

	KdHK	reicent/Nate	Natik
Children living in single parent families 37.2%	<b>73rd</b>	24.8%	46th
Children who are chronically absent 16.7%	43rd	12.4%	44th
Victims of abuse or neglect per 1,000 16.5	68th	19	83rd

Hardin County	Number	Dete	Tennessee	County Rate as a percentage of	County	
Dem	Number Ographic	Rate	Rate	State Rate	Rank	
Denne	Jerapino	.3				
Total population (state value is number not rate)	26,895	NA	6,975,170	0.4%	55	
Population under 18 years of age (percent of total population)	5,393	20.1%	22.0%	91.1%	63	
Economi	ic Well-B	Being				
Youth unemployment	2	1.0%	12.9%	7.8%	5	
Per capita personal income (state value is dollars not rate)	\$45,053	NA	\$56,560	79.7%	45	
Median home sales price (state value is dollars not rate)	\$172,500	NA	\$283,410	60.9%	61	
Children receiving Families First grants (TANF)	133	2.5%	1.5%	165.5%	77	
Children receiving Supplemental Nutrition Assistance (SNAP)	1,611	29.9%	24.0%	124.4%	72	
Fair market rent (percent of monthly median household income)	\$848	20.2%	21.1%	96.0%	8	
Education						
School age special education services	495	15.0%	12.2%	123.5%	69	
TEIS participation (percent of children age 0 to 2)	14	1.9%	3.8%	51.8%	26	
Cohort high school dropouts (percent of class cohort)	14	5.7%	6.7%	84.9%	67	
Event high school dropouts (percent of students grade 9 to 12)	18	1.7%	4.0%	42.4%	41	
Economically disadvantaged students	1,317	40.0%	30.0%	133.3%	77	
School suspensions	*	0.9%	5.1%	17.9%	5	
Graduating seniors scoring 21 or better on the ACT at least once	60	28.2%	35.3%	79.8%	60	
Young adult college enrollment (percent of graduating seniors)	767	51.3%	52.8%	97.2%	40	
Health						
Neonatal abstinence syndrome (per 1,000 live births)	*	*	6.6	*	*	
Births to mothers who smoked during pregnancy	52	19.5%	9.1%	214.0%	74	
Children on TennCare (Medicaid)	4,072	64.9%	55.3%	117.4%	61	
Total TennCare (Medicaid) enrollees	8,113	30.2%	24.9%	121.2%	68	
Births covered by TennCare (Medicaid)	190	70.4%	55.1%	127.8%	70	
Children qualified for Medicaid/CHIP but uninsured	188	6.0%	7.6%	78.9%	24	
Infant mortality (per 1,000 live births)	*	*	6.2	*	*	
Neonatal death (per 1,000 live births)	*	*	3.2	*	*	
Child deaths (per 100,000 children age 1 to 14)	*	*	20.7	*	*	
Teen violent deaths (per 100,000 youth age 15 to 19)	*	*	69.7	*	*	
Adequate prenatal care	223	83.5%	73.9%	113.0%	13	

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Pediatric physicians (per 100,000 children)	1	18.5	76.5	24.3%
Public school students measured as overweight/obese	NA	48.8%	42.8%	114.1%
Teens with STDs (per 1,000 youth age 15 to 17)	11	11.3	16.6	68.0%
WIC participation (percent of children under 5)	732	58.6%	31.7%	184.7%
Dentists by county (per 100,000 residents)	7	26.0	41.4	62.8%

## Family & Community

Reported child abuse cases	351	6.5%	4.6%	141.8%	79
Commitment to state custody (per 1,000 children)	15	2.5	2.8	89.1%	36
Remaining in state custody (per 1,000 children)	31	5.2	5.3	97.6%	40
Juvenile court referrals	141	2.6%	1.8%	146.0%	69
Recorded marriages (per 1,000 residents)	180	7.0	6.6	106.6%	31
Recorded divorces (per 1,000 residents)	65	2.5	3.2	79.4%	18
Young driver accidents (percent of age 15-24 driver's licenses)	206	8.8%	12.3%	72.0%	59
Regulated child care spaces (percent of children age 0 to 12)	524	14.0%	28.9%	48.3%	78
Child care assistance (per 1,000 children age 0 to 12)	38	10.1	24.9	40.7%	41

# Hardin

### **Overall**

At 63rd, Hardin County is in the bottom half of Tennessee counties in child well-being. The county's strongest area was Health.

### Strengths

Hardin's strongest indicator is the percent of babies who were born at a low birthweight, where the county ranks 22nd. The county also performs well in child care cost burden at 23.3%.

### **Opportunities**

The county's biggest challenge is the percent of high school students graduating on time, where it ranks 81st. There are opportunities for improvement in the percent of children living below the federal poverty line as well.

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

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

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. Having counselors available to work with students with personal challenges staying in school can also decrease dropout rates. Studies have found that school climate can play a significant role in students' academic success. Communities can conduct school climate surveys addressing topics such as academics, community, safety, and institutional environment to better gauge a student's experience.

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. Making parents aware of opportunities to receive education and training through Tennessee Reconnect can also boost household incomes over the longer term. Many neighborhoods with a high concentration of poverty are also food deserts, lacking access to affordable healthy options. Community gardens can provide fresh produce and help mitigate some of the negative health implications of child poverty.

#### **Indicator Definitions and History**

**Children living in poverty -** Percent of children living in a household below the federal poverty line. Source: US Census Bureau Small Area Income and Poverty Estimates (2021).

**Severe housing cost burden** - Percent of households spending 50% or more of their income on housing. Source: American Community Survey, 5-year estimates (2017-2021). New to the county profiles, it replaces Fair Market Rent. It is more closely aligned to a KIDS COUNT national indicator, does not apply only to rental housing, and is a rate rather than a dollar value.

**Child care cost burden** - Child care costs for a household with two children as a percent of median household income. Source: Produced by the University of Wisconsin Population Health Institute using The Living Wage Calculator (2022) and Small Area Income and Poverty Estimates (2021). This is new to the rankings and replaces Median Household Income (MHI). We wanted an indicator expressed as a percentage rather than a dollar amount as well as one that related to a common family expense. Income is already somewhat measured in poverty estimates. In addition, this indicator uses MHI in its calculation.

**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 (2021-22).

**3rd to 8th grade math proficiency** - Percent of third- to eighth-grade students who scored "on-track" or "mastered" on the Tennessee Comprehensive Assessment program (TCAP) math test. Source: Tennessee Department of Education (2021-22).

Youth graduating high school on time - Percent of ninth-grade cohort that graduates in four years. Source: Tennessee Department of Education (2021-22).

**Children who are food insecure -** Percent of children who sometimes lack access to adequate food. Source: Map the Meal Gap (2021). This is new to the rankings and replaces child and teen death rates, which, because the Department of Health has tightened its data suppression rules, is no longer available for all counties. We did not have an indicator for all counties to line up with overweight/ obesity data in the national ranking, so we searched for an one related to nutrition and healthy eating.

**Children who lack health insurance -** Percent of children who lack health insurance. Source: US Census Bureau Small Area Health Insurance Estimates (2020).

**Babies born at a low birthweight -** Percent of live births where baby weighs less than 2,500 grams (5.5 pounds), averaged over three years. Source: Tennessee Department of Health (2019-21), with three counties estimated using American Community Survey 5-year data (2015-19, 2016-20, 2017-21). It has been in our county profiles from the beginning, though it was previously just one-year data. The Department of Health has tightened its data suppression rules, and dozens of counties' data were unavailable with one-year numbers. Three-year numbers still left three counties suppressed. Those were estimated from 5-year American Community Survey data.

**Children living in single parent families -** Single-parent households as a percent of all households with children. Source: American Community Survey, 5-year estimates (2017-2021). New to the county profiles, it replaces births to unmarried females, which in turn replaced teen births. As the Tennessee Department of Health tightened its data suppression rules, teen birth data was no longer available for all counties. Children born to unmarried females was always an attempt to roughly estimate teen births using different data. In moving from actual counts to ACS 5-year estimates, we decided to use this indicator over teen births as it affects families with parents of all ages.

**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 (2021-22). New to the county profiles, it replaces school suspensions, which have suppressed data for many counties.

**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. Children with multiple cases during the year are counted only once. The rate is per 1,000 children. Source: Tennessee Department of Children's Services (2021). This has been in our county rankings from the beginning, but we have moved to counting children rather than cases.