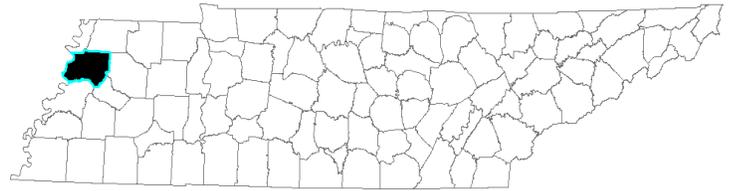
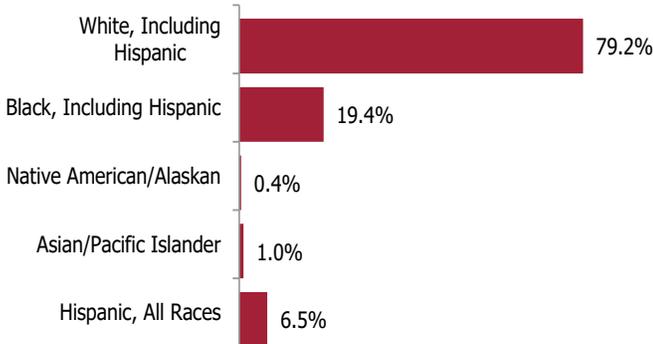


Dyer



TCCY Index Rank 27

Child Population by Race/Ethnicity



HEALTH

- Low birth-weight babies: **11.7%** (Rank: 88)
- Children without health insurance: **3.7%** (Rank: 10)
- Child and teen deaths: **32.1** per 100,000 (Rank: 47)

ECONOMIC WELL-BEING

Rank: 54

- Child Poverty: **25.0%** (Rank: 55)
- Median Household Income: **\$44,549** (Rank: 42)
- Fair Market Rent: **\$910** (Rank: 62)

FAMILY and COMMUNITY

Rank: 43

- School suspension rate: **3.1%** (Rank: 57)
- Teen pregnancy: **13.7** per 1,000 (Rank: 57)
- Substantiated Abuse and Neglect: **4.5** per 1,000 (Rank: 21)

EDUCATION

Rank: 12

- Third to eighth grade reading proficiency: **39.3%** (Rank: 8)
- Third to eighth grade math proficiency: **49.4%** (Rank: 6)
- High school graduation rate: **92.7%** (Rank: 52)

Dyer County

Published 10/2019

Demographics 	Dyer County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Total population (state comparison is number not rate)	37,460	NA	6,715,862	0.6%	41
Population under 18 years of age	8,828	23.6%	22.4%	105.4%	15
Economic Well-Being 	Dyer County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Youth unemployment	140	21.9%	12.0%	182.5%	84
Per capita personal income (state is dollars not rate)	\$39,328	NA	\$45,517	86.4%	25
Children receiving Families First grants (TANF)	383	4.3%	3.2%	136.1%	80
Children receiving SNAP	3,550	40.2%	31.8%	126.5%	66
Children under five receiving WIC	928	40.3%	29.6%	136.0%	54
Education 	Dyer County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
School age special education services	733	11.9%	11.9%	100.0%	20
TEIS participation (per 1,000 in age group)	34	24.85	23.4	106.1%	48
Cohort high school dropouts	13	2.7%	5.5%	48.7%	34
Event high school dropouts	18	0.8%	2.6%	30.2%	23
Economically disadvantaged students	2,559	41.5%	34.7%	119.6%	74
School expulsions (per 1,000 students)	0	0.0	2.0	0.0%	1
Chronic absenteeism	592	10.3%	13.6%	75.7%	29
Health 	Dyer County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Neonatal abstinence syndrome (per 1,000 live births)	1	2.13	13.5	15.8%	13
Births to mothers who smoked during pregnancy	103	22.0%	12.7%	173.2%	57
Children on TennCare (Medicaid)	5,948	58.0%	48.4%	120.0%	65
Total TennCare (Medicaid) enrollees	10,615	28.3%	21.8%	130.0%	83
Births covered by TennCare (Medicaid)	316	67.4%	52.3%	128.9%	62
Children qualified for Medicaid/CHIP but uninsured	224	4.0%	5.5%	72.7%	8
Infant mortality (per 1,000 live births)	7	14.90	7.4	201.4%	86
Neonatal death (per 1,000 live births)	5	10.70	4.6	232.6%	87
Child deaths (per 100,000 children age 1 to 14)	2	29.00	22.4	129.5%	67
Teen violent deaths (per 100,000 children age 15 to 19)	0	0.00	52.5	0.0%	1
Adequate prenatal care	311	66.3%	57.4%	115.5%	26
Children under age six screened for lead poisoning	636	22.9%	17.7%	129.5%	16
Public school students measured as overweight/obese	NA	40.5%	39.2%	103.3%	35
Teens with STDs (per 1,000 children age 15 to 17)	41	27.6	17.3	159.1%	76
Medical doctors by county (per 100,000 residents)	36	96.1	239.2	40.2%	20
Dentists by county (per 100,000 residents)	14	37.4	49.0	76.3%	24
Family & Community 	Dyer County		Tennessee Rate	County Rate as a percentage of State Rate	County Rank
	Number	Rate			
Reported child abuse cases	473	5.4%	4.9%	110.4%	39
Commitment to state custody (per 1,000 children)	23	2.3	3.9	60.3%	10
Remaining in state custody (per 1,000 children)	30	3.1	5.1	60.2%	14
Juvenile court referrals	396	4.5%	4.3%	105.2%	49
Recorded marriages (per 1,000 residents)	213	5.7	8.2	69.5%	75
Recorded divorces (per 1,000 residents)	134	3.6	3.6	100.0%	36
Births to unmarried females	249	53.1%	43.6%	121.8%	83
Regulated child care spaces (state is number not rate)	1,391	NA	307,218	0.5%	38

Dyer County

At 27th, Dyer County is in the top third of Tennessee counties in child well-being. The county's highest rankings come from high percentages of 3rd to 8th grade children rated proficient in reading and in math on TNReady tests. The county's biggest challenges are a high rates of babies born at a low birthweight and of pregnancy among girls age 15 to 17.

Additional strengths include a low rate of children without health insurance and a below average rate of substantiated cases of child abuse and neglect.

Additional opportunities for improvement include a higher percent of students suspended than most counties and the fact that 1 in 4 children in the county live in poverty.

Policy/Practice/Program Options to Improve Outcomes. Many of these policies have multiple models for delivery, including public-private partnership and non-profit leadership.

- Low birthweight is a persistent and difficult problem, but improvements can occur when care is made available for chronic physical and mental health and substance abuse conditions for women of childbearing age as well as improving outreach to those who may qualify to receive SNAP, WIC and/or TennCare benefits to be sure they are aware of these services. Expanding services through Family Resource Centers can help reach these vulnerable populations.
- Comprehensive sex education classes that include both encouragement of abstinence and information on birth control have been shown to reduce the number of teen pregnancies.
- Suspension rates can be reduced through clear definitions of what constitutes suspendable behavior and a focus on restorative discipline practices that aim to improve behavior while keeping children in school.
- Counties can support children who live in poverty by improving outreach to those who may qualify to receive SNAP, WIC and/or TennCare benefits to be sure they are aware of these services. Additionally, nutrition programs that provide food for school-age children to take home can contribute to nutritionally sound diets. Expanding services through Family Resource Centers can also help reach these vulnerable populations.