



ACKNOWLEDGEMENTS

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Cover photos featuring Nebraska children Kids Count in Nebraska is a children's data and policy project of Voices for Children in Nebraska. Key indicators measure the well-being of children in five areas: health, education, economic stability, child welfare, and juvenile justice.

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An important component of this project is the Technical Team of Advisors, members of which provide data and expertise on child well-being in our state. The *Kids Count* Technical Team, comprising representatives from numerous agencies and organizations in Nebraska and other research experts, provides invaluable information for this project each year. Without their interest, support, and partnership, *Kids Count* would be impossible to produce.

Kids Count in Nebraska Reports from 2008 to 2024 are available for download at www.voicesforchildren.com/data-research/kids-count.

Additional copies of the *Kids Count in Nebraska 2024 Report*, are available from:

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Dear Kids Count Reader,

Welcome to the 32nd annual edition of the Kids Count in Nebraska Report!

At Voices for Children, our mission is to advocate for equitable opportunity for all children in Nebraska, and we believe that good data is a necessary starting point. You cannot know where you need to go without having a clear picture of where you are. But data alone cannot tell the full story of where systemic barriers lie for children and families, nor can it, by itself, propose solutions to crises of child health and well-being. This year's commentary focuses on a pressing issue affecting families across our state: the struggle to find affordable housing. This is a nuanced policy conversation that impacts not only family budgets, but the very fabric of our communities. As always, we share relevant data points and a set of recommendations highlighting the various policy levers that can be pulled. In doing so, we hope to highlight the opportunities we have as a state to ensure that every child has a safe and stable home as they grow.

This year's book comes to you through the support of the Annie E. Casey Foundation, the Edward and Sally Malashock Family Foundation, Mutual of Omaha, and other generous sponsors listed on page 2. As always, we couldn't bring you this product without the gracious assistance of our technical team of advisors and data providers throughout our state agencies, whose names you will find on the final pages. We are grateful for these partnerships, which allow us to continue to share the best data available.

We hope that this report will continue to inspire meaningful conversations. We extend our heartfelt thanks to everyone who has contributed to Kids Count in Nebraska over the years, and to all the partners involved in this edition.

Thank you for your dedication to the children of Nebraska.

Sincerely,

JULIET SUMMERS, JD EXECUTIVE DIRECTOR

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Josh Shut

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ABOUT VOICES FOR CHILDREN

Founded in 1987, Voices for Children in Nebraska has a 38-year track record of improving the lives of Nebraska's children and youth. As the independent, nonpartisan voice for children, we are not funded by state, federal, city, or county dollars. Our independence allows us to speak loud and clear and to shine the spotlight on the needs of children in our state.

MISSION:

At Voices for Children in Nebraska, we advocate for equitable opportunity for all chilldren in Nebraska through research, policy, and community engagement.

VISION:

We envision a Nebraska with strong communities where every child has all they need to lead a healthy, secure, and fulfilling life.

VALUES:

We keep children at the heart of everything we do and follow a core set of values that serve as a guide for our words and actions.

Integrity.

We serve as an independent and non-partisan voice to drive systems change.

Equity.

We intentionally center diversity, equity, inclusion, and accessibility in all we do.

Information.

We use research, data, and community input to inform our direction and guide our actions.

Courage.

We fight against the status quo when necessary to amplify youth's voices and transform systems.

Collaboration.

We listen and partner in order to support children and families according to their needs. VOICES FOR CHILDREN IN NEBRASKA'S 2025 BOARD OF DIRECTORS:

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PRO-KID POLICY PLAN



CHILDREN ARE OUR STATE'S GREATEST RESOURCE, AND THE DECISIONS OUR LEADERS MAKE ABOUT THEM IMPACT OUR COLLECTIVE FUTURE.

Voices for Children in Nebraska has developed the following Pro-Kid Policy Plan, focusing on the issues of health, economic stability, child welfare, and juvenile justice. Our policy priorities are guided by research, data, and proven best practices that improve child

well-being. We pay close attention to the impact of race, socioeconomic status, and geography, and seek to remove barriers to opportunity within these areas. This plan represents our vision for a Nebraska where strong communities allow all children to thrive.

VOICES FOR CHILDREN WORKS TO ENSURE THAT:

HEALTH



Children and families have access to affordable, quality physical and behavioral health care. Consistent and preventive health care gives children the best start to grow up to be healthy and productive adults.



ECONOMIC STABILITY

Families are able to achieve financial security, and children's basic needs are met. State economic policies support families in trying to build a better future and balance work and family life.



CHILD WELFARE

Children grow up in safe, permanent, and loving homes. An effective child welfare system strengthens families and minimizes trauma through timely and appropriate action.



JUVENILE JUSTICE

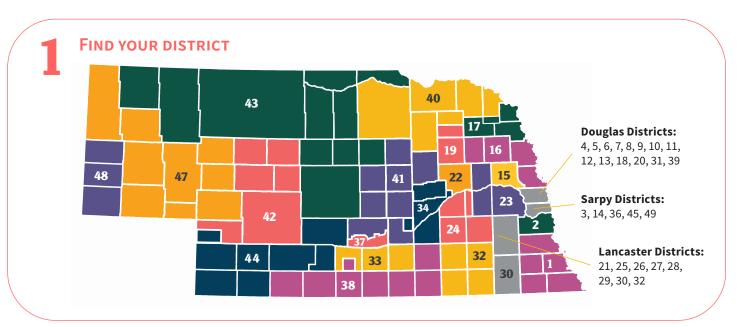
Youth are held accountable for their actions in developmentally appropriate ways that promote community safety and allow them to grow into responsible citizens.



CONTACTING ELECTED OFFICIALS

HOW TO USE YOUR VOICE ON BEHALF OF CHILDREN

Do you have something to share with elected officials about children's issues? It's easy to contact policymakers using these tools—a legislative map, contact information for your representatives, and a wealth of information and data at your fingertips.



IDENTIFY YOUR ELECTED OFFICIAL OR OFFICIALS

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| U.S. Senator: Pete Ricketts | (202)224-4224 | www.ricketts.senate.gov |
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3 KNOW YOUR ISSUES, SHARE YOUR DATA

www.voicesforchildren.com contains a wealth of information including:

- Legislative Priority bills
- AdvoKid Newsletter
- Kids Count interactive data tool
- Electronic version of the *Kids Count in Nebraska Report*

To stay current on children's legislative issues, sign up for our free **AdvoKid email alerts** on our website to help you respond to the issues affecting children in the unicameral.

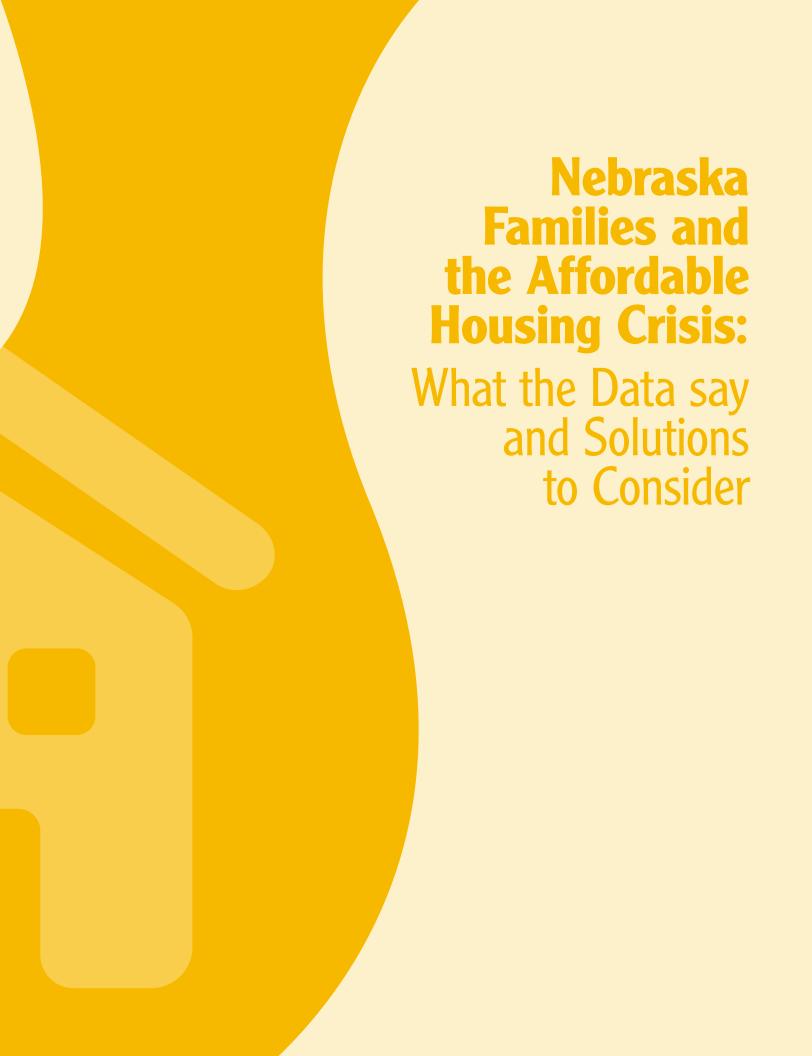
To access Kids Count Nebraska data on the go, visit **www.kidscountnebraska.com** for our interactive state data tool.

To use the KIDS COUNT
Data Center – the interactive
home of national, state,
and county level data, visit
www.datacenter.kidscount.org.

To view the legislative calendar, read bills, listen live, and more, visit www.nebraskalegislature.gov.

Commentary





A quality and affordable place to call home is perhaps the most important need for families. As a lived-in value, a home is a private place where families share meals, play, pursue hobbies, cuddle up for movie night, get ready for and unwind from a busy day. The home, in other words, provides value as a stable space to be vulnerable and to care for and support the growth of each household member. For children, a safe home is where foundational memories are made and security is most deeply felt. By contrast, as an investment value, housing is primarily viewed as a property asset with the potential to increase in market value and generate monetary wealth.

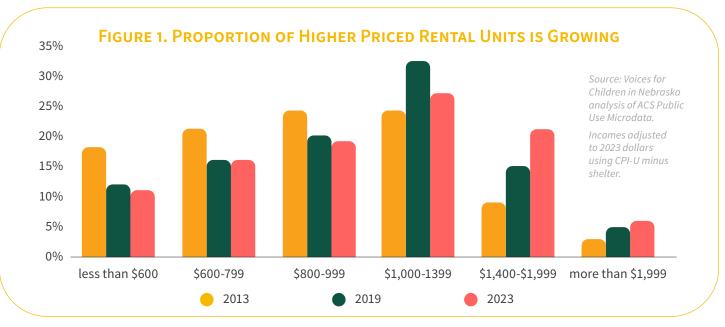
Unfortunately, for homeowners and renters alike, what we are seeing play out right now is a conflict between the lived-in value and investment value of a home. Families are less able to maintain stable housing at affordable rates. As the following sections show, securing stable and affordable housing has become increasingly difficult over the past 40 to 50 years as both rents and the price of owning a home have outpaced income gains. Among the reasons for the rise in rents include increased construction costs, local zoning and landuse regulations on multi-family units, a general shift by apartment developers to upgrade existing units for renters with higher incomes, and by the growing presence of institutional investors in the market.

Children deserve our efforts to ensure their basic needs are met, and their families' ability to provide a safe and stable home is high among them. Solving today's affordable housing challenges will require rethinking existing regulations, increasing wages for workers, and systemic commitment to balancing the conflict between a home as a lived-in value and an investment value: ensuring every child has a home to grow up in.

RISING RENTS

As of 2023, 28% of Nebraska families with children are renters. In the rental market, renters value the rental unit as a space to live, while the landlord sees the space as an investment value by which to obtain passive income. For this reason, rises in rents impact renters and landlords differently. As the data below shows, the balance between these two conflicting values has shifted to the side of landlords as rents are increasing for families and absorbing a larger portion of the family budget.

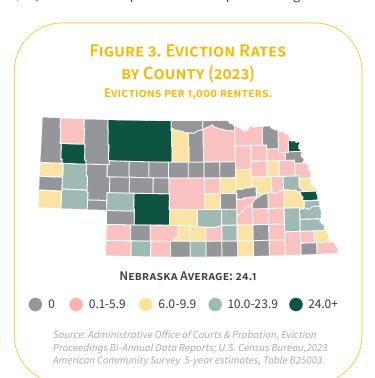
For instance, **Figure 1** breaks down the percentage of rental units in Nebraska into six different price ranges. Longitudinal data show that rental units in the three lowest price ranges are making up a smaller portion of the rental market. In 2013, units with contract rents under \$1,000 made up 63% of the market, compared to just 46% by 2023 (all prices adjusted for inflation). Meanwhile the proportion of units renting at the two highest ranges saw dramatic increases. Units with monthly rents between \$1,400 to \$1,999 increased by 118%, and there was a 97% increase in units charging \$2,000 or more.

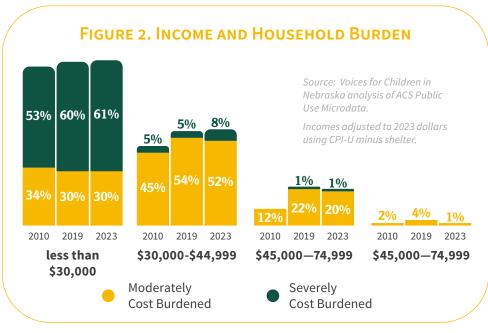




Unfortunately, the increased presence of high rental prices does not necessarily mean more Nebraskans are earning high incomes and can therefore afford these rents. The National Low Income Housing Coalition estimates that Nebraska has a shortage of 45,275 affordable and available units for renters at or below the poverty line." In fact, as **Figure 2** shows, rising rents are leading to more cost-burdened families, meaning more families spend 30% or more of their income on rent. Among households with children making less than \$30,000, 91% were cost-burdened in 2023, compared to 87% in 2010. Even

worse, this rise among the lowest income group is due to the jump in families spending more than half their income on rent--from 53% in 2010 to 61% in 2023. Cost burden among families making between \$30,000 and \$44,999 jumped from 50% in 2010 to 59% in 2023. Meanwhile, from 2010 to 2023, an 84% increase in the total cost burden families occurred. Only families making \$75,000 or more experienced a drop in housing burden.





With rents and cost burdens rising, Nebraska's renters face the threat of eviction and even homelessness. In 2023, Nebraska's statewide eviction rate stood at 24.1 per 1,000 renters. Evictions rates, however, vary greatly by county. As shown in **Figure 3**, Nebraska's three most populous counties have higher eviction rates. Douglas County, the most populous county in Nebraska, had the highest eviction rate (43.4), while Lancaster (20.0) ranked 9th and Sarpy (16.9) ranked 11th overall. However, renters in more rural counties are not immune to eviction. Along with Douglas, Cherry (39.0), Lincoln (25.6), Dakota (24.4), and Box Butte (24.3) have the five highest evictions rates among the 93 total counties in Nebraska.

Evictions threaten the livelihood of renters and can lead to homelessness, which is particularly detrimental to child development. In 2023, there were 4,629 homeless individuals in Nebraska, including 987 youth under the age of 19.ⁱⁱⁱ Families and children are greatly impacted by evictions even if it doesn't lead to homelessness. Most landlords disqualify potential renters if they have an eviction record. This in turn causes children to switch schools, families to lose their possessions, jobs, and to relocate to neighborhoods with higher levels of crime and poverty. Evictions also have pronounced effects on health. Studies have shown that adverse birth outcomes are more likely among babies born to a mother who experienced an eviction during pregnancy.^{iv}

THE RISING COST OF HOME OWNERSHIP

In contrast to the rental market, a family homeowner values their home as both a place to live and an investment asset. However, this does not resolve the conflict between the two values, but instead pushes it onto young families attempting to enter the market. Homes have become valuable assets that bring significant return on investment for their owners. This is generally thought of as a good thing and policies over the past 40 to 50 years have encouraged the appreciation of housing assets. The inflation of home prices, however, has occurred while incomes for many households have stagnated. As a result, young families today must increasingly rely on intergenerational wealth transfers that have often, at least in part, been formed through the gains their parents and grandparents made on housing assets.

To understand this dynamic, compare the percentage change in U.S. mean household income to the percentage change in the Nebraska Housing Index. As shown in **Figure 4**, from 1979 to 2023, the Nebraska Housing Index rose 424%. Meanwhile, the household earnings for each fifth and the top 5% of state earners were modest by comparison.

Adjusted for inflation, from 1979 to 2023:

- the bottom fifth of household earners increased earnings by 20%
- the second fifth by 30%
- the middle fifth by 33%
- the fourth fifth by 46%
- the highest fifth by 87%
- the top 5% by 117%

Another way of thinking about this is to imagine if household earnings since 1979 had increased by 424%, just as the housing index did. Under such a scenario, the bottom fifth of households in 2023 would have earned \$77,238, which is only a couple thousand dollars lower than what the middle fifth actually earned. Furthermore, a 424% increase in household earnings would put the second fifth of household earners at \$192,127 a year. Meanwhile, the middle fifth, who actually earned \$80,730 in 2023, would have made \$316,704.

The home price to income ratio is another good way of illustrating this imbalance. In May of 2023, the median listing price for a home in Nebraska was \$371,600. For buyers on the market, it is recommended that the home price to income ratio not exceed 3.0; that is, that the value of a home is not more than three times the buyer's annual income earnings.

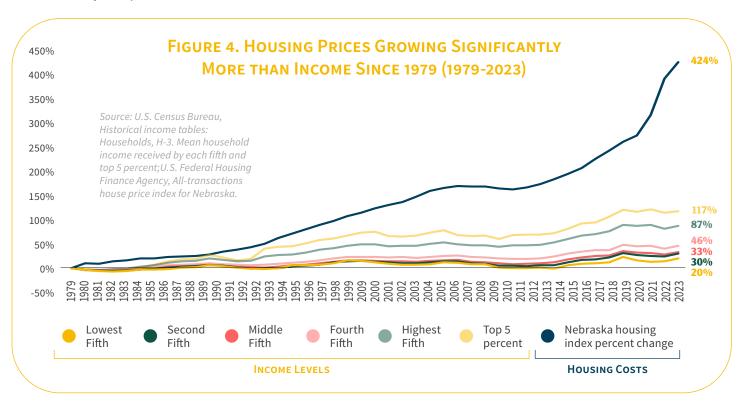
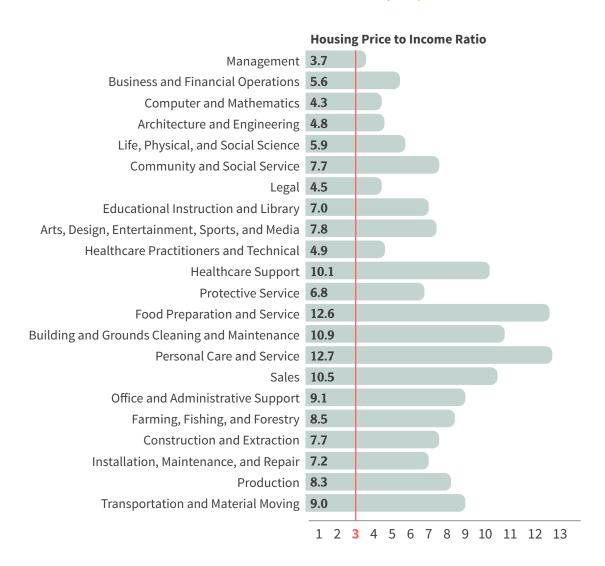




FIGURE 5. HOME PRICE TO INCOME RATIO:

ANNUAL MEDIAN WAGES FOR ALL OCCUPATIONS GROUPINGS FALL SHORT OF RECOMMENDED RATIO OF 3.0 (2023)



Source: U.S. Bureau of Labor Statistics; Realtor.com, Housing Inventory: Median Listing Price in Nebraska [MEDLISPRINE], retrieved from FRED, Federal Reserve Bank of St. Louis; https://fred.stlouisfed.org/series/MEDLISPRINE.

Figure 5 provides this ratio using the median listing price for homes in Nebraska and the median annual income for 22 major occupation groupings in May of 2023. It shows that none of the occupation groupings earn enough to meet the recommended ratio of 3.0. Management occupations, with an annual median

income of \$100,710, come closest with a ratio of 3.7. Computer and math (4.3), legal (4.5), architecture and engineering (4.8), and healthcare practitioner and technician (4.9) are the only other occupation groupings with a ratio under 5.

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COMMENTARY

Addressing Affordable Housing Crisis

Every child deserves a stable, quality, and affordable place to call home. But, as the data show, it is becoming more and more difficult for Nebraskan families to find affordable housing. Solving the affordable housing crisis requires addressing problems of supply and stagnating income.

Addressing the Problem 1: Zoning and Land-Use Regulations

While demand for housing varies by locality (i.e. the level of population growth and income levels of new residents), it is nonetheless a demand we all share and must meet. The challenge, then, is to supply the right type of housing, at the right locations, and at the right price points.

Regulations do certainly add costs to builders which are then passed on to consumers. For instance, a 2022 survey conducted by the University of Nebraska at Omaha asked single-family homebuilders in the Omaha area about the costs of government regulation. It estimates that regulations account for 32.8% of total construction costs in Omaha, compared to a national average of 21.5%. Building codes and architectural design standards beyond the ordinary were cited as the mostly costly types of regulations. Of course, regulations are implemented for a reason, often to ensure that housing is structurally safe and meeting certain standards of quality. Nonetheless, as Bartle and Song point out regarding their survey findings, "if costs can be reduced while still achieving regulatory goals, governments should consider reform".vii

In addition, zoning and land-use regulations often hinder the supply of multi-family housing options—from duplexes to large apartment buildings—as well as affordable manufactured and modular housing options. Even when such housing developments get initial approval, residents often fight the development. These concerns can range from the preservation of historic buildings, increased traffic, or possible forced evictions that will occur. Among homeowners, there is also a fear that the investment value of their nearby single-family

home will fall. In this regard, local officials play a pivotal role in balancing the competing interests of developers and existing homeowners with the need to supply affordable housing options for all income levels. Nebraska can also promote manufactured and modular homes working with other states to develop uniform building codes. Manufactured homes are built entirely off-site in factories and then placed on a permanent trailer chassis. Similarly, modular homes are constructed in sets off-site and then attached together on a permanent foundation at the construction site. The move from craft production to industrial production has lowered cost and increased the output for a wide range of products. But housing construction still largely follows a model in which various craftworkers arrive on site and each complete their section of the house. By contrast, manufactured and modular companies accelerate the homebuilding process through the industrialization of the work process, helping to reduce the costs and time of construction. Advances in production have also increased the quality of these homes, making them secure and affordable options for families. Standardizing codes among states can lead to even more streamlined production processes, therein reducing costs even more.

Nebraska can also consider developing grants and programs for builders and buyers alike to encourage manufactured and modular building. Doing so can help builders raise more capital, allowing them to invest in and implement new technologies in the factory.

ADDRESSING THE PROBLEM 2: INSTITUTIONAL INVESTORS

The housing market is also impacted by the growing presence of institutional investors. Institutional investors pool money and invest millions--even billions--of dollars into purchasing real estate properties. Traditionally, institutional investment was confined to office buildings, but by the 1990s, these firms entered the housing rental market by purchasing apartment buildings. Eventually, when a growing number of people defaulted on their mortgage during the housing market crash of 2008, institutional investors saw a buy low, sell high opportunity in the single-family residential market.xi



As a result, potential single-family residential home buyers have increasingly found themselves not only competing against each other, but against institutional investors willing to provide an all-cash offer for a property in "as is" condition. According to a report by the National Association of Realtors, institutional investors convert 42% of their purchased homes to rentals, while 45% are sold back on the market. As of 2022, institutional investors owned 5% of single-family rental homes, up from 1% in 2012, and, according to an analysis by one institutional investor, may control 40% of U.S. single-family rental homes by 2030.xii

These investors tend to target lower cost homes in urban areas experiencing population growth, thus reducing the supply of homes for families in these localities. Investors also tend to cluster their purchases in particular neighborhoods and, by doing so, achieve the economies of scale necessary to drive up rents. At the same time, these new corporate landlords have been criticized for providing fewer necessary repairs and for evicting residents at a higher rate than small landlords. Viv

Institutional investors are contributing to unaffordable housing around the world.*v Although their presence is not as prominent in Nebraska as other places, particularly the U.S. Sunbelt, institutional investors are establishing a growing presence in the state and attempts should be made to curb the power of institutional investors.*vi

Some localities are attempting to impose waiting periods on foreclosed houses that an investment firm bids on. The idea is to allow non-profits or tenants an opportunity to buy the property by outbidding the initial sale. Other places, like Atlanta, where institutional investors are particularly active, are attempting to limit the number of properties purchased by a single business firm. The prime minister of Spain is taking a more drastic step by placing a 100% tax on property purchases made by foreign institutional.xvii Finally, the governor of New York is proposing a 75-day waiting period before institutional investors can make an offer on one- or two-family homes, while also limiting tax benefits to the investors. xviii Nebraska need not wait for more institutional housing investment growth before taking similar action to ensure affordable housing for individuals and families.

Addressing the Problem 3: Evictions and Protections for Renters

As noted above, evictions lead to job losses, poorer health outcomes, worsening community life, and school disruption for families with children. Evictions are not simply the result of poverty among renters but a cause of poverty due to these disruptions. **Nebraska can increase housing and community stability for families in multiple ways.

Approximately 11,000 Nebraskans rely on housing vouchers to help cover the cost of rising rents. But housing vouchers are not accepted by all landlords, resulting in renters moving further from jobs, family supports, or schools. Banning housing discrimination based on source of income would give renters more choice of where they live.

Nebraska can also place caps on application and other fees charged by landlords, including late payment fees. Colorado, for instance, caps late fees at \$50 or 5%, whichever is greater.**

To prevent evictions from occurring, 23 states currently offer tax credits for renters. For example, Iowa offers up to \$1,000 in tax reimbursements for renters. Michigan offers a \$1,7000 tax credit, while Minnesota offers up to \$2,640 in tax credits for eligible renters.

If an eviction does occur, renters need adequate time to gather their belongings and find new housing. To help renters in this time of crisis, Nebraska can institute rules to ensure tenants have at least 10 days to move following an eviction judgement. Further, having an eviction on record, including an eviction hearing that the renter wins, often limits an individual when trying to rent in the future. Nebraska can help renters by removing evictions records that resulted in a dismissal and allowing an eviction judgement to be sealed after three years.

Addressing the Problem 4: Increase Wages and Protections for Workers

At the same time, housing affordability will only occur if we simultaneouslyseek solutions to stagnating household incomes. In the postwar era economic boom, wages rose in-step with workplace productivity gains.

That began to change around 1973, when, although productivity continued to rise, wages began to stagnate. To reverse this trend, Nebraska can take steps to strengthen union rights, raise the minimum wage, and provide benefits like paid sick leave.

Unions strengthen the power of workers by bargaining collectively for better wages and work conditions. Unionized workers earn higher wages than non-unionized workers. Lower-wage workers, workers of color, and workers with lower levels of education benefit the most from unions. XXIII

Nebraska's status as a Right-to-Work state hinders unionization efforts, primarily by making the collection of union fees more difficult. While many blame the offshoring of industrial jobs to countries with cheaper labor and fewer labor protections, business firms already utilize this strategy within the U.S. by moving production to one of the now 26 Right-to-Work states. Studies show that Right-to-Work states lead to declines in wages and increases inequality, creating a race to the bottom effect within the country. Nebraska can lead the way in reversing the decline in unionization by ending its status as a Right-to-Work state.

While unionization is often associated with industrial labor and the public workforce, a growing proportion of jobs today provide support services and care oriented work. These jobs are typically low paying, offer limited benefits such as paid sick leave, and are subject to irregular scheduling. Increasing unionization among this growing class of service workers can help address these shortcomings.

Nebraska can also help these workers by continuing to raise the minimum wage, providing and promoting paid sick leave, and addressing the misclassification of workers. Nebraskans already voted for the former two policies through ballot measures. Many Nebraskans voted for these measures based on their own experiences of trying to pay for housing, food, and transportation on inadequate wages. Nebraskan families also know from experience that illness can strike any family member at any time. Parents, then, need time off to care for themselves and their family. Again, families know from experience that, at these moments, the stability of their housing and financial security should not be threatened by an illness in the family.

MOVING FORWARD

There is not enough time and space here to address all the complex reasons for and solutions to the current housing crisis. However, the data herein clearly shows the cost of renting and owning a home is rising in ways that are challenging family security. To ensure Nebraska children reap the benefits of a safe and secure home, we must address the contradiction between what we have called the lived-in value and the investment value of a home. For families, owning a home once offered a way to earn back the money they paid into it, while perhaps earning a modest return on the investment. By contrast, beginning in the 1980s, owning a housing asset has offered a substantial return on investment for those able to enter the market. Unfortunately, stagnating household incomes have made it more difficult for a new generation of family to become homeowners or find affordable rental units.

To truly address the unaffordable housing crisis, we must ask how the majority of Nebraskans should be generating wealth—through the income they earn from working or through the ownership of assets like housing. And it will also require honest discussion about how we balance the value of a home as a place to live and the value of the home as an investment. It's a conversation Nebraska needs to have, because every child deserves a place to call home.



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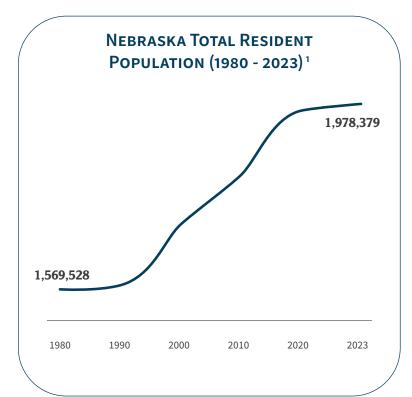
Population

The premise of Kids Count is and has always been that good data can help drive good decisions. Without knowing where children, families, and our communities stand now, we cannot know where the most effective solutions lie. The U.S. Census, taken every 10 years, and the American Community Survey, taken every year, are two of the most important tools for learning how communities are faring. Utilizing these tools, the following section provides a demographic snapshot of Nebraska.



POPULATION





1,978,379

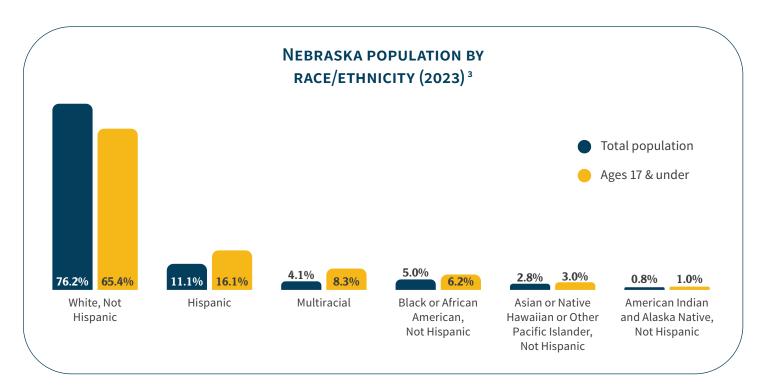
people lived in Nebraska in 2023.¹

480,998

children under age 18 lived in Nebraska
in 2023.²

24.5%

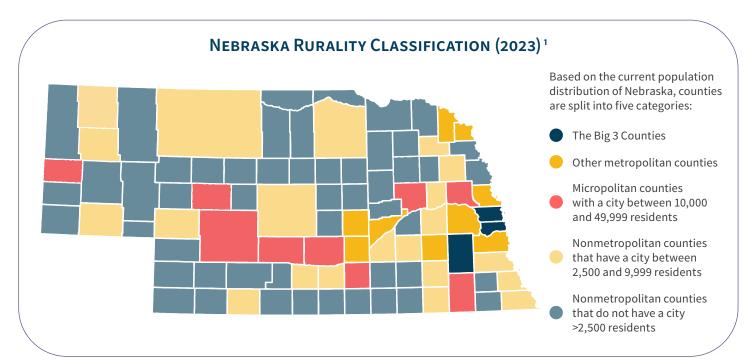
of Nebraskans were of color in 2023.³
This is expected to increase to
38% by 2050.⁴

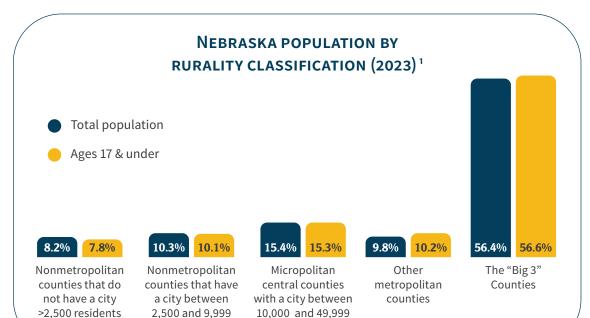


U.S. Census Bureau, Population Division, Annual Population Estimates.
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 Center for Public Affairs Research (CPAR) and Office of Latino/Latin American Studies (OLLAS), UNO, Nebraska Population Projections to 2050 and Implications.



POPULATION





residents

56.4%

of Nebraska children lived in the "Big 3" counties in 2023.1

17.2%

of Nebraskans were **65 or older** in 2023.² This is expected to increase to **21.0% by 2050**.²

NEBRASKA POPULATION BY AGE (2023)³

Under 19 years **25.7%**

residents

19-64 years **57.2%**

65+ years **17.2%**

POPULATION



NEBRASKA CHILDREN BY AGE (2023)

Under 5 years 24.3%

5-9 years **26.5**%

10-14 years **26.9**%

15-18 years **22.2%**

Sources: U.S. Census Bureau, Population Division, Annual Estimates of the Resident Population by Single Year of Age and Sex for Nebraska: April 1, 2020 to July 1, 2023.

NEBRASKA HOUSEHOLDS WITH CHILDREN BY HOUSEHOLD TYPE (2023)



In married-couple household

8.2%

In cohabiting couple household

4.3%

In male householder, no spouse/partner present household 15.9%

In female householder, no spouse/partner present household

Sources: U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table B09005.

903

children lived in group quarters in 2023. 1

3,878

children lived with their grandparent(s) without a parent present in 2023.² 3,833

children lived in non-family households in 2023.³

28.4%

of Nebraska children lived with an unmarried or single parent in 2023.4

^{1.} U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table B09001.

^{2.} U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table B10002.

^{3.} U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table B09010.

^{4.} U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table B09005.





HEALTH

- Children with health insurance coverage
- Babies born at normal birth rate (5.5 pounds or more)

EDUCATION

- 3 to 5 year-olds enrolled in school
- 3rd graders proficienct in English Language Arts
- Young Adults Ages 19 to 26 who are in school or working



ECONOMIC STABILITY

- Children living above the Federal Poverty Level
- Median family income
- Children living in households with no housing cost burden



CHILD WELFARE

- Children not involved in the child welfare system
- State Wards receiving in-home services
- Children with three or fewer out-of-home placements



JUVENILE JUSTICE

- Successfully completed diversion
- Youth not in juvenile detention facilities

Nebraska was founded under values of opportunity and equality for all, but when looking at the data 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.

OVERALL INDEX SCORES OUT OF A POSSIBLE 100 (2023)

American Indian | 23

Asian/Pacific Islander | 73

Black/African American | 13

Hispanic | 52

Multiracial | 54

White, non-Hispanic | 90

Source: In-house analysis.

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.



CHILDREN WITH HEALTH INSURANCE COVERAGE (2023)

American Indian | 90.5%

Asian/Pacific Islander | 92.7%

Black/African American | 92.7%

Hispanic | **90.8**%

Multiracial | 91.4%

White, non-Hispanic | 96.6%

Source: U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table C27001B-I.

Babies Born at Normal Birth Rate (5.5 pounds or more) (2023)

American Indian | 90.6%

Asian/Pacific Islander | **89.3**%

Black/African American | **86.6**%

Hispanic | **92.1**%

Multiracial | **89.8**%

White, non-Hispanic | 92.8%

Source: National Center for Health Statistics, final natality data.

3 TO 5-YEAR OLDS ENROLLED IN SCHOOL (2023)

American Indian | 43.2%

Asian/Pacific Islander | 68.1%

Black/African American | 48.0%

Hispanic | **50.6**%

Multiracial | 48.9%

White, non-Hispanic | 58.0%

Source: U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Public Use Microdata Samples.

3RD GRADERS PROFICIENT IN ENGLISH LANGUAGE ARTS (2022-23)

American Indian | 35.0%

Asian/Pacific Islander | **61.0**%

Black/African American | 38.0%

Hispanic | **45.0**%

Multiracial | 60.0%

White, non-Hispanic | **71.0**%

Source: Nebraska Department of Education.

100%



YOUNG ADULTS AGES 16 TO 24 WHO **ARE IN SCHOOL OR WORKING (2023)**

American Indian | 84.5%

Asian/Pacific Islander | 98.4%

Black/African American | 89.0%

Hispanic | **94.0**%

Multiracial | 93.6%

White, non-Hispanic | 96.3%

Source: U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Public Use Microdata Samples.

CHILDREN LIVING ABOVE THE FEDERAL POVERTY LINE (2023)

American Indian | 72.1%

Asian/Pacific Islander | 90.0%

Black/African American | 68.0%

Hispanic | **81.1**%

Multiracial | **83.1**%

White, non-Hispanic | 92.8%

Source: U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table B17001B-I.

CHILDREN LIVING IN HOUSEHOLDS

MEDIAN FAMILY INCOME (2023)

American Indian | \$64,321

Asian/Pacific Islander | \$98,629

Black/African American | \$58,855

Hispanic | **\$71,952**

Multiracial | **\$77,908**

White, non-Hispanic | \$103,004

Source: U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table B19113B-I.

Source: U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Public Use Microdata Samples. *Cost-burdened households spend 30% or more of income on housing



CHILDREN NOT INVOLVED IN THE CHILD WELFARE SYSTEM [RATE/1000] (2022)

American Indian | 945

Asian/Pacific Islander | 994

Black/African American | 963

Multiracial | 985

White, non-Hispanic | 989

Source: Nebraska Department of Health and Human Services.

STATE WARDS RECEIVING **IN-HOME SERVICES (2022)**

American Indian | 46.3%

Asian/Pacific Islander | 50.8%

Black/African American | 43.8%

Hispanic | **65.4**%

Multiracial | 67.3%

White, non-Hispanic | 69.6%

Source: Nebraska Department of Health and Human Services.

CHILDREN WITH THREE OR FEWER **OUT-OF-HOME PLACEMENTS (2022)**

American Indian | 78.4%

Asian/Pacific Islander | 70.5%

Black/African American | 70.0%

Hispanic | **83.5**%

Multiracial | 80.9%

White, non-Hispanic | 84.6%

Source: Nebraska Department of Health and Human Services.

SUCCESSFULLY COMPLETED **DIVERSION (2023)**

American Indian | 72.1%

Asian/Pacific Islander | 94.5%

Black/African American | 79.1%

Hispanic | **81.8**%

Multiracial | 68.3%

White, non-Hispanic | 85.4%

Source: Nebraska Administrative Office of Courts & Probation.

YOUTH NOT IN JUVENILE DETENTION **FACILITIES [RATE/1000] (2023)**

American Indian | 976

Asian/Pacific Islander | 995

Black/African American | 967

Multiracial | 999

White, non-Hispanic | 998

Source: Douglas County Youth Center; Patrick J. Thomas Juvenile Justice Center; Lancaster County Detention Center; Northeast Nebraska Juvenile Services.

,000

Health

Every child and family deserves 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.

Children and families must be able to access and maintain affordable health insurance, and policies should maximize availabilty and robust investment in Medicaid and the Children's Health Insurance Program. Our health care systems and policies should prioritize preventive services including immunization, developmental screenings, early intervention, and home visiting. Policies should promote timely and equitable access to a complete range of health care services within a healthly home and community-based environments for children and families across the lifespan.

Section Contents

- Births
- Pre/post-natal health
- Teen births & sexual behavior
- 33 Infant & child deaths
- Health insurance
- Health services
- Behavioral health
- Health risks
- Adverse childhood experiences

BIRTHS

24,193

babies were born in 2023.1

TRIMESTER PRENATAL CARE BEGAN (2023)²

| First trimester | 79.2 % |
|------------------|---------------|
| Second trimester | 15.2% |
| Third trimester | 3.3% |
| None | 0.9% |
| Unknown | 1.4% |
| | |

BIRTHS BY RACE/ETHNICITY (2023)²

American Indian/Alaska Native | 1.2%

Asian/Pacific Islander | 3.6%

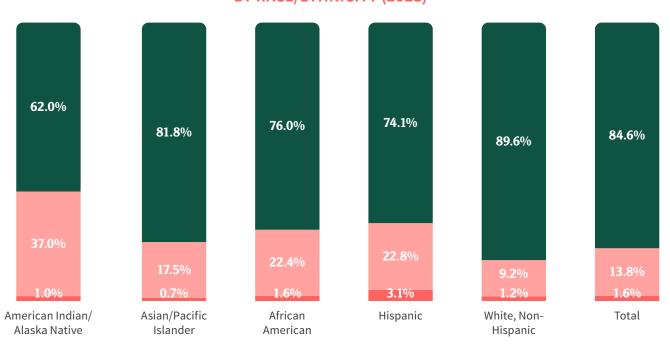
African American | 6.2%

Hispanic | **21.0**%

Multiracial | 3.2%

White, Non-Hispanic | 64.9%

ADEQUACY OF PRENATAL CARE BY RACE/ETHNICITY (2023)²



No Prenatal Care

PRE/POST-NATAL HEALTH



TOBACCO USE (2023) 1

did not use tobacco during most recent pregnancy 95.9%

used tobacco during most recent pregnancy | 4.1%

LOW BIRTH WEIGHT (2023) 1

Very low birth weight (<1,500g) | **1.2%**

Moderately low birth weight (1,500-2,499g) | **6.8%**

Not low birth weight (2,500+g) | **91.9%**

PREGNANCY INTENDEDNESS (2022)²

Pregnancy was unintended | **23.9**%

Pregnancy was intended | **61.1**%

Ambivalent intention | **15.0%**

FOLIC ACID USE PRIOR TO PREGNANCY (2022)²

3 or fewer times/week before pregnancy

51.7%

4 or more times/week before pregnancy

48.3%

BREASTFEEDING (2022)²

Mothers who breastfed at any time | 91.7%

Mothers who exclusively breastfed at 4 weeks

48.3%

12.0%

of new mothers in 2022 experienced **postpartum depression symptoms** related to their most recent pregnancy.²

3.3%

of women in 2022 had a **home visitor** during pregnancy to help prepare for the new baby. ²

TEEN BIRTHS & SEXUAL BEHAVIOR

TEEN BIRTHS (2023) 1

Teen births continue to decline.

887

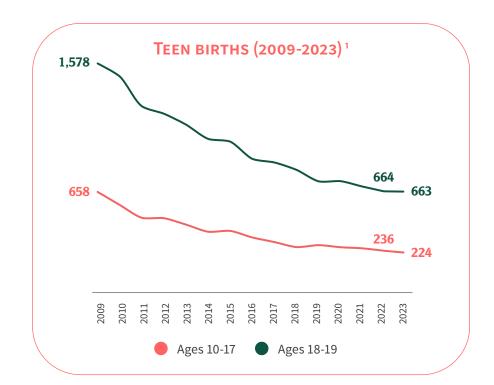
babies were born to teen mothers

224

mothers were **10-17 years old**

663

mothers were 18 or 19 years old



TEEN BIRTHS BY AGE (2023) 1

10-15 years | **3.8%**

16-17 years | **21.4**%

18-19 years | **74.7%**

TEEN SEXUAL BEHAVIOR (2021)²

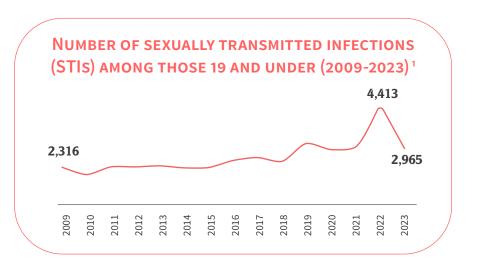
| Ever had sexual intercourse | 34.5% |
|--|-------|
| Had sexual intercourse before age 13 | 2.5% |
| Had sexual intercourse with four or more people | 10.4% |
| Had sexual intercourse in the past three months | 26.8% |
| Drank alcohol or used drugs before last sexual intercourse | 20.4% |
| Did not use condoms during last sexual intercourse | 49.0% |
| Did not use any method to prevent pregnancy during last sexual intercourse | 5.4% |

HIV/AIDS (2023) 1

- children under 11 years old had HIV/AIDS.
- children ages 12-19 had HIV/AIDS.
 - children with diagnosis

 of HIV or AIDS who have died from the disease.

* Data Suppressed

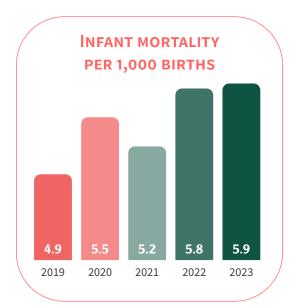


INFANT & CHILD DEATHS

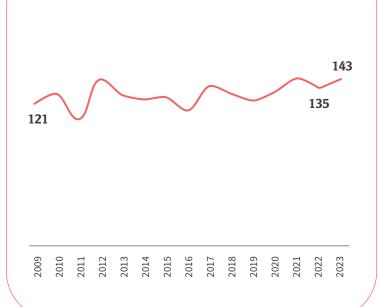


CAUSE OF INFANT DEATHS (2023)

| | # | % |
|--------------------------------------|-----|---------------|
| Maternal and perinatal | 64 | 44.8% |
| Birth defects | 37 | 25.9 % |
| SIDS/SUDI | 17 | 13.3% |
| Heart/Cardiovascular and Respiratory | 4 | 2.8% |
| Accident or Violent Cause | 2 | 1.4% |
| Prematurity | 0 | 0% |
| Infection | 11 | 7.7% |
| Other | 6 | 4.2% |
| Total | 143 | |



CHILD DEATHS, AGES 1-19 (2009-2023)



CAUSES OF CHILD DEATHS (2023)

| | # | % |
|---------------|-----|-------|
| Accidents | 37 | 27.8% |
| Suicide | 24 | 18.0% |
| Cancer | 21 | 15.8% |
| Birth defects | 3 | 2.3% |
| Homicide | 9 | 6.8% |
| Other | 39 | 29.3% |
| | | |
| Total | 133 | |
| | | |

died due to a cause related 8 WOMEN died due to a cause related to or aggravated by preganancy or its management in 2022 or its management in 2022.

Maternal death rate per 100,000 population in 2022.



HEALTH INSURANCE

HEALTH COVERAGE FOR KIDS 18 & UNDER BY TYPE (2023)

| | # | % |
|--------------------|---------|-------|
| Any | 487,087 | 95.1% |
| Public | 137,205 | 26.8% |
| Employer-based | 281,021 | 54.8% |
| Direct-purchase | 32,270 | 6.3% |
| More than one type | 36,591 | 7.1% |
| None | 25,277 | 4.9% |

Source: U.S. Census Bureau, 2023 American Community Survey 5-year estimates, Table B27010.

192,192 children were enrolled in Medicaid/ CHIP (SFY 2023, Monthy Average). ¹

42.39/0 of people eligible for Medicaid/CHIP were children (SFY 2023, Monthy Average). ¹

17.89/ of Medicaid costs were made up by children (SFY 2023, Monthy Average). ¹

UNINSURED CHILDREN BY RACE/ETHNICITY (2023)

| | # | % |
|------------------------|--------|------|
| American Indian | 643 | 9.1% |
| Asian/Pacific Islander | 727 | 5.7% |
| African American | 2,147 | 7.3% |
| Hispanic | 9,031 | 9.2% |
| Multiracial/Other | 8,218 | 8.6% |
| White, Non-Hispanic | 11,410 | 3.4% |

Source: U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table C27001B-I.

MEDICAID/CHIP ELIGIBILITY BY CATEGORY SFY 2023 (MONTHY AVERAGE)¹

Blind/Disabled | **36,747 (8%)**Aged | **21,782 (5%)**

ADC | **203,160 (45%)**

Children | 192,192 (42%)

MEDICAID/CHIP EXPENSES BY CATEGORY (SFY 2023)¹

Blind/Disabled | \$1,200,459,025

Aged | \$670,930,676

ADC Adults | **\$1,417,777,824**

Children | **\$713,757,566**

MEDICAID/CHIP ENROLLMENT (JULY 2023)

CHIP | **10.6**%

Medicaid | **89.4%**

Source: State Medicaid and CHIP Applications, Eligibility Determinations, and Enrollment Data.

HEALTH SERVICES



NUMBER OF MEDICAL PROVIDER SHORTAGES (AS OF SEPT. 30, 2022)

of shortages

| Primary | 94 |
|---------|----|
| Mental | 85 |
| Dental | 81 |

Source: Health Resources & Services Administration, Health Professional Shortage Areas.

Health professional shortage areas are designations that indicate a shortage of health care providers in the areas of primary care, mental health care, or dental health care. Shortages fall into 3 categories:¹

- **1. Geographic areas** a shortage of providers for the entire population within an area
- **2. Population groups** a shortage of providers within an area for a specific high-need population
- **3. Facilities** health care facilities within an area have a shortage of health professionals to meet their needs

MEDICAID/CHIP (FY2022)

221

children received **developmental services** through Medicaid/CHIP.

30,090

children received **behavioral services** through Medicaid/CHIP. 1,340

providers served children through Medicaid/CHIP.

Sources: Nebraska Department of Health and Human Services.

IMMUNIZATIONS (2023)

88.4%

of teens were immunized against meningitis caused by types A, C, W, and Y.

67.9%

of teen **girls** completed their HPV vaccine series. 66.9%

of teens **boys** completed their HPV vaccine series.

Sources: National Center for Immunization and Respiratory Diseases.

CHILDREN WITH A MEDICAL HOME (2023)

Do not have a medical home | 47.4%

Have a medical home | **52.6%**

Sources: 2022-23 National Survey of Children's Health, Health Care Access and Quality, Indicator 4.12.

80.4%

of children had a **preventative dental visit** in the past year in 2023.

37.8%

of children had one or more **current health conditions** in 2023.

93.3%

of children are in very good to excellent health in 2023. **78.3**%

of children who had a **preventative medical visit** in the past year in 2023.

Sources: 2022-23 National Survey of Children's Health.



BEHAVIORAL HEALTH

Many children in Nebraska deal with behavioral health problems that may affect their ability to participate in normal childhood activities.

The National Survey of Children's Health estimates the amount of Nebraska children facing the following disorders:

NUMBER OF CHILDREN FACING DISORDERS (2023)¹

| Anxiety | 37,156 |
|--------------------------|--------|
| ADD/ADHD | 42,265 |
| Depression | 17,536 |
| Autism Spectrum Disorder | 9,389 |

96,235

children with a mental, emotional, developmental or behavioral problem in 2023.¹

47.6%

of children needing mental health counseling actually received it in 2022.²

CHILDREN RECEIVING COMMUNITY-BASED BEHAVIORAL HEALTH SERVICES THROUGH DHHS (2023)³

| Mental Health | 2,552 |
|---------------|-------|
| Substance Use | 67 |

SUICIDES IN THE LAST 12 MONTHS (2021) 4

| Seriously considered suicide | 19.2% |
|------------------------------|-------|
| Made a suicide plan | 14.3% |
| Attempted suicide | 10.1% |

REGIONAL CENTERS (2023)³

received services from **Lincoln Regional Center** at the Whitehall Campus.

CHILDREN RECEIVING COMMUNITY-BASED BEHAVIORAL HEALTH SERVICES BY RACE/ETHNICITY (2023)³

African American | **7.0**%

American Indian/Alaska Native | 1.8%

Asian/Pacific Islander | 1.2%

Multiracial | **3.9**%

Native Hawaiian/other | 0.5%

Not available | 4.0%

Other | **14.7**%

White | **66.8**%

Hispanic | **21.1**%

Non-Hispanic | 66.7%

Not available | 12.2%

83.0%

of children 6 months to 5 years who met all four measures of flourishing in 2023. 1

36.4%

of teens who felt sad or hopeless everyday for 2+ weeks so that activity was stopped in 2021. 4

HEALTH RISKS



54.6%

of high schoolers rarely or never wore a seat belt in 2021. ¹

MOTOR VEHICLE CRASHES AND SEAT BELT USE (2021) 1

In the past 30 days, rode in a vehicle driven by someone who had been drinking alcohol

14.8%

In the past 30 days, drove a vehicle after drinking alcohol

4.5%

Texted or emailed while driving a car or other vehicle in the last 30 days

51.4%

INJURIES AND VIOLENCE (2021) 1

19.9%

of children were in a physical fight in the past 12 months.

7.6%

of children, in the past 12 months, were physically hurt on purpose by someone they were dating.

7.7%

of children were threated or injured with a weapon on school property.

20.7%

of children were bullied in school

17.1%

of children were electronically bullied.

15.8%

of children experienced sexual dating violence.

BLOOD LEAD LEVEL TESTING (SFY 2023)

Exposure to lead may harm a child's brain and central nervous system. Even low blood lead concentrations can cause irreversible damage such as:

- impaired physical and cognitive development,
- delayed development,
- behavioral problems,
- · hearing loss, and
- malnutrition.

The Centers for Disease Control uses a reference level of five micrograms per deciliter to identify children as having an elevated blood lead level.

684

children had elevated blood lead levels.

35,508

children had a confirmed blood lead level test.

1.9%

of tested children had elevated blood lead levels.

Source: Childhood Lead Poisoning Prevention Program, Nebraska Department of Health and Human Services.



HEALTH RISKS

TEEN ALCOHOL AND OTHER DRUG USE (2021)

| In the past 30 days had at least one drink of alcohol | 18.9% |
|---|-------|
| In the past 30 days had 5 or more drinks in a row within a couple of hours | 9.1% |
| Ever used marijuana | 18.7% |
| Ever used inhalants to get high | 7.3% |
| Ever took prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it | 7.1% |
| In the past 12 months offered, sold, or given illegal drugs by someone on school property | 10.4% |
| Source: Center for Disease Control and Prevention, Youth Risk Behavior Survey, 2021. | |

TEEN TOBACCO USE (2021)

| Currently smokes cigarettes, cigars, smokeless tobacco, or electronic vapor products | 14.9% |
|--|-------|
| Currently smokes cigarettes | 3.6% |
| Currently uses smokeless tobacco | 2.9% |
| Currently uses an electronic vapor product | 14.7% |
| Source: Center for Disease Control and Prevention. Youth Risk Behavior Survey, 2021. | |

20

community-based Nebraska's Network of Domestic Violence/Sexual Assualt Programs in 2023. 1 4

Nebraska Tribal Coalition Ending Family Violence programs in 2023. 1

DOMESTIC VIOLENCE/SEXUAL ASSAULT SERVICES (2023) 1

| Number of people served | 11,563 |
|--|--------|
| Percentage of those served who were children | 17.0% |

ADVERSE CHILDHOOD EXPERIENCES



ADVERSE CHILDHOOD EXPERIENCES

Adverse childhood experiences (ACEs) are **potentially traumatic events that can have negative, lasting effects on health and well-being**. Experiencing multiple ACEs results in compounding effects, and there is growing evidence that it is the general experience of multiple ACEs, rather than the specific individual impact of any one experience, that matters. The experience of ACEs extends beyond the child and can cause consequences for the whole family and community.

Types of ACE (2023) 12.3% Economic hardship Divorce | **21.6**% 10.0% Lived with anyone who had drug or alcohol problems Parent 6.2% Domestic 4.5% violence Neighborhood violence | 2.9% Racial/ethnic discrimination | 4.0% Parent death | 1.5% Discrimination based on sexual 1.4% orientation or gender identity (2022) Source: 2022-23 National Survey of Children's Health.

Number of ACEs CHILDREN EXPERIENCE (2023)

| 0 ACEs | 70.8% |
|---------|-------|
| 1 ACEs | 16.9% |
| 2+ ACFs | 12.3% |

Source: 2022-23 National Survey of Children's Health.

AMONG CHILDREN WITH 1 OR MORE ACE, THE FOLLOWING WERE DISPLAYED (2022)

CHALLENGING FACTORS WERE DISPLAYED

Chronic health condition | **56.2**%

Ongoing mental, emotional, developmental, and/or behavioral health condition

42.9%

Parents cut back on work or stopped working because of child's health

14.1%

SUPPORTIVE FACTORS WERE DISPLAYED

Engaged in school

35.9%

Demonstrates resilience | 75.5%

Live in a supportive neighborhood

46.4%

Mother's physical and mental health is very good or excellent

29.5%

Parents can handle day-to-day demands

49.3%

Source: 2021-22 National Survey of Children's Health, Family Health and Activities.

Education

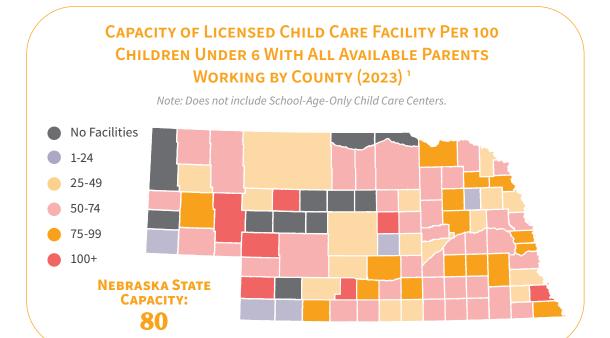
Education is the surest way to build a pathway to lifelong success, and the early years of a child's life are imperative to laying a solid foundation for success. Establishing the conditions that promote educational achievement for children is critical. With a strong and healthy early beginning, children can more easily stay on track to remain in school, graduate on time, pursue postsecondary education and training and enjoy a successful transition into adulthood. Closing gaps in educational access and quality is key to ensuring the future workforce can compete and build or continue the cycle of success and independence.

Section Contents

- Child care
- Step Up to Quality
- Early childhood education
- K-12 student characteristics
- Free-reduced meals
- English language arts proficiency
- Math proficiency
- Science proficiency
- Absences & career readiness
- Graduation & educational savings



CHILD CARE



2,459

total licensed child care facilities in 2023. ¹

110,877 children under 6 needed child care

in 2023. ²

9.8% (14,395)

of Nebraska parents of children 0-5 quit, did not take, or greatly changed their job because of child care problems in 2023.

Source: 2022-23 National Survey of Children's Health.

ANNUAL CHILD CARE COSTS (2023)

| CENTER-BASED CARE | Infant | \$9,805 | |
|----------------------|------------|----------|--|
| | 4-year-old | \$11,357 | |
| HOME-BASED CARE | Infant | \$7,744 | |
| | 4-year-old | \$7,442 | |

Source: Buffett Early Childhood Institute..

CHILD CARE SUBSIDY (2023) 1

21,165

children received child care subsidy.

585

children were in the care of licenseexempt providers.

AVERAGE NUMBER OF CHILDREN WHO RECEIVED A SUBSIDY EACH MONTH (2023) 1

Living below 100% FPL 14,937
Between 100% and 130% FPL 11,742
Between 130% and 185% FPL 1,615

Below school-age 12,098
School-age 6,626
All 17,711

FUNDS SPENT ON THE CHILD CARE SUBSIDY PROGRAM (2023) 1

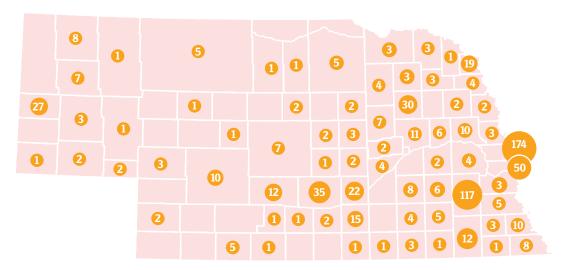
State \$50,843,473

Federal \$149,219,494

STEP UP TO QUALITY



NEBRASKA STEP UP TO QUALITY PROGRAMS BY COUNTY (2023)



Source: Nebraska Office of Early Childhood Education.

Nebraska Step Up to Quality is an Early Childhood Quality Rating and Improvement System (ORIS) passed by the Nebraska Legislature in 2013. The primary goal of Nebraska Step Up to Quality is to improve early care and education quality and increase positive outcomes for young children. This is done through informing parents about quality early care and education programs in understandable and measurable ways. In addition, it improves teacher and director effectiveness through training and professional development, formal education, and coaching. It also emphasizes strengthening the understanding and use of standards, assessment processes, and using data to improve quality.

738

Step Up to Quality Programs as of 2023.

298

270

170

Providers - Step 1

Providers - Step 2

Providers - Steps 3-5

Source: Nebraska Office of Early Childhood Education.

Step 1: The program has completed the application to participate in Step Up to Quality, staff members have submitted a professional record, and the program director has completed orientation.

Step 2: The program director completed several trainings related to safety, child health and early learning and management as well as several self assessments related to child development knowledge.

Steps 3-5: Once programs achieve Step 2, they are eligible for coaching services. Early childhood coaches help guide programs as they set goals to make program improvements. During the rating process, programs earn points in the following standard areas: curriculum, learning environments & interactions, child outcomes, professional development and training, family engagement & partnerships, and program administration. Steps 3-5 ratings are determined by the number of points achieved.

EARLY CHILDHOOD EDUCATION

19,308

children were enrolled in public school-based preschool in 2022-23. 1

The **Early Development Network** (EDN) serves families with children born with disabilities.

2,373

infants and toddlers had an Individualized Family Service Plan through EDN in 2022-23.

Source: U.S. Department of Education, Nebraska State Performance Plan Annual Performance Report, FFY 2022.

CHILDREN (BIRTH-AGE 3) (2022-23) 1

of children

| | " or crittaren |
|---------------------------------|----------------|
| With developmental delay | 2,320 |
| With speech language impairment | 79 |
| With hearing impairment | 53 |
| With autism | 77 |
| With some other disability | 98 |
| | |

19

Head Start Programs in 2023 **20**

Early Head Start Programs in 2023

5,493

children served in Early Head Start/Head Start Programs

9.3%

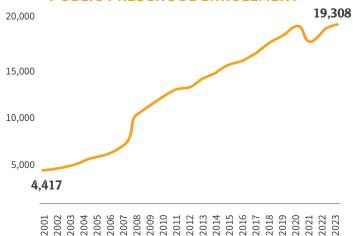
of families with children served in Early Head Start/Head Start programs experienced homelessness

130

pregnant women served in Early Head Start program

Source: 2023 Office of Head Start Program Information Reports.

PUBLIC PRESCHOOL ENROLLMENT 1



Sixpence serves children birth to age 3 who are at risk of failure in school and is funded through public and private dollars.

51

Sixpence Programs as of 2023-24

1,082

families served by Sixpence Programs

107

pregnant moms served by Sixpence Programs

1,254

children served by Sixpence Programs

Source: Sixpence Early Learning Fund 2023-24 Annual Report.

K-12 STUDENT CHARACTERISTICS



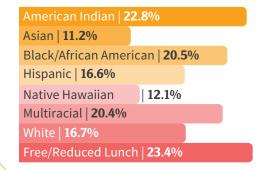
SCHOOL MEMBERSHIP BY GRADE (2022-23)

| (2022-23) | | | | |
|----------------------------|--|--|--|--|
| Pre-K 19,308 | | | | |
| Kindergarten 22,921 | | | | |
| 1st Grade 23,385 | | | | |
| 2nd Grade 23,132 | | | | |
| 3rd Grade 23,403 | | | | |
| 4th Grade 23,158 | | | | |
| 5th Grade 23,303 | | | | |
| 6th Grade 23,181 | | | | |
| 7th Grade 23,862 | | | | |
| 8th Grade 24,406 | | | | |
| 9th Grade 25,223 | | | | |
| 10th Grade 23,981 | | | | |
| 11th Grade 23,983 | | | | |
| 12th Grade 25,476 | | | | |

3.9%

of Nebraska school students were **highly mobile**, meaning they enrolled in two or more public schools during the 2022/23 school year. Higher school mobility is correlated with lower achievement.

SPECIAL EDUCATION CLASSIFICATION (2021-22)



328,722

children were in enrolled in public school in 2022-23.

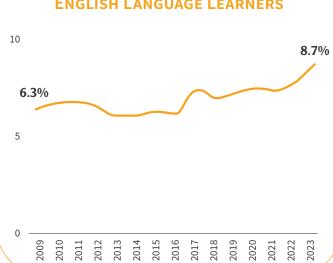
16.5%

of students were classified as **Special Education**. (2022-23)

12.8%

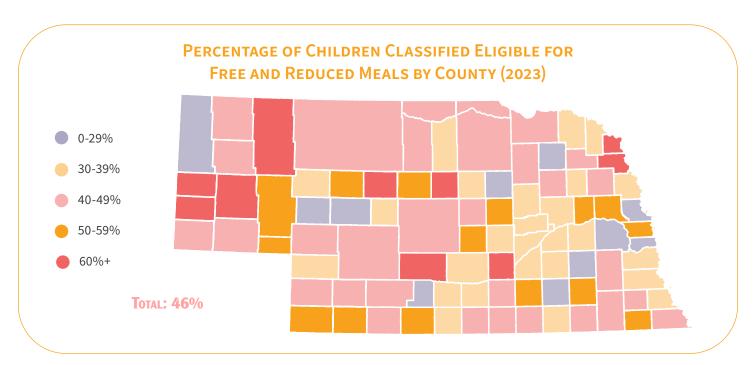
of students were classified as **High Ability Learners**. (2022-23)

PERCENT OF STUDENTS WHO WERE ENGLISH LANGUAGE LEARNERS



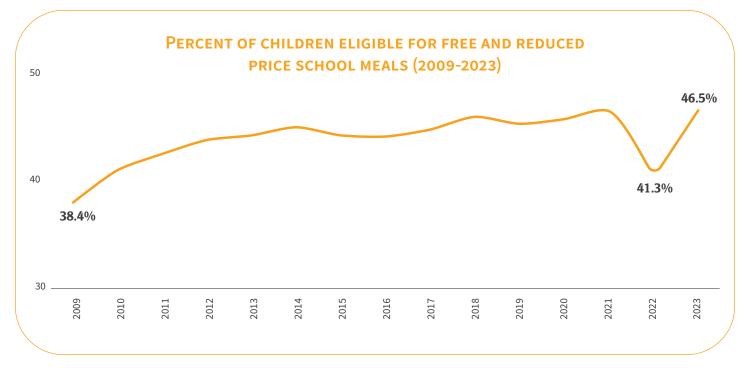


FREE-REDUCED MEALS



COMMUNITY ELIGIBLITY (2022-23)

Sites 181
CHILDREN 67,557



ENGLISH LANGUAGE ARTS PROFICIENCY



Reading is a fundamental skill that affects learning experiences and school performance of children and teens. The ability to read proficiently translates to a greater likelihood of performing well in other subjects. Children with lower reading achievement are less likely to be engaged in the classroom, graduate high school, and attend college.

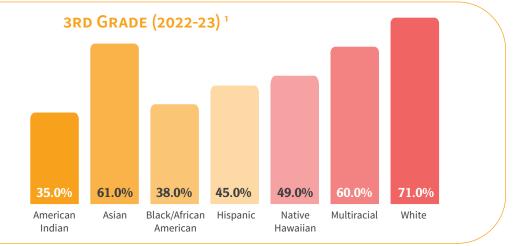
Source: Child Trends, Reading Proficiency.



of children overall proficient in English Language Arts

48.0%

of low-income children overall proficient in English Language Arts

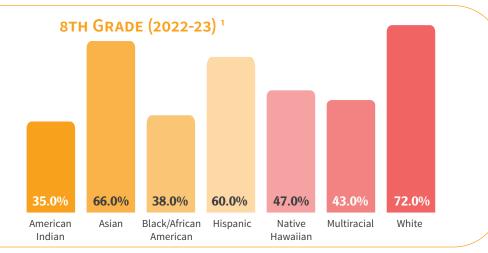


63.0%

of children overall proficient in English Language Arts

48.0%

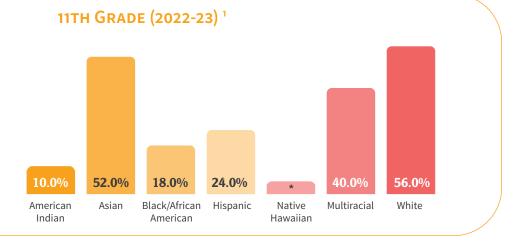
of low-income children overall proficient in English Language Arts



46.0%

of children overall proficient in English Language Arts

of low-income children overall proficient in English Language Arts



MATH PROFICIENCY

Math skills are essential for functioning in everyday life, as well as for future success in our increasingly technical workplace. Students who take higher courses in mathematics are more likely to attend and complete

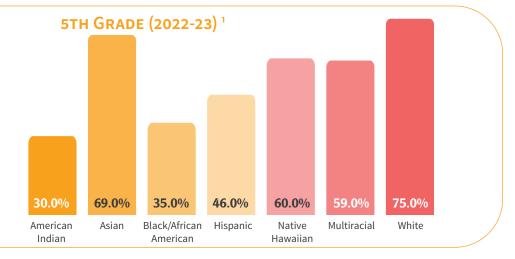
college. Those with limited math skills are more likely to find it difficult to function in everyday society and have lower levels of employability.

Source: Child Trends, Mathematics Proficiency.



49.0%

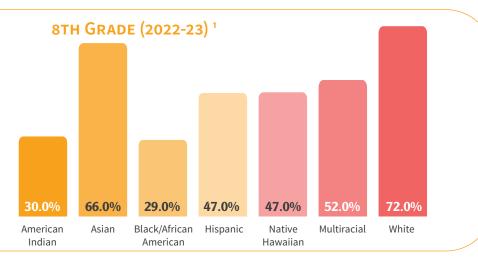
of low-income children overall proficient in math



61.0% of children overall proficient in math

44.0%

of low-income children overall proficient in math



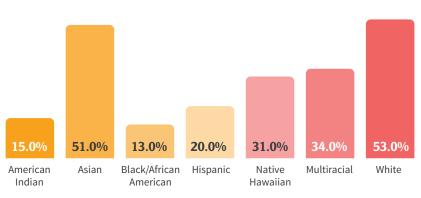
11TH GRADE (2022-23) ¹

42.0%

of children overall proficient in math

24.0%

of low-income children overall proficient in math



SCIENCE PROFICIENCY



Proficiency in science helps prepare students to go on to highly skilled professions. Having a strong foundation in the sciences allows students to work in today's highdemand fields. Students with a greater understanding of sciences learn how to better protect the environment and increase the health and security of people throughout the world.

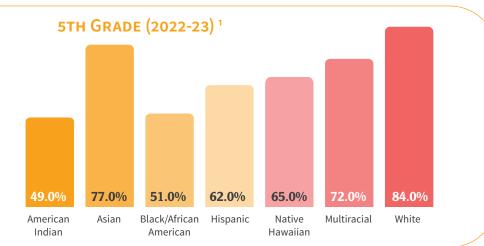
Source: Child Trends, Science Proficiency.



of children overall proficient in science

65.0%

of low-income children overall proficient in science

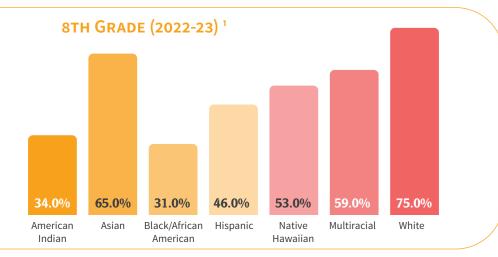


64.0%

of children overall proficient in science

49.0%

of low-income children overall proficient in science

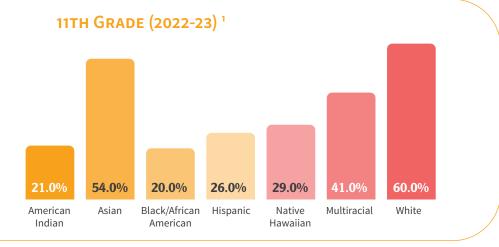


49.0%

of children overall proficient in science

31.0%

of low-income children overall proficient in science



on **49**



ABSENCES & CAREER READINESS

AMOUNT OF STUDENTS EXPELLED AND SUSPENDED (2022-23) ²

Note: Includes public and nonpublic schools.

| | # of students | % of students | |
|-----------|---------------|---------------|--|
| Expelled | 841 | <1% | |
| Suspended | 57,491 | 16.3% | |

STUDENTS ABSENT (2022-23) ²

Note: Includes public and nonpublic schools.

| | # of students | % of students |
|------------|---------------|---------------|
| 10-19 Days | 90,537 | 25.8% |
| 20-29 Days | 25,142 | 7.1% |
| 30+ Days | 23,134 | 6.6% |

CAREER READINESS (2023)

64.9%

of 2022-23 public high school student graduates enrolled in college by April 2023. ¹

69.6%

of students who enrolled in a 4-year public college in Fall 2017 completed within six years. ¹ 2,585

44.6%

of students who

enrolled in a 2-year

public college in Fall

2017 completed

in 6 years. 1

students who enrolled in a career academy.²

19,784

students who were enrolled in dual credit courses. ² **50**%0 (96,000)

of young people age 18-24 enrolled or have completed college in 2022. ³

23,376

students who took the ACT. ²

18.7

was the average ACT composite score. ²

40/0 (5,000)

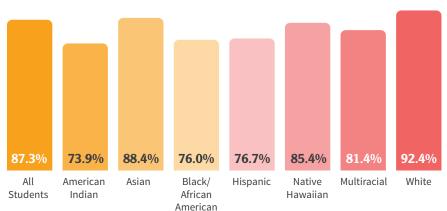
teens 16-19 were not in school and not working. ¹ **70/0** (13,000)

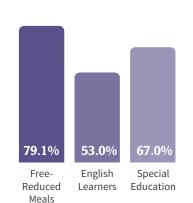
of people 18 to 24 years old were not attending school, not working, and had no degree beyond high school in 2022. ¹

GRADUATION & EDUCATIONAL SAVINGS









Source: Nebraska Department of Education.

21,232

students completed high school in four years. 89.6

2021 extended 5-year graduation rate* 268

16-21 year olds took the GED in 2022-23 **85%**

of 16-21 year olds successfully completed the GED

Source: Nebraska Department of Education.

NEBRASKA EDUCATION SAVINGS PLAN TRUST (NEST) (AS OF DECEMBER 31, 2023)

In the 2019 Legislative Session, lawmakers approved the Meadowlark Act, which creates a college savings account with an initial seed deposit for every baby born in Nebraska on or after January 1, 2020, in addition to an incentive match payment for college savings contributions made by low-income families. Research shows that similar early investments in educational savings result in improved long-term educational outcomes, particularly for children in lower-income families.

20.6%

of children (under 18) have an Educational Savings Account 99,961

NEST Education Savings Accounts **69,890**

NEST accounts funded through the Meadowlark Act

Source: Nebraska State Treasurer's Office.

51

^{*}Extended 5th year graduation rate is the percent of students who graduated within five years rather than the standard four.

Economic Stability

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. We must ensure that families are able to meet their children's basic needs and achieve financial security. A robust system of supports should help families make ends meet as they work toward financial independence.

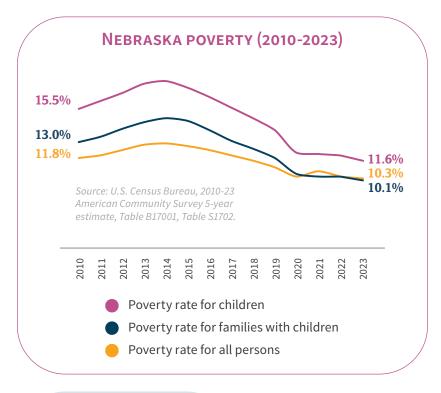
Hardworking families should have a fair share in the success of our state's economy. When families need assistance in meeting the basic needs of their children, public benefit programs should work efficiently and be easy for families to use. Parents should not have to choose between the job they need and the family they love. All families should have the opportunity to invest in their children's future and be able to access community resources that are wellfunded by fair tax policies.

Section Contents

- Poverty
- Making ends meet
- Housing & homelessness
- Hunger
- 58 SNAP & WIC
- Custody
- Employment, income, & assets
- Transportation & taxes



POVERTY



FAMILY STRUCTURE AND POVERTY (2023)¹

32.5%

of children were living in **single-mother** households and are in poverty.

13.3%

of children were living in **single-father** households and are in poverty.

5.0%

of children were living in **married-couple** households and are in poverty.

17.6%

of children were living **with a grandparent** and are in poverty.

55,299

children were living in poverty in 2023.²

23,948

children were living in extreme poverty (<50% of the Federal Poverty Line) in 2023.³

NEBRASKA POVERTY RATES BY RACE AND ETHNICITY (2023)²

| | Child poverty rate (17 and under) | Overall poverty rate |
|------------------------|-----------------------------------|----------------------|
| American Indian | 27.9% | 23.1% |
| Asian/Pacific Islander | 10.0% | 9.8% |
| Black/African American | 32.0% | 24.1% |
| Hispanic | 18.9% | 15.8% |
| Multiracial/Other | 16.9% | 14.7% |
| White, Not Hispanic | 7.2% | 8.3% |

2023 FEDERAL POVERTY LEVEL (FPL) GUIDELINES 4

| | Federal Poverty Line | Free School Meals | Medicaid Expansion | SNAP | WIC, Reduced Priced Meals, Transitional Child Care Subsidy | Kids Connection (CHIP) | | ACA Exchange Tax Credits |
|--------------|-------------------------|----------------------|-----------------------|----------|--|------------------------------|-----------|--------------------------------|
| # of Persons | 100% | 130% | 138% | 165% | 185% | 213% | 300% | 400% |
| 1 | \$14,580 | \$18,954 | \$20,120 | \$24,057 | \$26,973 | \$31,055 | \$43,740 | \$58,320 |
| 2 | \$19,720 | \$25,636 | \$27,214 | \$32,538 | \$36,482 | \$42,004 | \$59,160 | \$78,880 |
| 3 | \$24,860 | \$32,318 | \$34,307 | \$41,019 | \$45,991 | \$52,952 | \$74,580 | \$99,440 |
| 4 | \$30,000 | \$39,000 | \$41,400 | \$49,500 | \$55,500 | \$63,900 | \$90,000 | \$120,000 |
| 5 | \$35,140 | \$45,682 | \$48,493 | \$57,981 | \$65,009 | \$74,848 | \$105,420 | \$140,560 |
| 6 | \$40,280 | \$52,364 | \$55,586 | \$66,462 | \$74,518 | \$85,796 | \$120,840 | \$161,120 |
| 7 | \$45,420 | \$59,046 | \$62,680 | \$74,943 | \$84,027 | \$96,745 | \$136,260 | \$181,680 |
| 8 | \$50,560 | \$65,728 | \$69,773 | \$83,424 | \$93,536 | \$107,693 | \$151,680 | \$202,240 |
| | | | | | | | | |

1. U.S. Census, 2023 American Community Survey 5-year Estimates, Table B17006, S1001.
2. U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table B17001.
3. U.S. Census, 2023 American Community Survey 5-year Estimates, Table B17024.
4. HH Poverty Guidelines for 2023; Nebraska Women, Infants, and Children Program; Nebraska Department of Education, Free and Reduced Meals; Nebraska Department of Health and Human Services, Medicaid Expansion, Medicaid, Child Care; Nebraska Supplemental Nutrition Assistance Program; HealthCare.Gov, Premium Tax Credit.

MAKING ENDS MEET

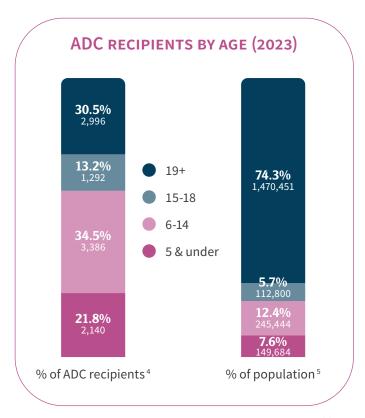


MAKING ENDS MEET

Nebraskans pride themselves on being hard-working people. In 2023, 78.1% of children in our state had all available parents in the workforce. 1 Unfortunately, having high labor force participation doesn't always translate into family economic stability.

The chart at right illustrates the gap between low-wage earnings and the amount needed to provide for a twoadult family with two children. It assumes that both adults work full-time (40 hours a week), year-round (52 weeks per year). That means no vacation, no sick time, just work.

The federal poverty level doesn't describe what it takes for working families to make ends meet. For that, we turn to the Family Economic Self-Sufficiency Standard (FESS). The FESS uses average costs, like fair median rent and the average price of a basic menu of food, to calculate what a family needs to earn to meet its basic needs without any form of private or public assistance. It does not include luxuries like dining out or saving for the future.



INCOME PER ADULT FOR FAMILY OF 2 ADULTS AND 2 CHILDREN (2023)

MINIMUM WAGE²

Annual | **\$43,680**

Monthly | \$3,640

Hourly | **\$10.50**

100% FEDERAL POVERTY LINE³

Annual | **\$30,000**

Monthly | \$2,500

Hourly | **\$7.21**

200% FEDERAL POVERTY LINE³

Annual | **\$60,000**

Monthly | **\$5,000**

Hourly | **\$14.42**

AID TO DEPENDENT CHILDREN (ADC) (2023)⁵

Average monthly number 6.191 of children receiving ADC

Average monthly number 2,963 of families receiving ADC

Average monthly ADC payment per family

> Number of cases reaching 60-month eligibility limit

Average number of children per ADC family

Total ADC payments \$18,117,354

(Includes both state and federal funds)

^{1.} U.S. Census, 2023 American Community Survey 5-year Estimates, Table B23008

^{2.} U.S. Department of Labor.

^{3.} HH Poverty Guidelines for 2022.

^{4.} Financial Services, Operations, Nebraska Department of Health and Human Services.



HOUSING & HOMELESSNESS

HOMELESSNESS

The Nebraska Homeless Assistance Program (NHAP) and the Housing and Urban Development Program (HUD) serve individuals who are experiencing homelessness or nearhomeless. Not all people experiencing homelessness receive services.

IN 2023, HUD/NHAP SERVED:

4.629 homeless individuals

> homeless children ages 18 and under

> homeless families with children

> > unaccompanied homeless children

individuals at risk 5,339 of homelessness

children at risk 2,545 of homelessness

families with children at risk of homelessness

> unaccompanied children at risk of homelessness

11,022

Nebraska Public Housing vouchers as on 12/31/20233

HOMEOWNERSHIP

Homeownership provides a sense of stability for children and communities.

71.8%

of families with children owned their home in 2023.1

22.3%

of Households were moderately-burdened (30-50% income on rent) by housing costs in 2023. 2

21.7%

of Households were severely-burdened (>50% income on rent) by housing costs in 2023.2

40.000 children lived in crowded housing with more than one person/room in 2022.

16.000 (3%)

children lived in areas of concentrated poverty in 2022.

105.000

children lived in households with a high housing burden cost in 2022.

82,000

children in low-income households had a high housing cost burden in 2022.

Source: Annie E. Casey Foundation, Kids Count Data Center.

HOMEOWNERSHIP RATE (2023)

White, Not Hispanic | 70.6%

Hispanic | **53.6**%

Multiracial | 52.9%

Black/African American 30.4%

Asian/Pacific Islander | **55.2%**

American Indian | 46.5%

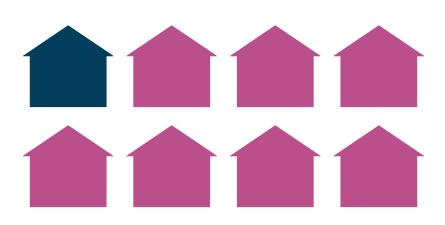
Other/Unknown | 55.1%

Overall | **66.5**%

Source: U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table B25003B-I.

HUNGER

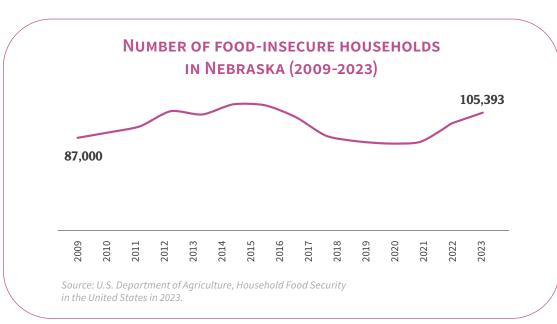




1 IN 8

households don't know where their next meal is coming from in 2023.

Source: U.S. Department of Agriculture, Household Food Security in the United States in 2023.



Approximately
105,393 households
in Nebraska were
food-insecure in
2023. Food-insecure
means that someone
in the household has
disrupted their eating
patterns or reduced
their intake of food
because there was
not enough food in
the house to eat.

19.2%

of children **experienced food insecurity** in 2022.

60%

increase in the number of food-insecure children since 2021.

60%

of food-insecure children were income-eligible for Federal Nutrition Assistance in 2022.

Source: Feeding America, Map the Meal Gap, Child Food Insecurity in Nebraska, 2022.

SNAP & WIC

SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM

The Supplemental Nutrition Assistance Program (SNAP) is one of the most effective anti-poverty programs in the United States. It provides nutrition assistance to low-income individuals and families through benefits that can be used to purchase food at grocery stores, farmers markets, and other places where groceries are sold.

Source: Characteristics of the Supplemental Nutrition Assistance Program Households.

PERECENT OF SNAP CHILD PARTICIPANTS (2023)

American Indian/Alaskan Native | **4.0**% Asian/Pacific Islander | **3.8**%

Black/African America<mark>n | **19.6%**</mark>

Multiracial | **9.5**%

Other/Unknown | 10.5%

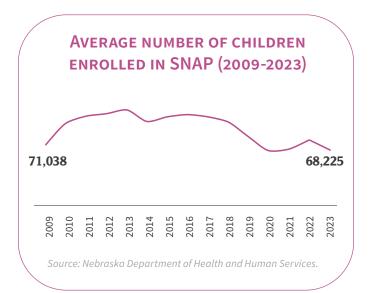
White | **51.4**%

Source: Nebraska Department of Health and Human Services.

MONTHLY AVERAGE NUMBER OF WIC PARTICIPANTS (SFY 2023)

| All | 35,243 |
|----------|--------|
| Women | 7,485 |
| Infants | 7,363 |
| Children | 21,104 |

Source: Nebraska Department of Health and Human Services.



The Special Supplemental Nutrition Program for Women, Infants, and Children—known as WIC—aims to improve the health of low-income pregnant, postpartum, and breastfeeding women, infants, and children up to age five who are at nutritional risk. The program provides nutritious foods to supplement diets, information on healthy eating, breastfeeding promotion and support, and referrals to healthcare.

97

clinics provide WIC in SFY 2023

75counties serve WIC in SFY 2023

\$46.51

Average **monthly cost** per WIC participant in SFY 2023

Source: Nebraska Department of Health and Human Services

CUSTODY



MARRIAGE AND DIVORCE (2023)

10,500 5,089

married couples

divorced couples

4,560

children experienced their parents divorcing.

1,571

children in divorce cases were put under their mother's custody.

children in divorce cases were put under their father's custody.

2,724

children in divorce cases were put under both parent's custody.

children in divorce cases were given a **different** arrangement.

Source: Nebraska Department of Health and Human Services.

INFORMAL KINSHIP CARE

Children are considered to be in informal kinship care if they are not living with a parent or foster parent and are not living independently.

11.000 children were living in kinship care in 2023.1

grandparent householders were responsible for their own grandchildren under 18 years in 2023.²

CHILD SUPPORT (SFY 2023)

Custodial parents who do not receive child support payments they are owed by non-custodial parents may seek assistance from the Department of Health and Human Services. Assistance is provided by Child Support Enforcement (CSE).

89,881

child support cases that received Child Support Enforcement (CSE) support.

72.2%

of current (any case where obligation is still running) child support cases collected through CSE.

93,799

non-ADC child support cases*

3.918

ADC child support cases*

\$205,999,869

of child support was disbursed through CSE.

15,235

cases received services through CSE, but payments were not being made.

1,466

families receiving public benefits which are eligible for and are receiving child support payments.

932

families receiving public benefits which are eligibile for child support, but it is not being paid.

3.850

child support cases where non-custodial parent is incarcerated.

\$118.21

monthly child support payment per child

Source: Nebraska Department of Health and Human Services.

^{*} If the custodial parent is receiving ADC, the state may collect child support from the non-custodial parent as reimbursement.

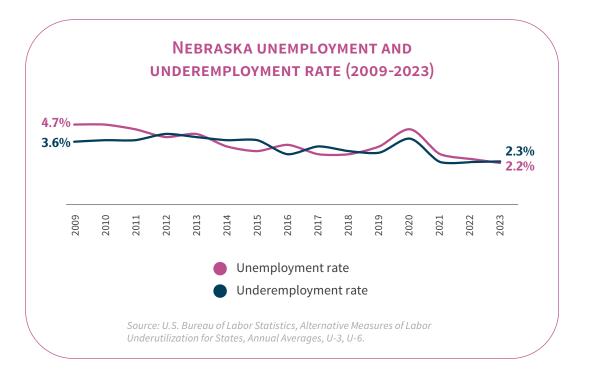


EMPLOYMENT, INCOME, & ASSETS

78.1%

of **children under 18**with all available
parents in the
workforce
in 2023. ¹

74.6% of children under 6 that had all available parents in the workforce in 2023.1



MEDIAN INCOME FOR FAMILIES WITH CHILDREN (2023)

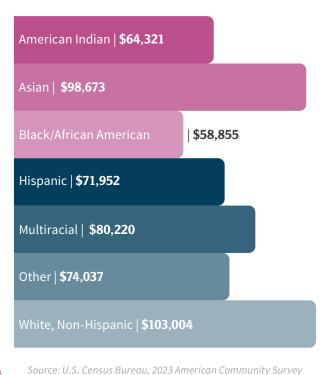
| | All families | \$96,902 |
|--|--------------------------------|-----------|
| | Married couple | \$121,462 |
| | Male householder (no spouse) | \$60,064 |
| | Female householder (no spouse) | \$40,698 |
| | | |

Source: U.S. Census Bureau, 2023 American Community Survey 5-year Estimates, Table B19126.

7,000

workers earned federal minimum wage or below in 2023.²

MEDIAN INCOME FOR FAMILIES BY RACE & ETHNICITY (2023)



5-year Estimates, Table B19113B-I.

TRANSPORTATION & TAXES



FEDERAL TAX CREDITS (2022)

105,525

tax returns claimed

\$256,723,744

in **federal** Earned Income Tax Credits (EITC).

227,356

families claimed **\$588,400,313**

in **federal** Child Tax Credits.

47,215

families claimed **\$28.380.758**

in **federal** Child and Dependent Care Credits.

86,905

families claimed **\$170,153,010**

in additional Child Tax Credit.

Source: Nebraska Department of Revenue.

STATE TAX CREDITS (2023)

109,905

tax returns claimed

\$27,960,291

in **state** Earned Income Tax Credits (EITC).

47,565

families claimed

\$8,403,213

in **state** Child and Dependent Care Credits.

Source: Nebraska Department of Revenue.

128,784

workers that used transportation other than a personal automobile or carpool to get to work in 2023.¹

21,497

households that had no vehicle available in 2023.²

Child Welfare

Keeping our children and youth safe is essential to their healthy development. Children deserve to grow up in safe, permanent, and loving homes. An effective child welfare system works to strengthen families and minimize trauma through timely and appropriate action. Families should be connected to resources in their community that strengthen their abilities to care for their children through a robust network of evidence-based services focusing on child abuse and neglect prevention that are able to meet families where they are. When children do enter the child welfare system, they are entitled to retain ties to their family, culture, and community.

The administration and staff of agencies should reflect the diversity of the populations they serve and work in a way that honors children's unique heritage and cultural protective factors. Services must be trauma-informed, individualized, timely, and ongoing to maintain safety, well-being, and permanency.



CHILD MALTREATMENT

Federal law defines child maltreatment, otherwise known as abuse and neglect, as "any act or failure to act that results in death, serious physical or emotional harm, sexual abuse or exploitation, or any act or failure to act that represents an imminent risk of serious harm."

In Nebraska, the vast majority (85%) of maltreatment is physical neglect, which is a failure to meet a child's basic needs like food, shelter, and clothing. This is, in many cases, an economic issue.

WHY SHOULD WE BE CONCERNED?

Exposure to childhood abuse and neglect hinders children's healthy social, emotional, and cognitive development. If untreated, toxic stress makes it more likely that children will adopt risky behaviors which negatively impact their future health and success. Given the impacts, we need to strengthen families to prevent abuse and neglect whenever possible, and take swift, thoughtful action to ensure that all children grow up in loving homes.

CHILD ABUSE AND NEGELCT REPORTS (2023)

43,136

child abuse & neglect reports

16,115

calls were assessed by DHHS and/or law enforcement.

1,820

reports were substantiated.

8,180

reports were unfounded.

4,447

reports were referred to Alternative Response.

Source: Nebraska Department of Health and Human Services.

SAFETY ASSESSMENTS (2023)

18,753

safety assessments conducted on children

936

children were determined unsafe.

782

children determined unsafe and **referred to court**.

32

children determined unsafe and referred to voluntary services. 122

children determined unsafe and non-court involved and family did not elect to participate in voluntary services.

Source: Nebraska Department of Health and Human Services.

CHILD MALTREATMENT



Types of substantiated maltreatment (2023)¹

Physical abuse | 1,247

Emotional abuse | 247

Sexual abuse | 500

Physical neglect | 3,776

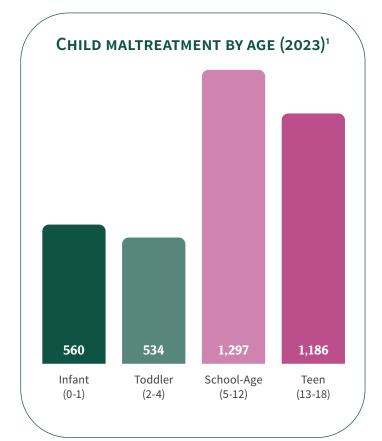
Emotional neglect | 38

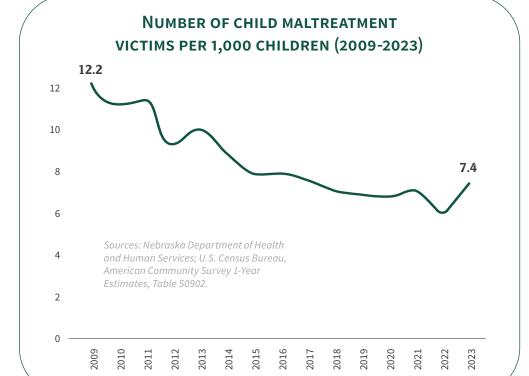
Sex Trafficking | 14

Medical Neglect | 2

Some children experienced more than one type of maltreatment. The numbers here will be higher than the total number of children who experienced maltreatment.

It is important to note that only maltreatment cases that were reported are included in this report. The actual incidence of maltreatment may be higher than what is reported here.





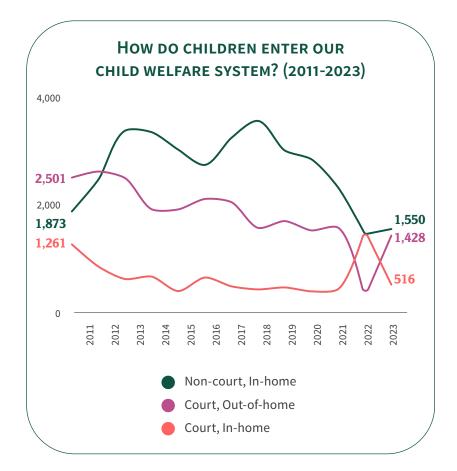
3,577 children experienced maltreatment in 2023.

Do you know a child who is being maltreated?

Call the Child Abuse & Neglect Hotline at 1-800-652-1999.

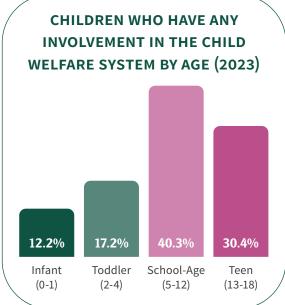


ENTRIES & INVOLVEMENT



1,062

children entering care in 2023 had **previous involvement** in the child welfare system.

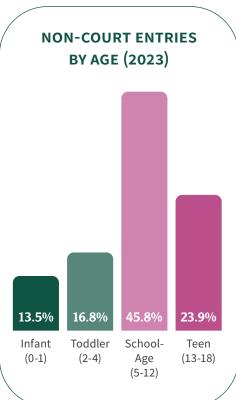


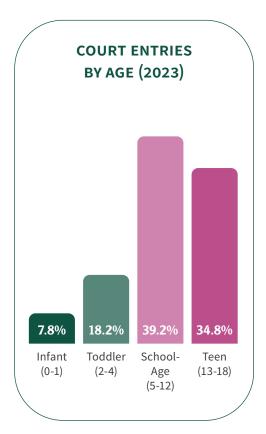
7,874

children were involved in the child welfare

system in 2023.

3,988
families were involved in the child welfare system in 2023.





ALTERNATIVE RESPONSE & TRIBAL YOUTH



The Omaha Tribe, the Santee Sioux Nation, and the Winnebago Tribe have agreements with the State of Nebraska's Department of Children and Family Services to provide child welfare services to tribal members within the boundaries of their reservations.

These cases are under the jurisdiction of Tribal Courts and fully managed by the tribes' child welfare departments. The Tribal Youth data contained on this page are from DHHS and represent the services provided under those agreements.

NUMBER OF TRIBAL YOUTH (2023)

| Involved | 602 | |
|----------------------------|-----|---|
| Entered | 138 | |
| Placed in out-of-home care | 498 | |
| Exited | 171 | / |

ALTERNATIVE RESPONSE

5,049

families were served by Alternative Response in 2023.

4,654

48 DAYS

families were successfully discharged by Alternative Response. on average to successful discharge.

The majority of children who come into Nebraska's child welfare system are identified because their family is unable to meet their basic needs, which is often related to symptoms of poverty. Alternative Response brings more flexibility to our state response to child maltreatment in certain low- or moderate-risk cases by allowing caseworkers to focus on harnessing the strengths of each family and building parental capacity through intensive supports and services.

402

21 DAYS

families changed track from Alternative Response to Traditional Response. on average of involvement before changing track.

TRIBAL CHILDREN RECEIVING OUT-OF-HOME SERVICES BY PLACEMENT TYPE (2023)

| Adoptive home | 0 | |
|---|-----------------------------------|--|
| Developmental disability facility | 9 | |
| Detention | 8 | |
| Emergency shelter | 22 | |
| Group home | 11 | |
| Hospital/Medical facility | 7 | |
| Independent living | 1-5* | |
| Kinship foster home | 45 | |
| Missing youth | 21 | |
| Non-relative foster home | 89 | |
| Psychiatric residential treatment facility | 1-5* | |
| Relative foster home | 286 | |
| Theraupetic group home | 1-5* | |
| Youth rehabilitation and treatment center | 1-5* | |
| Duplicated total | 502-518 | |
| Non-relative foster home Psychiatric residential treatment facility Relative foster home Theraupetic group home Youth rehabilitation and treatment center | 89 1-5* 286 1-5* 1-5* | |

^{*}Exact counts suppressed by Nebraska Department of Health and Human Services due to privacy concerns.



RACE & ETHNICITY IN CHILD WELFARE

American Indian/ Alaska Native

Asian/Pacific Islander

Black/ African American

Hispanic

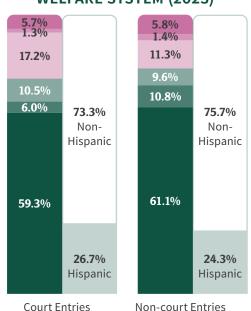
Multiracial

Unknown/ Other/ Declined

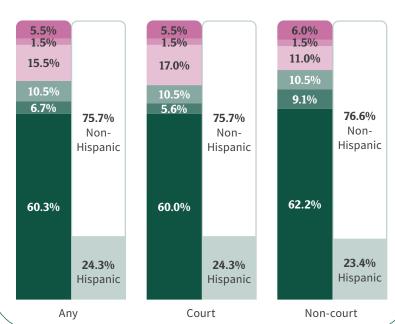
White

White, Non-Hispanic

ENTRIES TO THE CHILD WELFARE SYSTEM (2023)1



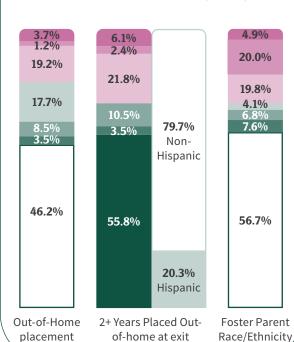
CHILD WELFARE SYSTEM INVOLVEMENT (2023)¹



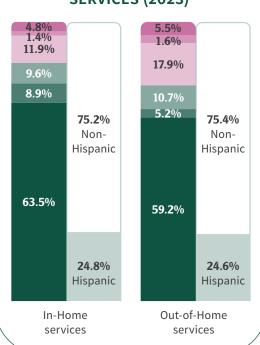
TOTAL CHILD POPULATION (2023)2



OUT-OF-HOME CARE (2023)1



IN-HOME AND OUT-OF-HOME SERVICES (2023)¹



PLACEMENTS & STAFF CASES



REMOVAL REASONS OF CHILDREN IN **OUT-OF-HOME CARE (2023)**

| (====) | |
|---|------|
| Neglect (Alleged/Reported) | 3169 |
| Drug Abuse (Parent/Caretaker) | 1452 |
| Physical Abuse (Alleged/Reported) | 880 |
| Inadequate Housing | 694 |
| Domestic Violence | 687 |
| Alcohol Abuse (Parent/Caretaker) | 511 |
| Incarceration of Parent(s)/Caretaker(s) | 447 |
| Sexual Abuse (Alleged/Reported) | 343 |
| Child's Behavior Problems | 332 |
| Abandonment | 293 |
| Parent's/Caretaker's Inability to Cope Due to Illness/Other | 135 |
| Homelessness | 130 |
| Education Neglect | 78 |
| Medical Neglect | 76 |
| Psychological and Emotional Abuse | 74 |
| Prenatal Drug Exposure | 72 |
| Death of Parent(s)/Caretaker(s) | 66 |
| Parent's/Caretaker's Significant Impairment Physical/Emotional | 53 |
| Mentally Ill and Dangerous (Child) | 51 |
| Inadequate Access to Mental Health Services | 26 |
| Drug Abuse (Child) | 25 |
| Parent's/Caretaker's Significant Impairment Cognitive | 22 |
| Whereabouts Unknown | 20 |
| Court Determined that Reasonable Efforts are not Required. | 18 |
| Runaway | 16 |
| Diagnosed Child's Disability | 14 |
| Alcohol Abuse (Child) | 13 |
| Inadequate Access to Medical Health Services | 13 |
| Human Trafficking | 11 |
| Voluntary Relinquishment for Adoption | 10 |
| Child/Young Adult Requests Placement | 7 |
| Failure to Return | * |
| Prenatal Alcohol Exposure | * |
| Safe Haven | * |
| Conflict Related to Child's Sexual Orientation or Gender ID | * |
| Parental Immigration Detainment or Deportation | * |
| Sex Trafficking | * |

Note: Children may have more than one reason for removal. *Number is suppressed due to privacy protection

5,452

children received out-of-home services in 2023 and had a 3(A) petition.

CHILDREN RECEIVING IN-HOME **SERVICES BY AGE (2023)**

Infant (0-1) 10.9% 18.0% School-Age (5-12) | **46.3**%

Teen (13-18) | **24.8**%

CHILDREN RECEIVING OUT-OF-**HOME SERVICES BY AGE (2023)**

Infant (0-1) | 13.3% Total | **5,085** 17.6% School-Age (5-12) | **36.0**%

Teen (13-18) | **33.2**%

TOTAL STAFF CASELOADS IN COMPLIANCE (12/31/2023)

| Service Area | Total Staff | Staff with caseloads In compliance | Percent caseloads in compliance | |
|-----------------|-------------|------------------------------------|---------------------------------------|---|
| Central | 62 | 57 | 91.9% | |
| Eastern | 163 | 112 | 68.7% | |
| Northern | 71 | 63 | 88.7% | |
| Southeast | 98 | 77 | 78.6 % | |
| Western | 55 | 46 | 83.6% | |
| State | 449 | 355 | 79.1% | / |

Compliance as reported by DHHS and determined by the Child Welfare League of America. There are multiple factors influencing caseload including urban or rural, initial assessment, in-home or out-of-home, and court or non-court involvement.



OUT-OF-HOME PLACEMENTS

FOSTER HOME PLACEMENT BEDS (12/31/2023)

| | # of beds available | # of homes available |
|-----------------------|------------------------|-------------------------|
| Foster homes | 4,854 | 2,399 |
| Approved foster homes | 1,530 | 943 |
| Licensed foster homes | 3,324 | 1,456 |

1,861 (54.2%)

children in foster care were placed with relatives or kin.

2,365

kids in out-of-home care also had a sibling in out-of-home care.

56.2%

78.7%

of children were placed in out-of-home care with **all siblings**.

of children were placed in out-of-home care with at least one sibling.

When children must be removed from their homes, it is important to ensure that their placement reduces the trauma of removal and promotes the well-being of the child. Congregate care, which places children in an institutional setting such as a group home or detention center, should be used minimally for out-of-home placements.

Research shows that placement in a family-like setting provides children with improved long-term outcomes in physical and emotional health. Although congregate care may be necessary for some children, for many others, it does not allow children to maintain the strong relationships with trusted adults that are essential for successful development.

THERE ARE THREE TYPES OF FOSTER PARENTS IN NEBRASKA:

Relative foster homes: Foster parents who are related to the child or children whom they care for by blood, marriage, or adoption.

Kinship foster homes: Foster parents who have a significant pre-existing relationship with the child or children for whom they care. (Ex: former teacher, coach, or neighbor.)

Licensed foster homes: Foster parents who live at the licensed residence and care for a child or children who they have not previously known.

WHERE ARE THE KIDS IN OUT-OF-HOME CARE? (12/31/2023)

| | | • |
|--|-------------------------|-------|
| | # | % |
| Adoptive home | 75 | 2.4% |
| Relative home | 1,146 | 36.0% |
| Kinship care | 471 | 14.8% |
| Non-Relative Foster Home | 1,014 | 31.8% |
| Group home | 25 | 0.8% |
| Developmental disability facility | 228 | 7.2% |
| Detention facility | 25 | 0.8% |
| Emergency Shelter Center | 7 | 0.2% |
| Psychiatric residential treatment facility | 23 | 0.7% |
| Independent Living | 60 | 1.9% |
| Hospital | 8 | 0.3% |
| Missing youth | 27 | 0.8% |
| Therapeutic group home | * | 0.1% |
| Youth rehabilitation and treatment center | 73 *data supp | 2.3% |

PLACEMENT STABILITY

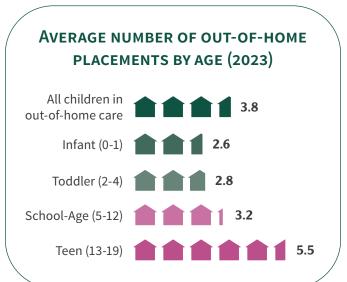


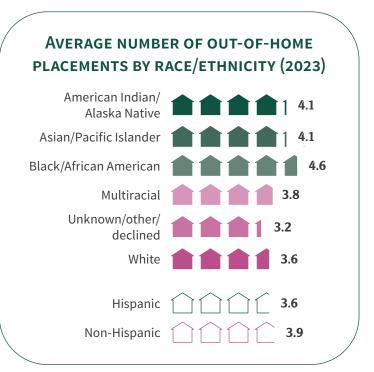
MULTIPLE PLACEMENTS

The Nebraska Department of Health and Human Services counts placement changes when a child moves from one foster care setting to another. Children in stable homes are reported to receive more attention, acceptance, affection, and better care from their foster parents. Children who are in

stabilized homes are more likely to receive therapy, are less delinquent and oppositional/aggressive, and are more likely to be placed with competent and caring foster parents.

Source: University of Illinois, Child and Family Research Center, Placement Stability Study, 1999.



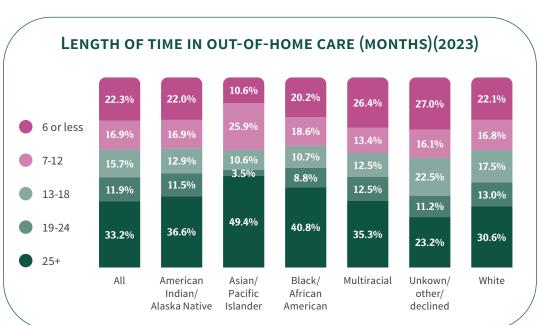


1,525

children **exited** out-of-home care in 2023.

25.6 MONTHS

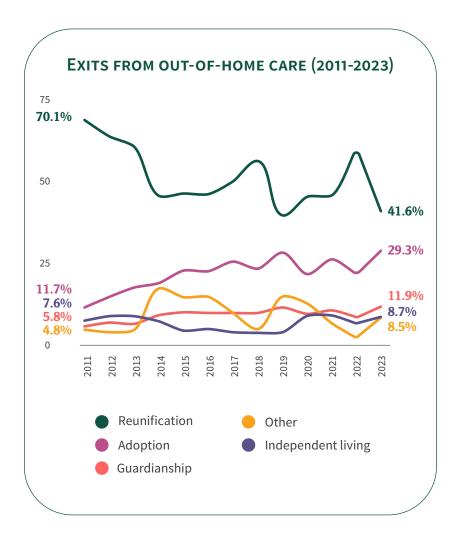
is the mean length of time **away from home** for children in out-ofhome placement in 2023.



PERMANENCY

EXITING THE SYSTEM

Once in the child welfare system, children should be on a track toward achieving permanency in a safe, loving environment. Most of the time, that means they will be reunified with their family and return home. Other times, permanency may be achieved through adoption or guardianship.



1,341

non-court-involved children exited the system in 2023.

2,238

court-involved children exited the system in 2023.

184

children exited into **guardianships** in 2023.

167

children exited into guardianships which were subsidized in 2023.

448
CHILDREN
were adopted
in 2023.

445
ADOPTIONS
were subsidized
in 2023.

25.9 MONTHS

is the mean length of time from **termination of parental rights until adoption** in 2023.

AGING OUT



Family support is key to any successful transition into adulthood, especially for youth who may have been exposed to trauma. Learning to be self-reliant in seeking employment and housing, managing finances, or seeking healthcare can be daunting without family connections. For youth who have been in foster care who do not exit the system to a family, ensuring a strong system of support in this transition is key. The Bridge to Independence (B2i) program works to address this issue. B2i serves youth who must be either working, seeking work, or are in school. In return, they receive Medicaid coverage, a monthly stipend to use for living expenses, and an assigned caseworker on call 24/7 to help them navigate the transition to adulthood.

YOUTH WHO WERE IN OUT-OF-HOME CARE WHEN THEY REACHED THEIR 19TH BIRTHDAY (2023)

| | Total | 123 |
|---|--|-----|
| | Who were DHHS wards | 126 |
| | Who were OJS wards (youth placed at YRTC) | * |
| \ | Who were in (both) | * |

REASONS FOR PARTICIPATION IN THE BRIDGE TO INDEPENDENCE PROGRAM (2023)

Enrolled in secondary school | 98

Enrolled in post-secondary or vocational education | **96**

Participating in a program designed to promote or remove barriers to employment | **163**

Employed 80+ hours per month | 258

Incapacitated due to physical or mental health conditions from employment | 23

84

Young adults in the Bridge to Independence Program were **parenting or pregnant** in 2023.

BRIDGE TO INDEPENDENCE PROGRAM (2023)

359
young adults
participated in
the program.

166 young adults entered the

program.

young adults left the program.

*

young adults **chose to leave** the voluntary services program.

62

young adults left the program due to **lack of cooperation** with the voluntary program.

8

young adults left the program because **housing could not be approved**.

90

young adults successfully completed the B2i Program.

Juvenile Justice

Keeping our children and youth safe is essential to their healthy development. Youth should be held accountable for their actions in developmentally appropriate ways that promote community safety and allow them to grow into responsible citizens.

When youth act out, they should be held accountable primarily by families, schools, and communities, avoiding contact with the juvenile justice system if at all possible. Youth entering and already in the juvenile justice system are entitled to be safe, and their rights must be respected. Retaining strong connections to family, community, and culture help youth thrive within the system. The juvenile justice system should be rehabilitative in nature and designed specifically for youth.

Section Contents

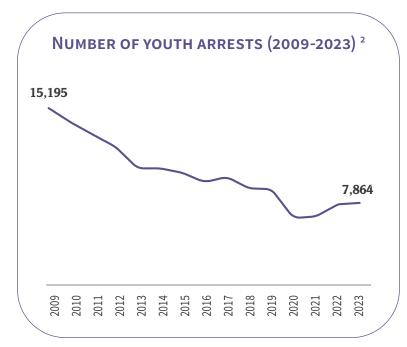
- Arrests
- Disproportionate minority contact
- Pre-trial diversion
- Juvenile court cases
- 80 Access to counsel
- Probation
- Youth in out-of-home care
- Detention
- YRTC & room confinement
- Youth treated as adults



ARRESTS

| YOUTH ARRESTS (2023) 1 | | | | | | | | |
|------------------------|-------|--------|-------|---------------|--|--|--|--|
| Type | Male | Female | Total | % of Total | | | | |
| Curfew | 35 | 14 | 49 | 0.7% | | | | |
| Alcohol | 270 | 200 | 470 | 7.1% | | | | |
| Drug-related | 475 | 252 | 727 | 11.1% | | | | |
| Violent | 115 | 30 | 145 | 2.2% | | | | |
| Person | 1,068 | 786 | 1,854 | 28.2% | | | | |
| Property | 1,253 | 674 | 1,927 | 29.3% | | | | |
| Public order | 200 | 110 | 310 | 4.7% | | | | |
| Weapon | 83 | 4 | 87 | 1.3% | | | | |
| Other | 652 | 285 | 937 | 14.2% | | | | |
| DUI | 53 | 18 | 71 | 1.1% | | | | |
| Total | 4,204 | 2,373 | 6,577 | | | | | |

Note: Youth Arrests by offense data is provided by the Nebraska Crime Commission and does not include a full year of data from the Omaha Police Department.



7,864youths were arrested in 2023. ²

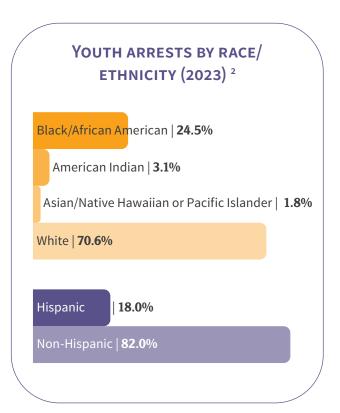
29.3%

property crimes

were the most
common. 1

STATUS OFFENSES

"Status offenses" are non-criminal behaviors, like skipping school, that could not be charged but for the "status" of being a minor.



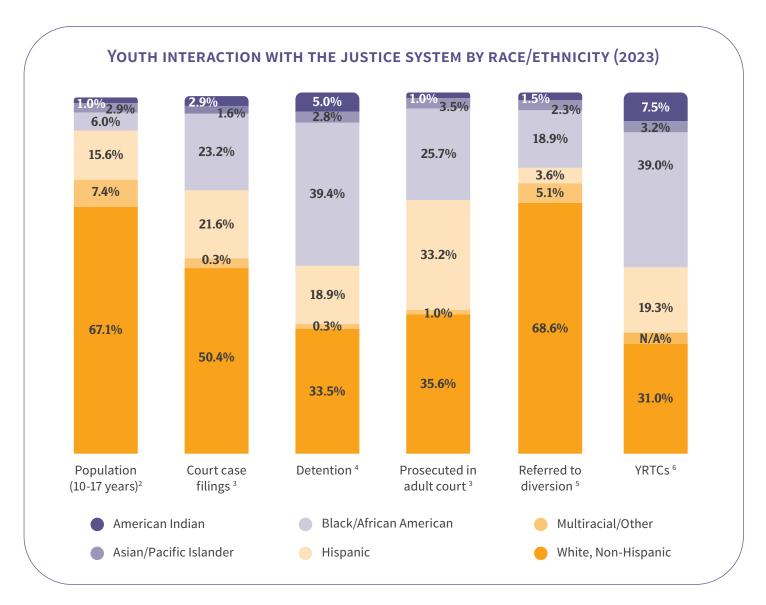
DISPROPORTIONATE MINORITY CONTACT



DISPROPORTIONATE MINORITY CONTACT (DMC)

Despite the promise of equal protection under the law, national research shows that youth of color are overrepresented in the juvenile justice system. This overrepresentation often is a product of decisions made at early points of contact with the juvenile justice system. Where racial differences are found to exist, they tend to accumulate as youth are processed deeper into the system.1

Unfortunately, our juvenile justice system lacks uniform ways of collecting data on race and ethnicity. Although disparities exist across system points, different agencies have different ways of counting Hispanic youth in particular. Additional information on the race and ethnicity of youth arrested, on probation, and in adult prison are available elsewhere in this section.



^{1. &}quot;And Justice for Some: Differential Treatment of Youth of Color in the Juvenile Justice System," National Council on Crime and Delinquency, (January 2007).

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^{2.} U.S. Census Bureau, Population Division, Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2023.

^{3.} Nebraska Juvenile Justice System, Statistical Annual Report 2023.

^{4.} Analysis based on data from individual facilities including Lancaster County Detention Center, Northeast Nebraska Juvenile Services, Douglas County Youth Center, and The Patrick J. Thomas Juvenile Justice Center.

^{5.} Nebraska Crime Comission, Juvenile Diversion in Nebraska 2023 Annual Report.

^{6.} Department of Health and Human Services.



PRE-TRIAL DIVERSION

JUVENILE DIVERSION PROGRAM

Pretrial diversion programs are based on the belief that many juvenile cases are better handled outside of the courthouse doors. These voluntary programs are designed to provide eligible youth an opportunity to demonstrate rehabilitation and make things right with the community, while reducing the cost and burden to taxpayers and

3,939

youths were **referred** to the diversion program in 2023.¹

88

in the diversion program in 2023.

474

of those referred **did not participate** in 2023.¹ 2,658

youths **successfully completed** diversion in 2023. ¹

1

in the diversion program in 2023. ¹

538

youths **did not complete** diversion successfully and were discharged for failing to comply or for a new law violation in 2023. ¹

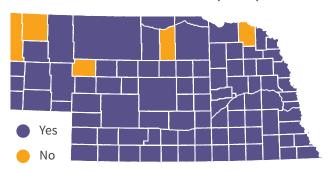
MOST COMMON LAW VIOLATIONS REFERRED TO DIVERSION (2023)¹

of children

| | # of children |
|----------------------|---------------|
| Assault | 604 |
| Alcohol offenses | 592 |
| Drug offenses | 556 |
| Shoplifting | 496 |
| Truancy | 404 |
| Traffic offenses | 415 |
| Criminal mischief | 227 |
| Other theft | 116 |
| Trespassing | 165 |
| Disorderly conduct | 168 |
| Disturbing the peace | 138 |
| Tobacco use by minor | 232 |
| Ungovernable | 114 |
| Other | 747 |
| | |

courts that come with formal charges being filed. By successfully completing his or her diversion plan, a minor has the opportunity to avoid formal charges in the court and get all record of the matter sealed. By diverting these cases from the court system, counties save significant dollars, making successful diversion programs a win-win.

COUNTIES OFFERING A JUVENILE DIVERSION PROGRAM (2023) 1



YOUTH PARTICIPATING IN A JUVENILE DIVERSION PROGRAM (2023) 1

| | Referred | Successful | Unsuccessful | Success Rate |
|------------|----------|------------|--------------|-----------------|
| 10 & Under | 17 | 11 | 1 | 92% |
| 11-12 | 310 | 221 | 37 | 86% |
| 13-14 | 1,062 | 710 | 150 | 83% |
| 15-16 | 1,656 | 1,069 | 248 | 81% |
| 17-18 | 894 | 647 | 102 | 86% |

COMMUNITY-BASED JUVENILE SERVICES AID PROGRAM (SFY 2023)²

173 programs

81 counties

0 tribes

were funded through the Community-Based Juvenile Services Aid Program.

16

prevention/ promotion event programs 146

direct intervention programs 6

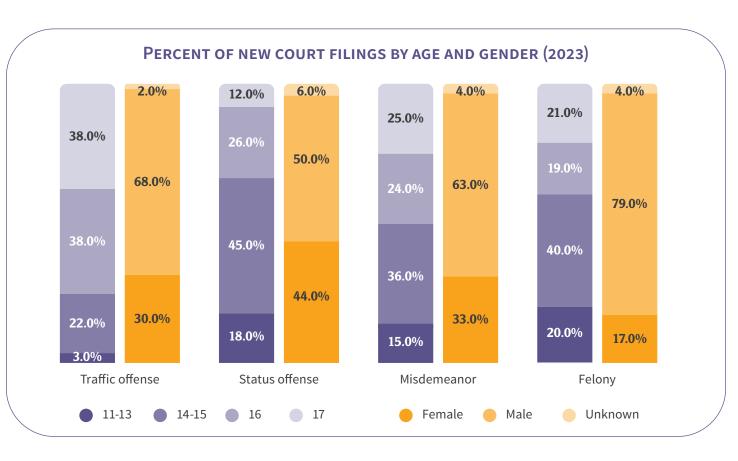
direct service programs system improvement

programs

78

JUVENILE COURT CASES





NUMBER OF NEW JUVENILE COURT FILINGS BY RACE/ETHNICITY (2023)

| | Traffic | Offense | Status | Offense | Misder | neanor | Fe | lony |
|-------------------------------|---------|---------|--------|---------|--------|--------|-----|-------|
| American Indian | 1 | 0.9% | 19 | 2.8% | 57 | 2.0% | 16 | 2.4% |
| Asian/Pacific Islander | 1 | 0.9% | 7 | 1.0% | 24 | 0.8% | 19 | 2.8% |
| Black/African American | 7 | 6.6% | 71 | 10.5% | 482 | 16.8% | 173 | 25.7% |
| Hispanic | 28 | 26.4% | 129 | 19.1% | 441 | 15.4% | 84 | 12.5% |
| White | 58 | 54.7% | 247 | 36.6% | 1,095 | 38.2% | 193 | 28.7% |
| Other | 0 | 0.0% | 0 | 0.0% | 8 | 0.3% | 1 | 0.1% |
| Unknown | 11 | 10.4% | 201 | 29.8% | 757 | 26.4% | 186 | 27.7% |
| Total adjudicated as "admit"* | 106 | 80.2% | 674 | 60.7% | 2,864 | 68.0% | 672 | 72.0% |

^{*}Note: The data provider recording a case being adjudicated as "admit" means that it has been accepted to be true.



ACCESS TO COUNSEL

JUVENILE ACCESS TO COUNSEL

Having an attorney present during proceedings in the juvenile justice system is not only important for youth but a guaranteed constitutional right. The right to counsel is also enshrined in Nebraska statute 43-272(1). The law is meant to protect children at every stage of legal proceedings and requires the court to advise youth, along with their parents, of their right to an attorney and that legal counsel can be provided at no cost if they are unable to afford it.

45.6% of children in **adult criminal court** had an attorney in 2023.

76.8% of children in juvenile court had an attorney in 2023.

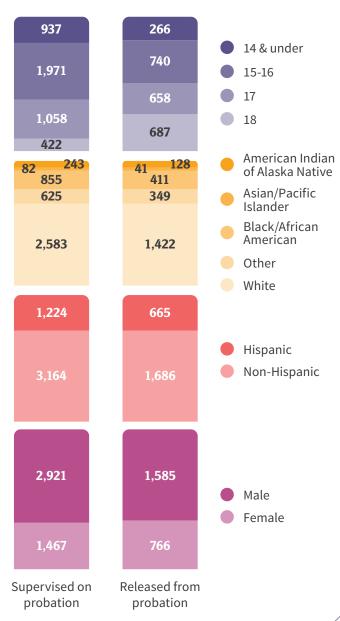
YOUTH IN JUVENILE COURT WITH ACCESS TO COUNSEL BY AGE, GENDER, **AND RACE/ETHNICITY (2023)** 11-13 | **81.3**% 14-15 | **77.2**% 16 | **75.1%** 17 | **74.7**% Female | **73.3**% Male | 78.7% Unknown | 74.2% American Indian | **81.0**% Asian/Native Hawaiian or Pacific Islander | 91.8% Black/African American | 91.1% Hispanic | **73.6**% White | **69.5**% Other | **93.8**% Unknown | **75.2**%

PERCENT OF YOUTH IN JUVENILE COURT WHO HAD ACCESS TO COUNSEL BY COUNTY (2023) No data available No juvenile court cases 0 0.0-19.9% 20.0-39.9% 40.0-59.9% 60.0-79.9% 80.0-100%

PROBATION



YOUTH SUPERVISED ON PROBATION BY AGE, GENDER, AND RACE/ETHNICITY (2023)



4,388

youth were supervised on probation in 2023.

677

2,888

had felony offenses

had misdemeanor, infraction, traffic or city ordinance offenses

823

2,351

had status offenses

were discharged

AVERAGE CASELOAD OF JUVENILE PROBATION OFFICER (2023)

| | Urban | Rural | |
|--------------------------------------|-------|-------|--|
| High-risk/ high-need intervention | 15 | 16 | |
| Low-risk/ low-need intervention | 24 | 23 | |

COST OF SERVICES FUNDED BY PROBATION (2023)

Monthly average per Youth

| Total | \$1,261.54 |
|----------------------|------------|
| In-home services | \$355.21 |
| Out-of-home services | \$2,398.42 |

MEAN LENGTH OF TIME ON PROBATION (2023)

9.5 MONTHS for status offenses

16.1 MONTHS

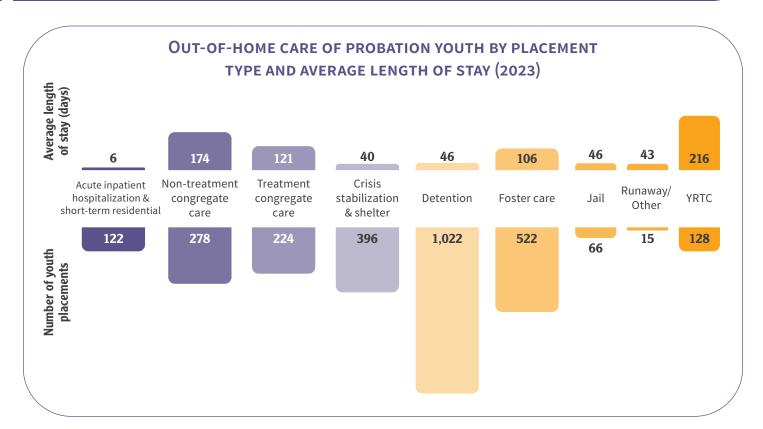
for felonies

10.1 MONTHS

for misdemeanors/infractions



YOUTH IN OUT-OF-HOME CARE



1,502

youth were supervised on probation who were placed in out-of-home care in 2023.

*If a youth had an offense in more than one adjudication type, they will be counted by the youth's highest or most serious offense.

Source: Nebraska Administrative Office of the Courts & Probation.

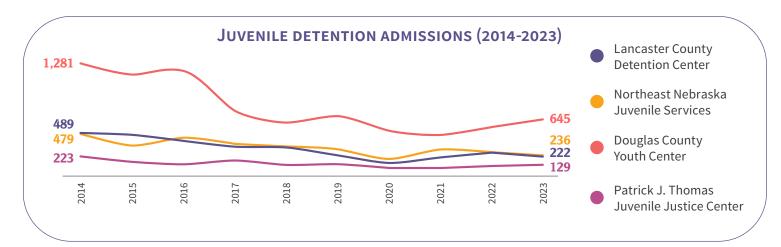
YOUTH ON PROBATION IN OUT-OF-HOME CARE (2023)

| | # | % | |
|---|-------|---------------|--|
| American Indian | 105 | 7.0% | |
| Asian/Pacific Islander | 30 | 2.0% | |
| Black/African American | 421 | 28.0% | |
| Other | 195 | 13.0% | |
| White | 751 | 50.0% | |
| | | | |
| Hispanic | 366 | 24.0 % | |
| Non-Hispanic | 1,136 | 76.0% | |
| | | | |
| Male | 1,064 | 71.0% | |
| Female | 438 | 29.0% | |
| | | | |
| Status offenses* | 96 | 6.0% | |
| Felonies* | 663 | 44.0% | |
| Misdemeanors/infractions/city ordinance offenses* | 751 | 50.0% | |
| Total | 1,502 | | |
| | | | |

DETENTION



| / | HOMBE | . 01 10 | O I II II LLD | III JOVE | TILL DEITH | | ACILITIES (| 2023) | |
|---|-----------------------------------|---------|--------------------------------------|----------|-------------------------------------|-------|-------------------------------------|-------------|-------------------------------------|
| | | Detenti | er County on Center er County) | Juvenile | t Nebraska Services n County) | Youth | ns County n Center ns County) | Juvenile Ju | . Thomas stice Center County) |
| | | # | % | # | % | # | % | # | % |
| | Age | | | | | | | | |
| | 12 & under | 0 | 0% | 0 | 0% | 17 | 2.6% | 1 | 0.8% |
| | 13-14 | 51 | 23.0% | 44 | 18.6% | 141 | 21.9% | 30 | 23.3% |
| | 15-16 | 105 | 47.3% | 124 | 52.5% | 306 | 47.4% | 64 | 49.6% |
| | 17+ | 66 | 29.7% | 68 | 28.8% | 181 | 28.1% | 34 | 26.4% |
| | Race/Ethnicity | | | | | | | | |
| | American Indian/ Alaska Native | 11 | 5.0% | 27 | 11.4% | 17 | 2.6% | 7 | 6.1% |
| | Asian/Pacific Islander | 1 | 0.5% | 2 | 0.8% | 30 | 4.7% | 1 | 0.9% |
| | Black/African American | 87 | 39.2% | 26 | 11.0% | 346 | 53.6% | 27 | 23.7% |
| | Other | 2 | 0% | 0 | 0% | 2 | 0.3% | 0 | 0% |
| | White | 07 | 20.20/ | 112 | 47.00/ | 150 | 22.20/ | 63 | 55.3% |
| | Non-Hispanic | 87 | 39.2% | 113 | 47.9% | 150 | 23.3% | 98 | 86.0% |
| | Hispanic | 34 | 15.3% | 68 | 28.8% | 100 | 15.5% | 31 | 27.2% |
| | Gender | | | | | | | | |
| | Male | 151 | 68.0% | 172 | 72.9% | 516 | 80.0% | 93 | 72.1% |
| | Female | 71 | 32.0% | 64 | 27.1% | 129 | 20.0% | 36 | 27.9% |
| | Times Detained | | | | | | | | |
| | 1 | 121 | 75.2 % | 183 | 77.5% | 488 | 75.7% | 115 | 89.1% |
| | 2 | 25 | 15.5% | 39 | 16.5% | 112 | 17.4% | 7 | 5.4% |
| | 3+ | 15 | 9.3% | 14 | 5.9% | 45 | 7.0% | 7 | 5.4% |
| | Total count | 2 | 222 | 2 | 36 | (| 645 | 12 | 29 |
| | Secure Admissions | 2 | 222 | 1 | 22 | | 645 | |) |
| | Staff Secure Admissions | | 0 | 1 | 14 | | 0 | 12 | 29 |
| | Average Days Detained | 35.1 | l Days | 29.0 |) Days | 34. | 9 Days | 27.0 | Days |
| V | | | | | | | | | |



Source: Individual detention centers.

Juvenile Justice 83

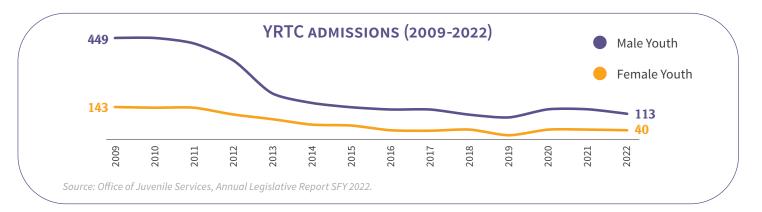


YRTC & ROOM CONFINEMENT

YOUTH REHABILITATION AND TREATMENT CENTERS (YRTCs) SFY 2023

| | Hastings | Lincoln | Kearney |
|-----------------------------------|----------|---------------------------|----------|
| Number admitted for treatment | 31 youth | 3 admissions, 9 transfers | 77 youth |
| Average daily population | 13 youth | 8 youth | 52 youth |
| Average length of stay | 214 days | 244 days | 288 days |
| Average age at admission | 16 years | 17 years | 17 years |
| Average per diem cost per youth | \$2,564 | \$1,981 | \$1,326 |
| % return to facility in 12 months | 6.0% | 9.0% | 12.0% |

Source: Office of Juvenile Servies Annual Report December 2023.



| | | | Room Co | NFINEMEN. | г (SFY 2022-2 | 23) | |
|--|--------------------|----------------------------|---|--|--|--|---|
| | Total incidents | Total youth involved | Median duration of room confinement incidents (hours) | Percent of incidents ending in 4 hours or less | Percent of incidents lasting between 4 and 8 hours | Percent of incidents lasting more than 8 hours | Most common reason for room confinement |
| Nebraska Corrections Youth Facility | 38 | 12 | 68.0 | 16.0% | 2.6% | 81.6% | Danger to other youth (37%) |
| YRTC - Kearney | 506 | 84 | 17.8 | 39.9% | 10.5% | 49.6% | Danger to other youth (30%) |
| YRTC - Lincoln | 178 | 35 | 25.2 | 34.3% | 11.8% | 53.9% | Danger to other youth (29%) |
| YRTC - Hastings | 107 | 29 | 11.4 | 39.3% | 13.1% | 47.7% | Danger to staff (25%) |
| Douglas County Youth Center | 332 | 169 | 102.5 | 9.6% | 0.9% | 89.5% | Fighting (60%) |
| Lancaster County Youth Services Center | 1,642 | 124 | 3.1 | 77.6% | 11.3% | 11.1% | Danger to other youth (22%) |
| Northeast Nebraska Juvenile Services | 19 | 15 | 10.0 | 42.1% | 15.8% | 42.1% | Danger to Staff (63%) |
| Patrick J. Thomas Juvenile Justice Center | 96 | 35 | 8.1 | 86.5% | 11.5% | 2.1% | Danger to Other youth (9%) |

Research associates room confinement with serious consequences for mental and physical health including: - "Increased risk of selfharm and suicidal ideation; - Greater anxiety, depression, sleep disturbances, paranoia, and aggression; Exacerbation of the on-set of pre-existing mental illness and trauma symptoms; and, Increased risk of cardiovascular-related health problems."1 Regulations, policies, and practices on when, how, and why juvenile room confinement is used differ among types of facilities.

Room confinement should be used as the absolute last resort and only in cases of threats of safety to the individual or other residents and only after other interventions have failed. Room confinement should be timelimited; the youth should be released as soon as they are safely able and should never last longer than 24 hours. During confinement, the youth should be closely monitored and seen by mental health professionals. All instances of room confinement should be recorded and reviewed.1

YOUTH TREATED AS ADULTS



225

youth were prosecuted in adult courts **in 2023**. ¹

This is down from

2,019

YOUTH PROSECUTED IN ADULT CRIMINAL COURTS BY CASE TYPE (2023) 1

| Total Youth | 225 |
|-------------|-----|
|-------------|-----|

Traffic 23.1%

Misdemeanor 36.9%

Felony **40.0**%

A motion to transfer from juvenile court to adult court in 2023 was:

Requested in

54 CASES¹

Granted in

2 CASES¹

A motion to transfer **from adult court to juvenile court** in 2023 was:

Requested in

101 CASES¹

Granted in

72 CASES¹

| YOUTH C | CASES TRIED | IN ADULT | COURT | (2023) | 1 |
|---------|-------------|-----------------|-------|--------|---|
|---------|-------------|-----------------|-------|--------|---|

| | | | | | | () | | | |
|---------------------------|-----|---|----|-------------------------|----|---------------------------|----|---------------|--|
| | | outh cases prosecuted Youth sentenced in adult court to probation | | Youth sentenced to jail | | Youth sentenced to prison | | | |
| Age | | | | | | | | | |
| 11-13 | 0 | 0% | 0 | 0% | 0 | 0% | 0 | 0% | |
| 14-15 | 19 | 8.4% | 13 | 8.8% | 0 | 0% | 6 | 10.5% | |
| 16 | 76 | 33.8% | 54 | 36.5% | 8 | 23.5% | 17 | 29.8% | |
| 17 | 130 | 57.8% | 81 | 54.7% | 26 | 76.5% | 34 | 59.6 % | |
| Race/Ethnicity | | | | | | | | | |
| American Indian | 2 | 0.9% | 0 | 0% | 1 | 2.9% | 1 | 1.8% | |
| Asian/Pacific Islander | 7 | 3.1% | 5 | 3.4% | 1 | 2.9% | 1 | 1.8% | |
| Black/African American | 52 | 23.1% | 21 | 14.2% | 6 | 17.6% | 26 | 45.6% | |
| Hispanic | 67 | 29.8% | 47 | 31.8% | 8 | 23.5% | 16 | 28.1% | |
| Other/Unknown | 25 | 11.1% | 16 | 10.8% | 6 | 17.6% | 5 | 8.8% | |
| White, Non- Hispanic | 72 | 32.0% | 59 | 39.9% | 12 | 35.3% | 8 | 14.0% | |
| Gender | | | | | | | | | |
| Male | 167 | 74.2% | 99 | 66.9% | 26 | 76.5% | 53 | 93.0% | |
| Female | 45 | 20.0% | 40 | 27.0% | 5 | 14.7% | 2 | 3.5% | |
| Unknown | 13 | 5.8% | 9 | 6.1% | 3 | 8.8% | 2 | 3.5% | |
| Total | 2 | 225 | | 148 | | 34 | | 57 | |

AN AGE-APPROPRIATE RESPONSE

Research consistently indicates that treating children as adults neither acts as a deterrent, nor does it prevent crime or reduce violence. Instead, prosecution in adult court exposes youth to more risks and delays or prevents treatment and can burden them with permanent records which may act as barriers to future education and employment opportunities. Nebraska law requires that all children age 17 or younger charged with a misdemeanor or low-level felony must have their cases originate in juvenile court. This means that many more children are now receiving the benefit of speedy access to treatment services, a developmentally-appropriate court process aimed at rehabilitation, and the potential to have their records sealed to set them up for a brighter future.

YOUTH IN ADULT PRISONS AND JAILS (2023) ²

76 Male | **0** Female

youth (18 and under) were **held** in a Nebraska **correctional facility** for safekeeping reasons or waiting assessment.

youth were sentenced to a Nebraska prison.

YOUTH INCARCERATED IN CORRECTIONAL FACILITIES BY RACE/ETHNICITY (2023) ²

American Indian 7

Asian | 0

Black/African American | 33

Hispanic | 26

Other/Unknown | 0

White, Non-Hispanic | 10



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Any opinions, views, or policy positions expressed in this Kids Count in Nebraska Report can only be attributed to Voices for Children in Nebraska. These opinions do not

necessarily represent the views of any members of the Technical Team.

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