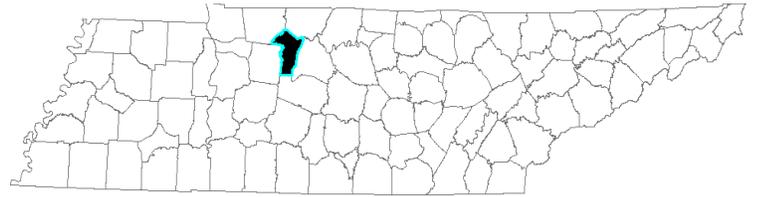
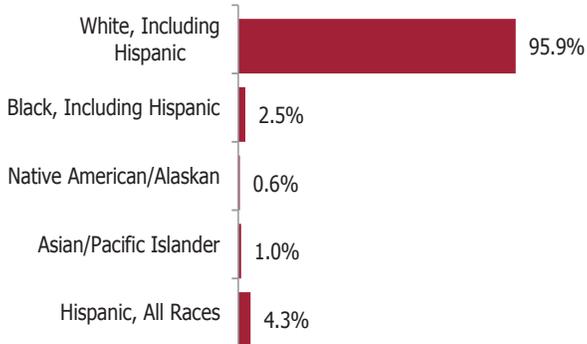


Cheatham



TCCY Index Rank 31

Child Population by Race/Ethnicity



HEALTH

- Low birth-weight babies: 9.20% (Rank: 48)
- Children without health insurance: 3.60% (Rank: 34)
- Child and teen deaths: 35.5 per 100,000 (Rank: 69)

ECONOMIC WELL-BEING

Rank: 24

- Child Poverty: 16.40% (Rank: 7)
- Median Household Income: \$58,555 (Rank: 5)
- Fair Market Rent: \$1,228 (Rank: 86)

FAMILY and COMMUNITY

Rank: 42

- School suspension rate: 4.50% (Rank: 66)
- Teen pregnancy: 9.3 per 1,000 (Rank: 28)
- Substantiated Abuse and Neglect: 5.5 per 1,000 (Rank: 46)

EDUCATION

Rank: 39

- Third to eighth grade reading proficiency: 31.50% (Rank: 48)
- Third to eighth grade math proficiency: 43.50% (Rank: 22)
- High school graduation rate: 91.90% (Rank: 59)

Cheatham County

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)	39,879	NA	6,651,120	0.6%	38
Population under 18 years of age	8,909	22.3%	22.5%	99.5%	29
Economic Well-Being 	Cheatham County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Youth unemployment	90	11.3%	15.5%	72.9%	23
Per capita personal income (state is dollars not rate)	\$39,469	NA	\$43,326	91.1%	12
Children receiving Families First grants (TANF)	249	2.8%	3.8%	73.3%	20
Children receiving SNAP	2,243	25.0%	32.3%	77.3%	9
Children under five receiving WIC	578	25.5%	33.7%	75.7%	8
Education 	Cheatham County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
School age special education services	832	13.3%	11.9%	112.0%	56
TEIS participation (per 1,000 in age group)	24	17.71	20.6	86.0%	34
Cohort high school dropouts	24	5.1%	5.6%	91.1%	71
Event high school dropouts	35	1.6%	2.7%	59.3%	63
Economically disadvantaged students	1,875	30.0%	35.7%	84.1%	28
School expulsions (per 1,000 students)	0	0.0	2.0	0.0%	1
Chronic absenteeism	1,052	15.6%	15.8%	98.7%	48
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)	5	10.20	13.2	77.2%	42
Births to mothers who smoked during pregnancy	97	19.8%	13.4%	147.8%	39
Children on TennCare (Medicaid)	4,725	45.6%	51.7%	88.2%	11
Total TennCare (Medicaid) enrollees	8,024	20.1%	23.4%	85.8%	11
Births covered by TennCare (Medicaid)	238	48.6%	52.9%	91.8%	10
Children qualified for Medicaid/CHIP but uninsured	220	4.6%	4.7%	97.9%	52
Infant mortality (per 1,000 live births)	6	12.20	7.4	164.9%	79
Neonatal death (per 1,000 live births)	4	8.20	4.2	195.2%	84
Child deaths (per 100,000 children age 1 to 14)	2	29.10	21.8	133.5%	69
Teen violent deaths (per 100,000 children age 15 to 19)	1	39.00	50.5	77.2%	49
Adequate prenatal care	282	57.6%	52.4%	109.9%	47
Children under age six screened for lead poisoning	289	10.6%	18.5%	57.0%	87
Public school students measured as overweight/obese	NA	35.1%	38.4%	91.4%	8
Teens with STDs (per 1,000 children age 15 to 17)	9	5.7	16.0	35.6%	10
Medical doctors by county (per 100,000 residents)	11	27.6	240.0	11.5%	73
Dentists by county (per 100,000 residents)	5	12.5	49.3	25.4%	81
Family & Community 	Cheatham County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Reported child abuse cases	502	5.6%	4.9%	114.3%	44
Commitment to state custody (per 1,000 children)	34	3.4	3.8	89.5%	32
Remaining in state custody (per 1,000 children)	35	3.5	4.8	72.9%	23
Juvenile court referrals	584	6.6%	4.5%	146.7%	63
Recorded marriages (per 1,000 residents)	240	6.0	8.6	69.8%	70
Recorded divorces (per 1,000 residents)	170	4.3	3.8	113.2%	59
Births to unmarried females	210	42.9%	43.6%	98.4%	44
Regulated child care spaces (state is number not rate)	2,586	NA	381,686	0.7%	25

Cheatham County

At 31st, Cheatham County is in the top third of Tennessee counties in child well-being. Some of the county's strongest ratings 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 16.4 percent child poverty rate is better than most counties in Tennessee. The county's biggest challenges are a high cost of housing, a relatively high rate of child and teen deaths, and an above average rate of high school suspensions.

Additional strengths include a relatively high percent of 3rd to 8th grade children rated proficient in math on TNReady tests, a relatively low rate of pregnancy among girls age 15 to 17 and a below-average rate of uninsured children.

Additional opportunities for improvement include a low high school graduation rate, a below average high percent of 3rd to 8th grade children rated proficient in reading on TNReady tests and an above-average rate of babies born at low birthweight.

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.
- Child and teen deaths can be reduced with consistent enforcement of safety measures like proper car seat and seat belt use, bicycle helmet use and life preserver use around water. Most child and teen deaths are the result of accidents, especially motor vehicle accidents.
- 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.
- Increased access to pre-K can help reading proficiency in later grades. Early assessment of reading skills coupled with appropriate interventions where needed can improve reading proficiency in 3rd to 8th grade.
- Low birthweight 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.