2019

KIDS COUNT IN NEBRASKA REPORT

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Cover featuring photos of Nebraska children, including those from Lincoln Lighthouse After School Program, Boys Town, and Sarpy County Head Start

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.

This research is funded by the Annie E. Casey Foundation, with support from The Weitz Family Foundation and Presbyterian Church of the Cross. We thank them for their support and acknowledge that the findings and conclusions presented in this report are those of the author(s) alone, and do not reflect the opinions of these organizations or individuals.

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 2006 to 2019 are available for download at www.voicesforchildren.com/kidscount.

Additional copies of the *Kids Count in Nebraska 2019 Report*, as well as reports from 1993 through 2018, are available from:

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Dear Kids Count Reader,

Welcome to the 27th edition of the *Kids Count in Nebraska Report*! We are excited to bring to you this year's report and all the updated data on the well-being of children in Nebraska that comes with it. You may notice a few changes to this year's prior from prior years. Most of the data contained within the report is still there, but we have refreshed the look. We hope you enjoy the updated design and it makes the data even easier to read and use.

Every year, we add more and more indicators, and these additions were starting to create a very large, cumbersome book that was very paper heavy. In order to be a bit more environmentally conscious and save some paper and shipping cost, we made the decision to remove the county-level pages previously found in the back of the book from the print version of the report. No need for despair, the county data can still be found online at the Annie E. Casey Foundation's KIDS COUNT Data Center – datacenter.kidscount.org. We think the Data Center offers an even more user-friendly method of getting the county specific data you need. It allows for more years of information to be included in the query as well as the ability to choose the counties that are most relevant to you, rather than sifting through all 93 that were previously published in the paper version of *Kids Count*. You can easily map or graph the data you need right from there! Additionally, Voices published a fact sheet for each of the 93 counties if you need a quick snapshot on the overall well-being of children where you live. These can be found and printed from our website – voicesforchildren.com.

Our commentary this year takes a look at the data on school discipline in Nebraska, and we uncovered some startling disparities in the process. Black children and children with disabilities are disproportionately impacted by all levels of discipline, especially those that are exclusionary. We must work to ensure that our education system's discipline policies are structured in a way to produce equitable outcomes for all kids in Nebraska.

We hope you find this year's edition of the *Kids Count in Nebraska Report* helpful. As always, we welcome your feedback. This report exists to help you—whether you are a policymaker, legislative staff member, administrator, child advocate, or anyone else who wants to help ensure that all Nebraska's children have the opportunity to lead the happy and healthy life they deserve.

Finally, we want to extend our thanks to the many experts and data providers who lent their expertise to the production of this report. Thank you.

Please enjoy the *2019 Kids Count in Nebraska Report*!

Sincerely,

Aubrey Mancuso

Aubrey Mancuso, MSW
Executive Director

Chrissy Tonkinson

Chrissy Tonkinson, MPH
Research Coordinator

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About Voices for Children

Founded in 1987, Voices for Children in Nebraska has over a 30-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:

Voices for Children in Nebraska is the independent voice building pathways to opportunity for all children and families through research, policy, and community engagement.

VISION:

We will engage the public and state leaders to build systems removing obstacles and promoting opportunities for ALL children to lead healthy, secure, and fulfilling lives.

VALUES:

All children deserve an equal opportunity to succeed in life. To ensure kids remain at the center of priorities and programs:

- Informed research drives our direction.
- When a policy is good, we support it; when it is harmful, we fight it; when it is missing, we can create it.
- Community engagement is how we promote systems change.

Voices for Children in Nebraska's 2019 Board of Directors:

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

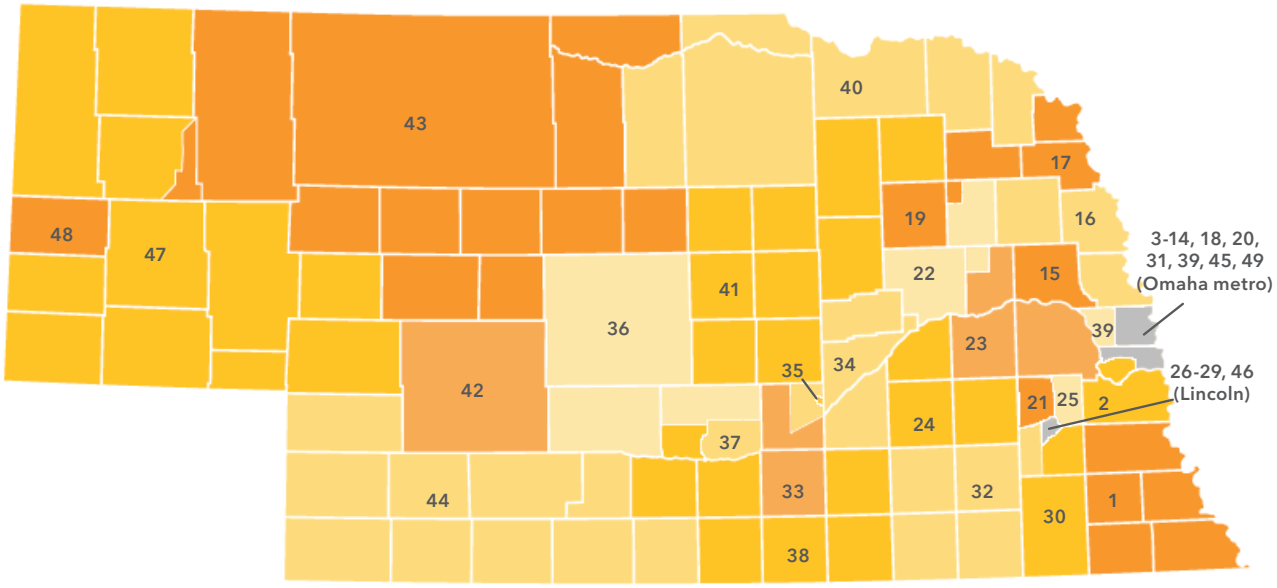
Youth are held accountable for their actions in developmentally appropriate ways that promote community safety and allow them to grow into responsible citizens.

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.

1 Find your district



2 Identify your elected official or officials

2018 Nebraska Legislature

Senator	District	Office Phone	Email
Albrecht, Joni	17	471-2716	jalbrecht@leg.ne.gov
Arch, John	14	471-2730	jarch@leg.ne.gov
Blood, Carol	3	471-2627	cblood@leg.ne.gov
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Williams, Matt	36	471-2642	mwilliams@leg.ne.gov
Wishart, Anna	27	471-2632	awishart@leg.ne.gov

Other elected officials

U.S. President: Donald Trump
202-456-1414, president@whitehouse.gov

Nebraska Governor: Pete Ricketts
402-471-2244, www.governor.nebraska.gov

Nebraska Secretary of State: Bob Evnen
402-471-2554, www.sos.ne.gov

Nebraska Attorney General: Doug Peterson
402-471-2682, www.ago.nebraska.gov

Nebraska State Treasurer: John Murante
402-471-2455, www.treasurer.nebraska.gov

U.S. Senator: Deb Fischer
202-224-6551, www.fischer.senate.gov

U.S. Senator: Ben Sasse
202-224-4224, www.sasse.senate.gov

U.S. Representative-1st District: Jeff Fortenberry
202-225-4806, www.fortenberry.house.gov

U.S. Representative-2nd District: Don Bacon
202-225-4155, www.bacon.house.gov

U.S. Representative-3rd District: Adrian Smith
202-225-6435, www.adriansmith.house.gov

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Know your issues, share your data

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

· Legislative Priority bills

· Blog

· *Kids Count NEteractive* 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

Education is a key component of future opportunity for children, and we should ensure that our education system is setting all students up for success. To keep students in school and on track, it is important that school discipline policies are structured in a way that doesn't hinder student success. We all benefit from more students being prepared to enter the workforce and fewer students facing the challenges that come with dropping out of school.

Research indicates that building a positive school culture and strong relationships between students, teachers, and administrators are key to supporting student success. Overreliance on exclusion from school as a discipline method can push students out of the school system and into what is known as the school-to-prison pipeline, whereby students are referred to the court systems for issues that arise in school. This increases the likelihood that they will become involved with the criminal justice system.

School discipline methods that keep students away from school through suspensions, expulsions, or transfers are all exclusionary forms of discipline. By contrast, non-exclusionary discipline relies on interventions that are restorative, including proactive measures that promote a culture of healthy and appropriate behaviors.

Exclusionary discipline also plays a role in increasing the opportunity gap in the educational system, as such punishments are disproportionately applied to students of color and students with disabilities.[i,ii,iii] Data shows that these student populations are less likely to graduate high school on time, and show lower rates of reading, math, and science proficiency.

Exclusionary discipline policies have also been linked to lower educational attainment not only for suspended or expelled students, but for the student body as a whole. Studies have shown that schools with a higher reliance on exclusion score lower on academic achievement tests among the total student body, even after controlling for socioeconomic and demographic factors.[iv] Ensuring that there are appropriate educational protections for students who might otherwise be at risk of drop out will benefit both schools and the larger community by ensuring that more students are completing their education.

School Discipline in Nebraska

School discipline in Nebraska is governed by the Nebraska Student Discipline Act (NSDA). The purpose of the act is to "assure the protection of all elementary and secondary school students' constitutional right to due process and fundamental fairness within the context of an orderly and effective educational process."[v] The NSDA outlines exclusionary practices including: short-term suspension, long-term suspension, expulsion, and mandatory reassignment.

The "alternative education/pre-expulsion" policy identified in the NSDA provides a more constructive discipline option. This policy is only applicable to students once they reach the discipline level of expulsion and therefore, is more of a reactive than proactive policy. This procedure allows each school district the choice of providing an "alternative education" option to those students facing expulsion. Under the alternative education policy, school districts may send students between school districts in a joint effort to provide an alternative educational setting, as well as employ "individually prescribed educational and counseling programs; a community-centered classroom with experiences for the student; an observer or aide in governmental functions; an on-the-job trainee; or a participant in specialized tutorial experiences."[v] This program is required to be individualized to each student and enables them to remain in a school setting and obtain academic credit toward graduation. Importantly, the "alternative education/pre-expulsion" policy is not a requirement of each school district; if a district does not provide an alternative educational program for expelled students, the district is required to "work with the parent, student, school representative, and a representative of either a community organization with a mission of assisting young people, or a representative of an agency involved with juvenile justice to adopt a plan for the student to fulfill their educational requirements."[v] While the NSDA includes language on some non-exclusionary policies, it lacks a mechanism by which consistency in school discipline policy among school districts can be regulated and enforced.

Types of Discipline

Exclusionary Discipline

Exclusionary discipline, which has been the preferred technique for about the past forty years, has been commonly defined as office referrals, in- or out-of-school suspension, expulsion or alternative education. Research demonstrates that three marginalized groups are disproportionately likely to experience this form of discipline and for longer periods of time: students of color, socioeconomically disadvantaged students and those with disabilities. Despite exclusionary discipline being the most prevalent discipline tool, "high exclusionary discipline rates are positively associated with academic failure, high school dropout, involvement with the juvenile justice system, grade retention, and illegal substance abuse."[ii] The use of exclusionary discipline practices deprives a student from access to solutions to the very problems that may be the source of their disruptive behavior as "then they are unable to access the very forces that might prepare them to be more productive citizens."[ii]

The primary goal of any school discipline policy is and should be to create a safe, effective school environment for all students. There is no evidence that exclusionary policies improve school safety but these policies do increase the likelihood that excluded students will have contact with the juvenile justice system and decrease their likelihood of academic success.

Commentary

Non-Exclusionary Discipline

Although researchers overwhelmingly agree that exclusionary discipline leads to a lower likelihood of academic success and a higher likelihood of contact with the juvenile justice system, there is less consensus on alternative solutions.[vi] Three main programs are cited in research studies: positive behavior support or positive behavioral interventions and supports (PBIS), social and emotional learning (SEL), and restitution or restorative approaches.

• The PBIS model proactively works to establish a climate where appropriate behavior is the norm and students are rewarded for following community standards.[vii] When a student fails to exhibit appropriate behavior, interventions are adopted that are tailored to the students and work to teach social and study skills to correct the behavior and keep the child in school.

• SEL programs proactively instruct students within classroom lessons on social and emotional competencies and work to promote emotional literacy, self-control, social competence, positive peer relations, and interpersonal problem-solving skills.[viii]

• Restitution and restorative justice models are reactive in nature. They are implemented only after harm has occurred. The models focus on the relationship development between student and administrator and work to help the student engage and understand how their actions affect the school. Both the student and administrator then work together to determine how the wrongs caused by the student's behavior can be set right.[vii]

The Data in Nebraska

The Office of Civil Rights' Civil Rights Data Collection (CRDC) collects and publishes self-reported data from individual schools and districts for all public schools.[ix] The most recent CRDC data on school discipline was collected in 2015. The CRDC reports data disaggregated by sex, race/ethnicity, and disability status. For our purposes, we will utilize IDEA status as an indicator for disability as most disabled students fell under the IDEA status designation. IDEA status ensures "that a child with a disability will receive an individualized educational program that is designed to meet the child's unique needs and provide the child with educational benefit, so the child will be prepared for 'for employment and independent living'." Unfortunately, the CRDC does not provide data on school discipline by Free and Reduced-Price Lunch designation, so data on how family income impacts the discipline of students is unavailable.

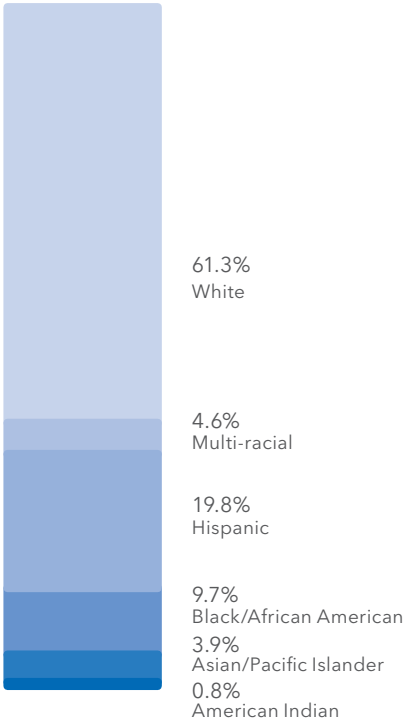
The 2015 CRDC does not provide statewide data and in order to protect the privacy of students the CRDC masks very low occurring instances of discipline. Due to this and research acknowledging that students of color and high rates of poverty are disproportionately concentrated in urban school districts, our analysis of the data includes an aggregate of the school districts in the ten most populous cities in Nebraska as well as each of the school districts contained in the Learning Community of Douglas and Sarpy Counties.[x,xi,xii] As the CRDC only collects data on public schools, this research does not include discipline data from private schools.

SCHOOL DISTRICTS INCLUDED IN ANALYSIS

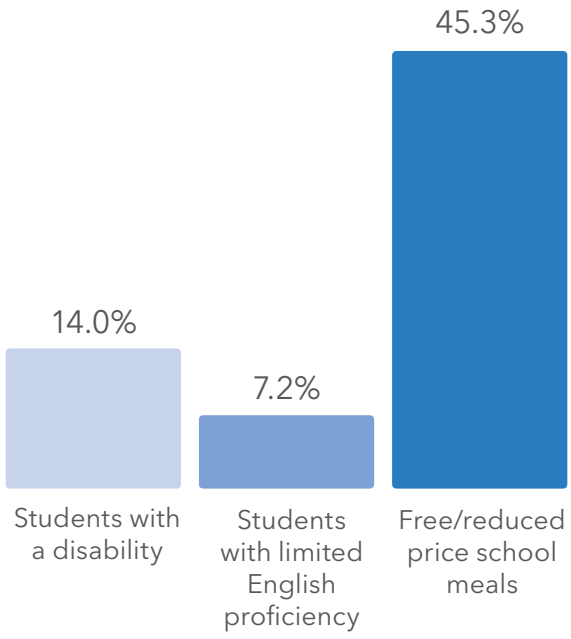
Adams Central Public Schools, Hastings	Bellevue Public Schools, Bellevue	Bennington Public Schools, Bennington
Columbus Public Schools, Columbus	Douglas County West Community Schools, Douglas County	Elkhorn Public Schools, Omaha
Fremont Public Schools, Fremont	Grand Island Public Schools, Grand Island	Gretna Public Schools, Gretna
Hastings Public Schools, Hastings	Kearney Public Schools, Kearney	Lakeview Community Schools, Columbus
Lincoln Public Schools, Lincoln	Millard Public Schools, Millard	Norfolk Public Schools, Norfolk
North Platte Public Schools, North Platte	Northwest Public Schools, Grand Island	Omaha Public Schools, Omaha
Papillion La-Vista Public Schools, Papillion & La-Vista	Ralston Public Schools, Omaha	Springfield Platteview Community Schools, Springfield
	Westside Community Schools, Omaha	

ENROLLMENT BY RACE/ETHNICITY

The school districts included in this data enrolled 203,732 students, 61.1% white, and 38.7% students of color



PERCENT OF STUDENTS BY SPECIFIC NEED



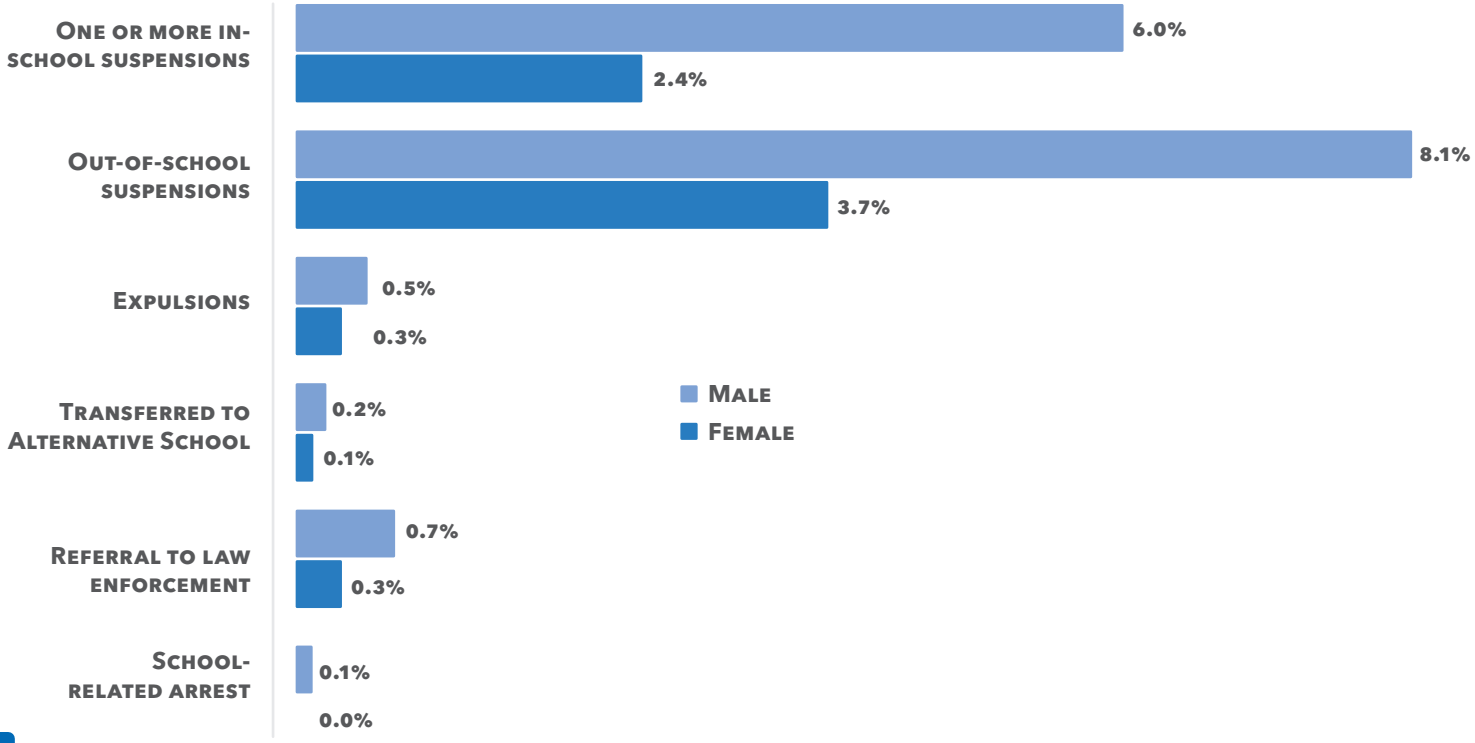
Commentary

Type of Discipline	Total Students	% of Enrollment
Corporal punishment	0	0.0%
Students receiving one or more in-school suspensions	8,646	4.2%
Students receiving out-of-school suspension	12,166	6.0%
Students receiving only one out-of-school suspension	7,097	3.5%
Students receiving more than one out-of-school suspension	5,069	2.5%
Expulsions	834	0.4%
Expulsions with educational services	776	0.4%
Expulsions without educational services	16	0.0%
Expulsions under zero-tolerance policies	42	0.0%
Transferred to Alternative School	389	0.2%
Referral to law enforcement	1,015	0.5%
School-related arrest	107	0.1%

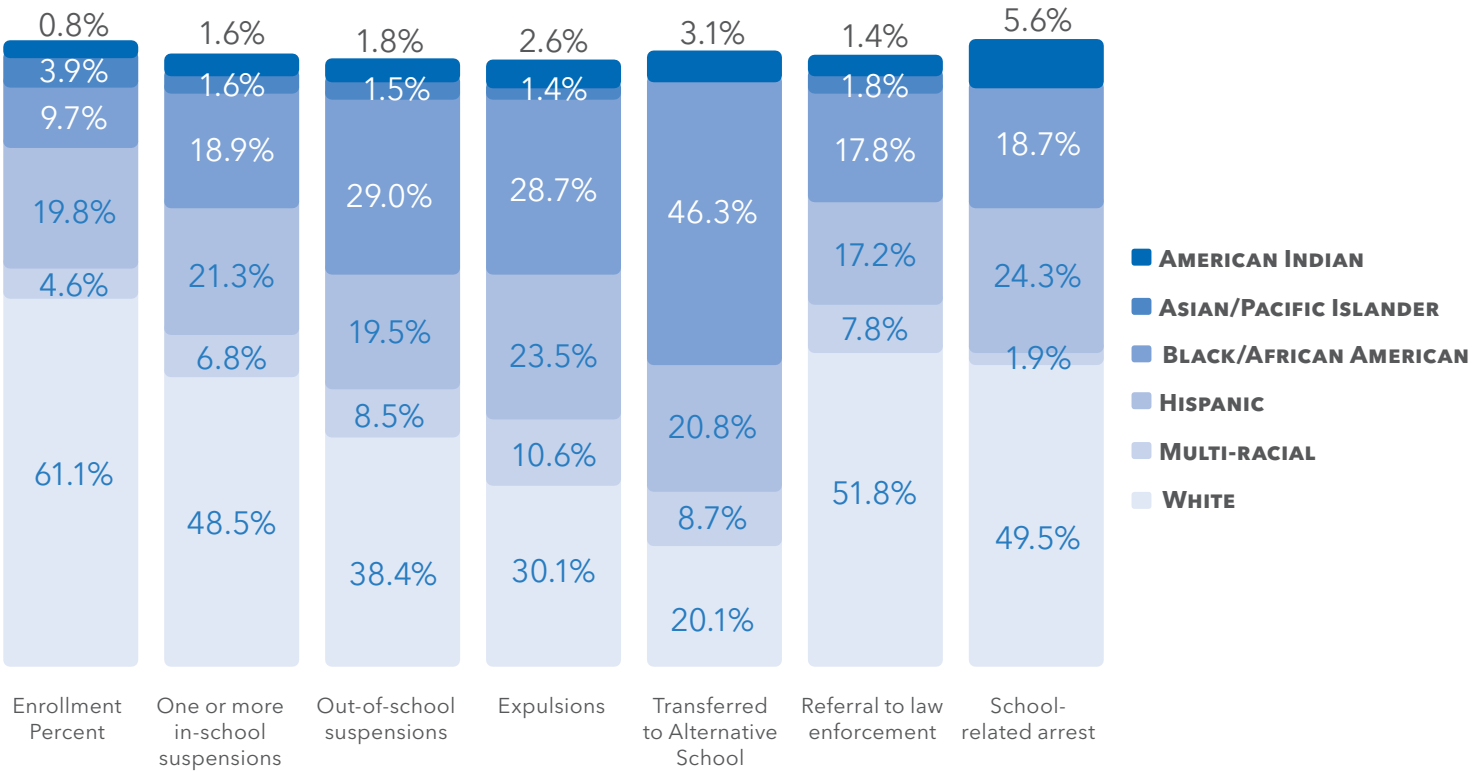
The most frequently experienced form of disciplines were in-school and out-of-school suspensions, experienced by 4.2% and 6.0% of students respectively. There were no cases of corporal punishment reported, therefore it will no longer be included in the charts to follow.

Discipline by gender

Males were more likely to experience every type of discipline than females.

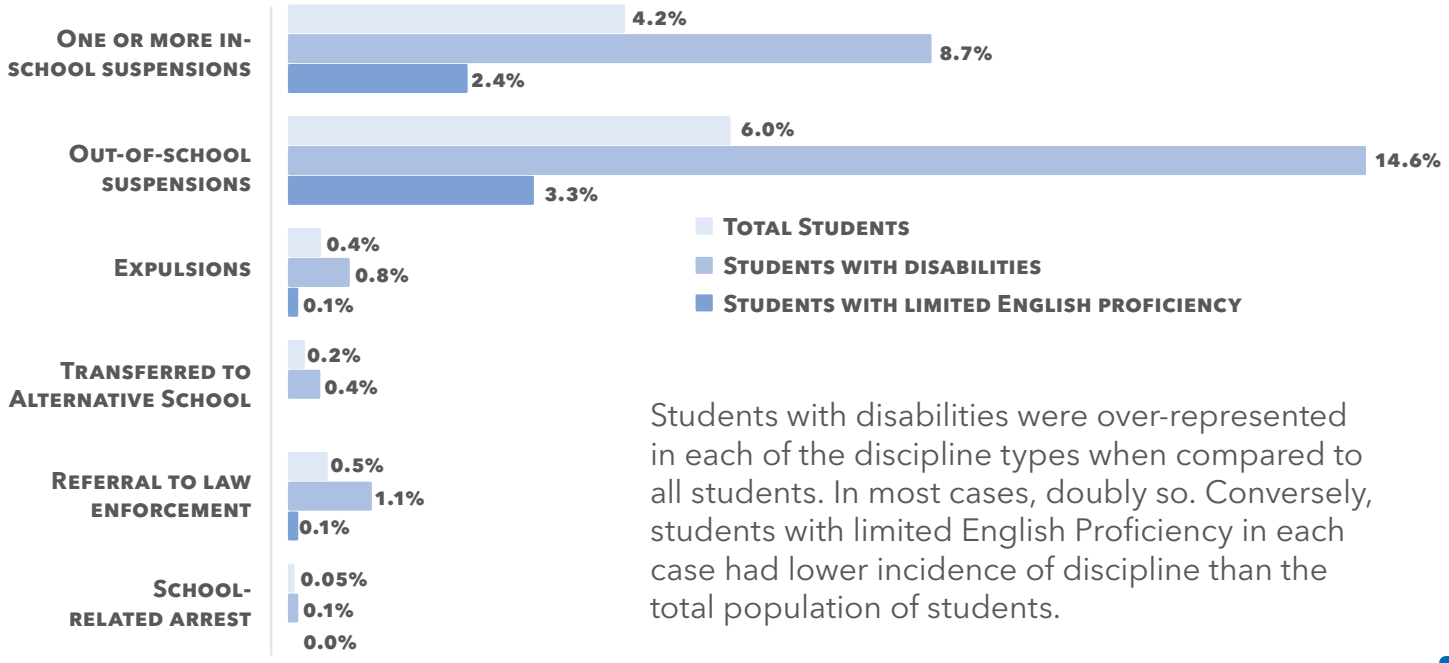


TYPE OF DISCIPLINE BY RACE/ETHNICITY



American Indian, Black, and multi-racial children experience disproportionate rates of every type of discipline. Most notably are the rates of being transferred to alternative schools and expulsions.

DISCIPLINE BY SPECIFIC NEED



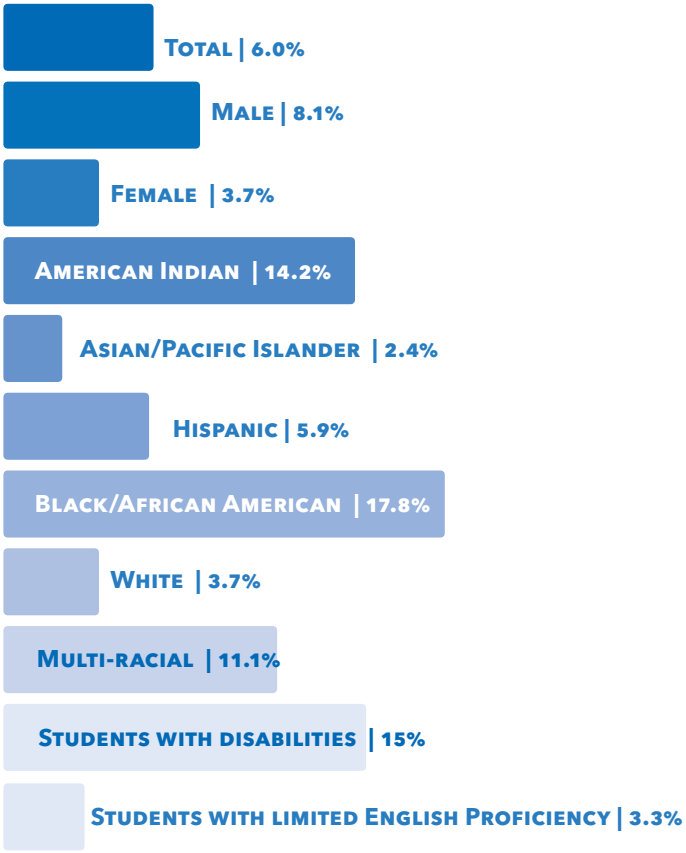
Students with disabilities were over-represented in each of the discipline types when compared to all students. In most cases, doubly so. Conversely, students with limited English Proficiency in each case had lower incidence of discipline than the total population of students.

Commentary

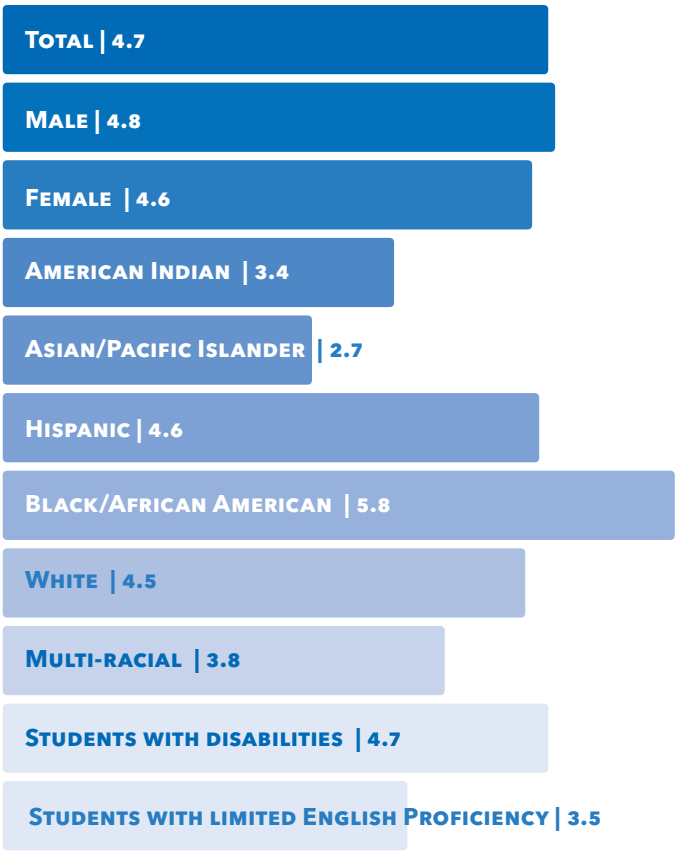
Suspensions

Of the total number of students enrolled, 6% were suspended out-of-school at least once during the school year. Males experienced twice the rate of suspension than females. 42% of students who were suspended out-of-school were suspended more than once, and of the students who are suspended, an average of 4.7 school days were missed as a result of suspension. Black students, and students with disabilities were the most likely to be suspended out-of-school at least once during the school year.

Percent of students who were suspended out-of-school



Average days missed due to out-of-school suspension

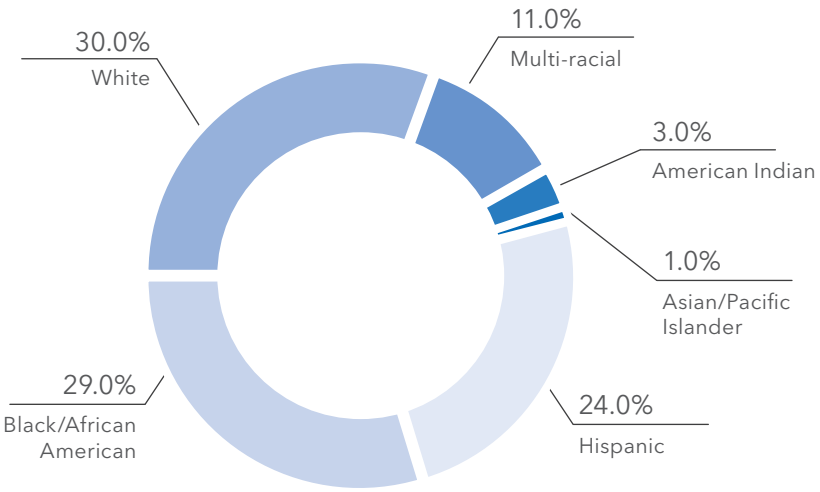


The high rates of suspension also impacted the number of days these students missed from school.

Expulsions

834 students were expelled – 42 under zero-tolerance policies, 16 without educational services, and 776 with educational services. Male students made up 66% of expulsions, and 27% of those expelled were students with disabilities.

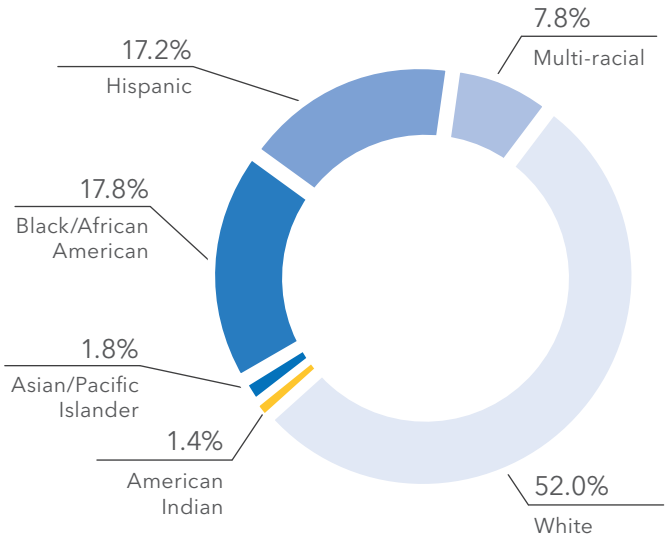
EXPULSIONS BY RACE/ETHNICITY



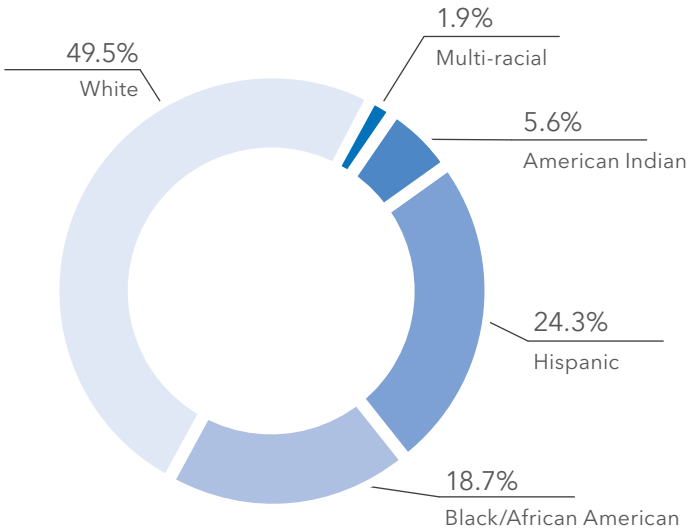
INTERACTION WITH LAW ENFORCEMENT

The school-to-prison pipeline is a process by which children are funneled out of our public schools and into the juvenile and criminal justice systems. Discipline categorized as referral to law enforcement and school-related arrests fall into the school-to-prison pipeline spectrum. 1,015 children were referred to law enforcement and 107 were arrested for a school related reason. 30% of students who were referred to law enforcement and 32% of those with a school-related arrest had a disability. Interestingly, while children of color are overrepresented for every type of discipline, this trend is lessened when looking at these two indicators.

REFERRAL TO LAW ENFORCEMENT BY RACE/ETHNICITY



SCHOOL-RELATED ARREST BY RACE/ETHNICITY



Commentary

Other discipline data of note

- 11 preschoolers were suspended out-of-school
- There were 2,898 instances of physical restraint and 3,216 instances of seclusion, a large majority of which were used on students with disabilities – 2,747 and 2,519 respectively.

Conclusion and Policy Recommendations

The research overwhelmingly indicates that school discipline policy should diverge from the exclusionary and zero tolerance policies that dominate the education system today. To ensure our system is structured and funded to produce equitable educational outcomes for all kids in Nebraska, we recommend:

1. Data Collection on School Discipline: The Nebraska Department of Education should collect and share accurate, recent, disaggregated data regarding school discipline. An important first step in school discipline reform and accurately explaining its need, starts with addressing the data. National trends indicate that exclusionary policies are problematic as they disproportionately impact students of color, socioeconomically disadvantaged students and those with disabilities. Moreover, studies show that even when accounting for socioeconomic status, African Americans are still disproportionately recipients of school discipline.[x,xii,xiii] "Disaggregating data allows for patterns and other critical information to be unveiled enabling problems and successes to be more easily identified. A state-level database housed within NDE tracking exclusionary discipline and law enforcement involvement would create greater transparency as policymakers consider appropriate statutory and administrative changes, and families consider where to enroll their children.

2. Investing in Alternatives to Exclusionary Discipline: Nebraska lawmakers should invest in and emphasize alternative disciplinary procedures and restorative practices in schools. Alternative disciplinary procedures "have been shown to reduce schools' need for exclusionary discipline by preventing student misbehavior in the first place and successfully modifying misbehavior when it occurs."[vii] The research shows that the realm of school discipline is evolving from traditional exclusionary policies to more inclusive, non-exclusionary policies. As a first step, the NSDA should be amended to reflect an educational system that prioritizes non-exclusionary discipline and funding should be appropriated as needed to support enhanced inclusive policies and practices.

3. Increasing Consistency Across Schools and Addressing Disproportionality: The Nebraska School Discipline Act should be amended to establish consistency in school discipline policy across school districts. We should also work to address disparate outcomes in our discipline procedures. Students of color, those with disabilities, and those from lower-income families should not be subjected to harsher consequences for their behaviors than their peers. Including evaluation of school districts discipline policies in an amended version of the NSDA would help to account for implicit biases and ensure that discipline methods are equitable in nature.

The overarching goal of these policy suggestions is to create a more equitable and just public-school system in the state of Nebraska where Nebraska can serve as a leader in school discipline reform that prioritizes all students' well-being and educational outcomes.

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i. Triplett et al. Zero Tolerance, School Shootings, and the Post-Brown Quest for Equity in Discipline Policy: An Examination of How Urban Minorities Are Punished for White Suburban Violence, The Journal of Negro Education 83, no. 3 (2014): 352-370, https://www.jstor.org/stable/10.7709/jnegroeducation.83.3.0352.

ii. Noltemeyer and Mcloughlin, Patterns of Exclusionary Discipline by School Typology, Ethnicity, and their Interaction, 2010.

iii. Skiba, R, "Special Education and School Discipline: A Precarious Balance," Behavioral Disorders 27, no. 2 (2002): 81-97, http://www.jstor.org/stable/23889132.

iv. Skiba et al., Are Zero Tolerance Policies Effective in the Schools? An Evidentiary Review and Recommendations, American Psychological Association Zero Tolerance Task Force, 2006.

v. Nebraska Student Discipline Act, Section 79-254, (1997).

vi. Yang, K. (2009). Focus on Policy: Discipline or Punish? Some Suggestions for School Policy and Teacher Practice. Language Arts, 87(1), 49-61. Retrieved from http://www.jstor.org/stable/41484230

vii. Mergler, M.S., Vargas, K.M., & Caldwell, C. (2014). Alternative discipline can: benefit learning. The Phi Delta Kappan, 96(2), 25-30. Retrieved from http://www.jstor.org/stable/24376156.

viii. Gregory, A., & Fergus, E. (2017). Social and Emotional Learning and Equity in School Discipline. The Future of Children, 27(1), 117-136. Retrieved from http://www.jstor.org/stable/44219024.

ix. Office of Civil Rights. (2015). School/District Search. Civil Rights Data Collection. Retrieved from https://ocrdata.ed.gov/DistrictSchoolSearch

x. Fabelo, T., Thompson, M.D., Plotkin, M., Carmichael, D., Marchbanks, M.P., & Booth, E.A. (2011). Breaking schools' rules: A statewide study of how school discipline relates to students' success and juvenile justice involvement. New York, NY: Council of State Governments Justice Center.

xi. Skiba, R., Michael, R. S., Nardo, A. C., & Peterson, R. (2002). The color of discipline: Sources of racial and gender disproportionality in school punishment (Policy Research Report #SRS1). Bloomington: Indiana University, Indiana Education Policy Center.

xii. Rocque, M. (2010). Office discipline and student behavior: Does race matter? American Journal of Education, 116, 557-581.

Race & Opportunity Index

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

Education

- 3- and 4-year-olds enrolled in school
- English Language Arts proficiency at 3rd grade
- 16-24-year-olds employed or attending school

Health

- Children with health insurance coverage
- Infants receiving adequate prenatal care

Juvenile Justice

- Youth who have completed a diversion program successfully
- Youth who have completed probation successfully

Economic Stability

- Children living above the Federal Poverty Level
- Median family income
- Children living in a low-poverty areas

Child Welfare

- Children not involved in the child welfare system
- Children who are wards of the state, but are living at home
- Children who are living in out-of-home care, but have done so in three or fewer placements

Overall Index Scores Out of a Possible 100

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.

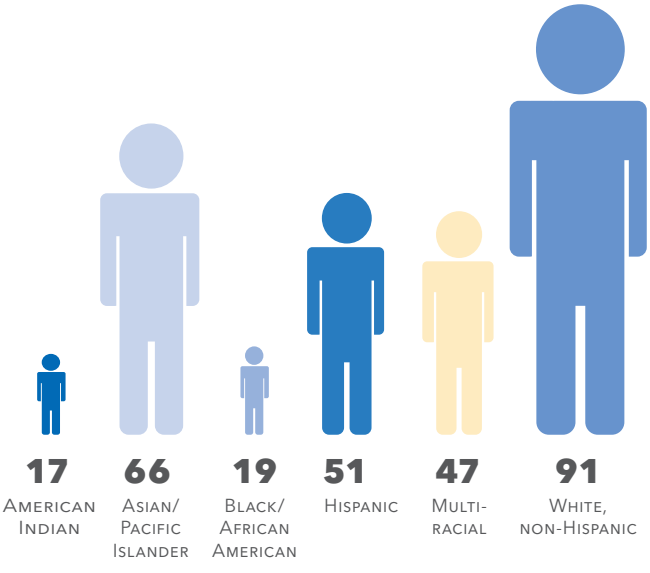
Step 3
Gather and analyze disaggregated data.

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.

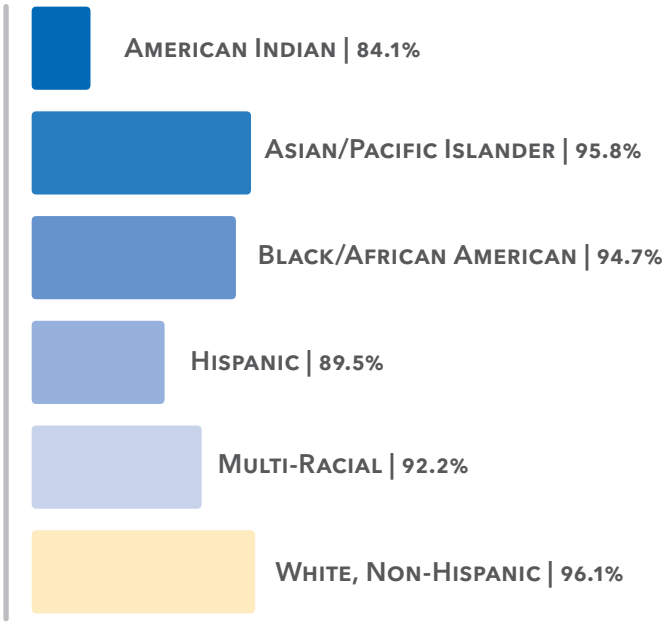
Step 7
Continuously evaluate effectiveness and adapt strategies.



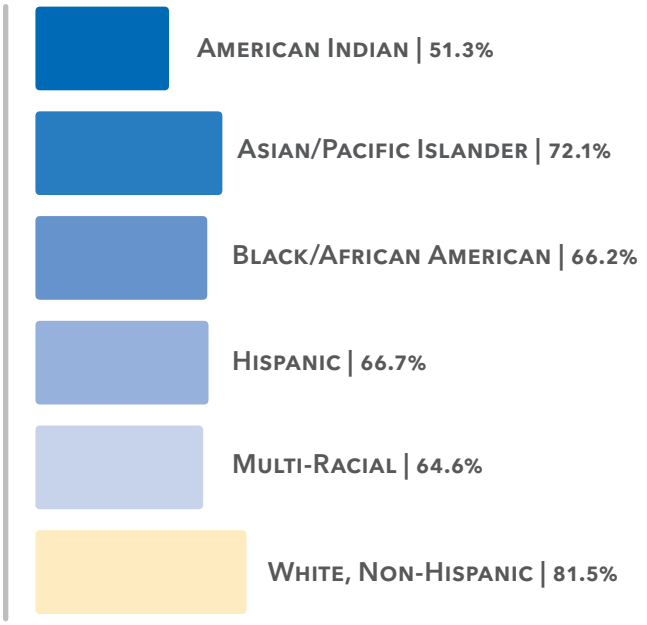
Source: Annie E. Casey Foundation, Seven Steps to Advance and Embed Race Equity and Inclusion.

Race & Opportunity Index

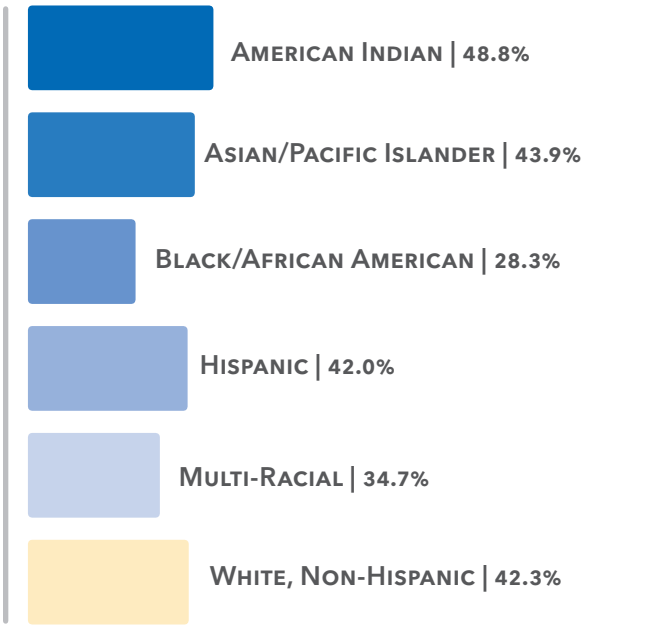
Children with health insurance coverage (2017)[1]



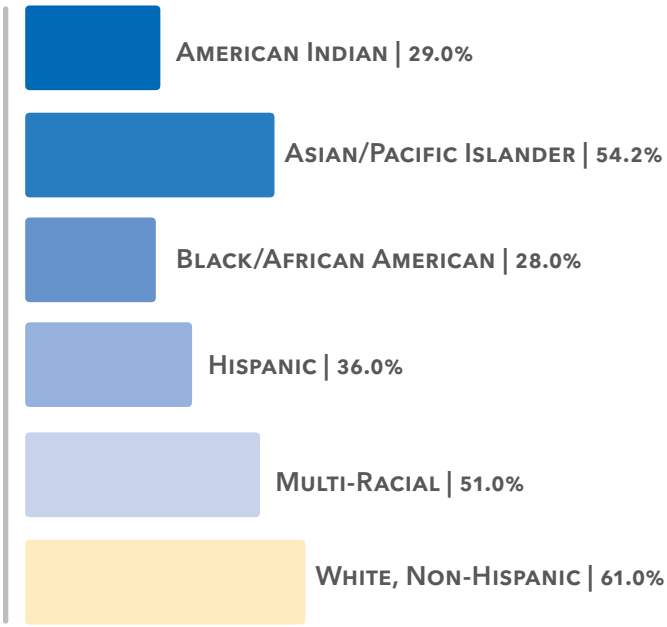
Infants receiving adequate prenatal care (2018)[2]



3- and 4-year olds enrolled in school (2017)[3]



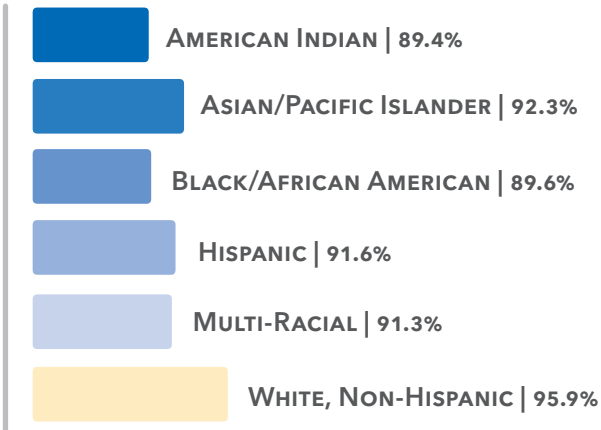
3rd graders proficient in English language arts (2017/18)[4]



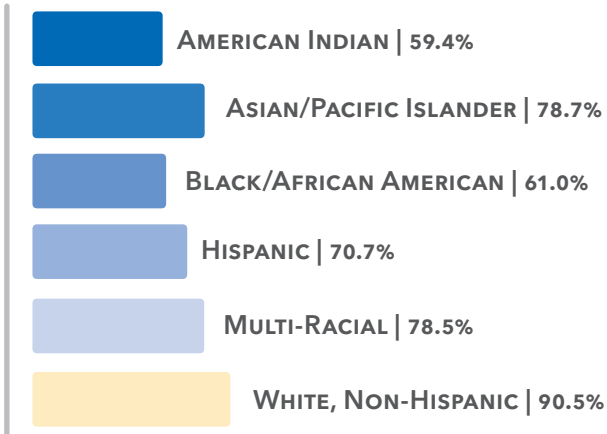
1. U.S. Census Bureau, 2017 American Community Survey 5-year Estimates, Tables C27001B-I.
2. Vital Statistics, Department of Health and Human Services (DHHS).
3. U.S. Census Bureau, 2017 American Community Survey 5-year Estimates, Public Use Microdata Samples.
4. Nebraska Department of Education, 2017/18 Nebraska Education Profile, NSCAS.

Race & Opportunity Index

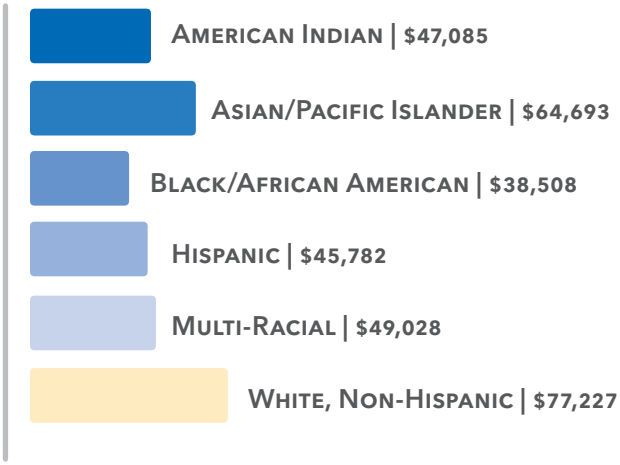
16-24-year olds in school or employed (2017)[5]



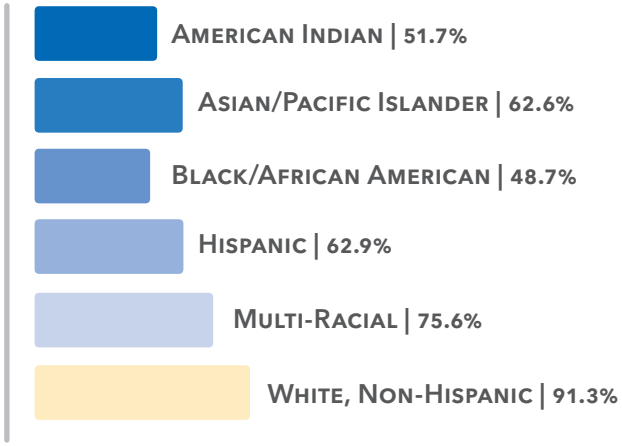
Children living above the federal poverty line (2017)[6]



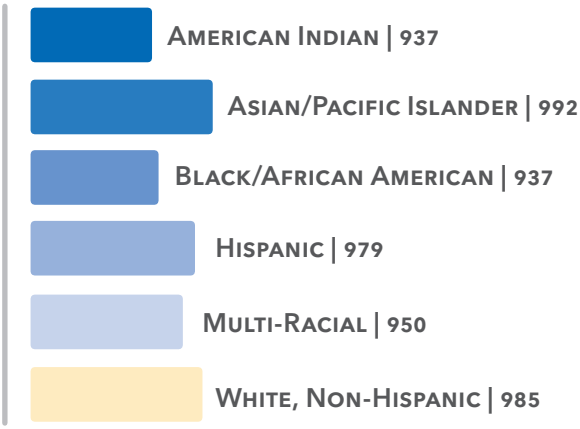
Median family income (2017)[7]



Children living in areas that are low poverty (2017)[8]



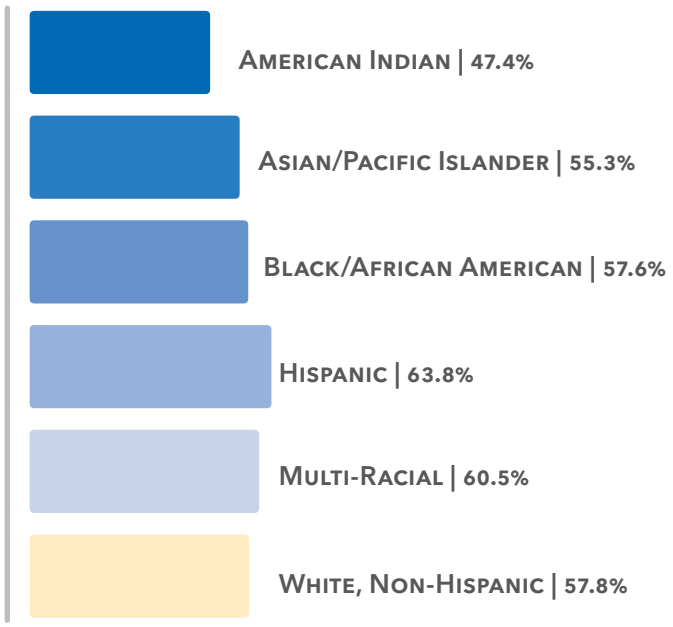
Children not involved in the child welfare system [Rate/1000] (2018)[9]



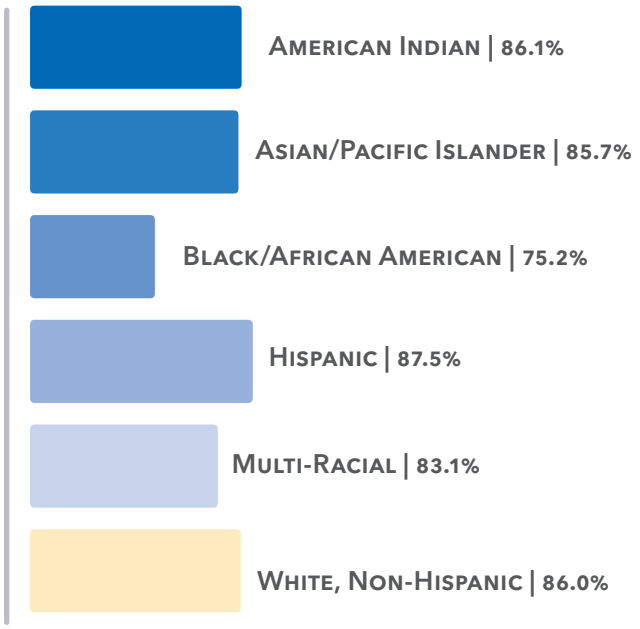
5. U.S. Census Bureau, 2017 American Community Survey 5-year Estimates, Public Use Microdata Samples.
6. U.S. Census Bureau, 2017 American Community Survey 5-year Estimates, Tables B17001B-I.
7. U.S. Census Bureau, 2017 American Community Survey 5-year Estimates, Tables B19113B-I.
8. U.S. Census Bureau, 2017 American Community Survey 5-year Estimates, Tables B17001B-I, B01001B-I.
9. Nebraska Department of Health and Human Services.

Race & Opportunity Index

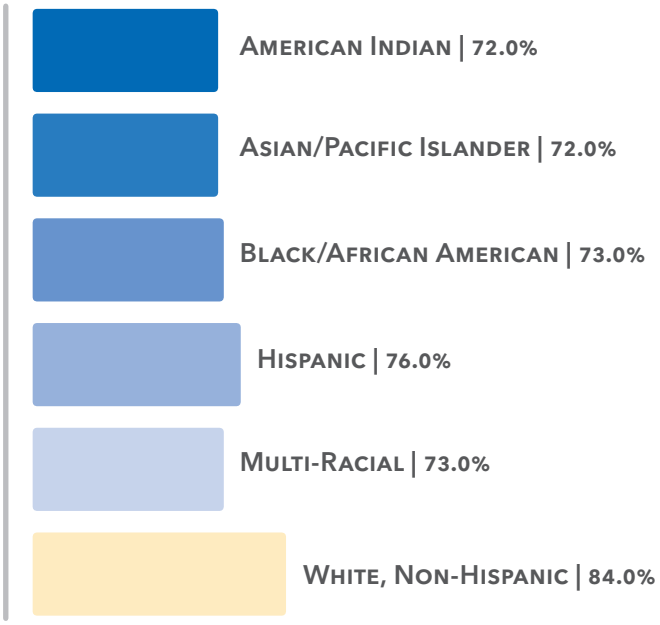
State Wards receiving in-home services (2018)[10]



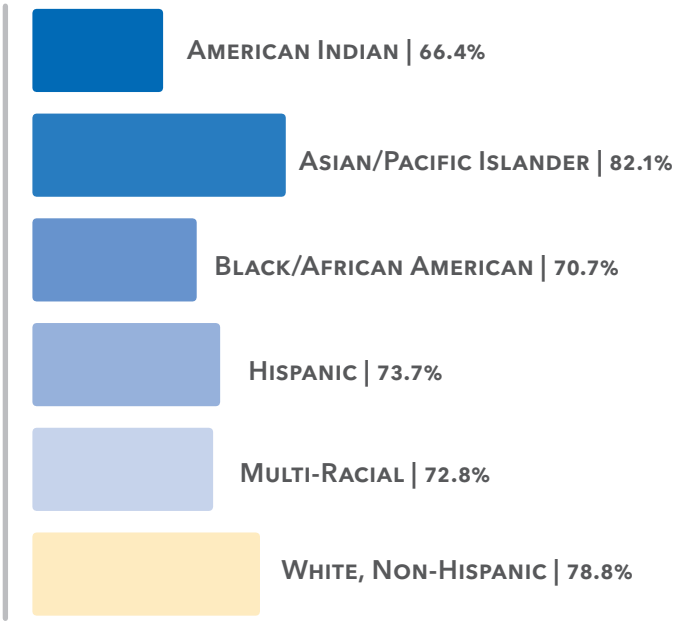
Children with three or fewer out-of-home placements (2018)[11]



Youth successfully completing diversion (2018)[12]



Youth successfully completing probation (2018)[13]



10. Nebraska Department of Health and Human Services.
11. Nebraska Department of Health and Human Services.
12. Nebraska Crime Commission, Diversion.
13. Nebraska Juvenile Probation System.

POPULATION

2020 Census is Critical for Kids

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 is one of the most important tools for learning how communities are faring, and the 2020 count offers a critical opportunity to guide policymakers and other leaders over the next decade.

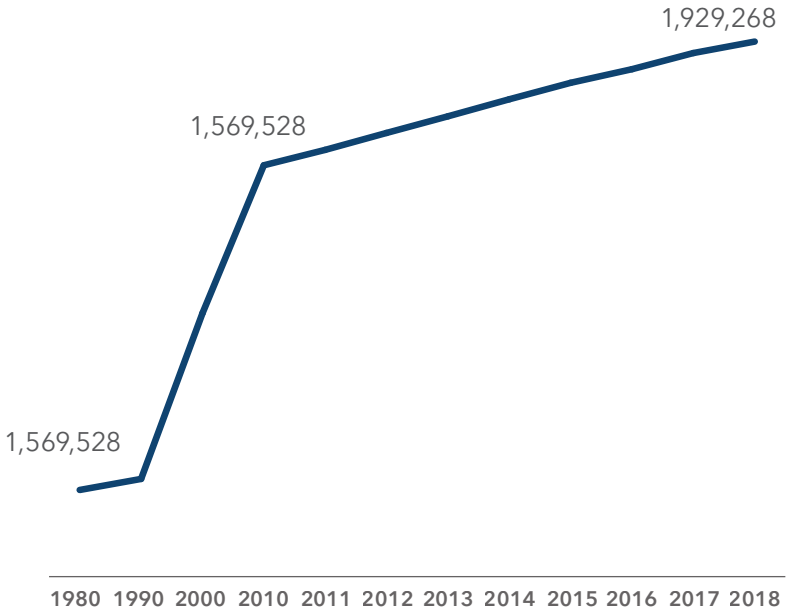
In the 2010 Census, it is estimated that 2% of Nebraska's youngest children were missed in the count, many of them kids of color, in low-income families, or living in hard to count communities.[1] It is estimated that every Nebraskan not counted in the census results in a loss of nearly $21,000 in federal funding.[2]

The 2020 Census will determine at the state and local level how much federal funding is received each year for the next decade as well as how electoral boundaries are designed. When kids are not counted, communities don't get their fair share in electing leaders who make decisions impacting their future, or accurate funding for programs that work to ensure children get a healthy start in life. An accurate census requires all of us to participate, and it demands leaders in every sector and community get involved. The future of our children is at stake.

1. Population Research and Policy Review, State-level 2010 Census Coverage Rates for Young Children, 2014.
2. Reamer, A. Counting for dollars 2020: The role of the decennial census in the geographic distribution of federal funds, The George Washington Institute for Public Policy.

Population

Nebraska total resident population (1980-2018)[1]

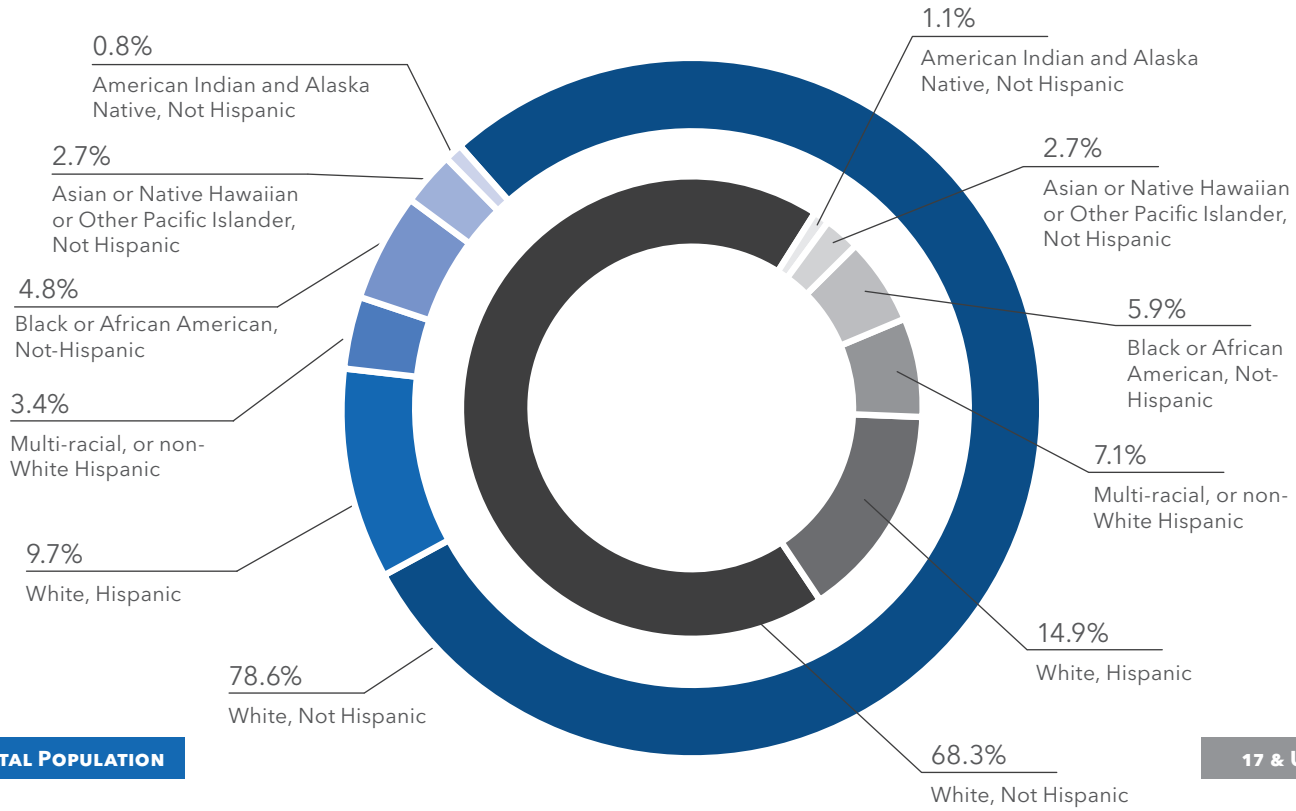


1,929,268 people
including
502,770 children*
lived in Nebraska in 2018.[1]

21.4%

of Nebraskans were of color in 2018.[2] This is expected to increase to 38% by 2050.[3]

Nebraska population by race/ethnicity (2018)[2]

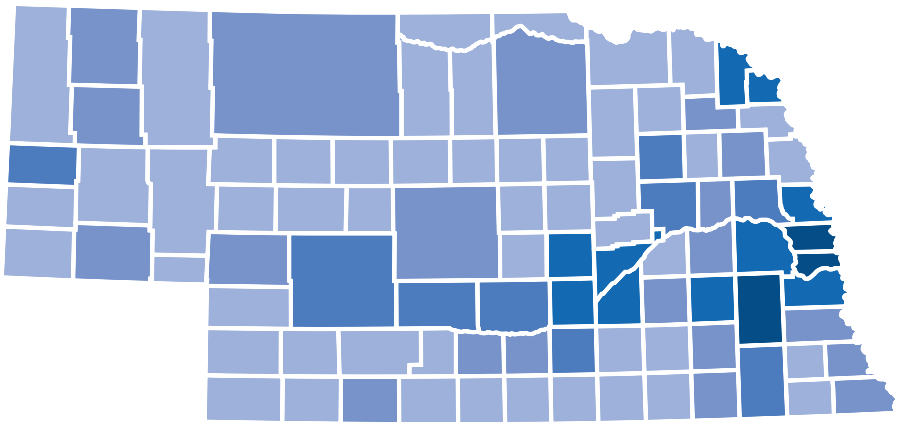


**Children 18 & under*

1. U.S. Census 1980, 1990, 2000; Annual Estimates of the Resident Population, July 1, 2010-2018 Estimates, Table PEPSYASEX
2. U.S. Census Bureau, Annual Estimates of the Resident Population by Sex, Age, Race, and Hispanic Origin, July 1, 2018 Estimates, Table PEPASR6H
3. Center for Public Affairs Research, UNO, Nebraska Differences Between Metro and Nonmetro Areas

Population

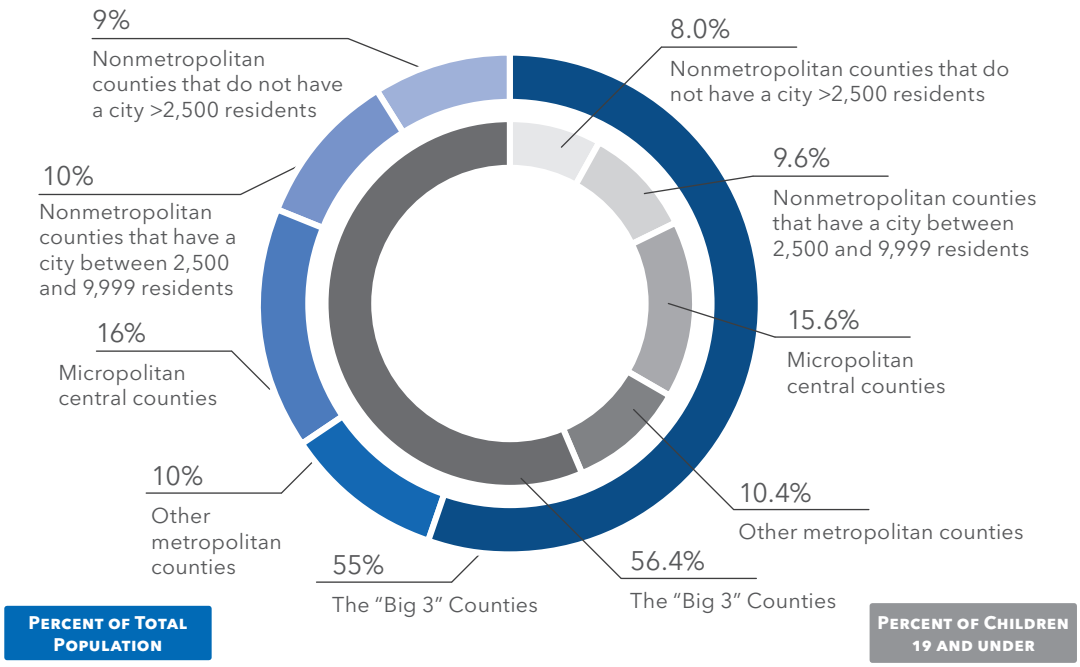
Nebraska rurality classifications (2018)[1]



Based on the current population distribution of Nebraska, counties are split into five categories:

- **The "Big 3":** *Douglas, Lancaster, Sarpy*
- **10 Other metropolitan counties:** *Cass, Dakota, Dixon, Hall, Hamilton, Howard, Merrick, Saunders, Seward, Washington*
- **9 Micropolitan central counties:** *Adams, Buffalo, Dawson, Dodge, Gage, Lincoln, Madison, Platte, Scotts Bluff*
- **20 Nonmetropolitan counties** that have a city between 2,500 and 9,999 residents
- **51 Nonmetropolitan counties** that do not have a city >2,500 residents

Nebraska population by rurality classification (2018)[1]



56.4%

of Nebraska kids live in the "Big 3" counties.[2]

15.7%

of Nebraskans were 65 or older in 2018.[2] This is expected to increase to 21.0% by 2050.[1]

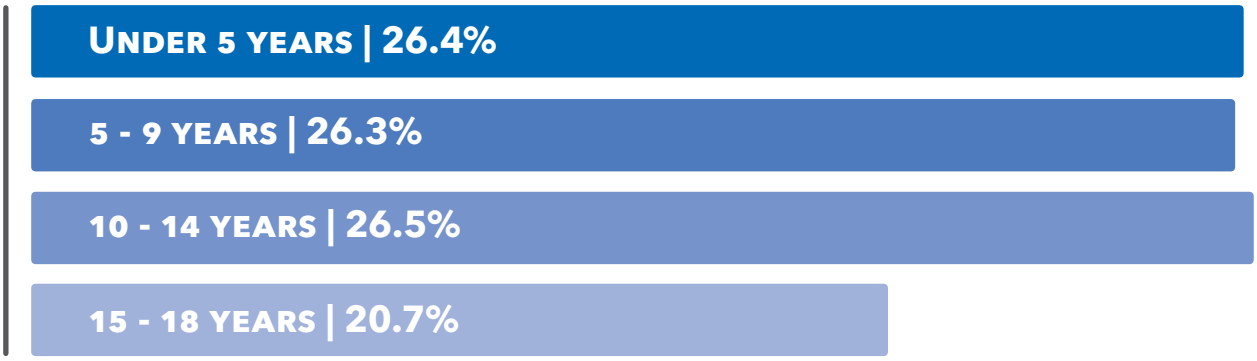
Nebraska population by age (2018)[2]

Under 19 years | 26.1% **19-64 years | 58.2%** **65+ years | 15.7%**

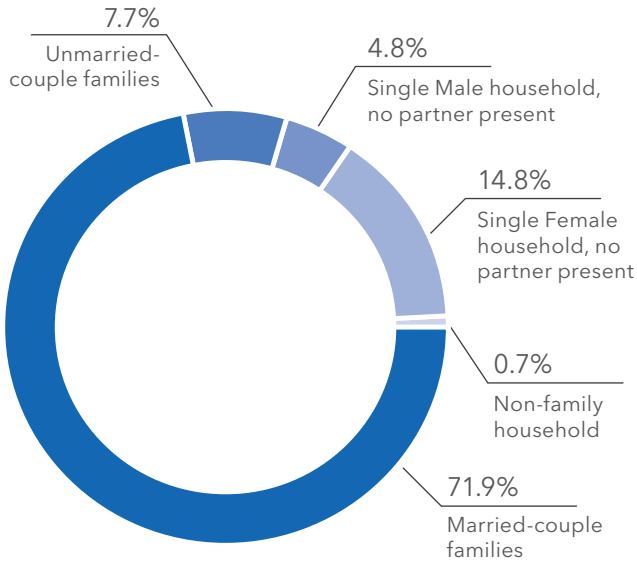
1. U.S. Census Bureau, Population Estimates Program, July 1, 2018 Estimates, Table PEPAGESEX; Center for Public Affairs Research, UNO, Nebraska Differences Between Metro and Nonmetro Areas.
2. U.S. Census Bureau, Annual Estimates of the Resident Population by Single Year Age by Sex, July 1, 2018 Estimates, Table PEPSYASEX.

Population

Nebraska children by age (2018)[1]



Nebraska households with children by household type (2018)[2]



2,248 *of Nebraska kids were living in group quarters* in 2018.[3] 3,335 were living in non-family households in 2018.[2]*

27.2% *of Nebraska kids were living with an unmarried parent in 2018,[2] an increase from 12% in 1980.[2]*

3,851 *Nebraska children were living with their grandparent(s) without a parent present in 2018.[2]*

**Group quarters are defined as institutional or non-institutional group living quarters like correctional facilities, college dormitories, group homes, or shelters.*

1. U.S. Census Bureau, Annual Estimates of the Resident Population by Single Year Age by Sex, July 1, 2018, Table PEPSYASEX.

2. U.S. Census Bureau, 2018 American Community Survey 1-year Estimates, Table B09008; U.S. Census Bureau, 2018 American Community Survey 1-year Estimates, Table B10002.

3. U.S. Census Bureau, 2018 American Community Survey 1-year Estimates, Table B09001.

HEALTH

Every child and family deserves access to affordable, quality physical and behavioral health care.

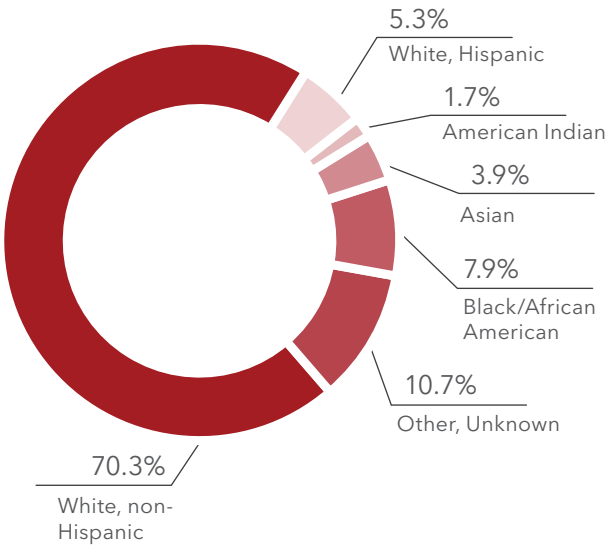
Quality and consistent preventive health care, beginning even before birth, gives children the best chance to grow up to be healthy and productive adults.

Children and families must be able to access and maintain affordable health insurance, and policies should maximize availability 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 health home and community-based environments for children and families across the lifespan.

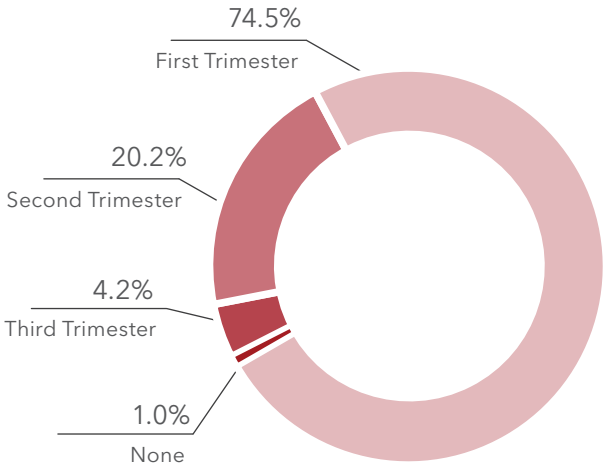
Where are the data?

25,494 BABIES WERE BORN IN 2018.

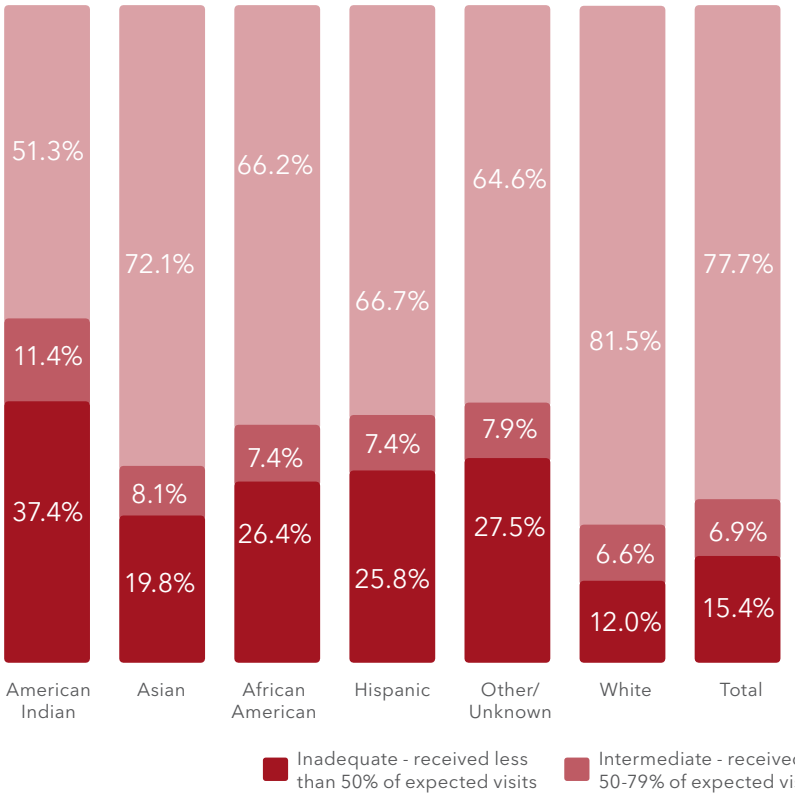
BIRTHS BY RACE & ETHNICITY (2018)



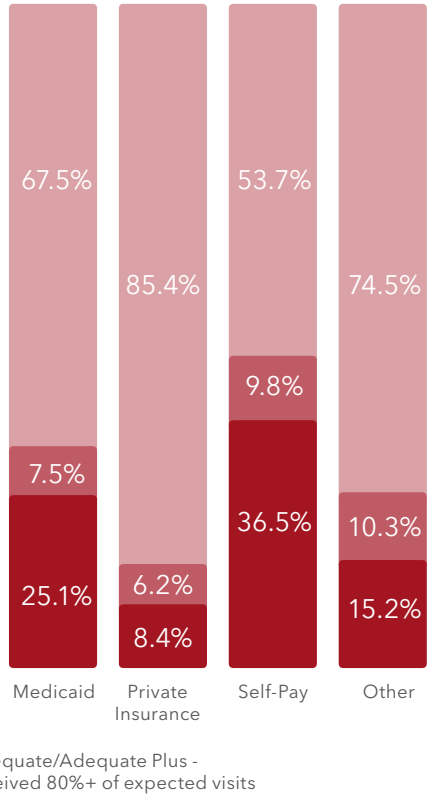
TRIMESTER PRENATAL CARE BEGAN (2018)



ADEQUACY OF PRENATAL CARE BY RACE/ETHNICITY (2018)



ADEQUACY OF PRENATAL CARE BY HEALTH INSURANCE TYPE (2018)



Inadequate - received less than 50% of expected visits

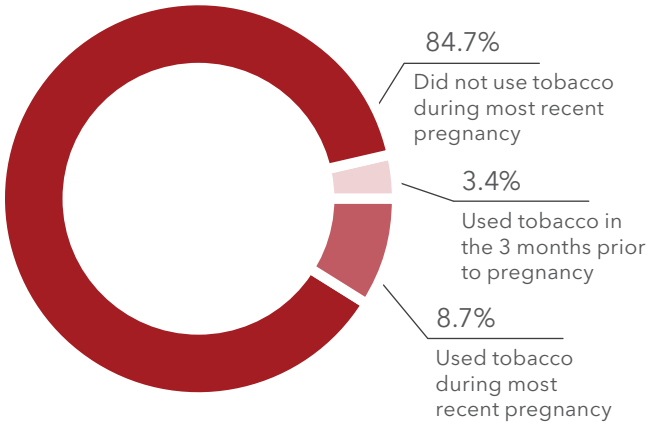
Intermediate - received 50-79% of expected visits

Adequate/Adequate Plus - received 80%+ of expected visits

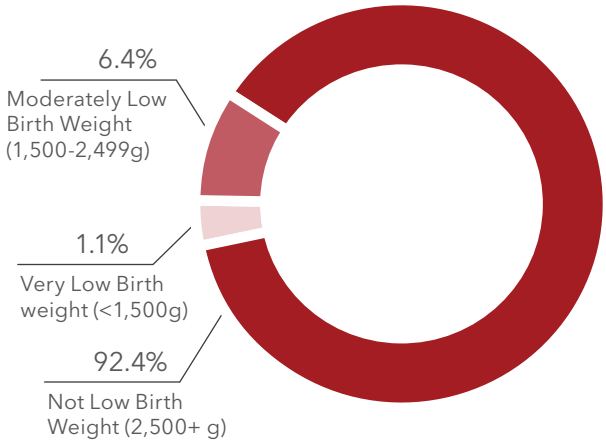
Source: Vital Statistics, Department of Health and Human Services (DHHS).

Pre/post-natal health

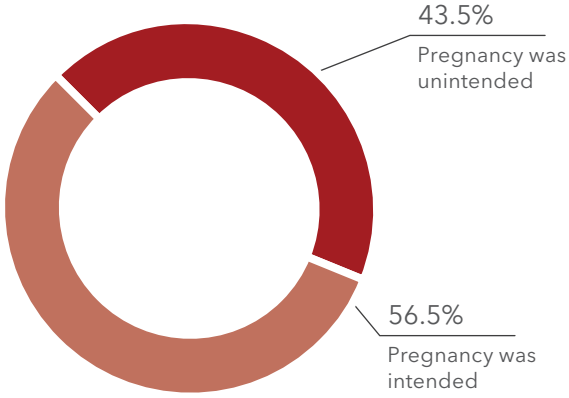
Tobacco use (2018)[1]



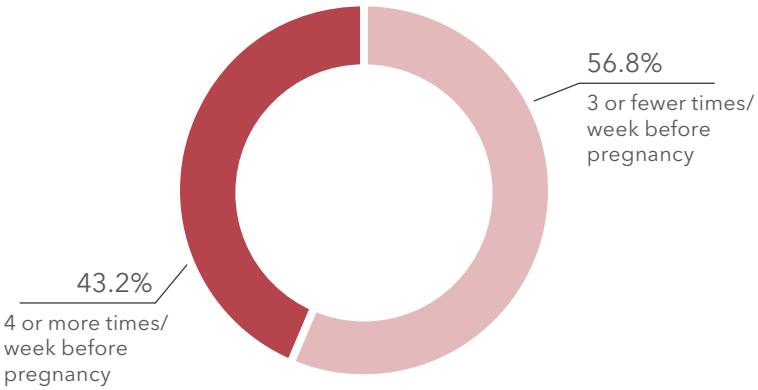
Low birth weight (2018)[1]



Pregnancy Intendedness (2018)[2]



Folic acid use prior to pregnancy (2018)[2]



Breastfeeding (2018)[2]

Mothers who breastfed at any time | 91.9%

Mothers who exclusively breastfed at 4 weeks | 58.0%

12% of new mothers experienced postpartum depression symptoms related to their most recent pregnancy.[2]

5% of women had a home visitor during pregnancy to help prepare for the new baby.[2]

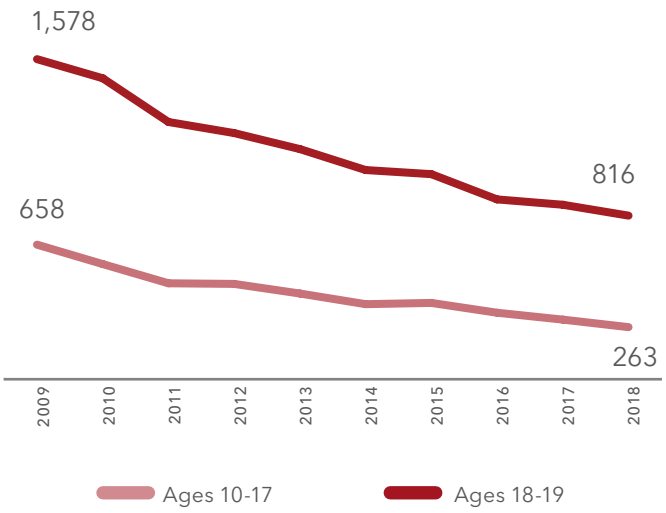
1. Vital Statistics, Department of Health and Human Services (DHHS).
2. PRAMS, 2018.

Teen Births & Sexual Behavior

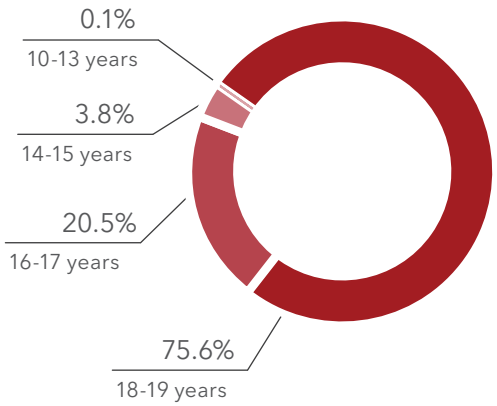
Teen Births

In 2018 there were **1,079 babies** born to teen mothers, **263** to mothers who were 10-17 years old, **816** to mothers who were 18 or 19.[1]

Teen Births (2009-2018)[1]



Teen Births by Age (2009-2019)[1]



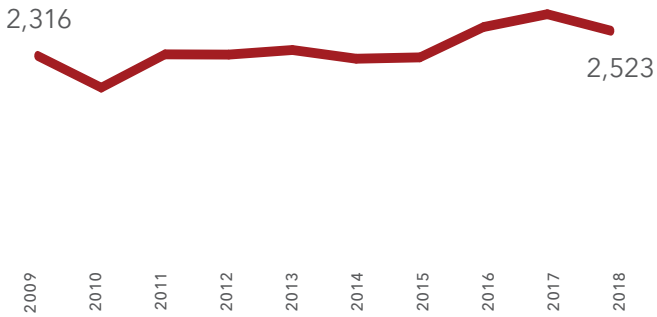
HIV/AIDS[3]

2018 HIV/AIDs Prevalence: 9 children ages 0-11 and 18 ages 12-19

Since 2008, one child in Nebraska with a diagnosis of HIV or AIDS has died from the disease.

Teen Sexual Behavior[2]	2017
Ever had sexual intercourse	29.1%
Reported having sexual intercourse before age 13	2.8%
Had sex with four or more people	6.0%
Had sex in the past three months	20.5%
Drank alcohol or used drugs before last sexual intercourse	13.7%
Did not use a condom during last sexual intercourse	46.7%
Did not use any method to prevent pregnancy during last sexual intercourse	7.0%

Number of Sexually Transmitted Infections (STIs) among those 19 and under (2009-2018)[4]



1. Vital Statistics, Department of Health and Human Services (DHHS).
2. Center for Disease Control and Prevention, Youth Risk Behavior Survey, 2017.
3. HIV Surveillance, Nebraska Department of Health and Human Services (DHHS).
4. STD Prevention Program, Department of Health and Human Services (DHHS).

Infant & Child Deaths

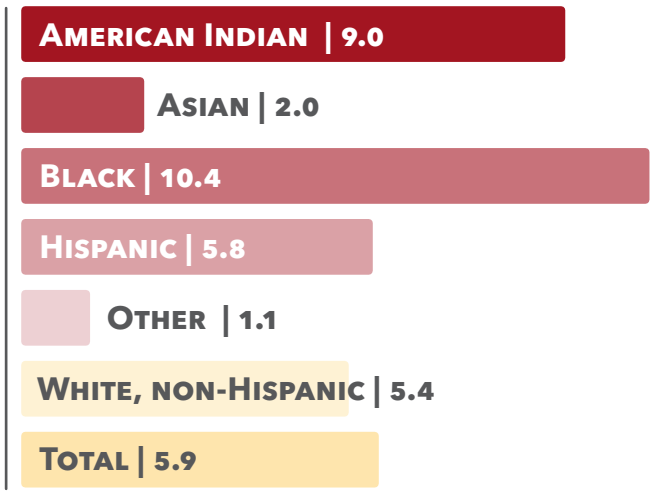
Causes of Infant Deaths (2018)

Maternal and Perinatal	42	28.0%
Birth Defects	33	22.0%
SIDS/SUDI	4	2.7%
Heart/Cardiovascular and Respiratory	15	10.0%
Accident	6	4.0%
Prematurity	18	12.0%
Infection	7	4.7%
Homicide	1	0.7%
Other	24	16.0%
Total	**150**	

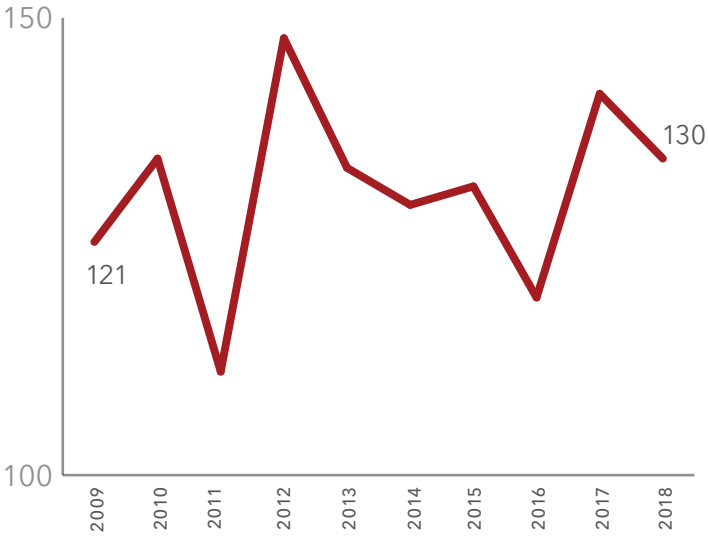
Infant mortality increased to **5.9 per 1,000** births in 2018 from 5.6 per 1,000 births in 2017.

8 women died in 2018 due to a cause related to or aggravated by pregnancy or its management.

Infant Mortality by Race/Ethnicity per 1,000 Births (2018)



Child Deaths, Ages 1-19 (2009-2018)



Causes of Child Deaths (2018)

Accidents	48	36.9%
Suicide	21	16.2%
Cancer	12	9.2%
Birth Defects	9	6.9%
Homicide	2	1.5%
Other	38	29.2%
Total	**130**	

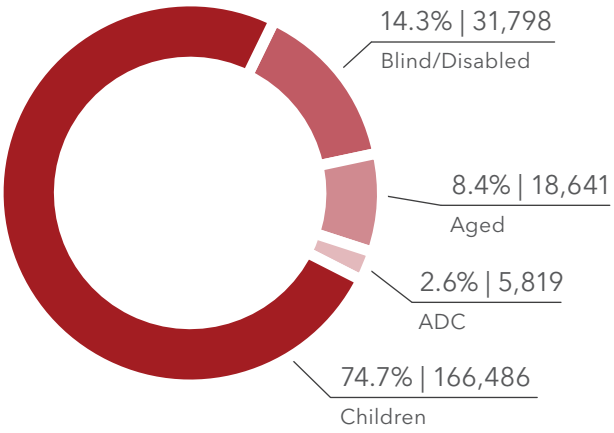
Source: Vital Statistics, Department of Health and Human Services (DHHS).

Health insurance

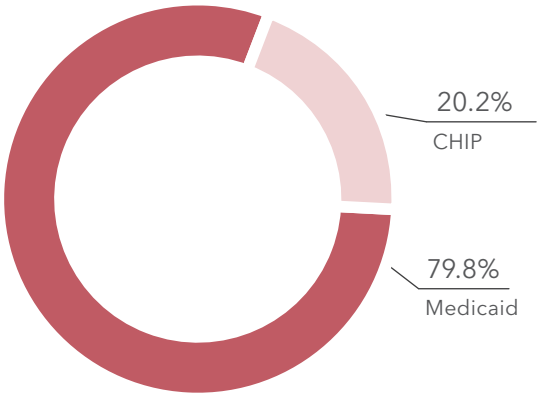
Health coverage for kids 18 & under by type (2018)[1]

Any | 94.9%	462,036
Public | 28.7%	139,721
Employer-based | 61.0%	297,009
Direct-purchase | 7.7%	37,613
None | 5.1%	24,835

Medicaid/CHIP eligibility by category (2018)[2]*



Medicaid/CHIP enrollment (2018)[2]



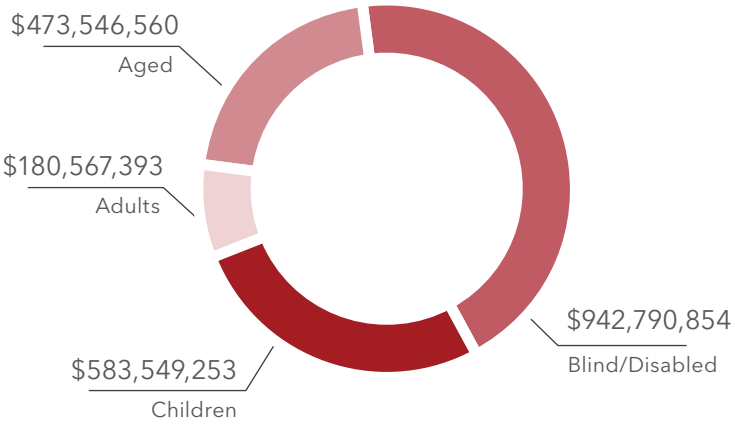
Access to health care

In 2018, there were **24,835 (5.1%)** uninsured children in Nebraska. Of those, **12,540 (50%)** were low-income (below 200% of the federal poverty level) and likely eligible, yet unenrolled in the Children's Health Insurance Program (CHIP).[1]

166,486 children were enrolled in Medicaid/CHIP in SFY 2018.[2]

75% of those eligible for Medicaid/CHIP are children, but children only make up 27% of Medicaid costs.[2]

Medicaid/CHIP expenditures by category (2018)[2]*



Uninsured children by race/ethnicity (2017)[3]

American Indian	945	15.9%
Asian/Pacific Islander	486	4.2%
Black/African American	1,509	5.3%
Hispanic	8,781	10.5%
Other/2+	2,963	7.8%
White, Non-Hispanic	13,499	3.9%

1. U.S. Census Bureau, 2018 American Community Survey 1-year estimates, Table B27016.
2. Financial and Program Analysis Unit, Nebraska Department of Health and Human Services (DHHS).
3. U.S. Census Bureau, 2017 American Community Survey 5-year estimates, Tables C27001B-I.
** "Children" category combines Medicaid and CHIP coverage. "Adults" are those aged 19-64 receiving Aid to Dependent Children, or temporary cash assistance through the state of Nebraska.*

Health services

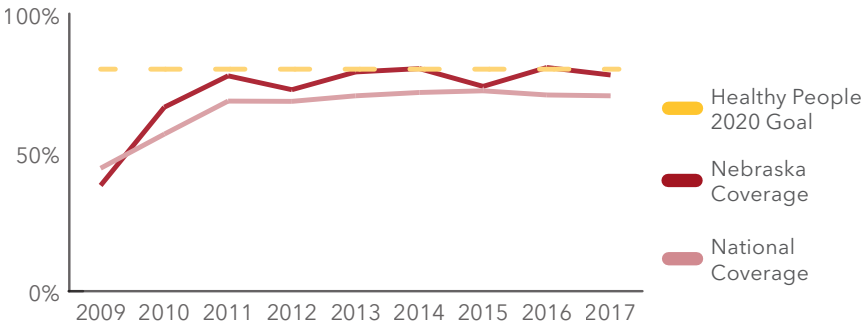
Number of medical provider shortages by county (2019)[1]

	# of shortages
Primary	106
Mental	164
Dental	77

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 three categories:[1]

1. Geographic areas - a shortage of providers for the entire population within an area
2. Population groups - a shortage of proiders 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

Immunization series coverage (2009-2017)[2]



Immunizations (2017)[2]

77.9% of Nebraska children had received the primary immunization series* by age three.

84.8% of Nebraska teens were immunized against meningitis caused by types A, C, W, and Y.

61.4% of Nebraska teen girls and **55.3%** of Nebraska teen boys completed their HPV vaccine series.

Children with a medical home (2017)[3]

A patient-centered medical home is a primary care physician or provider that serves as a child's usual source of care. It is an important mechanism for coordination of all segments of health - physical, behavioral, and oral.

82.2% of children had a preventive dental visit in the past year.[3]

34.7% of children had one or more current health conditions.[3]

88.6% of children are in very good to excellent health.[3]

79.2% of children had a preventive medical visit in the past year.[3]

1. Shortage Designation, Health Resources and Services Administration, U.S. Department of Health and Human Services.
2. Immunization Program, Nebraska Department of Health and Human Services (DHHS).
**Series 4:3:1:3:3:1:4*
3. 2016-17 National Survey of Children's Health.

Behavioral health

An estimated **44,543** Nebraska children have been diagnosed with a mental/behavioral condition needing treatment.[1]

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 number of Nebraska children facing the following disorders:[1]

- Anxiety: **16,462**
- ADD/ADHD: **25,323**
- Depression: **13,600**
- Autism Spectrum Disorder: **10,367**

57.6% of children needing mental health counseling actually received it.[1]

Children receiving community-based behavioral health services through DHHS (2018)[3]

Regional centers (2018)[3]

101 YOUTH

received services at Hastings Regional Center, a chemical dependency program for youth from the Youth Rehabilitation & Treatment Center (YRTC) in Kearney.

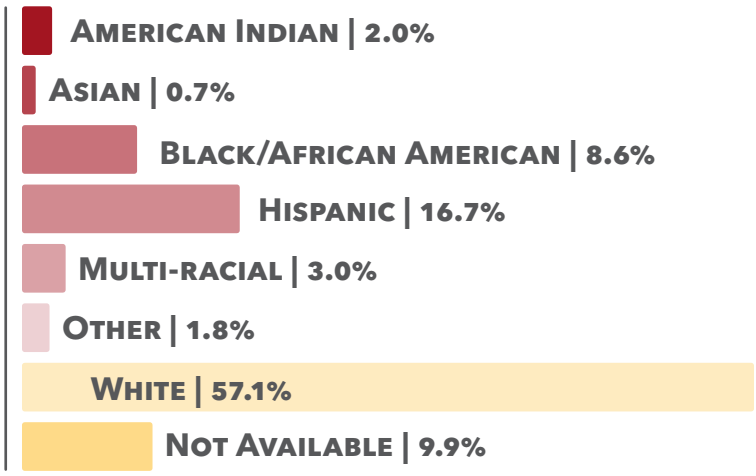
59 YOUTH

received services from Lincoln Regional Center at the Whitehall Campus.

1. 2016-2017 National Survey of Children's Health.
2. Centers for Disease Control and Prevention, Youth Risk Behavior Survey, 2017.
3. Division of Behavioral Health, Department of Health and Human Services (DHHS).

Suicide in the Last 12 Months (2017)[2]	
Seriously Considered Suicide	16.1%
Suicide Plan	14.1%
Suicide Attempt	8.0%

Children receiving community-based behavioral health services by race/ethnicity(2018)[3]



68% of children six months to five years met all four measures of flourishing.[1]

- Bounces back quickly when things don't go their way
- Are affectionate and tender with their parent(s)
- Show interest and curiosity in learning new things
- Smile and laugh a lot

29,690 children received behavioral health services through Medicaid/CHIP from 1,353 providers (FY 2018).[3]

27.0% of teens felt sad or hopeless (everyday for 2+ weeks so that activity was stopped in last 12 months).[2]

199 children received developmental services through Medicaid/CHIP (FY 2018).[3]

Health risks

8.5% of high schoolers rarely or never wore a seat belt.[1]

Moter vehicle crashes and seat belt use[1]	2017
In the past 30 days, rode in a vehicle driven by someone who had been drinking alcohol	22.1%
In the past 30 day, drove a vehicle after drinking alcohol	6.3%
Texted or emailed while driving a car or other vehicle in the last 30 days	48.3%

Motor vehicle crashes (2018)[2]

20 children died and **135 children** suffered disabling injuries in motor vehicle accidents.

50% children who died were not wearing a seatbelt, **34%** of those with disabling injuries were not wearing a seatbelt.

Alcohol was involved in crashes resulting in **7 deaths** and **13 disabling injuries.**

Injuries and Violence[1]	2017
Were in a physical fight in the past 12 months	19.2%
In the past 12 months, was physically hurt on purpose by someone they were dating	7.4%
Were threatened or injured with a weapon on school property	7.1%
Bullied at school	22.4%
Electronically bullied	17.5%
Experienced sexual violence	10.1%

Blood lead level testing (2018)[3]

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.

In 2018:
36,565 children
had a blood lead level test.

376 had elevated blood lead levels,
representing **1.0%** of all children tested.

13 Nebraska children ages 1-18 were injured by a firearm necessitating hospitalization in 2018.[4]

9 were due to accidental discharge.

3 were due to assault.

1 was undetermined.

1. Centers for Disease Control and Prevention, Youth Risk Behavior Survey, 2017.
2. Nebraska Department of Roads.
3. Nebraska Department of Health and Human Services (DHHS).
4. Nebraska Hospital Information System.

Health risks

Teen alcohol and other drug use (2017)[1]

In the past 30 days had at least one (1) drink of alcohol	24.4%
In the past 30 day had 5 or more drinks in a row within a couple hours	10.5%
Ever used marijuana	25.4%
Ever used any form of cocaine	4.1%
Ever used inhalants to get high	6.0%
Ever used meth	3.0%
Ever used ecstasy or MDMA	3.9%
Ever took prescription drugs without a doctor's permission	14.3%
In past 12 months, offered, sold, or given illegal drugs by someone on school property	18.5%

Teen tobacco use (2017)[1]

Currently smokes cigarettes, cigars, smokeless tobacco, or electronic vapor product	16.1%
Currently smokes cigarettes	7.4%
Currently uses smokeless tobacco	5.3%
Currently uses an electronic vapor product	9.4%

Domestic violence & sexual assault[2]

Nebraska's Network of Domestic Violence/Sexual Assault Programs includes 20 community-based programs. There are also four tribal programs which comprise the Nebraska Tribal Coalition Ending Family Violence.

Domestic violence/sexual assault services (2018)

Services	Children	Women	Men	Total
People	**3,271**	**9,455**	**700**	**13,426**

Children received domestic violence shelter services	**958**
Children received domestic violence non-shelter services	**2,313**
Children received domestic violence group services	**459**
Children received domestic violence crisis intervention and advocacy services	**2,770**

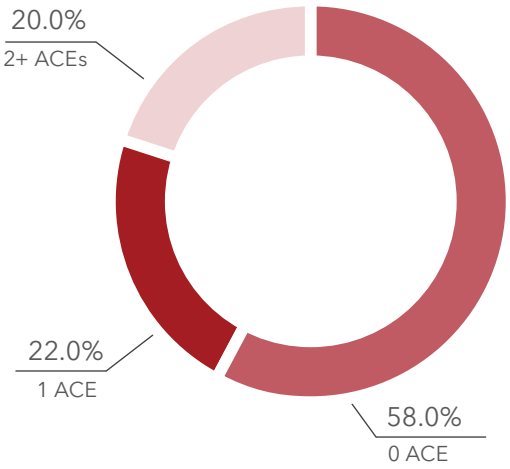
1.Centers for Disease Control and Prevention, 2017 High School Youth Risk Behavior Survey.
2. Nebraska Domestic Violence and Sexual Assault Coalition.

Adverse Childhood Experiences

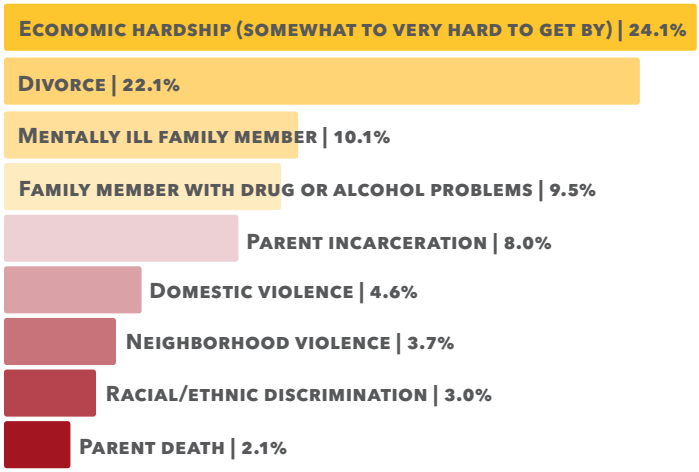
Adverse Childhood Experiences

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.

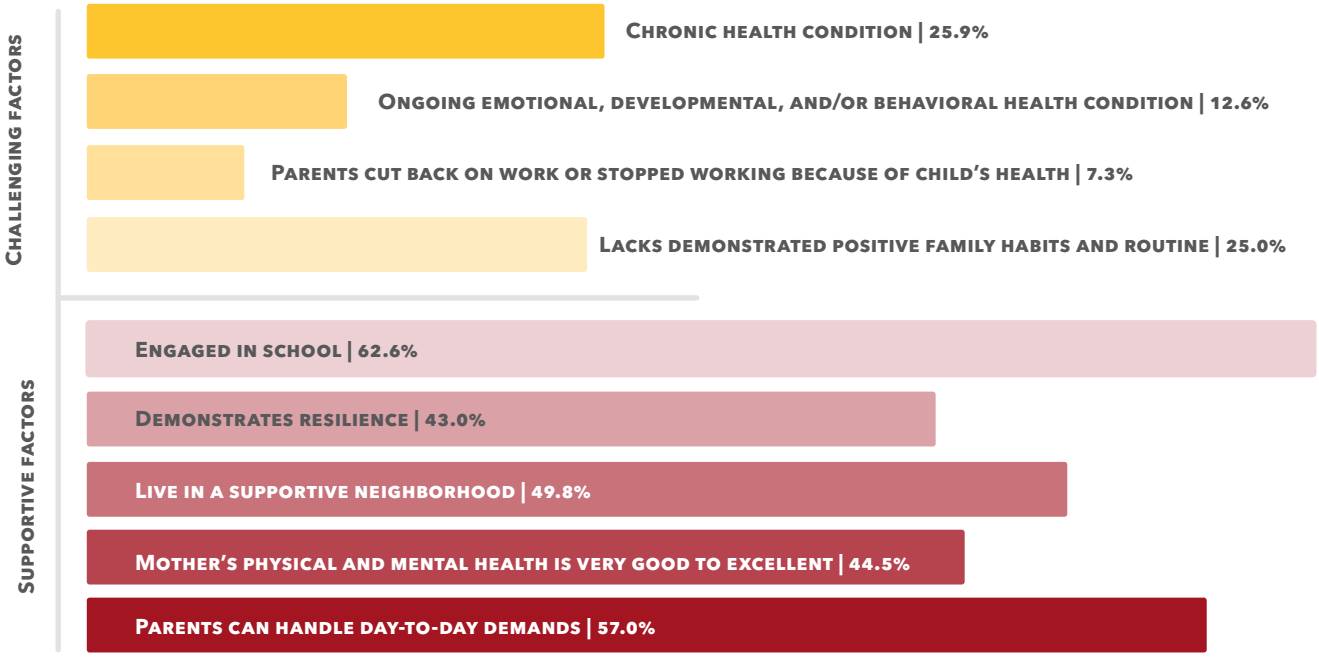
Number of ACEs children experience (2016)



Type of ACE (2016)



Among children with 1 or more ACE, the following were displayed (2016)



Source: The Child & Adolescent Health Measure Initiative, A national and across-state profile on Adverse Childhood Experience among U.S. children and possibilities to health and thrive, 2017.

EDUCATION

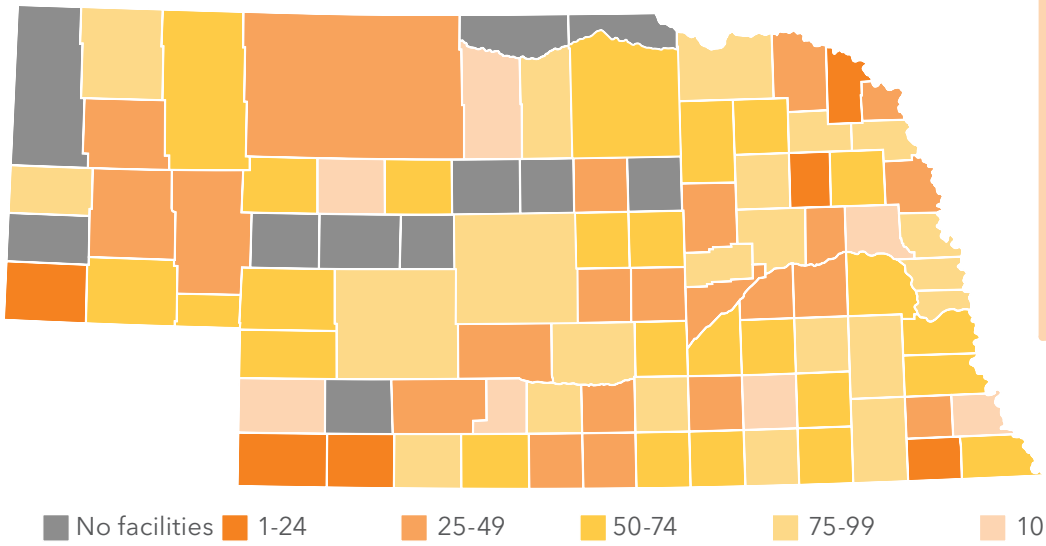
Education is the surest way to build a pathway to lifelong success, and the early years of a child's life are imperative to laying a solid foundation for success. Establishing the conditions that promote educational achievement for children is critical,. With a strong and healthy early beginning, children 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.

Where are the data?

Child care

Capacity of licensed child care facility per 100 children <6 with all available parents working by county

Note: Does not include School-Age-Only Child Care Centers.



Licensed child care facilities (2018)

2,834
Total licensed child care facilities

110,947
children under 6 are estimated to need child care

Source: "Early Childhood Capacity by County," DHHS (Report run Nov 1 2019), U.S. Census 2017 American Community Survey 5-year Estimates, Table B23008 .

7.1% (11,768)

Nebraska parents of children 0-5 quit, did not take, or greatly changed their job because of child care problems in 2017-18.[2]

Annual child care costs (2018)[1]

Center-based care	
Infant	$12,272
4-year-old	$11,148
Home-based care	
Infant	$12,480
4-year-old	$12,480

Child care subsidies (SFY 2018)[3]

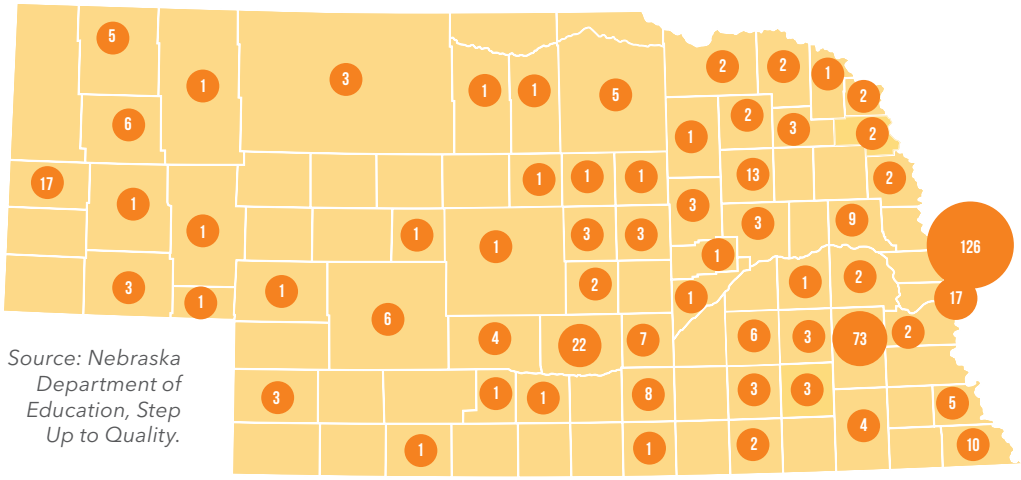
- There were **29,535** children in Nebraska who received child care subsidies in SFY 2018. **2,452** children were in the care of a license-exempt facility.
- An average of **17,517** children received a subsidy each month for an average of **7 months**. **11,463** were below school age, and **6,505** were school age.
- **19,775** children receiving a subsidy were from a family living below 100% FPL, **5,304** were from families between 100%-130% FPL and **2,242** were from families between 130%-185% FPL. **3,626** were from TANF transition families.
- **$62,462,803** in state and **$42,907,174** in federal funds were spent on the child care subsidy program.

1. ChildCare Aware, Child Care in America: 2018 State Fact Sheets.
2. 2017 National Survey of Children's Health.
3. Nebraska Department of Health and Human Services (DHHS).

Step Up to Quality

Nebraska Step Up to Quality programs by county (as of 10/21/2019)

Step Up to Quality Programs	
417 Programs (10/21/2019)	
Step 1	180
Step 2	124
Step 3	53
Step 4	41
Step 5	19



Source: Nebraska Department of Education, Step Up to Quality.

Nebraska Step Up to Quality is an Early Childhood Quality Rating and Improvement System (QRIS), 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.

As of 10/21/2019 Nebraska had

337 Step Up to Quality Programs

Step Up to Quality program providers by step (10/21/2019)

152 Providers - 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's director has completed orientation.

96 Providers - 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.

90 Providers - 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. Step 3-5 ratings are determined by the number of points achieved.

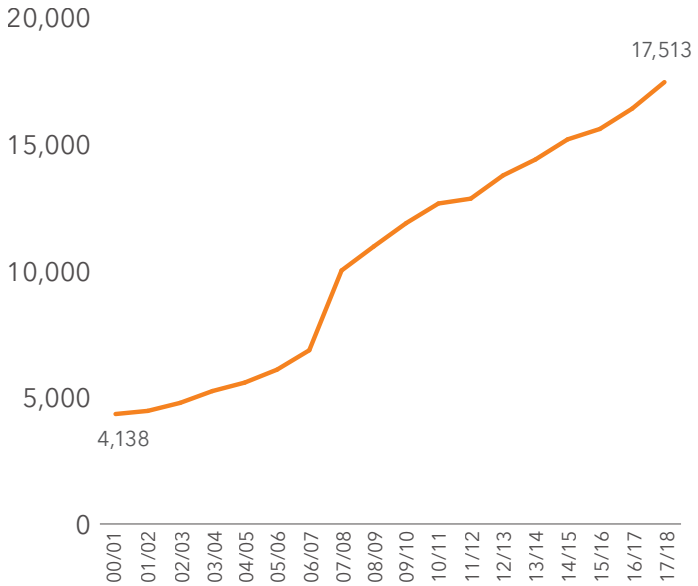
Early childhood education

School-based preschool (2017/18)[1]

17,513

children were enrolled in public school-based preschool.

Public school preschool enrollment (2000/01 - 2017/18)[1]



6,401

children were served in 17 Early Head Start and 18 Head Start Programs in the 2017/18 program year.[2]

134

pregnant women were served in Early Head Start in the 2017/18 program year.[2]

67.2%

of the children served by Early Head Start/ Head Start in 2017/18 were living below the poverty line.[2]

Early Development Network (2017/18)

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

2,062

infants and toddlers had an Individualized Family Service Plan through EDN.

1,694 with a developmental delay
102 with a speech language impairment
91 with a hearing impairment
33 with autism
142 with some other disability

Source: Early Development Network, Annual Performance Report, Federal Fiscal Year 2017/18.

Sixpence (2017/18)[3]

Sixpence serves children birth to age three who are at risk of failure in school and is funded through public and private dollars. There were **31 Sixpence programs** in the state of Nebraska in the 2017/18 program year serving:

956 families

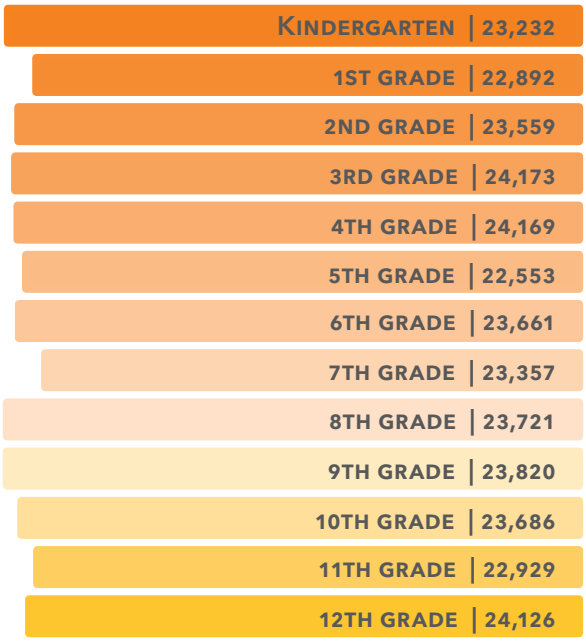
71 pregnant moms

1,110 children

1. Nebraska Department of Education.
2. Office of Head Start, Program Information Report.
3. Interdisciplinary Center for Program Evaluation, University of Nebraska Medical Center.

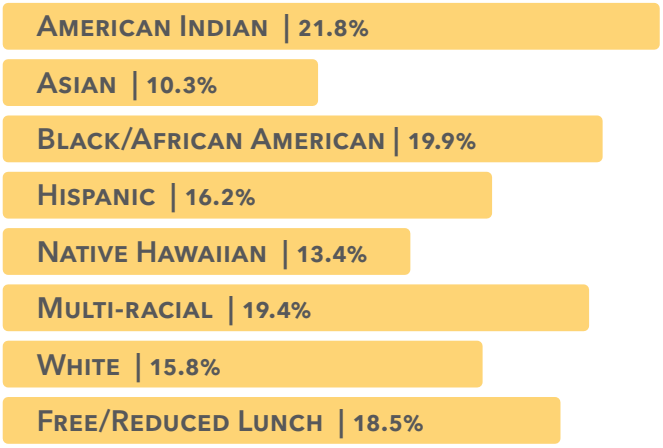
K-12 STUDENT CHARACTERISTICS

SCHOOL MEMBERSHIP BY GRADE (2017/18)



156,582 children were enrolled in public school in 2017/18.

SPECIAL EDUCATION CLASSIFICATION (2017/18)



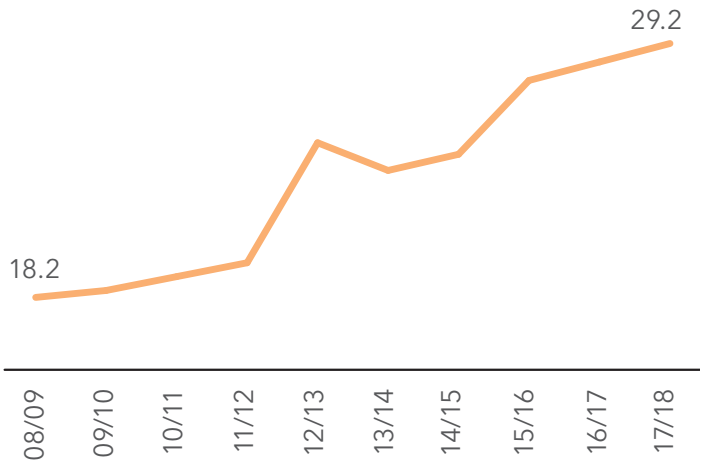
4.2%

of Nebraska school students were highly mobile, meaning they enrolled in two or more public schools during the 2017/18 school year. Higher school mobility is correlated with lower achievement.

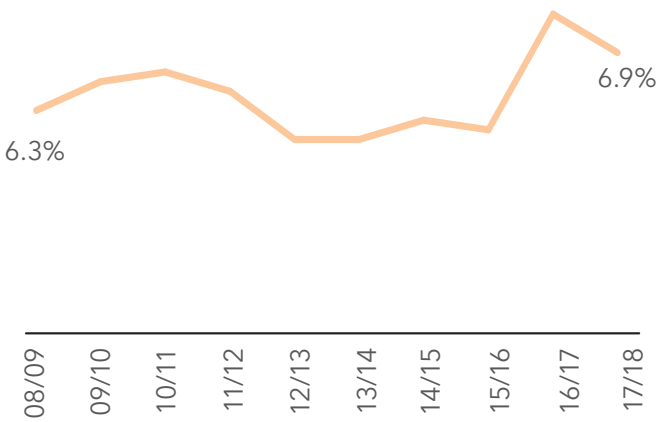
15.4% of students were classified as Special Education (2017/18).

13.2% of students were classified as High Ability Learners (2017/18).

RATE OF HOME SCHOOLED STUDENTS PER 1,000 STUDENTS (2008/09 - 2017/18)



PERCENT OF STUDENTS WHO WERE ENGLISH LANGUAGE LEARNERS (2008/09 - 2017/18)



Free/reduced cost school meals

Meal program participation (2017/18)

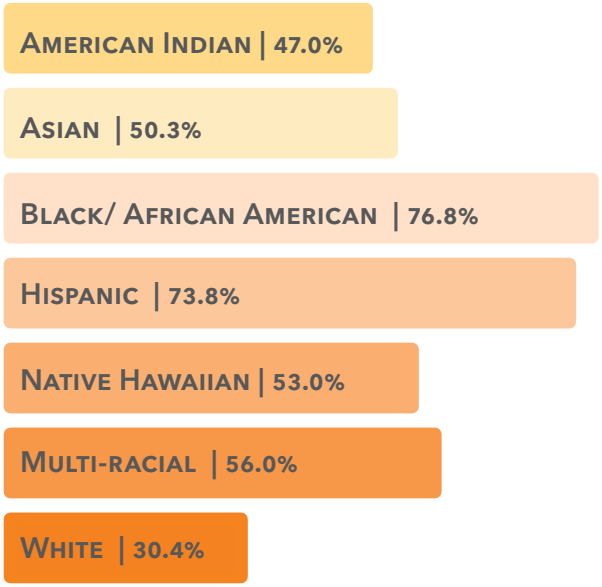
Breakfast	Lunch
274 districts	383 districts
772 schools/sites	939 schools/sites

Community eligibility (2017/18)

	Sites	Children
Eligible	274	97,181
Served	30	7,174

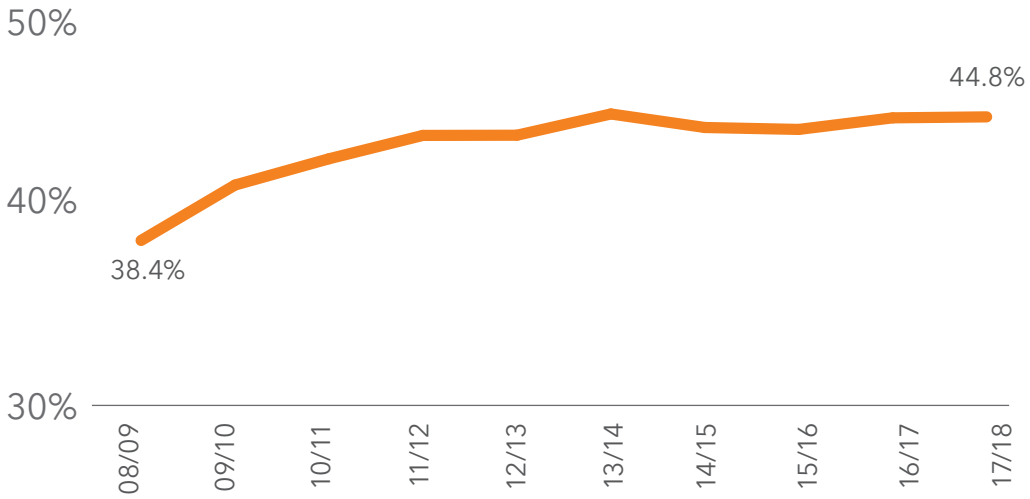
The Community Eligibility Provision allows high poverty schools to serve school meals at no cost to all enrolled students without collecting households applications. The number of children eligible for the Community Eligibility Program is based on proxy data.

Percent children eligible for free or reduced price school meals by race/ethnicity (2017/18)



There were **279** Summer Food Participation sites in 2018, each serving an average of **61** meals daily.

Percent students eligible for free or reduced price school meals (2008/09 - 2017/18)



Source: Nebraska Department of Education.

English Language Arts Proficiency

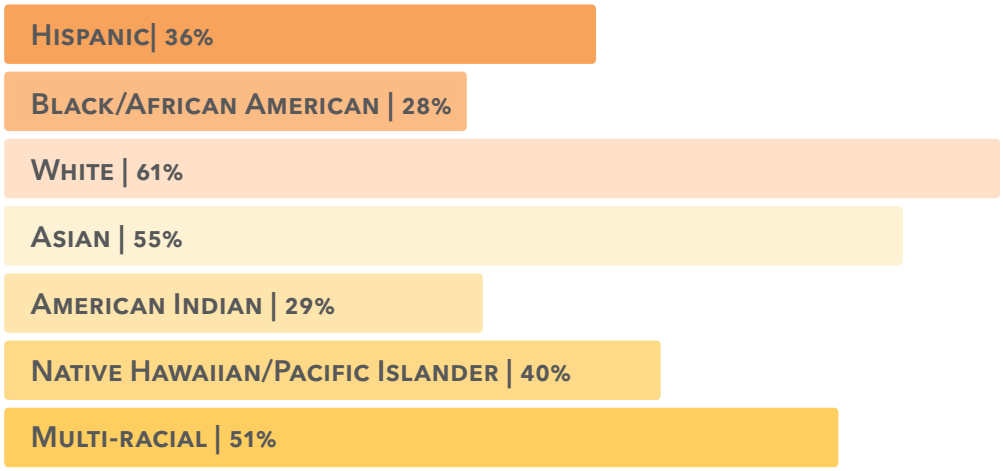
Reading is a fundamental skill that affects learning experiences and school performance of children and teens. The ability to read proficiently translates to a greater likelihood of performing well in other subjects. Children with lower reading achievement are less likely to be engaged in the classroom,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

Source: Child Trends, Reading Proficiency.

3rd Grade (2017/18)

53%
of children overall proficient in English Language Arts

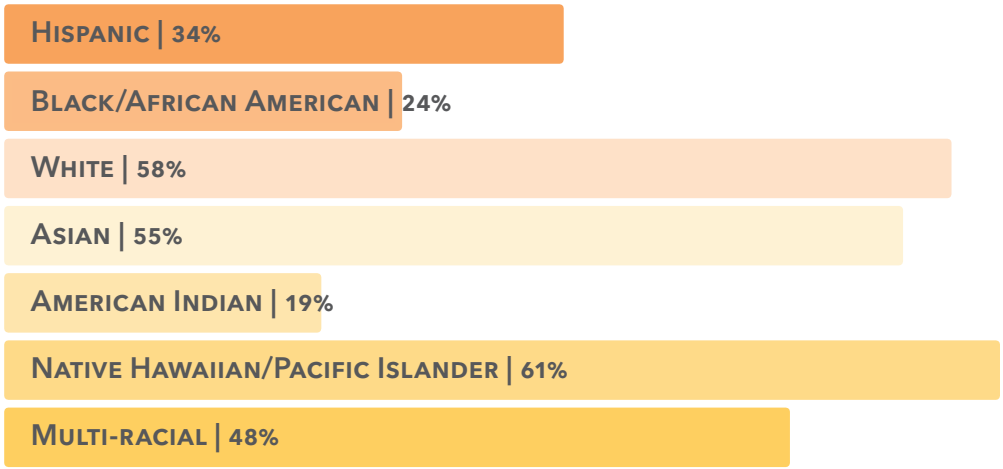
38%
of low-income children proficient in English Language Arts



8th Grade (2017/18)

51%
of children overall proficient in English Language Arts

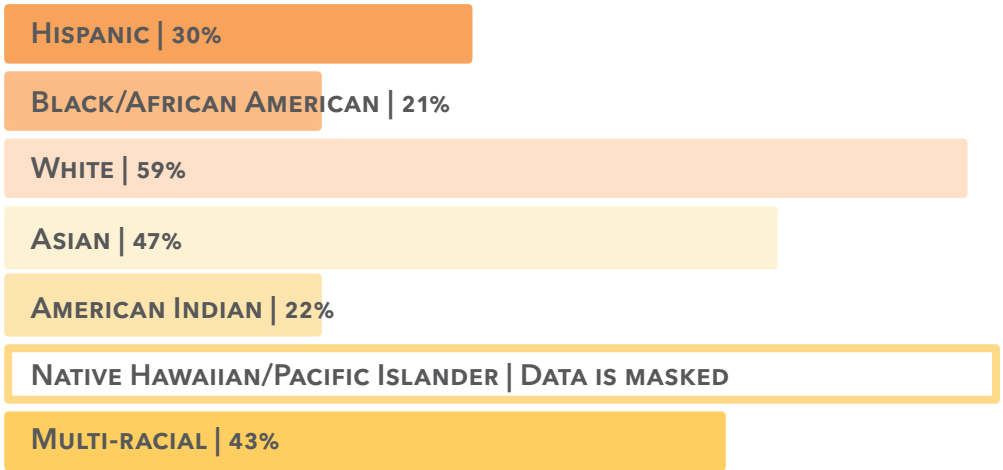
34%
of low-income children proficient in English Language Arts



11th Grade (2017/18)

50%
of children overall proficient in English Language Arts

30%
of low-income children proficient in English Language Arts



Sources: 3rd and 8th Grade: Nebraska Department of Education, NSCAS English Language Arts Proficiency. 11th Grade: ACT Assessment.

Math proficiency

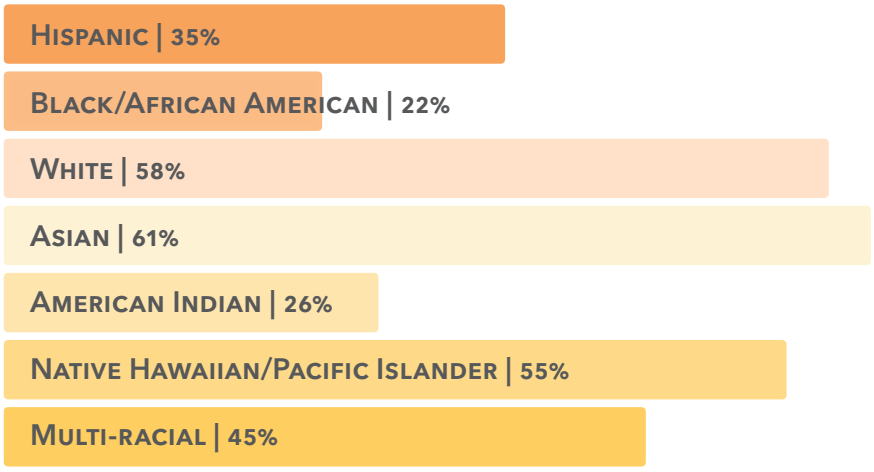
Math skills are essential for functioning in everyday life, as well as for future success in our increasingly technical workplace. Students who take higher courses in mathematics are more likely to attend and complete college. Those with limited math skills are more likely to find it difficult to function in everyday society and have lower levels of employability.

Source: Child Trends, Mathematics Proficiency.

5th Grade (2017/18)

76%
of children overall are proficient in math

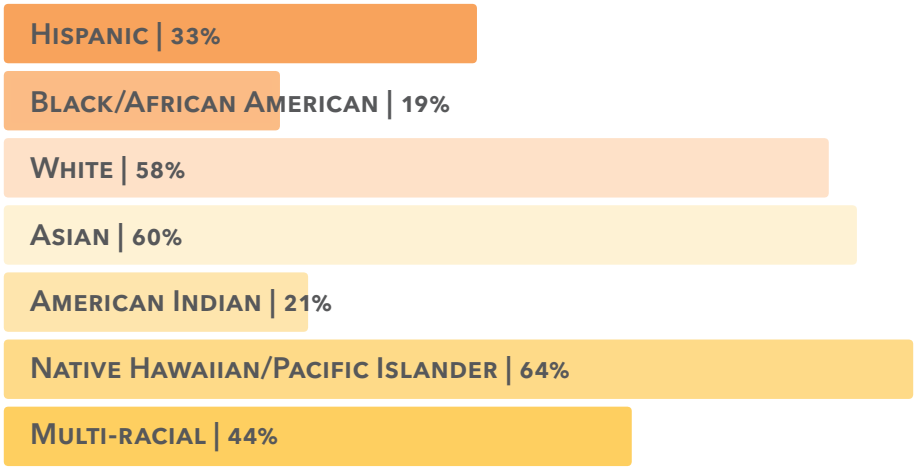
64%
of low-income children are proficient in math



8th Grade (2017/18)

65%
of children overall are proficient in math

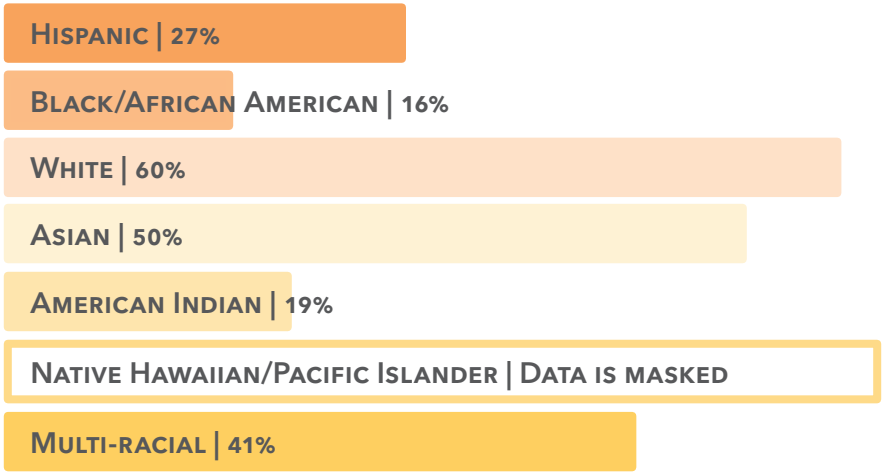
48%
of low-income children are proficient in math



11th Grade (2017/18)*

50%
of children overall are proficient in math

29%
of low-income children are proficient in math



Sources: 5th and 8th Grade: Nebraska Department of Education, NSCAS Mathematics Proficiency; 11th Grade: ACT Assessment.

Science Proficiency

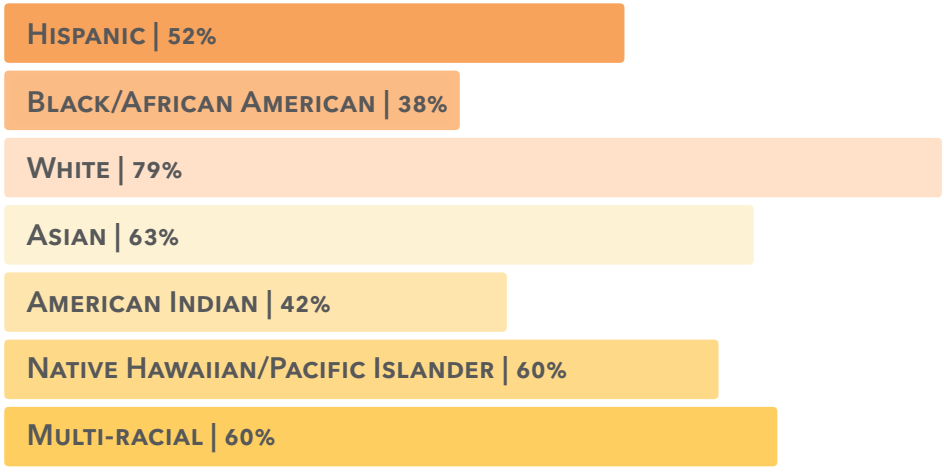
Proficiency in science helps prepare students to go on to highly skilled professions. Having a strong foundation in the sciences allows students to work in today's high demand fields. Students with a greater understanding of sciences learn how to better protect the environment and increase the health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

Source: Child Trends, Science Proficiency.

5th Grade (2017/18)

72%
of children overall are proficient in science

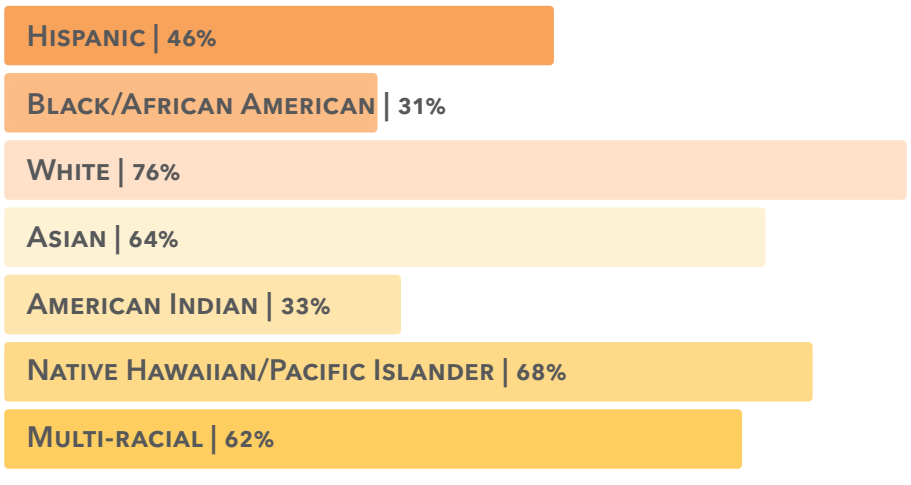
57%
of low-income children are proficient in science



8th Grade (2017/18)

68%
of children overall are proficient in science

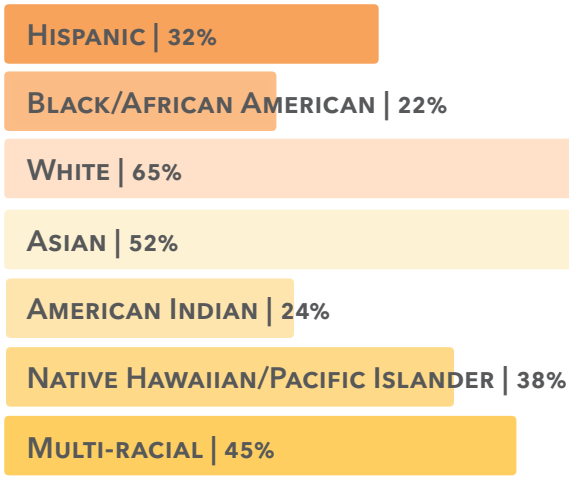
52%
of low-income children are proficient in science



11th Grade (2017/18)*

54%
of children overall are proficient in science

34%
of low-income children are proficient in science



Sources: 5th and 8th Grade: Nebraska Department of Education, NSCAS Science Proficiency. 11th Grade: ACT Assessment.

Absences & career readiness

834 (0.3%)

students in public and nonpublic schools were expelled during the 2017/18 school year.

30,830 (10.0%)

students in public and nonpublic schools were suspended during the 2017/18 school year.

68,022 (21%) STUDENTS WERE ABSENT 10-19 DAYS

15,731 (4.9%) STUDENTS WERE ABSENT 20-29 DAYS

12,499 (3.8%) STUDENTS WERE ABSENT 30+ DAYS

1,728

STUDENTS IN PUBLIC AND NONPUBLIC SCHOOLS DROPPED OUT IN 2017/18.

Source: Nebraska Department of Education.

71% of Nebraska's 2017/18 public high school graduates had enrolled in college by April 2019.[2]

41% of students who enrolled in a 2-year public college in Fall 2012 completed within six years.[2]

17,000 (9%) young people age 18-24 were not attending school, not working, and had no degree beyond high school.[4]

15,055 STUDENTS were enrolled in a career academy or dual credit courses in 2017/18.[1]

95,000 (51%) young people age 18-24 were enrolled in or completed college.[4]

21,988 STUDENTS of the 2019 graduation cohort took the ACT with average composite score of 19.4.[3]

68% of students who enrolled in a 4-year public college in Fall 2012 completed within six years.[2]

5,000 (5%) teens 16-19 were not in school and not working.[4]

1. Nebraska's Coordinating Commission for Postsecondary Education.
2. National Student Clearinghouse Research Center.
3. Nebraska Department of Education.
4. Annie E. Casey Foundation, Kids Count Data Center.

Graduation & Educational Savings

23,747

students completed high school in four years in 2017/18.

Nebraska Educational Savings Plan Trust (as of September 30, 2019)

16.8%

of Nebraska children had an Educational Savings Account through the NEST program

273,355

NEST Educational Savings Accounts

17,873

new NEST educational savings accounts opened in 2019 as of Sep. 30, 2019

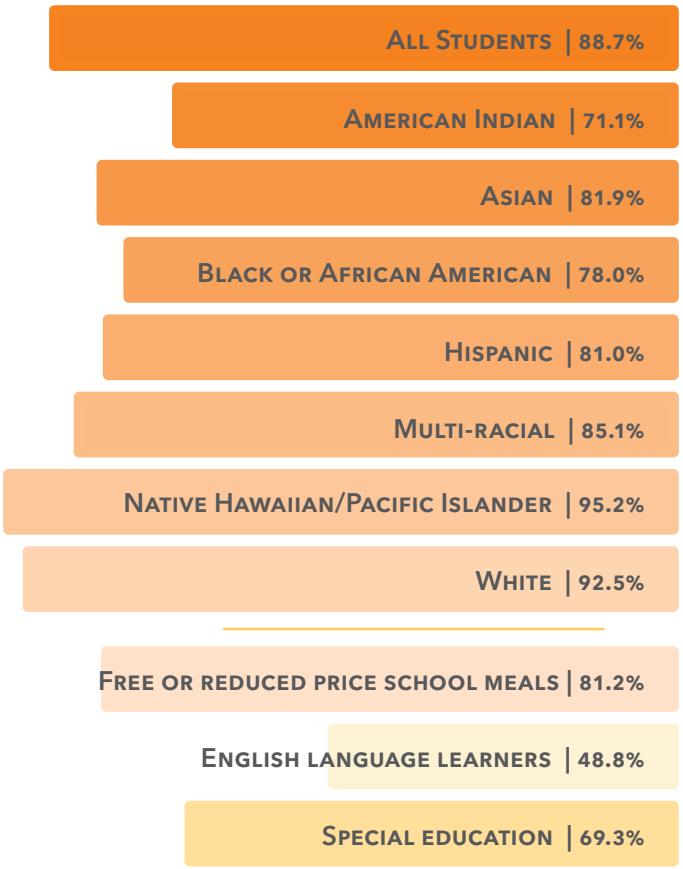
$14,673

average value of Nebraska NEST accounts

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.

Source: Nebraska State Treasurer's Office, Nebraska Educational Savings Plan Trust Annual Audit.

4-Year Cohort Graduation Rate (2017/18)



91.5%

2017 extended 5-year graduation rate*

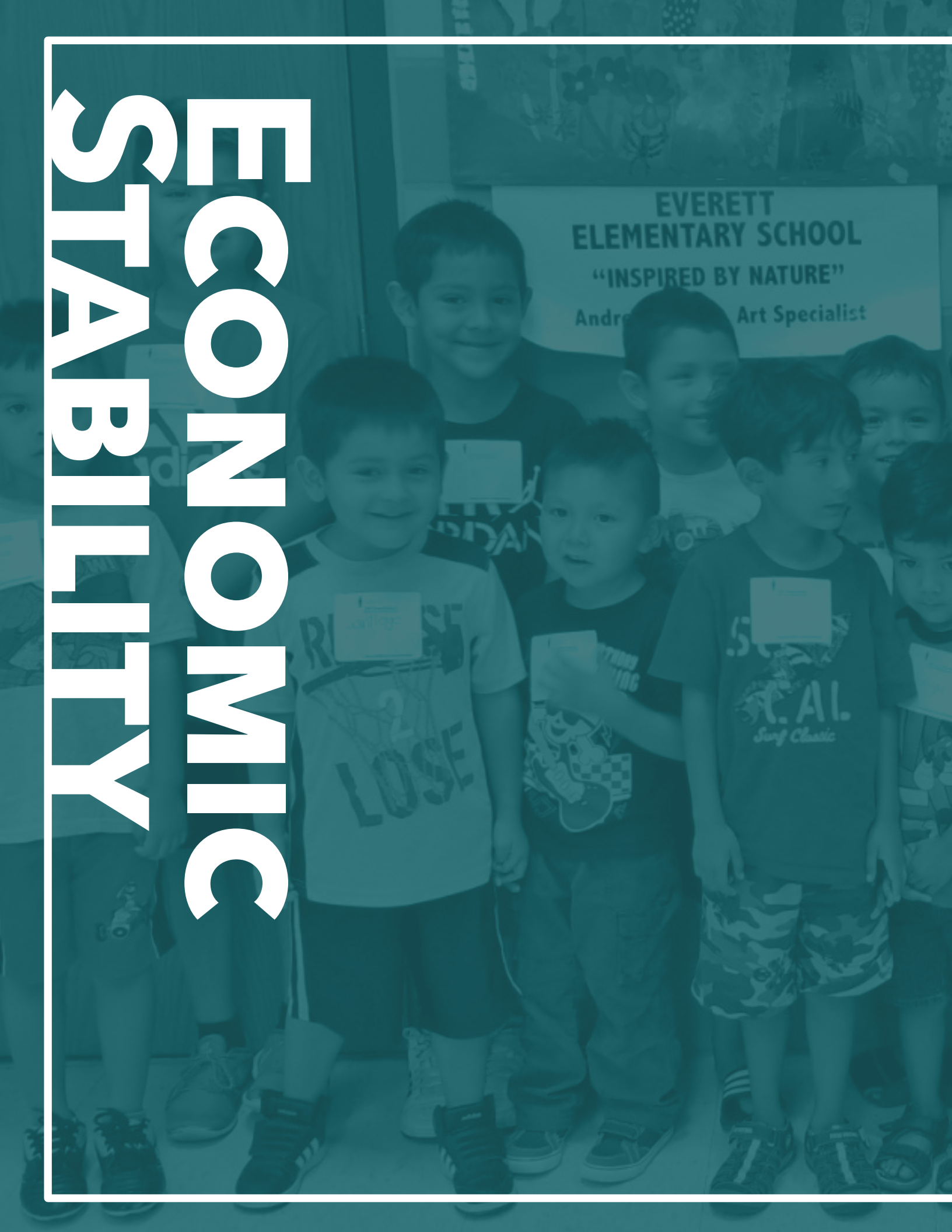
an increase from **91.3%** from the 2016 cohort 5-year graduation rate.

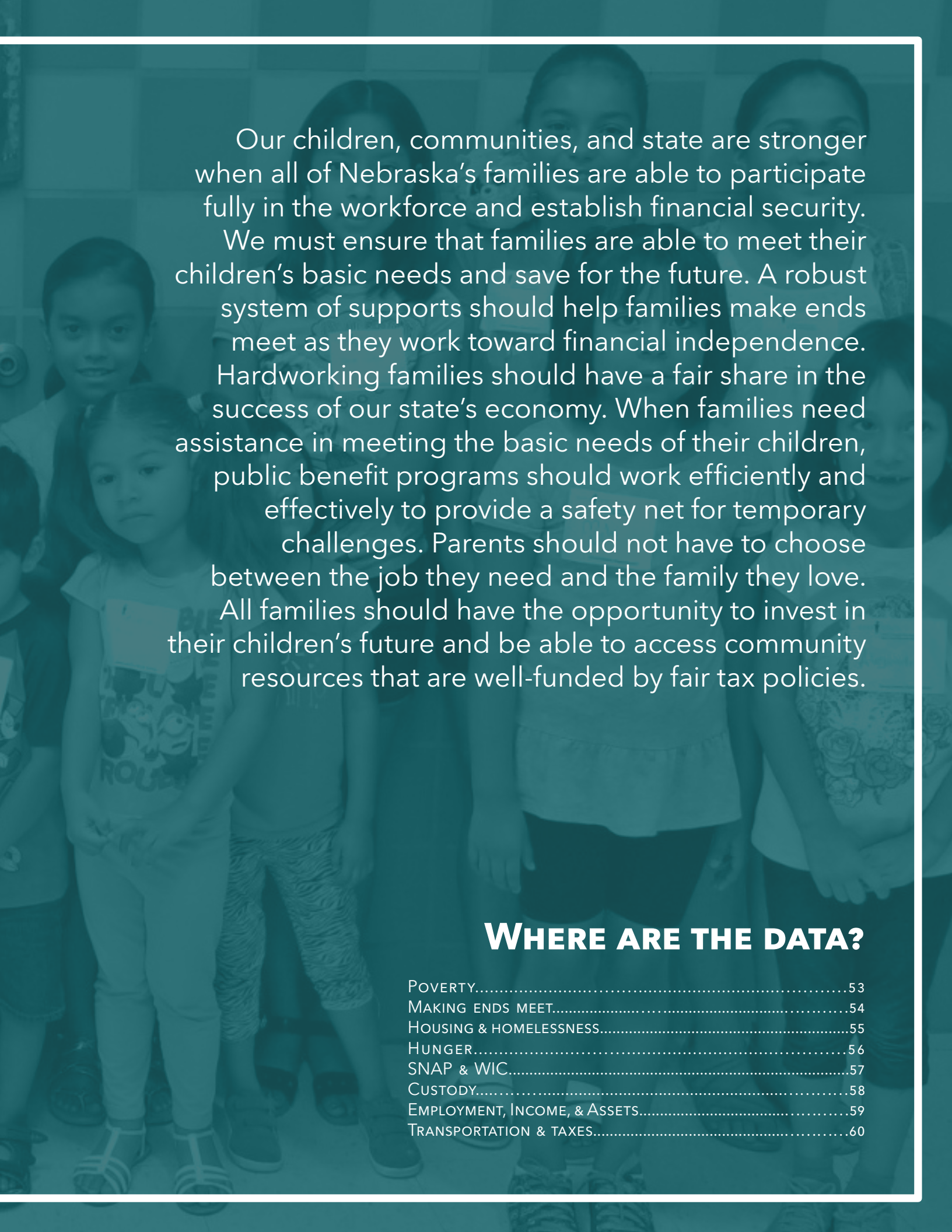
324

16-21 year olds took the GED in 2017/18 with **62%** completing successfully.

**Extended 5th year graduation rate is the percent of students who graduated within five years rather than the standard four. Source: Nebraska Department of Education.*

ECONOMIC STABILITY



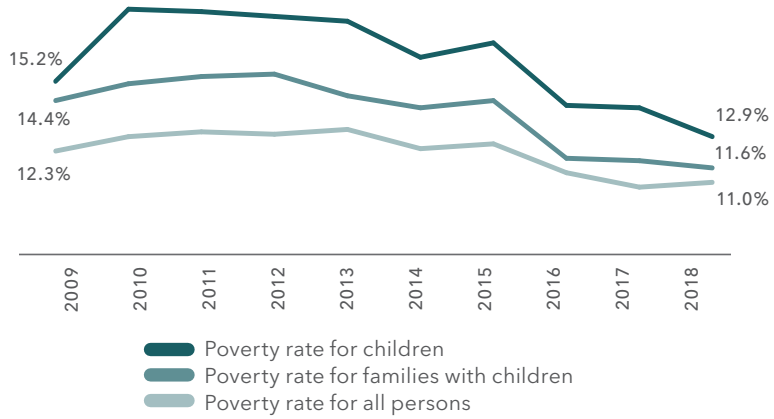


Our children, communities, and state are stronger when all of Nebraska's families are able to participate fully in the workforce and establish financial security. We must ensure that families are able to meet their children's basic needs and save for the future. A robust system of supports should help 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 effectively to provide a safety net for temporary challenges. 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 well-funded by fair tax policies.

Where are the data?

Poverty

Nebraska poverty (2009-2018)[1]



Family structure and poverty

35.1% of children living in single-mother households are in poverty.[1]

16.3% of children living in single-father households are in poverty.[1]

5.8% of children living in married-couple households are in poverty.[1]

11.9% of children living with a grandparent without a parent present are in poverty.[2]

60,110 Nebraska children were living in poverty in 2018.
12,705 of which were in extreme poverty (<50% of the Federal Poverty Line).

Nebraska poverty rates by race and ethnicity (2017)[3]	Child poverty rate (17 and under)	Overall poverty rate
American Indian or Alaska Native alone	40.6%	32.6%
Asian or Pacific Islander	21.3%	19.3%
Black or African American alone	39.0%	28.6%
Hispanic or Latino	29.3%	22.7%
Some other race alone	26.0%	20.8%
Two or more races	21.5%	20.5%
White alone (non-Hispanic)	9.5%	9.0%

2019 Federal poverty level (FPL) guidelines[4]

	Program Eligibility		Child Care Subsidy (non-ADC), SNAP, Free School Meals	Medicaid Expansion		WIC, Reduced Price Meals, Transitional Child Care Subsidy	Kids Connection (CHIP)		ACA Exchange Tax Credits
	% of FPL	100%	130%	138%	150%	185%	218%	300%	400%
Family Size	1	$ 12,490	$ 16,237	$ 17,236	$ 18,735	$ 23,107	$ 27,228	$ 37,470	$ 49,960
	2	$ 16,910	$ 21,983	$ 23,336	$ 25,365	$ 31,284	$ 36,864	$ 50,730	$ 67,640
	3	$ 21,330	$ 27,729	$ 29,435	$ 31,995	$ 39,461	$ 46,499	$ 63,990	$ 85,320
	4	$ 25,750	$ 33,475	$ 35,535	$ 38,625	$ 47,638	$ 56,135	$ 77,250	$ 103,000
	5	$ 30,170	$ 39,221	$ 41,635	$ 45,255	$ 55,815	$ 65,771	$ 90,510	$ 120,680
	6	$ 34,590	$ 44,967	$ 47,734	$ 51,885	$ 63,992	$ 75,406	$ 103,770	$ 138,360
	7	$ 39,010	$ 50,713	$ 53,834	$ 58,515	$ 72,169	$ 85,042	$ 117,030	$ 156,040
	8	$ 43,430	$ 56,459	$ 59,933	$ 65,145	$ 80,346	$ 94,677	$ 130,290	$ 173,720

1. U.S. Census, 2018 American Community Survey 1-year estimates, Table B17006.
2. U.S. Census, 2018 American Community Survey 1-year estimates, Table S1001.
3. U.S. Census Bureau, 2017 American Community Survey 5-year estimates, Table B17001B-I.
4. U.S. Department of Health and Human Services, HHS Poverty Guidelines for 2019.

Making ends meet

Making ends meet

Nebraskans pride themselves on being hard-working people. In 2018, 77.1% 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.

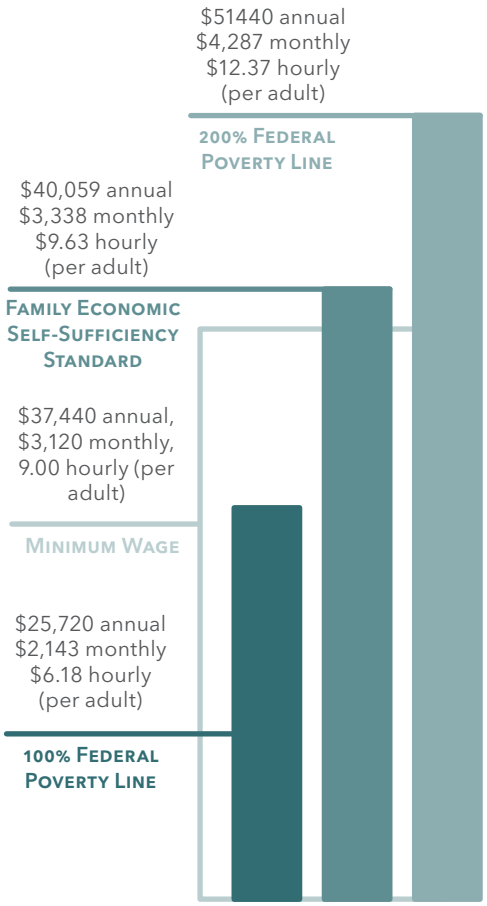
The chart at right illustrates the gap between low-wage earnings and the amount needed to provide for a two-parent family with two children. It assumes that both parents work full-time (40 hours a week), year round (52 weeks per year). That means no vacation, no sick time, just work.

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.

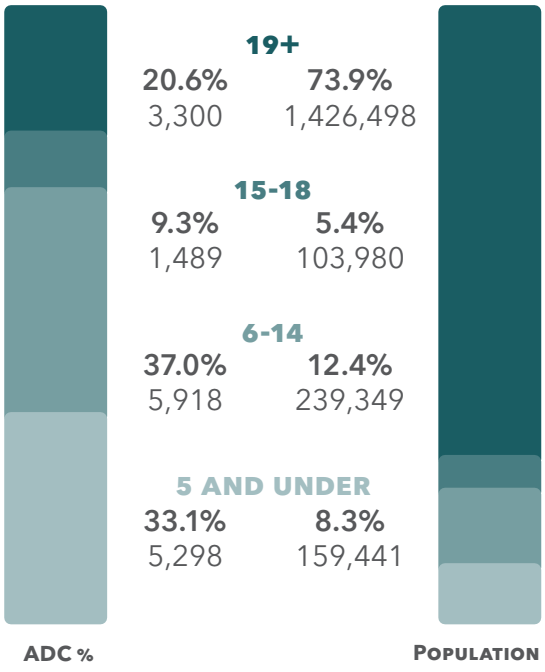
Voices for Children publishes a tool that shows what the FESS is for every county and most family types. Check it out at familybottomline.com

1. U.S. Census Bureau, 2018 American Community Survey, Table B23008.
2. United States Department of Labor, "Minimum Wage Laws in the States - January 1, 2016," http://www.dol.gov.
3. FESS was calculated using an average of 2010 figures for a two-adult, two-child family, adjusted for 2019 inflation. Data used to calculate information is courtesy of Nebraska Appleseed Center for Law in the Public Interest.

2 adult, 2 child family 2019



ADC recipients by age[5]



Aid to Dependent Children (ADC) (SFY 2018)[5]

12,028 Average monthly number of children receiving ADC.

5,565 Average monthly number of families receiving ADC.

$419 Average monthly ADC payment per family.

36 Number of cases reaching 60-month eligibility limit.

2.2 Average number of children per ADC family.

$28,008,969 Total ADC payments (Includes both state and federal funds).

5. Financial Services, Operations, Nebraska Department of Health and Human Services (DHHS).

Housing & homelessness

Homelessness

The Nebraska Homeless Assistance Program (NHAP) and the Housing and Urban Development Program (HUD) served individuals who are homeless or near homeless. Not all homeless people receive services.

In 2018, HUD/NHAP served:

7,139 Homeless individuals.

1,509 Homeless children ages 18 and under.

2,516 Homeless families with children.

17 Unaccompanied homeless children.

2,587 Individuals at risk of homelessness.

1,227 Children at risk of homelessness.

1,974 Families with children at risk of homelessness.

4 Unaccompanied children at risk of homelessness.

Source: Nebraska Homeless Assistance Project, FY2018 combined CAPER Reports.

Homeownership

Homeownership provides a sense of stability for children and communities.

67.9% OF FAMILIES WITH CHILDREN OWNED THEIR HOME IN 2018.[1]

In 2018, Nebraska Public Housing had:[2]

12,758 vouchers

7,345 public housing units

4,776 units were one bedroom (non-family).

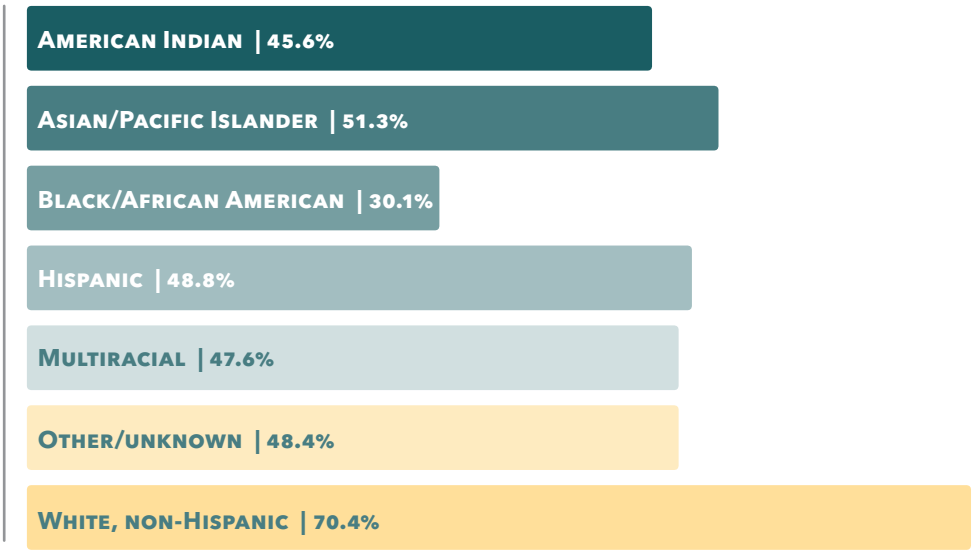
49,000 children (10%) lived in crowded housing with more than one person/room.[3]

36,000 children (10%) lived in areas of concentrated poverty.[3]

104,000 children (22%) lived in households with a high housing cost burden.[3,4]

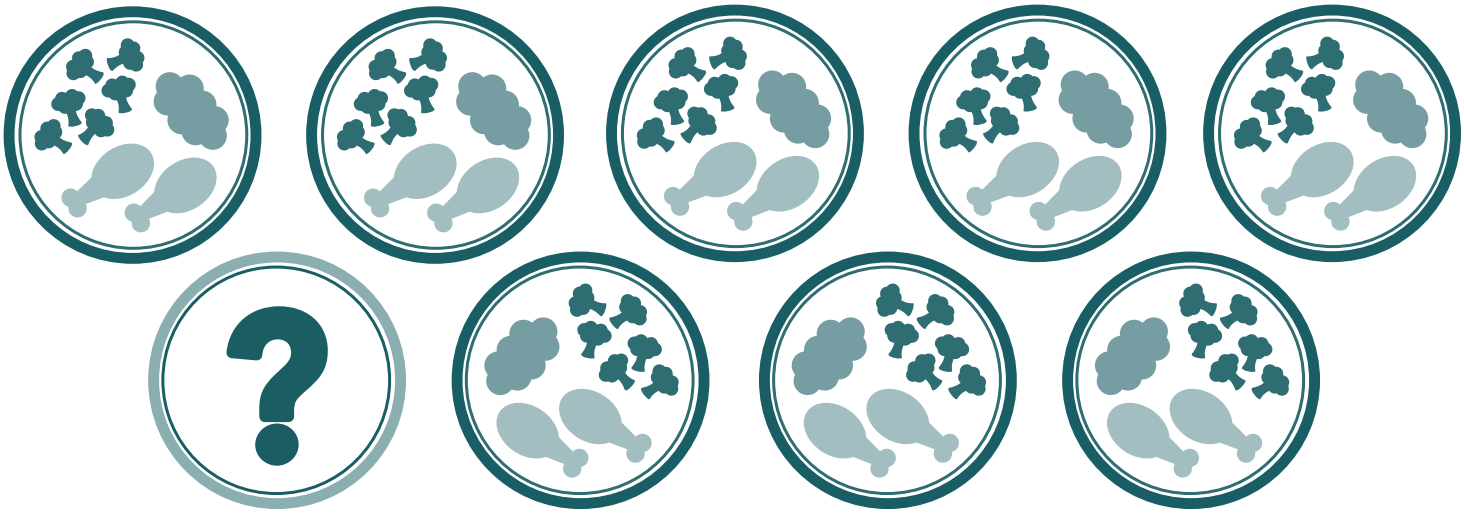
88,000 children (51%) low-income households had a high housing cost burden.[3,4]

Homeownership by race/ethnicity (2018)[5]



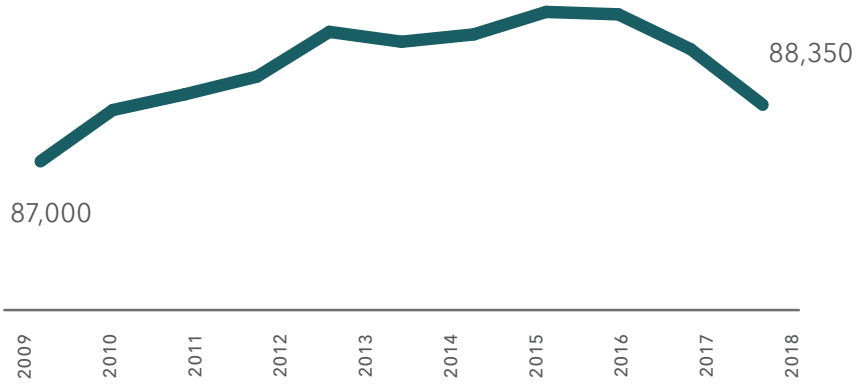
1. U.S. Census Bureau, 2018 American Community Survey 1-year estimates, Table B25115.
2. Nebraska Office of Public Housing, HUD.
3. Annie E. Casey Foundation, Kids Count Data Center.
4. Families with high housing cost burdens spend more than 30% of their pre-tax income on housing.
5. U.S. Census Bureau, 2018 American Community Survey 1-year estimates, Table B25003B-I.

Hunger



1 in 9 Nebraska households don't know where their next meal is coming from.[1]

Food insecure households in Nebraska (2009-2018)[1]



Approximately **88,350** households in Nebraska were food-insecure in 2018, a decrease from **102,462** in 2017. This means that someone in the household has distrupted their eating patterns or reduced their intake of food because there was not enough food in the house to eat.

17.4% of Nebraska children experienced food insecurity (2017).[2]

63.0% of food-insecure children were likely eligible for federal nutrition assistance (2017).[2]

1. National and State Program Data, Food Research & Action Center, USDA, Household Food Security in the United States in 2018.
2. Feeding America, Map the Meal Gap 2017.

SNAP & WIC

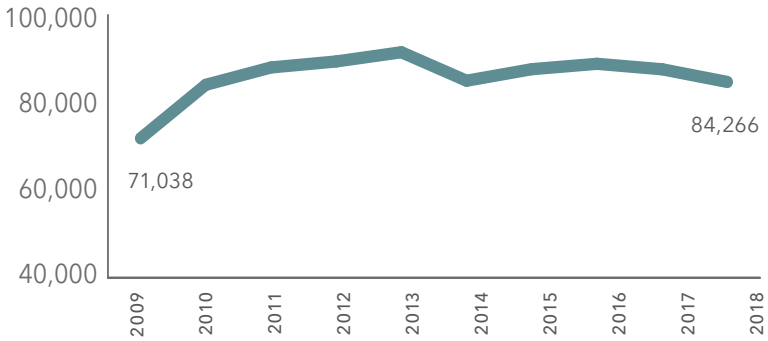
Supplemental Nutrition Assistance Program

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.

In Nebraska in 2016, SNAP moved about 8,600 households above the poverty line.

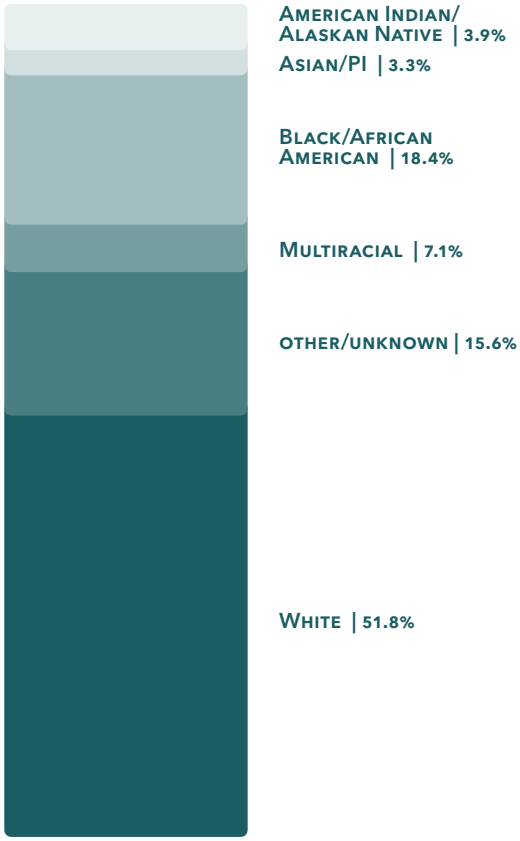
Characteristics of the Supplemental Nutrition Assistance Program Households: Fiscal Year 2016, USDA, Food Nutrition Services, The Office of Policy Support, Tables B.12, B.13

Average number of children enrolled in SNAP (June 2009-2018)



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

SNAP child participants by race/ethnicity (June 2018)[5]



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

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 health care.

Women, Infants, and Children (WIC) (2018)

Of the monthly average **32,245** WIC participants in 2018:

- **8,059** were women;
- **8,485** were infants; and
- **18,701** were children

WIC services are provided at **102 clinics** in **93 counties.**

$63.49

Average monthly cost per participant in 2018.

Source: Nebraska WIC Program.

Custody

Marriage and divorce

In 2018...

11,543 COUPLES were married **&** **5,698** were divorced.

5,113 CHILDREN experienced their parents divorcing.

- **1,157 CASES** were put under their mother's custody.
- **205 CASES** were put under their father's custody.
- **1,330 CASES** were put under both parent's custody.
- **48 CASES** were given a different arrangement.

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

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.

12,000 (2.4%)[1] CHILDREN WERE LIVING IN KINSHIP CARE (2018).

10,386 (2%)[2] WERE LIVING WITH A GRANDPARENT WHO WAS THEIR PRIMARY CAREGIVER IN 2018.

1. Annie E. Casey Foundation, Kids Count Data Center.
2. U.S. Census Bureau, 2018 American Community Survey 1-year estimates, Table B10002.

Child support (2018)

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).

105,009 cases received CSE assistance, **70.6%** of cases with child support obligation.

97,745 were non-ADC cases.*

7,264 were ADC cases.*

$215,373,387 Amount of child support disbursed through CSE.

18,615 Cases received services through CSE, but payments were not being made.

2,639 Cases receiving public benefits which are eligible for and are receiving child support payments.

1,791 Cases receiving public benefits which are eligible for child support, but it is not being paid.

4,013 Child support cases where non-custodial parent is incarcerated.

$117.04 Mean monthly child support payment per child.

Source: Nebraska Department of Revenue.
** If the custodial parent is receiving ADC, the state is entitled to collect child support from the non-custodial parent as reimbursement.*

Employment, Income, & Assets

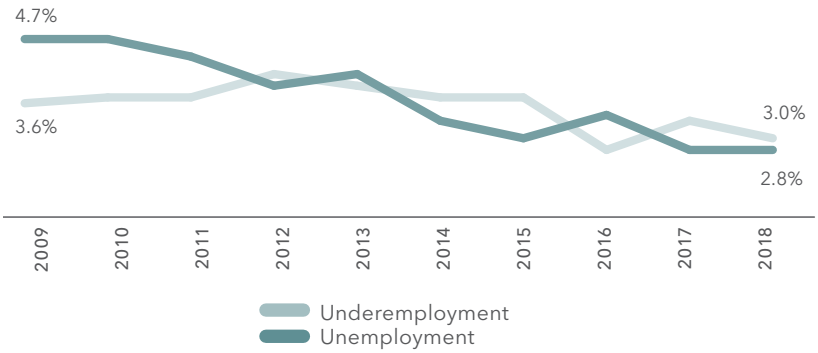
In 2018,

77.1% of children under 18 had all available parents in the workforce

73.4% of children under 6 had all available parents in the workforce

Source: U.S. Census, 2018 American Community Survey 1-year estimates, Table B23008.

Nebraska unemployment and underemployment rate (2009-2018)



Source: Bureau of Labor Statistics, Alternative Measures of Labor Underutilization for States, Annual Averages, U-3, U-6.

Median income for families with children (2018)

All families	$75,990
Married couple	$94,551
Male householder (no wife)	$43,773
Female householder (no husband)	$28,927

Source: U.S. Census Bureau, 2018 American Community Survey 1-year estimates, Table B19126.

Median income for families by race & ethnicity (2018)

American Indian	$47,644
Asian	$79,331
Black/African American	$46,958
Hispanic	$47,940
Multi-racial	$53,302
Other	$41,321
White Non-Hispanic	$81,636

Source: U.S. Census Bureau, 2018 American Community Survey 1-year estimates, Table B19113B-I.

9,000 workers in Nebraska earned federal minimum wage or below in 2018.[1]

19.4% of Nebraska workers were working in a low-wage job, meaning the median annual pay is below the poverty line for a family of four.[2]

17.8% of Nebraskans experience asset poverty.[2]

Asset poverty

A household is considered to be in asset poverty if they do not have sufficient net worth at the Federal Poverty Line to subsist without income for three months.

1. Bureau of Labor Statistics, Characteristics of Minimum wage workers, 2018.
2. Assets and Opportunity Nebraska State Data, 2018.

Transportation & Taxes

Family tax credits (2018)

124,107 families claimed **$297,048,169** in federal Earned Income Tax Credit (EITC).

123,972 families claimed **$29,182,788** in state Earned Income Tax Credit.

231,343 families claimed **$564,526,389** in federal Child Tax Credit.

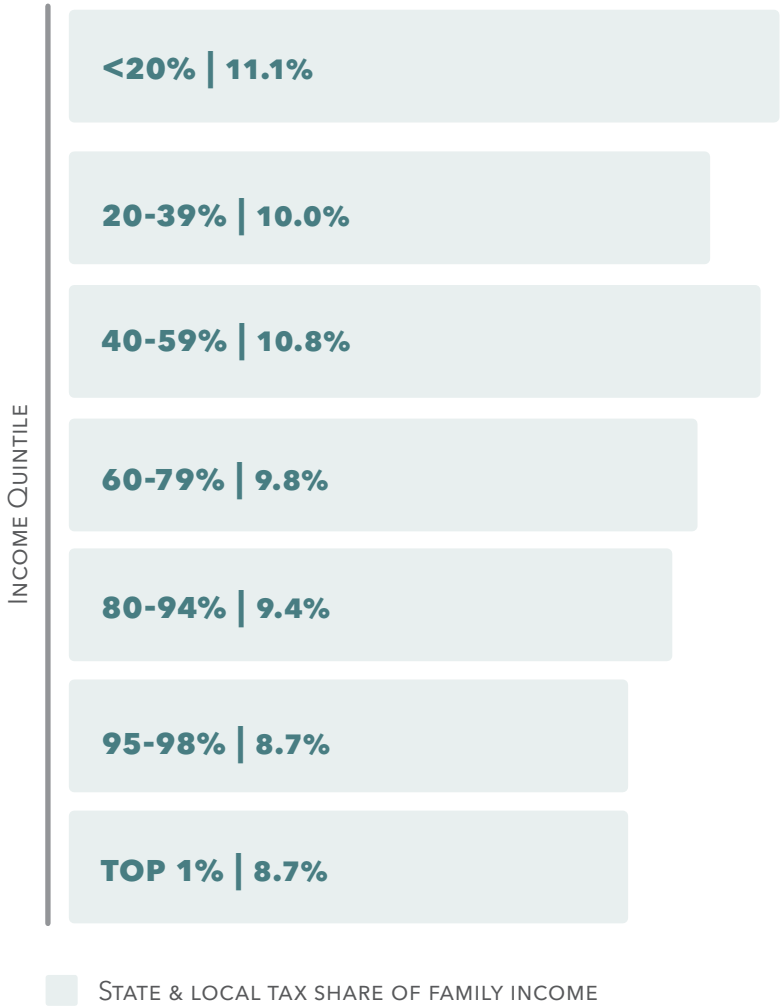
53,399 families claimed **$29,523,273** in federal Child and Dependent Care Credit.

54,666 families claimed **$10,473,547** in state Child and Dependent Care Credit.

108,250 families claimed **$206,099,833** in Additional Child Tax Credit.

Source: Nebraska Department of Revenue.

Nebraska State and Local Taxes, Shares of family income by income group (2018)



Source: ITEP, Who Pays? A Distributional Analysis of the Tax Systems, Nebraska, 2018.

35,591 (3.6%)
workers used transportation other than a personal automobile or carpool to get to work in 2018.

Source: U.S. Census Bureau 2018 American Community Survey 1-year estimates Tables B08201, C08141.

38,819 (5.1%)
households had no vehicle available in 2018.

Source: U.S. Census Bureau 2018 American Community Survey 1-year estimates Tables B08201, C08141.

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 safey, well-being, and permanency.

Where are the data?

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 (80%) 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 & neglect reports

36,480 REPORTS

of alleged maltreatment were made to the Child Abuse and Neglect Hotline in 2018.

36,480
reports were made

12,808
calls were assessed by DHHS and/or law enforcement

2,048
reports were substantiated

8,754
reports were unfounded

663
reports were referred to Alternative Response

Do you know a child who is being maltreated?

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

Safety assessments

12,212
safety assessments conducted on children

913
children determined unsafe

708
children determined unsafe and referred to court

61
children determined unsafe and referred to voluntary services

144
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 (DHHS).

Child maltreatment

Types of substantiated maltreatment (2018)

- **Physical Abuse | 14.9%**
- **Emotional Abuse | 0.5%**
- **Sexual Abuse | 10.7%**
- **Physical Neglect | 80.0%**
- **Emotional Neglect | 0.4%**

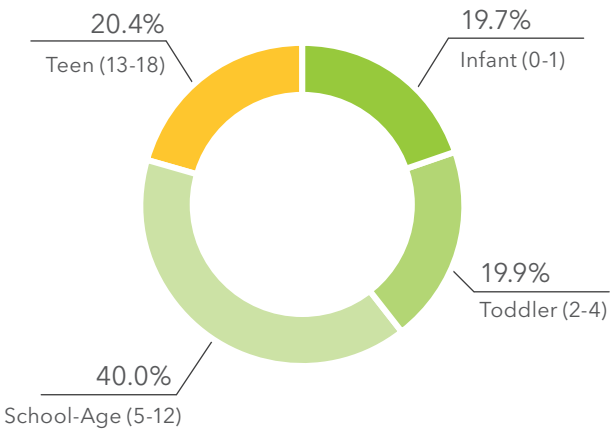
Some children experienced more than one type of maltreatment. The numbers here will be higher than the total number of children who experienced maltreatment.

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

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.

3,346 KIDS
experienced maltreatment in 2018.

Child maltreatment by age (2018)

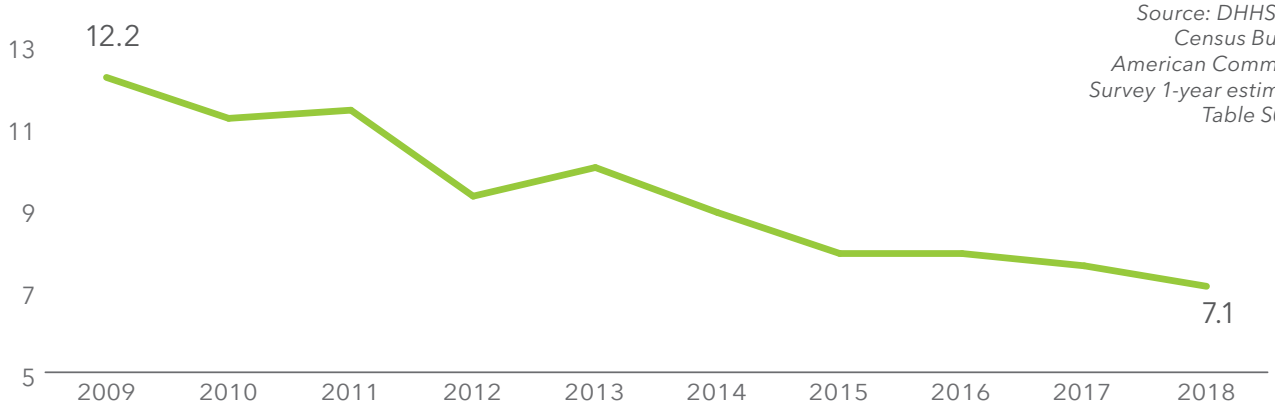


In 2018, **7,080 children** in **93 counties** who were alleged victims of maltreatment were served by the Child Advocacy Centers (CACs) of Nebraska.

The Nebraska Alliance of Child Advocacy Centers provides statewide leadership in the fight against child abuse alongside it's member centers, Nebraska's seven fully accredited Child Advocacy Centers (CACs). The CACs are located in Gering, Grand Island, Kearney, Lincoln, Norfolk, North Platte, and Omaha. There are also 10 satellite locations in other parts of the state covering each of Nebraska's counties.

Source: Nebraska Alliance of Child Advocacy Centers, 2018 Annual Statistics.

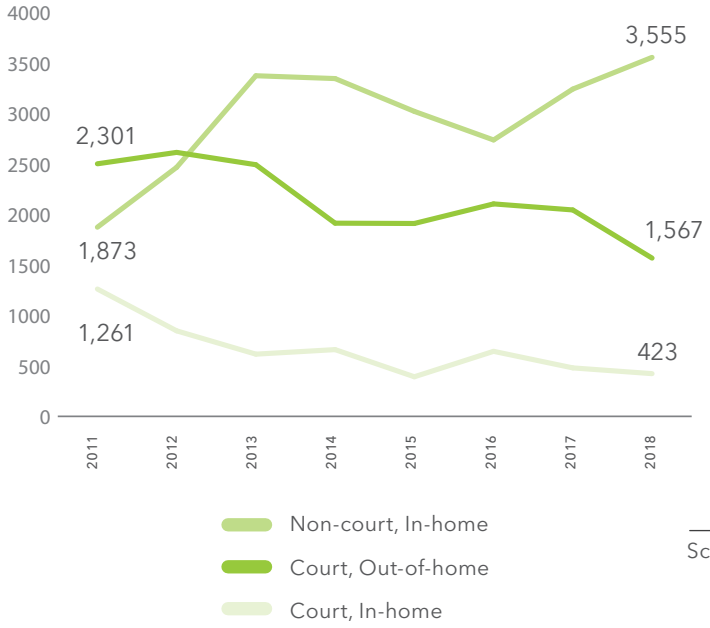
Number of child maltreatment victims per 1,000 children (2009-2018)



Source: DHHS; U.S. Census Bureau, American Community Survey 1-year estimates, Table S0901.

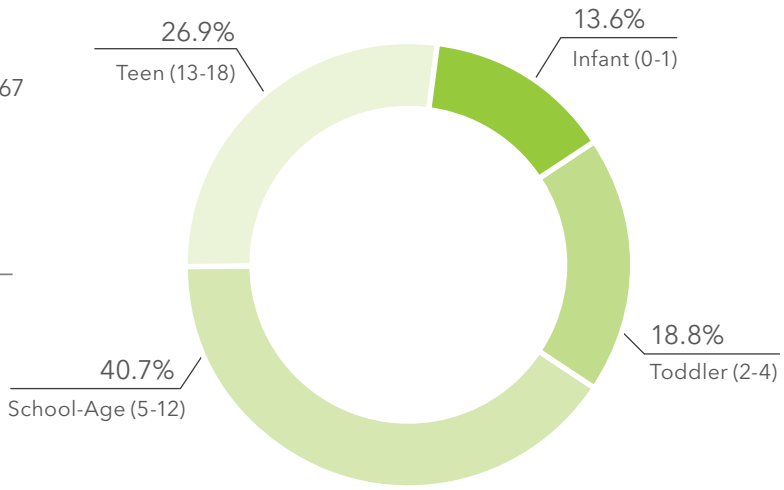
Entries & involvement

How do children enter our child welfare system? (2011-2018)



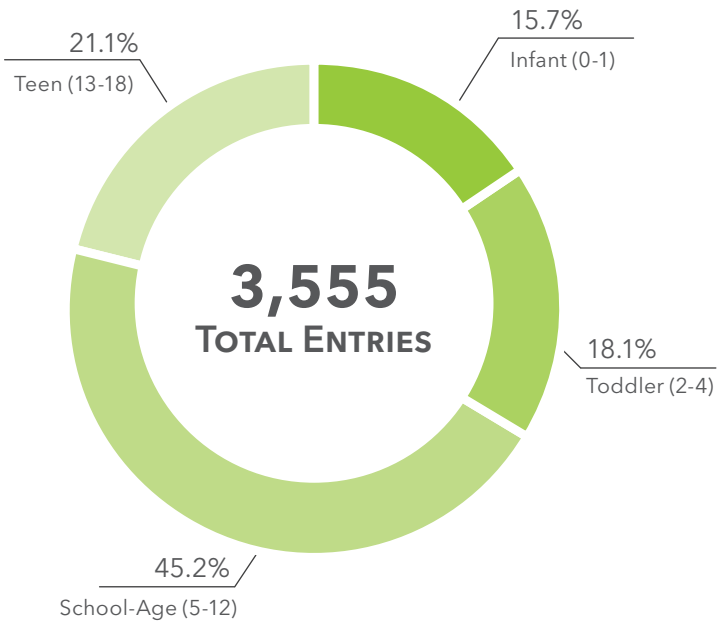
1,871 children entering care in 2018 had prior involvement in the child welfare system.

Any involvement by age (2018)

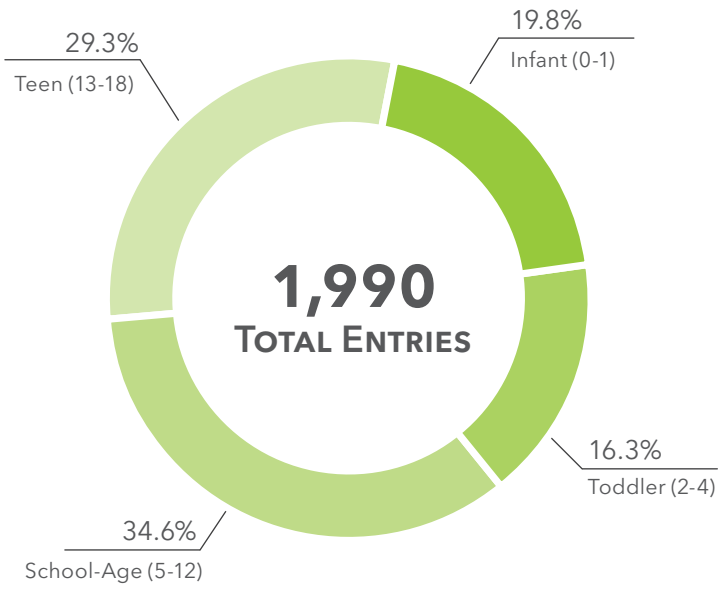


10,313 kids from 5,024 families were involved in our child welfare system in 2018.

Non-court entries by age (2018)



Court entries by age (2018)



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

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

Tribal youth	
Involved	484
Entered	204
Placed in Out-of-Home Care	398
Exited	106

783 FAMILIES were served by and **711 FAMILIES** were successfully discharged from

Alternative Response in 2018.

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.

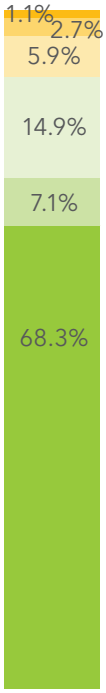
39 FAMILIES changed track from Alternative Response to Traditional Response after an average 30 days of involvement.

Placement types of tribal children receiving Out-of-Home services (CY 2018)		
Adoptive Home	0	0%
DD Facility	0	0%
Detention	15	3%
Emergency Shelter	49	9%
Group Home	16	3%
Hospital/ Medical Facility	11	2%
Independent Living	0	0%
Kinship Foster Home	48	9%
Missing Youth	23	4%
Non-Relative Foster Home	86	16%
PRTF	6	1%
Relative Foster Home	272	50%
Therapeutic Group Home	3	1%
YRTC	10	2%
Duplicated Total	539	

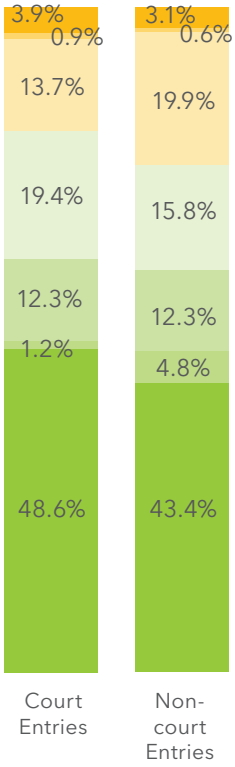
Source: Nebraska Department of Health and Human Services (DHHS).

Race & ethnicity in child welfare

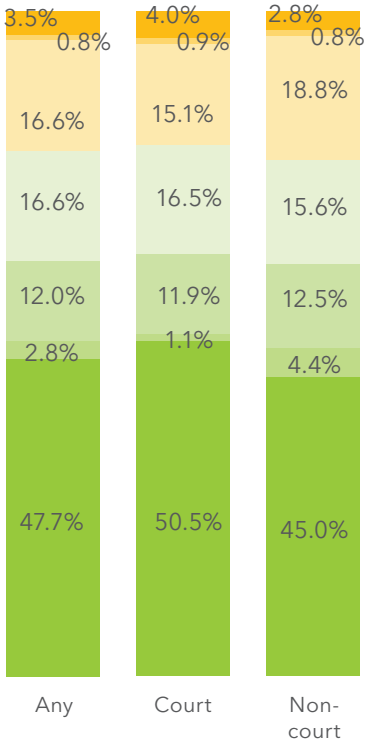
Total child population (2018)



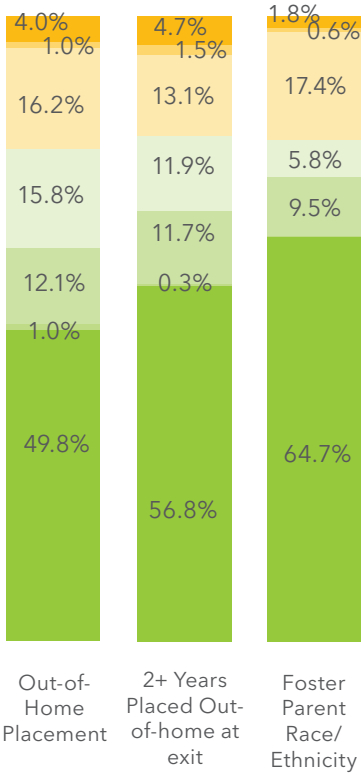
Entries to the child welfare system (2018)

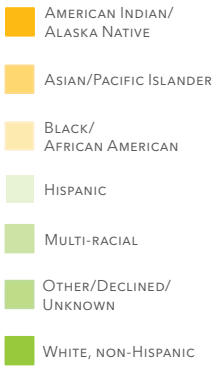


Child welfare system involvement (2018)

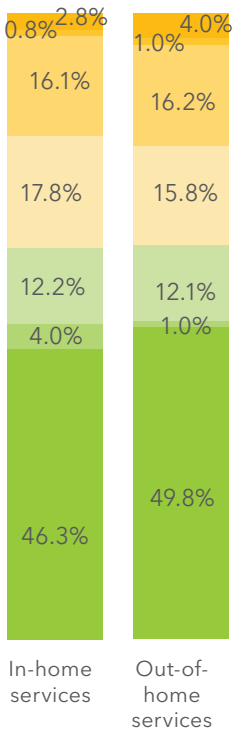


Out-of-home care (2018)





In-home and out-of-home services (2018)



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

Placements & Staff Caseloads

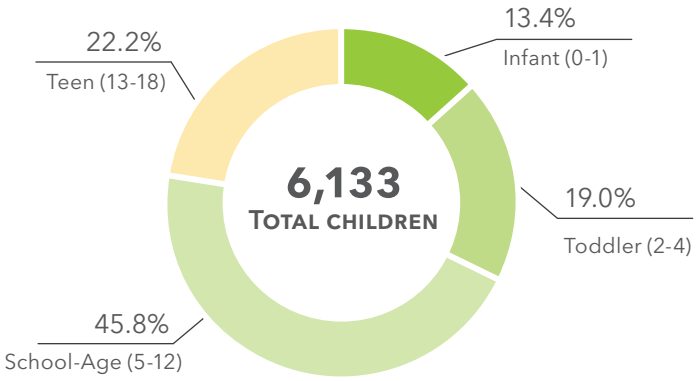
Removal reasons of children in out-of-home care (2018)

3,517 children who received out-of-home services had a 3(a) petition

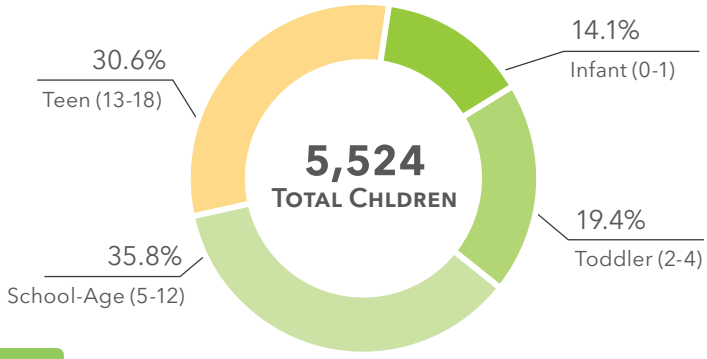
Neglect (alleged/reported)	1,631	Mental and Emotional Abuse	37
Drug Abuse (Parent/Caretaker)	1,346	Mentally Ill and Dangerous (child)	36
Domestic Violence	466	Death of Parent(s)/Caretaker(s)	26
Physical Abuse (alleged/reported)		Court Determined that Reasonable Efforts are not Required.	18
Inadequate Housing	330	Diagnosed Child's Disability	18
Incarceration of Parent(s)/Caretaker(s)	231	Alcohol Abuse (child)	15
Abandonment	229	Relinquishment	9
Child's Behavior Problem	196	Drug Abuse (child)	7
Alcohol Abuse (Parent/Caretaker)	170	Human Trafficking	1
Parent's/Caretaker's Inability to Cope Due to Illness/Other	128	Safe Haven	1
Sexual Abuse (alleged/reported)	124		

Note: Children may have more than one reason for Removal.

Children receiving in-home services by age (2018)



Children receiving out-of-home services by age (2018)



Total staff caseloads in compliance (2018 Average)

Service Area	Total Staff	Staff with caseloads In compliance	Percent caseloads in compliance
Central	60	55	91.3%
Eastern	196	187	95.5%
Northern	62	52	83.7%
Southeast	95	79	83.3%
Western	52	40	76.9%
State	464	412	88.9%

Compliance as 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.

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

Out-of-home placements

Where are the kids in out-of-home care? (12/31/2018)

3.4%	Group home (104 children)
1.1%	Living independently (35 children)
0.7%	Missing Youth (23 children)
0.1%	Emergency shelter (4 children)
2.0%	Medical facility (60 children)
39.7%	Foster & adoptive homes (1,218 children)
11.8%	Kinship care (363 children)
36.8%	Relative home (1,129 children)
4.3%	Detention facility (131 children)

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. Examples are a current or former teacher, coach, or neighbor.
- **Licensed foster homes:** Foster parents who live at the licensed residence and care for a child or children whom they have not previously known.

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

Foster home placement beds (12/31/2018)

5,560 foster home beds were available in **2,534** homes.

1,424 beds in **812** approved homes.

4,136 beds in **1,722** licensed homes.

1,492 **(59.6%)** children in foster care were placed with relatives or kin

37.8% of foster home beds were in kin or relative homes

2,020 kids in out-of-home care also had a sibling in out-of-home care on 12/31/18

- **66.1%** were placed with all siblings
- **83.8%** were placed 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.

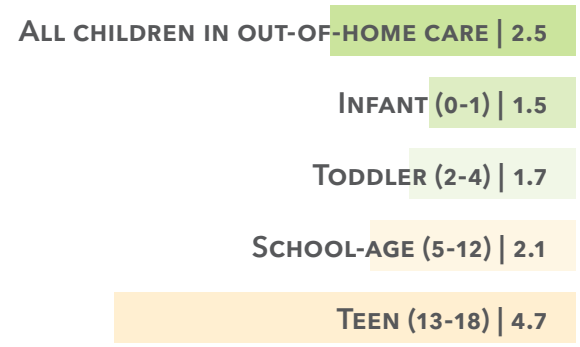
Placement stability

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.

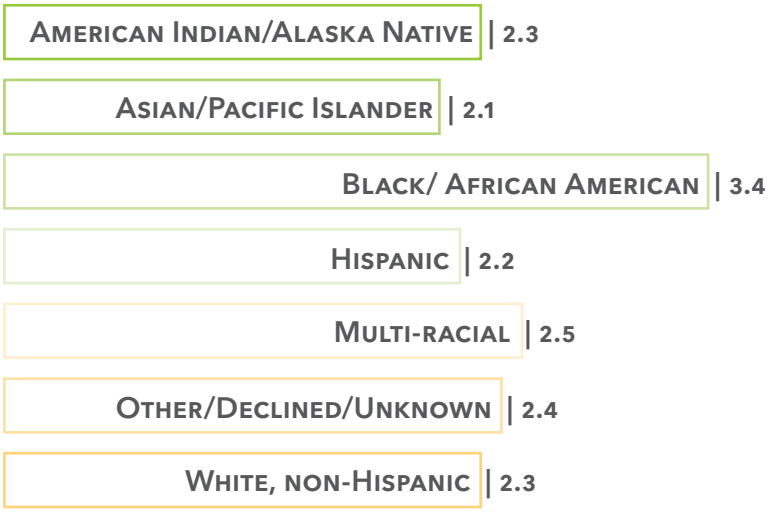
Source: University of Illinois, Child and Family Research Center, Placement Stability Study, 1999.

Average number of out-of-home placements by age (2018)

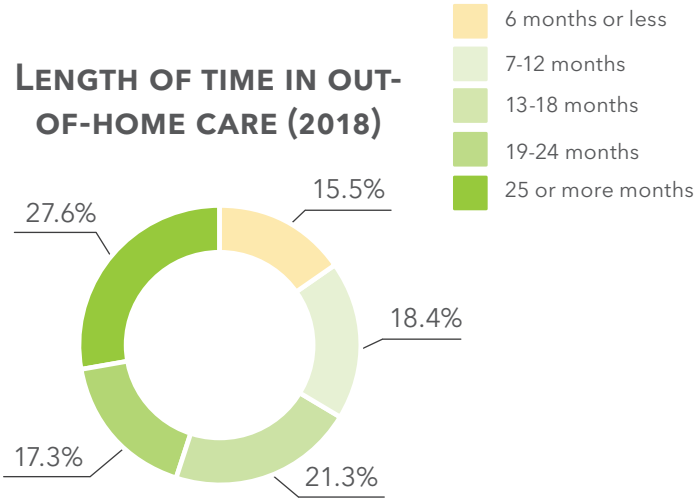


2,234 children exited out-of-home care in 2018. The mean length of time away from home was **20.1 months**.

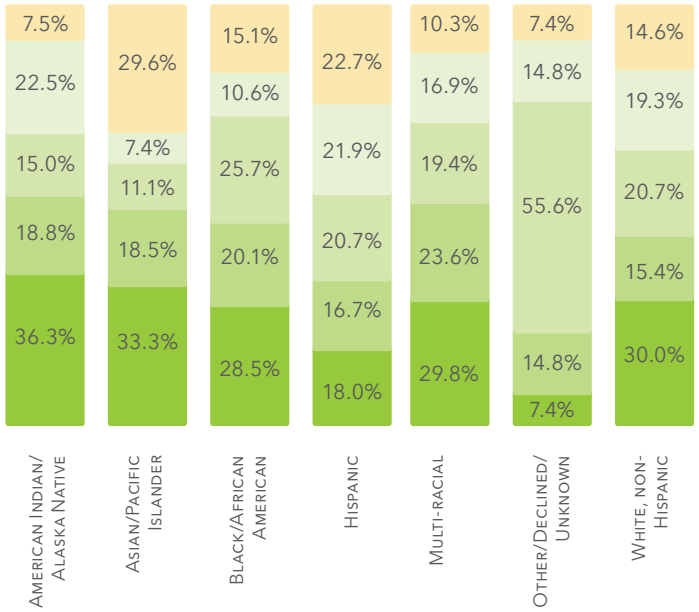
Average number of out-of-home placements by race/ethnicity (2018)



Length of time in out-of-home care (2018)



Length of time in out-of-home care by race/ethnicity (2018)

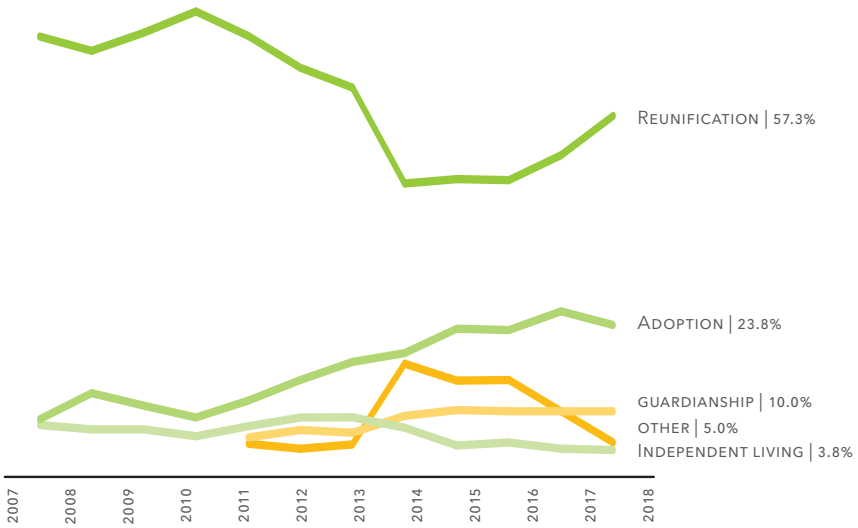


Source: Nebraska Department of Health and Human Services (DHHS).

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.

EXITS FROM OUT-OF-HOME CARE (2009-2018)



3,090 non-court involved children exited the system in 2018.

2,744 court involved children exited the system in 2018.

532 children

were adopted in 2018.

518 adoptions were subsidized.

Mean time from becoming free for adoption to adoption:

9.2 MONTHS.

224 children exited into guardianships in 2018,

208 of which were subsidized and adoptions.

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

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 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.

97 YOUTH

were in out-of-home care when they reached their 19th birthday in 2018.

97% were HHS wards

1% were OJS wards (youth placed at YRTC)

2% were both

43 YOUNG ADULTS

in the Bridge to Independence Program were parenting and **11** were pregnant in 2018.

Reasons for participation in the Bridge to Independence program (2018)

- Enrolled in secondary school | 134
- Enrolled in post-secondary or vocational education | 96
- Participating in a program designed to promote or remove barriers to employment | 120
- Employed 80+ hours per month | 116
- Incapacitated due to physical or mental health conditions from employment | 16

Note: A young adult may have more than one reason qualifying them for participation in Bridge to Independence.

Bridge to Independence program (2018)

290 young adults participated

136 young adults entered

153 young adults left

- **94** were no longer eligible due to age
- **6** chose to leave the voluntary services program
- **53** left due to lack of cooperation with the voluntary program

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

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 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.

Where are the data?

Arrests

Youth arrests (2018)

Type	Male	Female	Total	% of total
Status offenses	587	418	1,005	11.2%
Runaway	*128*	*97*	*225*	*2.5%*
Curfew	*89*	*39*	*128*	*1.4%*
Alcohol	*370*	*282*	*652*	*7.3%*
Drug-related	911	424	1,335	14.9%
Violent	233	33	266	3.0%
Person	1,196	616	1,812	20.2%
Property	1,725	882	2,607	29.0%
Public order	299	139	438	4.9%
Weapon	98	2	100	1.1%
Other	936	408	1,344	15.0%
DUI	48	33	81	0.9%
Total	**6,033**	**2,955**	**8,988**	

Status offenses

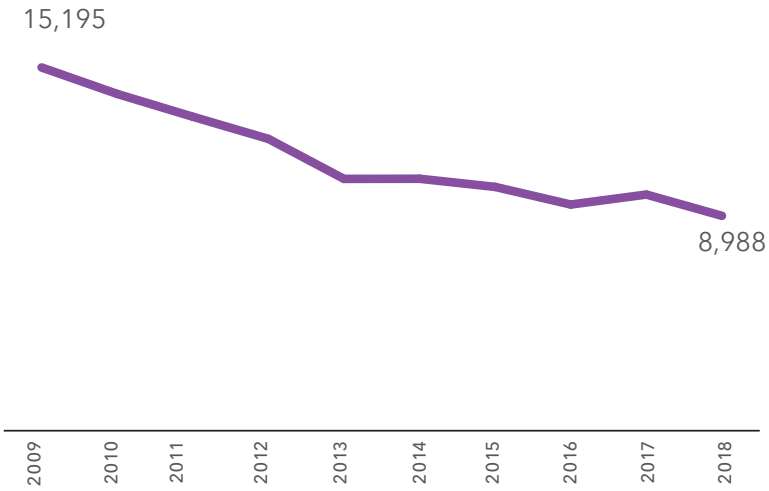
"Status offenses" are non-criminal behaviors, like skipping school, that could not be charged but for the "status" of being a minor.

Source: Nebraska Commission on Law Enforcement and Criminal Justice.

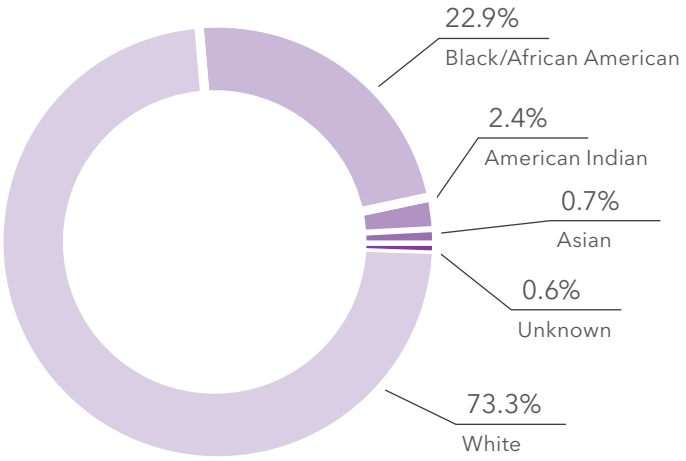
8,988 YOUTHS
WERE ARRESTED IN 2018.

The most common, 29%, were property crimes.

Number of youths arrested (2009-2018)



Youth arrests by race (2018)



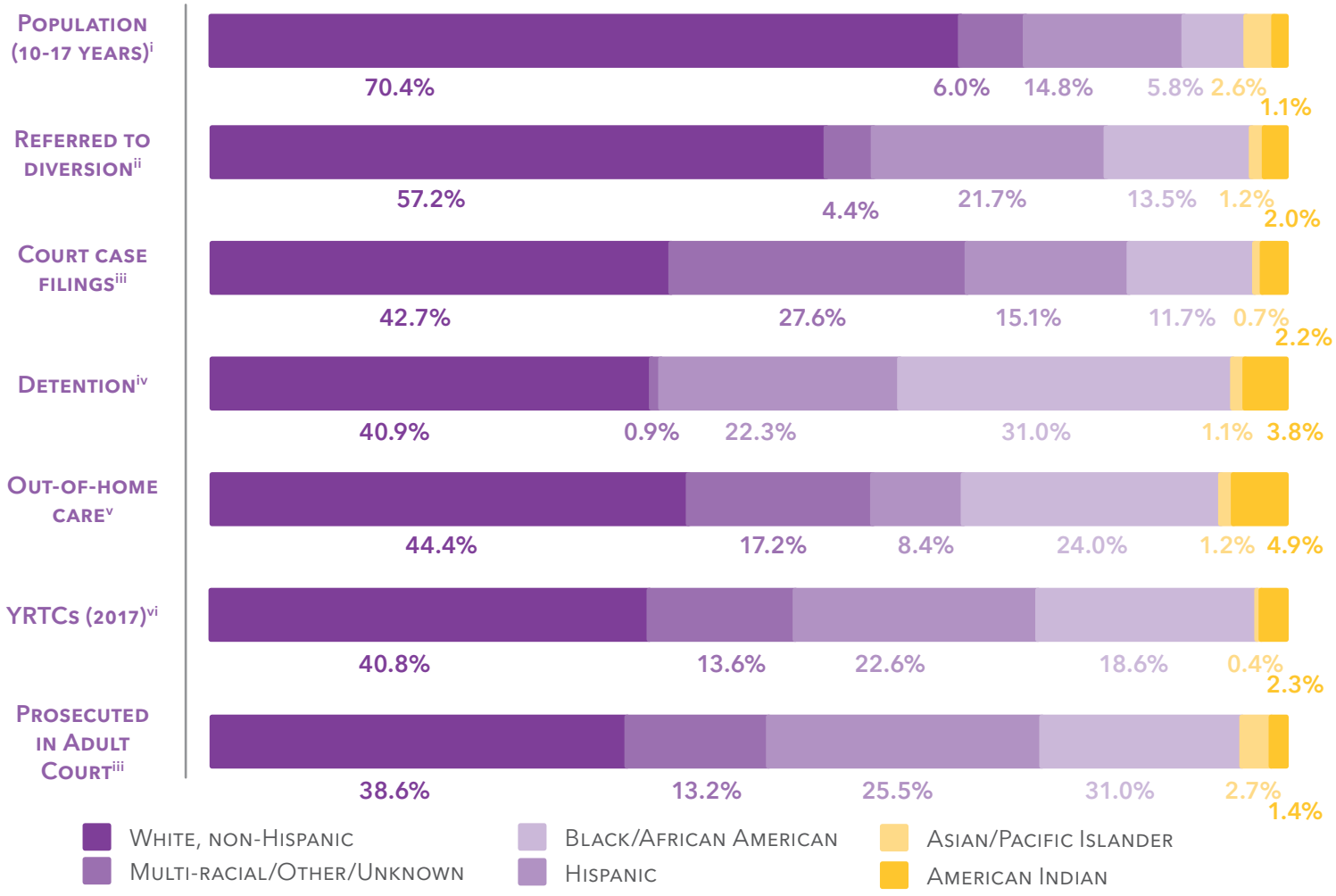
Disproportionate Minority Contact

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.

Youth Interaction with the Justice System by Race/Ethnicity (2018)



i. U.S. Census Bureau, Population Estimates Program, 2018 Estimates, Table PEPASR6H.
ii. Nebraska Commission on Law Enforcement and Criminal Justice.
iii. JUSTICE, Administrative Office of the Courts.
iv. 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.
v. Nebraska Office of Probation Administration.
vi. SFY 2016/17 Annual Reports for Kearney and Geneva Youth Rehabilitation and Treatment Centers.
**Data is input by clerks across the state and may not be well standardized. This may account for the large variance in the "multiracial/other/unknown" category.*
1. "And Justice for Some: Differential Treatment of Youth of Color in the Juvenile Justice System," National Council on Crime and Delinquency, *(January 2007).*

Pre-trial diversion

Juvenile diversion program

Pretrial diversion programs are based on the belief that many juvenile cases are better handled outside 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 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.

3,800
youths were referred to the diversion program.

2,469
youths successfully completed diversion.

77
counties participated in the diversion program.

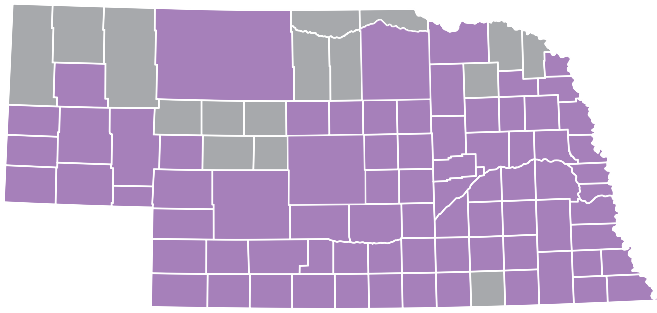
458
of those referred did not participate.

600
youths did not complete diversion successfully and were discharged for failing to comply or for a new law violation.

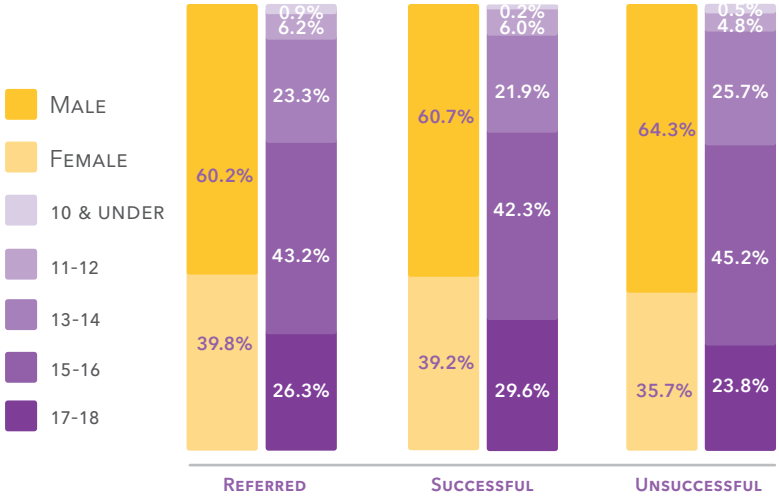
Most common law violations referred to diversion (2018)

Truancy	588
Minor in possession	564
Marijuana-possession	517
Shoplifting	505
Assault	454
Possession/use of Drug paraphernalia	308
Traffic offense	255
Criminal mischief	187
Theft	157
Disturbing the peace	133
Trespassing	129
Disorderly conduct	111
Tobacco use by minor	109
Other	721

Counties offering a juvenile diversion program (2018)



Youth participating in a juvenile diversion program (2018)



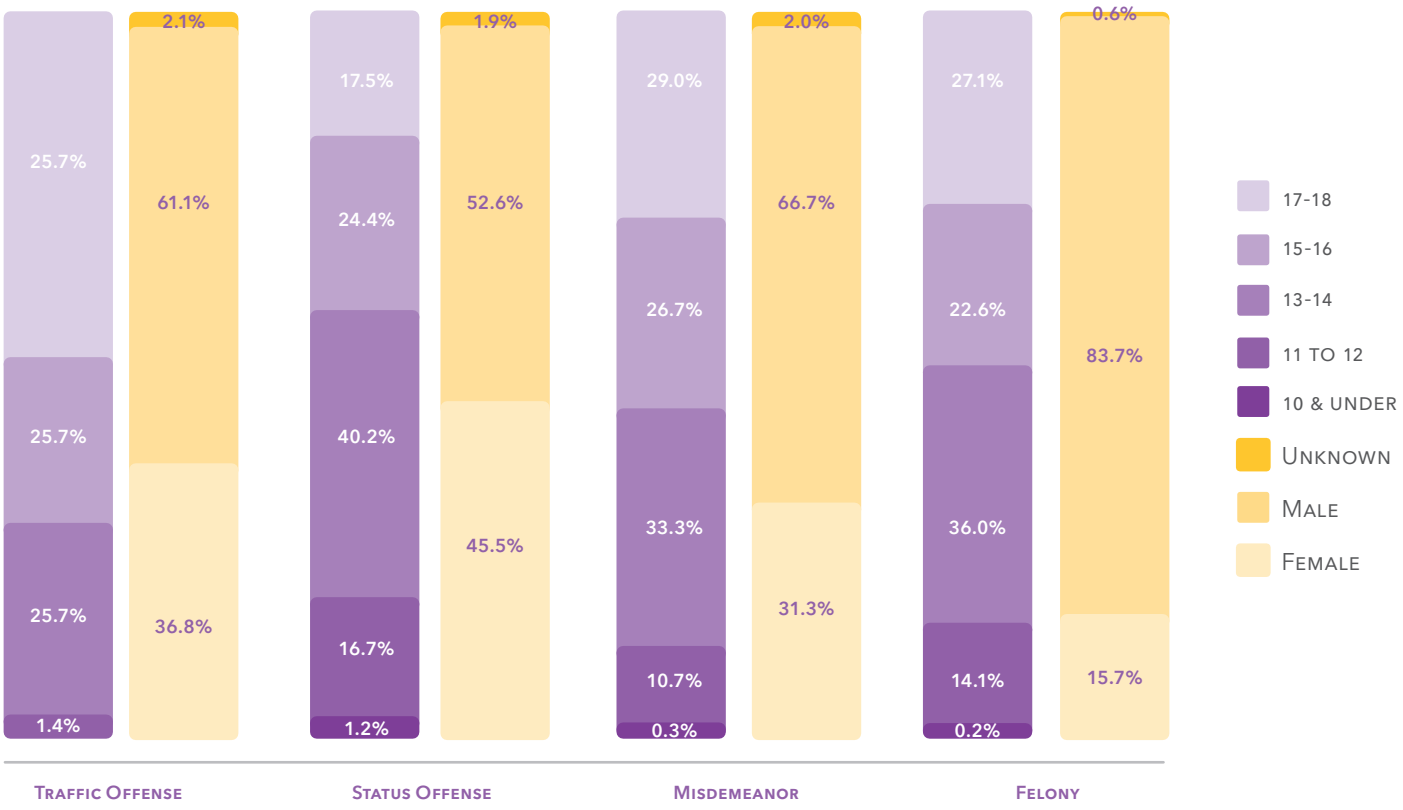
Community-Based Juvenile Services Aid Program (2018)

231 programs in **65 counties** and **1 tribe** were funded through the Community-Based Juvenile Services Aid Program in Fiscal Year 2017/18.

185 Direct Intervention
0 Prevention/Promotion Event
15 Direct Service
31 System Improvement

Juvenile Court Cases

New juvenile court cases by age and gender (2018)



New juvenile court cases by race/ethnicity (2018)

	Traffic Offense		Status Offense		Misdemeanor		Felony	
American Indian	1	0.7%	15	2.2%	63	2.3%	10	2.0%
Asian/Pacific Islander	1	0.7%	8	1.2%	15	0.5%	5	1.0%
Black/African American	3	2.1%	62	9.1%	318	11.6%	92	18.7%
Hispanic	48	33.3%	82	12.0%	435	15.9%	48	9.8%
Other	0	0.0%	5	0.7%	40	1.5%	4	0.8%
Unknown	9	6.3%	272	39.8%	650	23.7%	141	28.7%
White	82	56.9%	240	35.1%	1,223	44.6%	128	26.1%
Total Cases	144	63% *adjudicated as "admit"*	684	65% *adjudicated as "admit"*	2,744	66% *adjudicated as "admit"*	491	70% *adjudicated as "admit"*

Note: In Juvenile Court a case being adjudicated as admit means that it has been accepted to be true.
Source: JUSTICE, Administrative Office of the Courts.

Access to counsel

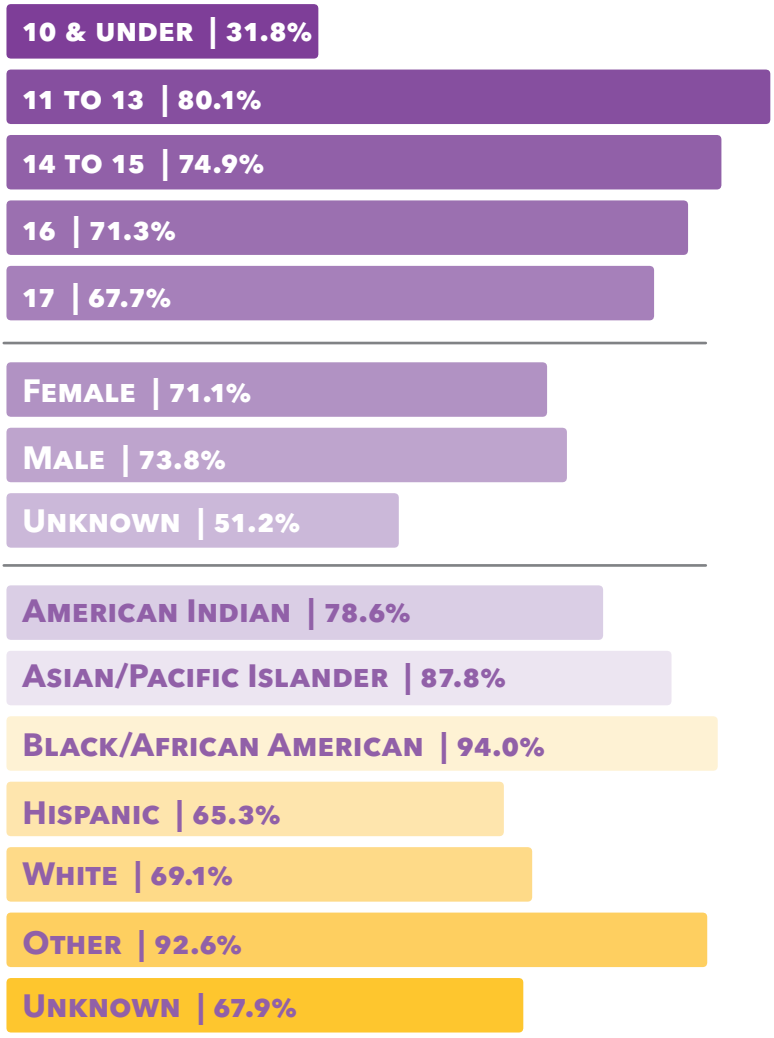
Juvenile access to counsel

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.

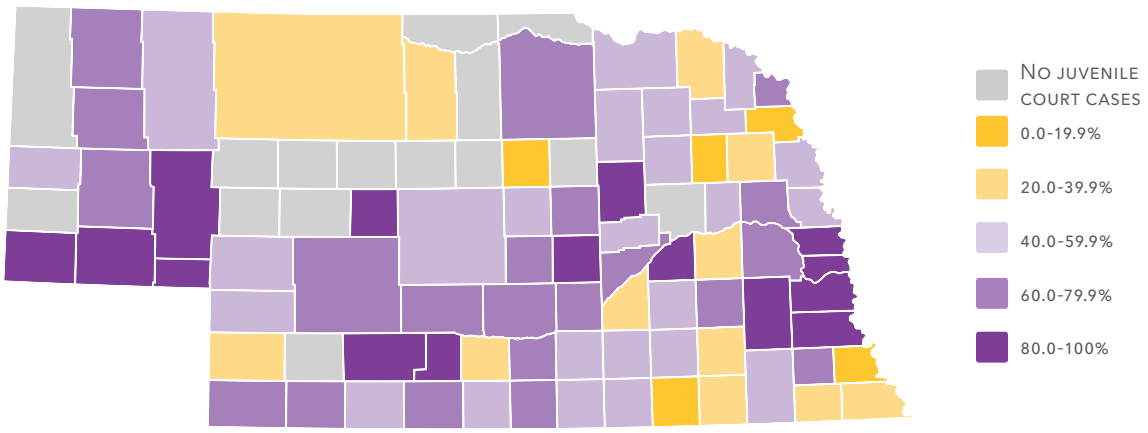
51.5%
OF CHILDREN IN ADULT CRIMINAL COURT HAD AN ATTORNEY IN 2018.

73.5%
OF CHILDREN IN JUVENILE COURT HAD AN ATTORNEY IN 2018.

Youth in juvenile court's access to counsel by age, gender, and race (2018)



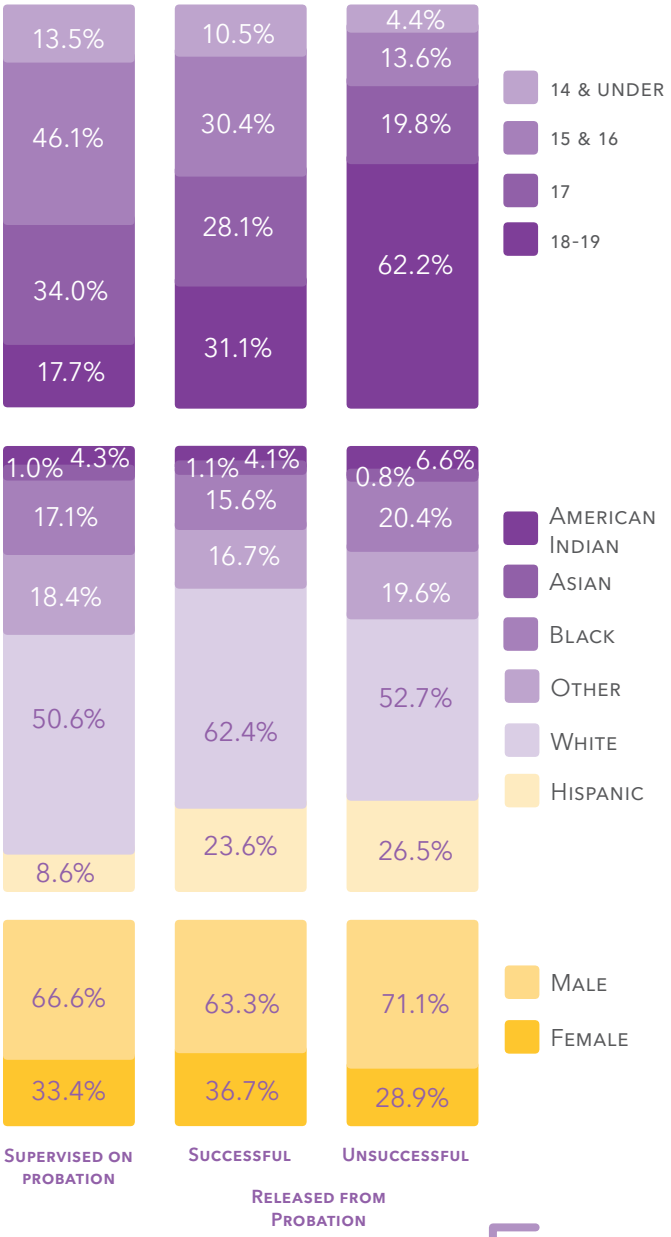
Percent of youth in juvenile court who had access to counsel by county (2018)



Source: JUSTICE, Administrative Office of the Courts.

Probation

Youth supervised on probation by age, gender, & race/ethnicity (2018)



In 2018, **4,892 youth** were supervised on probation:

- **756** had felony offenses
- **3,723** had misdemeanor, infraction, traffic, or city ordinance offenses
- **1,332** had status offenses
- **2,773** were discharged

Average caseload of Juvenile Probation Officers (2018)

	Urban	Rural
High-risk/high-need intervention	**16**	**19**
Low-risk/low-need supervision	**23**	**25**

Cost of services funded by probation (FY 2018/19)

Monthly per youth (MPY)	**$745.12**
MPY - In-home services	**$334.43**
MPY - Out-of-home services	**$1,766.87**

14.9 months
mean length of time on probation in 2018.

14.3 months
mean length of time for status offenses in 2018.

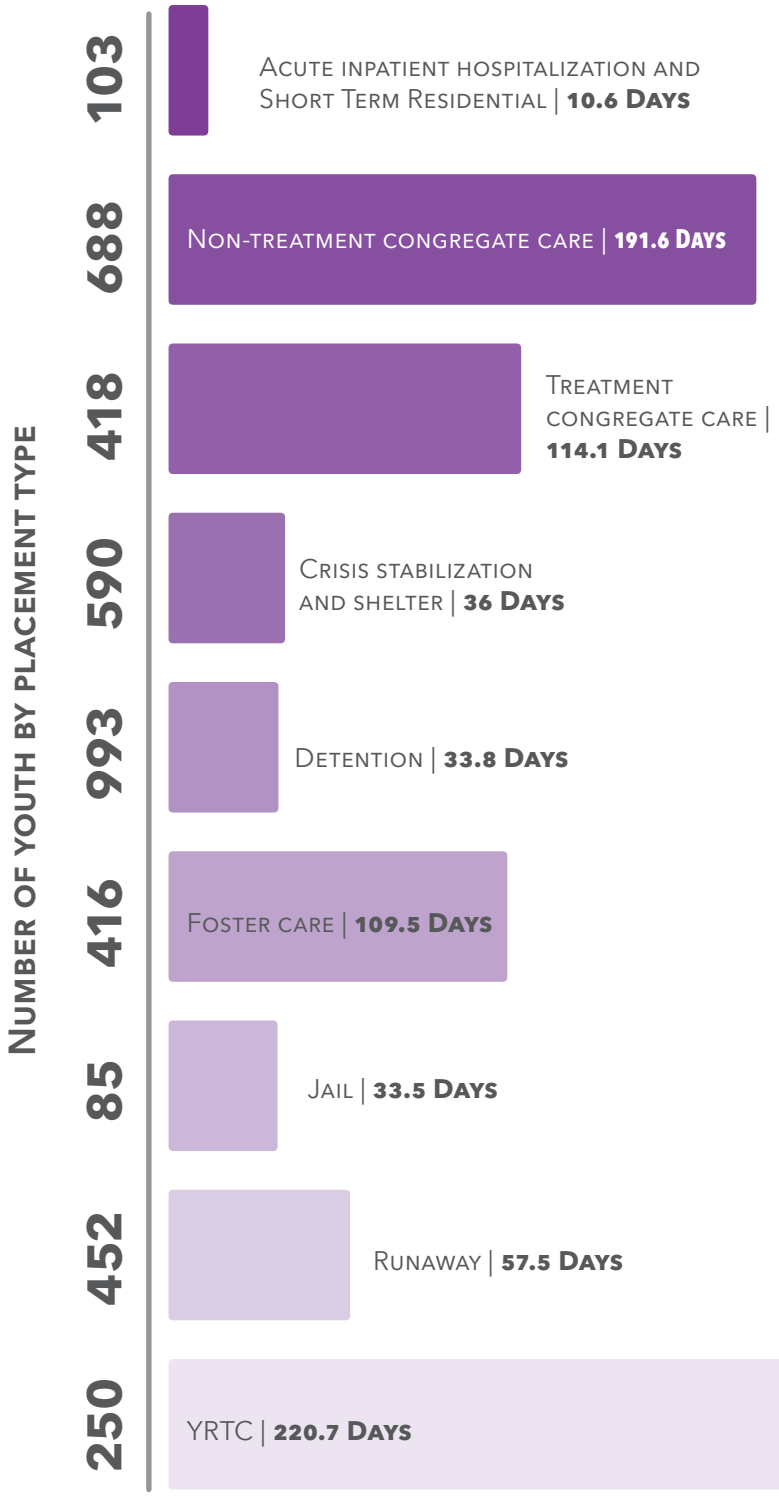
17.5 months
mean length of time for felonies in 2018.

14.7 months
mean length of time for misdemeanors/ infractions in 2018.

Source: Nebraska Office of Probation Administration.

Youth in out-of-home care

Out-of-home care of probation youth by placement type and average length of stay (2018)



2,027

youth supervised on probation were placed in out-of-home care. The mean length of time in out-of-home care was 3 months.

Probationer in out-of-home care	#	%
Total youth	**2,027**	
Male	1,379	68%
Female	648	32%
American Indian	99	5%
Asian	24	1%
Black	486	24%
White, non-Hispanic	899	44%
Other	348	17%
White, Hispanic	171	8%
Felony*	455	19%
Status offense*	476	19%
Misdemeanor/infraction/ traffic/ city ordinance offenses*	1,526	62%

**All offenses are included for analysis. If a youth had an offense in more than one adjudication type they will be counted accordingly in each category.*

Source: Nebraska Office of Probation Administration.

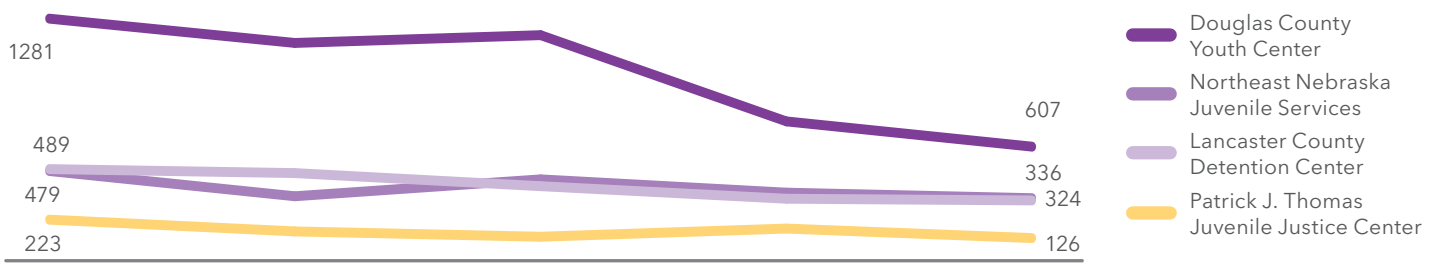
Detention

Youth held in juvenile detention facilities* (2018)

	Lancaster County Detention Center (Lancaster County)		Northeast Nebraska Juvenile Services (Madison County)		Douglas County Youth Center (Douglas County)		Patrick J. Thomas Juvenile Justice Center (Sarpy County)	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Gender								
Female	96	29.6%	115	34.2%	152	25.0%	42	33.3%
Male	228	70.4%	247	73.5%	455	75.0%	84	66.7%
Race/Ethnicity								
American Indian/ Alaska Native	12	3.7%	16	4.8%	19	3.1%	6	4.8%
Asian/Pacific Islander	4	1.2%	2	0.6%	10	1.6%	0	0.0%
Black/African American	94	29.0%	21	6.3%	289	47.6%	28	22.2%
Hispanic	58	17.9%	101	30.1%	123	20.3%	28	22.2%
Other	9	2.8%	0	0.0%	3	0.5%	0	0.0%
White	147	45.4%	196	58.3%	163	26.9%	64	50.8%
Age**								
12 & under	2	0.6%	8	2.4%	13	1.3%	3	2.4%
13-14	32	9.1%	54	16.1%	121	12.4%	18	14.3%
15-16	157	44.9%	168	50.0%	309	31.6%	59	46.8%
17+	159	45.4%	106	31.5%	227	23.2%	46	36.5%
Times Detained***								
1	226	69.8%	294	87.5%	441	72.7%	92	67.6%
2	75	23.1%	30	8.9%	24	4.0%	19	14.0%
3+	23	7.1%	12	3.6%	52	8.6%	13	9.6%

Total count	324	336	607	126
Secure Admissions	446	191	854	–
Staff Secure Admissions	–	145	–	179
Average Days Detained	**47.2 Days**	**24 Days**	**34.7 Days**	**Not available**

Juvenile detention admissions (2014-2018)

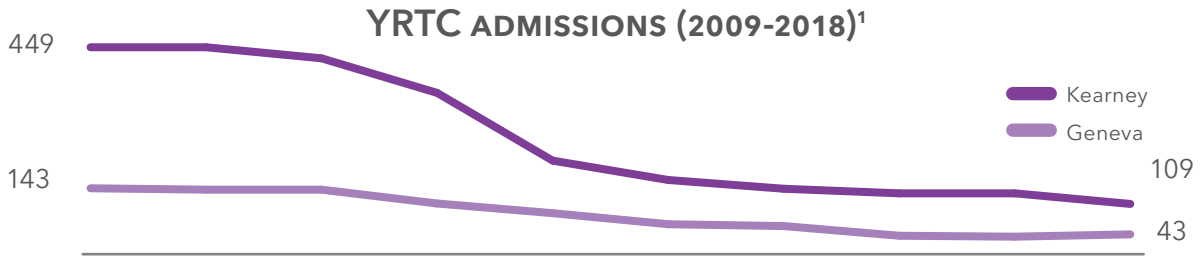


Sources: Individual detention centers.
**Includes secure and staff secure detention.*
*** For Lancaster County Detention Center and Douglas County Youth Center if the same youth is admitted under different ages during the year, they will count under each age group.*

YRTC & ROOM CONFINEMENT

Youth rehabilitation and treatment Centers (YRTCs) SFY 2018/19[1]

Geneva		Kearney
43	**Number admitted for treatment**	109
35	**Average daily population**	87
7.8 months	**Average length of stay**	10 months
16	**Average age at admission**	17
$511.58	**Average per diem cost per youth**	$402.68
33.3%	**% return to facility in 12 months**	19%



Room confinement by reported reason (SFY 2017/18)[2]

	Physical assault/ physical aggression	Behavior Infraction/ Rule Violation	Threat to safety of facility	Verbal aggression/ assault	Protection from another youth	Admin	Self-harm/ Suicide attempt	Destruction of property	Threatening behavior	Escape Risk	Median duration of confinement (hours)
Nebraska Corrections Youth Facility	4	17	8		3						240
YRTC - Kearney	437	271		155		130					20.75
YRTC - Geneva	70			62		358	78				2.25
Douglas County Youth Center	167	55						33	29		57.5
Lancaster County Youth Services Center	29	47		124		46					1.75
Northeast Nebraska Juvenile Services	7			6	14	50					1.5
Patrick J. Thomas Juvenile Justice Center	33			26				6		3	3.25

Research associates room confinement with serious consequences for mental and physical health including: - "Increased risk of self-harm 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."[3] 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 time limited; 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.[2]

1. Office of Juvenile Services Annual Report.
2. Office of Inspector General of Nebraska Child Welfare, Juvenile Room Confinement in Nebraska, 2017-2018 Annual Report.
3.Haney, C. The Psychological Impact of Incarceration on Post-prison Adjustment. Prison to Home: The Effect of Incarceration and Reentry on Children, Families, and Communities, 2001.

Youth Treated as Adults

In 2018, **220 youth** cases were prosecuted in Nebraska adult courts, down from **1,972** in 2013.

Of the **265 youth** cases prosecuted in adult criminal court in 2018, **25%** were traffic cases, **42%** were misdemeanor cases, and **33%** were felony cases.

A motion to transfer from juvenile court to adult court was requested in **88 cases** and granted in **26.**

Adult court had **106** motions to transfer to juvenile court filed, and **116** cases transferred to juvenile court.

**Cases may receive multiple sentencing types, so the total by sentence will add to higher than 220.*
Source: JUSTICE, Administrative Office of the Courts.

Youth Cases Tried in Adult Court (2018)

	Youth cases prosecuted in adult court		Sentenced to probation		Sentenced to jail		Sentenced to prison	
Male	173	78.6%	110	75.9%	50	80.6%	25	92.6%
Female	39	17.7%	30	20.7%	8	12.9%	2	7.4%
Unknown	8	3.6%	5	3.4%	4	6.5%	0	0.0%
11 to 13	2	0.9%	2	1.4%	0	0.0%	0	0.0%
14 to 15	25	11.4%	20	13.8%	3	4.8%	4	14.8%
16	50	22.7%	42	29.0%	5	8.1%	5	18.5%
17	143	65.0%	81	55.9%	54	87.1%	18	66.7%
American Indian	3	1.4%	2	1.4%	1	1.6%	0	0.0%
Asian	6	2.7%	6	4.1%	0	0.0%	0	0.0%
Black/ African American	41	18.6%	12	8.3%	17	27.4%	13	48.1%
Hispanic	56	25.5%	40	27.6%	13	21.0%	7	25.9%
Unknown/ other	29	13.2%	22	15.2%	13	21.0%	0	0.0%
White	85	38.6%	63	43.4%	18	29.0%	7	25.9%
Total*	220		145		62		27	

Youth in Adult Prisons and Jails

54 **males**

5 **females**

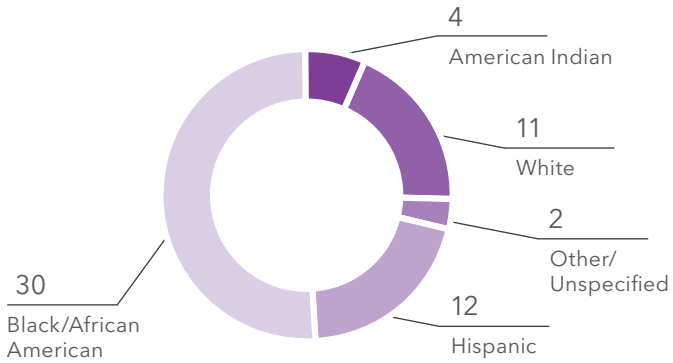
2 **youth** (18 and under) were held in a Nebraska correctional facility for safekeeping reasons or waiting assessment.

57 **youth** were sentenced to a Nebraska prison.

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, 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 Incarcerated in Correctional Facilities by Race/Ethnicity (2018)



Source: Nebraska Department of Correctional Services.

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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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