

2016 KIDS COUNT IN NEBRASKA REPORT

CHRISSY TONKINSON, MPH

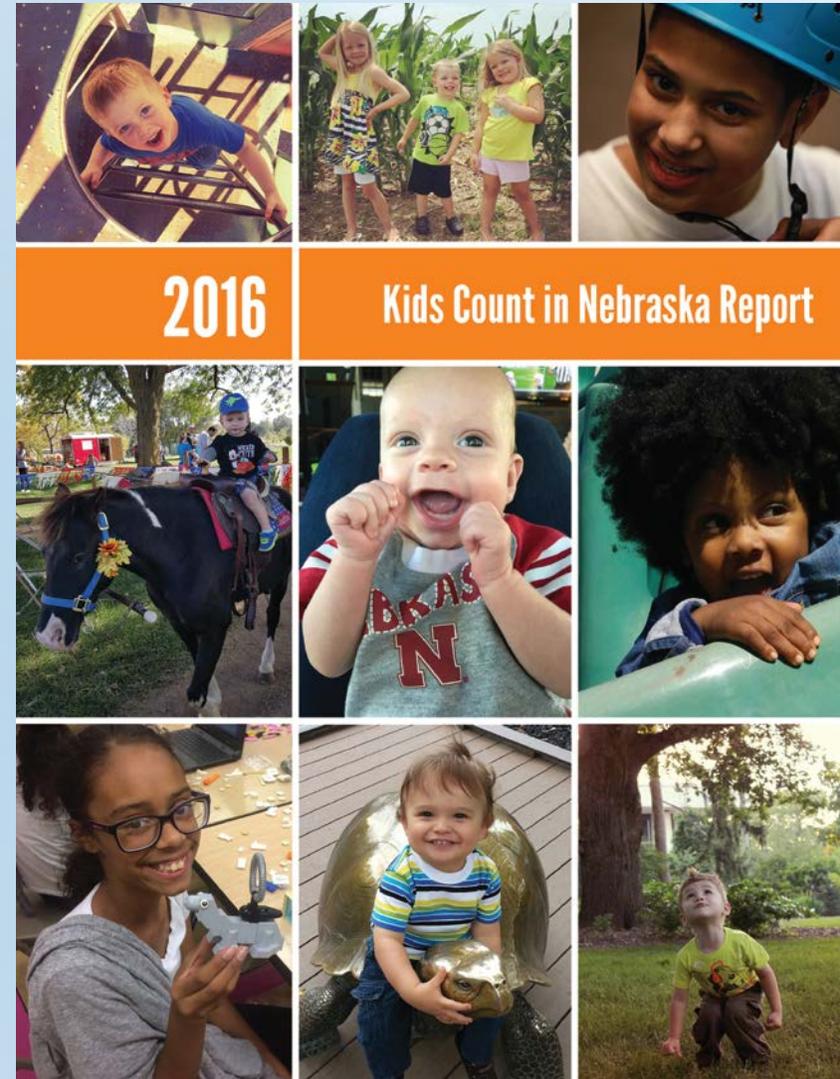
RESEARCH COORDINATOR

VOICES FOR CHILDREN IN NEBRASKA IS THE INDEPENDENT
VOICE BUILDING PATHWAYS TO OPPORTUNITY FOR ALL
CHILDREN AND FAMILIES THROUGH RESEARCH, POLICY,
AND COMMUNITY ENGAGEMENT

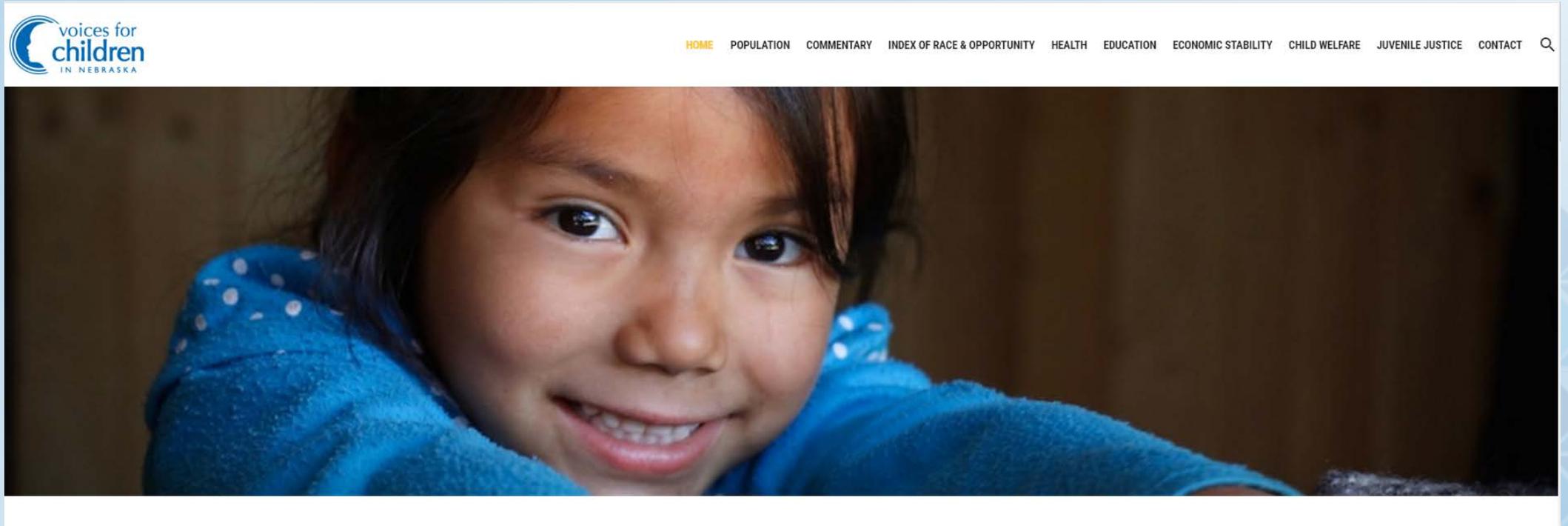


24TH ANNUAL KIDS COUNT IN NEBRASKA REPORT

- MOST COMPREHENSIVE SOURCE OF DATA ON THE WELL-BEING OF CHILDREN IN AREAS OF:
 - POPULATION
 - HEALTH
 - EDUCATION
 - ECONOMIC STABILITY
 - CHILD WELFARE
 - JUVENILE JUSTICE
- INDEX OF RACE AND OPPORTUNITY FOR NEBRASKA KIDS
- COMMENTARY: EMERGING ADULTS
- COUNTY-LEVEL INDICATORS

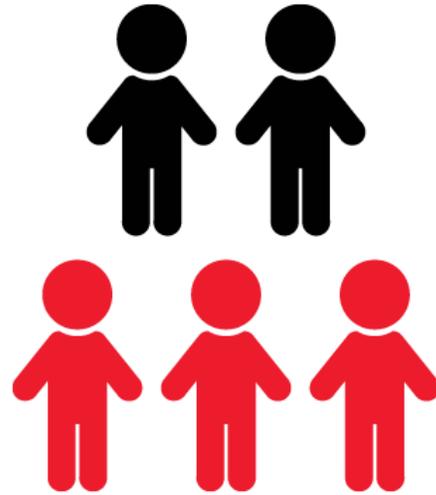


KIDS COUNT NETERACTIVE



- ONLINE, SEARCHABLE DATA SITE CONTAINING FULL KIDS COUNT REPORT
 - OPTIMIZED FOR MOBILE USE
 - NETERACTIVE COUNTY MAPS

HEALTH



64% OF UNINSURED NEBRASKA KIDS ARE LOW-INCOME.¹

87.4% OF NEBRASKA CHILDREN ARE IN VERY GOOD OR EXCELLENT HEALTH.²

¹ U.S. Census Bureau, 2015 American Community Survey 1-year estimates, Table B17016.

² Data Resource Center for Child & Adolescent Health, National Survey of Children's Health, 2011/12.

WHY DOES IT MATTER?

All children deserve access to affordable, quality physical and behavioral health care.

Quality and consistent preventive health care, beginning even before birth, gives children the best chance to grow up to be healthy and productive adults.

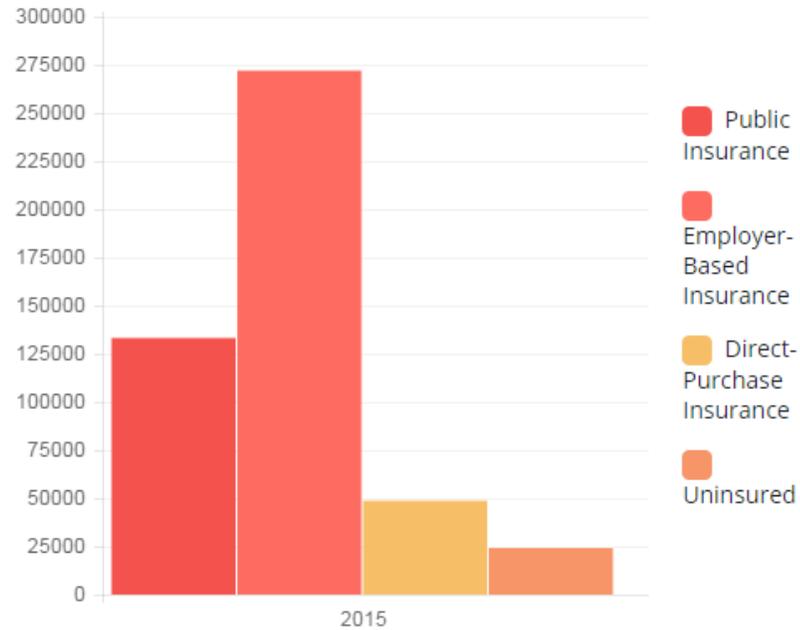
Adequate levels of immunization, public health efforts to prevent disease and disability, and support for maternal health and positive birth outcomes are examples of measures that help children now and later. Good health, both physical and behavioral, is an essential element of a productive and fulfilling life.

WHERE ARE THE DATA?

BIRTHS
PRE/POST-NATAL HEALTH
TEEN BIRTHS & SEXUAL BEHAVIORS
INFANT & CHILD DEATHS
HEALTH INSURANCE
BEHAVIORAL HEALTH
HEALTH RISKS
HEALTH SERVICES

HEALTH INSURANCE

Health coverage for Nebraska's children, ages 17 & under (2015)¹



ACCESS TO HEALTH CARE

In 2015, there were 24,078 (5.2%) uninsured children in Nebraska. Of those, 15,506 (64%) were low-income (below 200% of the federal poverty level) and likely eligible, yet unenrolled, in the Children's Health Insurance Program (CHIP).¹

Percent uninsured children by race/ethnicity (2010-2014) ²	
Black/African American	4.1%
Asian or Pacific Islander	6.0%
Other, or 2+ races	9.4%
White, non-Hispanic	4.2%
Hispanic	11.6%
American Indian and Alaska Native	16.3%

5.2% OF KIDS DID NOT HAVE HEALTH INSURANCE IN 2015.¹

MEDICAID AND CHIP SERVED A MONTHLY AVERAGE OF 162,087 CHILDREN IN SFY 2015.³

69% OF THOSE ELIGIBLE FOR MEDICAID ARE CHILDREN, BUT CHILDREN ONLY MAKE UP 27% OF MEDICAID COSTS.³

EDUCATION

WHY DOES IT MATTER?

A good education begins early. Access to high-quality early childhood and pre-kindergarten programs provide an important foundation for children as they move through their school years and into adulthood.

Children who are well educated are much more likely to become successful adults. Higher education is linked to higher income, higher job satisfaction, lower divorce rates, and lower crime rates. By ensuring that all children have access to high-quality educational opportunities and closing the opportunity gap we are investing in the future of our communities, our state, and our economy.

Additional supports for educationally vulnerable children— such as special education, English language learning programs, and quality alternative education programs— help ensure that children with varying needs keep pace.

82%
OF NEBRASKA 3RD GRADERS
SCORE PROFICIENT OR BETTER IN READING.

88.9%
OF NEBRASKA HIGH SCHOOL STUDENTS
GRADUATED ON TIME.

Source: Nebraska Department of Education.

WHERE ARE THE DATA?

HEAD START/EARLY HEAD START

EARLY CHILDHOOD EDUCATION

CHILD CARE

QRIS

STUDENT CHARACTERISTICS

TEST SCORES - READING

TEST SCORES - MATH

TEST SCORES - SCIENCE

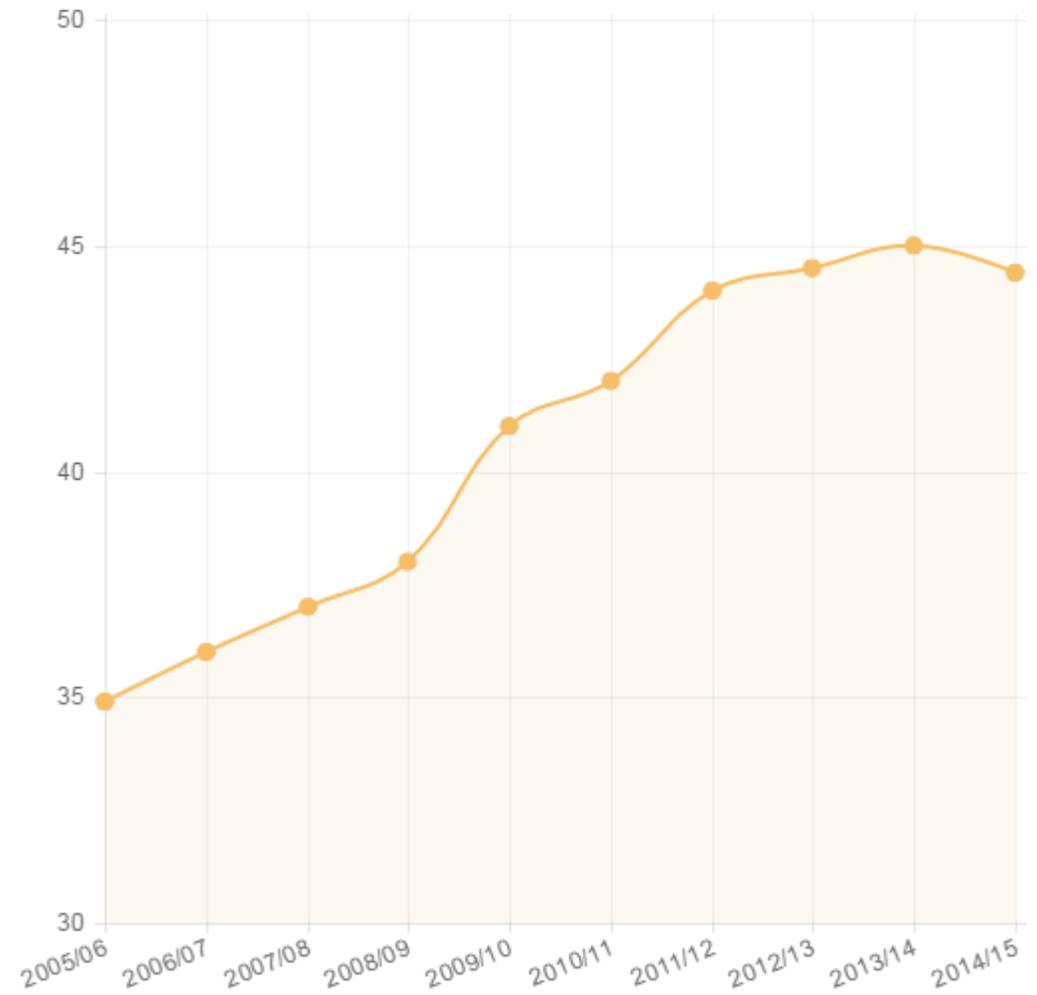
ABSENCES

GRADUATION & CAREER

COMMUNITY ELIGIBILITY (2014/15)*		
	Schools	Children
Eligible	111	43,594
Served	8	2,228

*Number of children eligible for the Community Eligibility Program is based on proxy data.

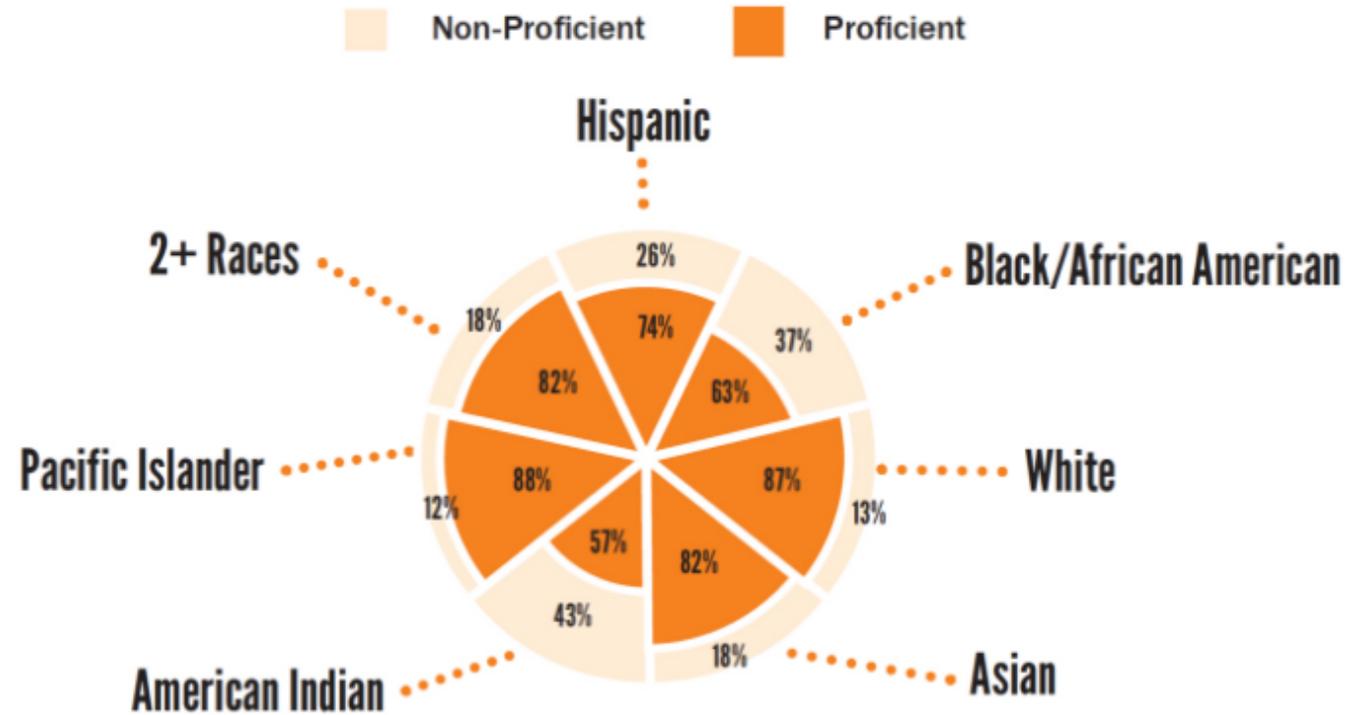
Percentage of public and nonpublic students eligible for free and reduced school meals (2005/06 - 2014/15)



3RD GRADE (2014/15)

82%
OF CHILDREN OVERALL READ
PROFICIENTLY

73%
OF LOW-INCOME CHILDREN READ
PROFICIENTLY



ECONOMIC STABILITY



WHITE FAMILIES' MEDIAN INCOME IS 1.7X HIGHER THAN THE MEDIAN INCOME OF FAMILIES OF COLOR.¹

18.5% OF NEBRASKANS EXPERIENCE ASSET POVERTY AND ARE LIKELY ONE EMERGENCY AWAY FROM FINANCIAL CRISIS.²

OUR VALUES

Our children, communities, and state are stronger when all of Nebraska's families are able to participate fully in the workforce and establish financial security.

Achieving economic stability occurs when parents have the education, skills, and opportunity to access work that pays a living wage. In turn, parents who are economically stable can provide their children housing, child care, health care, food, and transportation.

Public assistance provides a vital safety net for families who are unable to provide these necessities on their own. Well-structured public assistance programs gradually reduce assistance while supporting families moving toward financial independence.

WHERE ARE THE DATA?

POVERTY

MAKING ENDS MEET

AID TO DEPENDENT CHILDREN

HOUSING & HOMELESSNESS

HUNGER

SNAP & WIC

CUSTODY

EMPLOYMENT & INCOME

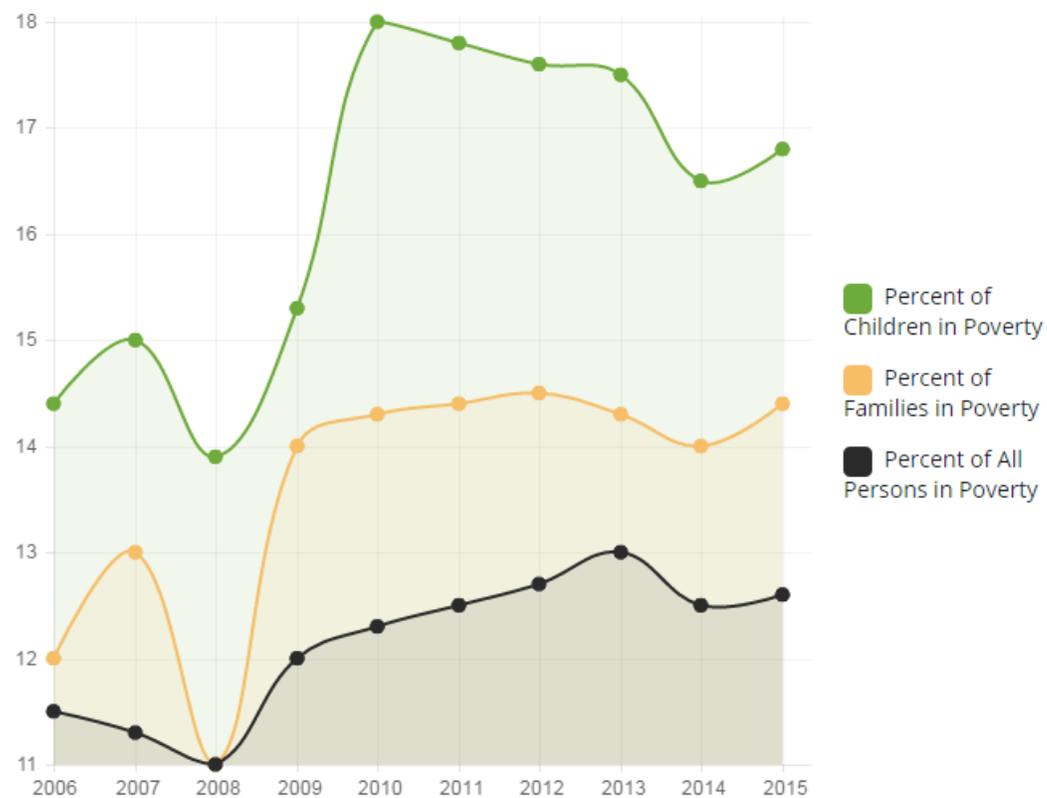
TRANSPORTATION & TAXES

¹ U.S. Census Bureau, 2015 American Community Survey 1-year estimates, Tables B19113B-I, C17010B-I.

² Assets and Opportunity Nebraska State Data, 2016.

POVERTY

Nebraska poverty (2006-2015)



Nebraska poverty by race/ethnicity (2014)	
Race/ethnicity	Percent of children in poverty (17 and under)
White, non-Hispanic	11.1%
Black/African American	46.0%
American Indian or Alaska Native	53.1%
Asian or Pacific Islander	18.0%
Some other race	29.2%
Two+ races	24.7%
Hispanic or Latino	33.0%

MAKING ENDS MEET

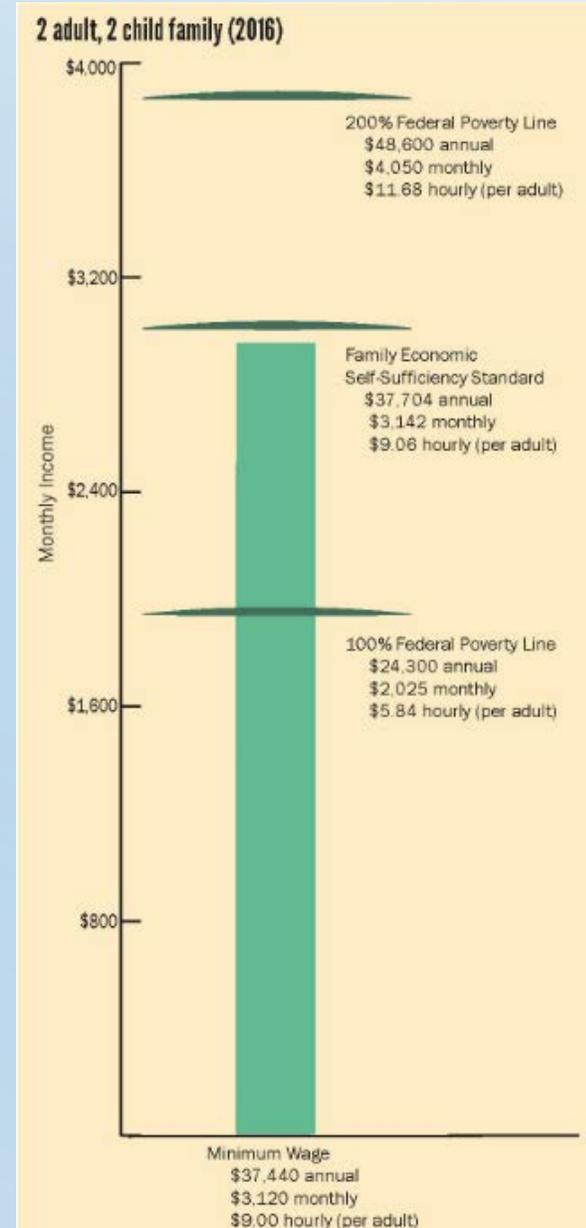
IN 2015,
75.6%
OF ALL CHILDREN HAD ALL AVAILABLE
PARENTS IN THE WORKFORCE

71.6%
OF CHILDREN UNDER 6 HAD ALL
AVAILABLE PARENTS IN THE
WORKFORCE

Source: U.S. Census Bureau, 2015 American Community Survey 1-year averages, Table B23008.

13,000 WORKERS IN NEBRASKA EARNED MINIMUM WAGE OR BELOW IN 2015.¹

28.9% OF NEBRASKA WORKERS WERE WORKING IN A LOW-WAGE JOB, MEANING THE MEDIAN ANNUAL PAY IS BELOW THE POVERTY LINE FOR A FAMILY OF FOUR.²



HUNGER



1 IN 7 NEBRASKA HOUSEHOLDS DON'T KNOW WHERE THEIR NEXT MEAL IS COMING FROM.¹

61% OF FOOD INSECURE CHILDREN ARE LIKELY ELIGIBLE FOR FEDERAL NUTRITION ASSISTANCE (2014).²

CHILD WELFARE

WHY DOES IT MATTER?

Keeping our children and youth safe is essential to their healthy development. Strengthening families so we prevent child abuse and neglect and acting quickly but thoughtfully to guarantee children have a safe, permanent, and loving home are key to ensuring every child can grow into a successful, independent adult.

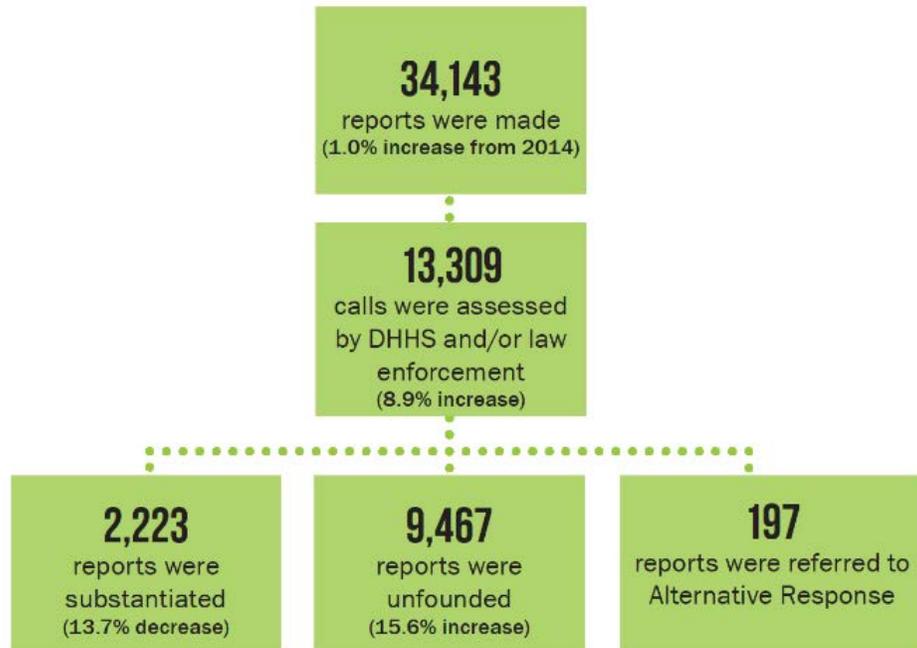
48.7% OF CHILDREN LIVING IN OUT-OF-HOME CARE WERE LIVING WITH RELATIVES OR KIN.

220 EMERGING ADULTS PARTICIPATED IN THE BRIDGE TO INDEPENDENCE PROGRAM.

Source: Nebraska Department of Health and Human Services (DHHS).

WHERE ARE THE DATA?

CHILD MALTREATMENT
ENTRIES
INVOLVEMENT IN CHILD WELFARE
ALTERNATIVE RESPONSE
STATE WARDS
OUT-OF-HOME PLACEMENTS
PLACEMENT STABILITY
PERMANENCY
AGING OUT



5,322 KIDS ENTERED THE CHILD WELFARE SYSTEM IN 2015.

3,020 (57%) WERE NON-COURT-INVOLVED (THE SAME AS 57% IN 2014).

2,302 (43%) WERE COURT-INVOLVED (THE SAME AS 43% IN 2014).

10,057 KIDS WERE INVOLVED IN THE CHILD WELFARE SYSTEM AT SOME POINT IN 2015.

6,681 (66%) FROM 3,680 FAMILIES WERE COURT-INVOLVED.

3,376 (34%) FROM 1,357 FAMILIES WERE NON-COURT-INVOLVED.

JUVENILE JUSTICE

WHY DOES IT MATTER?

Keeping our children and youth safe is essential to their healthy development. Responding to the troubling behaviors of children and youth in developmentally appropriate ways while promoting community safety is key to ensuring every child can build a successful, independent adult life.

61.8% OF YOUTH CASES IN JUVENILE COURT HAD ACCESS TO LEGAL COUNSEL IN 2015.

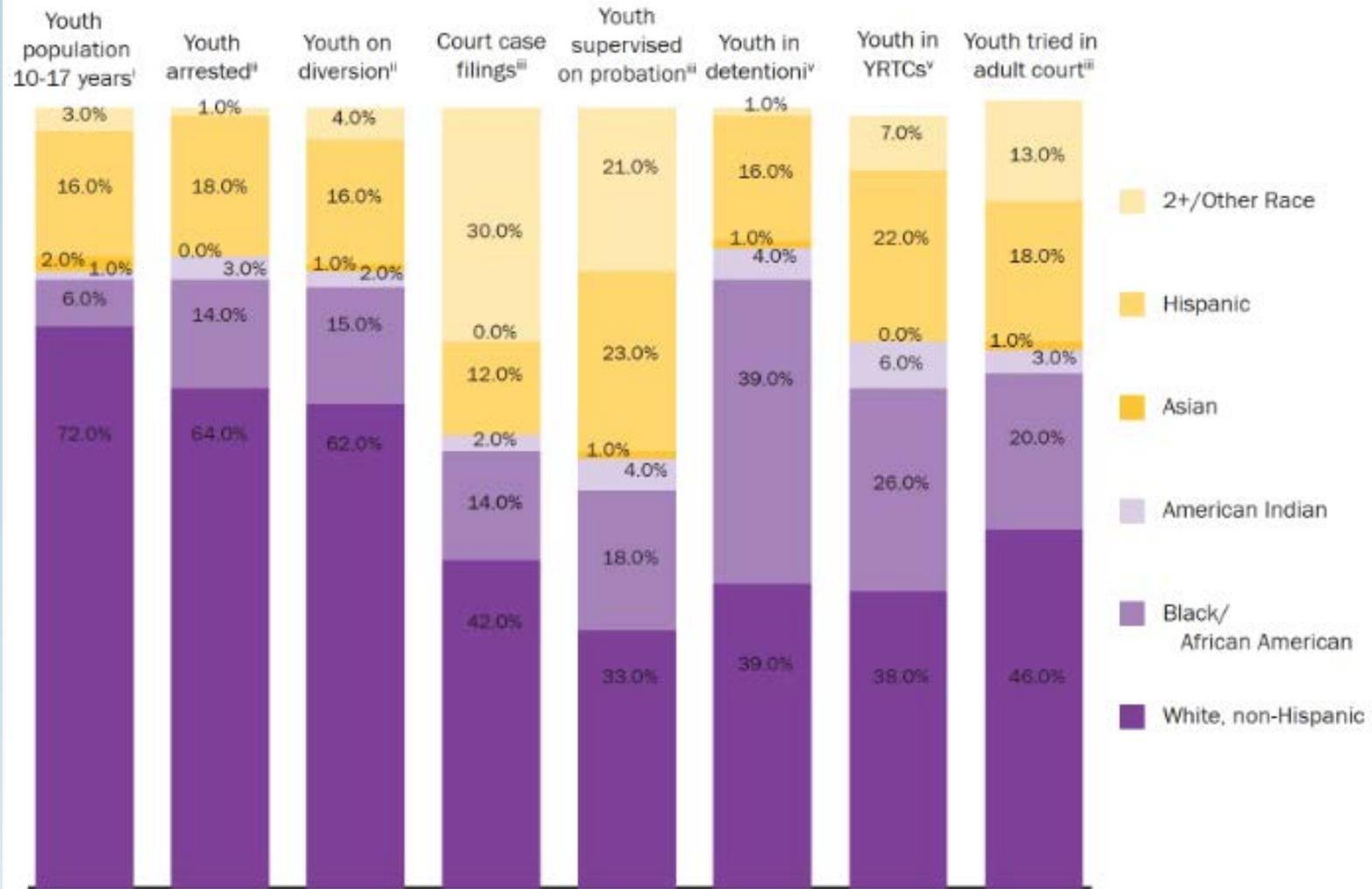
356 YOUTH CASES WERE PROSECUTED IN ADULT COURT IN 2015.

Source: JUSTICE, Administrative Office of the Courts.

WHERE ARE THE DATA?

ARRESTS
DISPROPORTIONATE MINORITY CONTACT
PRE-TRIAL DIVERSION
JUVENILE CASES
ACCESS TO COUNSEL
PROBATION
DETENTION
YOUTH REHABILITATION AND TREATMENT CENTERS
OFFICE OF JUVENILE SERVICES (OJS) WARDS
YOUTH TREATED AS ADULTS

Youth interaction with the justice system by race/ethnicity (2015)



ACCESS TO COUNSEL

	Criminal (adult) court			Juvenile court		
	Total cases	# with counsel	% with counsel	Total cases	# with counsel	% with counsel
Age						
10 & under	4	3	75%	75	37	49.3%
11-13	19	3	15.8%	878	544	62%
14-15	154	43	27.9%	2,204	1,328	60.3%
16	525	126	24%	1,846	1,136	61.5%
17	1,289	484	37.5%	1,718	1,102	64.1%
Gender						
Female	535	132	24.7%	2,105	1,210	57.5%
Male	1,389	496	35.7%	4,472	2,872	64.2%
Unknown	67	29	43.3%	144	65	45.1%
Race/Ethnicity						
American Indian	30	17	56.7%	119	68	57.1%
Asian or Pacific Islander	16	6	37.5%	34	26	76.5%
Black/African American	231	125	54.1%	1,070	936	87.5%
Hispanic	332	126	38%	744	440	59.1%
White	1,105	279	25.2%	2,743	1,627	59.3%
Other	12	5	41.7%	43	39	90.7%
Unknown	265	101	38.1%	1,968	1,011	51.4%
Total Cases	1,961	642	32.7%	6,602	4,079	61.8%

IN 2015, 356 YOUTH CASES WERE PROSECUTED IN NEBRASKA ADULT COURTS, DOWN FROM 1,972 IN 2014.

OF THE 356 YOUTH CASES, 13% WERE TRAFFIC CASES, 53% WERE MISDEMEANOR CASES, AND 33% WERE FELONY CASES.

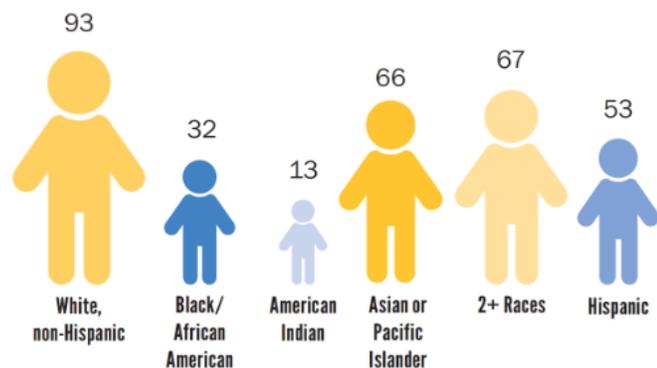
YOUTH CASES TRIED IN ADULT COURT (2015)

	Youth cases prosecuted in adult court		Sentenced to probation		Sentenced to jail		Sentenced to prison	
Male	281	78.9%	167	75.9%	89	75.4%	43	95.6%
Female	61	17.1%	45	20.5%	22	18.6%	0	0%
Unknown	14	3.9%	8	3.6%	7	5.9%	2	4.4%
10 & under	1	0.3%	0	0%	1	0.8%	0	0%
11 to 13	1	0.3%	0	0%	0	0%	1	2.2%
14 to 15	16	4.5%	10	4.5%	2	1.7%	4	8.9%
16	72	20.2%	50	22.7%	9	7.6%	14	31.1%
17	266	74.7%	160	72.7%	106	89.8%	26	57.8%
Total*	356		220		118		45	
White	163	45.8%	115	52.3%	47	39.8%	11	24.4%
Black/African American	71	19.9%	33	15%	23	19.5%	17	37.8%
Hispanic	63	17.7%	34	15.5%	24	20.3%	9	20%
American Indian	10	2.8%	5	2.3%	7	5.9%	1	2.2%
Asian	2	0.6%	2	0.9%	0	0%	0	0%
Unknown/other	47	13.2%	31	14.1%	17	14.4%	7	15.6%

INDEX OF RACE & OPPORTUNITY

Nebraska was founded under values of opportunity and equality for all, but when looking at the data and research on Nebraska's children and families, a harsher reality is uncovered— one of disparity and lack of equitable chance of future success and opportunity for children of color. In response to this, the Index of Race & Opportunity for Nebraska Children was created. A composite score of 13 indicators of child well-being was calculated to highlight disparities in opportunity and measure progress toward race equity and inclusion.

2015 INDEX OF RACE & OPPORTUNITY FOR NEBRASKA CHILDREN RESULTS (OUT OF 100 POSSIBLE POINTS)



7 KEY STEPS

Used to help advance and embed race equity and inclusion at all levels of policy creation

STEP 1

Establish an understanding of race equity and inclusion principles.

STEP 2

Engage affected populations and stakeholders.

STEP 3

Gather and analyze disaggregated data.

STEP 4

Conduct systems analysis of root causes of inequities.

STEP 5

Identify strategies and target resources to address root causes of inequities.

STEP 6

Conduct race equity impact assessment for all policies and decision-making.

STEP 7

Continuously evaluate effectiveness and adapt strategies.

INDICATORS USED INCLUDE

- CHILDREN WITH HEALTH INSURANCE COVERAGE
- INFANTS RECEIVING ADEQUATE PRENATAL CARE
- 3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL
- READING PROFICIENTLY AT 3RD GRADE
- 16-24-YEAR-OLDS EMPLOYED OR ATTENDING SCHOOL
- CHILDREN LIVING ABOVE THE FEDERAL POVERTY LINE
- MEDIAN FAMILY INCOME
- CHILDREN LIVING IN LOW-POVERTY AREAS
- CHILDREN NOT INVOLVED IN THE CHILD WELFARE SYSTEM
- CHILDREN WHO ARE WARDS OF THE STATE, BUT ARE LIVING AT HOME
- CHILDREN WHO ARE LIVING IN OUT-OF-HOME CARE, BUT HAVE DONE SO IN 3 OR FEWER PLACEMENTS
- YOUTH WHO HAVE COMPLETED A DIVERSION PROGRAM SUCCESSFULLY
- YOUTH WHO HAVE COMPLETED PROBATION SUCCESSFULLY

COMMENTARY: EMERGING ADULTS

A LOOK AT NEBRASKA'S 18-24-YEAR-OLDS

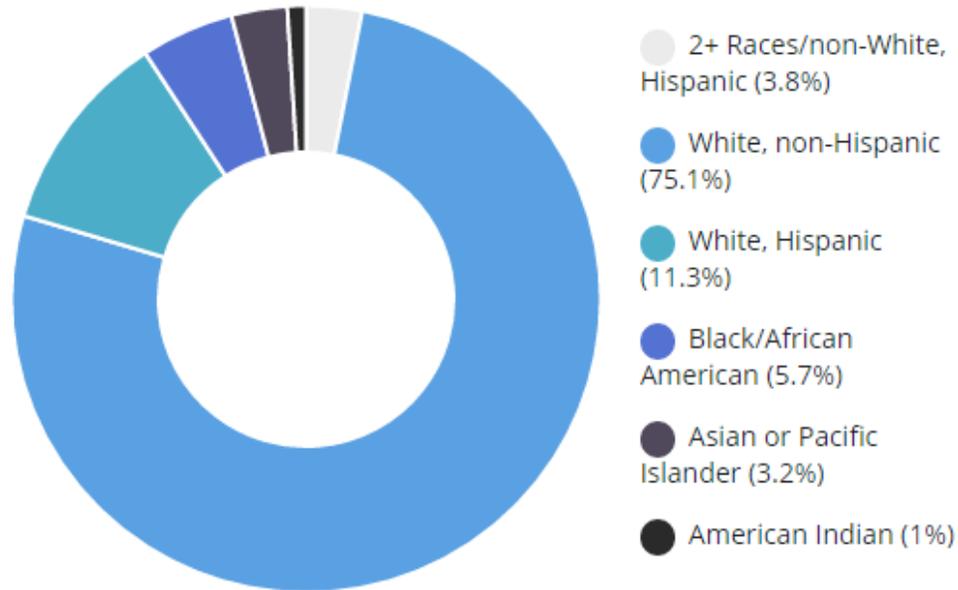
CHARACTERISTICS OF EMERGING ADULTS:

1. THE AGE OF INSTABILITY
2. THE AGE OF IDENTITY EXPLORATION
3. THE SELF-FOCUSED AGE
4. THE AGE OF FEELING IN BETWEEN
5. THE AGE OF POSSIBILITIES

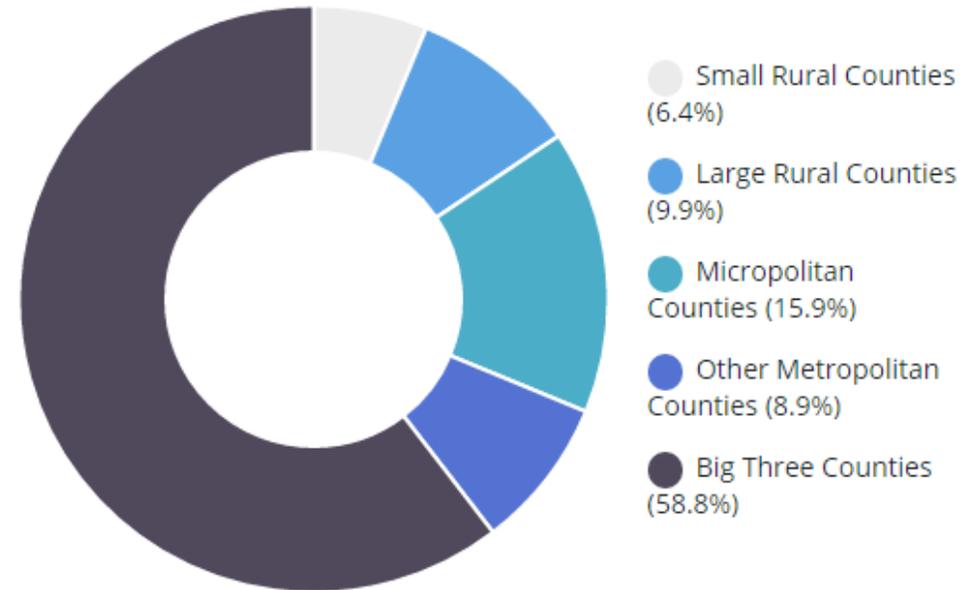
POPULATION

There were 192,774 18-24-year-olds living in Nebraska in 2015, comprising 10.2% of the state's population.⁴ Most are White, non-Hispanic (75.1%), and live in Douglas, Lancaster, or Sarpy counties (58.8%). Compared to the population as a whole, 18-24-year-old Nebraskans are more diverse and more urban with a greater portion of the population identifying as non-White and more of the population living in Nebraska's population hubs of the Lincoln and Omaha metropolitan areas.⁴ This follows current trends of Nebraska moving toward being more racially diverse and urban.⁵ This age group is also increasingly foreign born with 7.9% being born outside the United States in 2015, compared to 6.9% in 2010.⁶

18-24-year-old Nebraskans by race/ethnicity (2015)⁴

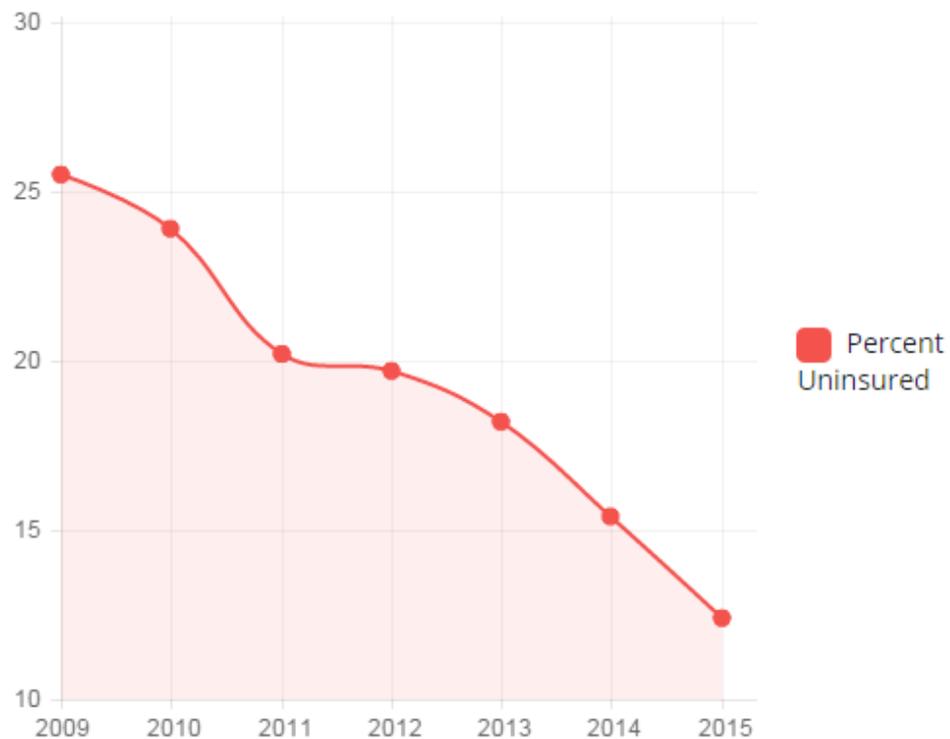


18-24-year-old Nebraskans by rurality (2015)⁴

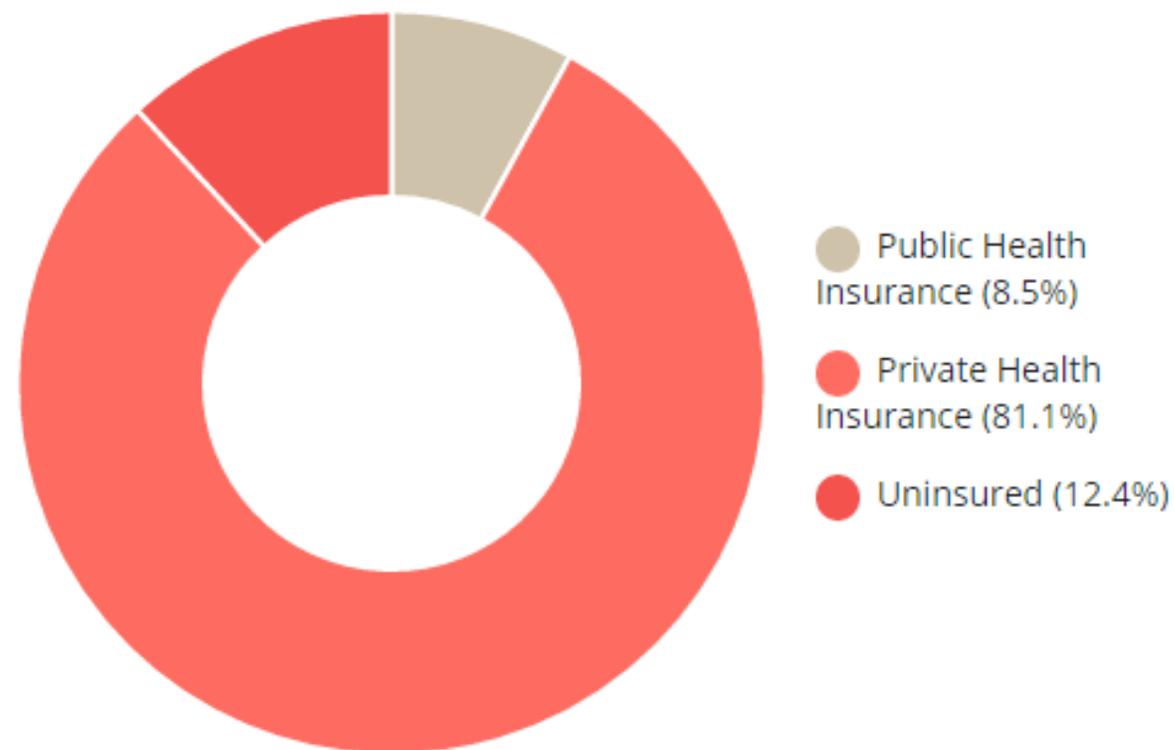


HEALTH INSURANCE

ACCESS TO HEALTH CARE

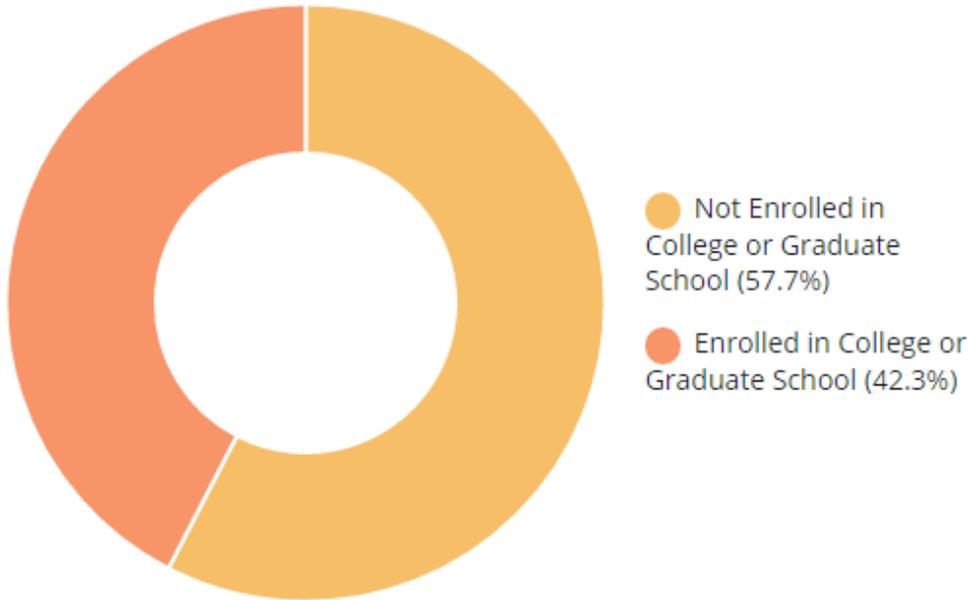


18-24-year-old Nebraskans health insurance by type (2015)¹²

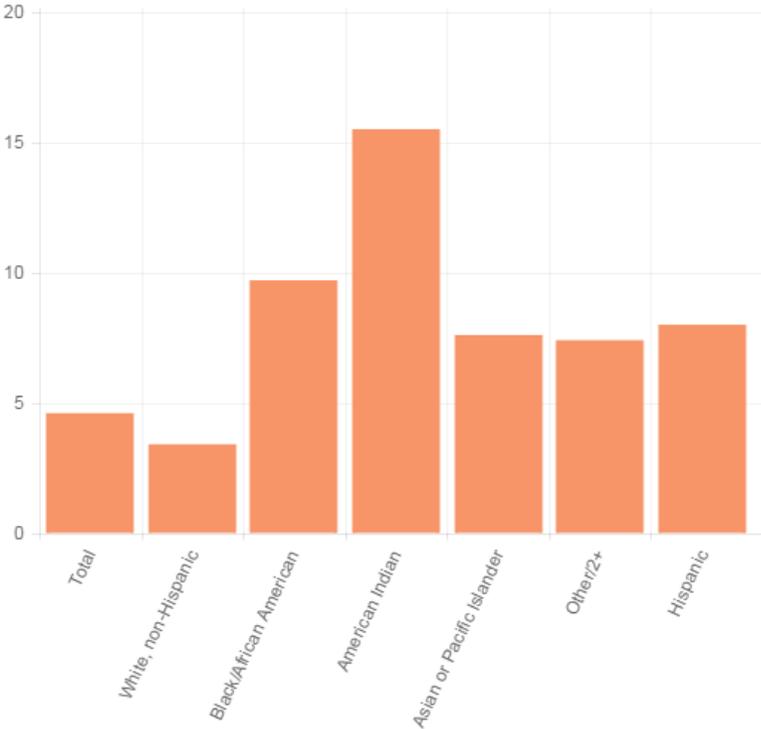


EDUCATION

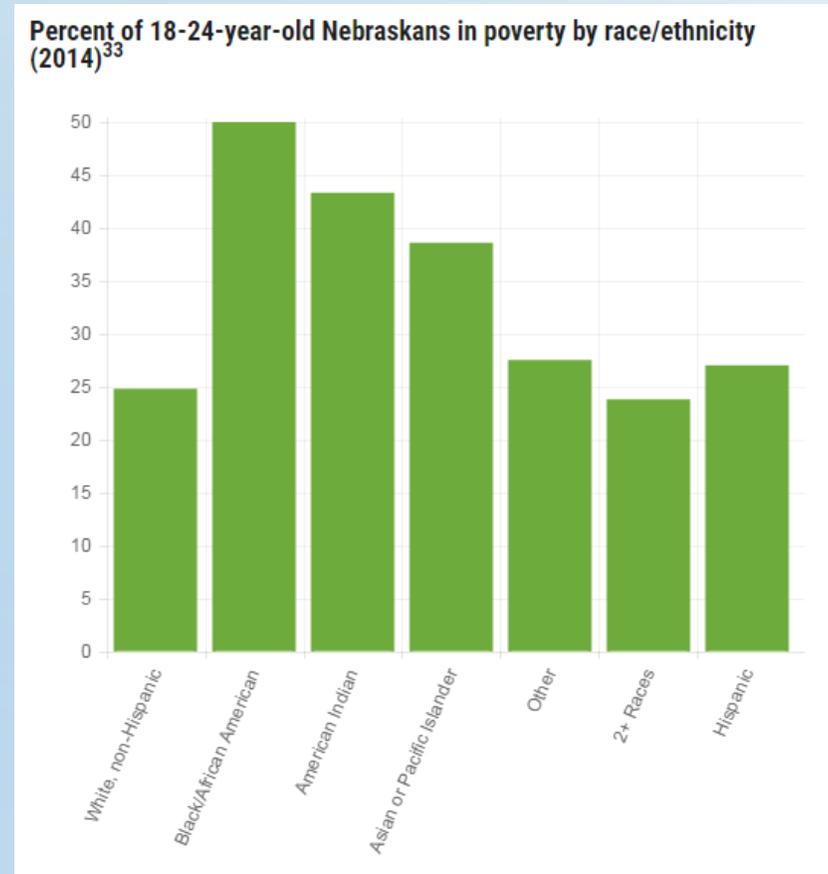
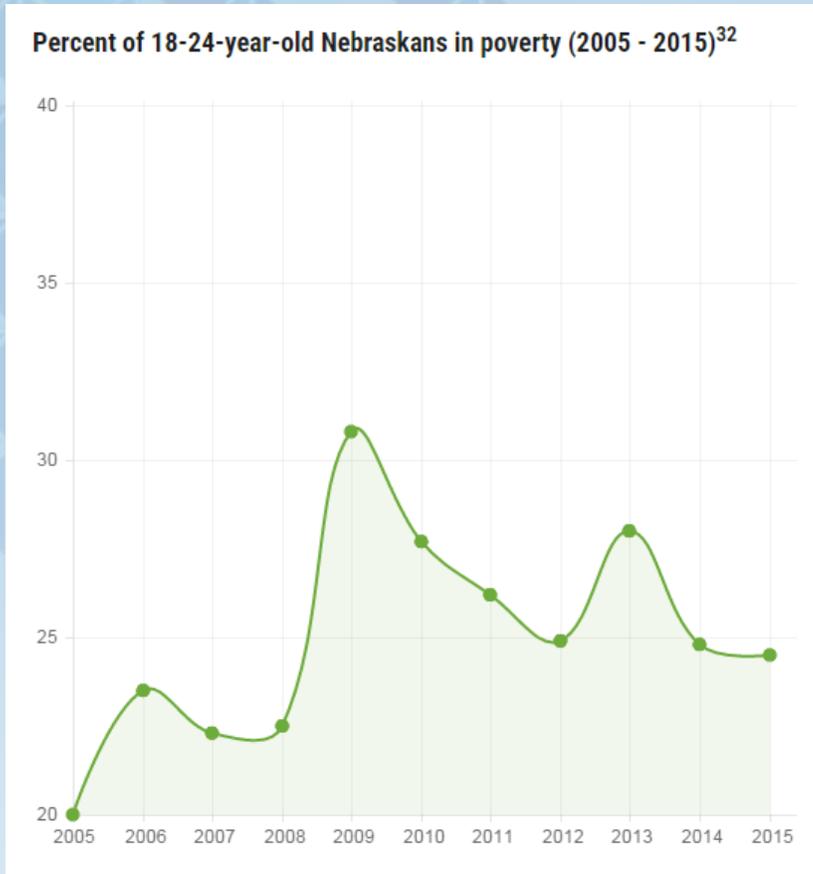
18-24-year old Nebraskans college or graduate school enrollment (2015)¹⁸



18-24-year-old Nebraskans not in school and not working (2014)²²



ECONOMIC STABILITY



7.8% of 20-24-year-olds are in the labor force, but unemployed

CHILD WELFARE

CONNECTED YOUTH INITIATIVE (CYI)²³

The CYI is a community-based grant with the purpose of assisting emerging adults with former involvement in the child welfare or juvenile justice system in accessing needed resources including:

- Coordinated services and resources
- Financial literacy and asset building programming
- Basic need services and supports
- Input from youth

BRIDGE TO INDEPENDENCE (B2I)²⁵

The b2i program provides stable support for emerging adults as they exit foster care and transition to independent living. The program is led by the young person with an Independence Coordinator available to help advise and work through options. B2i is available to all who have aged out of the foster care system up to age 21 as long as they are in school, employed, or participating in an employment program. Resources include:

- A dedicated Independence Coordinator
- Health Care Coverage through Medicaid or the ACA
- Monthly support payments

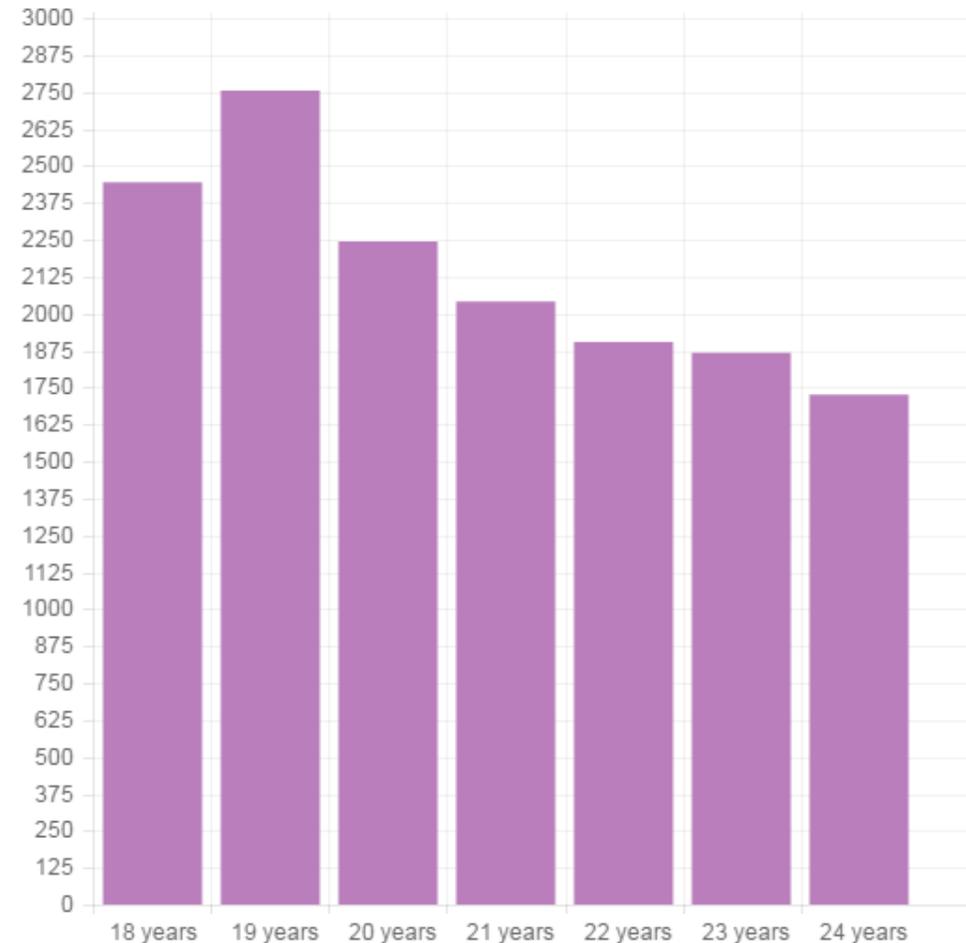
IN 2015, 86 NEBRASKA YOUTH WERE IN OUT-OF-HOME CARE ON THEIR 19TH BIRTHDAY, THEREBY "AGING OUT" OF THE SYSTEM.²⁴

JUSTICE AND PUBLIC SAFETY

Emerging adults who experience, witness, or feel threatened by violence frequently face long-term effects on physical health and mental health, and have an increased likelihood of committing an act of violence themselves.²⁶ Typically, law-breaking increases from late childhood and peaks in the teenage years with a slow decline during emerging adulthood years. This trend does not reach pre-pubescent levels until well after the transition to young adulthood has typically taken place.²⁷ Youth who began offending at a younger age are more likely to continue offending after their adolescent years, but by age 25, these offense rates dramatically drop off. Many young people who offend at ages 18-20 are likely to naturally desist these behaviors within few years following the offense.²⁵

14,966 ARRESTS OF EMERGING ADULTS AGES 18-24 WERE MADE IN NEBRASKA IN 2015; 10.9% WERE FOR MINOR IN POSSESSION OF ALCOHOL, A STATUS OFFENSE.²⁸

18-24-year-old Nebraskan arrests by age (2015)²⁸



TRANSITION TO ADULTHOOD

- MARRIAGE AND STARTING A FAMILY
- BECOMING FINANCIALLY INDEPENDENT
- ACCEPTING RESPONSIBILITY FOR ONE'S SELF
- MAKING INDEPENDENT DECISIONS
- TRANSITION AT DIFFERENT AGES DUE TO FAMILY INCOME

Births to 18-24-year-old Nebraska females (2005 - 2015)³⁷



RECOMMENDATIONS

1. PRESERVING FEATURES OF THE ACA RELEVANT TO EMERGING ADULTS.
2. EXPANDING SERVICES TO THOSE WHO AGE OUT OF THE STATE'S SYSTEMS TO AN OLDER AGE AND INCLUDE THE JUVENILE JUST POPULATION IN THESE SERVICES.
3. EXPANDING SUPPORTS IN HIGHER EDUCATION TO LOW-INCOME STUDENTS AND STUDENTS OF COLOR.
4. ELIMINATING DISPARITIES IN OUTCOMES FOR YOUNG PEOPLE OF COLOR.

QUESTIONS?

THANK YOU

CONTACT:

CHRISSY TONKINSON, MPH

RESEARCH COORDINATOR

CTONKINSON@VOICESFORCHILDREN.COM

402-597-3100

