

2012

Kids Count in Nebraska Report



Acknowledgements

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Cover photos

Cover photographs feature Nebraska children.

Front, top row, from left: James; Elijah, Joshua, and Lane; and Marcus. Middle row: Carlli Jo, Anna, and Jackson. Bottom row: Taya; Elija and Adin; and Wyatt.

Back, top row, from left: Mikal; Izzy and Joie; and Grayson. Middle: Blythe. Bottom: Zina-Marie.

KIDS COUNT is a national and state-by-state effort sponsored by the Annie E. Casey Foundation to track the status of children in the United States by utilizing the best available data in a timely manner.

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 four areas: Health, Education, Safety, and Economic Stability.

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.

Additional special thanks go out to the following for their generous funding of this project:

The Annie E. Casey Foundation
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Alegent Creighton Health
The Kim Foundation

Kids Count in Nebraska reports from 2006 to 2012 are available for download at www.voicesforchildren.com/kidscount.

Additional copies of the *Kids Count in Nebraska 2012 Report*, as well as reports from 1993 through 2011, are available for \$11 from:

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Dear Kids Count data user,

Welcome to the 20th edition of the Kids Count in Nebraska Report! This is a special issue not just because we are celebrating two decades of trustworthy data reporting on Nebraska's children, but also because we're changing things up a bit this year.

One of the most obvious changes you'll see in the 2012 report is that it's far more visually-oriented than in years past. We've condensed the narrative-heavy portions of reports past into shorter bites of information: more bullet points, more charts, and more infographics. These changes are intended to help you, the data user, find the numbers you need quickly and easily.

This year's report also features new data indicators. Early in the production process, teams of child welfare and juvenile justice experts joined us to share their thoughts on how we can best tell the story of child safety. These conversations led to the inclusion of new data indicators and insight into how best to present them. Many of these new data indicators appear in the Commentary on child welfare.

In addition, we have new indicators from the Nebraska Early Childhood Data Coalition. This group has shared with us indicators that shine a brighter light on how young children fare in our state. The indicators are spread throughout the book according to domain – Health, Education, Safety, or Economic Stability. Indicators from the coalition are marked with a star. ★

As always, we welcome feedback on this year's *Kids Count in Nebraska Report*. The book exists to help you – whether you are a policymaker, legislative staff member, administrator, child advocate, grant writer, interested member of the public, or anyone else who aspires to help Nebraska's children lead the happy, healthy lives they deserve.

Finally, our heartfelt thanks go out to all of the many experts who lent their data prowess to the production of this book.

Thank you for reading.

Kind regards,



Melissa Breazile
Research Coordinator, Voices for Children in Nebraska

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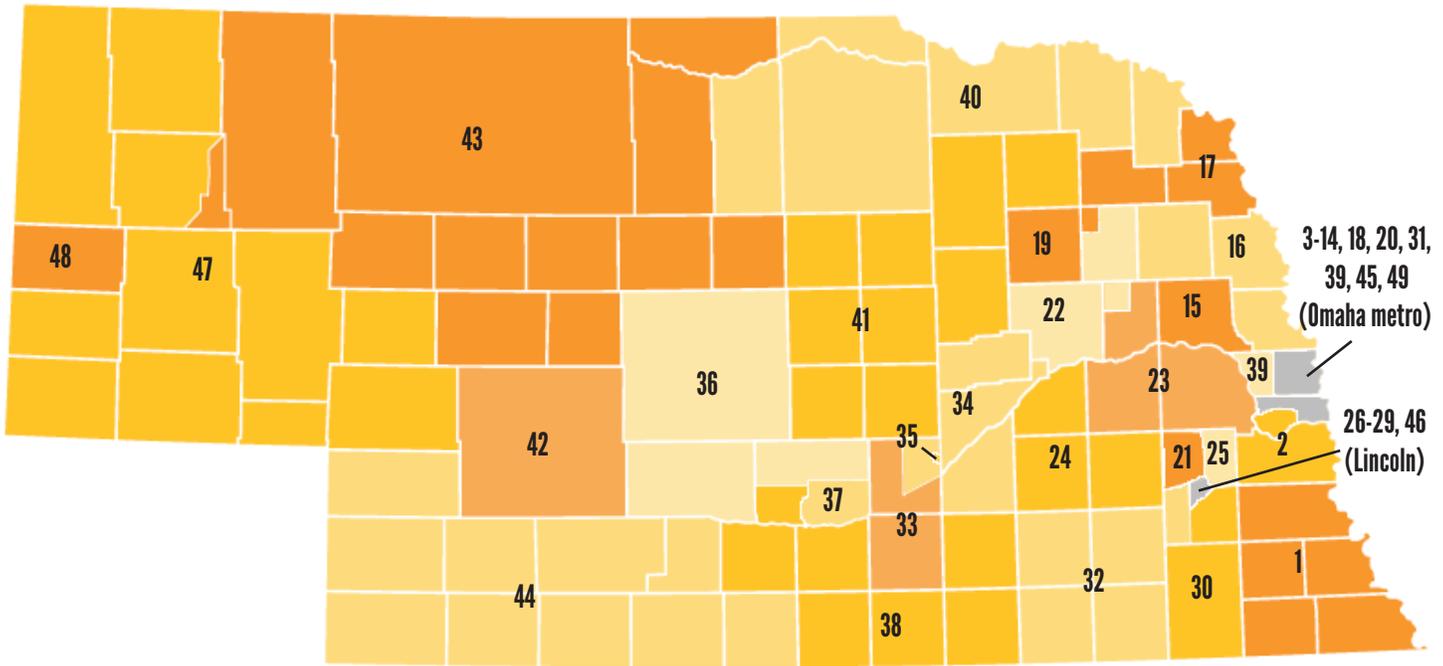
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Contacting elected officials

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

2013 Nebraska Legislature				
Senator	District	City	Office Phone*	Email
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Know your issues, share your data

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

For details on priority bills from Voices for Children, visit <http://voicesforchildren.com>. From the homepage, click on Legislative, and then State or Federal.

To stay current on children's legislative issues, sign up for free E-Updates and advoKID Alerts. Updates are sent in a timely manner to help you respond to the issues affecting children in the Unicameral and in Congress. To sign up for updates, visit <http://voicesforchildren.com/advokid>.

To use the KIDS COUNT Data Center, visit <http://datacenter.kidscount.org/NE>.

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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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Spotlight on Nebraska's child welfare system

We all want children to grow up protected and loved. Childhood is a period of tremendous growth and change. Children's experiences during these years have a lasting impact on both their physical and mental health, as well as their behaviors, relationships, and even academic success.¹ Children have their best chance to be healthy and happy, and to develop into adults who contribute positively to our society, when they are safe from abuse and neglect and grow up in permanent, loving homes.

Unfortunately, many children in our state do not have that chance. Every day in Nebraska during 2011, one child was a victim of sexual abuse, two children experienced physical or emotional abuse, and over 14 children did not have their basic needs like food and shelter met.² Every day, almost eight Nebraska children were removed from their homes and families and entered our foster care system.³

Nebraska's child welfare system is tasked both with strengthening families to prevent abuse and neglect whenever possible and with taking swift, thoughtful action when children's safety is compromised to ensure they grow up in safe, stable, loving and permanent homes. This is no easy job and child welfare systems across the country are falling short. Nebraska's child welfare system, however, has struggled more than most:

- Nebraska removes children from their homes at a rate almost twice the national average;⁴
- Over the past decade the number of children experiencing abuse and neglect has risen;⁵ and
- Many children in out-of-home care struggle to find a permanent home, moving from place to place and aging out of our child welfare system.

While this may seem daunting, when we look at data and research on the challenges facing our children, families, and child welfare system, we know progress is possible. We can help keep children safe by focusing on prevention and services to families living in poverty. We can ensure that children and families get services in ways that minimize instability and trauma in their lives. We can take action to make sure children have loving, permanent homes and lifelong, supportive relationships. With the continued commitment of Nebraskans, we can build on what's working and fix what isn't in our child welfare system so that all our children grow up safe and loved.

1 Hagele, Dana M. MD, MPH. "The impact of maltreatment on the developing child." North Carolina Medical Journal: Volume 66, No. 5. <http://www.ncmedicaljournal.com/wp-content/uploads/2010/11/Hagele.pdf>.

2 Data provided by NDHHS showed 6,375 substantiated cases of abuse and neglect in 2011 – 5,262 were neglect, 401 were sexual abuse, 635 were physical abuse, and 77 were emotional abuse.

3 Data provided by NDHHS showed 2,501 children were removed from their homes as part of a court-involved case. 291 were removed from their homes as part of a voluntary case.

4 The U.S. Rate of Entry into Foster Care during 2011 was 3.4 children in every 1000. Nebraska's rate between April 2011 and March 2012 was 5.6 children in every 1000. AFCARS. <http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport19.pdf>.

5 Data from Kids Count in Nebraska reports 2001-2012.

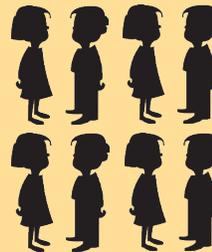
Every day in Nebraska:



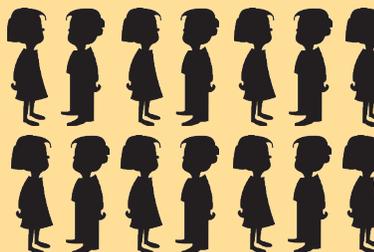
1 child
is a victim of sexual abuse,



2 children
experience physical or emotional
abuse,

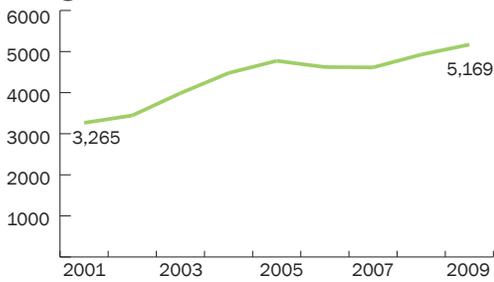


8 children
are removed from their homes and
families and enter our foster care
system, and



14 children
do not have their basic needs like food
and shelter met.

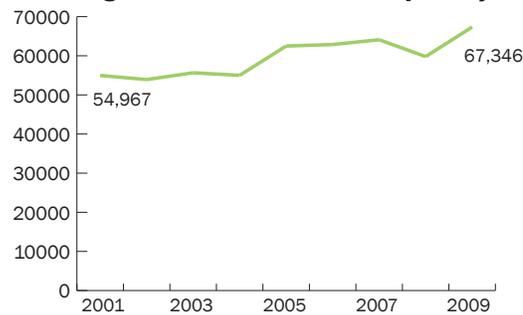
Fig. 1. Maltreatment victims (2001-2009)*



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

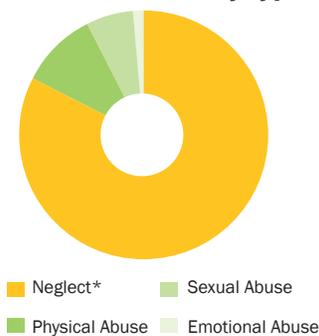
*Data presented are three-year averages.

Fig. 2. Nebraska children in poverty



Source: U.S. Census Bureau.

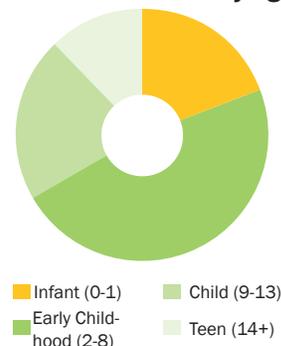
Fig. 3. Child maltreatment by type (2011)



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

* Includes physical, emotional and medical neglect

Fig. 4. Child maltreatment by age (2011)



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

Keeping Nebraska's children safe

Exposure to childhood abuse and neglect hinders children's healthy social, emotional, and cognitive development. Experiencing prolonged abuse, neglect, or other household stressors, including substance abuse or domestic violence, exposes children to toxic stress, which can actually alter the way their brains develop. If untreated, toxic stress makes it more likely that children will adopt risky behaviors which negatively impact their future health and success. A study by the Centers for Disease Control and Prevention has linked traumatic childhood events to an increased risk of physical and mental health challenges including alcoholism and addiction, depression, adolescent pregnancy, and more.¹

Child maltreatment (abuse and neglect) is a growing challenge across Nebraska. Contrary to a national decline in child maltreatment, the number of victims of child maltreatment in Nebraska has increased by over 70 percent (see Figure 1).² This problem is not isolated to any particular region of our state; impacting both urban and rural communities alike (see Figure 5 on page 3).

With 1 in every 100 Nebraska children currently experiencing abuse or neglect each year, we have a rate of maltreatment slightly higher than the national average.³ Since these numbers are based only on reports called in and accepted by Nebraska's child abuse and neglect hotline, the numbers of actual child victims are likely even higher.

What has caused this increase in the maltreatment of Nebraska children? While child maltreatment can occur in any family, there are a number of factors that place children at elevated risk. When families and communities experience poverty, financial stress, and unemployment the children in their care are at greater risk, especially of neglect. Families in poverty have more difficulty meeting their children's basic needs for food, shelter, and other kinds of care. They also experience greater stress which can easily combine with other family challenges and lead to maltreatment of all sorts.⁴

When we compare the increase in Nebraska's child maltreatment over time (Figure 1) with the number of children in poverty over the same time period (Figure 2), the parallels are striking. Child poverty, like child maltreatment, is at its highest point in a decade in Nebraska. Similarly, there was a stabilization in both child maltreatment and child poverty in 2006 and 2007, before the recession caused a large increase in poverty rates. With more families struggling to provide for their children and experiencing the

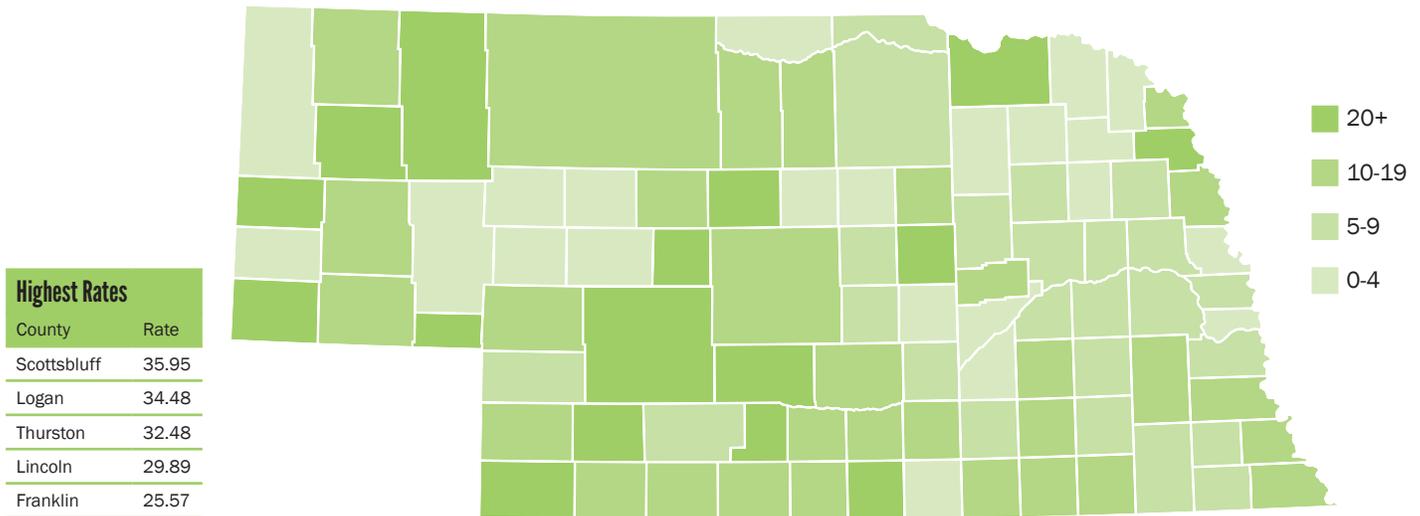
1. "Adverse Childhood Experience (ACE) Study." Centers for Disease Control and Prevention. <http://www.cdc.gov/ace/findings.htm>.

2. Data from Kids Count in Nebraska reports 2001-2012. In 2000, Nebraska showed 3,074 victims of abuse & neglect. In 2011, there were 5,239.

3. National rates of child maltreatment were 9.1 per thousand. "Child Maltreatment: 2010." Children's Bureau. <http://www.acf.hhs.gov/programs/cb/resource/child-maltreatment-2010>.

4. Goldman, J., Salus, M. K., Wolcott, D., Kennedy, K. Y. A Coordinated Response to Child Abuse and Neglect: The Foundation for Practice. Children's Bureau: 2003. <http://www.childwelfare.gov/pubs/usermanuals/foundation/foundation.cfm>.

Fig. 5. Rate of children at risk of maltreatment (2011)



Source: Rate per 1,000 calculated using unsafe and undetermined assessments from DHHS Safety Assessments (2011) & 2011 American Community Survey Population Estimate, Children Under 19.

stress of job loss and financial uncertainty, child maltreatment is more likely to occur.

Effectively preventing and responding to child maltreatment, requires that we understand the differences between different types of maltreatment. Across the United States, child neglect is the most common form of maltreatment, making up 76 percent of all cases in 2009.⁶ In Nebraska neglect is even more prevalent, making up 82.5 percent of all cases (see Figure 3 on page 2).

Neglect is defined as a failure to provide children with their basic needs, such as food, shelter, and clothing. More than other types of maltreatment, neglect is related to poverty.⁷ Families in poverty often cannot provide for children’s basic needs and the stress of living in poverty makes in all other aspects of parenting more challenging.

Another factor in Nebraska’s high rate of neglect is substance abuse among parents and caretakers. Substance abuse is correlated with all types of maltreatment, but especially neglect. A recent review of a sample of Nebraska court-involved child welfare cases showed that 56 percent identified substance abuse as a factor.⁸

In order to effectively address maltreatment, we also need to understand more about the child victims. Nearly 20 percent of maltreated children in Nebraska are infants. When combined with other children in early childhood (through age 8), these children make up a full two-thirds of those who experienced abuse or neglect (see Figure 4 on page 2). Young children in Nebraska are more likely than their older peers to experience neglect, but less likely to be physically, emotionally, or sexually abused.⁹

Nationally, young children are slightly more likely to experience maltreatment, in large part due to their need for constant care.¹⁰ While families in Nebraska usually want to fulfill their children’s needs, data suggest they often lack the resources and knowledge to do so adequately. The number of young children who are maltreated is particularly concerning for our state and nation because, while every moment of childhood is an important developmental

6. National Kids Count Data Center. Data provided by NCANDS. <http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?ind=6222>.

7. Kaplan, Caren, Patricia Schene, Diane DePanfilis, and Debra Gilmore. “Introduction: Shining a Light on Chronic Neglect.” American Humane Association: <http://www.americanhumane.org/assets/pdfs/children/pc-pc-shining-lightpdf.pdf>.

8. Nebraska’s Response to Substance Abusing Parents. Nebraska Court Improvement Project. 2011. <http://www.throughtheeyes.org/files/SA%20Report%20Final.pdf>.

9. 90% of maltreatment cases involving infants were neglect. 86% of maltreatment cases involving those in early childhood (2-8) were neglect. Overall averages for Nebraska in 2011 were 82.5%. Data provided by NDHHS.

10. Goldman, Salus, Wolcott, Kennedy. A Coordinated Response to Child Abuse and Neglect.

opportunity, infancy and early childhood are particularly crucial. During the first few years of life, the brain grows by leaps and bounds, adding new cells and forming new connections that govern children's ability to move, speak, learn, and interact positively with those around them.¹¹ Connection builds on connection as the brain grows, and these early experiences play an important role in children's ability to succeed in school, which in turn impacts their whole future.¹²

In Nebraska, we pride ourselves on respecting and supporting families. Unfortunately, data paint a clear picture of Nebraska's children, especially young children, increasingly placed in jeopardy because their families are unable to meet their basic needs. We must take action to strengthen families so we can prevent maltreatment whenever possible.

Recommendations

1. Supports for families in poverty: An increasing number of Nebraska children and families are living in poverty. Poverty adds to the daily stressors all parents face and makes the job of caring for children more challenging.¹³ Nebraska needs to look at the access to and adequacy of both its government and community programs that support struggling families. Nebraska's eligibility for a number of public benefit programs is extremely low and assessing how these programs can be more available and effective will have a positive impact on children's safety. At the same time, strengthening and partnering with community services can help families in poverty ensure their needs are met flexibly.

2. Home visitation programs: Home Visiting programs, which provide services to families with young children from birth through age five, have been proven to substantially improve parent-child relationships and decrease the incidence of child maltreatment.¹⁴ Social workers, nurses, or other trained professionals teach at-risk families skills and provide them with access to needed services, effectively reducing child maltreatment, and increasing family functioning and self-sufficiency. High quality home visiting programs have been shown to produce up to \$5.70 in savings for every taxpayer dollar spent.¹⁵ These savings come from the reduced need for child welfare services, public benefit programs, and involvement in the juvenile and criminal justice system. Nebraska currently receives over \$2.5 million from the federal government to implement the Maternal, Infant and Early Childhood Home Visiting Program, which operates in the Panhandle, and will soon expand to Lincoln County.¹⁶ Legislators took action last year to increase the state general fund dollars available to contribute to these programs. \$850,000 is now available to help fund programs in Lancaster and Douglas County. Even with this funding, however, Nebraska is still spending less than the national average per child on these programs, which continue to reach only a small number of at-risk children and families.¹⁷ With increased funding, better targeting of programs, and the development of programs in areas where high rates of children are at risk, Nebraska can better support families and effectively reduce child maltreatment.

3. Access to mental health and substance abuse services for parents: Parents with mental health or substance abuse challenges, many of whom suffered maltreatment themselves as children, struggle to care adequately for their children.¹⁸ Providing parents and parents-to-be with access to affordable and sufficient treatment will better equip them to keep their children safe and nurtured. Nebraska's relatively high rate of court-involved families who have struggles with substance-abuse (and often co-occurring mental health challenges), indicates parents are not getting the treatment they need soon enough. Even for the cases where the level of substance abuse merits court involvement, parents faced long delays and somewhat low-levels of treatment services.¹⁹ Strengthening services to parents and adequately funding Nebraska's Behavioral Health Regions has an important role to play in preventing child maltreatment.

11. "Understanding the Impact of Maltreatment on Brain Development." *Child Welfare Information Gateway*: November 2009. http://www.childwelfare.gov/pubs/issue_briefs/brain_development/brain_development.pdf.

12. *Early Warning! Why Reading by the End of Third Grade Matters*. Annie E. Casey Foundation.

13. "Preventing Child Neglect." *Prevent Child Abuse America*. http://www.preventchildabuse.org/advocacy/downloads/child_neglect.pdf.

14. Daro, Deborah. "Child Maltreatment Prevention: Past, Present, Future." *Child Welfare Information Gateway*: July 2011. http://www.childwelfare.gov/pubs/issue_briefs/cm_prevention.pdf.

15. "The Case for Home Visiting." *The Pew Center on the States*: May 2010. http://www.pewcenteronthestates.org/initiatives_detail.aspx?initiativeID=52756.

16. "Home Visiting Grants and Grantees." *USDHHS*. <http://mchb.hrsa.gov/programs/homevisiting/grants.html>.

17. *Ibid.*

18. "Preventing Child Neglect."

19. *Nebraska's Response to Substance Abusing Parents*. Nebraska Court Improvement Project.

Responding thoughtfully to abuse and neglect

Preventing child maltreatment is not our child welfare system’s only job. We also need to ensure that Nebraska is responding thoughtfully when abuse and neglect occur, so that children have their need for a permanent, loving, and safe home met as quickly as possible. While every child and family is different, what we know about children’s development and needs should shape the choices our system makes in serving children and their families.

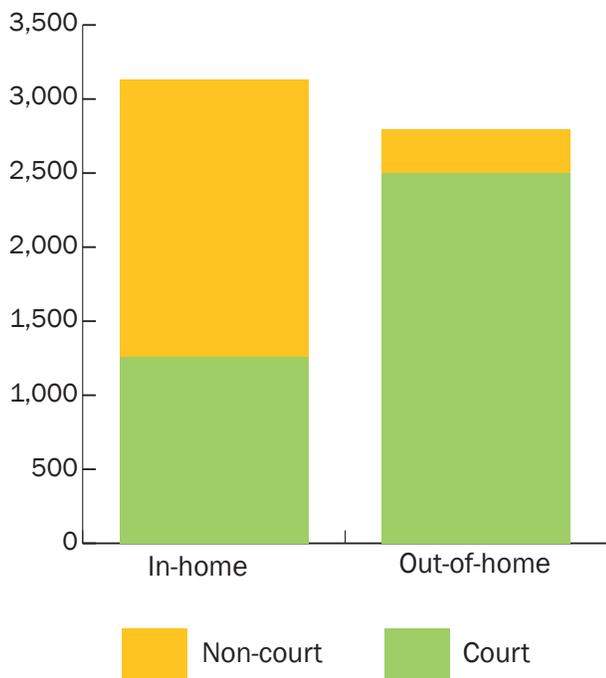
Nebraska can choose to serve children and families who have experienced abuse and neglect on a voluntary basis or make them a ward of the state through our juvenile court system. We can choose to serve children in their homes or remove them to an out-of-home placement. We can choose to place children in family-like settings or congregate care (group homes, shelters, and treatment facilities). We can choose whether or not to place children with family members, kin, and siblings. All of these choices have a huge impact on children’s well-being.

In 2011, the majority of children entered the child welfare system through the court system. A narrow majority of children (53 percent) also entered the child welfare system without being separated from their families. Two-thirds of children who are made state wards were served in out-of-home care while over 86 percent of children served on a voluntary basis (non-court) received in-home services (see Figure 6).

Despite the growing numbers of Nebraska children receiving in-home services to ensure their safety, permanency, and well-being, our state continues to remove children at rates about twice the national average.²⁰ Between April 2011 and March 2012, almost 6 in every thousand children were removed from their homes. Many counties across Nebraska experienced even higher rates of removal in the same time period. In Thurston County, almost 40 in every thousand children were removed from their homes. (see Figure 8).²¹

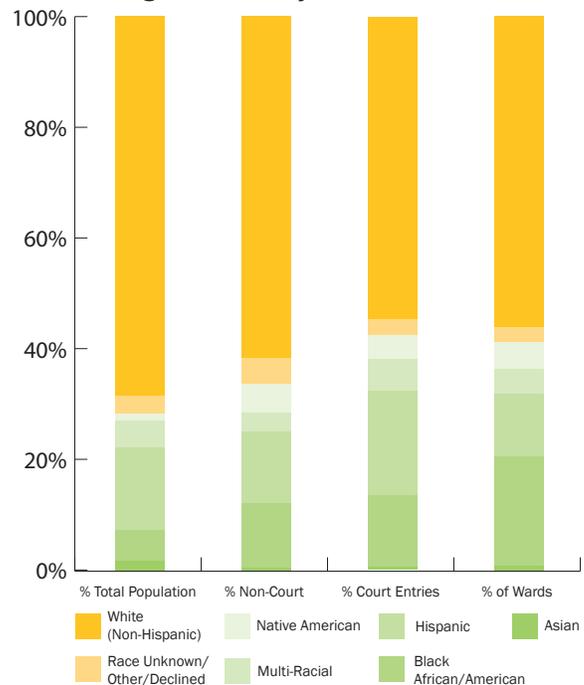
When we look more closely at our child welfare data, racial and ethnic disparities emerge. For example, while black children only accounted for 5.5 percent of our child population in 2011, they made up 12 percent of voluntary

Fig. 6. Entries by court involvement (2011)



Source: Nebraska Department of Health and Human Services (DHHS), 2011 Initial Entries Into Care.

Fig. 7. Entries by race (2011)

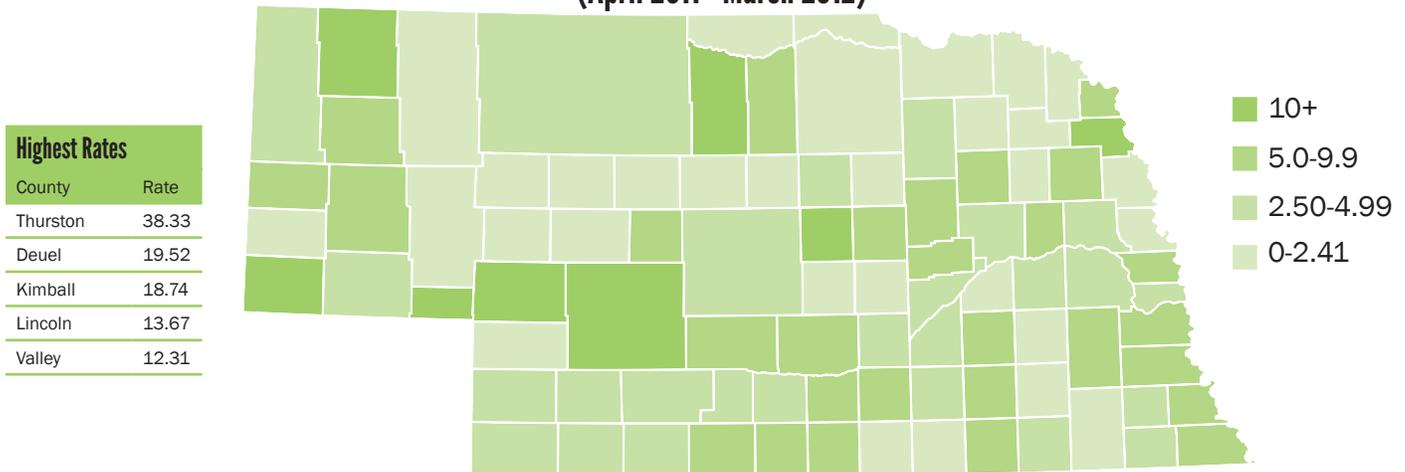


Source: Nebraska Department of Health and Human Services (DHHS), 2011 Initial Entries Into Care, Number of Wards Dec. 31, 2011 and U.S. Census Bureau.

20. The U.S. Rate of Entry into Foster Care during 2011 was 3.4 children in every 1000. Nebraska’s rate between April 2011 and March 2012 was 5.6 children in every 1000. AFCARS. <http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport19.pdf>.

21. “Removals.” Nebraska Fostering Court Improvement. http://fosteringcourtimprovement.org/ne/County/removals_summary.html.

**Fig. 8. Rate of children removed to foster care
(April 2011 - March 2012)**



Source: *Fostering Court Improvement. Nebraska removals into care.*
Note: Rate per 1,000 children

entries, 13 percent of court-involved entries, and about 20 percent of Nebraska’s state wards. Black, Latino, and Native American children were much more likely than their white and Asian peers to enter the child welfare system regardless of the type of service received. Fewer black and Latino children were served on a voluntary basis. Black and Native American children were much more likely than peers to be state wards during 2011 (see Figure 7 on page 5).

Differences also emerge when we look at the age of children involved in the child welfare system. The two age groups that make up the majority of entries into our child welfare system are teenagers and young children through the age of 8 (see Figure 9, page 7). In 2011, young children through age 8 made up almost two-thirds of maltreatment victims in Nebraska, so it is not surprising that they would also be the single largest group to enter the child welfare system. Young children are the most likely to receive services without the involvement of the court, most frequently in-home placements.

Teenagers made up the smallest percentage of maltreatment victims in Nebraska in 2011. Nonetheless, they made up almost a third of entries into the child welfare system and nearly half of those who were made state wards. Nebraska’s child welfare system also serves youth who are involved in our juvenile justice system and made wards of the state due to their own behaviors. Juvenile delinquency has been widely correlated with experiencing abuse or neglect during childhood.²² The high number of teenagers in our child welfare system speaks to our failure as a state to address family challenges and provide them with safety and key developmental experiences early on. It also speaks to the difficulty families and children have in accessing behavioral and mental health services before they become serious enough to warrant court-involvement. This trend is also concerning because teenagers who enter our system are more likely to be removed from their homes, and have a shorter period of time to find permanent, loving connections that help guarantee later success.

A look at how Nebraska’s children receive services reveals some important areas for improvement. While court involvement provides important oversight for children and families in our child welfare system, it is often a confusing place for children, is more intrusive than providing voluntary services, and can make family engagement more challenging. Approximately two-thirds of Nebraska children enter the child welfare system with court involvement. Nebraska should review whether all these cases need court involvement and whether children and families would not be better served with robust, voluntary services, especially when it comes to children and families of color who are denied these in-home opportunities more frequently (see Figure 7).

Nebraska’s overreliance on out-of-home care contributes to the high number of child welfare cases involved with the court system. Nebraska continues to remove children at twice the national average despite the prevalence of neglect in our state. High rates of neglect seem to indicate that most families might benefit from in-home services that focus on building a better capacity to meet their children’s needs (see Figure 3, page 2). Out-of-home care disrupts

22. “Long term Consequences of Childhood Abuse and Neglect.” *Child Welfare Information Gateway*. http://www.childwelfare.gov/pubs/factsheets/long_term_consequences.cfm.

children’s routines and relationships – it causes trauma in its own right.²³ Keeping children and families safe and together whenever possible is ideal.

Out-of-home care will always be necessary in some cases. While Nebraska should re-examine whether this intervention is being properly used in our state, we also have work to do to maintain stability in children’s lives and their connections with people they love and trust when they are removed.

Nebraska’s data show that there is much room for improvement in maintaining family connections for children removed from their home (see Figures 10 and 11). Only a little over a quarter of Nebraska’s children are living with kin, despite the fact that nearly 70 percent of children were placed in a foster care setting. Nearly a quarter of Nebraska’s children in out-of-home care do not live with their siblings who have also been removed from their homes.

These family connections are crucial for children’s well-being. Studies have shown that children placed in the homes of relatives or close family friends experience more stability, report that they feel more loved and less stigmatized when living with family, and have fewer mental and behavioral health challenges.^{24,25,26} Placing children with their siblings is equally important to reducing the trauma of out-of-home care, minimizing their sense of loss and giving them a sense of support and stability.²⁷

Nebraska must also assess its use of congregate care. In 2011, 27 percent of Nebraska’s children in out-of-home care lived in congregate care settings, institutions ranging from shelters and group homes to detention. Studies have shown that it is much more challenging for children to have normal experiences, receive quality services, and find a loving, stable home when placed in congregate care.²⁸ While some youth need to be placed in these settings, congregate care often fails to put children on a path towards permanency and future success and its use should be limited.

We can improve our child welfare system by ensuring that the right choices are made about how we serve children and families. Nebraska continues to heavily rely on services that can negatively impact children. While interventions like out-of-home care will always be necessary for some children, we should minimize its use and reduce its trauma. We can better respond to child maltreatment in Nebraska by implementing best practices and building on positive trends:

23. Walker, Janet S. and Weaver, Aaron. “Traumatic Stress/Child Welfare.” Research and Training Center on Family Support and Children’s Mental Health: Winter 2007. <http://www.rtc.pdx.edu/PDF/fpW07.pdf>.

24. Stepping Up for Kids: What the government and communities can do to support kinship families. Annie E. Casey Foundation: May 2012.

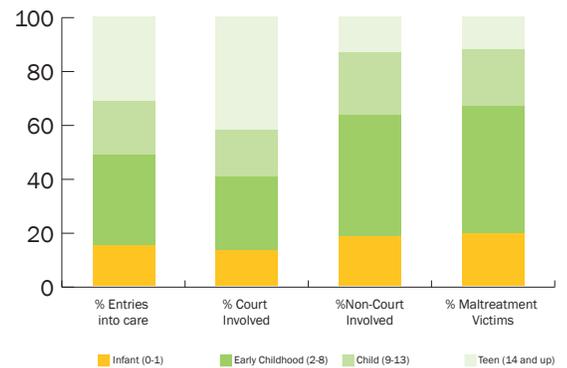
25. “Kinship Care Research and Literature: Lessons Learned and Directions for Future Research”. James Gleeson. Kinship Reporter. (2007)

26. “Propensity Score Matching of Children in Kinship and Nonkinship Foster Care: Do Permanency Outcomes Still Differ?” Dr. Eun Koh. Social Work Research. (2008)

27. North American Council on Adoptable Children (NACAC), “NACAC Position Statements: Sibling in Foster Care and Adoption,” December 1, 2007, <http://www.nacac.org/policy/positions.html#siblings>

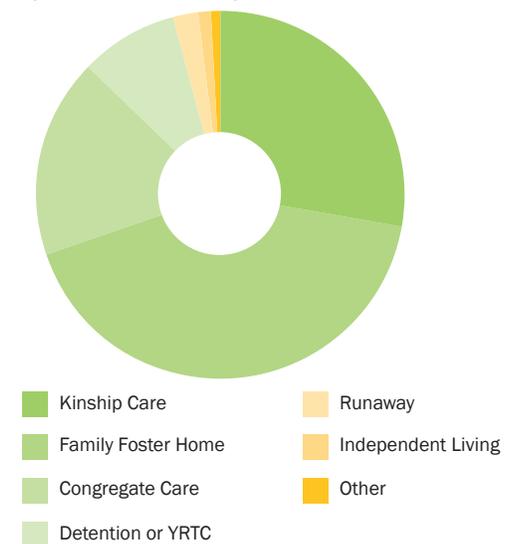
28. Freundlich, Madelyn. “Time Running Out: Teens in Foster Care.” Children’s Rights: 2003. http://www.childrensrights.org/wp-content/uploads/2008/06/time_running_out_teens_in_foster_care_nov_2003.pdf.

Fig. 9. Child welfare system involvement by age (2011)



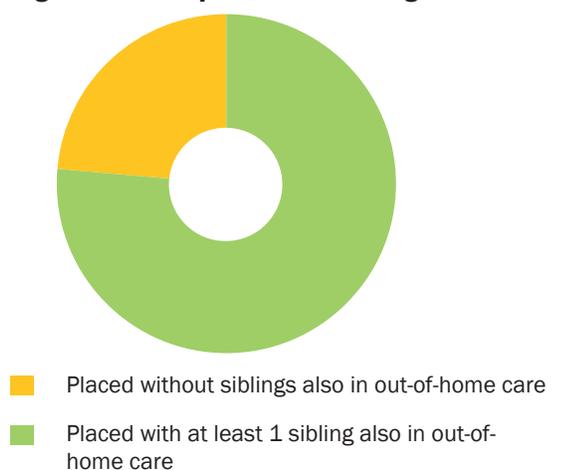
Source: Nebraska Department of Health and Human Services (DHHS).

Fig. 10. Placement type (Dec. 31, 2011)



Source: Foster Care Review Office.

Fig. 11. Children placed with siblings



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

Recommendations

1. Allow families to access child welfare services in new ways: Differential response Nebraska's number of voluntary, in-home child welfare cases is growing. What this should mean is that children are in safe, loving homes sooner and services to families respond more readily and less intrusively to their needs. Across the nation, states have been strengthening the quality of their voluntary cases by implementing differential response systems. Instead of a one-size-fits-all approach, many states no longer require a forensic investigation of families who come to their attention for reasons of neglect. This fault-finding investigation often makes families more wary of the child welfare system and strains their engagement. Studies of the implementation of differential response in Minnesota show that families were more likely to engage in services and received services more quickly. Children remained safe and the number of children entering out-of-home care and re-entering the child welfare system decreased, producing cost savings.²⁹ Implementing a formal differential response system can better encourage family engagement in keeping children safe and build a more robust and effective voluntary services across Nebraska.

2. Support family connections in out-of-home care: In 2011, the Nebraska Legislature implemented parts of the federal Fostering Connections Act, which put an emphasis on notifying relatives when children are removed from their homes and ensuring sibling placement and visitation. Unfortunately this important piece of legislation has not yet addressed significant barriers to placing children with those they love and trust. Nebraska adopted a very narrow definition of kin in 2012, preventing children from being placed with godparents and other close contacts who are not blood related. Additionally, kinship care rates in Nebraska lag behind the national average and 94 percent of kinship homes are unlicensed, meaning they do not have access to the same services and supports that traditional foster homes have.³⁰ Nebraska should eliminate barriers preventing children from being placed with those they trust and should provide greater support to kinship care providers, so they can better meet the needs of the children in their care.

3. Intentionally address disparities: White children only made up a little over half of those involved in our child welfare system in 2011. Children and families of color are disproportionately represented in our system, especially in the more intrusive, intensive services. If we do not make concerted efforts to fulfill the unique needs of families and children of color in culturally competent ways, we will not be successful in reducing our overreliance on out-of-home care. Similarly, Nebraska's teenagers come into our court system at disproportionate rates. We need to build strategies that help reduce the number of older youth who enter our system and ensure that we have a system that helps older youth prepare for the transition to adulthood and make and build permanent, loving connections.

4. Increase access to behavioral health services: The high number of older youth who enter our child welfare system through their involvement in our court system speaks to the difficulty families and children have in accessing needed behavioral health services without system involvement. In 2008, two-thirds of the children relinquished to the state during the Safe Haven crisis were teenagers. Although Nebraska passed legislation aimed at providing families with a front door to the behavioral health system, evidence suggests that services remain difficult to access, either because of denials of coverage or a lack of mental health coverage close to home. About 57 percent of Nebraska's children live in an area designated as an area that lacks mental health professionals.³¹ Investment in a robust children's behavioral health system will help children involved in the child welfare system cope with the trauma and loss that often accompanies maltreatment. It will also ensure that families, who otherwise would not need to be involved in our child welfare system, do not have to enter to get treatment alone.

29. *Minnesota Family Assessment Response Extended Follow-up: Final Report, November 2006. Institute for Applied Research: St Louis, MO. <http://www.iarstl.org/papers.htm#ancMN9>.*

30. *Stepping Up for Kids. Annie E. Casey Foundation.*

31. *Children's BH in Nebraska, Kids Count in Nebraska 2009 Report*

Finding permanency

One of the most essential tests of an effective child welfare system is whether the services it provides result in a safe, loving, and permanent home for the children in its care quickly. In voluntary child welfare cases, this home is with a child's birth family now better able to provide for their child's needs and safety. For children who become court-involved, however, the options expand. Many are still reunified with their birth parents, but in other cases, children find permanency with relatives, close family friends, or other families who are willing to act as guardians or adoptive parents.

Between April 2011 and March 2012, 2,526 state wards exited Nebraska's child welfare system, after spending a median of one year and two months in care.³²

Over two-thirds of children were reunited with their birth families. This rate is much higher than the national average, and one of the highest reunification rates in the country (see Figure 13).³³ While it is very positive to see so many families reunited, this high number likely speaks to the substantial number of children Nebraska serves unnecessarily through the court system and in out-of-home care.

Nebraska's rate of reunification also prompts questions about whether families are receiving adequate supports and services before reunification. Children reunified with their parents spent much less time in the child welfare system than their peers (see Figure 12). Of children entering the foster care system between April 2011 and March 2012, nearly one in four had previously been in foster care. Over 36 percent of re-entering children had exited the child welfare system in the previous 12 months.³⁴

Reunification can be challenging. Families may not be getting the services they need to provide their children with safe, loving homes. Families may also have made significant improvements, but may not be fully prepared to meet their children's needs and deal with behaviors that children exhibit due to prior maltreatment and feelings about separation. Nebraska needs to ensure that reunified families are both prepared and supported through the process.

There are some children who cannot be reunified with their birth families due to severe abuse or neglect or parents' failure to make the home safe after receiving needed services. In 2010, 768 children whose parent's rights had been terminated were waiting for permanency.

32. *Fostering Court Improvement data. Does not include OJS wards.*

33. *KIDS COUNT Data Center. "Exits from Foster Care by Exit Reason."*

34. *Fostering Court Improvement data. Does not include OJS wards. 611 of 2,762 children entering the foster care system, were re-entries. 225 of the 611 children had exited care in the past 12 months.*

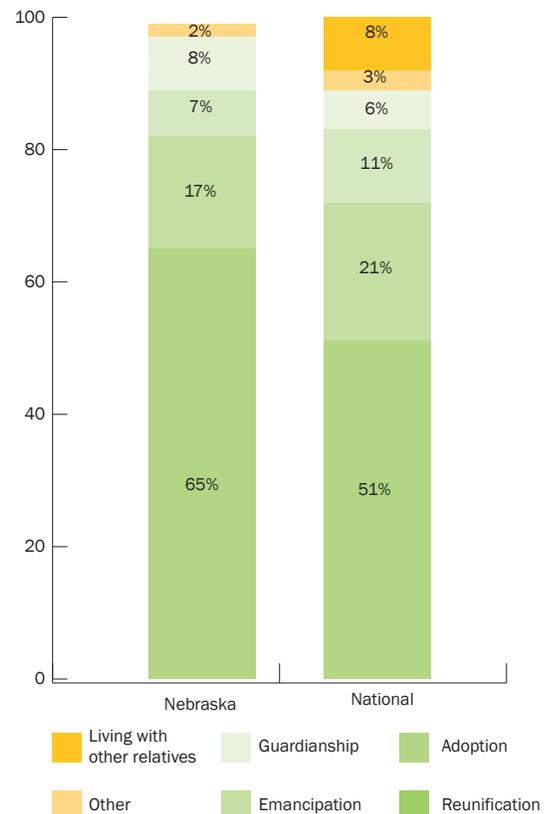
Fig. 12. Time in care



Median length of stay in foster care	1 year and 1.9 months
Median time from removal until reunification	10.9 months
Median time from removal to adoption	2 years and 5.6 months

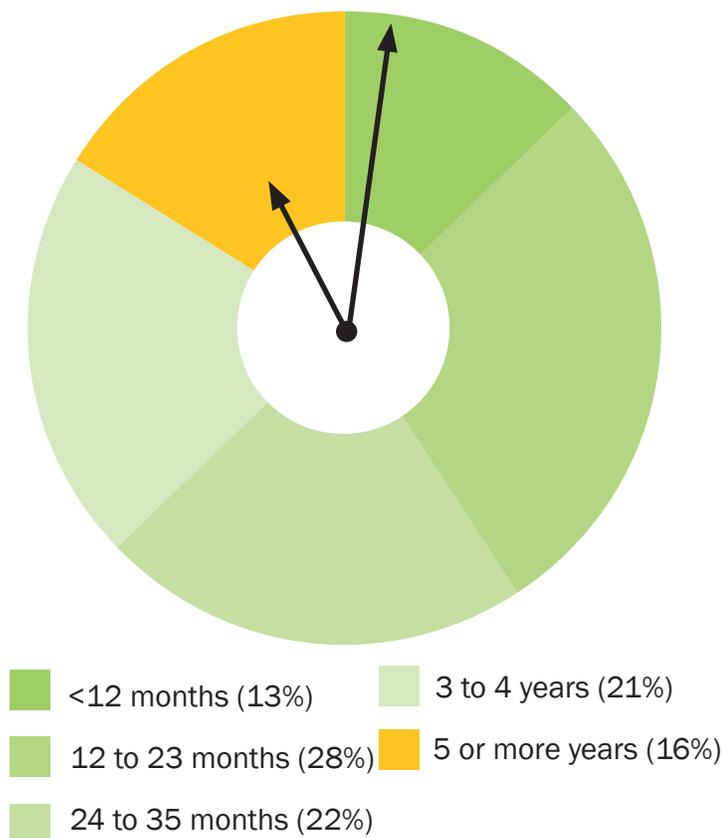
Source: *Fostering Court Improvement April 2011-March 2012.*

Fig. 13. Exits from care in 2010



Source: *Administration for Children and Families, Adoption and Foster Care Analysis and Reporting System (AFCARS). Accessed through the national KIDS COUNT Data Center.*

Fig. 14. Time waiting for adoption in Nebraska, 2010



Source: Administration for Children and Families, Adoption and Foster Care Analysis and Reporting System (AFCARS). Accessed through the national KIDS COUNT Data Center.

Our child welfare system failed to provide loving and safe homes for 8 percent of children who exited care in 2011. They “aged out” of the system reaching their 19th birthday (see Figure 13). Studies have shown very poor outcomes for young people who age out of the child welfare system – by age 24 over 90 percent do not receive a college degree, over half were already parents, and 40 percent of young men were incarcerated.³⁵ Action must be taken to effectively reduce the number of young people who leave foster care with no connections.

2011 also saw many cases of children successfully reaching permanency. Adoptions and guardianships made up the second and third largest group of exits from Nebraska’s child welfare system (see Figure 13). During the 2011 Federal Fiscal Year (FFY), 411 adoptions and 249 guardianships were completed. 86 percent of adoptive families received a subsidy during that time period, to help pay for the costs of caring for their adoptive child given their physical and behavioral health needs. The median amount of this subsidy was between \$200 and \$300 monthly.³⁶ The median amount of time children who were adopted were in care was over twice as long as the time children reunified with their parents spent in child welfare system (see Figure 12).

There are still many more children who cannot return to their birth families and need a permanent home. In 2010, 768 Nebraska children who did not get the loving, safe home they needed. Of these over 60 percent had been waiting for over two years (see Figure 14). This amount of time does not count the time a child may have spent in care before parental rights were terminated.

35. Courtney, Mark E. “Midwest Evaluation of the Adult Functioning of Former Foster Youth: Outcomes at Ages 23 and 24.” Chapin Hall at the University of Chicago: 2010. http://www.chapinhall.org/sites/default/files/Midwest_Study_Age_23_24.pdf.

36. Data provided by NE DHHS from AFCARS Foster Care and Adoption File for FFY 2011.

Nebraska's child welfare system is falling short when it comes to assuring that child welfare system involvement assures children have a safe, loving, permanent home as quickly as possible. Too many children who cannot return to their parents are lingering in out-of-home care, too many young adults are aging out without family supports, and too many families are not getting what they need to ensure that reunification lasts. Building on what we know works, we can make sure more children get the lasting, loving homes they need and deserve:

Recommendations

1. Support families after reunification: 65 percent of Nebraska's children exiting the child welfare system return to their birth families. Families, especially those who have struggled to provide their children with safe homes in the past, may need services and supports to care for their children. As part of its child welfare privatization initiative, Nebraska required lead agencies to provide 12 months of voluntary Aftercare services to reunified families. If newly reunified parents were struggling to manage a child's behavior or ran into sudden difficulties with safe housing, they could reach out receive temporary help to address the problem and keep the family reunified. Similar services are available to families who have adopted or become guardians for children from the child welfare system, through Right Turn. Unfortunately, the end of privatization in four of Nebraska's five service areas has meant the end of Aftercare in those areas of the state. These services can help reduce re-entry into the foster care system and may allow court supervision to end sooner, if families have another way of accessing services.

2. Incentivize adoption and guardianship: There are too many Nebraska children waiting in out-of-home care for long periods of time for a loving, permanent home. Nebraska needs to take action to make sure all of these children have a permanent, loving home. Adoption and guardianship are significant responsibilities, and families need resources to support the needs of their children who are more likely to have developmental delays, mental and behavioral health challenges. Studies have shown that families are often unable to adopt without subsidies.³⁷ Nebraska's current rate of adoption subsidies could be improved and the rate of payment, especially for youth with special needs should be reviewed. Other states have also created state tax credits for those families who adopt. Many relatives in Nebraska who may be willing to act as guardians for the children in their care cannot access guardianship subsidies, because their homes are unlicensed.³⁸ Older youth in care who are adopted or placed in a guardianship are then unable to gain access to Nebraska's Former Ward Program, which gives them assistance for college or other career training.

3. Build permanent, supportive relationships, especially for older youth: With so many teenagers entering our child welfare system and a short period of time to find them safe, loving homes, Nebraska needs to expand its permanency efforts to building loving, supportive relationships for children and youth. Our child welfare system must put effort into finding extended family connections for youth and helping them identify and build healthy, sustainable relationships with others in their lives. These relationships act as lifelong supports.³⁹

37. *The Value of Adoption Subsidies*. North American Council on Adoptable Children. <http://www.nacac.org/adoption/subsidy/valueofsubsidies.pdf>.

38. *Stepping Up for Kids*. Annie E. Casey Foundation.

39. "Enhancing Permanency for Older Youth in Out-of-Home Care," *Child Welfare Information Gateway*: 2006. <http://www.childwelfare.gov/pubs/focus/enhancing/enhancing.pdf>.

Building a better child welfare system in Nebraska

Growing up in safe, loving homes is essential to children's healthy development and success as adults. We can better respond to our vulnerable children and families by building on proven strategies that can make Nebraska's child welfare system much stronger.

1. Ensure supports for families in poverty

Poverty adds to the daily stressors all parents face and makes the job of caring for children more challenging. Access to public benefit programs and an array of community supports is essential to reducing the risk of child maltreatment in our state.

2. Strengthen home visitation programs

Nebraska spends less than the national average per child on Home Visiting programs, which provide at-risk families with skills and services that effectively reduce child maltreatment and increase family functioning. With increased funding and better targeting of programs, Nebraska can better support families.

3. Increase access to mental health and substance abuse services for parents

Parents with mental health or substance abuse challenges struggle to care adequately for their children. Strengthening access to quality services for parents by adequately funding Nebraska's behavioral health system helps parents provide safe, loving homes for their children.

4. Allow families to access child welfare services in new ways: Differential response

The number of Nebraska's voluntary, in-home child welfare cases is growing. Implementing a formal differential response system, that eliminates the need for an investigation, can better encourage family engagement in keeping children safe and build more robust and effective voluntary services across Nebraska.

5. Support family and cultural connections in out-of-home care

Children in out-of-home care do best when they are surrounded by those they love and trust. Nebraska should eliminate barriers preventing children from being placed with those they trust and should provide greater support to kinship care providers, so they can better meet the needs of the children in their care.

6. Intentionally address disparities

Children and families of color are disproportionately

represented in our system, especially in the more intrusive, intensive services. If we do not make concerted efforts to meet the needs of families and children of color in culturally competent ways, we will not be successful in reducing our overreliance on out-of-home care. Similarly, Nebraska's teenagers come into our court system at disproportionate rates. We need to find new ways to respond to their needs and behaviors.

7. Increase access to behavioral health services

Investment in a robust children's behavioral health system will help children involved in the child welfare system cope with the trauma and loss that often accompanies maltreatment. It will also ensure that families, who otherwise would not need to be involved in our child welfare system, do not have to enter to get treatment alone.

8. Support families after reunification

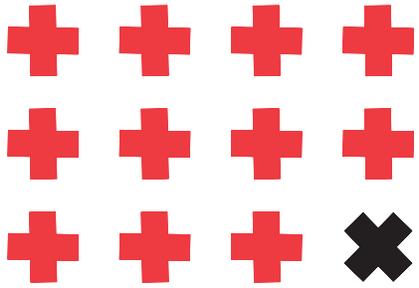
Families, especially those who have struggled to provide their children with safe homes in the past, may need services and supports to care for their children. Nebraska should strengthen and expand its voluntary Aftercare program for reunified families across the state.

9. Incentivize adoption and guardianship

There are too many Nebraska children waiting in out-of-home care for long periods of time for permanent homes. By providing adequate subsidies to families, we can ensure families who want to provide loving homes for children have the financial ability to do so.

10. Build permanent, supportive relationships, especially for older youth

Our child welfare system should help all children, but especially older youth, identify extended family and other connections with whom they can build positive, healthy relationships. These relationships will act as a support for them as they transition to adulthood.



**1 in 12 Nebraska kids
are uninsured**

**13% of babies
received inadequate
prenatal care**

Our values

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

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

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

This section will provide data on births, maternal health, infant deaths, immunizations, access to health care, lead exposure, sexually-transmitted infections, and behavioral health.

Where are the data?

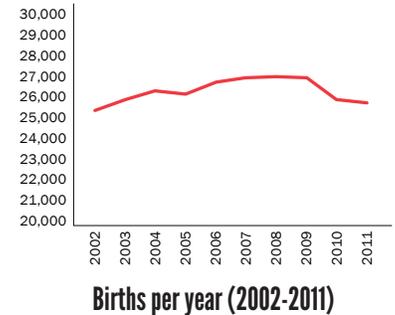
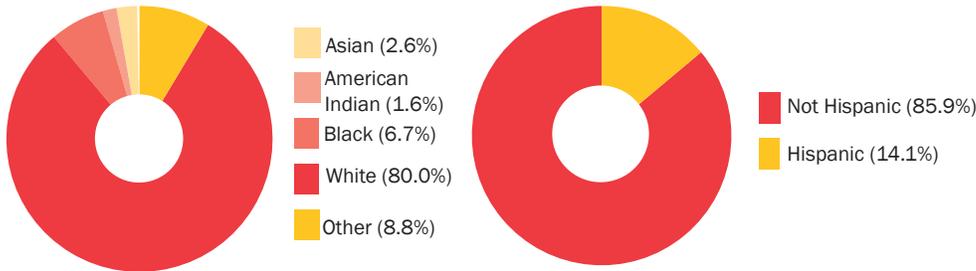
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Births

25,722 babies were born in 2011.

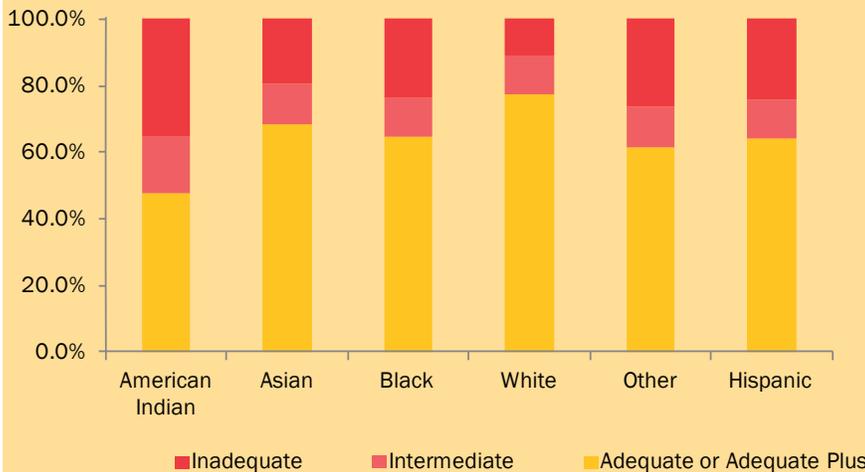
That's a slight decrease from 25,916 births in 2010.

Births by race & ethnicity (2011)



13% of babies received inadequate prenatal care

Adequacy of prenatal care by race & ethnicity

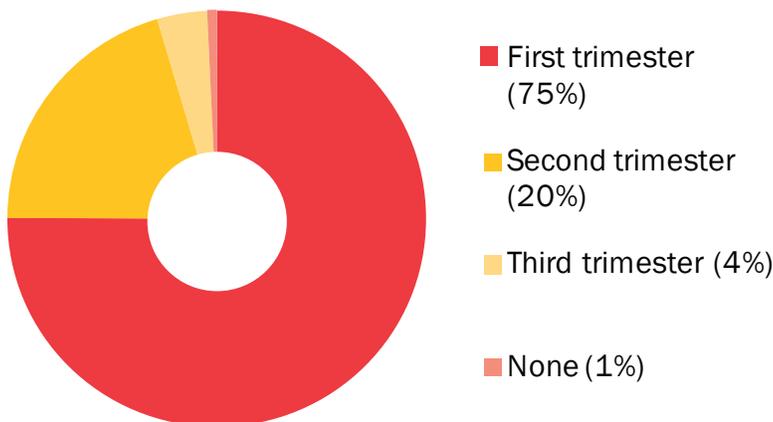


Women who see a health care provider regularly during pregnancy have healthier babies and are less likely to deliver prematurely or to have other serious pregnancy-related problems.

Barriers to care can include a lack of any of the following:

- Insurance
- Transportation
- Knowledge of where to find care
- Quality treatment at care center
- Translation services
- Knowledge of importance of care

Trimester prenatal care began (2011)



Low birth weight

Being born at low birth weight puts babies at heightened risk for death and disability.

	Low weight	Very low weight	Total births
2009	1,923 7.1%	318 1.2%	26,931
2010	1,843 7.1%	333 1.3%	25,916
2011	1,707 6.6%	284 1.1%	25,722

Source of all data on this page: Vital Statistics, Department of Health and Human Services (DHHS).

Spotlight on: Prenatal care

The state of Nebraska for more than thirty years provided prenatal care to low-income pregnant women based on the eligibility of the unborn child.

In November 2009, the federal Centers for Medicare and Medicaid Services (CMS), notified Nebraska that Medicaid coverage for this population would have to be changed in order to comply with federal law.¹

Cases were reviewed and 1,619 women were found not eligible. Of these, 867 were undocumented immigrants and not eligible for Medicaid coverage and 752 were not eligible for other reasons.

CMS said the state could provide coverage to the unborn child through the state's Children's Health Insurance Program (CHIP). The state believed it needed Legislative authority to provide this coverage and testified in opposition to attempts to establish Legislative authority.²

In April 2012, the state Legislature passed LB 599. A separate CHIP program, which covers the unborn, was implemented as a result of LB 599. Eligibility through LB 599 is based on the unborn child, at 185 percent of the federal poverty level, independent of the mother's eligibility and immigration status.

Controversy surrounded the passage of LB 599 because some Nebraskans viewed the bill as too favorable to undocumented women. Research has shown, however, that providing prenatal care to all women results in cost savings later. According to the Institute of Medicine, every dollar spent on prenatal care for high-risk women yields about \$4 in overall savings by reducing post-partum and newborn costs.³ These possible complications include, but are not limited to, illness, disability, and death. According to the federal Health Resources and Services Administration, "Babies born to mothers who received no prenatal care are three times more likely to be born at low birth weight and five times more likely to die than those whose mothers received prenatal care."⁴

Unborn children do not have an immigration status or criminal record and therefore should be awarded every possible opportunity to be born healthy. Regardless of race, income, or immigration status, the benefits of offering prenatal care for all women far outweigh the risk for future Nebraskans.

Every dollar spent on prenatal care for high-risk women yields about \$4 in overall savings by reducing post-partum and newborn costs.

1. Health and Human Services Committee, Legislative hearing, "Transcript Prepared By the Clerk of the Legislature Transcriber's Office," March 16, 2011.
2. Department of Health and Human Services, Centers for Medicare and Medicaid Services, Division of Medicaid and Children's Health Operations, "Letter to Kerry Winterer," November 30, 2009.
3. Behrman, R.E., Chairman, Committee to Study the Prevention of Low Birthweight, Institute of Medicine, Preventing Low Birthweight. National Academy Press, Washington, D.C., (1985): 237.
4. "Prenatal Services," Health Resources and Services Administration, Maternal and Child Health, U.S. Department of Health and Human Services, <http://www.mchb.hrsa.gov>.

PRAMS & teen parents

Pregnancy Risk Assessment Monitoring System (PRAMS)

The Nebraska Pregnancy Risk Assessment Monitoring System (PRAMS), is a monthly survey of new mothers from across the state. Nebraska PRAMS partners with the Centers for Disease Control & Prevention (CDC), to identify and monitor selected maternal behaviors and experiences before, during, and right after pregnancy.¹

Certain behaviors have been proven to decrease risks to infant health. For example, folic acid – when taken prior to and during pregnancy – reduces the risk of birth defects of the brain and spine.²

	2009	2010
Folic acid		
Took folic acid 3 or fewer times a week before pregnancy	59.1%	58.3%
Took folic acid 4 or more times a week before pregnancy	40.9%	41.7%
Mother's BMI		
Underweight before pregnancy	10.6%	10.7%
Normal weight before pregnancy	50.7%	53.1%
Overweight before pregnancy	13.8%	12.4%
Obese before pregnancy	24.9%	23.9%
Domestic violence		
Experienced physical abuse from husband or partner in the 12 months before pregnancy	3.5%	3.3%
Experienced physical abuse by someone other than husband or partner in the 12 months before pregnancy	1.9%	1.5%
Alcohol		
Drank alcohol in the 3 months before pregnancy	63.6%	62.5%
Smoking		
Smoked during the 3 months before pregnancy	29.3%	25.5%
Pregnancy intendedness		
Intended	60.1%	61.6%
Unintended	39.9%	38.4%
Parenting classes		
Participated in parenting classes during their most recent pregnancy	14.3%	13.8%
Maternal depression		
New mothers who experienced maternal depression related to their most recent pregnancy	12.5%	10.3%
Breastfeeding		
Reported ever breastfeeding their infants	72.6%	80.6%

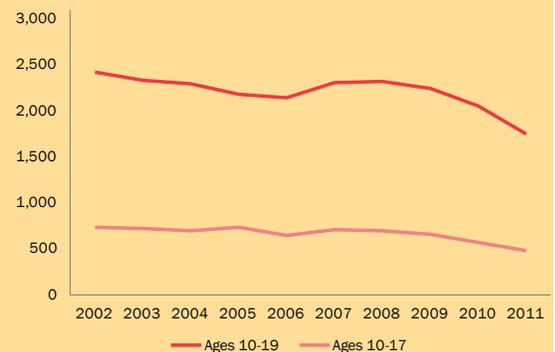
Teen parenting

While teen pregnancy occurs at all socio-economic levels, teen moms are more likely to come from economically-disadvantaged families or to be coping with substance abuse and behavioral problems. Teen birth is highly correlated to child poverty.

In turn, children born to teenage parents are more likely to live in poverty, experience health problems, suffer from maltreatment, struggle in school, run away from home, and serve time in prison.

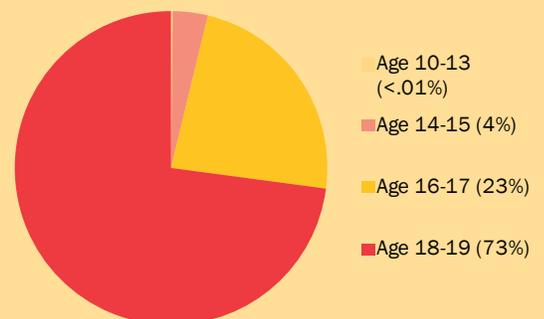
Children of teen parents are also more likely to become teen parents themselves, thus perpetuating the cycle of teen pregnancy and generational poverty. Teen births are at the lowest point in a decade.

Teen births (2002-2011)



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

Teen births by age (2011)



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

1. "Pregnancy Risk Assessment Monitoring System Homepage," Nebraska Department of Health and Human Services (DHHS), <http://dhhs.ne.gov>.
 2. "Folic Acid," Centers for Disease Control and Prevention, <http://www.cdc.gov>.

Infant mortality

Infant mortality changed from 5.4 per 1,000 in 2009 to 5.2 per 1,000 in 2010, a 3.7% decrease.

Causes of infant deaths in 2009 & 2010

	2009		2010	
	#	%	#	%
Heart Disease	5	3.4%	0	0.0%
Pneumonia	2	1.4%	1	0.7%
Birth Defects	38	26.2%	37	27.2%
Maternal Complications of Pregnancy	10	6.9%	11	8.1%
Complications of Placenta, Cord and Membranes	7	4.8%	10	7.4%
Prematurity	15	10.3%	14	10.3%
Intrauterine Hypoxia and Birth Asphyxia	3	2.1%	4	2.9%
Respiratory Distress Syndrome	2	1.4%	6	4.4%
Other Respiratory Conditions	7	4.8%	4	2.9%
Perinatal Infections	2	1.4%	4	2.9%
Other Perinatal Conditions	6	4.1%	9	6.6%
SIDS	24	16.6%	14	10.3%
Violent or Accidental Causes	5	3.4%	5	3.7%
All Other	19	13.1%	17	12.5%
Total Infant Deaths	145		136	

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

Infant mortality by race and ethnicity (2010)

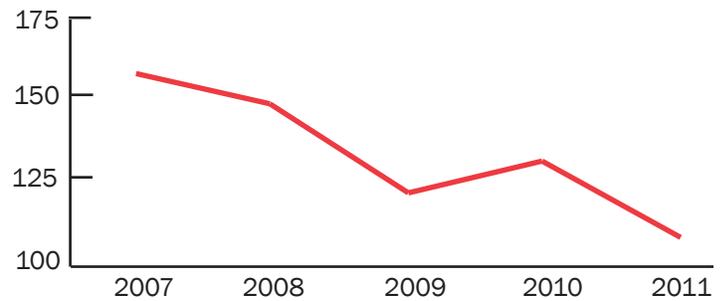
White	5.1
Black	14.8
American Indian	4.8
Other	1.5
Hispanic	5.1

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

Child deaths

In 2011, 107 children and youth ages 1 to 19 died of various causes, the most common of which were motor vehicle and non-motor vehicle accidents. The total was a decrease from 130 deaths in 2010 and continues a generally decreasing trend over the past decade.

Child deaths, ages 1-19, in 2007-2011



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

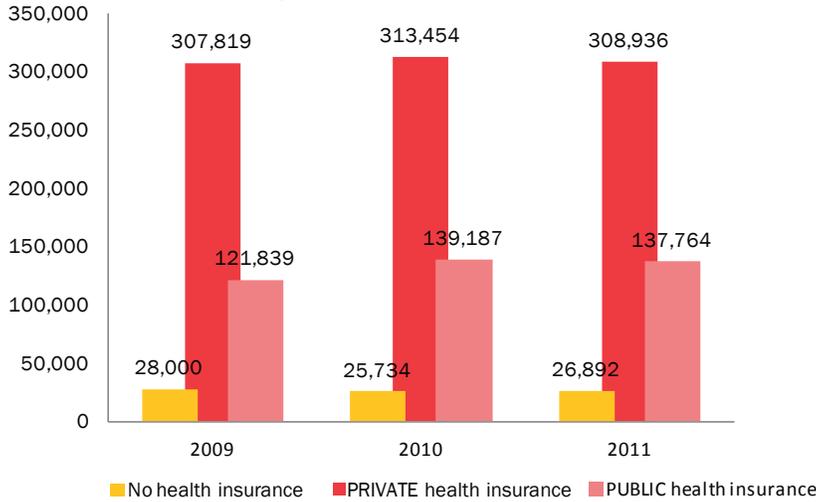
Causes of child deaths, ages 1-19, in 2002-2011

Motor Vehicle Accidents	497
Non-Motor Vehicle Accidents	208
Suicide	159
Homicide	106
Cancer	132
Birth Defects	71
Heart	35
Cerebral Palsy	18
Asthma	19
Pneumonia	14
HIV/AIDS	1
All Other Causes	184
Total	1,495

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

Health insurance

Health coverage for Nebraska's children, ages 17 & under (2009-2011)



Source: U.S. Census Bureau, 2009, 2010, and 2011 1-year estimates, American Community Surveys, Tables C27001, C27002, and C27003 respectively.

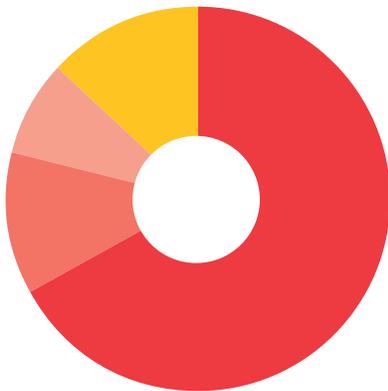
Access to Health Care

Most uninsured children have working parents whose jobs do not provide access to insurance. Often the employer does not offer insurance, the insurance is too expensive, or the available coverage doesn't meet the family's medical needs. In 2011, there were 26,892 uninsured children in Nebraska.¹ Of those, 18,621 were low-income (below 200% of the federal poverty level) and likely eligible, yet unenrolled in the Children's Health Insurance Program (CHIP).²

Many low-income children are eligible for Medicaid or CHIP. Combined, these programs covered a monthly average of 158,782 children in SFY 2011.³

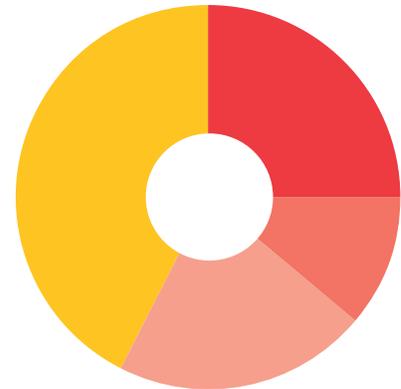
67% of those eligible for Medicaid are children, but children only make up 25% of Medicaid costs.

Nebraska Medicaid average monthly eligible persons by category (SFY 2011)



- 67% Children* (158,782)
- 12% ADC Adults** (28,799)
- 8% Aged (17,731)
- 13% Blind and Disabled (30,498)

Nebraska Medicaid expenditures by category (SFY 2011)



- 25% Children* (\$398 million)
- 11% ADC Adults** (\$175 million)
- 21% Aged (\$338 million)
- 42% Blind and Disabled (\$664 million)

Source: Nebraska Department of Health and Human Services & Nebraska Medicaid Annual Report, Division of Medicaid and Long-Term Care (Sept. 15, 2011).

* Children's category combines Medicaid and CHIP coverage.

** ADC Adults are those receiving Aid to Dependent Children, or temporary cash assistance through the state of Nebraska.

1. U.S. Census Bureau, 2011 American Community Survey, Table C27001.

2. U.S. Census Bureau, 2011 American Community Survey, Table B27016.

3. Financial and Program Analysis Unit, Department of Health and Human Services.

24,474 Nebraska children received mental health and substance abuse services through Medicaid in 2011.

In some circumstances, children may receive funding for behavioral health or substance abuse treatment either through the Division of Medicaid and Long Term Care or the Division of Behavioral Health (DBH). Most often, children who receive treatment through either of these funding streams are low-income or are involved in the court system. This page provides selected data from each source. Because data do not include privately-funded treatment, these numbers are an underestimate of the number of Nebraska children who receive treatment for behavioral health or substance abuse problems.

Community-based services and residential treatment (DBH)

2,626 youth

received mental health services.

760 youth

received substance abuse services.

76 youth

received dual services.

1,642 youth

had “serious emotional disturbance.”

Regional centers (DBH)

115 males

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

32 males

received services from Lincoln Regional Center at the Whitehall Campus.

Source: Division of Behavioral Health, DHHS.

Many children in Nebraska deal with behavioral health problems that may affect their ability to participate in normal childhood activities. Such behavioral health problems encompass a wide array of disorders children may face.

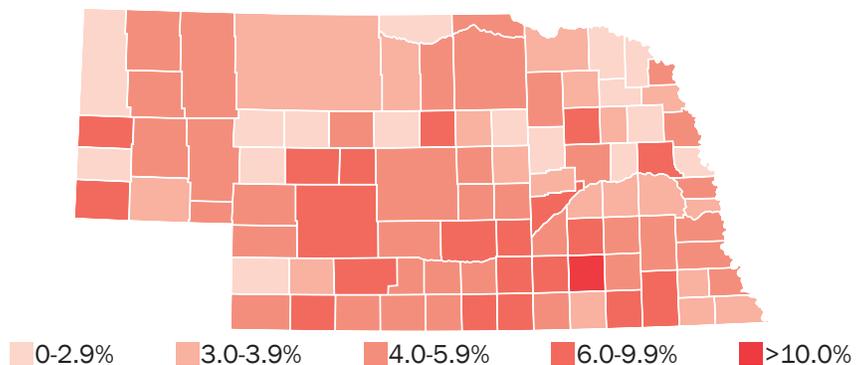
The National Survey of Children with Special Health Care Needs (NS-CSHCN) is a nationwide survey that checks in on specific aspects of child health,

including behavioral health problems. The 2009-2010 NS-CSHCN estimated that the following number of Nebraska children faced specified behavioral health disorders:

- Anxiety: 9,263
- ADD or ADHD: 15,870
- Behavioral or conduct problems: 7,770
- Depression: 4,636

Source: Data Resource Center for Child & Adolescent Health, childhealthdata.org.

Percent of children who received Medicaid mental health or substance abuse services, 2011



In 2011, 28,471 Nebraska children received mental health and substance abuse services through Medicaid.¹ The above map shows the percentage of children who received these services by county, with darker colors indicating a higher rate.

While some children with severe behavioral problems may need residential treatment in a secure facility with 24-hour care, most may do best in community-based services. About half of the children in residential treatment improve with time.² The others may need a different level of care among the array of therapeutic services proven to be effective in assisting children with behavioral health needs.

1. Financial and Program Analysis Unit, Department of Health and Human Services.
2. “An Ideal Children’s Behavioral Health System,” *Voices for Children in Nebraska* (2012).
3. Magellan Health Services, *Nebraska Care Management Center*.
4. State of Nebraska 2011 Youth Risk Behavior Survey Results, Bureau of Sociological Research University of Nebraska-Lincoln, (June 2012).

Youth Risk Behavior Survey

The Youth Risk Behavior Survey (YRBS)

is administered to public high school students to gauge levels of risk-taking behaviors. Due to a higher participation rate than in years past, the 2011 YRBS was weighted for the first time since 2005. Therefore, the data are representative of Nebraska high school students.

Marked improvements occurred in a variety of areas including:

- Seat-belt usage
- Alcohol-impaired driving
- Physical fighting
- Tobacco and alcohol use
- Sexual activity
- Suicide consideration



Injuries and violence

	2005	2011
In the past 12 months, in a physical fight	28.5%	26.7%
In past 12 months, physically hurt on purpose by boyfriend or girlfriend	10.9%	10.9%
Ever carried a weapon to school	4.8%	3.8%
Ever bullied on school property	NA	22.9%
Ever electronically bullied	NA	15.8%
Ever physically forced to have sexual intercourse	9.1%	8.1%



Alcohol and other drugs

In past 30 days, had at least 1 drink of alcohol	42.9%	26.6%
In past 30 days, had 5 or more drinks in a row within a couple of hours	29.8%	16.4%
Ever used marijuana	32.3%	25.0%
Ever used any form of cocaine	7.5%	4.2%
Ever used inhalants to get high	11.3%	9.7%
Ever used meth	5.8%	2.7%
Ever used ecstasy or MDMA	4.9%	4.5%
Ever took prescription drugs without a doctor's prescription	NA	12.4%
In past 12 months, offered, sold, or given an illegal drug by someone on school property	22.0%	20.3%



Tobacco

Currently smokes	21.8%	15.0%
Ever tried smoking	53.4%	38.7%
Currently uses smokeless tobacco	8.7%	6.4%



Asthma

Ever told by a doctor or nurse that they had asthma	19.2%	19.2%
Ever told by a doctor or nurse that they had asthma and still have asthma	NA	9.6%

Note: Notable increases are marked in red.

Source: "Youth Online-High School YRBS Nebraska 2011 Results," Centers for Disease Control and Prevention, <http://www.cdc.gov>.

Youth risk behaviors include activities such as alcohol, tobacco, and drug use; inadequate nutrition; lack of physical activity; and risky sexual encounters. The Youth Risk Behavioral Survey (YRBS), developed by the Centers for Disease Control and Prevention (CDC), collects and measures such behaviors among youth in grades 9 through 12.

Because the YRBS is the only statewide source of information of such behaviors, “the data are critically important for local and state health planning, including school-level planning, for securing funding for and evaluation youth prevention programs, and for fulfilling federal reporting requirements, among other uses.”¹



Motor vehicle crashes and seat belt use	2005	2011
Rarely or never wore a seat belt	15.9%	15.7%
In past 30 days, rode in a vehicle driven by someone who was drinking alcohol	35.6%	23.9%
In past 30 days, drove a motor vehicle when drinking alcohol	17.3%	7.2%



Teen sexual behavior		
Ever had sexual intercourse	40.8%	37.1%
Reported having sexual intercourse before age 13	4.4%	3.8%
Had sex with four or more people	11.9%	10.6%
Had sex in the past 3 months	29.9%	27.0%
Drank alcohol or used drugs before last sexual intercourse	24.0%	19.8%
Did not use a condom during last sexual intercourse	38.4%	38.0%
Did not use any method to prevent pregnancy during last sexual intercourse	12.8%	14.0%
Were never taught in school about AIDS or HIV infection	14.6%	21.5%



Obesity, dieting, and eating habits		
In past 7 days, ate fruit or drank 100% fruit juice less than once a day	43.6%	41.0%
In past 7 days, ate vegetable less than once a day	38.0%	38.0%
Were overweight according to CDC growth charts	13.7%	13.6%
Were obese according to CDC growth charts	10.9%	11.6%



Physical activity		
Did not attend physical education classes in an average week	51.1%	51.9%
Did not participate in at least 60 minutes of physical activity on any day	22.5%	10.4%

1. State of Nebraska 2011 Youth Risk Behavior Survey Results, Bureau of Sociological Research, University of Nebraska-Lincoln, (June 2012).

Public health

Blood lead level testing

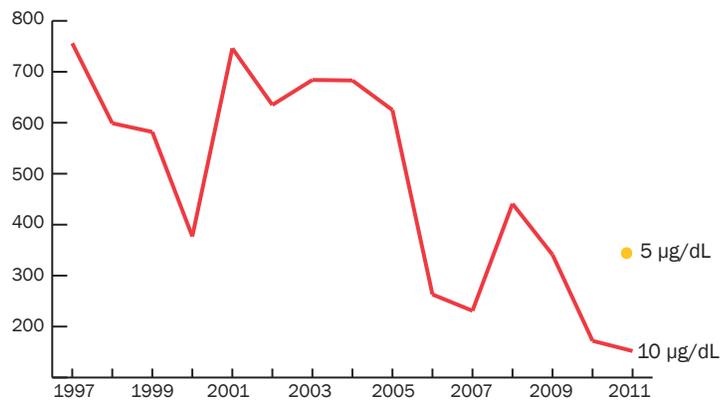
Blood lead testing is recommended for all children at 12- to 24-months-old, as well as for any child 6 or younger who has been exposed to lead hazards. Elevated blood lead levels (EBLL) can increase the risk of behavioral problems, malnutrition, and problems with physical and cognitive development. Lead poisoning can be fatal.¹

In 2011, the Centers for Disease Control lowered its reference level for EBLL to 5 µg/dL (micrograms per deciliter) from 10 µg/dL. Public health action should be taken at the new lower level.²

Of 26,155 children tested:

- 393 (1.5%) had blood lead levels at or above 5 µg/dL; and
- 152 had blood lead levels at or above 10 µg/dL.

Number of children with EBLLs (1997-2011)



Source: Office of Environmental Health Hazards & Indoor Air, DHHS.

Immunizations



90.0% National Goal
77.6% Nebraska 2011
66.3% Nebraska 2010

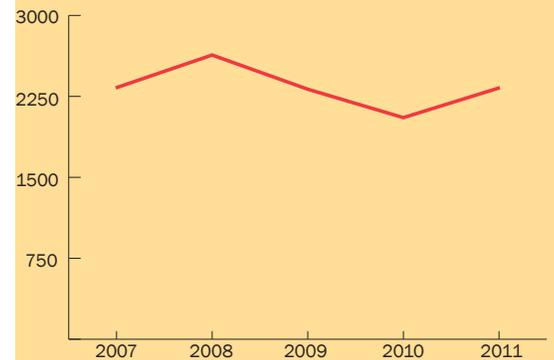
The Centers for Disease Control and Prevention (CDC) aims for 90% of all children to receive the primary immunization series by age 2.

77.6% of Nebraska children had received the series by age 2. This is an increase from last year's rate of 66.3% and higher than the national average of 68.5%

Source: Immunization Program, DHHS.

1. "Lead," Centers for Disease Control and Prevention, <http://www.cdc.gov/nceh/lead/>.
2. *Ibid.*
3. Public Health, DHHS.

Sexually transmitted infections (STIs)



There were 2,328 cases of sexually transmitted infections reported in children ages 19 and under in Nebraska in 2011. This is a slight increase in infections from the previous year and a departure from the 3-year trend of decreasing numbers of STIs.

HIV/AIDS

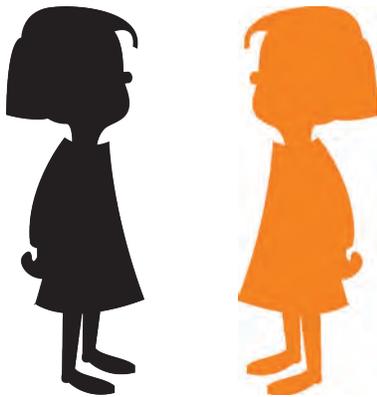
According to the Centers for Disease Control and Prevention (CDC), as of 2009, about 60% of youths with HIV were unaware of their infection. Health-care providers and public health agencies should ensure that all youths who are at high risk for HIV are tested and have access to sexual health services, and that HIV-positive youths receive ongoing healthcare and prevention services.⁴

- In 2011, there were 11 children ages 0-11 and 13 children ages 12-18 living with HIV.
- Since 1993, only four children under the age of four with a diagnosis of AIDS have died from the disease.

4. Vital Signs: HIV Infection, Testing and Risk Behaviors Among Youths-United States, MMWR, Vol. 61, (Nov 27, 2012).

95%

of young children have at least one parent in the labor force, but there are only enough licensed child-care facilities for



1 of 2 kids

ages 0 to 8.



14% of high school students don't graduate on time.

Our values

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

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

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

This section will provide data on early childhood education programs, child care facilities and subsidies, graduation rates, student characteristics, and school meals.

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6,685

children were served by Head Start and Early Head Start in 2011.

There were **16** Head Start programs and **12** Early Head Start programs in Nebraska.

Of the children served:

1,525 were in full-day programs;

2,993 were in part-day programs;

945 were in home-based programs; and

30 were in a combination program.

238 pregnant women were served.

Head Start and Early Head Start

Children

Completed all medical screenings

86%

Completed oral health exam

66%

Completed behavioral screenings

74%

Had disabilities

15%

Spoke a primary language that was not English

25%

Were homeless

6%

Families

Two-parent families

51%

One-parent families

49%

One or both parents employed

73%

Received emergency/crisis intervention services

32%

Received adult education (GED programs, college selection, etc.)

22%

Received parenting education

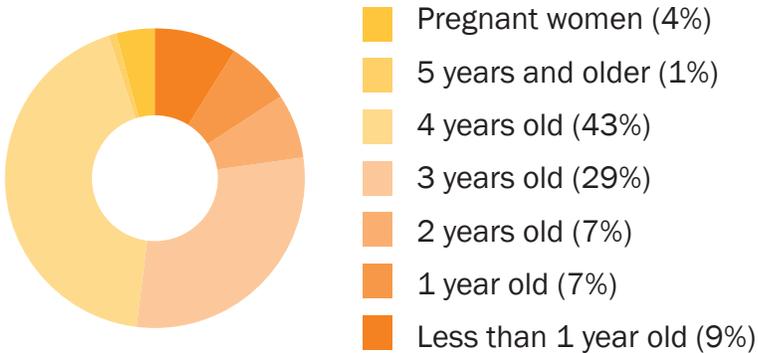
85%

Received at least one family service

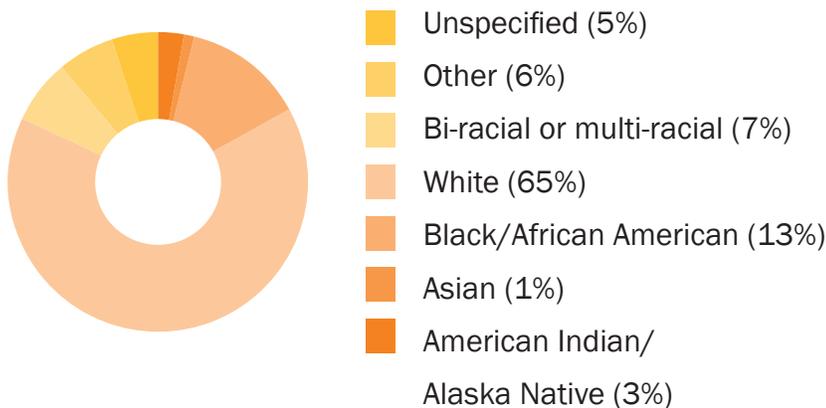
93%

Head Start and Early Head Start

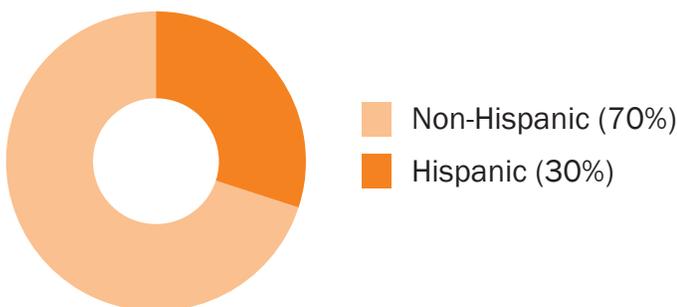
Participants by age



Participants by race



Participants by ethnicity



Source: Head Start-State Collaboration Office, Nebraska Department of Education.

Early Development Network

The Early Development Network (EDN) serves families with children from birth to age 3 who have disabilities.

1,537

children were served by EDN in 2011.¹

Even Start

Previous editions of the *Kids Count in Nebraska Report* have provided data on the Even Start Family Literacy Program. However, ongoing federal spending cuts to the program culminated in the program's end following the 2009-2010 school year.² That year, only two Even Start programs were funded in Nebraska, down from eight programs funded previously.

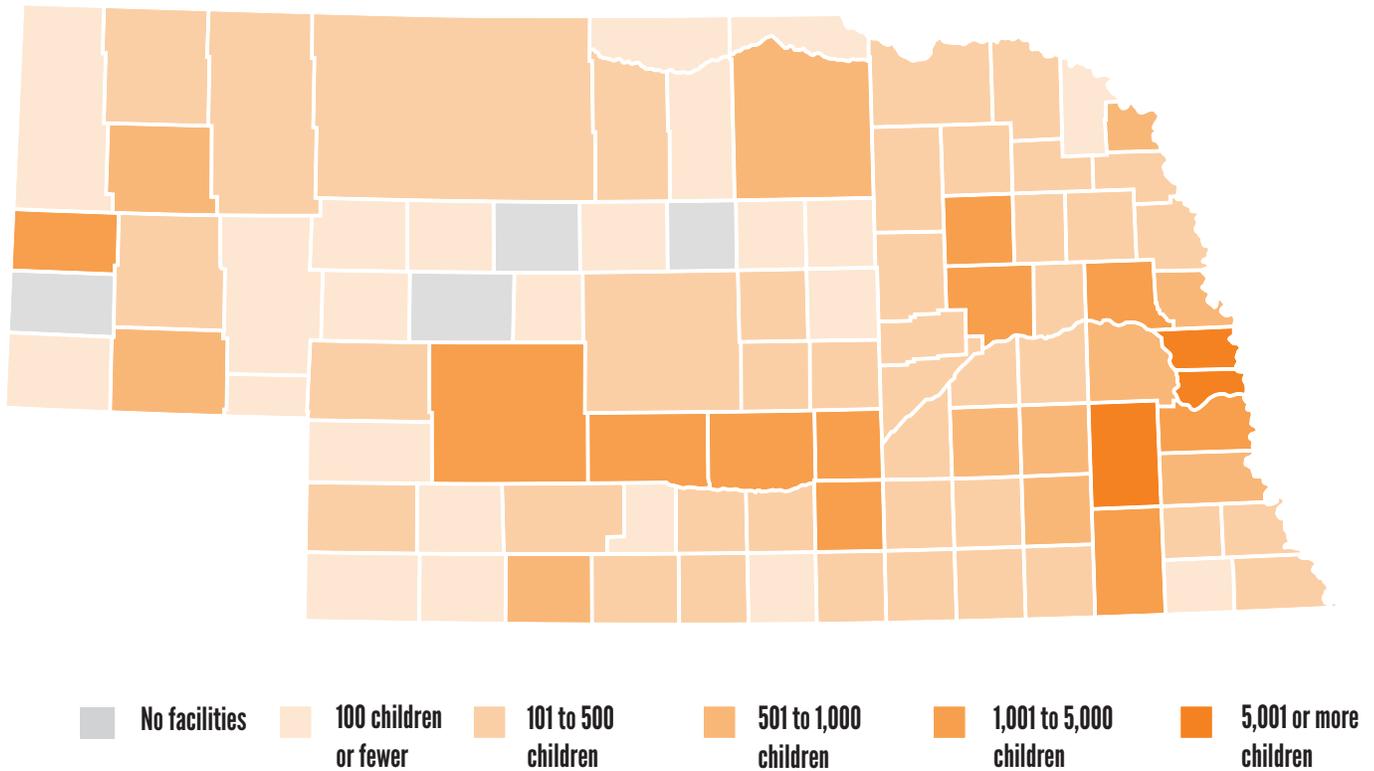
Even Start aimed to improve the educational opportunities of low-income families by integrating intensive early childhood education with adult literacy and adult basic education.

1. Nebraska Department of Education.

2. Chuck Edwards, "Even Start...Stops," Title 1-derland, <http://ed.complianceexpert.com/title-1-derland>.

Early childhood

Capacity of child-care facilities by county in 2011



Source: "Early Childhood Capacity County by County," DHHS, dhhs.ne.gov, (Report was run April 15, 2011).

Child-care facilities

Among kids age 0-5, 95% have at least one parent in the labor force. That means at some point, most children will need access to child care. In 2011, there were only enough licensed child-care slots for about half of the young children in our state.¹

3,913 Total child-care facilities²

107,993 Total capacity³

★ **486** Number of licensed child care slots per 1,000 children ages 0-8⁴

Child-care subsidies, SFY 2011

- There were **35,428** children in Nebraska who received child-care subsidies in SFY 2011, for an average annual payment per child of **\$2,575**.
- An average of **19,286** children received a subsidy each month, for an average monthly payment per child of **\$394**.⁵
- The total state and federal funds spent for Child Care Subprogram 44, which includes child-care subsidies, was **\$92,607,171**.⁶

★ **About 48%** of licensed providers received child-care subsidies.⁷

1. Early Childhood Data Coalition.

2. "Early Childhood Totals by Type and Capacity," Nebraska Department of Health and Human Services (DHHS), dhhs.ne.gov, (Report ran April 15, 2011).

3. *Ibid.*

4. Early Childhood Data Coalition.

5. Average annual and average monthly payments based on NFOCUS service expenditures, not total Child Care Program expenditures.

6. Nebraska Department of Health and Human Services (DHHS).

7. Early Childhood Data Coalition.

Reading by the end of third grade matters.

But in 2011,

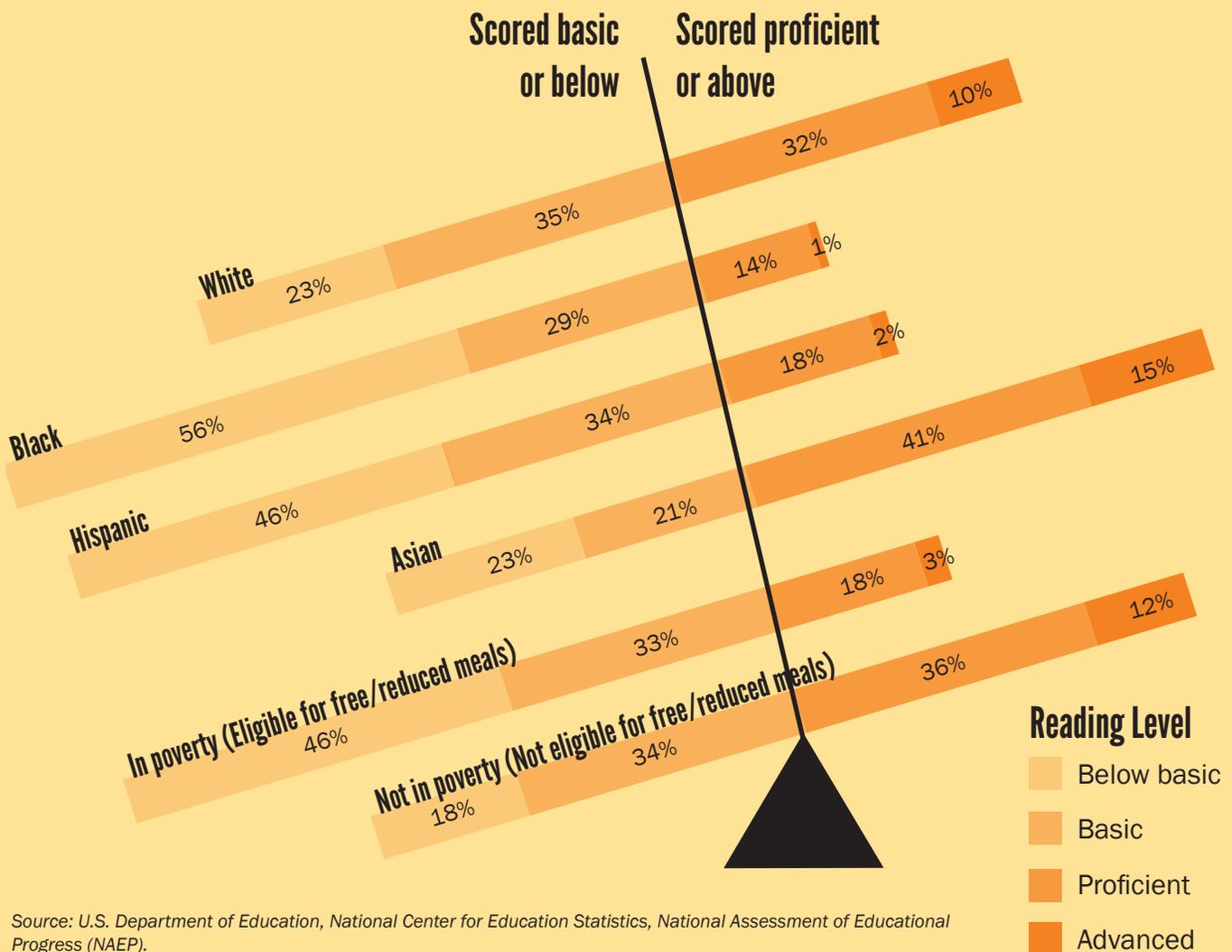
64%

of Nebraska kids didn't make the cut.¹

By the end of third grade, children should know how to read. That's because at the beginning of fourth grade, they'll begin *reading to learn*.

What does it matter if kids can't read by the end of third grade?

1. They won't understand up to half of the the printed fourth-grade curriculum.
2. Three-fourths of kids who are poor readers in grade 3 will be poor readers in high school.
3. Poor readers tend to have behavioral and social problems.
4. They're more likely to be held back.
5. They're less likely to graduate from high school.²



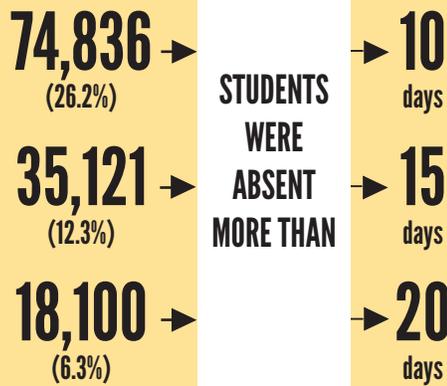
Source: U.S. Department of Education, National Center for Education Statistics, National Assessment of Educational Progress (NAEP).

1. Defined as scoring at proficient or above. Source: U.S. Department of Education, Institute of Education Sciences, National Center for Education Statistics, National Assessment of Educational Progress (NAEP).

2. Leila Fiester, Early Warning! Why Reading by the End of Third Grade Matters: A KIDS COUNT Special Report from the Annie E. Casey Foundation, *The Annie E. Casey Foundation*, (2010).

Dropouts & absences

Absences



How many students dropped out during the 2010-2011 school year?

1,180 boys
+ 757 girls

1,937 students

918

students in grades
7-12 were expelled

Source of all data in this column:
Nebraska Department of Education.

Spotlight on: Truancy

By Amor Habbab, *Voices for Children in Nebraska*

In 2010, the Nebraska Legislature passed a bill intended to address truancy. Under LB 800, Nebraska schools had to report children who had missed 20 days of school, without differentiating between excused and unexcused absences, to the county attorney. The tougher restrictions raised concern within the legal system.¹ While some educators noted success related to the bill, other complaints came from parents whose children had illnesses, chronic diseases, or were absent due to religious holidays and special education plans.²

Following these concerns, Sen. Brad Ashford, who introduced LB 800, introduced LB 933 in 2012. The new bill, he said, “would amend the law on excessive absenteeism to make the process less burdensome on families.”³ The bill passed.

Under LB 933, after a child has been absent for 20 days, the school attendance officer or any other school authority, must file a report to the county attorney accompanied by one of these statements:

- Absences are due to documented illness or some other reason determined to be an excused absence by the school;
- School needs more time to work with the student prior to intervention by the county attorney; and
- The school has used all reasonable efforts to resolve the student’s excessive absenteeism without success and recommends county attorney intervention.⁴

Under these provisions, all school districts must have a written policy on excessive absenteeism and define excused and unexcused absences. This policy should have provisions indicating how the school and the county attorney will handle a child who has been absent due to a documented illness.

Schools are expected to help the student decrease absenteeism by:

- Having one or two meetings with the child, his or her parent or guardian, and a social worker or other school staff, trying to find solutions to the problem of excessive absenteeism;
- Providing educational counseling that will help the child enroll in an alternative educational program that matches the behavioral needs of the child;
- Providing educational evaluation that can include psychological testing to analyze the causes of absenteeism; and
- Investigating the causes of excessive absenteeism by the school. If the child and his or her family need services, the school should provide a referral to community agencies.⁵

1. Stoddard, Martha. “Nebraska goes own way on truancy laws.” *Omaha World-Herald* (October 2, 2012).

2. Young, JoAnne. “Some parents unhappy with Nebraska’s truancy law, but officials say it’s working.” *Lincoln Journal-Star* (December 26, 2012).

3. Nebraska Legislative Bill 933, Statement of Intent, February 03, 2012.

4. Nebraska Legislative Bill 933.

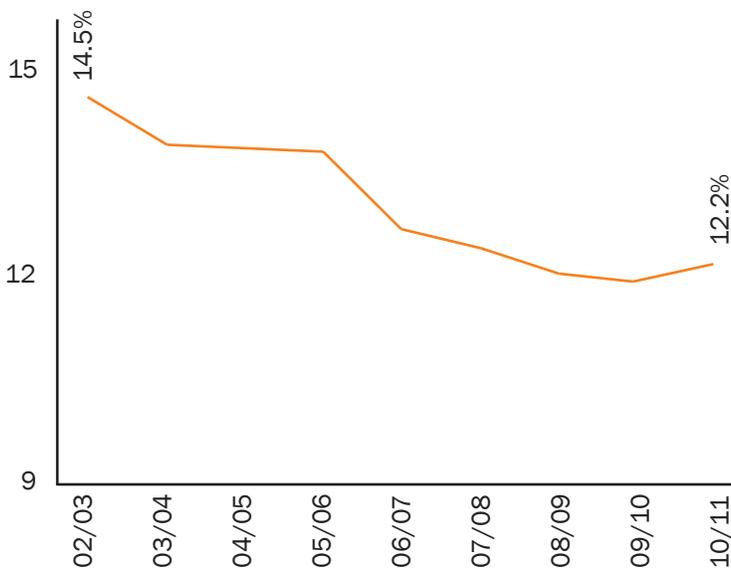
5. *Ibid.*

Student characteristics & graduation

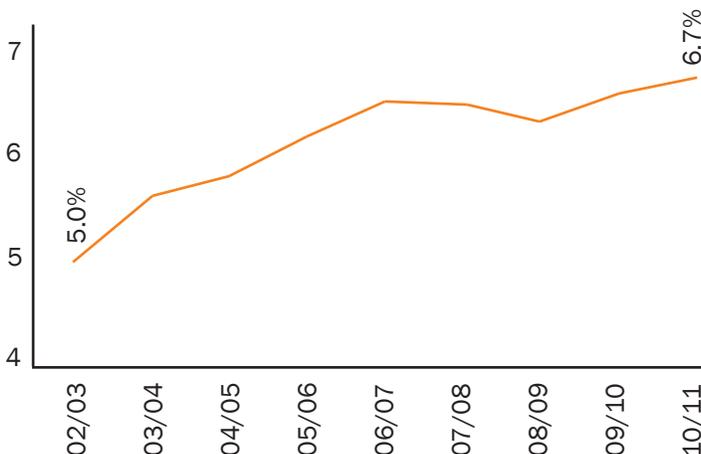
Number of students who attended home school in 2002/03 - 2010/11



Percentage of students who were highly mobile in 2002/03 - 2010/11



Percentage of students who were English language learners in 2002/03 - 2010/11



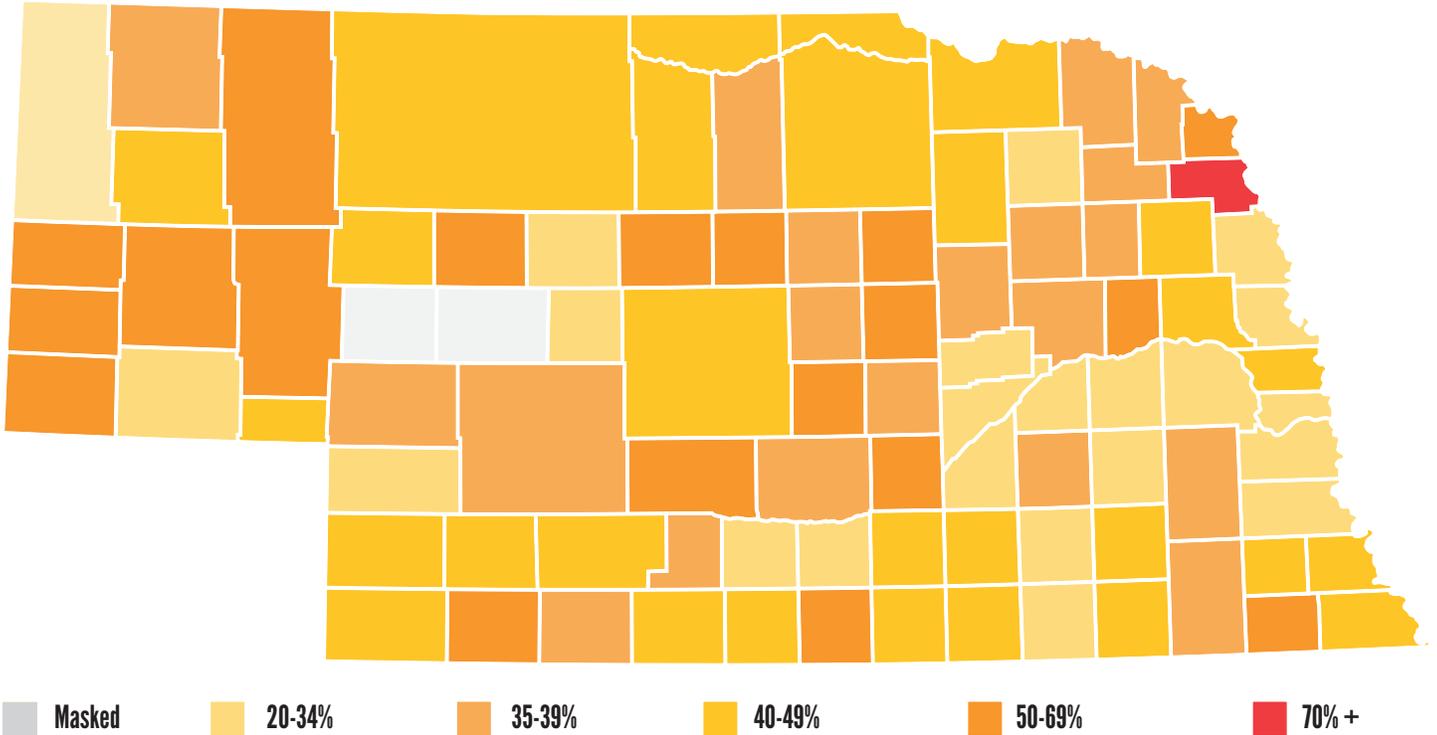
Graduation rates by race and ethnicity in 2011



Source of all data on this page:
Nebraska Department of Education.

School meals

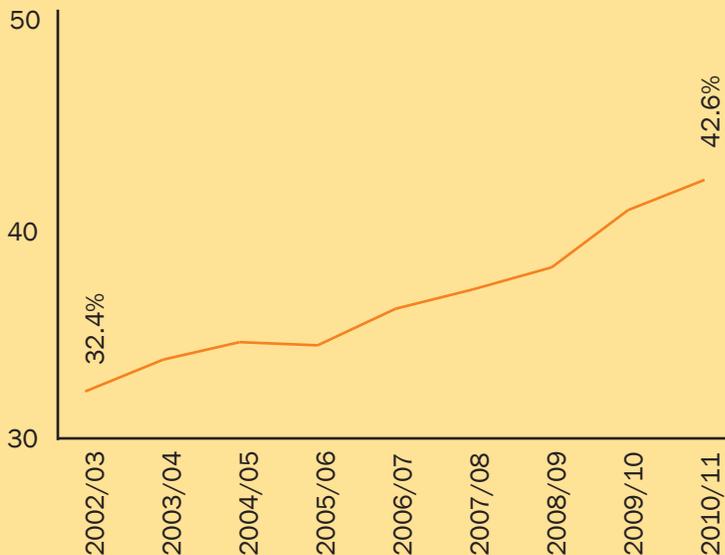
Students eligible for free and reduced meals during the 2010-2011 school year



Note: Data are masked when fewer than 10 or more than 99% of students participate.

130,814
students were eligible for free and reduced meals in 2010-2011

Percentage of students eligible for free and reduced school meals in 2002/03 - 2010/11



MEAL PROGRAM PARTICIPATION

Breakfast	Lunch
278 districts	426 districts
761 sites	1,022 sites

Source of all data on this page is Nebraska Department of Education.

**13,144 youths
were arrested
in 2011.**

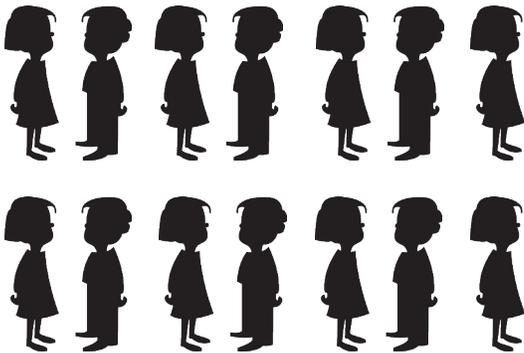
**Of those arrests,
only 196 or 1.5%
were for violent crimes.**

Our values

Keeping our children and youth safe is essential to their healthy development. Strengthening families so we prevent child abuse and neglect, acting quickly but thoughtfully to guarantee children have a safe, permanent, and loving home, and responding to the troubling behaviors of children and youth in developmentally appropriate ways are all key to ensuring every child can build a successful, independent adult life.

This section will provide data on Nebraska’s child welfare and juvenile justice systems. Data include child deaths, child maltreatment, domestic violence, out-of-home care, adoption and guardianship, juvenile arrests, detention, probation, Youth Rehabilitation and Treatment Centers (YRTCs), and juveniles in adult court.

Every day in Nebraska,



**14 children
experience some form
of maltreatment.**

Where are the data?

Substantiated maltreatment.....	40
Calls to Child Abuse & Neglect Hotline.....	41
Maltreatment victims.....	41
Entries to out-of-home care.....	42
Reasons for entering out-of-home-care.....	43
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Disproportionate minority contact.....	49
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Youth Rehabilitation and Treatment Centers.....	51
Youth treated as adults.....	52

Child deaths and maltreatment

What is child maltreatment?

Physical abuse: When a child has a “non-accidental injury”

Emotional abuse: When “parents always put blame on a child or always reject the child”

Sexual abuse: When “an adult uses a child as a part of any type of sexual act”

Emotional neglect: When “the child suffers from the parent’s not giving them chances for feeling loved, wanted, secure, and worthy”

Physical neglect: When a parent “does not provide basic needs or a safe place to live.” This includes failure to: provide enough food or clothing, follow doctor’s orders, adequately supervise a child, or provide heat in the winter.¹

Why should we be concerned?

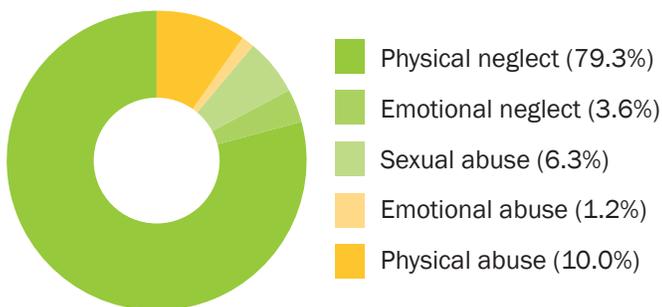
When children experience maltreatment of any kind, especially at a young age, they experience an increased likelihood of developing a host of other problems, including:

- Immediate physical health problems;
- Chronic physical ailments, including allergies and high blood pressure;
- Risk of death later in life due to heart disease, cancer, diabetes, liver disease, and emphysema;
- Impaired emotional and cognitive developmental skills, such as communication, problem-solving, and behavioral; and
- Poor educational achievement, including lower IQ scores.²

Types of substantiated maltreatment in 2011

	Gender		Total substantiated allegations
	Female	Male	
Physical neglect	2,465	2,588	5,053
Physical abuse	278	357	635
Sexual abuse	328	73	401
Emotional neglect	99	109	208
Emotional abuse	40	37	77
Medical neglect of a handicapped infant	0	1	1
Total	3,210	3,165	6,375

Types of substantiated maltreatment in 2011



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

Source of all data on this page is Nebraska Department of Health and Human Services (DHHS).

1. “What is Abuse and Neglect?” Nebraska Department of Health and Human Services (DHHS), http://dhhs.ne.gov/children_family_services.

2. “Young and Vulnerable: Children Five and Under Experience High Maltreatment Rates,” Early Childhood Highlights, Child Trends, (April 29, 2011).

30,282 calls
to the Child Abuse and Neglect Hotline
alleged maltreatment in 2011.

Do you know a child
who is being
maltreated?

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

15,175
calls were selected
for assessment

14,631*
calls were assessed
by DHHS and law
enforcement

3,410
reports were
substantiated

10,032
reports were
unfounded

466
reports were
unable to locate

697
assessments
were in process

* 26 assessments were data-entry errors.

5,239 kids experienced 6,375 instances of maltreatment in 2011.

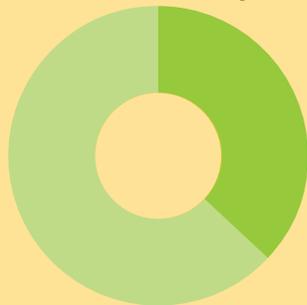
Child maltreatment victims in 2002-2011



Source of all data on this page is Nebraska Department of Health and Human Services (DHHS).

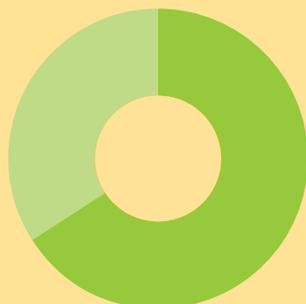
Entering the child welfare system

How do children enter our child welfare system?



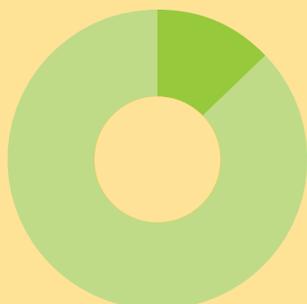
- With court involvement (63.5%)
- Without court involvement (36.5%)

What is the initial placement for court- and non court-involved children?



Court-involved children

- In home (33.5%)
- Out of home (66.5%)



Non court-involved children

- In home (86.6%)
- Out of home (13.4%)

5,926 kids
entered the child welfare
system in 2011.

That's about the size of the cities of
Ralston, Chadron, or Wayne, Nebraska.

Entries to out-of-home care by age in 2011

Age	Number	Percent
Ages 0 to 5	2,140	36.1%
Ages 6 to 10	1,186	20.0%
Ages 11 to 15	1,529	25.8%
Ages 16 to 18	1,071	18.1%

Entries to out-of-home care by race and ethnicity in 2011

Race or ethnicity	Number	Percent
Asian	30	0.5%
Black/African American	741	12.5%
Hispanic	986	16.6%
Multi-racial	289	4.9%
Native American	283	4.8%
Unknown/other/declined	209	3.5%
White, non-Hispanic	3,388	57.2%

Receiving in-home services by age in 2011

Age	Number	Percent
Ages 0 to 5	726	21.4%
Ages 6 to 10	491	14.5%
Ages 11 to 15	961	28.3%
Ages 16 to 18	1,213	35.8%

Receiving in-home services by race and ethnicity in 2011

Race or ethnicity	Number	Percent
Asian	37	1.1%
Black/African American	503	14.8%
Hispanic	601	17.7%
Multi-racial	164	4.8%
Native American	135	4.0%
Unknown/other/declined	65	1.9%
White, non-Hispanic	1,886	55.6%

Source of all data on this page is Nebraska Department of Health and Human Services (DHHS).

Entering the child welfare system

Children who entered out-of-home care due to neglect, per Foster Care Review Office



About neglect

Of the cases reviewed by the Foster Care Review Office, 60% of them were considered to be neglect cases. Though this is lower than the determination made by DHHS, it is still the most common reason cited for child removal.

More than any other type of maltreatment, neglect is related to poverty.¹ Families in poverty often cannot provide for children's basic needs.

¹ Kaplan, Caren, Patricia Schene, Diane DePanfilis, and Debra Gilmore, "Introduction: Shining a Light on Chronic Neglect," American Humane Association, www.americanhumane.org.

Reasons children entered out-of-home care in 2011

Reasons related to parents	Number	Percent
Neglect	1,955	59.7%
Parental drug abuse	949	29.0%
Housing substandard or unsafe	842	25.7%
Domestic violence	557	17.0%
Physical abuse	552	16.9%
Parental alcohol abuse	394	12.0%
Parental incarceration	318	9.7%
Parental mental health	306	9.4%
Abandonment	209	6.4%
Sexual abuse	197	6.0%
Parental abuse of sibling	193	5.9%
Parental illness or disability	162	5.0%
Death of parent	20	0.6%
Born affected by parental substance abuse	18	0.6%
Relinquishment	12	0.4%
Child's parent in foster care	9	0.3%
Reasons related to child		
Child's behaviors	603	18.4%
Child's mental health	108	3.3%
Child's drug abuse	69	2.1%
Child's disabilities	45	1.4%
Child's illness	39	1.2%
Child's alcohol abuse	25	0.8%

Source: Nebraska Foster Care Review Office.

Note: More than one reason may have been selected for each of the 3,272 children reviewed. Percentages are based on number of children reviewed. For example, the percentage of children who entered out-of-home care due to neglected was calculated by dividing 1,955 by 3,272.

Domestic violence and sexual assault

Nebraska's Network of Domestic Violence/Sexual Assault Programs includes 21 community-based and four tribal programs. The following numbers reflect the 21 community-based programs in FFY 2010-2011.

- **26,736** people received direct services, including 21,043 women, 4,381 men, and 1,312 undisclosed;
- **47,744** crisis calls came into the local programs' hotlines; and
- **64,888** shelter beds were provided to adults and children.

7,031

children and youth received direct services

Children received:

- **8,142** hours of individual support and advocacy;
- **2,295** hours of group support and advocacy; and
- **2,593** hours of additional activities.¹

Young children in the system

Substantiated maltreatment cases are more likely to involve young children. When maltreatment occurs in early childhood, it can increase the risk of growth and developmental problems, low self-esteem, and mental health problems.²

- ★ There were **15.3** substantiated cases of maltreatment per 1,000 Nebraska children ages 0 to 8 in 2011.³
- ★ Among the same age group, there were **7.1** children in out-of-home care per 1,000 Nebraska children.⁴

¹ Nebraska Domestic Violence Sexual Assault Coalition.

² Early Childhood Data Coalition.

³ Ibid.

⁴ Ibid.

Policy spotlight: Child welfare legislation in 2012

The 2012 Nebraska Legislative Session included a number of bills relating to child welfare reform. Below are bills that were signed into law.

LB 968: Ensures case file access to adoptive parents

- Allows adoptive parents to access case files, even after the adoption's finalization.

LB 820: Requires a Title IV-E waiver application, bonus payments for foster parents, and restricts child-specific placements

- Creates a Title IV-E Demonstration Project (Waiver) Committee tasked with making recommendations and progress reports to the HHS Committee of the Legislature and issue a final report by the end of 2012.
- Creates a Foster Care Reimbursement Rate Committee to develop standard rates for foster parents.
- Increases stipend for all foster homes of \$3.10 per day per child from July 1, 2012 through June 30, 2013.
- Limits child-specific placements to those related to children by blood, marriage, or adoption.

LB 821: Creates the Nebraska Children's Commission and Inspector General of Nebraska Child Welfare

- Establishes a 24-member Nebraska Children's Commission charged with creating a strategic plan for child welfare services and making recommendations on possible administrative restructuring.
- Tasks separate committees with examining policy for the following: prescribing psychotropic drugs to state wards; roles and responsibilities of the Office of Juvenile Services; Title IV-E waivers; and foster care reimbursements.
- Creates position of Inspector General of Nebraska Child Welfare.
- Clarifies requirements for private child welfare lead agencies and their contracts.

LB 949: Requires fiscal transparency for child and family programs

- Requires quarterly reporting to the Legislature on the expenditures of the Department of Health and Human Services' Division of Children and Family Services (CFS), with any movement of \$250,000 or more between programs identified.
- Requires a strategic plan from CFS detailing performance measures and ability to meet goals within its budgetary constraints.
- Establishes child welfare as a separate CFS budget item.

LB 961: Creates a privatization pilot project and establishes caseload standards

- Establishes DHHS employees as case managers for all cases by April 2012, except in the Eastern Service Area.
- Permits DHHS to contract with a lead agency and establish a pilot program with certain conditions.
- Requires HHS committee to make recommendations on any changes to the pilot project by April 2013 and introduce legislation to that effect.
- Calls for caseload standards of between 12 and 17 to be implemented by September 2012.

LB 993: Provides funds and clarifies responsibilities of child advocacy centers and multidisciplinary teams

- Clarifies role of child advocacy centers as location for forensic interviews and medical exams of maltreatment victims, as well as for coordinating multidisciplinary teams that support alleged victims.
- Requires all multidisciplinary teams to have procedures relating to handling alleged maltreatment cases.
- Mandates multidisciplinary team reviews of cases that are at high or very high risk of maltreatment.

LB 1062: Changes adoption subsidy provisions

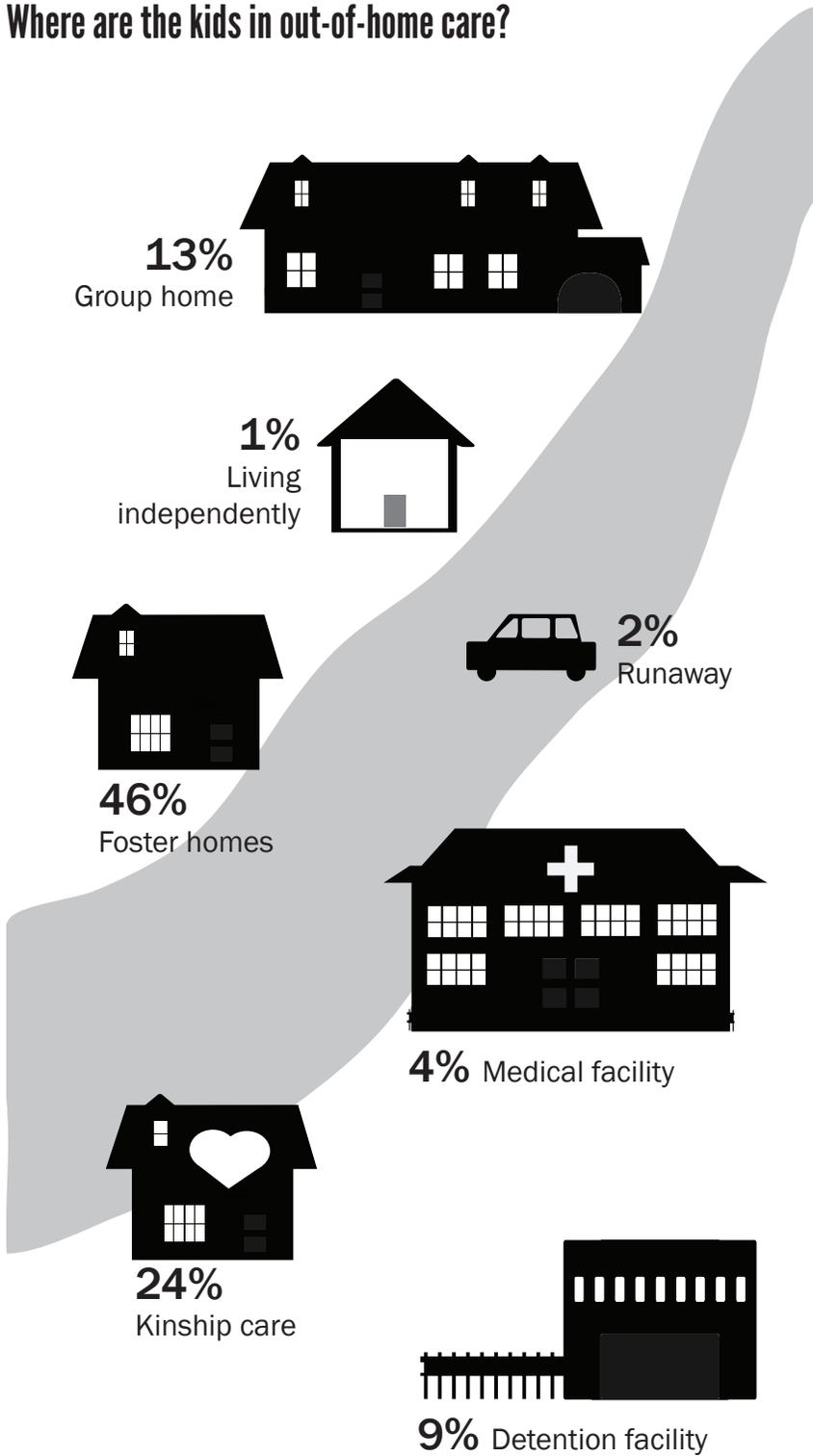
- Requires that DHHS and adoptive parents enter into a written agreement on the terms of state adoption assistance, including the naming of a guardian in case of death of the adoptive parent or parents.

LB 1160: Establishes reporting and data requirements for child welfare

- Requires specified status updates on the implementation of a new child welfare data system.
- Outlines requirements for the web-based system, mandates stakeholder surveys regarding its functioning, and specifies reporting requirements about the system
- Requires DHHS to hire a national evaluator to assess the success of privatization, to conduct a readiness assessment of DHHS and lead agencies for case management, and to review placements of children in residential treatment.

Out-of-home placements

Where are the kids in out-of-home care?



4,320 kids were in out-of-home care on December 31, 2011.

Source: Nebraska Foster Care Review Office.

Available foster placements

1,573

licensed foster homes
(51 of those belonged to relatives)

1,841

approved foster homes
(882 belonged to relatives)

Decrease in foster care homes

248 homes

A total of **3,414** approved or licensed homes were available in Nebraska as of December 31, 2011. This is a decrease of 248 (7%) possible placements from one year before.

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

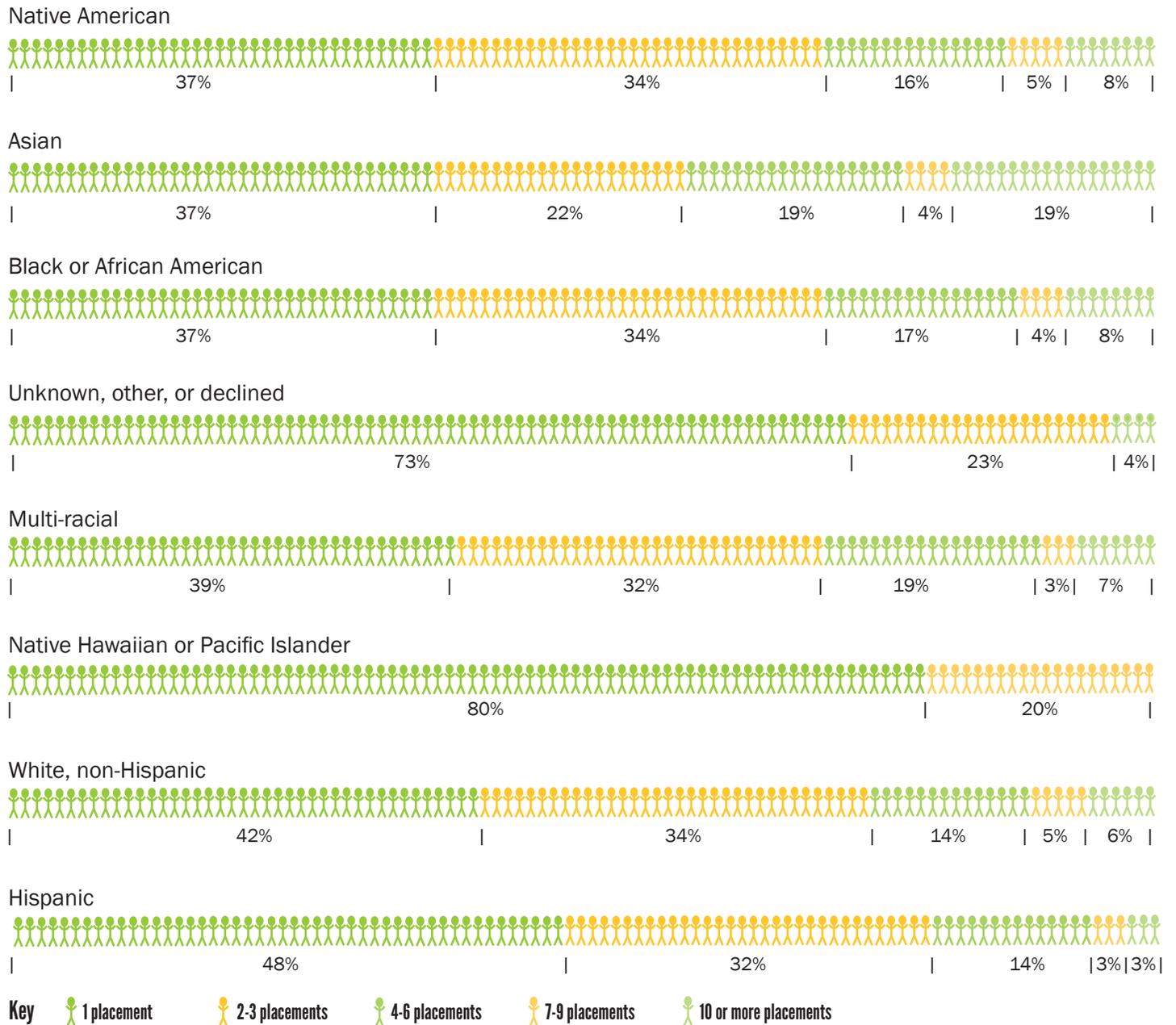
Placement stability

Multiple placements

The Nebraska Department of Health and Human Services (DHHS) counts placement changes when, for example, a child moves from one foster care setting to another. However, the following scenarios are considered temporary living situations and therefore are not counted as placement changes:

- Runaway episodes, unless the child returns to a different foster home;
- Trial home visits;
- Day or summer camps;
- Respite care;
- Hospitalizations for medical treatment, acute psychiatric episodes or diagnosis;
- Visitation with a sibling, relative, or other caretaker; or
- Initial placements in hospitals or locked facilities.

Multiple placements by race and ethnicity among children in out-of-home care on December 31, 2011



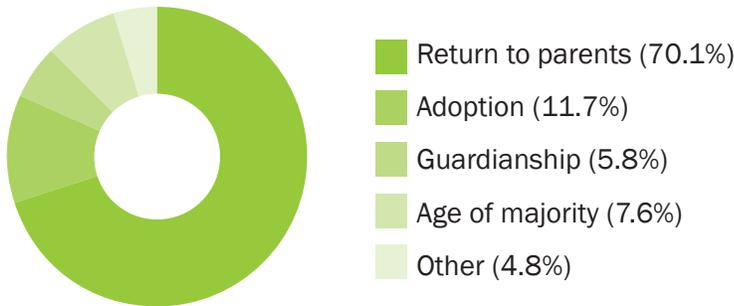
Source: Nebraska Department of Health and Human Services (DHHS).

Achieving permanency

Exiting the system

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

Exits from the child welfare system



Source: Nebraska Foster Care Review Office.

Youth who “age out” of the system, meaning they are not in a permanent home when they reach their 19th birthday, face increased risks of homelessness, poverty, lack of higher education, and other challenges. According to DHHS, in 2011, 158 youth were in out-of-home care on their 19th birthday. FCRO recorded 299 youth who aged out. According to officials from both agencies, the difference can be attributed to which youth are counted. For example, DHHS does not count youth who are on “runaway” status, in independent living, or who are with a parent or custodial parent.

Youth aging out in 2011 by gender, race, and ethnicity

Gender	Number	Percent
Female	75	47.5%
Male	83	52.5%

Race and ethnicity	Number	Percent
Asian	4	2.5%
Black/African American	43	27.2%
Hispanic	17	10.8%
Multi-racial	3	1.9%
Native American	10	6.3%
Unknown/other/declined	1	0.6%
White, non-Hispanic	80	50.6%

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

2,759
number of children who were reunified with their parents in 2011

411
number of children who were adopted

Number of state ward adoptions (2002-2011)



249
number of children who achieved guardianships in 2011

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

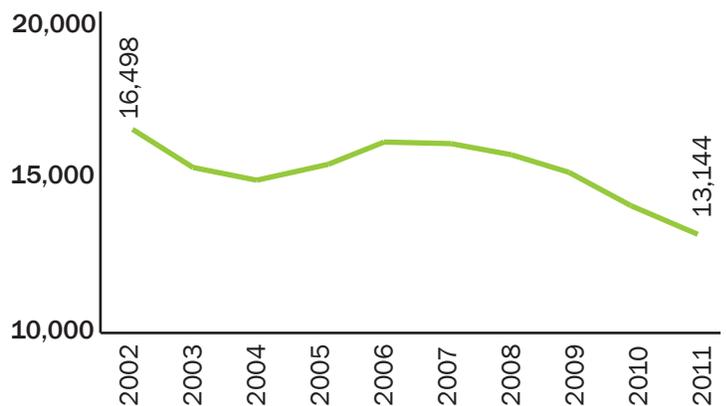
Juvenile justice

Youth arrests in 2011

	Males	Females	Total
Violent offenses			
Felony assault	73	24	97
Robbery	59	3	62
Forcible rape	30	0	30
Murder and manslaughter	6	1	7
Non-violent offenses			
Larceny theft (except motor vehicle)	1,686	1,340	3,026
All other offenses (except traffic)	1,263	637	1,900
Liquor laws	1,024	745	1,769
Misdemeanor assault	1,024	605	1,629
Drug abuse violations	1,051	268	1,319
Vandalism - destruction of property	719	158	877
Disorderly conduct - disturbing the peace	467	299	766
Runaways	221	175	396
Burglary - breaking or entering	252	17	269
Curfews and loitering law violations	134	90	224
Driving under the influence	115	48	163
Sex offenses (except forcible rape and prostitution)	114	15	129
Weapons - carrying, possessing, etc.	110	7	117
Stolen property - buy, receive, possess, conceal	97	19	116
Motor vehicle theft	75	20	95
Arson	44	17	61
Fraud	35	22	57
Offenses against family and children	12	5	17
Forgery and counterfeiting	9	4	13
Embezzlement	1	3	4
Vagrancy	0	1	1
Prostitution and commercialized vice	0	0	0
Other	168	28	196
Total	8,621	4,523	13,144

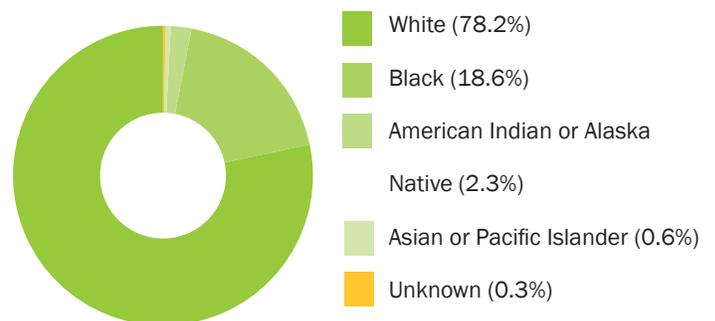
Source of all arrest data on this page is Nebraska Commission on Law Enforcement and Criminal Justice.

Youth arrests in 2002-2011

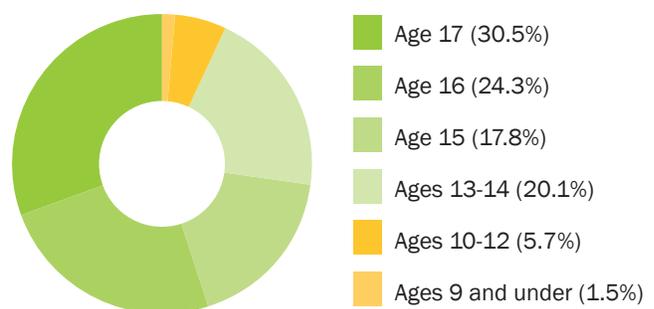


13,144 youths were arrested in 2011.
Of those arrests, only 196 or 1.5% were for violent crimes.

Youth arrests by race in 2011



Youth arrests by age in 2011



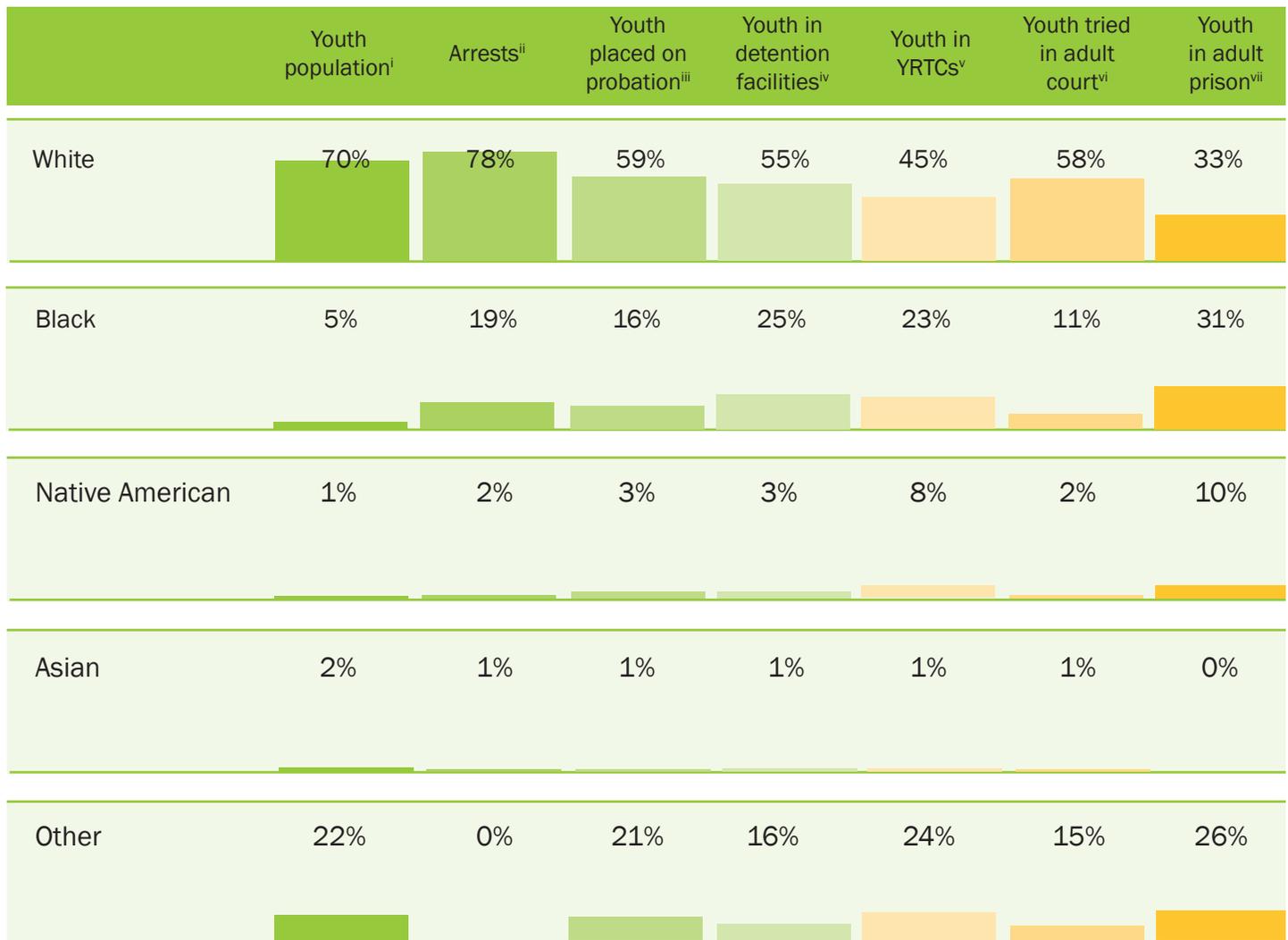
Disproportionate minority contact

Disproportionate minority contact (DMC)

Despite the promise of equal protection under the law, national research has shown that racial bias has contributed to an overrepresentation of youth of color 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

Youth interaction with the justice system by race in 2011



i. The "Teen population" in this figure comprises youth in Nebraska ages 10 through 17 in 2010, according to the 2010 Decennial Census Tables P12A-P12I. "Other" includes, of all teens, 4% of two or more races, 12% Hispanic, and 6% other.

ii. Nebraska Commission on Law Enforcement and Criminal Justice.

iii. Nebraska Office of Probation Administration. Includes 1,078 Hispanic youths.

iv. Analysis based on data from individual facilities including Lancaster County Detention Center, North East Nebraska Juvenile Services, Scotts Bluff County Detention Center, Douglas County Youth Center, and the Patrick J. Thomas Juvenile Justice Center.

v. SFY 2010/11 Annual Reports for Kearney and Geneva Youth Rehabilitation and Treatment Centers. Other represents 19.4% Hispanic youths and 4.4% of another race.

vi. JUSTICE, Administrative Office of the Courts. Other represents 555 Hispanic youths and 7 youths of another race. An additional 14% of youths were of an unknown race.

vii. Nebraska Department of Corrections. Other represents Hispanic youth.

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

Detention & probation

Youths ages 17 & under held in juvenile detention facilities by race in 2011

	Lancaster County Detention Center (Lancaster County)	North East Nebraska Juvenile Services (Madison County)	Scotts Bluff County Detention Center (Scotts Bluff County)	Douglas County Youth Center (Douglas County)	Patrick J. Thomas Juvenile Justice Center (Sarpy County)
Female	28.1%	27.9%	Not available	28.6%	26.6%
Male	71.9%	72.1%	Not available	71.4%	73.4%
White	57.0%	60.5%	74.5%	35.7%	79.3%
Black	22.9%	6.6%	3.1%	49.9%	6.7%
American Indian/ Alaska Native	3.2%	7.1%	22.4%	1.5%	0.0%
Asian/Pacific Islander	2.0%	0.3%	0.0%	0.3%	0.0%
Other	1.5%	0.0%	0.0%	0.4%	0.2%
Hispanic	15.6%	25.5%	*	12.2%	13.8%
Total count	1,390	605	98	1,194	643

Sources: Individual detention centers.

* Of the 98 youths of all races, 32 were of Hispanic origin.

Youth placed on probation for felony and misdemeanor offenses and released (2011)

5,229 youths in all were supervised on probation. **3,100** youths were placed on probation: 298 for felony offenses; 2,314 for misdemeanors; 776 for status offenses; and 138 for city ordinances. **1,820** youths were released from probation.

Court-ordered services for youth sentenced (2011)	Placed on probation for felony offenses		Placed on probation for misdemeanor offenses		Released from probation	
	Number	Percent	Number	Percent	Number	Percent
Treatment		23.5%				
Education		20.5%				
School Intervention Programs		11.3%				
Evaluation		10.3%				
Behavioral programming		9.3%				
Stable Employment/ Education		8.0%				
Monitoring		7.7%				
Cognitive Groups		4.6%				
Juvenile Offenders Program		1.9%				
Positive Support Group		1.5%				
Substance Abuse Treatment		0.8%				
Victim Offender Mediation		0.4%				
Juveniles Who Sexually Harm		0.1%				
Total youth		4,312				
Gender						
Male	248	83.2%	1,512	65.3%	1,122	61.6%
Female	50	16.8%	802	34.7%	698	38.4%
Race						
Native American	15	5.0%	59	2.5%	27	1.5%
Asian	3	1.0%	23	1.0%	16	0.9%
Black	45	15.1%	298	12.9%	231	12.7%
White	191	64.1%	1,418	61.3%	1,172	64.4%
Other	44	14.8%	516	22.3%	374	20.5%
Ethnicity						
Hispanic	43	14.4%	505	21.8%	363	19.9%
Non-Hispanic	255	85.6%	1,809	78.2%	1,457	80.1%
Total	298		2,314		1,820	

Youth rehabilitation and treatment centers (YRTC)

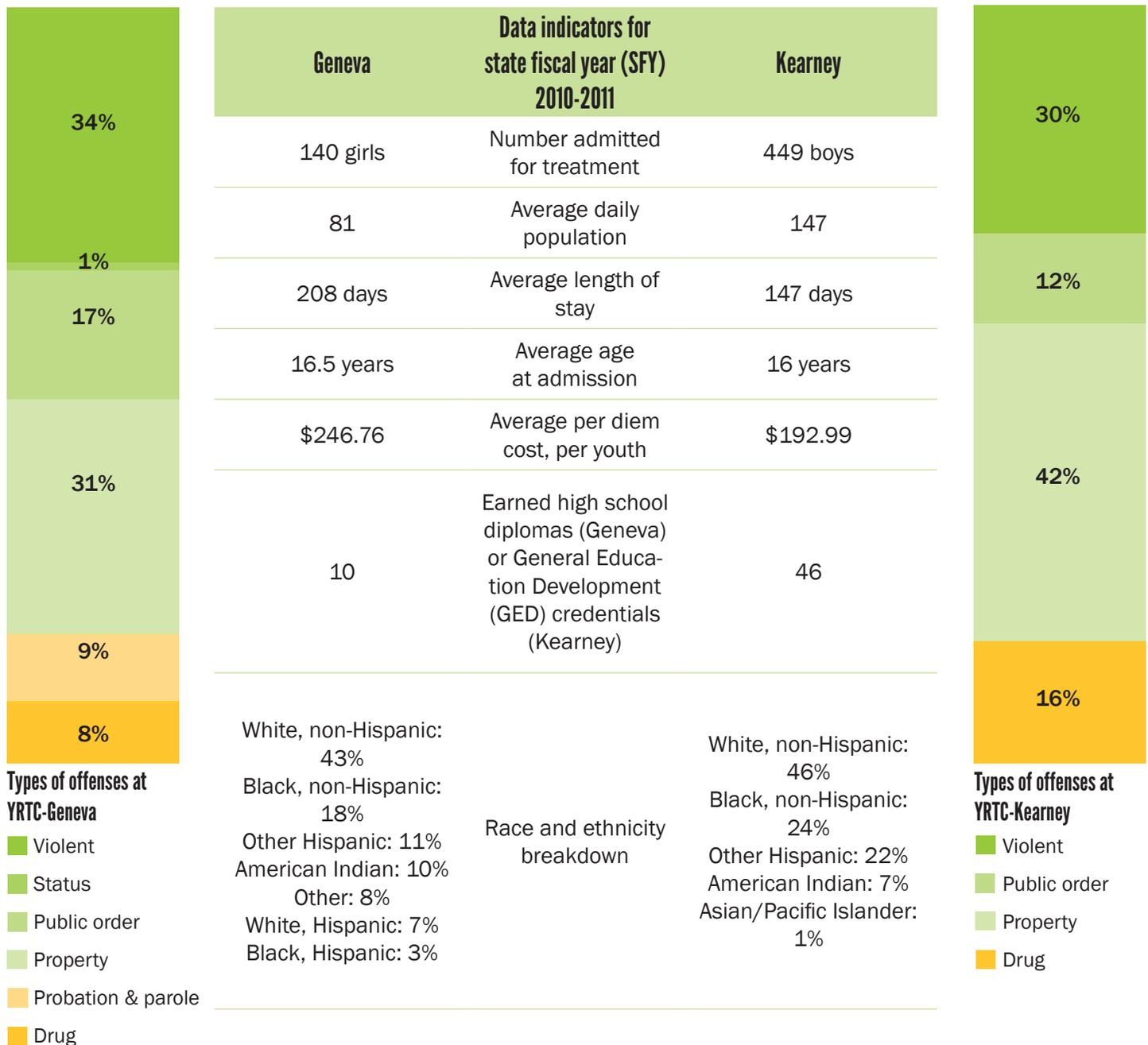
Our courts may sentence youth, for a variety of offenses, to one of two Youth Rehabilitation and Treatment Centers in Nebraska. YRTC Kearney houses young men, while YRTC Geneva holds young women.

Like all placements and services ordered under Nebraska’s juvenile code, the goal in placing youth at these institutions should be their rehabilitation. Indeed, the mission statements for both institutions support this goal. Both aim to rehabilitate young offenders so

that the youth may re-enter their communities and lead productive lives.

However, as with many other juvenile services across the nation, quality services and rehabilitation are not guaranteed. Evidence suggests that such institutions do not work and may even be dangerous and inefficient. The table and chart on this page provide more information about the youth served at each facility.

YRTC-Geneva and YRTC-Kearney



Sources: SFY 2010/11 Annual Reports for Kearney and Geneva Youth Rehabilitation and Treatment Centers.

Youth treated as adults

Adult court and transfers to juvenile court by gender and age in 2011

	Youth tried in adult court	Youth transferred to juvenile court
Male	69.9%	66.3%
Female	26.4%	33.3%
Unknown	3.7%	3.4%
<hr/>		
12 and under	0.6%	0.1%
13-15	8.2%	9.2%
16-17	90.4%	90.7%
<hr/>		
Total youth	3744	795

Source: JUSTICE, Administrative Office of the Courts.

In 2011, the cases of 4,169 Nebraska youth were filed in adult court - down from 5,338 in 2009. About one out of five cases, or 19%, in 2011 were then transferred to juvenile court.

Research consistently indicates that treating children as adults in the just system neither works as a deterrent, nor does it prevent or reduce violence. The Centers for Disease Control and Prevention has found that the “transfer of youth to the adult criminal system typically results in greater subsequent crime, including violent crime” among youth in the adult system.¹

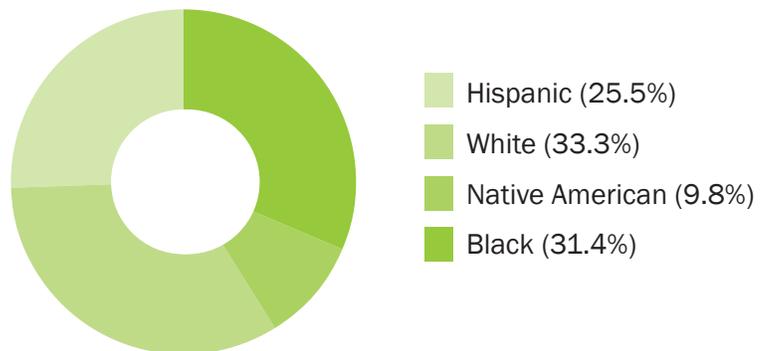
Youth processed through the adult system

Young brains are different

There are fundamental differences between the culpability of youth and adults who have committed crimes. Adolescents do not have the same capacity as adults to understand long-term consequences, control impulses, handle stress, and resist peer pressure. Brain-development research has revealed the systems of the brain which govern “impulse control, planning and thinking ahead are still developing well beyond age 18.”²

While youth must accept responsibility and the consequences of their actions, our justice systems must acknowledge the difference between youth and adults to promote public safety and to improve the odds of success for youth in the system.

In 2011, 51 youths were processed through the adult system and housed in a Nebraska Correctional Youth Facility. This is a decrease from 90 youths in 2010.³ Youth of color are overrepresented relative to the general youth population.



In addition, there were 147 youths ages 17 and under who were housed in adult detention facilities in 2011. The racial and ethnic breakdown includes 128 white, 11 black, 5 Native American, 2 unknown, and 1 Hispanic youths.⁴

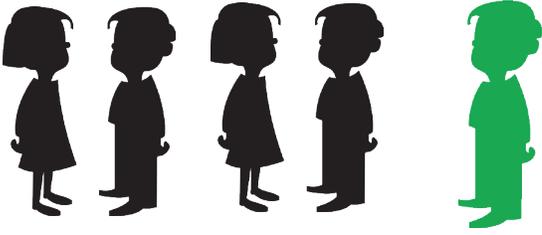
1. “Effects on Violence of Laws and Policies Facilitating the Transfer of Youth from the Juvenile to the Adult Justice System,” *Morbidity and Mortality Weekly Report*, Vol. 56, No. RR-9, Centers for Disease Control and Prevention, www.cdc.gov.

2. “Less Guilty by Reason of Adolescence,” *MacArthur Foundation Research Network on Adolescent Development and Juvenile Justice*, Issue Brief No. 3, www.adjj.org.

3. Nebraska Department of Correctional Services.

4. Nebraska Commission on Law Enforcement and Criminal Justice.

Economic stability



Nearly 1 in 5 Nebraska kids live in poverty

75% of ADC recipients are kids

Our values

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

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

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

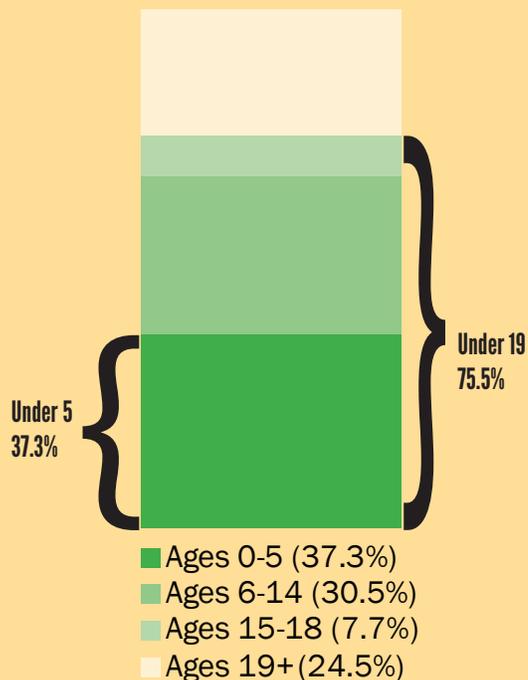
This section will provide data on Nebraska poverty, family composition, and utilization of public programs including cash assistance, homelessness assistance, and nutrition assistance.

Where are the data?

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Family structure and poverty.....	55
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Aid to Dependent Children

Aid to Dependent Children (SFY 2011)



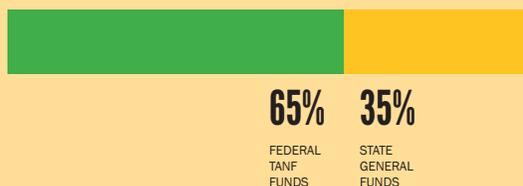
ADC Recipients by Age

17,197 Average monthly number of children receiving ADC

8,669 Average monthly number of families receiving ADC

\$320.97 Average monthly ADC payment per family

\$33,389,382 Total ADC Payments (SFY 2011) (Includes both state and federal funds)



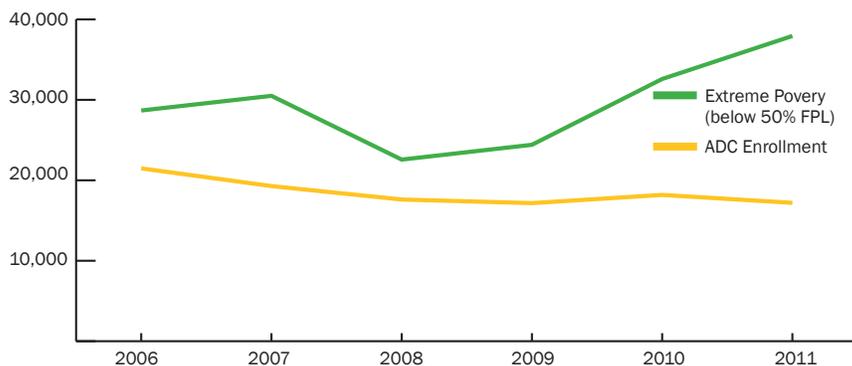
Source: Financial Services, Operations, Nebraska Department of Health and Human Services (DHHS).

Is Nebraska's safety net catching families in need?

Aid to Dependent Children (ADC), Nebraska's cash welfare program, is intended to support very low-income families with children struggling to pay for basic needs. According to the Nebraska Department of Health and Human Services (DHHS), ADC payments are often the only form of income for participating families.¹

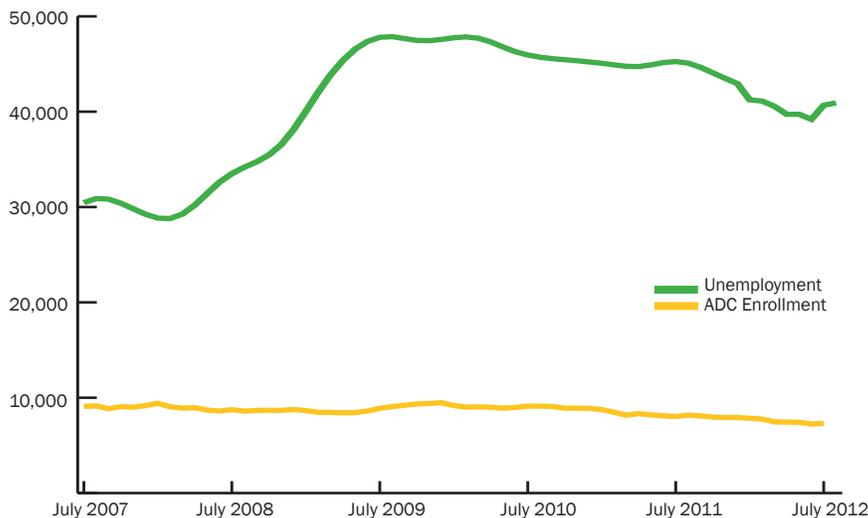
The charts below explore whether ADC adequately reaches children and families in need. In the first chart, the number of children in extreme poverty over time is compared with the number of children receiving ADC. The gaps between extreme poverty and unemployment and ADC enrollment suggest that Nebraska's safety net has not kept pace with growing needs.

Children receiving ADC vs. children in extreme poverty (2006-2011)



Children in extreme poverty data are from U.S. Census Bureau, American Community Survey 1-Year Estimates, Table B17024. ADC numbers are from Financial Services, Operations, Nebraska Department of Health and Human Services (DHHS).

ADC enrollment and unemployment (2007-2012)



Unemployment figures are from the Bureau of Labor Statistics, Local Area Unemployment Statistics. ADC numbers are from Financial Services, Operations, Nebraska Department of Health and Human Services (DHHS).

1. "Aid to Dependent Children," DHHS, <http://dhhs.ne.gov>.

Does family structure matter?

Family structure and poverty



46.9%

of children living in a single-mother households are in poverty



8.6%

of children living in a married-couple household are in poverty



19.8%

of children living in a single-father households are in poverty

Source: U.S. Census Bureau, 2011 American Community Survey, Table B17006.

Grandparents as caregivers



Just over 20,000 Nebraska kids live with a grandparent who is the head of household. In 12,393 such cases, grandparents are the primary caregiver for their grandchildren.¹

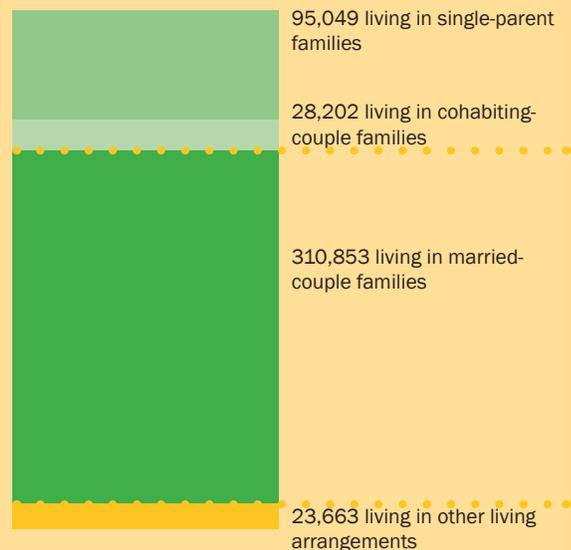
These living arrangements can help kids remain connected to their families if their own parents are unable to care for them, but grandparent caregivers may face special challenges:

- Financial challenges from living on a fixed income;
- Health problems that may arise or be exacerbated by the stress of unexpectedly taking in a child;
- Feelings of guilt and shame regarding their family circumstances; and
- An emotional toll due to managing relationships with their adult children while caring for their grandchildren.²

1. U.S. Census Bureau, 2011 American Community Survey, Table B10002.

2. The Annie E. Casey Foundation, *Stepping up for kids: What government and communities should do to support kinship families*, (2012).

Children by household living arrangement



Source: U.S. Census Bureau, 2010 American Community Survey Public Use Microsample (PUMS) data, prepared by the Population Reference Bureau.

Family tax credits

137,250 families claimed \$291,337,000 in federal Earned Income Tax Credit (EITC).

133,570 families claimed \$28,626,000 in state EITC.

153,460 families claimed \$210,345,000 in federal Child Tax Credit.

53,300 families claimed \$26,327,000 in federal Child and Dependent Care Credit.

57,313 families claimed \$12,643,000 in state Child and Dependent Care Credit.

Source: Nebraska Department of Revenue.

Divorce & poverty rates

Divorce and custody in 2011

12,047 couples got married, and
6,603 got divorced.



6,251 kids were affected by divorce

- 2,156 times** Custody was awarded to the mother
- 348 times** Custody was awarded to the father
- 876 times** Custody was awarded jointly
- 85 times** Another arrangement was made

Child Support

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).

- 107,135** cases received CSE assistance.
- 99,396** were non-ADC cases.
- 7,739** were ADC cases.

\$209,931,008 Amount of child support collected through CSE

\$209,475,189 Amount of child support disbursed through CSE

In the United States, there is an ongoing relationship between race and ethnicity and poverty rates, with people of color experiencing higher rates of poverty. Poverty rates in Nebraska continue to reveal significant disparities based on race and ethnicity. These disparities grew out of a history of systemic barriers to opportunity for people of color and still have a presence in our society and institutions today. We need to continue working to address these barriers in order to ensure that all children have the best opportunity to succeed.

Nebraska poverty rates (2007 and 2011)

	2007	2011	% change
Poverty rate for children	14.9%	18.1%	↑ 21.6%
Poverty rate for families	8.2%	9.1%	↑ 10.8%
Poverty rate for all persons	11.2%	13.1%	↑ 17.0%

Source: U.S. Census Bureau, 2009-2011 American Community Surveys, Tables B17001, B17010 and B17001, respectively.

Nebraska poverty rates by race and ethnicity* (2011)

Race	Child poverty rate (17 and under)	Overall poverty rate
White Alone	14.4%	11.0%
Black or African American Alone	40.2%	29.7%
American Indian and Alaska Native Alone	45.0%	40.2%
Asian Alone	37.7%	23.5%
Some Other Race Alone	37.5%	31.1%
Two or More Races	27.2%	24.5%

Ethnicity

White alone, not Hispanic or Latino	11.40%	9.79%
Hispanic or Latino	36.07%	28.49%

Source: U.S. Census Bureau, 2011 American Community Survey, Tables C17001A - C17001I.

*Racial and ethnic groups are based on those used by the U.S. Census Bureau.

Making ends meet

Nebraskans pride themselves on being hard-working people. In 2011, 95% of children in our state had at least one parent in the workforce.¹ Unfortunately, having a 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, defined as 40 hours a week.

Minimum wage in Nebraska is \$7.25 an hour.² If both parents work at minimum wage, their monthly income will be \$2,320. This puts them just above the federal poverty level of \$1,862.50 but below the Family Economic Self-Sufficiency Standard (FESS), a measure used to show what a family needs to earn to meet its basic needs without any form of private or public assistance. For a family of four, the FESS is \$2,924.14 a month.³ That requires an hourly wage of \$8.86 per parent – a rate higher than minimum wage.

For families who struggle to make ends meet, Aid to Dependent Children (ADC) provides minimal assistance. The maximum amount a family of four may receive from ADC per month is \$435, far below what's needed to pay for a family's basic needs or even to help the family rise above the poverty line.⁴

1. U.S. Census Bureau, 2011 American Community Survey, Table B23008.

2. United States Department of Labor, "Minimum Wage Laws in the States - January 1, 2012," <http://www.dol.gov>.

3. FESS was calculated using an average of 2010 figures for a two-adult, two-child family, adjusted for 2011 inflation. Data used to calculate information is courtesy of Nebraska Appleseed Center for Law in the Public Interest. For more information, please see the Kids Count in Nebraska 2011 Report or Nebraska Appleseed's web site, www.neappleseed.org.

4. ADC maximum payment amount provided by Nebraska Department of Health and Human Services.



2011 Federal Poverty Level Guidelines

Family Size	100%*	133%	150%	185%	200%	250%	300%	400%
1	\$10,890	\$14,483	\$16,335	\$20,146	\$21,780	\$27,225	\$32,670	\$43,560
2	14,710	19,564	22,065	27,213	29,420	36,775	44,130	58,840
3	18,530	24,644	27,795	34,280	37,060	46,325	55,590	74,120
4	22,350	29,725	33,525	41,347	44,700	55,875	67,050	89,400
5	26,170	34,806	39,255	48,414	52,340	65,425	78,510	104,680
6	29,990	39,886	44,985	55,481	59,980	74,975	89,970	119,960
7	33,810	44,967	50,715	62,548	67,620	84,525	101,430	135,240
8	37,630	50,047	56,445	69,615	75,260	94,075	112,890	150,520

Source: Georgetown University Health Policy Institute: Center for Children and Families.

*For families with more than 8 people, add \$3,820 for each additional member.

Housing and homelessness

Homelessness

While homelessness certainly exists in Nebraska, exact numbers of individuals affected are difficult to capture. The Nebraska Homeless Assistance Program (NHAP) serves individuals who are homeless or near homeless. Not all homeless people receive services.

In 2011, NHAP served:

20,059
households

7,301
Families with one or two adults and at least one child

425
Children ages 17 and under

22
Families headed by a single parent age 17 or under

14
Families headed by two parents ages 17 or under

Source: Nebraska Homeless Assistance Program, Division of Children and Family Services, DHHS.

Place matters

Safe and loving homes are important to children's healthy development. When home feels unstable, children often struggle to keep up in school, have good relationships with their peers, and behave appropriately.¹

Living in high-poverty areas can exacerbate feelings of instability.² Expensive housing, relative to a family's income, also can create feelings of instability as adults in the family work to make ends meet.

27,000 children
live in high-poverty areas.³

What does it mean?
High-poverty areas are places where 30% or more of the local population are poor.

Why does it matter?
Kids who live in areas with a high poverty concentration – regardless of their own economic circumstances – are at increased risk of having problems in school, getting involved with gangs or other negative peer groups, and failing to attain successful employment.

127,000 children
live in households with a high housing cost burden.⁴

What does it mean?
Families with a high housing cost burden spend more than 30% of their pre-tax income on their rent or mortgage.

Why does it matter?
When rent or mortgage payments make up 30% or more of a family's income, the family is likely to struggle to afford other basic needs. This is particularly true for low-income families.

1. The Annie E. Casey Foundation, 2012 KIDS COUNT Data Book (2012).

2. Ibid.

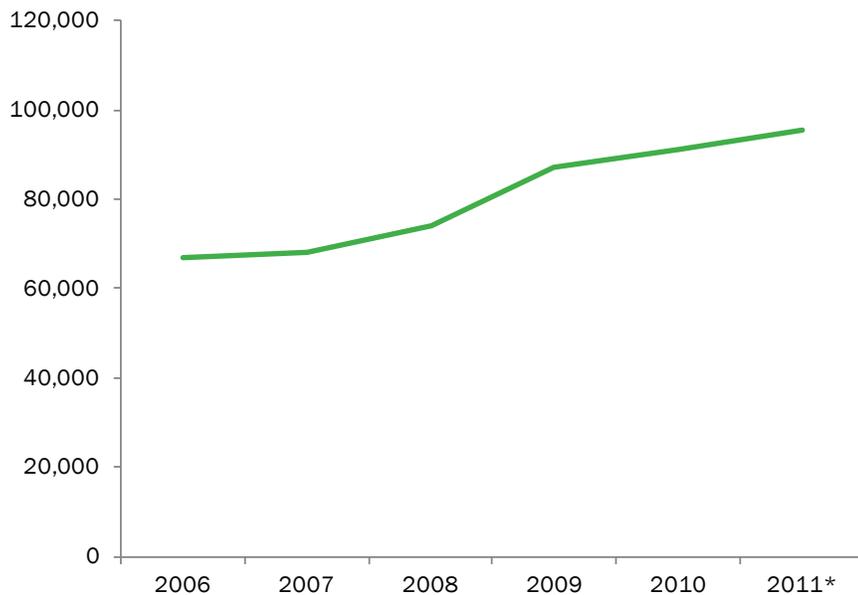
3. U.S. Census Bureau, American Community Survey, as reported by The Annie E. Casey Foundation's 2012 KIDS COUNT Data Book.

4. Ibid.



1 in 8 Nebraska households don't know where their next meal is coming from.¹

Food insecure households in Nebraska (2006-2011)



With poverty rates remaining high in recent years, it is not surprising that many families with children struggle to put food on the table. Approximately 95,500 households in Nebraska were food insecure in 2011—meaning they didn't know where their next meal was coming from.²

Source: National and State Program Data, Food Research & Action Center.

* USDA, Household Food Security in the United States in 2011 <http://www.ers.usda.gov/media/884525/err141.pdf>.

1. "Household Food Security in the United States in 2011," USDA, <http://www.ers.usda.gov>.

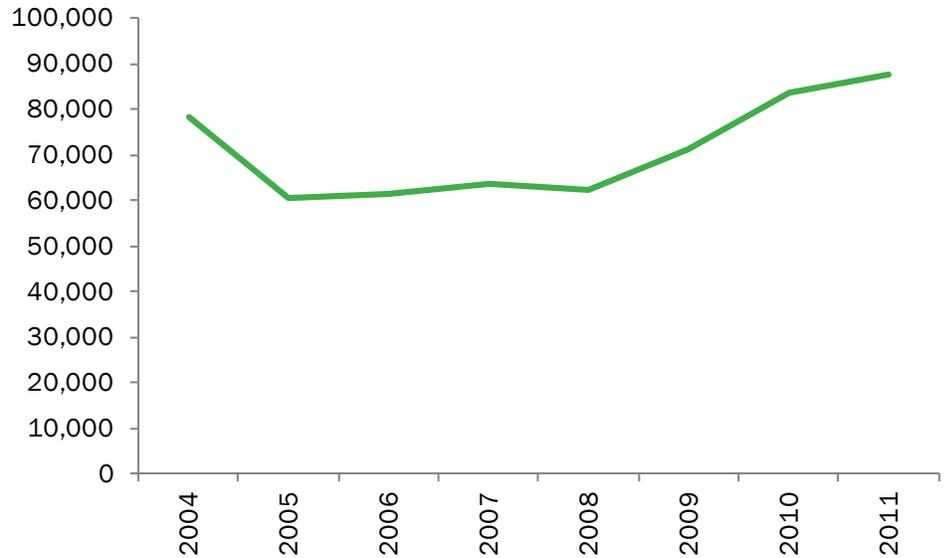
2. *Ibid.*

Supplemental Nutrition Assistance Program

The Supplemental Nutrition Assistance Program (SNAP) is one of the most effective anti-poverty programs in the United States.

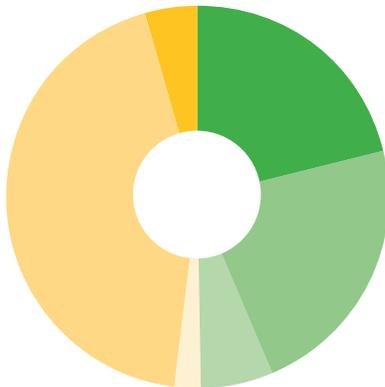
- Nationwide in 2010, SNAP moved **3.9 million** households above the poverty line.¹
- Among children, SNAP lifted **1.7 million** out of poverty.²

Average number of eligible children for SNAP in June (2004-2011)



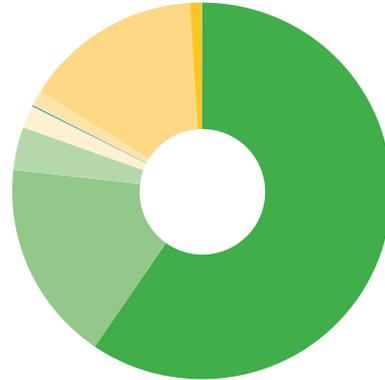
Source: Financial Services, Operations, Nebraska Department of Health and Human Services (DHHS).

SNAP participants by age (June 2011)



- Ages 0-5 (21.3%)
- Ages 6-14 (22.4%)
- Ages 15-18 (6.0%)
- Ages 19-20 (2.3%)
- Ages 21-64 (43.6%)
- Ages 65+ (4.4%)

SNAP participants by race (June 2011)



- White (59.6%)
- Black/African American (17.2%)
- American Indian/Alaskan Native (3.7%)
- Asian (1.9%)
- Native Hawaiian or other Pacific Islander (0.1%)
- More Than One Race (1.3%)
- Other (15.2%)
- Unknown (1.0%)

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

1. Building a Healthy America: A Profile of the Supplemental Nutrition Assistance Program, USDA, Food and Nutrition Service, Office of Research and Analysis, (April 2012).

2. Ibid.

Women, Infants, and Children (WIC)

Of the monthly average of **42,910** WIC participants in 2011:

- 9,431 were women;
- 9,922 were infants; and
- 23,557 were children

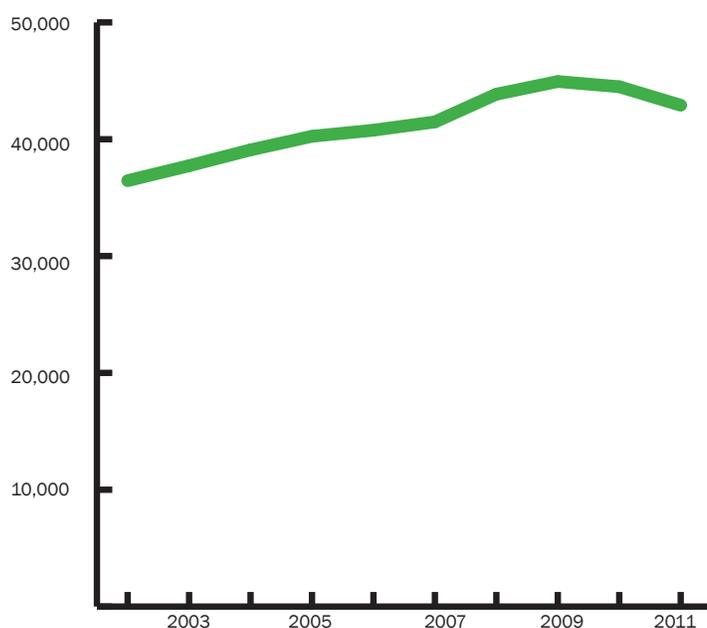
105 Clinics report participating in WIC.

38.5% of babies born in 2011 were enrolled in WIC.

\$64.74 was the average cost of food benefits and nutrition services for a pregnant woman.

More than 1 in 3 new babies were enrolled in WIC in 2011

Average Monthly WIC Participants (2002-2010)



Source: Nebraska Department of Health and Human Services (DHHS).
* These data reflect average participation per month during the fiscal year.

Commodity Supplemental Food Program (CSFP)

Eligibility for the USDA Commodity Supplemental Food Program (CSFP) includes women who are pregnant, breast-feeding and postpartum, or families with infants and children up to age six. Participants must be at or below 185% of poverty. Each year, the number of individuals served and funds allocated are determined by the USDA.

The program provides surplus commodity foods such as non-fat dry milk, cheese, canned vegetables and fruits, bottled juices, pasta, rice, dry beans, peanut butter, infant formula, and cereal.

832 Monthly average number of women, infants, and children served by CSFP

9,984 Monthly average number of food packages distributed

93 Number of counties served

21 Number of distribution sites

Spotlight on: ACCESSNebraska

By Courtney VanDeVelde, Voices for Children in Nebraska

In 2010, the Department of Health and Human Services in Nebraska (DHHS) switched to a phone-and internet-based system for applications and maintenance of public benefit programs called ACCESSNebraska. Upon the implementation of ACCESSNebraska, there was a hope that it would “modernize and streamline the way the state provides benefits.”¹

The original implementation included closing down local benefits offices and replacing them with four call centers in Lincoln, Fremont, Scottsbluff, and Lexington. The intent was to save a projected \$5 million in federal and state funds in part through the elimination of an estimated 225 staff members.²

Those most affected by the change included populations with limited access to technology, disabled individuals, and the elderly, all of whom have potential for complex benefit cases. Complaints included long waits on hold, lost documents, lack of continuity of staff, and the loss of personal contact with caseworkers who understood their cases. Community partners, consisting of non-profit service providers working with populations who access benefits, also raised concerns about increased demands placed on them in assisting clients and a lack of support from DHHS.

In 2012, Nebraska did not receive recognition from the federal government for their performance in administering the Supplemental Nutrition Assistance Program (SNAP) for the first time in nine years. Previously, Nebraska ranked among the top states in performance for administering food stamps, making the fewest errors in denying, terminating, or suspending benefits. After the switch to the new system, there were more overpayments and underpayments of benefits in fiscal year 2011, which may be in part a result of the changes made with ACCESSNebraska.³

Due to concerns about the new system, Senator Annette Dubas introduced LB 825 to modify the program. The bill requires that DHHS make in-person benefit assistance available, allows clients to request a dedicated caseworker, and provide more assistance to community partners. The bill was approved by the Legislature and implemented in September 2012. At the time of writing, reports from DHHS indicate that additional staff have been added or retained and in-person services have been restored in many offices around the state. While there is still work to be done to ensure that the system is working for Nebraskans, LB 825 provided a good first step toward helping vulnerable Nebraskans access public benefit programs.

¹ Martha Stoddard. “AccessNebraska has its critics.” *Omaha World-Herald*. October 18, 2011. Retrieved from <http://www.omaha.com>

² *Ibid.*

³ “Lost bonus is a signal.” *Omaha World-Herald*. August 2, 2012. Retrieved from <http://www.omaha.com>

County data

About county data

As we seek to tell the “whole story” about how children in Nebraska are doing, we must check in with child well-being indicators over time. In previous issues of the *Kids Count in Nebraska Report*, county data were presented in a single chart for a single timeframe. This year, each indicator receives a single page with the most current available data and comparison data from five years ago.

The saying goes, “What gets measured, gets changed.” As child advocates strive to improve lives for children in Nebraska, it is important to note where improves have occurred - or not. These new county data pages provide one more tool for noting whether our state is doing better by its children than five years ago.

Where are the data?

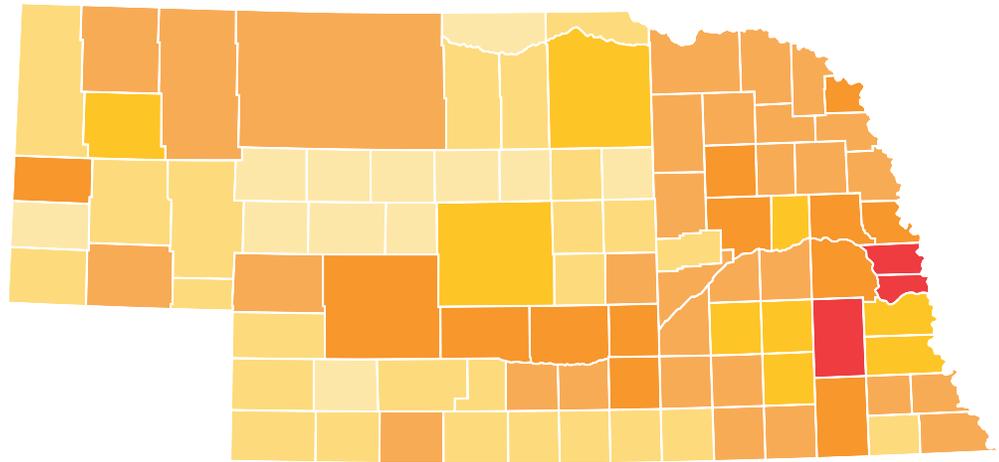
Total population	64
Children 19 and under	65
Children under 5.....	66
Children of color 19 and under	67
Percent of related children 17 and under in poverty.....	68
Percent of related children under 5 in poverty.....	69
Percent of children of color 17 and under in poverty.....	70
Percent of related children 17 and under in single-parent household in poverty.....	71
Percent of related children 17 and under in married-couple household in poverty.....	72
Percent of mothers with children under 6 in the labor force.....	73
Average monthly number of families on ADC.....	74
Children enrolled in Medicaid and CHIP.....	75
SNAP participation among children.....	76
Free and reduced school meals.....	77
Percent of students eligible for free and reduced meals.....	78
Average daily number of meals served by the Summer Food Program.....	79
Total births.....	80
Percent of births to mothers 17 and under.....	81
Births to mothers ages 10-17.....	82
Births to unmarried mothers.....	83
Infant deaths.....	84
Deaths of children ages 1-19.....	85
Low birth weight births.....	86
Number of graduates from public and non-public schools.....	87
Number of dropouts from public and non-public schools.....	88
Special Education.....	89
Cost per pupil.....	90
Head Start and Early Head Start.....	91
Children in out-of-home care.....	92
Sexually transmitted infections among youth 19 and under.....	93
Youth arrests, ages 17 and under.....	94
Child maltreatment victims.....	95

Total population (2011)

State	
2007:	1,783,440
2011:	1,842,641

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	Arthur
2011:	Arthur



0-999 1,000-4,999 5,000-9,999 10,000-19,999 20,000-59,999 60,000+

	2007	2011
Adams	30,892	31,216
Antelope	6,767	6,619
Arthur	457	469
Banner	715	684
Blaine	463	473
Boone	5,582	5,412
Box Butte	11,409	11,383
Boyd	2,109	2,082
Brown	3,225	3,117
Buffalo	45,060	46,690
Burt	6,999	6,802
Butler	8,375	8,287
Cass	25,256	25,188
Cedar	8,941	8,730
Chase	3,913	4,011
Cherry	5,834	5,761
Cheyenne	10,139	9,978
Clay	6,564	6,486
Colfax	9,993	10,614
Cuming	9,286	9,181
Custer	11,005	10,903
Dakota	20,564	20,913
Dawes	9,181	9,196
Dawson	24,178	24,388
Deuel	1,982	1,984
Dixon	5,993	5,989
Dodge	36,647	36,773
Douglas	498,743	524,861
Dundy	2,010	1,976
Fillmore	5,985	5,866
Franklin	3,207	3,207

	2007	2011
Frontier	2,860	2,723
Furnas	4,929	4,943
Gage	22,843	22,031
Garden	2,046	2,069
Garfield	1,977	2,032
Gosper	2,101	2,010
Grant	660	630
Greeley	2,538	2,519
Hall	55,742	59,477
Hamilton	9,204	9,069
Harlan	3,511	3,417
Hayes	977	960
Hitchcock	2,931	2,857
Holt	10,541	10,399
Hooker	732	729
Howard	6,333	6,342
Jefferson	7,765	7,519
Johnson	5,163	5,211
Kearney	6,624	6,588
Keith	8,423	8,301
Keya Paha	857	813
Kimball	3,809	3,775
Knox	8,862	8,575
Lancaster	276,012	289,800
Lincoln	36,011	36,142
Logan	751	762
Loup	649	610
Madison	34,298	34,931
McPherson	545	552
Merrick	7,709	7,732
Morrill	5,122	4,998

	2007	2011
Nance	3,766	3,740
Nemaha	7,220	7,280
Nuckolls	4,642	4,478
Otoe	15,841	15,798
Pawnee	2,791	2,735
Perkins	3,013	2,955
Phelps	9,222	9,184
Pierce	7,314	7,216
Platte	31,408	32,593
Polk	5,447	5,322
Red Willow	11,053	11,032
Richardson	8,480	8,345
Rock	1,551	1,494
Saline	14,069	14,345
Sarpy	148,214	162,561
Saunders	20,483	20,867
Scotts Bluff	36,338	37,044
Seward	16,490	16,703
Sheridan	5,592	5,392
Sherman	3,145	3,093
Sioux	1,404	1,336
Stanton	6,248	6,155
Thayer	5,308	5,160
Thomas	667	716
Thurston	6,925	7,006
Valley	4,327	4,218
Washington	20,203	20,295
Wayne	9,506	9,504
Webster	3,859	3,775
Wheeler	837	818
York	14,078	13,726

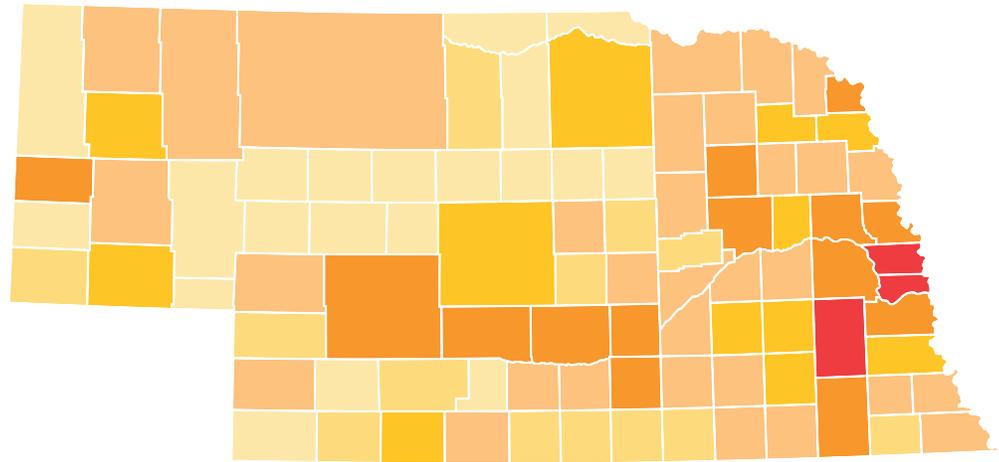
Source: U.S. Census Bureau, 2007 and 2011 Population Estimates Program.

Children 19 and under (2011)

State	
2007:	504,876
2011:	515,762

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	Arthur
2011:	Blaine



0-599 600-999 1,000-2,499 2,500-4,999 5,000-49,999 50,000+

	2007	2011
Adams	8,750	8,627
Antelope	1,810	1,694
Arthur	138	141
Banner	187	152
Blaine	118	122
Boone	1,505	1,370
Box Butte	3,125	3,132
Boyd	521	476
Brown	779	734
Buffalo	12,870	13,296
Burt	1,758	1,664
Butler	2,260	2,189
Cass	7,180	6,850
Cedar	2,564	2,432
Chase	1,000	1,048
Cherry	1,532	1,391
Cheyenne	2,741	2,589
Clay	1,794	1,769
Colfax	3,093	3,424
Cuming	2,571	2,457
Custer	2,953	2,778
Dakota	6,703	6,893
Dawes	2,538	2,472
Dawson	7,710	7,663
Deuel	461	452
Dixon	1,734	1,673
Dodge	9,745	9,661
Douglas	144,091	150,759
Dundy	490	480
Fillmore	1,543	1,502
Franklin	750	735

	2007	2011
Frontier	735	717
Furnas	1,250	1,253
Gage	5,855	5,468
Garden	425	414
Garfield	450	459
Gosper	515	473
Grant	176	139
Greeley	663	646
Hall	16,534	17,680
Hamilton	2,655	2,487
Harlan	860	795
Hayes	275	230
Hitchcock	678	659
Holt	2,746	2,668
Hooker	167	178
Howard	1,762	1,707
Jefferson	1,881	1,763
Johnson	1,098	1,105
Kearney	1,768	1,775
Keith	2,056	1,903
Keya Paha	181	188
Kimball	957	912
Knox	2,302	2,251
Lancaster	74,921	78,442
Lincoln	10,055	9,835
Logan	197	203
Loup	146	153
Madison	9,895	9,819
McPherson	163	168
Merrick	2,083	2,059
Morrill	1,382	1,314

	2007	2011
Nance	977	968
Nemaha	1,866	1,893
Nuckolls	1,073	998
Otoe	4,209	4,111
Pawnee	664	644
Perkins	796	776
Phelps	2,471	2,432
Pierce	2,161	1,998
Platte	9,325	9,519
Polk	1,422	1,387
Red Willow	2,919	2,885
Richardson	2,043	1,980
Rock	342	313
Saline	4,066	4,240
Sarpy	46,655	50,185
Saunders	5,915	5,812
Scotts Bluff	10,090	10,098
Seward	4,782	4,832
Sheridan	1,440	1,333
Sherman	752	743
Sioux	375	323
Stanton	1,884	1,813
Thayer	1,253	1,189
Thomas	154	169
Thurston	2,760	2,709
Valley	1,079	1,006
Washington	5,923	5,648
Wayne	2,687	2,649
Webster	982	920
Wheeler	239	211
York	3,727	3,490

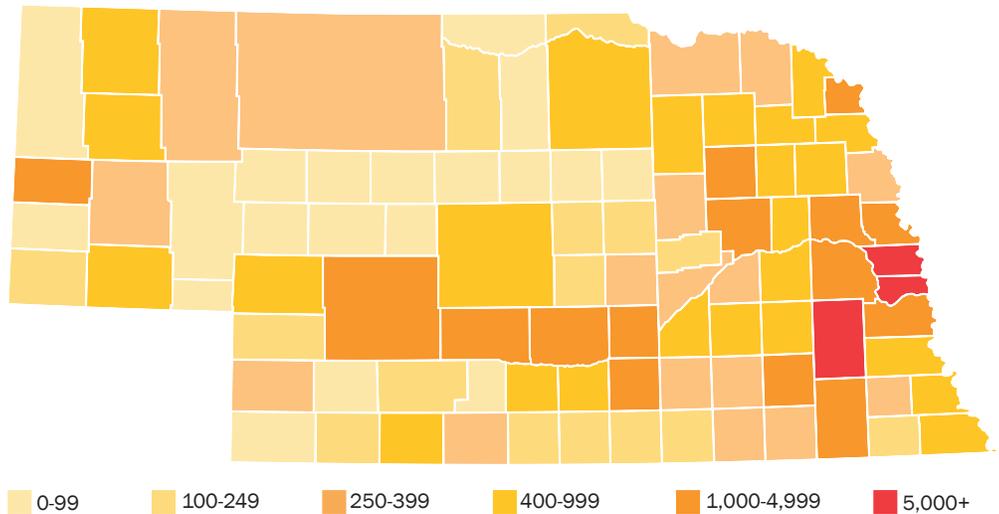
Source: U.S. Census Bureau, 2007 and 2011 Population Estimates Program.

Children under 5 (2011)

State	
2007:	129,117
2011:	131,472

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	Grant
2011:	Blaine



	2007	2011
Adams	2,155	2,043
Antelope	400	423
Arthur	32	42
Banner	41	31
Blaine	23	28
Boone	294	313
Box Butte	765	799
Boyd	85	101
Brown	169	156
Buffalo	3,195	3,335
Burt	397	365
Butler	465	483
Cass	1,597	1,536
Cedar	564	556
Chase	236	285
Cherry	364	307
Cheyenne	724	629
Clay	378	394
Colfax	920	996
Cuming	586	540
Custer	696	616
Dakota	1,841	1,840
Dawes	480	479
Dawson	2,098	1,920
Deuel	102	97
Dixon	418	409
Dodge	2,478	2,461
Douglas	39,133	40,609
Dundy	97	98
Fillmore	314	313
Franklin	154	162

	2007	2011
Frontier	132	145
Furnas	234	252
Gage	1,395	1,331
Garden	97	89
Garfield	75	74
Gosper	109	87
Grant	40	49
Greeley	165	164
Hall	4,640	4,770
Hamilton	540	502
Harlan	193	181
Hayes	52	51
Hitchcock	162	148
Holt	604	653
Hooker	24	45
Howard	442	388
Jefferson	423	397
Johnson	286	281
Kearney	426	427
Keith	438	433
Keya Paha	44	42
Kimball	226	230
Knox	506	518
Lancaster	20,012	20,150
Lincoln	2,490	2,482
Logan	52	44
Loup	29	43
Madison	2,526	2,614
McPherson	38	43
Merrick	449	467
Morrill	314	308

	2007	2011
Nance	201	228
Nemaha	397	452
Nuckolls	258	219
Otoe	1,009	995
Pawnee	127	138
Perkins	189	195
Phelps	568	596
Pierce	467	444
Platte	2,288	2,438
Polk	325	319
Red Willow	654	672
Richardson	427	425
Rock	91	76
Saline	957	1,028
Sarpy	12,578	13,373
Saunders	1,365	1,344
Scotts Bluff	2,672	2,693
Seward	977	983
Sheridan	352	297
Sherman	171	162
Sioux	64	65
Stanton	440	439
Thayer	271	274
Thomas	43	39
Thurston	723	767
Valley	261	235
Washington	1,245	1,141
Wayne	511	491
Webster	200	220
Wheeler	44	54
York	878	896

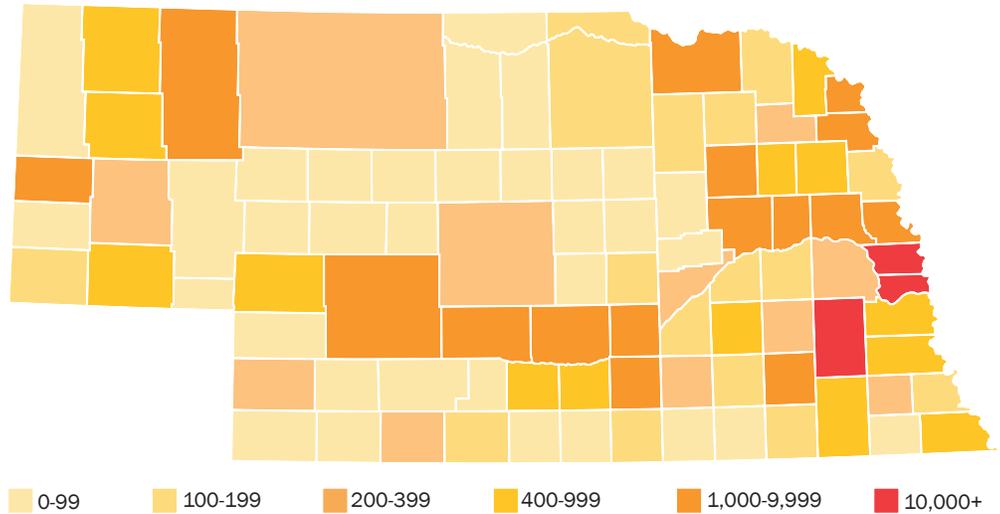
Source: U.S. Census Bureau, 2007 and 2011 Population Estimates Program.

Children of color 19 & under (2011)

State	
2007:	122,511
2011:	141,472

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	Grant
2011:	Blaine



	2007	2011
Adams	1,386	1,634
Antelope	114	139
Arthur	13	15
Banner	15	14
Blaine	2	2
Boone	69	72
Box Butte	785	863
Boyd	30	33
Brown	38	43
Buffalo	1,866	2,242
Burt	152	180
Butler	132	154
Cass	475	606
Cedar	84	118
Chase	176	224
Cherry	231	264
Cheyenne	384	407
Clay	245	294
Colfax	1,712	2,122
Cuming	412	486
Custer	165	206
Dakota	3,740	4,254
Dawes	457	518
Dawson	3,731	3,998
Deuel	29	41
Dixon	293	342
Dodge	1,742	2,156
Douglas	52,712	59,472
Dundy	59	83
Fillmore	144	167
Franklin	30	42

	2007	2011
Frontier	26	33
Furnas	87	118
Gage	375	431
Garden	43	57
Garfield	9	14
Gosper	42	56
Grant	5	7
Greeley	39	57
Hall	5,931	7,412
Hamilton	132	166
Harlan	34	40
Hayes	12	15
Hitchcock	37	45
Holt	152	186
Hooker	3	6
Howard	99	126
Jefferson	116	169
Johnson	201	217
Kearney	134	213
Keith	224	271
Keya Paha	8	8
Kimball	141	183
Knox	412	475
Lancaster	15,994	18,658
Lincoln	1,409	1,614
Logan	11	20
Loup	8	12
Madison	2,501	2,794
McPherson	8	11
Merrick	195	255
Morrill	322	354

	2007	2011
Nance	43	63
Nemaha	115	138
Nuckolls	67	74
Otoe	480	576
Pawnee	40	48
Perkins	60	70
Phelps	217	258
Pierce	81	101
Platte	1,928	2,548
Polk	74	107
Red Willow	251	347
Richardson	213	252
Rock	10	10
Saline	1,209	1,558
Sarpy	9,272	11,277
Saunders	322	393
Scotts Bluff	3,627	3,849
Seward	281	342
Sheridan	421	425
Sherman	27	37
Sioux	36	43
Stanton	201	231
Thayer	70	88
Thomas	9	11
Thurston	2,146	2,012
Valley	70	72
Washington	354	417
Wayne	278	342
Webster	96	118
Wheeler	10	10
York	370	441

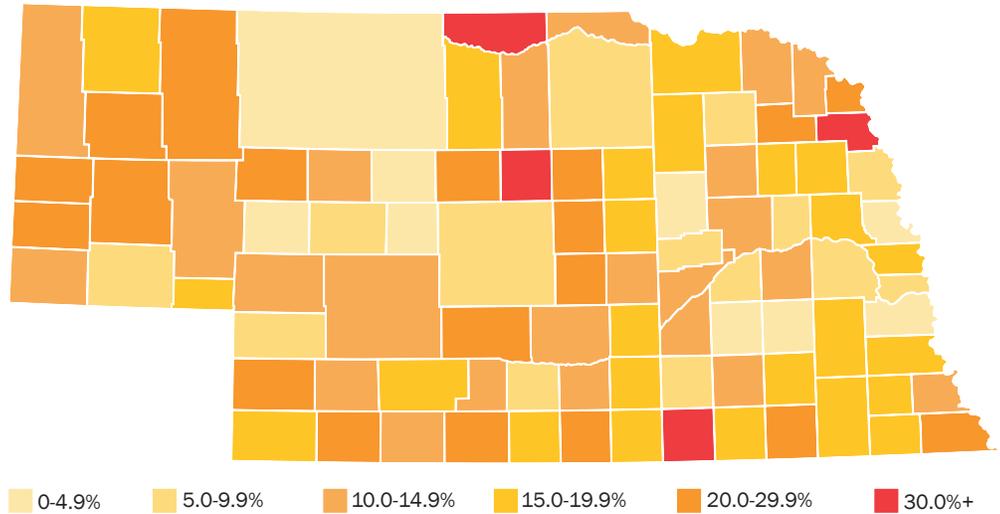
Source: U.S. Census Bureau, 2007 and 2011 Population Estimates Program.

Percent of related children 17 & under in poverty (2006-2010)

State	
2000:	12.0%
2010:	15.0%

Highest county	
2000:	Rock
2010:	Loup

Lowest county	
2000:	Hooker, Sarpy
2010:	Thomas



	2000	2006-2010
Adams	10.0%	16.7%
Antelope	17.0%	16.6%
Arthur	15.0%	4.7%
Banner	19.0%	25.7%
Blaine	22.0%	22.7%
Boone	12.0%	3.0%
Box Butte	14.0%	25.5%
Boyd	20.0%	10.8%
Brown	15.0%	16.6%
Buffalo	11.0%	14.4%
Burt	12.0%	8.1%
Butler	10.0%	11.8%
Cass	7.0%	4.3%
Cedar	11.0%	10.2%
Chase	11.0%	22.9%
Cherry	13.0%	3.1%
Cheyenne	12.0%	9.9%
Clay	13.0%	8.4%
Colfax	14.0%	8.9%
Cuming	10.0%	18.6%
Custer	16.0%	8.6%
Dakota	15.0%	23.6%
Dawes	14.0%	19.1%
Dawson	14.0%	23.0%
Deuel	12.0%	19.3%
Dixon	12.0%	14.0%
Dodge	10.0%	19.3%
Douglas	13.0%	17.1%
Dundy	16.0%	16.4%
Fillmore	8.0%	11.4%
Franklin	17.0%	24.3%

	2000	2006-2010
Frontier	10.0%	18.6%
Furnas	15.0%	23.9%
Gage	10.0%	17.0%
Garden	22.0%	14.3%
Garfield	12.0%	22.1%
Gosper	11.0%	11.2%
Grant	17.0%	28.1%
Greeley	22.0%	16.7%
Hall	16.0%	15.0%
Hamilton	10.0%	13.7%
Harlan	14.0%	15.2%
Hayes	26.0%	13.1%
Hitchcock	23.0%	22.7%
Holt	15.0%	9.1%
Hooker	5.0%	11.1%
Howard	14.0%	12.2%
Jefferson	10.0%	21.2%
Johnson	11.0%	18.5%
Kearney	10.0%	12.9%
Keith	13.0%	10.1%
Keya Paha	34.0%	43.2%
Kimball	12.0%	14.2%
Knox	20.0%	19.2%
Lancaster	10.0%	16.1%
Lincoln	12.0%	10.6%
Logan	13.0%	0.7%
Loup	23.0%	43.3%
Madison	13.0%	14.8%
McPherson	22.0%	8.9%
Merrick	10.0%	14.6%
Morrill	20.0%	23.7%

	2000	2006-2010
Nance	17.0%	7.3%
Nemaha	13.0%	10.7%
Nuckolls	17.0%	38.5%
Otoe	9.0%	16.1%
Pawnee	14.0%	18.6%
Perkins	20.0%	6.7%
Phelps	12.0%	9.9%
Pierce	14.0%	9.2%
Platte	9.0%	10.3%
Polk	7.0%	8.8%
Red Willow	11.0%	12.1%
Richardson	11.0%	25.5%
Rock	36.0%	14.0%
Saline	9.0%	19.5%
Sarpy	5.0%	7.7%
Saunders	7.0%	9.3%
Scotts Bluff	22.0%	23.6%
Seward	6.0%	2.3%
Sheridan	20.0%	20.3%
Sherman	19.0%	22.5%
Sioux	24.0%	11.4%
Stanton	7.0%	15.0%
Thayer	15.0%	15.5%
Thomas	21.0%	0.0%
Thurston	33.0%	41.5%
Valley	16.0%	20.0%
Washington	8.0%	2.9%
Wayne	11.0%	21.3%
Webster	14.0%	16.7%
Wheeler	28.0%	15.0%
York	10.0%	3.2%

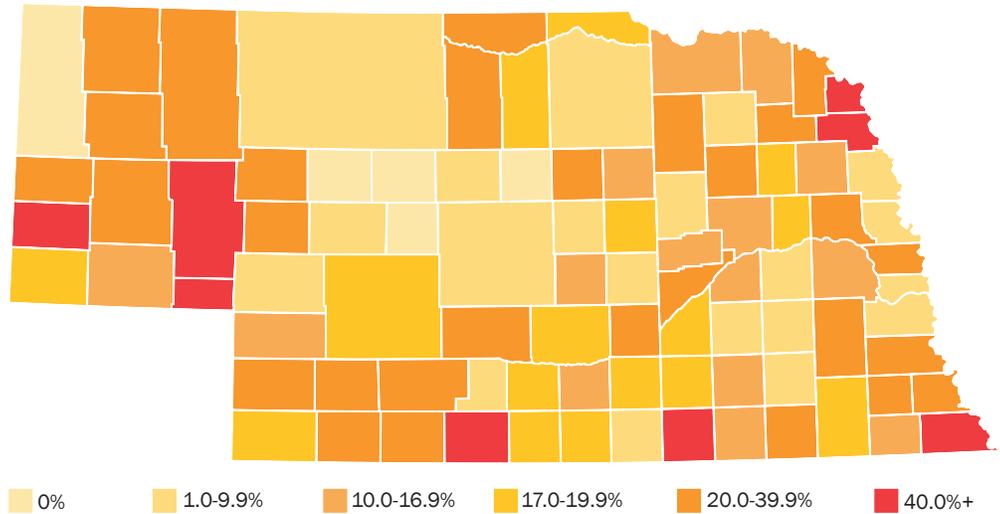
Source: U.S. Census Bureau, 2000 Census of Population, Summary File 3 Table PCT52 and 2006-2010 American Community Survey 5-year averages Table B17006.

Percent of related children under 5 in poverty (2006-2010)

State	
2000:	14%
2010:	19.5%

Highest county	
2000:	Keya Paha
2010:	Nuckolls

Lowest county	
2000:	Stanton
2010:	Hooker, Logan, Loup, Sioux, Thomas



	2000	2006-2010
Adams	12.0%	19.5%
Antelope	19.0%	29.7%
Arthur	20.0%	21.4%
Banner	8.0%	55.6%
Blaine	32.0%	8.3%
Boone	15.0%	4.2%
Box Butte	18.0%	32.8%
Boyd	16.0%	17.0%
Brown	22.0%	24.9%
Buffalo	14.0%	19.8%
Burt	9.0%	9.7%
Butler	14.0%	8.7%
Cass	12.0%	4.9%
Cedar	8.0%	11.9%
Chase	16.0%	36.4%
Cherry	17.0%	4.8%
Cheyenne	15.0%	13.4%
Clay	16.0%	17.0%
Colfax	16.0%	17.8%
Cuming	14.0%	11.5%
Custer	20.0%	8.0%
Dakota	17.0%	41.7%
Dawes	31.0%	35.5%
Dawson	16.0%	24.0%
Deuel	13.0%	43.7%
Dixon	17.0%	21.9%
Dodge	14.0%	28.4%
Douglas	14.0%	20.9%
Dundy	16.0%	18.3%
Fillmore	11.0%	15.2%
Franklin	15.0%	18.9%

	2000	2006-2010
Frontier	10.0%	21.6%
Furnas	17.0%	42.1%
Gage	13.0%	17.9%
Garden	22.0%	42.9%
Garfield	11.0%	22.4%
Gosper	6.0%	7.1%
Grant	21.0%	34.4%
Greeley	23.0%	18.7%
Hall	20.0%	26.2%
Hamilton	10.0%	17.8%
Harlan	20.0%	19.1%
Hayes	26.0%	22.0%
Hitchcock	26.0%	27.5%
Holt	13.0%	7.9%
Hooker	6.0%	0.0%
Howard	13.0%	9.5%
Jefferson	15.0%	33.0%
Johnson	11.0%	33.5%
Kearney	10.0%	16.3%
Keith	20.0%	9.8%
Keya Paha	46.0%	31.8%
Kimball	13.0%	18.0%
Knox	23.0%	16.4%
Lancaster	12.0%	20.4%
Lincoln	16.0%	18.1%
Logan	18.0%	0.0%
Loup	23.0%	0.0%
Madison	17.0%	22.7%
McPherson	11.0%	4.8%
Merrick	10.0%	36.9%
Morrill	24.0%	31.0%

	2000	2006-2010
Nance	24.0%	10.0%
Nemaha	20.0%	20.0%
Nuckolls	17.0%	62.4%
Otoe	14.0%	22.8%
Pawnee	14.0%	12.9%
Perkins	25.0%	11.9%
Phelps	12.0%	19.9%
Pierce	18.0%	3.8%
Platte	11.0%	10.6%
Polk	11.0%	11.6%
Red Willow	14.0%	21.6%
Richardson	15.0%	58.1%
Rock	36.0%	17.4%
Saline	7.0%	6.2%
Sarpy	6.0%	8.6%
Saunders	10.0%	14.5%
Scotts Bluff	26.0%	31.0%
Seward	8.0%	5.3%
Sheridan	27.0%	30.8%
Sherman	33.0%	14.0%
Sioux	12.0%	0.0%
Stanton	5.0%	19.5%
Thayer	16.0%	16.6%
Thomas	10.0%	0.0%
Thurston	34.0%	48.5%
Valley	17.0%	9.6%
Washington	12.0%	4.1%
Wayne	16.0%	28.4%
Webster	12.0%	8.2%
Wheeler	32.0%	11.4%
York	13.0%	5.7%

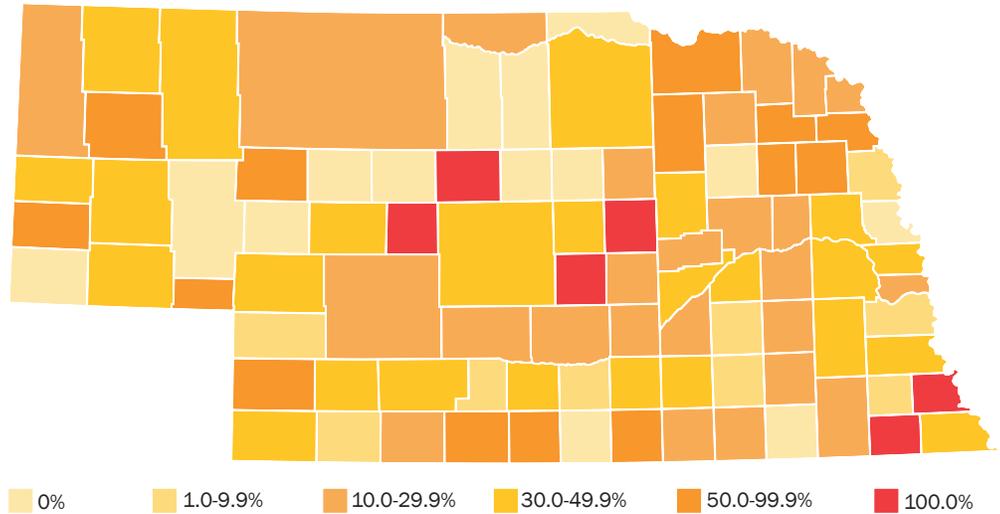
Source: U.S. Census Bureau, 2000 Census of Population, Summary File 3 Table P87 and 2006-2010 American Community Survey 5-year averages Table B17006.

Percent of children of color 17 & under in poverty (2005-2009)

State	
2000:	27%
2005-2009:	31.4%

Highest county	
2000:	McPherson, Wheeler
2005-2009:	4 counties at 100%

Lowest county	
2000:	14 counties at 0%
2005-2009:	11 counties at 0%



	2000	2005-2009
Adams	17.0%	31.5%
Antelope	39.0%	50.7%
Arthur	50.0%	0.0%
Banner	69.0%	60.0%
Blaine	0.0%	100.0%
Boone	18.0%	47.4%
Box Butte	37.0%	68.2%
Boyd	0.0%	0.0%
Brown	46.0%	0.0%
Buffalo	24.0%	27.2%
Burt	13.0%	8.3%
Butler	33.0%	17.4%
Cass	5.0%	0.6%
Cedar	0.0%	19.0%
Chase	15.0%	65.8%
Cherry	22.0%	17.2%
Cheyenne	31.0%	33.6%
Clay	26.0%	49.8%
Colfax	21.0%	18.7%
Cuming	24.0%	55.7%
Custer	26.0%	49.1%
Dakota	23.0%	29.7%
Dawes	32.0%	43.8%
Dawson	21.0%	28.6%
Deuel	29.0%	68.8%
Dixon	12.0%	28.1%
Dodge	22.0%	33.4%
Douglas	31.0%	34.4%
Dundy	31.0%	33.3%
Fillmore	21.0%	7.1%
Franklin	43.0%	0.0%

	2000	2005-2009
Frontier	10.0%	40.4%
Furnas	44.0%	52.7%
Gage	26.0%	25.6%
Garden	52.0%	0.0%
Garfield	0.0%	0.0%
Gosper	0.0%	4.8%
Grant	0.0%	50.0%
Greeley	0.0%	100.0%
Hall	29.0%	24.1%
Hamilton	37.0%	14.5%
Harlan	4.0%	76.9%
Hayes	46.0%	0.0%
Hitchcock	37.0%	9.9%
Holt	22.0%	38.4%
Hooker	0.0%	0.0%
Howard	24.0%	10.7%
Jefferson	8.0%	0.0%
Johnson	11.0%	9.8%
Kearney	2.0%	3.9%
Keith	25.0%	31.6%
Keya Paha	0.0%	22.2%
Kimball	22.0%	0.0%
Knox	36.0%	57.1%
Lancaster	24.0%	30.3%
Lincoln	21.0%	11.7%
Logan	11.0%	100.0%
Loup	9.0%	0.0%
Madison	32.0%	0.0%
McPherson	100.0%	32.1%
Merrick	25.0%	35.8%
Morrill	36.0%	36.4%

	2000	2005-2009
Nance	23.0%	28.6%
Nemaha	0.0%	51.9%
Nuckolls	39.0%	27.3%
Otoe	28.0%	49.6%
Pawnee	0.0%	71.4%
Perkins	17.0%	9.1%
Phelps	34.0%	40.7%
Pierce	28.0%	23.1%
Platte	20.0%	23.4%
Polk	48.0%	32.1%
Red Willow	17.0%	11.4%
Richardson	29.0%	37.9%
Rock	63.0%	0.0%
Saline	21.0%	10.9%
Sarpy	8.0%	20.5%
Saunders	8.0%	32.8%
Scotts Bluff	42.0%	41.2%
Seward	9.0%	10.6%
Sheridan	42.0%	32.3%
Sherman	0.0%	100.0%
Sioux	0.0%	13.3%
Stanton	25.0%	63.0%
Thayer	51.0%	25.0%
Thomas	0.0%	0.0%
Thurston	41.0%	50.1%
Valley	58.0%	34.8%
Washington	13.0%	0.0%
Wayne	40.0%	68.2%
Webster	27.0%	64.3%
Wheeler	100.0%	14.3%
York	56.0%	3.6%

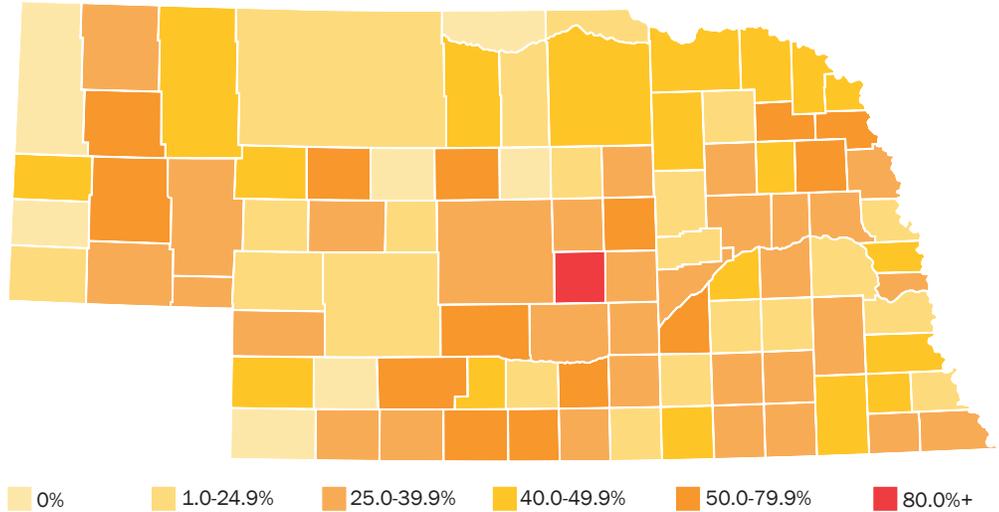
Source: U.S. Census Bureau, 2000 Census of Population, Summary File 3 Tables PCT52 and PCT761 and 2005-2009 American Community Survey 5-year averages Table B17001A-B17001I.

Percent of related children 17 & under in single-parent household in poverty

State	
2005-2009:	37.6%
2006-2010:	37.5%

Highest county	
2005-2009:	Greeley
2006-2010:	Sherman

Lowest county	
2005-2009:	Dundy, Hayes, Loup, Thomas
2006-2010:	Banner, Dundy, Hayes, Loup, Sioux, Thomas



0% 1.0-24.9% 25.0-39.9% 40.0-49.9% 50.0-79.9% 80.0%+

	2005-2009	2006-2010
Adams	34.2%	39.8%
Antelope	38.8%	43.3%
Arthur	23.5%	14.3%
Banner	26.5%	0.0%
Blaine	25.0%	58.8%
Boone	22.8%	17.4%
Box Butte	53.1%	63.6%
Boyd	46.5%	19.0%
Brown	63.2%	47.4%
Buffalo	40.8%	37.8%
Burt	22.4%	28.9%
Butler	36.8%	34.2%
Cass	19.4%	17.4%
Cedar	37.0%	41.7%
Chase	46.4%	49.3%
Cherry	15.0%	1.9%
Cheyenne	32.2%	27.5%
Clay	22.3%	17.5%
Colfax	21.8%	25.4%
Cuming	59.0%	57.5%
Custer	25.4%	37.5%
Dakota	50.1%	49.3%
Dawes	35.3%	26.0%
Dawson	60.8%	55.3%
Deuel	38.5%	36.1%
Dixon	38.0%	40.6%
Dodge	27.4%	36.4%
Douglas	42.7%	40.7%
Dundy	0.0%	0.0%
Fillmore	25.8%	26.3%
Franklin	59.8%	65.8%

	2005-2009	2006-2010
Frontier	47.1%	67.3%
Furnas	66.9%	67.3%
Gage	39.3%	47.4%
Garden	22.4%	29.3%
Garfield	12.9%	23.6%
Gosper	37.9%	42.4%
Grant	48.1%	40.0%
Greeley	75.7%	69.9%
Hall	34.7%	31.9%
Hamilton	43.2%	57.8%
Harlan	49.3%	35.5%
Hayes	0.0%	0.0%
Hitchcock	20.4%	27.6%
Holt	31.3%	40.5%
Hooker	24.1%	50.0%
Howard	45.4%	29.4%
Jefferson	22.2%	33.1%
Johnson	27.3%	43.8%
Kearney	40.0%	51.6%
Keith	21.3%	19.0%
Keya Paha	0.0%	0.0%
Kimball	50.5%	23.2%
Knox	53.1%	49.8%
Lancaster	34.3%	37.0%
Lincoln	21.4%	24.5%
Logan	33.3%	20.0%
Loup	0.0%	0.0%
Madison	28.6%	39.3%
McPherson	34.7%	31.6%
Merrick	21.6%	31.0%
Morrill	39.9%	51.7%

	2005-2009	2006-2010
Nance	16.7%	19.3%
Nemaha	23.7%	21.3%
Nuckolls	44.0%	41.3%
Otoe	32.0%	44.2%
Pawnee	30.6%	29.7%
Perkins	38.5%	33.8%
Phelps	21.8%	16.1%
Pierce	19.7%	16.5%
Platte	31.5%	28.1%
Polk	40.8%	42.8%
Red Willow	28.3%	33.6%
Richardson	35.4%	38.8%
Rock	45.8%	9.9%
Saline	26.1%	35.2%
Sarpy	26.4%	25.7%
Saunders	23.7%	24.3%
Scotts Bluff	50.2%	40.6%
Seward	17.9%	13.2%
Sheridan	26.5%	45.8%
Sherman	45.1%	82.0%
Sioux	14.3%	0.0%
Stanton	41.0%	49.4%
Thayer	23.3%	29.3%
Thomas	0.0%	0.0%
Thurston	59.0%	58.4%
Valley	40.6%	37.7%
Washington	4.1%	2.2%
Wayne	52.8%	65.8%
Webster	22.9%	21.6%
Wheeler	29.7%	35.5%
York	11.8%	7.1%

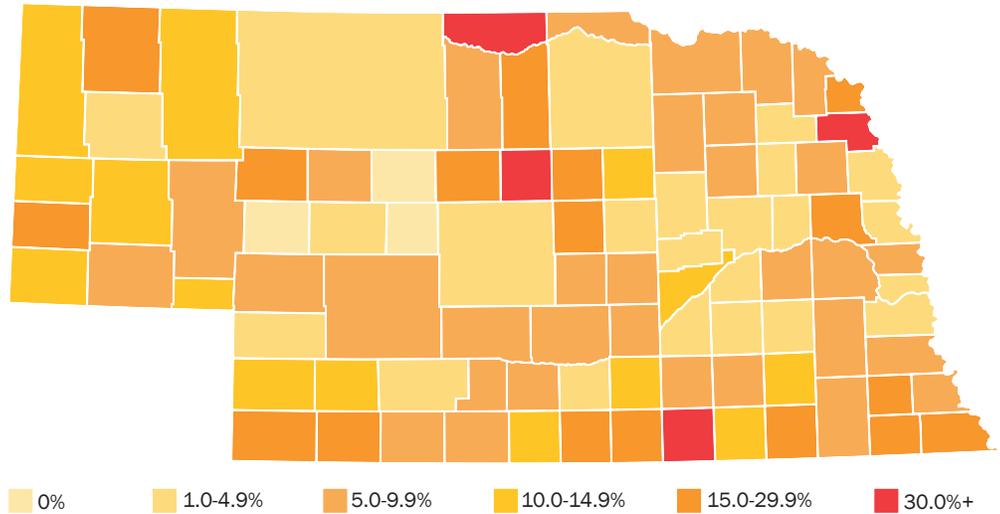
Source: U.S. Census Bureau, 2005-2009 and 2006-2010 American Community Survey 5-year averages Table B17006.

Percent of related children 17 & under in married-couple household in poverty

State	
2005-2009:	6.5%
2006-2010:	7.1%

Highest county	
2005-2009:	Keya Paha
2006-2010:	Loup

Lowest county	
2005-2009:	Arthur, Logan, Perkins, Thomas
2006-2010:	Arthur, Logan, Thomas



	2005-2009	2006-2010
Adams	10.6%	10.8%
Antelope	8.2%	8.9%
Arthur	0.0%	0.0%
Banner	23.0%	29.0%
Blaine	15.9%	15.0%
Boone	2.9%	1.0%
Box Butte	3.5%	2.3%
Boyd	8.8%	8.6%
Brown	8.7%	8.4%
Buffalo	6.8%	6.6%
Burt	1.7%	3.3%
Butler	6.0%	5.0%
Cass	1.6%	1.4%
Cedar	5.6%	5.7%
Chase	11.5%	10.7%
Cherry	5.0%	3.4%
Cheyenne	7.4%	5.7%
Clay	9.7%	6.5%
Colfax	7.4%	4.0%
Cuming	10.3%	9.7%
Custer	4.6%	4.5%
Dakota	8.5%	12.2%
Dawes	21.2%	17.0%
Dawson	10.3%	8.1%
Deuel	12.1%	13.7%
Dixon	7.4%	6.6%
Dodge	10.6%	12.6%
Douglas	5.0%	6.4%
Dundy	17.6%	20.2%
Fillmore	4.2%	8.2%
Franklin	23.6%	19.2%

	2005-2009	2006-2010
Frontier	0.9%	2.2%
Furnas	8.6%	9.9%
Gage	5.8%	6.0%
Garden	16.5%	9.2%
Garfield	10.5%	21.8%
Gosper	4.6%	5.5%
Grant	25.8%	23.7%
Greeley	12.1%	1.4%
Hall	6.1%	5.3%
Hamilton	3.9%	3.7%
Harlan	14.6%	12.9%
Hayes	9.4%	13.8%
Hitchcock	18.6%	20.1%
Holt	8.6%	3.9%
Hooker	7.8%	5.9%
Howard	13.0%	9.4%
Jefferson	15.7%	17.6%
Johnson	13.4%	17.5%
Kearney	5.1%	4.4%
Keith	7.2%	7.6%
Keya Paha	29.6%	43.2%
Kimball	4.1%	10.8%
Knox	9.4%	9.5%
Lancaster	7.5%	9.1%
Lincoln	4.7%	5.7%
Logan	0.0%	0.0%
Loup	23.9%	44.2%
Madison	8.2%	9.3%
McPherson	9.6%	4.8%
Merrick	6.6%	10.9%
Morrill	13.7%	12.8%

	2005-2009	2006-2010
Nance	8.8%	3.2%
Nemaha	2.7%	7.2%
Nuckolls	29.0%	37.2%
Otoe	11.2%	9.3%
Pawnee	3.9%	16.2%
Perkins	0.0%	0.7%
Phelps	9.0%	8.9%
Pierce	7.5%	8.2%
Platte	3.9%	4.3%
Polk	1.3%	1.1%
Red Willow	3.4%	6.7%
Richardson	15.7%	19.6%
Rock	19.3%	15.1%
Saline	7.9%	12.0%
Sarpy	3.5%	2.9%
Saunders	6.1%	6.6%
Scotts Bluff	11.3%	10.6%
Seward	0.9%	1.2%
Sheridan	12.0%	13.6%
Sherman	2.6%	8.0%
Sioux	11.7%	12.8%
Stanton	4.7%	4.5%
Thayer	16.9%	12.4%
Thomas	0.0%	0.0%
Thurston	17.7%	21.9%
Valley	16.0%	16.3%
Washington	2.1%	2.9%
Wayne	2.5%	1.7%
Webster	13.0%	15.9%
Wheeler	10.0%	10.6%
York	5.1%	2.3%

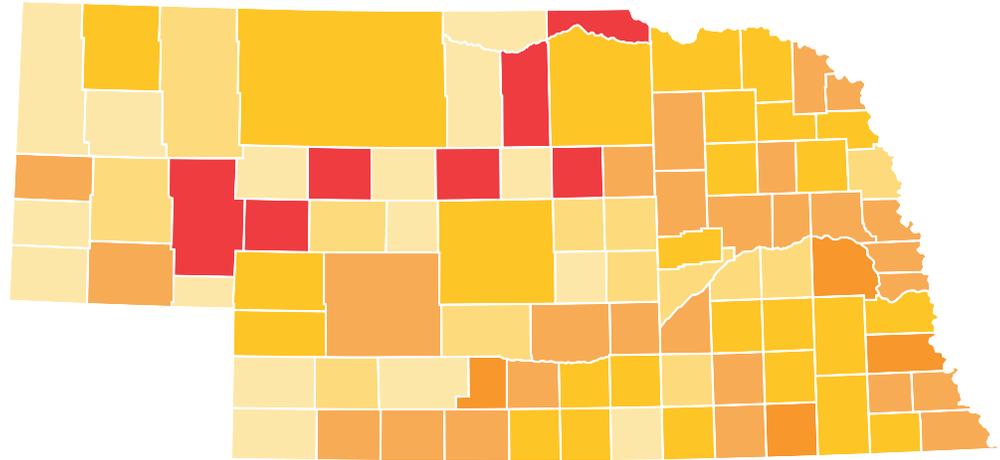
Source: U.S. Census Bureau, 2005-2009 and 2006-2010 American Community Survey 5-year averages Table B17006.

Percent of mothers with children under 6 in the labor force

State	
2000:	74.0%
2006-2010:	77.9%

Highest county	
2000:	Arthur
2006-2010:	7 counties at 100%

Lowest county	
2000:	Grant
20106-2010:	Keya Paha



0-59.9% 60.0-69.9% 70.0-79.9% 80.0-89.9% 90.0-99.9% 100%

	2000	2006-2010
Adams	73.0%	84.5%
Antelope	87.0%	72.5%
Arthur	100.0%	100.0%
Banner	59.0%	36.0%
Blaine	70.0%	100.0%
Boone	81.0%	72.6%
Box Butte	73.0%	32.1%
Boyd	76.0%	100.0%
Brown	83.0%	57.1%
Buffalo	79.0%	70.0%
Burt	80.0%	67.0%
Butler	77.0%	68.2%
Cass	76.0%	84.0%
Cedar	85.0%	85.5%
Chase	69.0%	53.7%
Cherry	72.0%	83.7%
Cheyenne	74.0%	74.0%
Clay	75.0%	62.0%
Colfax	73.0%	78.9%
Cuming	74.0%	84.1%
Custer	79.0%	81.4%
Dakota	70.0%	79.4%
Dawes	77.0%	89.1%
Dawson	72.0%	65.3%
Deuel	94.0%	58.8%
Dixon	85.0%	76.3%
Dodge	73.0%	71.1%
Douglas	72.0%	77.6%
Dundy	91.0%	46.4%
Fillmore	72.0%	77.6%
Franklin	77.0%	83.3%

	2000	2006-2010
Frontier	74.0%	51.8%
Furnas	69.0%	78.2%
Gage	84.0%	80.2%
Garden	92.0%	100.0%
Garfield	85.0%	100.0%
Gosper	89.0%	95.9%
Grant	33.0%	59.1%
Greeley	73.0%	67.7%
Hall	71.0%	78.3%
Hamilton	80.0%	78.4%
Harlan	77.0%	81.8%
Hayes	54.0%	69.4%
Hitchcock	64.0%	74.3%
Holt	80.0%	89.9%
Hooker	71.0%	100.0%
Howard	79.0%	68.2%
Jefferson	72.0%	93.1%
Johnson	79.0%	72.5%
Kearney	78.0%	88.3%
Keith	69.0%	81.6%
Keya Paha	48.0%	30.0%
Kimball	82.0%	58.2%
Knox	72.0%	84.0%
Lancaster	77.0%	80.1%
Lincoln	74.0%	77.8%
Logan	100.0%	N.A.
Loup	56.0%	46.2%
Madison	76.0%	81.8%
McPherson	70.0%	69.2%
Merrick	76.0%	65.5%
Morrill	69.0%	66.7%

	2000	2006-2010
Nance	76.0%	82.7%
Nemaha	70.0%	71.5%
Nuckolls	83.0%	84.0%
Otoe	81.0%	92.2%
Pawnee	75.0%	83.1%
Perkins	63.0%	88.1%
Phelps	75.0%	73.5%
Pierce	84.0%	86.1%
Platte	75.0%	71.2%
Polk	77.0%	67.9%
Red Willow	85.0%	74.3%
Richardson	75.0%	71.8%
Rock	65.0%	100.0%
Saline	71.0%	81.9%
Sarpy	74.0%	79.4%
Saunders	75.0%	90.4%
Scotts Bluff	73.0%	76.0%
Seward	78.0%	87.4%
Sheridan	72.0%	66.9%
Sherman	59.0%	33.9%
Sioux	58.0%	55.6%
Stanton	82.0%	79.9%
Thayer	77.0%	75.5%
Thomas	76.0%	37.5%
Thurston	69.0%	81.1%
Valley	74.0%	63.8%
Washington	79.0%	70.0%
Wayne	80.0%	84.4%
Webster	65.0%	59.6%
Wheeler	56.0%	74.3%
York	79.0%	82.4%

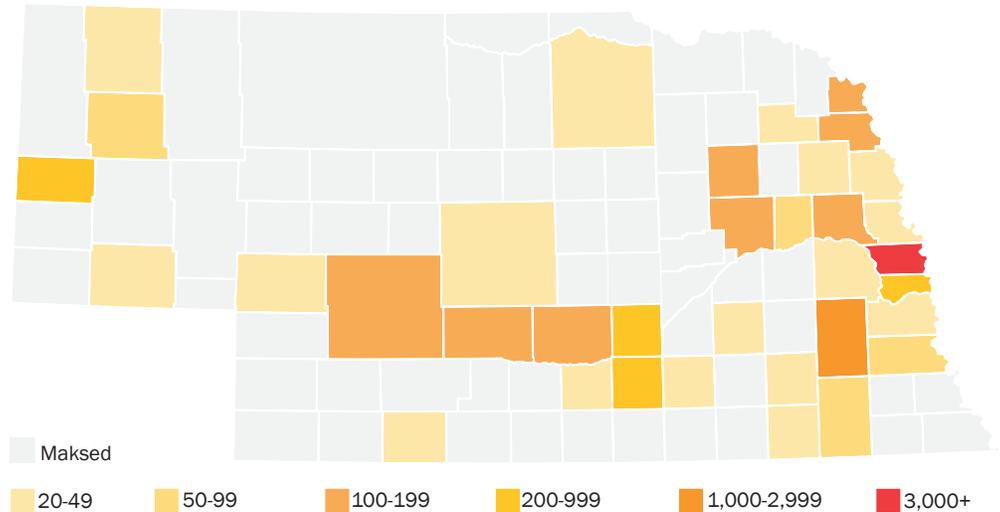
Source: U.S. Census Bureau, 2000 Census of Population, Table P45 and 2006-2010 American Community Survey 5-year averages Table B23003.

Average monthly number of families on ADC (SFY 2011)

State	
2007:	10,313
2011:	8,669

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	Arthur, Wheeler
2011:	Arthur, McPherson, Thomas



	2007	2011
Adams	192	220
Antelope	*	*
Arthur	*	*
Banner	*	*
Blaine	*	*
Boone	*	*
Box Butte	70	53
Boyd	*	*
Brown	*	*
Buffalo	212	148
Burt	24	20
Butler	*	*
Cass	60	48
Cedar	*	*
Chase	*	*
Cherry	22	*
Cheyenne	25	30
Clay	21	28
Colfax	44	73
Cuming	*	21
Custer	22	26
Dakota	109	126
Dawes	46	31
Dawson	121	148
Deuel	*	*
Dixon	*	*
Dodge	177	180
Douglas	5,270	3,850
Dundy	*	*
Fillmore	*	*
Franklin	*	*

	2007	2011
Frontier	*	*
Furnas	*	*
Gage	71	64
Garden	*	*
Garfield	*	*
Gosper	*	*
Grant	*	*
Greeley	*	*
Hall	393	448
Hamilton	*	*
Harlan	*	*
Hayes	*	*
Hitchcock	*	*
Holt	24	27
Hooker	*	*
Howard	*	*
Jefferson	26	23
Johnson	*	*
Kearney	*	*
Keith	*	25
Keya Paha	*	*
Kimball	*	*
Knox	40	*
Lancaster	1,207	1,176
Lincoln	176	184
Logan	*	*
Loup	*	*
Madison	175	174
McPherson	*	*
Merrick	*	*
Morrill	22	*

	2007	2011
Nance	*	*
Nemaha	29	*
Nuckolls	*	*
Otoe	53	50
Pawnee	*	*
Perkins	*	*
Phelps	33	28
Pierce	*	*
Platte	98	116
Polk	*	*
Red Willow	24	35
Richardson	22	*
Rock	*	*
Saline	28	41
Sarpy	416	397
Saunders	40	28
Scotts Bluff	275	200
Seward	20	*
Sheridan	30	*
Sherman	*	*
Sioux	*	*
Stanton	*	*
Thayer	*	*
Thomas	*	*
Thurston	268	164
Valley	*	*
Washington	33	29
Wayne	27	22
Webster	*	*
Wheeler	0	*
York	*	21

Source: Financial and Program Services, DHHS.

* Data are masked to protect family privacy when a county has fewer than 20 participating.

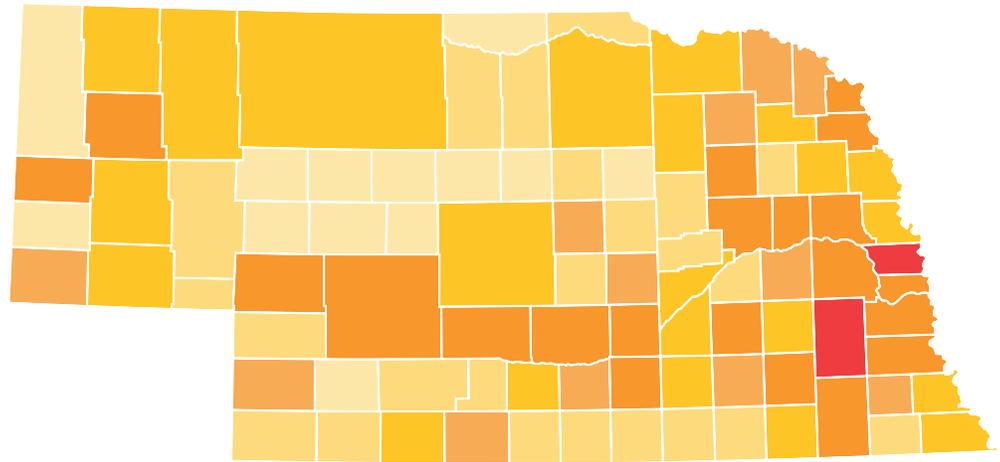
Note: 14 out-of-state families were included in the state total.

Children enrolled in Medicaid and CHIP (2011)*

State	
2007:	133,637
2011:	158,324

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	McPherson
2011:	Hooker, McPherson



0-99 100-299 300-499 500-999 1,000-9,999 10,000+

	2007	2011
Adams	2,480	2,979
Antelope	558	535
Arthur	31	11
Banner	58	45
Blaine	51	55
Boone	257	282
Box Butte	1,005	1,072
Boyd	157	146
Brown	240	263
Buffalo	3,351	3,836
Burt	436	511
Butler	419	487
Cass	1,350	1,594
Cedar	376	466
Chase	245	335
Cherry	572	527
Cheyenne	621	634
Clay	420	604
Colfax	857	1,255
Cuming	458	577
Custer	905	916
Dakota	2,207	2,992
Dawes	737	674
Dawson	2,651	2,938
Deuel	97	136
Dixon	351	310
Dodge	2,794	3,463
Douglas	44,538	53,188
Dundy	164	159
Fillmore	457	471
Franklin	201	262

	2007	2011
Frontier	159	195
Furnas	377	400
Gage	1,466	1,591
Garden	149	169
Garfield	154	161
Gosper	104	111
Grant	41	59
Greeley	188	220
Hall	6,047	7,299
Hamilton	512	595
Harlan	232	243
Hayes	43	43
Hitchcock	257	262
Holt	793	847
Hooker	46	37
Howard	455	422
Jefferson	467	543
Johnson	286	306
Kearney	397	481
Keith	574	574
Keya Paha	65	49
Kimball	334	355
Knox	800	744
Lancaster	17,585	21,350
Lincoln	2,792	3,112
Logan	47	57
Loup	35	43
Madison	2,987	3,367
McPherson	29	37
Merrick	495	608
Morrill	517	513

	2007	2011
Nance	251	228
Nemaha	461	512
Nuckolls	283	264
Otoe	878	1,147
Pawnee	165	203
Perkins	162	163
Phelps	609	660
Pierce	366	449
Platte	1,950	2,457
Polk	257	274
Red Willow	809	889
Richardson	639	721
Rock	121	112
Saline	920	1,146
Sarpy	5,540	8,772
Saunders	985	1,115
Scotts Bluff	4,066	4,503
Seward	594	761
Sheridan	597	513
Sherman	215	231
Sioux	68	53
Stanton	326	259
Thayer	319	290
Thomas	43	44
Thurston	1,679	1,763
Valley	328	308
Washington	759	874
Wayne	401	540
Webster	219	287
Wheeler	71	57
York	953	1,005

Source: Financial and Program Services, DHHS.

* Based on average monthly participation.

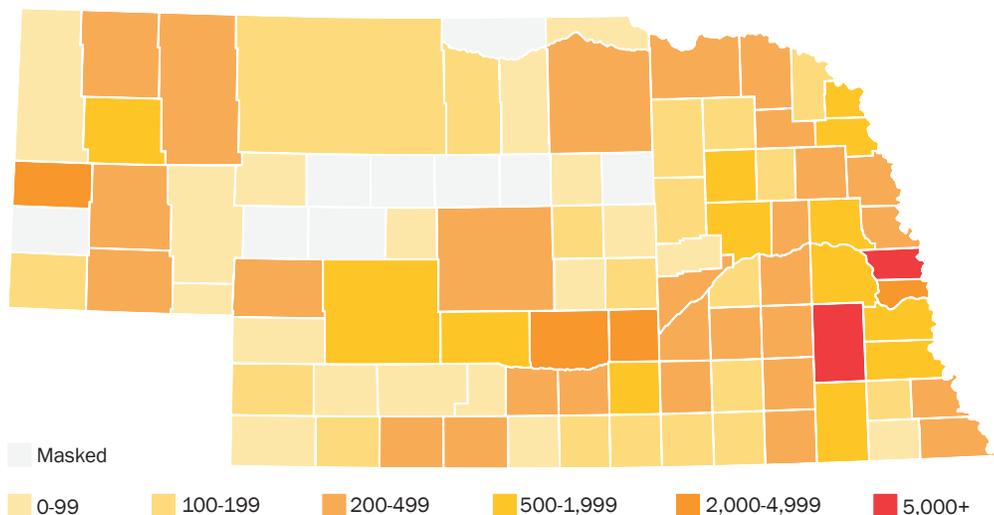
Note: 1,668 out-of-state families were included in the state total.

SNAP participation among children (June 2011)**

State	
2007:	63,752
2011:	87,666

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	Arthur
2011:	Arthur



	2007	2011
Adams	1,000	1,689
Antelope	187	194
Arthur	*	*
Banner	17	*
Blaine	*	*
Boone	115	121
Box Butte	545	599
Boyd	33	29
Brown	67	102
Buffalo	1,554	2,027
Burt	191	290
Butler	171	222
Cass	517	818
Cedar	80	208
Chase	100	131
Cherry	174	191
Cheyenne	266	302
Clay	179	320
Colfax	259	498
Cuming	132	260
Custer	247	366
Dakota	958	1,639
Dawes	367	311
Dawson	1,035	1,427
Deuel	53	97
Dixon	123	149
Dodge	1,377	1,925
Douglas	24,303	32,129
Dundy	34	63
Fillmore	145	147
Franklin	71	125

	2007	2011
Frontier	66	85
Furnas	134	207
Gage	745	911
Garden	45	97
Garfield	47	67
Gosper	44	48
Grant	*	20
Greeley	46	64
Hall	2,760	3,934
Hamilton	195	277
Harlan	97	92
Hayes	*	25
Hitchcock	102	121
Holt	254	294
Hooker	*	*
Howard	151	179
Jefferson	257	264
Johnson	100	170
Kearney	132	209
Keith	255	343
Keya Paha	*	*
Kimball	114	157
Knox	316	333
Lancaster	8,921	12,836
Lincoln	1,533	1,862
Logan	*	34
Loup	*	*
Madison	1,436	1,781
McPherson	*	*
Merrick	157	270
Morrill	244	271

	2007	2011
Nance	75	95
Nemaha	265	326
Nuckolls	95	131
Otoe	391	573
Pawnee	71	86
Perkins	47	69
Phelps	247	330
Pierce	126	193
Platte	823	1,205
Polk	130	142
Red Willow	310	497
Richardson	332	412
Rock	29	53
Saline	270	472
Sarpy	2,502	4,585
Saunders	386	533
Scotts Bluff	2,070	2,698
Seward	229	344
Sheridan	249	276
Sherman	56	97
Sioux	*	25
Stanton	128	124
Thayer	90	159
Thomas	*	*
Thurston	1,104	1,198
Valley	111	143
Washington	336	473
Wayne	170	256
Webster	83	132
Wheeler	*	*
York	341	428

Source: Financial and Program Services, DHHS.

* Data of fewer than 20 are masked.

** SNAP stands for Supplemental Nutrition Assistance Program, formerly known as food stamps.

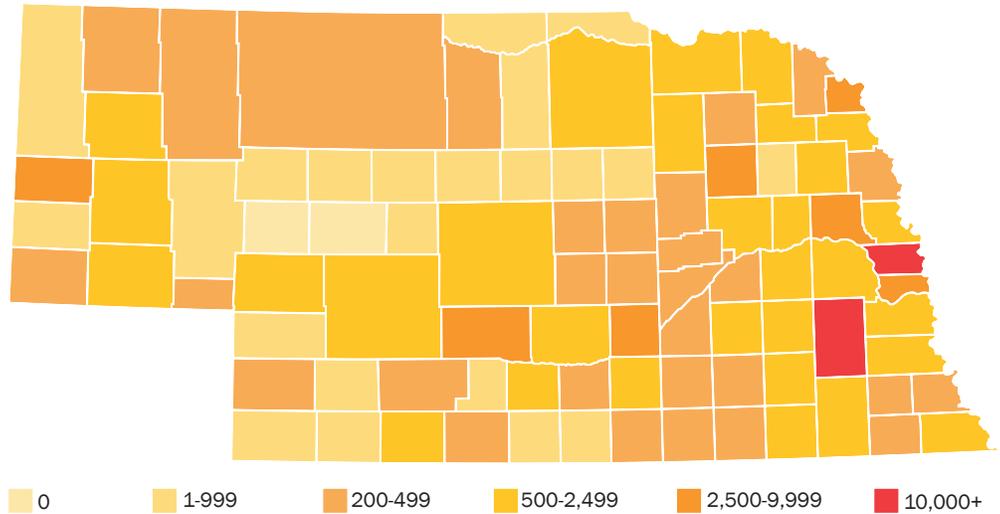
Note: 179 out-of-state participants were included in the state total.

Free and reduced school meals* (2010-2011)

State	
2007:	125,712
2011:	130,004

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	Arthur, McPherson, Sioux
2011:	Arthur, McPherson



	2007	2011
Adams	1,675	2,348
Antelope	514	571
Arthur	0	0
Banner	57	91
Blaine	113	57
Boone	326	340
Box Butte	569	957
Boyd	150	164
Brown	149	238
Buffalo	2,083	1,906
Burt	331	444
Butler	618	548
Cass	986	1,178
Cedar	485	586
Chase	238	322
Cherry	288	358
Cheyenne	459	578
Clay	280	312
Colfax	1,128	1,446
Cuming	951	813
Custer	599	730
Dakota	1,726	2,771
Dawes	343	459
Dawson	2,350	3,309
Deuel	129	214
Dixon	251	404
Dodge	5,313	2,840
Douglas	54,084	42,996
Dundy	180	162
Fillmore	327	257
Franklin	115	167

	2007	2011
Frontier	196	256
Furnas	551	495
Gage	892	1,222
Garden	140	167
Garfield	95	136
Gosper	72	89
Grant	50	59
Greeley	301	308
Hall	5,088	6,267
Hamilton	402	483
Harlan	118	134
Hayes	45	56
Hitchcock	109	174
Holt	649	795
Hooker	74	102
Howard	411	472
Jefferson	539	720
Johnson	251	299
Kearney	264	430
Keith	360	509
Keya Paha	49	45
Kimball	168	274
Knox	660	791
Lancaster	9,467	17,069
Lincoln	2,819	2,387
Logan	65	67
Loup	55	48
Madison	2,205	2,629
McPherson	0	0
Merrick	365	416
Morrill	464	509

	2007	2011
Nance	264	285
Nemaha	308	459
Nuckolls	415	499
Otoe	773	984
Pawnee	226	267
Perkins	104	116
Phelps	408	527
Pierce	405	359
Platte	1,835	2,437
Polk	382	385
Red Willow	1,153	751
Richardson	595	714
Rock	142	74
Saline	823	1,243
Sarpy	3,649	5,879
Saunders	831	975
Scotts Bluff	2,144	3,333
Seward	521	624
Sheridan	371	443
Sherman	244	259
Sioux	0	17
Stanton	161	181
Thayer	320	270
Thomas	33	37
Thurston	955	1,227
Valley	202	248
Washington	733	727
Wayne	454	604
Webster	175	306
Wheeler	52	62
York	651	778

Source: Nebraska Department of Education.

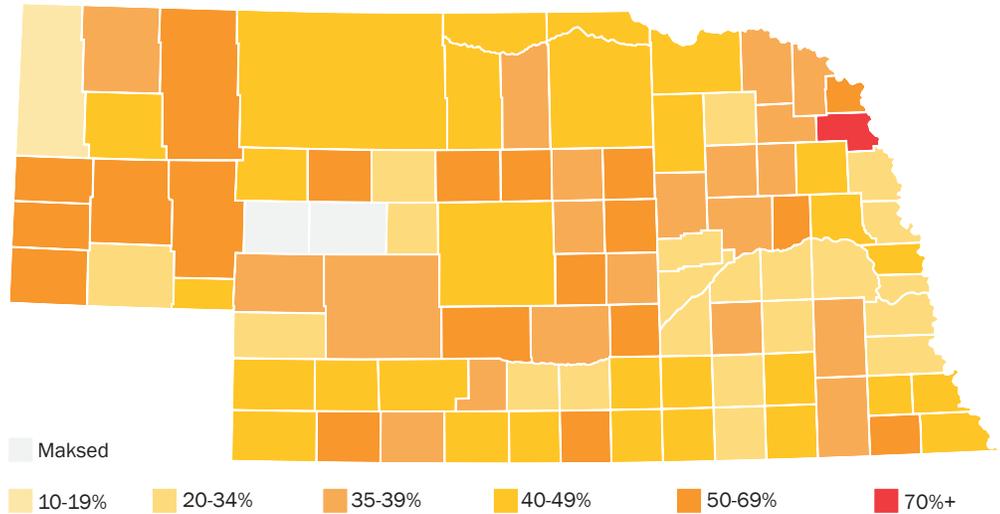
* Average number of meals served daily in October 2007; Average number of meals served daily for all of 2010-2011 school year.

Percent of students eligible for free and reduced meals ** (2010-2011)

State	
2007:	36%
2011:	39%

Highest county	
2007:	Thurston
2011:	Thurston

Lowest county	
2007:	Arthur, McPherson
2011:	Arthur, McPherson



	2007	2011
Adams	32%	42%
Antelope	46%	46%
Arthur	*	*
Banner	48%	53%
Blaine	54%	50%
Boone	42%	35%
Box Butte	41%	45%
Boyd	52%	48%
Brown	34%	46%
Buffalo	30%	36%
Burt	35%	34%
Butler	40%	33%
Cass	25%	29%
Cedar	32%	36%
Chase	40%	41%
Cherry	47%	45%
Cheyenne	35%	34%
Clay	36%	42%
Colfax	35%	62%
Cuming	41%	40%
Custer	43%	42%
Dakota	33%	64%
Dawes	47%	36%
Dawson	52%	62%
Deuel	49%	47%
Dixon	36%	36%
Dodge	36%	43%
Douglas	26%	41%
Dundy	50%	43%
Fillmore	25%	25%
Franklin	45%	50%

	2007	2011
Frontier	38%	43%
Furnas	45%	44%
Gage	28%	36%
Garden	60%	61%
Garfield	37%	35%
Gosper	41%	35%
Grant	41%	45%
Greeley	63%	56%
Hall	36%	52%
Hamilton	26%	28%
Harlan	43%	44%
Hayes	42%	40%
Hitchcock	53%	63%
Holt	48%	43%
Hooker	44%	50%
Howard	45%	37%
Jefferson	38%	45%
Johnson	34%	40%
Kearney	29%	33%
Keith	29%	39%
Keya Paha	61%	44%
Kimball	35%	51%
Knox	54%	49%
Lancaster	17%	36%
Lincoln	29%	38%
Logan	36%	34%
Loup	63%	54%
Madison	40%	37%
McPherson	*	*
Merrick	33%	33%
Morrill	55%	56%

	2007	2011
Nance	34%	34%
Nemaha	31%	40%
Nuckolls	38%	40%
Otoe	26%	34%
Pawnee	51%	54%
Perkins	36%	31%
Phelps	31%	32%
Pierce	31%	24%
Platte	36%	38%
Polk	35%	32%
Red Willow	46%	39%
Richardson	47%	47%
Rock	44%	37%
Saline	27%	42%
Sarpy	15%	23%
Saunders	28%	28%
Scotts Bluff	53%	50%
Seward	20%	21%
Sheridan	53%	50%
Sherman	52%	53%
Sioux	*	18%
Stanton	39%	39%
Thayer	37%	31%
Thomas	45%	33%
Thurston	71%	74%
Valley	38%	36%
Washington	16%	20%
Wayne	33%	37%
Webster	42%	46%
Wheeler	58%	56%
York	33%	36%

Source: Nebraska Department of Education.

* Data are masked to protect student privacy. Corresponding counties on the map appear gray.

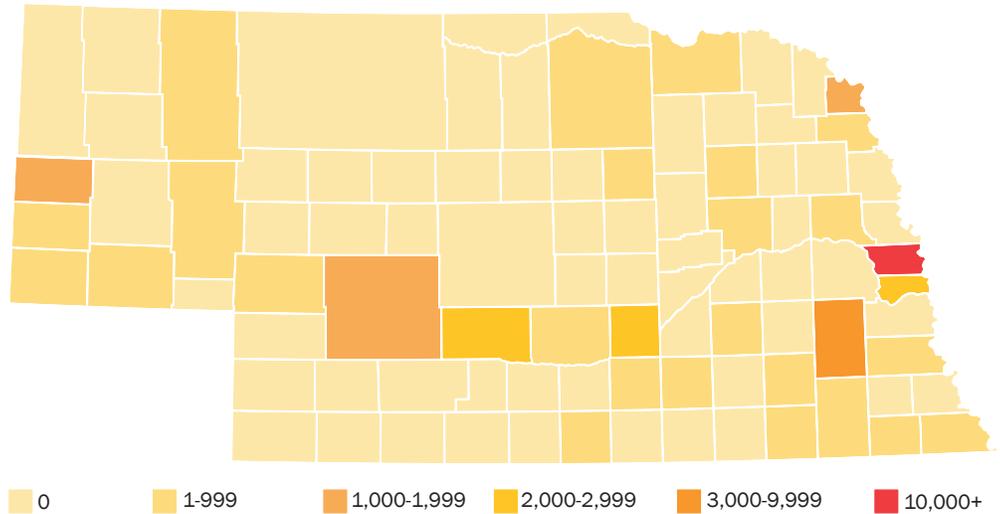
** For 2007, percent eligible on last day of September 2007. 2011 data are for the entire school year.

Average daily number of meals served by the Summer Food Program

State	
2007:	8,506
2011:	62,285

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	68 had 0
2011:	61 had 0



	2007	2011
Adams	217	640
Antelope	0	0
Arthur	0	0
Banner	0	0
Blaine	0	0
Boone	0	0
Box Butte	48	380
Boyd	0	0
Brown	0	0
Buffalo	444	728
Burt	0	0
Butler	0	0
Cass	0	0
Cedar	0	0
Chase	0	0
Cherry	0	0
Cheyenne	197	859
Clay	115	135
Colfax	0	0
Cuming	0	0
Custer	0	0
Dakota	192	1,074
Dawes	91	0
Dawson	476	2,004
Deuel	0	0
Dixon	0	0
Dodge	184	455
Douglas	1,838	36,054
Dundy	0	0
Fillmore	0	0
Franklin	0	39

	2007	2011
Frontier	0	0
Furnas	0	0
Gage	0	124
Garden	34	126
Garfield	0	0
Gosper	0	0
Grant	0	0
Greeley	0	0
Hall	899	2,392
Hamilton	0	0
Harlan	0	0
Hayes	0	0
Hitchcock	0	0
Holt	101	312
Hooker	0	0
Howard	0	0
Jefferson	63	119
Johnson	72	0
Kearney	0	0
Keith	0	273
Keya Paha	0	0
Kimball	0	326
Knox	50	128
Lancaster	761	7,536
Lincoln	318	1,330
Logan	0	0
Loup	0	0
Madison	118	301
McPherson	0	0
Merrick	0	0
Morrill	66	0

	2007	2011
Nance	0	0
Nemaha	0	0
Nuckolls	0	0
Otoe	0	148
Pawnee	0	246
Perkins	0	0
Phelps	0	0
Pierce	0	0
Platte	0	520
Polk	0	0
Red Willow	0	0
Richardson	24	37
Rock	0	0
Saline	0	787
Sarpy	1,110	2,560
Saunders	0	0
Scotts Bluff	566	1,314
Seward	0	0
Sheridan	92	364
Sherman	0	0
Sioux	0	0
Stanton	0	0
Thayer	0	0
Thomas	0	0
Thurston	432	831
Valley	0	0
Washington	0	0
Wayne	0	0
Webster	0	0
Wheeler	0	40
York	0	104

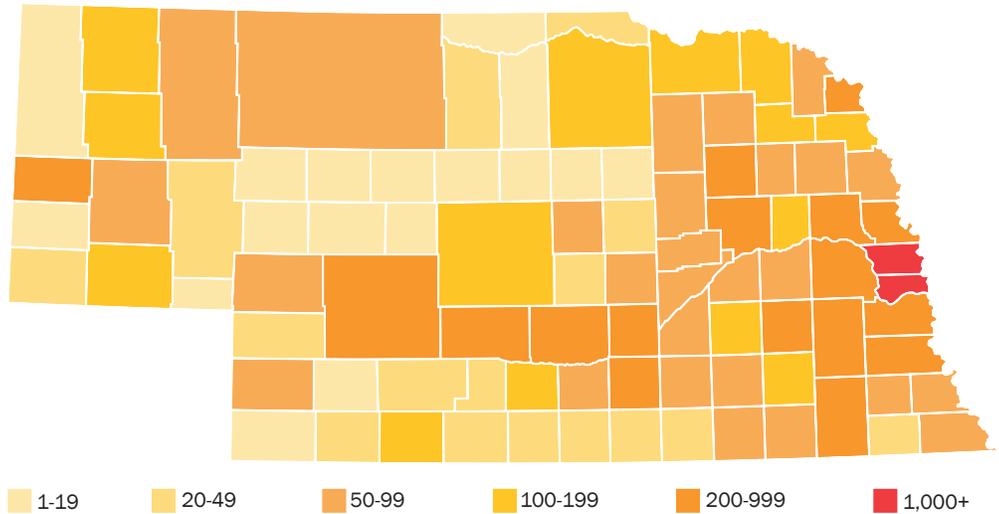
Source: Nebraska Department of Education.

Total births (2011)

State	
2007:	26,935
2011:	25,722

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	Blaine, Keya Paha
2011:	McPherson



	2007	2011
Adams	415	401
Antelope	83	77
Arthur	5	7
Banner	5	7
Blaine	3	5
Boone	64	54
Box Butte	149	126
Boyd	25	24
Brown	29	24
Buffalo	663	652
Burt	80	67
Butler	86	95
Cass	311	287
Cedar	102	105
Chase	61	50
Cherry	64	80
Cheyenne	141	114
Clay	68	83
Colfax	201	165
Cuming	104	95
Custer	134	116
Dakota	419	333
Dawes	116	109
Dawson	377	361
Deuel	26	18
Dixon	86	79
Dodge	478	422
Douglas	8,655	8,275
Dundy	15	9
Fillmore	60	52
Franklin	32	27

	2007	2011
Frontier	32	25
Furnas	52	39
Gage	312	231
Garden	19	22
Garfield	17	15
Gosper	14	24
Grant	8	12
Greeley	28	33
Hall	1,010	893
Hamilton	83	99
Harlan	24	36
Hayes	11	14
Hitchcock	25	32
Holt	120	140
Hooker	6	8
Howard	63	71
Jefferson	87	71
Johnson	51	51
Kearney	80	79
Keith	101	75
Keya Paha	3	6
Kimball	42	42
Knox	100	102
Lancaster	4,170	3,951
Lincoln	515	436
Logan	6	10
Loup	12	5
Madison	540	558
McPherson	9	4
Merrick	83	86
Morrill	60	57

	2007	2011
Nance	32	56
Nemaha	84	82
Nuckolls	37	46
Otoe	209	212
Pawnee	21	27
Perkins	35	42
Phelps	121	122
Pierce	85	66
Platte	466	498
Polk	58	52
Red Willow	131	125
Richardson	67	86
Rock	13	12
Saline	206	191
Sarpy	2,570	2,607
Saunders	266	261
Scotts Bluff	557	499
Seward	197	212
Sheridan	62	68
Sherman	35	27
Sioux	11	7
Stanton	76	83
Thayer	59	54
Thomas	5	11
Thurston	181	134
Valley	51	55
Washington	219	213
Wayne	109	110
Webster	42	42
Wheeler	6	6
York	184	170

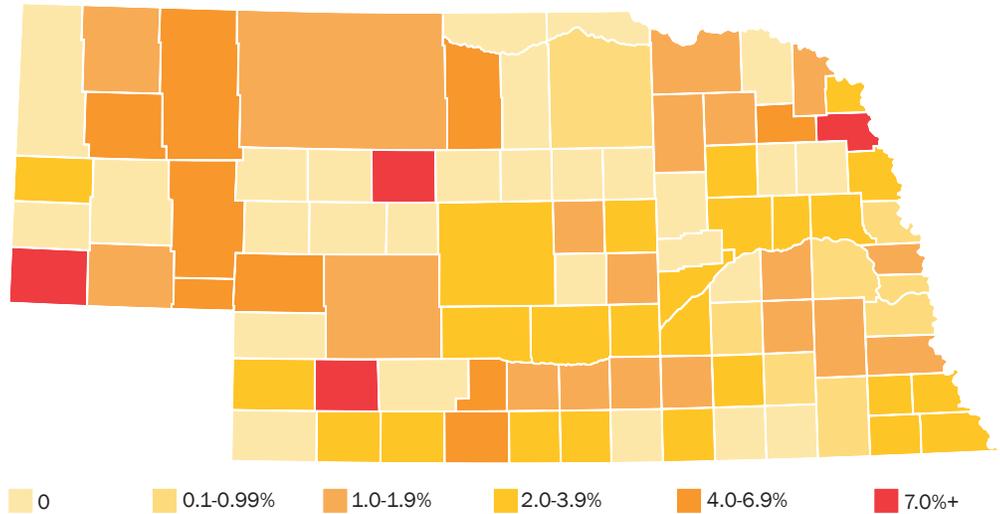
Source: Vital Statistics, Nebraska Department of Health and Human Services.

Percent of births to mothers 17 and under* (2011)

State	
2007:	2.64%
2011:	1.84%

Highest county	
2007:	Thomas
2011:	Thomas

Lowest county	
2007:	30 Counties had 0
2011:	27 Counties had 0



	2007	2011
Adams	3.1%	1.7%
Antelope	1.2%	1.3%
Arthur	0.0%	0.0%
Banner	0.0%	0.0%
Blaine	0.0%	0.0%
Boone	4.7%	0.0%
Box Butte	4.7%	4.0%
Boyd	0.0%	0.0%
Brown	0.0%	4.2%
Buffalo	2.1%	2.3%
Burt	1.3%	3.0%
Butler	0.0%	1.1%
Cass	1.6%	0.7%
Cedar	1.0%	0.0%
Chase	3.3%	2.0%
Cherry	3.1%	1.3%
Cheyenne	1.4%	1.8%
Clay	2.9%	1.2%
Colfax	6.0%	3.0%
Cuming	1.0%	0.0%
Custer	6.8%	2.6%
Dakota	4.8%	3.3%
Dawes	1.7%	1.8%
Dawson	2.7%	3.9%
Deuel	7.7%	5.6%
Dixon	3.5%	1.3%
Dodge	3.4%	3.1%
Douglas	3.4%	1.9%
Dundy	0.0%	0.0%
Fillmore	3.3%	3.8%
Franklin	0.0%	3.7%

	2007	2011
Frontier	0.0%	0.0%
Furnas	1.9%	5.1%
Gage	2.9%	0.9%
Garden	0.0%	4.5%
Garfield	0.0%	0.0%
Gosper	0.0%	4.2%
Grant	0.0%	0.0%
Greeley	0.0%	3.0%
Hall	4.2%	2.9%
Hamilton	1.2%	3.0%
Harlan	0.0%	2.8%
Hayes	0.0%	7.1%
Hitchcock	0.0%	3.1%
Holt	0.8%	0.7%
Hooker	0.0%	0.0%
Howard	3.2%	1.4%
Jefferson	2.3%	0.0%
Johnson	3.9%	3.9%
Kearney	2.5%	1.3%
Keith	1.0%	4.0%
Keya Paha	0.0%	0.0%
Kimball	2.4%	7.1%
Knox	1.0%	1.0%
Lancaster	1.5%	1.4%
Lincoln	2.3%	1.1%
Logan	0.0%	0.0%
Loup	0.0%	0.0%
Madison	3.7%	2.5%
McPherson	0.0%	0.0%
Merrick	1.2%	2.3%
Morrill	10.0%	0.0%

	2007	2011
Nance	0.0%	0.0%
Nemaha	4.8%	2.4%
Nuckolls	2.7%	2.2%
Otoe	1.4%	1.9%
Pawnee	0.0%	3.7%
Perkins	0.0%	0.0%
Phelps	0.8%	1.6%
Pierce	4.7%	1.5%
Platte	2.1%	2.4%
Polk	0.0%	0.0%
Red Willow	0.8%	2.4%
Richardson	6.0%	3.5%
Rock	0.0%	0.0%
Saline	2.9%	0.5%
Sarpy	1.6%	0.9%
Saunders	0.4%	0.4%
Scotts Bluff	3.6%	2.8%
Seward	1.0%	1.4%
Sheridan	1.6%	4.4%
Sherman	2.9%	0.0%
Sioux	0.0%	0.0%
Stanton	2.6%	0.0%
Thayer	0.0%	0.0%
Thomas	20.0%	9.1%
Thurston	5.0%	9.0%
Valley	2.0%	1.8%
Washington	0.5%	0.5%
Wayne	0.9%	4.5%
Webster	2.4%	0.0%
Wheeler	0.0%	0.0%
York	5.4%	0.6%

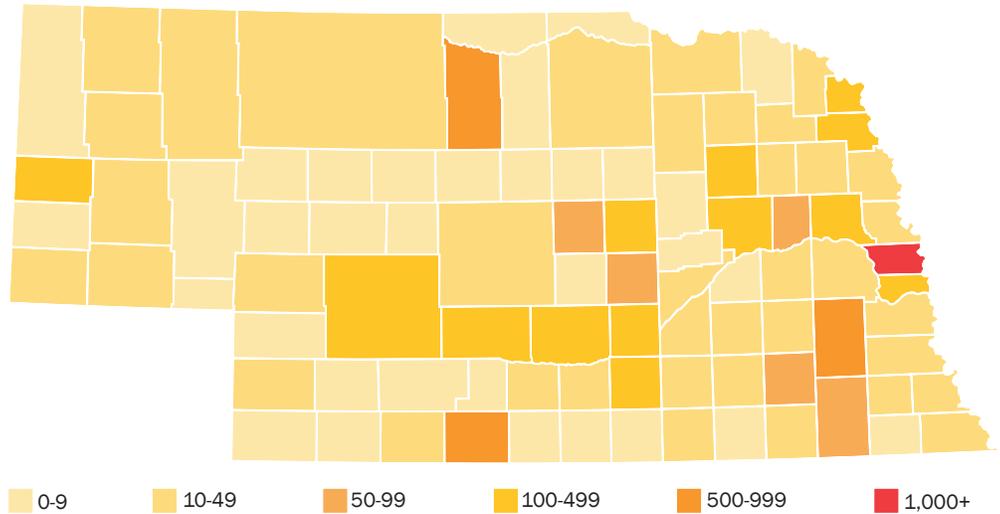
Source: Vital Statistics, Nebraska Department of Health and Human Services.
 * Of total births within each county.

Births to mothers ages 10-17 (2002-2011)

State	
1998-2007:	7,471
2002-2011:	6,613

Highest county	
1998-2007:	Douglas
2002-2011:	Douglas

Lowest county	
1998-2007:	Arthur, Banner, Blaine, Grant, Wheeler
2002-2011:	Logan, McPherson, Sioux, Wheeler



	1998-2007	2002-2011
Adams	142	124
Antelope	11	10
Arthur	0	0
Banner	0	0
Blaine	0	0
Boone	11	9
Box Butte	45	49
Boyd	3	2
Brown	10	8
Buffalo	118	121
Burt	20	15
Butler	12	11
Cass	73	45
Cedar	12	6
Chase	13	17
Cherry	21	20
Cheyenne	36	21
Clay	15	11
Colfax	100	86
Cuming	32	23
Custer	31	19
Dakota	160	149
Dawes	21	19
Dawson	184	174
Deuel	8	6
Dixon	23	19
Dodge	133	147
Douglas	2,753	2,443
Dundy	4	4
Fillmore	19	25
Franklin	5	4

	1998-2007	2002-2011
Frontier	7	6
Furnas	16	12
Gage	71	57
Garden	2	3
Garfield	3	4
Gosper	7	7
Grant	0	0
Greeley	7	3
Hall	407	380
Hamilton	23	24
Harlan	4	6
Hayes	2	2
Hitchcock	3	7
Holt	27	16
Hooker	1	0
Howard	16	9
Jefferson	28	19
Johnson	15	11
Kearney	17	12
Keith	36	26
Keya Paha	3	2
Kimball	11	11
Knox	30	25
Lancaster	928	786
Lincoln	132	118
Logan	2	1
Loup	1	0
Madison	192	169
McPherson	1	1
Merrick	11	18
Morrill	25	16

	1998-2007	2002-2011
Nance	14	6
Nemaha	21	23
Nuckolls	16	11
Otoe	58	44
Pawnee	4	3
Perkins	4	4
Phelps	20	18
Pierce	16	12
Platte	145	128
Polk	7	5
Red Willow	34	19
Richardson	35	20
Rock	4	3
Saline	56	78
Sarpy	368	361
Saunders	36	27
Scotts Bluff	287	235
Seward	23	17
Sheridan	21	20
Sherman	7	3
Sioux	1	1
Stanton	20	18
Thayer	7	7
Thomas	3	2
Thurston	129	124
Valley	8	7
Washington	28	24
Wayne	11	10
Webster	8	4
Wheeler	0	1
York	37	40

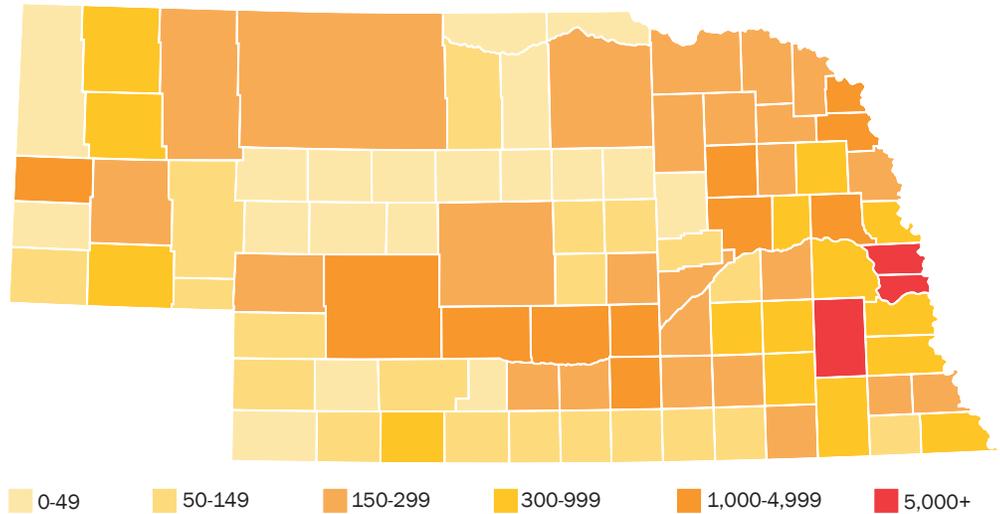
Source: Vital Statistics, Nebraska Department of Health and Human Services.

Births to unmarried mothers (2002-2011)

State	
1998-2007:	74,492
2002-2011:	84,240

Highest county	
1998-2007:	Douglas
2002-2011:	Douglas

Lowest county	
1998-2007:	Blaine
2002-2011:	Arthur, Blaine



	1998-2007	2002-2011
Adams	1,284	1,501
Antelope	154	173
Arthur	5	4
Banner	7	9
Blaine	2	4
Boone	124	142
Box Butte	457	507
Boyd	26	34
Brown	77	78
Buffalo	1,590	1,803
Burt	210	204
Butler	202	210
Cass	761	749
Cedar	152	164
Chase	112	120
Cherry	209	227
Cheyenne	367	359
Clay	173	203
Colfax	732	847
Cuming	288	301
Custer	270	281
Dakota	1,557	1,712
Dawes	288	316
Dawson	1,540	1,641
Deuel	57	70
Dixon	213	214
Dodge	1,511	1,814
Douglas	26,895	30,499
Dundy	40	48
Fillmore	140	158
Franklin	66	65

	1998-2007	2002-2011
Frontier	54	60
Furnas	97	113
Gage	751	848
Garden	36	52
Garfield	24	25
Gosper	51	45
Grant	6	6
Greeley	51	59
Hall	3,549	4,069
Hamilton	185	231
Harlan	62	76
Hayes	11	11
Hitchcock	59	71
Holt	250	294
Hooker	10	11
Howard	186	182
Jefferson	199	223
Johnson	124	154
Kearney	152	180
Keith	280	281
Keya Paha	11	10
Kimball	140	148
Knox	305	299
Lancaster	10,297	11,781
Lincoln	1,520	1,686
Logan	12	14
Loup	6	5
Madison	1,854	2,002
McPherson	10	11
Merrick	192	218
Morrill	172	178

	1998-2007	2002-2011
Nance	105	111
Nemaha	198	232
Nuckolls	104	110
Otoe	557	653
Pawnee	47	52
Perkins	56	64
Phelps	266	280
Pierce	166	162
Platte	1,296	1,488
Polk	109	140
Red Willow	363	399
Richardson	280	311
Rock	15	21
Saline	584	740
Sarpy	4,232	5,235
Saunders	443	532
Scotts Bluff	2,088	2,247
Seward	316	332
Sheridan	240	242
Sherman	72	70
Sioux	11	15
Stanton	157	176
Thayer	97	105
Thomas	8	11
Thurston	1,142	1,179
Valley	90	122
Washington	444	502
Wayne	252	274
Webster	88	86
Wheeler	15	16
York	486	533

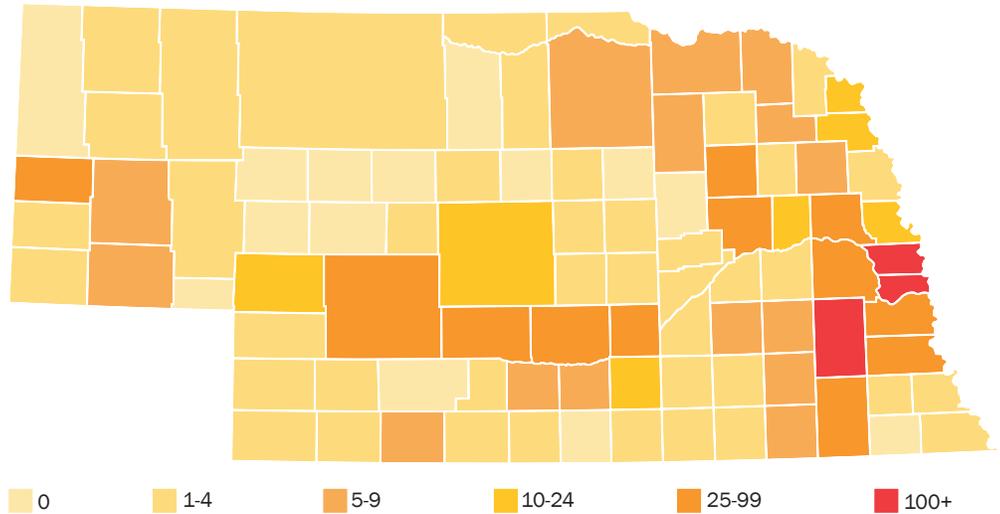
Source: Vital Statistics, Nebraska Department of Health and Human Services.

Infant deaths (2002-2011)

State	
1998-2007:	1,650
2002-2011:	1,540

Highest county	
1998-2007:	Douglas
2002-2011:	Douglas

Lowest county	
1998-2007:	12 Counties have 0
2002-2011:	14 Counties have 0



	1998-2007	2002-2011
Adams	29	24
Antelope	6	7
Arthur	0	0
Banner	1	1
Blaine	1	1
Boone	3	0
Box Butte	5	3
Boyd	1	1
Brown	1	0
Buffalo	35	35
Burt	2	2
Butler	1	3
Cass	21	18
Cedar	4	5
Chase	1	3
Cherry	3	3
Cheyenne	13	9
Clay	2	1
Colfax	19	16
Cuming	6	5
Custer	9	14
Dakota	23	19
Dawes	3	4
Dawson	30	32
Deuel	0	0
Dixon	3	4
Dodge	34	31
Douglas	583	534
Dundy	0	1
Fillmore	5	2
Franklin	0	0

	1998-2007	2002-2011
Frontier	1	0
Furnas	2	1
Gage	16	16
Garden	1	1
Garfield	2	3
Gosper	4	2
Grant	0	0
Greeley	4	3
Hall	71	60
Hamilton	5	4
Harlan	1	3
Hayes	0	1
Hitchcock	3	3
Holt	8	6
Hooker	0	0
Howard	1	2
Jefferson	5	5
Johnson	2	2
Kearney	7	7
Keith	9	15
Keya Paha	0	1
Kimball	2	3
Knox	8	7
Lancaster	246	237
Lincoln	27	28
Logan	1	1
Loup	0	0
Madison	36	37
McPherson	0	0
Merrick	4	3
Morrill	6	5

	1998-2007	2002-2011
Nance	3	3
Nemaha	2	2
Nuckolls	4	3
Otoe	15	11
Pawnee	1	0
Perkins	1	1
Phelps	5	8
Pierce	4	3
Platte	34	32
Polk	2	2
Red Willow	5	7
Richardson	7	3
Rock	1	1
Saline	7	6
Sarpy	113	111
Saunders	15	12
Scotts Bluff	38	40
Seward	9	8
Sheridan	5	3
Sherman	5	3
Sioux	0	0
Stanton	0	2
Thayer	2	3
Thomas	1	0
Thurston	16	13
Valley	3	2
Washington	13	10
Wayne	10	7
Webster	3	2
Wheeler	2	0
York	8	8

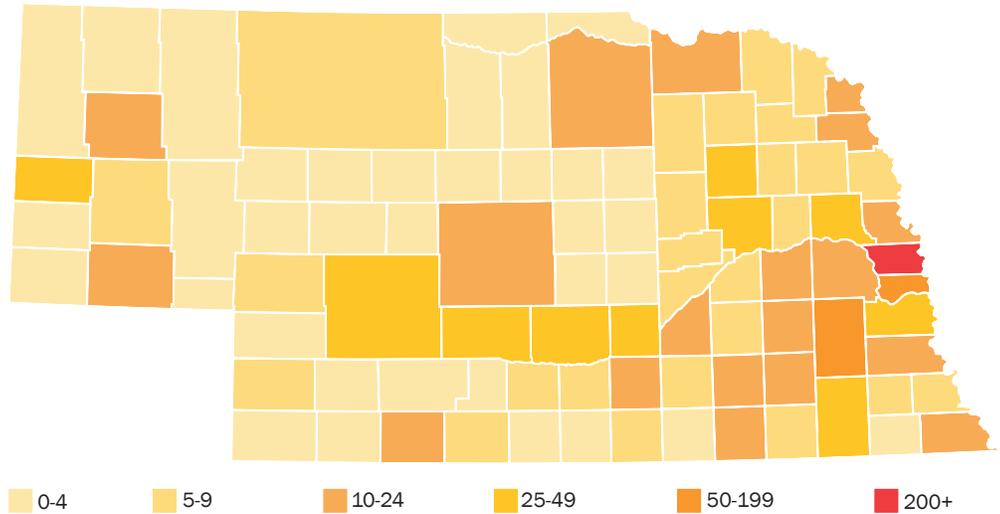
Source: Vital Statistics, Nebraska Department of Health and Human Services.

Deaths of children ages 1-19 (2002-2011)

State	
1998-2007:	1,694
2002-2011	1,495

Highest county	
1998-2007:	Douglas
2002-2011:	Douglas

Lowest county	
1998-2007:	7 Counties have 0
2002-2011	7 Counties have 0



	1998-2007	2002-2011
Adams	25	24
Antelope	7	9
Arthur	1	1
Banner	0	0
Blaine	0	0
Boone	8	5
Box Butte	12	16
Boyd	3	2
Brown	6	4
Buffalo	37	34
Burt	9	7
Butler	10	10
Cass	26	27
Cedar	15	8
Chase	6	5
Cherry	7	5
Cheyenne	18	14
Clay	11	9
Colfax	17	9
Cuming	6	9
Custer	10	10
Dakota	23	22
Dawes	2	3
Dawson	51	36
Deuel	5	3
Dixon	4	6
Dodge	43	37
Douglas	435	404
Dundy	4	1
Fillmore	13	12
Franklin	1	0

	1998-2007	2002-2011
Frontier	6	0
Furnas	6	5
Gage	32	27
Garden	3	2
Garfield	2	1
Gosper	2	2
Grant	4	1
Greeley	3	4
Hall	57	39
Hamilton	7	11
Harlan	3	1
Hayes	3	3
Hitchcock	2	1
Holt	14	13
Hooker	0	0
Howard	2	1
Jefferson	8	7
Johnson	8	6
Kearney	8	7
Keith	8	8
Keya Paha	0	0
Kimball	2	4
Knox	19	19
Lancaster	175	152
Lincoln	39	30
Logan	2	2
Loup	1	3
Madison	32	33
McPherson	1	0
Merrick	10	8
Morrill	9	6

	1998-2007	2002-2011
Nance	8	7
Nemaha	7	7
Nuckolls	6	1
Otoe	22	15
Pawnee	2	1
Perkins	2	2
Phelps	5	7
Pierce	9	5
Platte	38	30
Polk	9	7
Red Willow	10	16
Richardson	13	10
Rock	0	0
Saline	12	13
Sarpy	90	88
Saunders	23	22
Scotts Bluff	51	40
Seward	14	10
Sheridan	6	3
Sherman	4	2
Sioux	0	2
Stanton	7	5
Thayer	10	14
Thomas	3	3
Thurston	16	17
Valley	5	4
Washington	17	16
Wayne	10	6
Webster	5	5
Wheeler	1	1
York	6	8

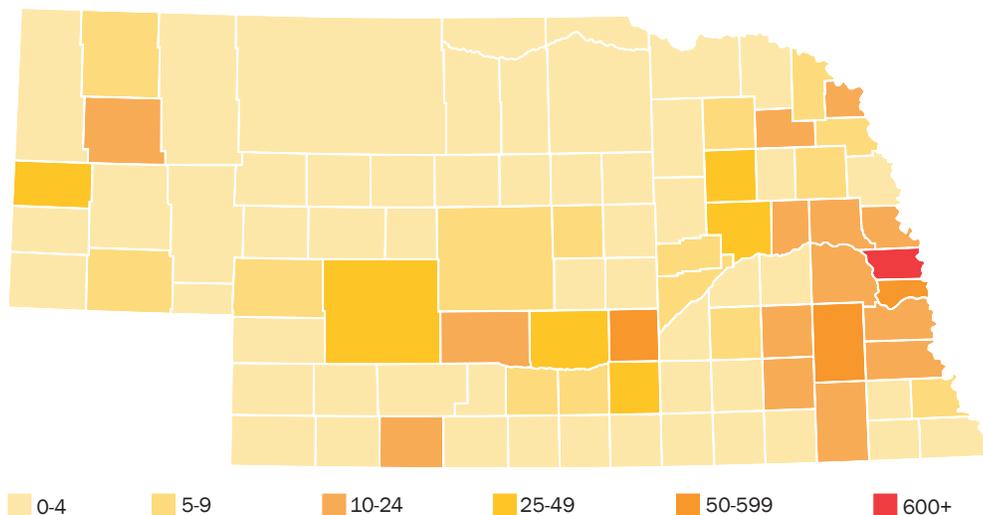
Source: Vital Statistics, Nebraska Department of Health and Human Services.

Low birth weight births (2011)

State	
2007:	1,894
2011:	1,707

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	11 Counties have 0
2011:	13 Counties have 0



	2007	2011
Adams	28	31
Antelope	2	3
Arthur	1	1
Banner	1	1
Blaine	1	0
Boone	6	2
Box Butte	11	10
Boyd	4	4
Brown	0	1
Buffalo	43	32
Burt	9	3
Butler	3	4
Cass	19	12
Cedar	2	3
Chase	6	2
Cherry	6	3
Cheyenne	12	9
Clay	7	2
Colfax	13	11
Cuming	7	6
Custer	12	5
Dakota	26	21
Dawes	8	6
Dawson	26	22
Deuel	1	2
Dixon	7	7
Dodge	39	19
Douglas	666	626
Dundy	0	0
Fillmore	5	1
Franklin	4	3

	2007	2011
Frontier	2	0
Furnas	1	3
Gage	35	13
Garden	0	1
Garfield	0	1
Gosper	0	1
Grant	1	1
Greeley	4	1
Hall	74	84
Hamilton	8	3
Harlan	2	2
Hayes	0	1
Hitchcock	3	1
Holt	5	3
Hooker	1	0
Howard	1	4
Jefferson	7	3
Johnson	2	3
Kearney	7	7
Keith	13	7
Keya Paha	0	0
Kimball	2	3
Knox	7	1
Lancaster	238	253
Lincoln	53	28
Logan	1	0
Loup	1	0
Madison	28	29
McPherson	2	0
Merrick	5	6
Morrill	5	2

	2007	2011
Nance	2	7
Nemaha	5	5
Nuckolls	4	2
Otoe	14	19
Pawnee	3	2
Perkins	2	1
Phelps	4	7
Pierce	11	5
Platte	31	28
Polk	1	0
Red Willow	5	10
Richardson	6	1
Rock	0	0
Saline	9	12
Sarpy	184	169
Saunders	16	17
Scotts Bluff	31	35
Seward	12	10
Sheridan	5	2
Sherman	4	1
Sioux	0	0
Stanton	3	4
Thayer	6	3
Thomas	0	0
Thurston	10	7
Valley	6	6
Washington	15	17
Wayne	10	12
Webster	1	4
Wheeler	0	0
York	11	8

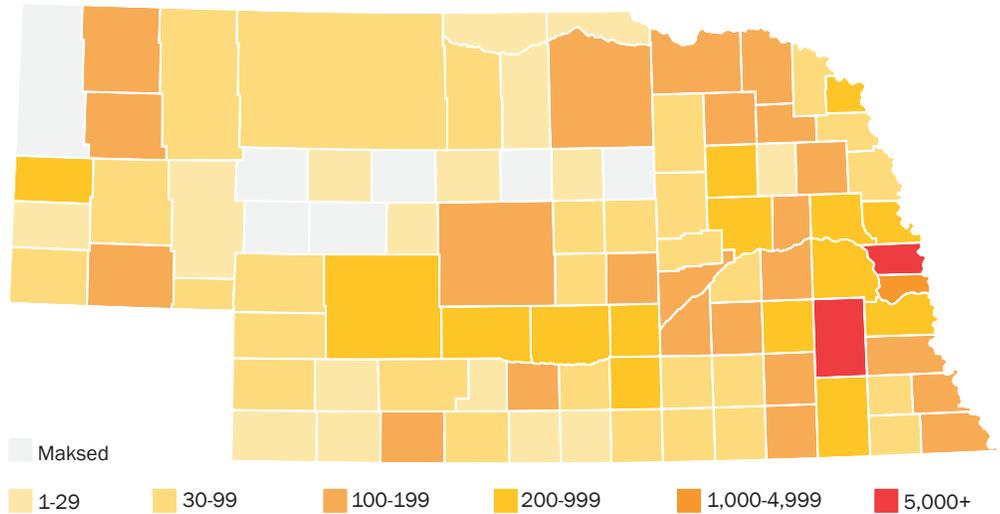
Source: Vital Statistics, Nebraska Department of Health and Human Services.

Number of graduates from public and non-public schools (2010-2011)

State	
2006-2007:	21,240
2010-2011:	22,637

Highest county	
2006-2007:	Douglas
2010-2011:	Douglas

Lowest county	
2006-2007:	10 counties have fewer than 10
2010-2011:	6 counties have fewer than 10



	2006-2007	2010-2011
Adams	346	402
Antelope	125	79
Arthur	*	*
Banner	*	13
Blaine	13	11
Boone	97	82
Box Butte	133	131
Boyd	50	27
Brown	48	38
Buffalo	566	527
Burt	94	92
Butler	112	123
Cass	234	280
Cedar	171	181
Chase	69	68
Cherry	71	59
Cheyenne	119	116
Clay	46	61
Colfax	172	165
Cuming	164	137
Custer	152	133
Dakota	210	290
Dawes	172	143
Dawson	306	339
Deuel	36	35
Dixon	98	94
Dodge	409	463
Douglas	5674	6,460
Dundy	*	28
Fillmore	99	96
Franklin	34	25

	2006-2007	2010-2011
Frontier	52	49
Furnas	86	97
Gage	226	249
Garden	33	24
Garfield	22	23
Gosper	*	22
Grant	16	*
Greeley	56	38
Hall	684	814
Hamilton	119	121
Harlan	27	22
Hayes	18	11
Hitchcock	*	18
Holt	183	160
Hooker	15	19
Howard	104	105
Jefferson	137	113
Johnson	68	47
Kearney	114	95
Keith	108	98
Keya Paha	13	12
Kimball	37	40
Knox	136	113
Lancaster	2614	2,989
Lincoln	388	427
Logan	16	12
Loup	*	*
Madison	473	478
McPherson	12	*
Merrick	97	103
Morrill	75	49

	2006-2007	2010-2011
Nance	73	63
Nemaha	80	106
Nuckolls	*	96
Otoe	202	187
Pawnee	43	46
Perkins	38	30
Phelps	103	136
Pierce	130	104
Platte	452	433
Polk	107	98
Red Willow	151	145
Richardson	137	113
Rock	20	12
Saline	189	187
Sarpy	1706	1,910
Saunders	291	274
Scotts Bluff	383	457
Seward	219	229
Sheridan	75	40
Sherman	37	33
Sioux	*	*
Stanton	*	24
Thayer	73	67
Thomas	*	*
Thurston	80	87
Valley	53	48
Washington	244	256
Wayne	122	126
Webster	56	51
Wheeler	21	*
York	196	184

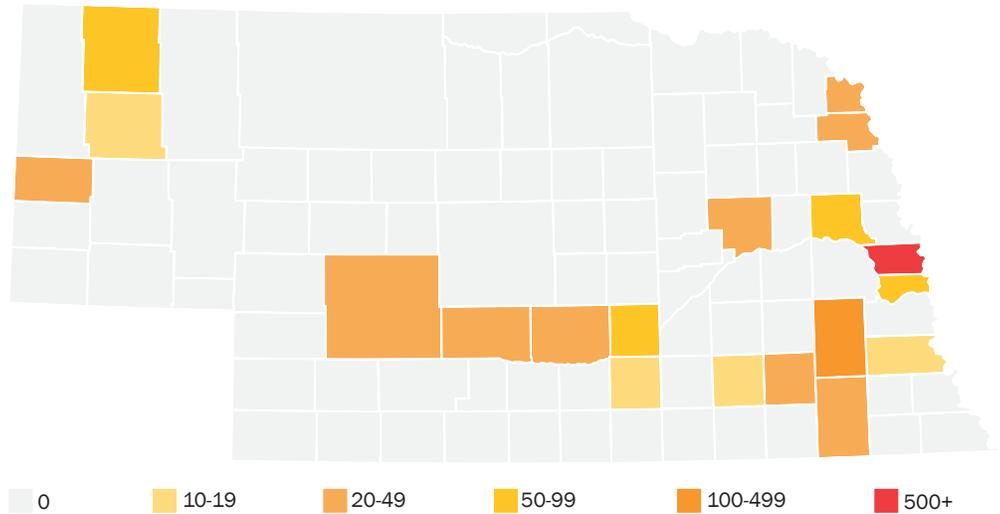
Source: Nebraska Department of Education.
* Data are masked when there are fewer than 10.

Number of dropouts from public and non-public schools (2010-2011)

State	
2006-2007:	2,709
2010-2011:	1,937

Highest county	
2006-2007:	Douglas
2010-2011:	Douglas

Lowest county	
2006-2007:	23 counties had 0
2010-2011:	21 counties had 0



	2006-2007	2010-2011
Adams	29	16
Antelope	*	*
Arthur	*	*
Banner	*	*
Blaine	*	*
Boone	*	*
Box Butte	*	12
Boyd	*	*
Brown	*	*
Buffalo	76	46
Burt	*	*
Butler	*	*
Cass	10	*
Cedar	*	*
Chase	*	*
Cherry	*	*
Cheyenne	*	*
Clay	*	*
Colfax	17	*
Cuming	*	*
Custer	*	*
Dakota	39	22
Dawes	35	53
Dawson	44	39
Deuel	*	*
Dixon	*	*
Dodge	108	78
Douglas	1,244	701
Dundy	*	*
Fillmore	*	13
Franklin	*	*

	2006-2007	2010-2011
Frontier	*	*
Furnas	*	*
Gage	20	22
Garden	*	*
Garfield	*	*
Gosper	*	*
Grant	*	*
Greeley	*	*
Hall	126	94
Hamilton	*	*
Harlan	*	*
Hayes	*	*
Hitchcock	*	*
Holt	*	*
Hooker	*	*
Howard	*	*
Jefferson	*	*
Johnson	*	*
Kearney	*	*
Keith	*	*
Keya Paha	*	*
Kimball	*	*
Knox	*	*
Lancaster	504	373
Lincoln	15	35
Logan	*	*
Loup	*	*
Madison	29	*
McPherson	*	*
Merrick	*	*
Morrill	*	*

	2006-2007	2010-2011
Nance	*	*
Nemaha	*	*
Nuckolls	*	*
Otoe	17	11
Pawnee	*	*
Perkins	*	*
Phelps	*	*
Pierce	*	*
Platte	28	33
Polk	*	*
Red Willow	*	*
Richardson	*	*
Rock	*	*
Saline	20	25
Sarpy	61	74
Saunders	*	*
Scotts Bluff	50	43
Seward	12	*
Sheridan	*	*
Sherman	*	*
Sioux	*	*
Stanton	*	*
Thayer	*	*
Thomas	*	*
Thurston	30	24
Valley	*	*
Washington	*	*
Wayne	*	*
Webster	*	*
Wheeler	*	*
York	19	*

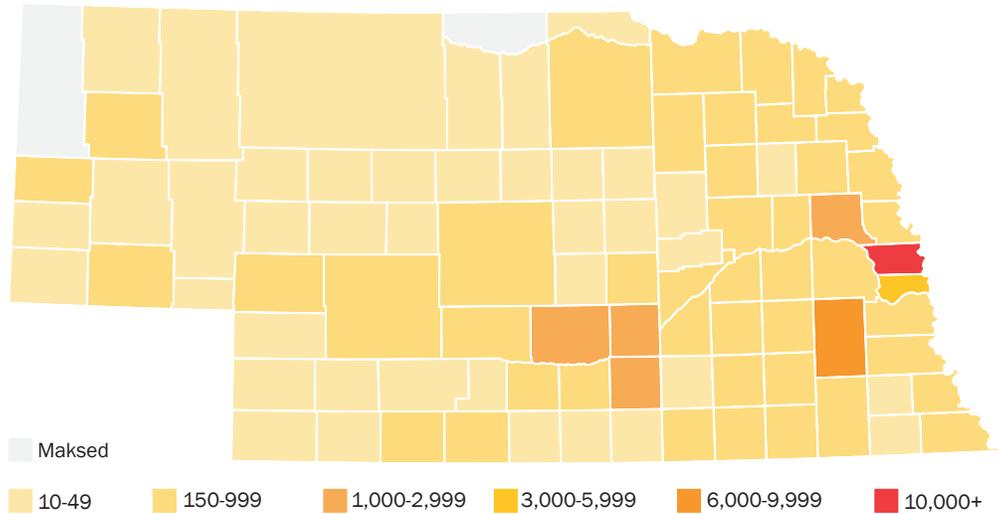
Source: Nebraska Department of Education.
 * Data are masked when there are fewer than 10.

Special Education* (2010-2011)

State	
2006-2007:	47,126
2010-2011:	47,824

Highest county	
2006-2007:	Douglas
2010-2011:	Douglas

Lowest county	
2006-2007:	Keya Paha
2010-2011:	Wheeler



	2006-2007	2010-2011
Adams	918	1,095
Antelope	201	182
Arthur	15	16
Banner	16	20
Blaine	22	26
Boone	143	124
Box Butte	401	316
Boyd	85	76
Brown	70	68
Buffalo	1,113	1,251
Burt	254	216
Butler	220	231
Cass	687	582
Cedar	220	201
Chase	92	90
Cherry	104	111
Cheyenne	285	263
Clay	156	120
Colfax	247	247
Cuming	262	292
Custer	297	322
Dakota	621	639
Dawes	172	144
Dawson	886	797
Deuel	59	58
Dixon	172	177
Dodge	1,192	1,226
Douglas	13,239	14,395
Dundy	86	69
Fillmore	256	224
Franklin	48	59

	2006-2007	2010-2011
Frontier	92	99
Furnas	205	203
Gage	639	671
Garden	36	30
Garfield	49	49
Gosper	74	56
Grant	19	18
Greeley	96	83
Hall	1,461	1,415
Hamilton	291	298
Harlan	71	59
Hayes	16	15
Hitchcock	48	42
Holt	285	306
Hooker	23	23
Howard	180	166
Jefferson	363	370
Johnson	118	121
Kearney	304	267
Keith	163	179
Keya Paha	*	*
Kimball	80	55
Knox	266	238
Lancaster	6,430	6,525
Lincoln	1,130	908
Logan	42	35
Loup	25	22
Madison	982	955
McPherson	13	22
Merrick	151	163
Morrill	119	106

	2006-2007	2010-2011
Nance	119	107
Nemaha	189	209
Nuckolls	273	299
Otoe	498	419
Pawnee	95	84
Perkins	76	57
Phelps	334	319
Pierce	235	222
Platte	779	801
Polk	180	183
Red Willow	380	328
Richardson	290	242
Rock	26	27
Saline	424	378
Sarpy	3,129	3,562
Saunders	427	448
Scotts Bluff	742	750
Seward	363	3,554
Sheridan	134	146
Sherman	90	77
Sioux	12	*
Stanton	84	80
Thayer	160	162
Thomas	19	16
Thurston	354	357
Valley	98	90
Washington	503	554
Wayne	239	195
Webster	123	126
Wheeler	18	14
York	418	401

Source: Nebraska Department of Education.

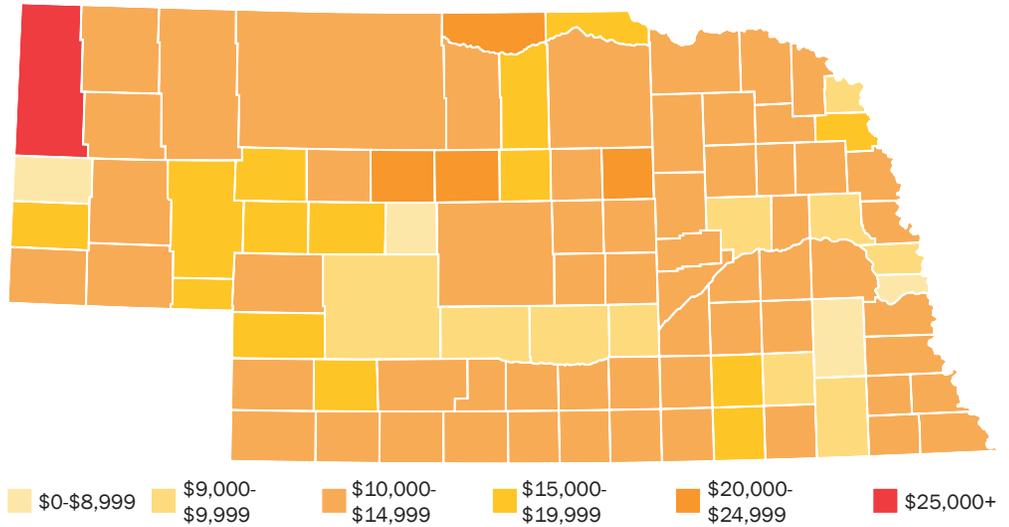
* Data are masked when there are fewer than 10. Number of children with verified disability receiving special education on Oct. 1 of each school year.

Cost per pupil* (2010-2011)

State	
2006-2007:	\$9,023.44
2010-2011:	\$9,967.94

Highest county	
2006-2007:	Sioux
2010-2011:	Sioux

Lowest county	
2006-2007:	Hall
2010-2011:	Lancaster



	2006-2007	2010-2011
Adams	\$9,401	\$10,242
Antelope	\$11,452	\$14,100
Arthur	\$18,428	\$17,987
Banner	\$13,159	\$17,247
Blaine	\$15,173	\$20,421
Boone	\$10,946	\$14,856
Box Butte	\$9,589	\$10,741
Boyd	\$13,483	\$17,206
Brown	\$10,909	\$10,881
Buffalo	\$8,429	\$9,705
Burt	\$9,711	\$11,980
Butler	\$9,915	\$13,756
Cass	\$9,098	\$10,846
Cedar	\$11,253	\$13,653
Chase	\$11,483	\$13,210
Cherry	\$12,380	\$14,648
Cheyenne	\$9,524	\$10,779
Clay	\$10,592	\$11,772
Colfax	\$9,049	\$10,880
Cuming	\$9,389	\$11,141
Custer	\$10,949	\$12,869
Dakota	\$8,611	\$9,021
Dawes	\$10,062	\$11,265
Dawson	\$8,748	\$9,081
Deuel	\$13,820	\$15,373
Dixon	\$8,837	\$11,157
Dodge	\$8,371	\$9,907
Douglas	\$8,672	\$9,253
Dundy	\$12,517	\$14,873
Fillmore	\$11,065	\$15,276
Franklin	\$10,461	\$12,100

	2006-2007	2010-2011
Frontier	\$11,505	\$14,325
Furnas	\$11,280	\$12,511
Gage	\$8,966	\$9,881
Garden	\$14,629	\$16,085
Garfield	\$11,114	\$11,402
Gosper	\$10,953	\$13,499
Grant	\$18,291	\$19,976
Greeley	\$12,430	\$14,925
Hall	\$7,886	\$9,186
Hamilton	\$9,146	\$11,437
Harlan	\$9,104	\$11,939
Hayes	\$16,040	\$17,701
Hitchcock	\$13,736	\$13,573
Holt	\$11,467	\$14,190
Hooker	\$12,980	\$14,456
Howard	\$9,402	\$10,871
Jefferson	\$10,722	\$12,332
Johnson	\$10,403	\$12,809
Kearney	\$9,832	\$12,115
Keith	\$9,808	\$11,559
Keya Paha	\$15,613	\$20,534
Kimball	\$12,445	\$11,982
Knox	\$10,855	\$13,032
Lancaster	\$8,482	\$8,871
Lincoln	\$8,645	\$9,577
Logan	\$12,824	\$13,432
Loup	\$12,457	\$18,911
Madison	\$9,654	\$10,379
McPherson	\$17,477	\$16,927
Merrick	\$9,063	\$11,059
Morrill	\$9,425	\$11,721

	2006-2007	2010-2011
Nance	\$9,113	\$11,503
Nemaha	\$9,048	\$10,846
Nuckolls	\$12,009	\$14,196
Otoe	\$8,420	\$10,117
Pawnee	\$11,208	\$13,578
Perkins	\$11,950	\$16,832
Phelps	\$9,160	\$10,245
Pierce	\$9,476	\$11,591
Platte	\$8,356	\$9,389
Polk	\$10,318	\$13,347
Red Willow	\$8,069	\$10,063
Richardson	\$10,669	\$12,240
Rock	\$15,182	\$17,198
Saline	\$8,707	\$9,918
Sarpy	\$8,297	\$8,912
Saunders	\$8,955	\$10,294
Scotts Bluff	\$9,812	\$8,876
Seward	\$8,831	\$11,220
Sheridan	\$12,555	\$12,947
Sherman	\$10,533	\$13,125
Sioux	\$19,589	\$25,924
Stanton	\$10,045	\$10,668
Thayer	\$12,682	\$16,148
Thomas	\$15,167	\$20,485
Thurston	\$13,208	\$15,461
Valley	\$11,092	\$14,126
Washington	\$8,300	\$10,099
Wayne	\$9,077	\$10,368
Webster	\$9,578	\$11,292
Wheeler	\$13,470	\$21,672
York	\$10,224	\$10,751

Source: Nebraska Department of Education.

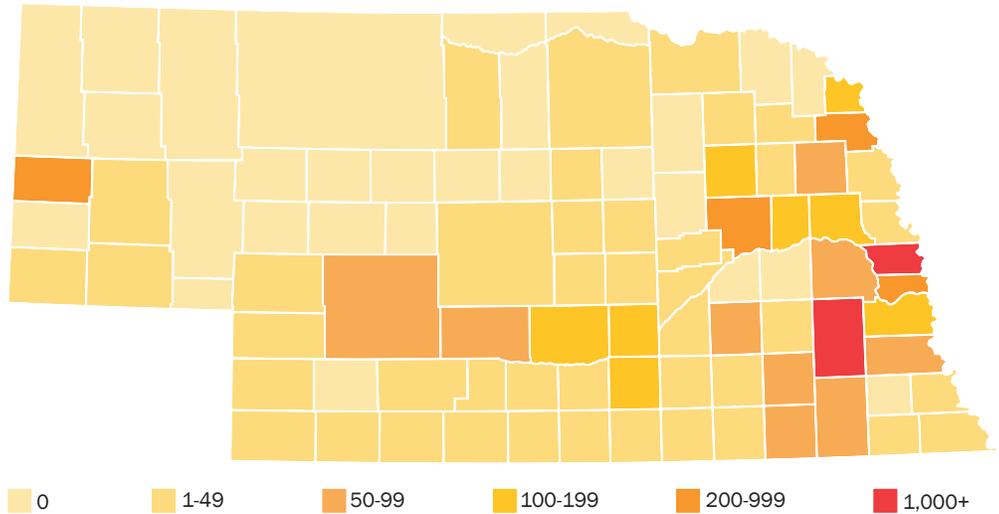
* By Average Daily Membership

Head Start and Early Head Start (2010-2011)

State	
2006-2007:	5,106*
2010-2011:	6,087*

Highest county	
2006-2007:	Douglas
2010-2011:	Douglas

Lowest county	
2006-2007:	22 Counties have 0
2010-2011:	28 Counties have 0



	2007	2011
Adams	162	168
Antelope	15	0
Arthur	0	0
Banner	0	0
Blaine	0	0
Boone	17	0
Box Butte	0	0
Boyd	0	0
Brown	26	26
Buffalo	116	116
Burt	17	34
Butler	0	0
Cass	140	140
Cedar	17	0
Chase	10	10
Cherry	0	0
Cheyenne	40	18
Clay	36	39
Colfax	75	126
Cuming	38	54
Custer	27	29
Dakota	140	156
Dawes	0	0
Dawson	61	61
Deuel	15	0
Dixon	4	0
Dodge	125	125
Douglas	1,088	1,124
Dundy	10	10
Fillmore	18	17
Franklin	32	23

	2007	2011
Frontier	10	10
Furnas	20	20
Gage	74	87
Garden	7	0
Garfield	17	17
Gosper	10	10
Grant	0	0
Greeley	16	17
Hall	185	197
Hamilton	18	20
Harlan	10	10
Hayes	0	0
Hitchcock	10	10
Holt	46	44
Hooker	0	0
Howard	20	26
Jefferson	31	51
Johnson	0	0
Kearney	17	17
Keith	17	17
Keya Paha	0	0
Kimball	20	17
Knox	52	18
Lancaster	600	1,044
Lincoln	70	70
Logan	0	0
Loup	0	0
Madison	112	138
McPherson	0	0
Merrick	16	17
Morrill	20	20

	2007	2011
Nance	16	17
Nemaha	32	40
Nuckolls	35	35
Otoe	55	52
Pawnee	17	16
Perkins	10	10
Phelps	17	17
Pierce	4	4
Platte	189	213
Polk	0	0
Red Willow	18	18
Richardson	52	48
Rock	0	0
Saline	52	53
Sarpy	185	221
Saunders	44	88
Scotts Bluff	334	334
Seward	18	17
Sheridan	0	0
Sherman	18	17
Sioux	0	0
Stanton	17	17
Thayer	17	17
Thomas	0	0
Thurston	208	211
Valley	17	17
Washington	18	18
Wayne	18	18
Webster	37	25
Wheeler	0	0
York	51	71

Source: Nebraska Department of Education.

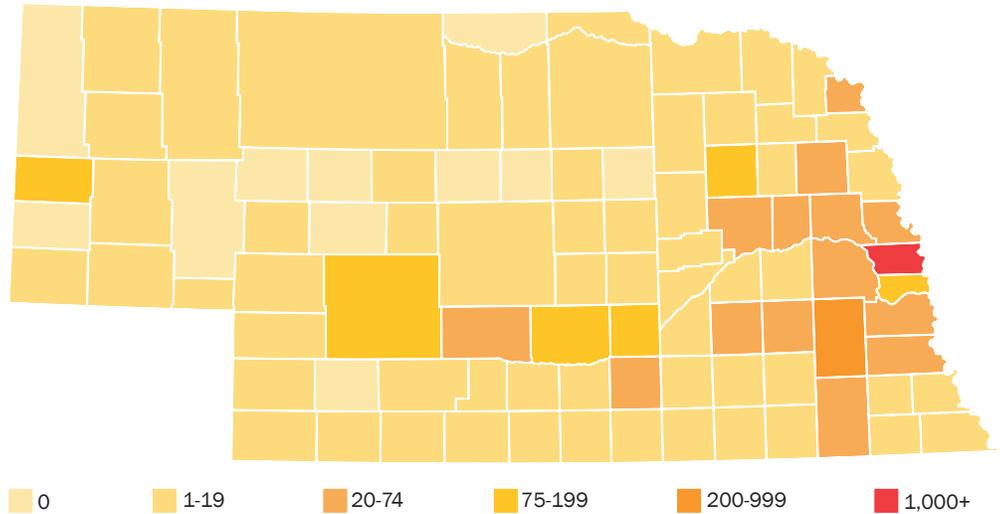
* Includes children whose home county was not specified, either because the program served more than one county or was a Tribal grantee.

Children in out-of-home care (December 31, 2011)

State	
2006-2007:	5,043
2010-2011:	4,320

Highest county	
2006-2007:	Douglas
2010-2011:	Douglas

Lowest county	
2006-2007:	11 Counties had 0
2010-2011:	11 Counties had 0



	2007	2011
Adams	98	63
Antelope	8	8
Arthur	0	1
Banner	0	0
Blaine	0	0
Boone	2	4
Box Butte	8	11
Boyd	4	1
Brown	2	3
Buffalo	87	80
Burt	8	2
Butler	28	13
Cass	48	37
Cedar	1	5
Chase	7	5
Cherry	11	8
Cheyenne	13	13
Clay	11	6
Colfax	24	23
Cuming	18	23
Custer	19	8
Dakota	51	41
Dawes	10	5
Dawson	47	58
Deuel	5	4
Dixon	12	3
Dodge	74	73
Douglas	1,811	1,728
Dundy	4	2
Fillmore	20	10
Franklin	1	4

	2007	2011
Frontier	4	2
Furnas	9	6
Gage	41	24
Garden	6	0
Garfield	3	2
Gosper	3	3
Grant	0	0
Greeley	11	2
Hall	185	128
Hamilton	15	7
Harlan	10	6
Hayes	3	0
Hitchcock	3	3
Holt	11	9
Hooker	1	0
Howard	7	7
Jefferson	10	6
Johnson	11	3
Kearney	4	19
Keith	20	10
Keya Paha	0	0
Kimball	13	3
Knox	4	2
Lancaster	1,057	904
Lincoln	201	170
Logan	0	1
Loup	0	0
Madison	87	94
McPherson	0	0
Merrick	15	10
Morrill	11	7

	2007	2011
Nance	6	4
Nemaha	5	12
Nuckolls	3	3
Otoe	8	31
Pawnee	3	2
Perkins	3	2
Phelps	24	12
Pierce	4	5
Platte	54	55
Polk	11	7
Red Willow	27	18
Richardson	8	15
Rock	1	2
Saline	21	13
Sarpy	210	179
Saunders	27	26
Scotts Bluff	194	92
Seward	29	20
Sheridan	9	4
Sherman	6	2
Sioux	0	0
Stanton	1	2
Thayer	8	7
Thomas	0	1
Thurston	13	5
Valley	10	17
Washington	17	23
Wayne	4	5
Webster	10	2
Wheeler	0	0
York	39	29

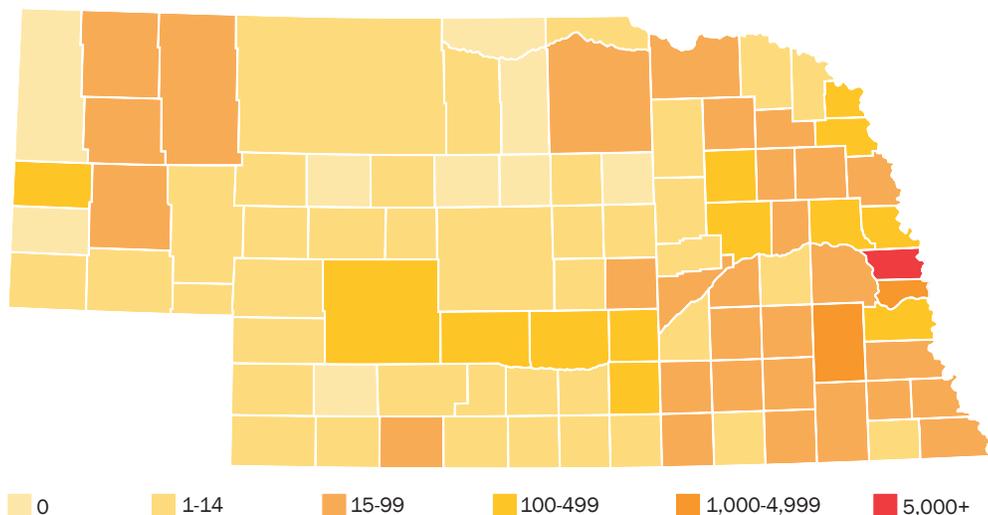
Source: Foster Care Review Office.

Sexually transmitted infections among youth 19 & under (2002-2011)

State	
1998-2007:	21,733
2002-2011:	23,112

Highest county	
1998-2007:	Douglas
2002-2011:	Douglas

Lowest county	
1998-2007:	7 Counties had 0
2002-2011:	Multiple



0 1-14 15-99 100-499 1,000-4,999 5,000+

	1998-2007	2002-2011
Adams	278	257
Antelope	16	11
Arthur	0	2
Banner	0	0
Blaine	1	0
Boone	12	10
Box Butte	45	52
Boyd	2	2
Brown	17	11
Buffalo	358	426
Burt	19	20
Butler	12	13
Cass	127	114
Cedar	7	8
Chase	3	2
Cherry	2	5
Cheyenne	18	14
Clay	13	16
Colfax	25	32
Cuming	16	21
Custer	21	13
Dakota	188	128
Dawes	136	94
Dawson	120	116
Deuel	2	2
Dixon	14	14
Dodge	257	307
Douglas	12,682	13,532
Dundy	1	1
Fillmore	82	83
Franklin	1	1

	1998-2007	2002-2011
Frontier	8	9
Furnas	11	7
Gage	83	81
Garden	6	6
Garfield	1	1
Gosper	3	4
Grant	3	3
Greeley	3	3
Hall	436	419
Hamilton	22	9
Harlan	4	5
Hayes	2	0
Hitchcock	1	1
Holt	19	17
Hooker	0	0
Howard	19	15
Jefferson	22	27
Johnson	23	29
Kearney	14	14
Keith	24	9
Keya Paha	0	0
Kimball	16	13
Knox	18	22
Lancaster	3,528	3,889
Lincoln	184	225
Logan	1	2
Loup	0	0
Madison	274	264
McPherson	1	1
Merrick	17	17
Morrill	30	26

	1998-2007	2002-2011
Nance	8	11
Nemaha	28	29
Nuckolls	17	16
Otoe	60	78
Pawnee	4	10
Perkins	2	3
Phelps	16	11
Pierce	15	20
Platte	135	184
Polk	13	16
Red Willow	58	47
Richardson	38	42
Rock	1	0
Saline	73	70
Sarpy	980	1,241
Saunders	51	49
Scotts Bluff	372	320
Seward	37	36
Sheridan	25	23
Sherman	6	5
Sioux	1	0
Stanton	10	17
Thayer	10	6
Thomas	2	2
Thurston	304	258
Valley	8	10
Washington	86	101
Wayne	51	42
Webster	5	6
Wheeler	0	0
York	31	34

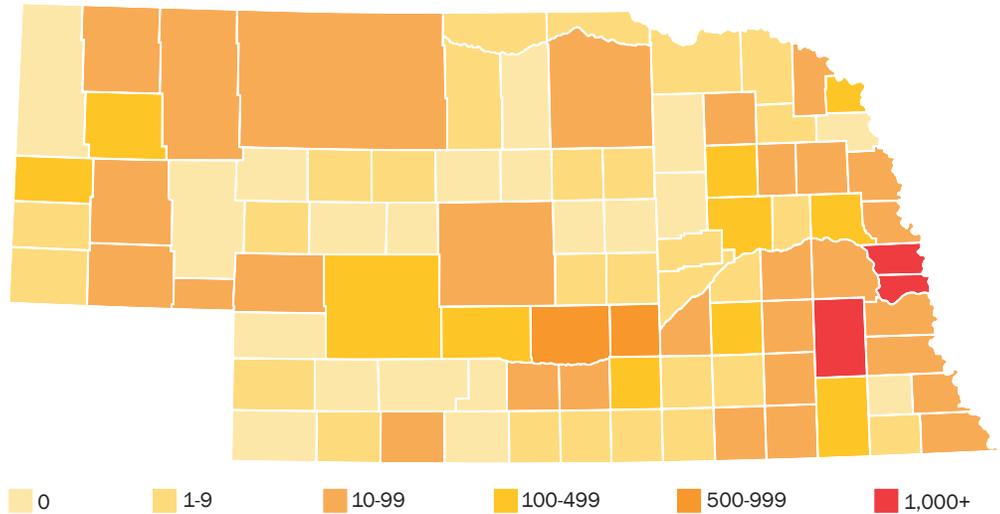
Source: Vital Statistics, Nebraska Department of Health and Human Services.

Youth arrests, ages 17 and under (2011)

State	
2007:	15,649
2011:	13,144

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	17 counties has 0
2011:	20 counties had 0



	2007	2011
Adams	277	185
Antelope	5	0
Arthur	0	1
Banner	1	1
Blaine	0	0
Boone	2	0
Box Butte	180	118
Boyd	10	8
Brown	0	3
Buffalo	553	508
Burt	21	17
Butler	34	14
Cass	49	43
Cedar	4	8
Chase	14	5
Cherry	31	35
Cheyenne	81	36
Clay	1	2
Colfax	116	3
Cuming	10	23
Custer	60	31
Dakota	249	312
Dawes	18	33
Dawson	346	254
Deuel	4	13
Dixon	30	10
Dodge	290	257
Douglas	4,429	3,812
Dundy	0	0
Fillmore	0	2
Franklin	4	3

	2007	2011
Frontier	6	0
Furnas	17	0
Gage	241	214
Garden	0	0
Garfield	0	1
Gosper	2	0
Grant	0	0
Greeley	8	0
Hall	478	952
Hamilton	2	11
Harlan	8	4
Hayes	2	0
Hitchcock	1	2
Holt	39	13
Hooker	0	1
Howard	9	8
Jefferson	70	25
Johnson	0	0
Kearney	56	35
Keith	82	68
Keya Paha	5	6
Kimball	2	1
Knox	4	1
Lancaster	3,224	2,562
Lincoln	368	335
Logan	0	0
Loup	0	0
Madison	521	384
McPherson	0	0
Merrick	1	4
Morrill	55	24

	2007	2011
Nance	2	2
Nemaha	53	13
Nuckolls	0	6
Otoe	71	80
Pawnee	0	3
Perkins	2	0
Phelps	47	40
Pierce	11	10
Platte	352	302
Polk	18	9
Red Willow	138	59
Richardson	49	66
Rock	2	0
Saline	86	95
Sarpy	1,514	1,247
Saunders	83	53
Scotts Bluff	581	324
Seward	108	61
Sheridan	38	79
Sherman	0	3
Sioux	7	0
Stanton	68	30
Thayer	21	10
Thomas	2	2
Thurston	1	0
Valley	18	0
Washington	131	80
Wayne	22	1
Webster	12	3
Wheeler	0	2
York	191	171

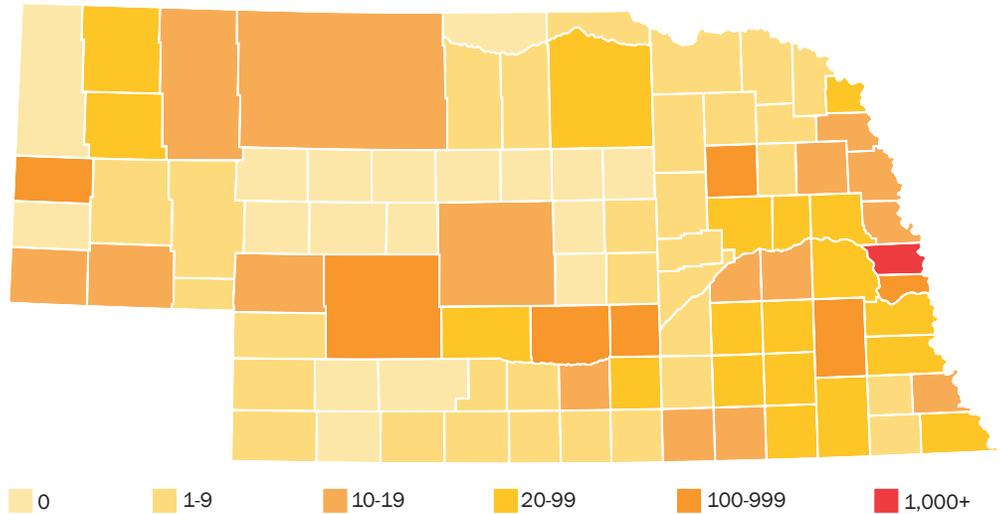
Source: Nebraska Commission on Law Enforcement & Criminal Justice.

Child maltreatment victims* (2011)

State	
2007:	4,440
2011:	5,239

Highest county	
2007:	Douglas
2011:	Douglas

Lowest county	
2007:	16 Counties have 0
2011:	18 Counties have 0



	2007	2011
Adams	59	60
Antelope	8	5
Arthur	0	0
Banner	0	0
Blaine	0	0
Boone	7	7
Box Butte	41	41
Boyd	4	4
Brown	5	8
Buffalo	68	115
Burt	4	13
Butler	31	18
Cass	35	52
Cedar	3	3
Chase	0	5
Cherry	17	16
Cheyenne	13	16
Clay	9	9
Colfax	12	28
Cuming	11	15
Custer	21	13
Dakota	61	86
Dawes	28	21
Dawson	33	41
Deuel	0	9
Dixon	7	4
Dodge	65	57
Douglas	1,276	1,835
Dundy	1	1
Fillmore	4	21
Franklin	3	5

	2007	2011
Frontier	0	0
Furnas	6	2
Gage	45	72
Garden	7	2
Garfield	1	0
Gosper	0	3
Grant	0	0
Greeley	4	3
Hall	225	112
Hamilton	2	7
Harlan	4	6
Hayes	0	0
Hitchcock	0	0
Holt	18	20
Hooker	0	0
Howard	8	8
Jefferson	23	21
Johnson	12	7
Kearney	5	11
Keith	7	15
Keya Paha	0	0
Kimball	8	13
Knox	28	1
Lancaster	1,216	1,223
Lincoln	112	117
Logan	1	0
Loup	1	0
Madison	72	119
McPherson	0	0
Merrick	4	3
Morrill	21	9

	2007	2011
Nance	17	7
Nemaha	2	19
Nuckolls	2	13
Otoe	11	44
Pawnee	5	6
Perkins	2	2
Phelps	5	8
Pierce	14	8
Platte	73	79
Polk	6	15
Red Willow	27	4
Richardson	6	20
Rock	0	6
Saline	7	27
Sarpy	253	302
Saunders	39	47
Scotts Bluff	136	198
Seward	42	43
Sheridan	7	15
Sherman	4	0
Sioux	3	0
Stanton	1	2
Thayer	11	18
Thomas	0	0
Thurston	44	10
Valley	1	0
Washington	21	11
Wayne	2	4
Webster	4	8
Wheeler	0	0
York	39	41

Source: Department of Health and Human Services.

* Number of substantiated victims of child maltreatment.



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