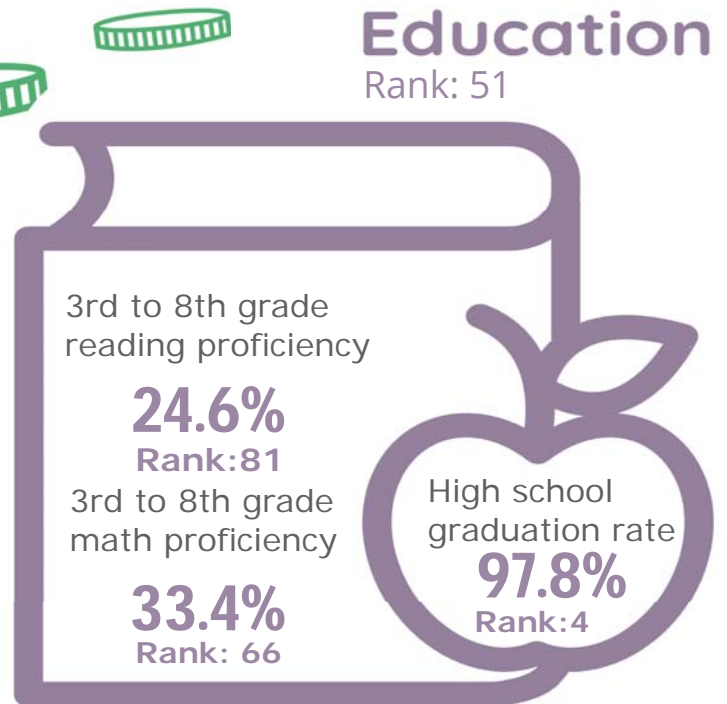
Health

Rank: 58








Education

Rank: 51



Lauderdale County

Published 1/2021

Demographics 	Lauderdale County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Total population (state comparison is number not rate)	25,825	NA	6,769,975	0.4%	56
Population under 18 years of age	5,758	22.3%	22.2%	100.4%	27
Economic Well-Being 	Lauderdale County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Youth unemployment	51	17.9%	11.2%	159.8%	73
Per capita personal income (state is dollars not rate)	\$29,187	NA	\$46,900	62.2%	91
Median home sales price (state is dollars not rate)	\$82,250	NA	\$146,000	56.3%	88
Children receiving Families First grants (TANF)	260	4.5%	2.7%	166.3%	89
Children receiving SNAP	2,420	42.0%	28.2%	149.2%	87
Children under five receiving WIC	670	44.8%	30.6%	146.5%	65
Education 	Lauderdale County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
School age special education services	611	15.4%	12.3%	125.3%	82
TEIS participation (per 1,000 in age group)	30	33.37	27.9	119.7%	55
Cohort high school dropouts	2	0.7%	8.3%	8.4%	3
Event high school dropouts	4	0.3%	2.2%	13.6%	8
Economically disadvantaged students	3,774	96.1%	65.1%	147.7%	90
School expulsions (per 1,000 students)	0	0.0	2.0	0.0%	1
Chronic absenteeism	514	13.0%	13.3%	97.7%	52
Young adult college enrollment/completion rate	NA	53.5%	62.5%	85.6%	82
Health 	Lauderdale County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Neonatal abstinence syndrome (per 1,000 live births)	*	*	11.5	*	*
Births to mothers who smoked during pregnancy	55	19.5%	12.1%	161.2%	42
Children on TennCare (Medicaid)	3,998	59.1%	44.7%	132.1%	85
Total TennCare (Medicaid) enrollees	7,184	27.8%	19.9%	139.8%	88
Births covered by TennCare (Medicaid)	252	89.4%	65.5%	136.5%	89
Children qualified for Medicaid/CHIP but uninsured	188	4.3%	6.5%	66.2%	2
Infant mortality (per 1,000 live births)	5	17.70	6.9	256.5%	93
Neonatal death (per 1,000 live births)	3	10.60	4.4	240.9%	91
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)	0	0.00	55.7	0.0%	1
Adequate prenatal care	163	57.8%	58.8%	98.3%	64
Children under age six screened for lead poisoning	360	20.1%	17.1%	117.2%	27
Public school students measured as overweight/obese	NA	45.2%	39.3%	115.0%	72
Teens with STDs (per 1,000 children age 15 to 17)	50	49.7	19.0	261.0%	73
Medical doctors by county (per 100,000 residents)	4	15.5	229.1	6.8%	89
Dentists by county (per 100,000 residents)	4	15.5	50.1	30.9%	74
Family & Community 	Lauderdale County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Reported child abuse cases	324	5.6%	4.7%	120.6%	52
Commitment to state custody (per 1,000 children)	31	4.8	4.1	118.6%	45
Remaining in state custody (per 1,000 children)	20	3.1	5.2	59.9%	16
Juvenile court referrals	822	14.3%	3.5%	404.0%	92
Recorded marriages (per 1,000 residents)	123	4.8	8.0	60.0%	91
Recorded divorces (per 1,000 residents)	82	3.2	3.5	91.4%	33

Lauderdale County

At 81st, Lauderdale County is in the bottom quarter of Tennessee counties in child well-being. The county's best rankings include no child or teen deaths and one of the strongest high school graduation rates in the state. The county's biggest challenges include one of the highest rates of babies born at a low birth weight and school suspensions in the state.

Additional strengths include a low percentage of children who lack health insurance and low housing costs.

Additional opportunities for improvement include more than one in three children are living in poverty and a high rate pregnancy among girls age 15-17.

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

- 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.
- 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.
- With a high rate of child poverty, improving outreach to those who may qualify to receive SNAP and WIC benefits to be sure they are aware of these services can help ensure basic needs are met. Additionally, nutrition programs that provide food for school-age children to take home can contribute to food security. Expanding services through Family Resource Centers can also help reach these vulnerable populations.
- Comprehensive sex education classes that include both encouragement of abstinence and information on birth control have been shown to reduce the number of teen pregnancies.