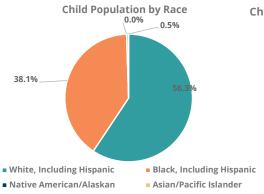
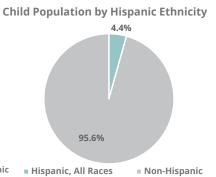
90th LAUDERDALE

Population Under 18: 21.7%







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ECONOMIC WELL-BEING 88TH	Rank	Previous Percent/Rate	Previous Rank
Children living in poverty 29.3%	90th	26.2%	83rd
Severe housing cost burden 11.5%	81st	14.6%	93rd
Child care cost burden 27.8%	83rd	24.4%	71st
EDUCATION 82ND	Rank	Previous Percent/Rate	Previous Rank
3rd to 8th grade reading proficiency 20.7%	90th	15.1%	91st
3rd to 8th grade math proficiency 20.2%	83rd	11.9%	89th
Youth graduating high school on time 92.9%	50th	96.2%	13th
HEALTH 94TH	Rank	Previous Percent/Rate	Previous Rank
HEALTH 94TH Children who are food insecure 22.7%	Rank 93rd		
		Percent/Rate	Rank
Children who are food insecure 22.7%	93rd	Percent/Rate 27.0%	Rank 91st
Children who are food insecure 22.7% Children who lack health insurance 5.4%	93rd 20th	Percent/Rate 27.0% 4.3%	91st 10th
Children who are food insecure 22.7% Children who lack health insurance 5.4% Babies born at a low birthweight 13.0%	93rd 20th 95th	27.0% 4.3% 12.5% Previous	91st 10th 94th Previous
Children who are food insecure 22.7% Children who lack health insurance 5.4% Babies born at a low birthweight 13.0% FAMILY & COMMUNITY 84TH	93rd 20th 95th	Percent/Rate 27.0% 4.3% 12.5% Previous Percent/Rate	91st 10th 94th Previous Rank

Lauderdale County	Number	Rate	Tennessee Rate	County Rate as a percentage of State Rate	County Rank
Demo	ographic		Rate	State Rate	Kalik
			6.075.470	0.40/	60
otal population (state value is number not rate) opulation under 18 years of age (percent of total population)	25,105 5,451	NA 21.7%	6,975,170 22.0%	0.4% 98.7%	60 33
Economi	ic Well-E	eing			
outh unemployment	58	16.7%	12.9%	129.5%	75
er capita personal income (state value is dollars not rate)	\$39,733	NA	\$56,560	70.2%	77
Median home sales price (state value is dollars not rate)	\$120,000	NA	\$283,410	42.3%	89
hildren receiving Families First grants (TANF)	153	2.8%	1.5%	187.7%	82
Children receiving Supplemental Nutrition Assistance (SNAP)	2,160	39.6%	24.0%	165.0%	92
air market rent (percent of monthly median household income)	\$892	25.3%	21.1%	120.2%	69
Edu	ucation				
School age special education services	540	15.8%	12.2%	129.5%	76
EIS participation (percent of children age 0 to 2)	12	1.4%	3.8%	38.2%	14
Cohort high school dropouts (percent of class cohort)	2	0.7%	6.7%	10.2%	4
vent high school dropouts (percent of students grade 9 to 12)	5	0.4%	4.0%	10.8%	7
conomically disadvantaged students	1,576	46.0%	30.0%	153.3%	92
chool suspensions	254	7.4%	5.1%	145.6%	74
Graduating seniors scoring 21 or better on the ACT at least once	35	16.1%	35.3%	45.6%	91
oung adult college enrollment (percent of graduating seniors)	1,038	47.9%	52.8%	90.7%	59
Н	lealth				
Neonatal abstinence syndrome (per 1,000 live births)	0	0.00	6.6	0.0%	1
Births to mothers who smoked during pregnancy	47	14.7%	9.1%	161.4%	42
Children on TennCare (Medicaid)	4,711	73.5%	55.3%	132.9%	87
otal TennCare (Medicaid) enrollees	8,723	34.7%	24.9%	139.6%	89
Births covered by TennCare (Medicaid)	272	84.7%	55.1%	153.9%	94
Children qualified for Medicaid/CHIP but uninsured	196	5.2%	7.6%	68.4%	10
nfant 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	*	*
					^
	*	*	69.7	*	*
een violent deaths (per 100,000 youth age 15 to 19)	* 238			* 101.6%	
een violent deaths (per 100,000 youth age 15 to 19) dequate prenatal care		*	69.7		*
deen violent deaths (per 100,000 youth age 15 to 19) dequate prenatal care dediatric physicians (per 100,000 children)	238	* 75.1%	69.7 73.9%	101.6%	* 65
deen violent deaths (per 100,000 youth age 15 to 19) dequate prenatal care dediatric physicians (per 100,000 children) dublic school students measured as overweight/obese	238 0	* 75.1% 0.0	69.7 73.9% 76.5	101.6% 0.0%	* 65 57
deen violent deaths (per 100,000 youth age 15 to 19) dequate prenatal care dediatric physicians (per 100,000 children) dublic school students measured as overweight/obese deens with STDs (per 1,000 youth age 15 to 17)	238 0 NA	* 75.1% 0.0 *	69.7 73.9% 76.5 42.8%	101.6% 0.0% *	* 65 57 *
deen violent deaths (per 100,000 youth age 15 to 19) dequate prenatal care dediatric physicians (per 100,000 children) dublic school students measured as overweight/obese deens with STDs (per 1,000 youth age 15 to 17) VIC participation (percent of children under 5)	238 0 NA 33	* 75.1% 0.0 * 35.0	69.7 73.9% 76.5 42.8% 16.6	101.6% 0.0% * 210.8%	* 65 57 * 73
deen violent deaths (per 100,000 youth age 15 to 19) dequate prenatal care dediatric physicians (per 100,000 children) dublic school students measured as overweight/obese deens with STDs (per 1,000 youth age 15 to 17) WIC participation (percent of children under 5)	238 0 NA 33 665 4	* 75.1% 0.0 * 35.0 47.7% 15.9	69.7 73.9% 76.5 42.8% 16.6 31.7%	101.6% 0.0% * 210.8% 150.5%	* 65 57 * 73 66
deen violent deaths (per 100,000 youth age 15 to 19) dequate prenatal care dediatric physicians (per 100,000 children) dublic school students measured as overweight/obese deens with STDs (per 1,000 youth age 15 to 17) VIC participation (percent of children under 5) Dentists by county (per 100,000 residents) Family &	238 0 NA 33 665 4	* 75.1% 0.0 * 35.0 47.7% 15.9	69.7 73.9% 76.5 42.8% 16.6 31.7%	101.6% 0.0% * 210.8% 150.5%	* 65 57 * 73 66 71
deen violent deaths (per 100,000 youth age 15 to 19) dequate prenatal care dediatric physicians (per 100,000 children) dublic school students measured as overweight/obese deens with STDs (per 1,000 youth age 15 to 17) WIC participation (percent of children under 5) dentists by county (per 100,000 residents) Family & deported child abuse cases	238 0 NA 33 665 4	* 75.1% 0.0 * 35.0 47.7% 15.9 Unity	69.7 73.9% 76.5 42.8% 16.6 31.7% 41.4	101.6% 0.0% * 210.8% 150.5% 38.4%	* 65 57 * 73 66
deen violent deaths (per 100,000 youth age 15 to 19) dequate prenatal care dediatric physicians (per 100,000 children) dublic school students measured as overweight/obese deens with STDs (per 1,000 youth age 15 to 17) dVIC participation (percent of children under 5) dentists by county (per 100,000 residents) Family & deported child abuse cases demonstrated to state custody (per 1,000 children)	238 0 NA 33 665 4 Commo	* 75.1% 0.0 * 35.0 47.7% 15.9 Unity 5.0% 2.3	69.7 73.9% 76.5 42.8% 16.6 31.7% 41.4	101.6% 0.0% * 210.8% 150.5% 38.4%	* 65 57 * 73 66 71
dequate prenatal care rediatric physicians (per 100,000 children) rublic school students measured as overweight/obese reens with STDs (per 1,000 youth age 15 to 17) VIC participation (percent of children under 5) rentists by county (per 100,000 residents) Family & reported child abuse cases remaining in state custody (per 1,000 children)	238 0 NA 33 665 4 COMMU 275 14 30	* 75.1% 0.0 * 35.0 47.7% 15.9 Unity 5.0% 2.3 4.9	69.7 73.9% 76.5 42.8% 16.6 31.7% 41.4 4.6% 2.8 5.3	101.6% 0.0% * 210.8% 150.5% 38.4% 109.9% 82.1% 93.2%	* 65 57 * 73 66 71 40 32 37
reen violent deaths (per 100,000 youth age 15 to 19) Adequate prenatal care Pediatric physicians (per 100,000 children) Public school students measured as overweight/obese Feens with STDs (per 1,000 youth age 15 to 17) WIC participation (percent of children under 5) Pentists by county (per 100,000 residents) Family & Reported child abuse cases Commitment to state custody (per 1,000 children) Remaining in state custody (per 1,000 children) Revenile court referrals	238 0 NA 33 665 4 275 14 30 382	* 75.1% 0.0 * 35.0 47.7% 15.9 Unity 5.0% 2.3 4.9 7.0%	69.7 73.9% 76.5 42.8% 16.6 31.7% 41.4 4.6% 2.8 5.3 1.8%	101.6% 0.0% * 210.8% 150.5% 38.4% 109.9% 82.1% 93.2% 391.2%	* 65 57 * 73 66 71 40 32 37 95
deen violent deaths (per 100,000 youth age 15 to 19) dequate prenatal care dediatric physicians (per 100,000 children) dublic school students measured as overweight/obese deens with STDs (per 1,000 youth age 15 to 17) WIC participation (percent of children under 5) Dentists by county (per 100,000 residents) Family & Dentists by county (per 1,000 children) Demaining in state custody (per 1,000 children) Demaining in state custody (per 1,000 children) Devenile court referrals Decorded marriages (per 1,000 residents)	238 0 NA 33 665 4 275 14 30 382 132	* 75.1% 0.0 * 35.0 47.7% 15.9 Unity 5.0% 2.3 4.9 7.0% 5.2	69.7 73.9% 76.5 42.8% 16.6 31.7% 41.4 4.6% 2.8 5.3 1.8% 6.6	101.6% 0.0% * 210.8% 150.5% 38.4% 109.9% 82.1% 93.2% 391.2% 78.6%	* 65 57 * 73 66 71 40 32 37 95 78
dequate prenatal care rediatric physicians (per 100,000 children) rublic school students measured as overweight/obese reens with STDs (per 1,000 youth age 15 to 17) rublic participation (percent of children under 5) rentists by county (per 100,000 residents) Family & remaining in state custody (per 1,000 children) remaining in state custody (per 1,000 children) ruvenile court referrals recorded divorces (per 1,000 residents)	238 0 NA 33 665 4 275 14 30 382 132 77	* 75.1% 0.0 * 35.0 47.7% 15.9 Unity 5.0% 2.3 4.9 7.0% 5.2 3.0	69.7 73.9% 76.5 42.8% 16.6 31.7% 41.4 4.6% 2.8 5.3 1.8% 6.6 3.2	101.6% 0.0% * 210.8% 150.5% 38.4% 109.9% 82.1% 93.2% 391.2% 78.6% 94.6%	* 65 57 * 73 66 71 40 32 37 95 78 35
Teen violent deaths (per 100,000 youth age 15 to 19) Adequate prenatal care Pediatric physicians (per 100,000 children) Public school students measured as overweight/obese Teens with STDs (per 1,000 youth age 15 to 17) WIC participation (percent of children under 5) Dentists by county (per 100,000 residents)	238 0 NA 33 665 4 275 14 30 382 132	* 75.1% 0.0 * 35.0 47.7% 15.9 Unity 5.0% 2.3 4.9 7.0% 5.2	69.7 73.9% 76.5 42.8% 16.6 31.7% 41.4 4.6% 2.8 5.3 1.8% 6.6	101.6% 0.0% * 210.8% 150.5% 38.4% 109.9% 82.1% 93.2% 391.2% 78.6%	* 65 57 * 73 66 71 40 32 37 95 78

Lauderdale

Overall

At 90th, Lauderdale County is in the near the bottom of Tennessee counties in child well-being. The county's strongest area was Education.

Strengths

Lauderdale's strongest indicator is the percent of children without health insurance, where the county ranks 18th. The county also performs well in the number of children who were victims of abuse or neglect at 12.7 per 1,000.

Opportunities

The county's biggest challenge is the percent of babies who were born at a low birthweight, where it ranks 95th. There are opportunities for improvement in the percent of children who are living in single parent families 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.

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.

Single-parent families often have fewer resources—both financial and time—to help children achieve success in school and beyond. Connecting families with services to reduce these burdens helps their children thrive. Paid parental leave and other family-friendly work policies can improve single parents' ability to be involved in their children's daily lives without sacrificing financial stability, while supports for single parents to complete education and training help those who lack such stability. Additionally, broadening services times and appointment availability to meet varying working hours can reduce the time-strain and need to take off work for a single parent. The Tennessee Department of Human Resources Child Support Division can help connect single parents to legal supports to ensure they receive any child support or other benefits they are due.

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 "ontrack" 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.