2020

Central Nebraska Community Action Partnership, Inc.

Community Needs Assessment

Serving the Counties of:
Blaine, Boone, Brown, Boyd,
Colfax, Custer, Garfield,
Greeley, Hall, Hamilton,
Holt, Howard, Keya Paha,
Loup, Merrick, Nance, Platte,
Rock, Sherman, Valley, &
Wheeler



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Districts			• • • • • • • • • • • • • • • • • • • •		.123
Blaine	Boone	Boyd		Brown	
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RESOURCES

2020

As we mark the end of a decade, 2020 begins one of the most important as far as data collections, with highlights including the 2017 Economic Census, Statistics in Schools, America Counts and Data.census.gov opening a new data platform to store all of this information. 2020 promises to be an exciting collection and release in the world of numbers.

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CENSUS

The census is required by the U.S. Constitution to determine the number of seats each state gets in the House of Representatives. It also provides data for redrawing legislative districts. Responding is important because state, local and federal lawmakers use statistics from the decennial census to help them determine how more than \$675 billion in federal funds will be spent every year for the next 10 years.

Why the Census Is Important for Rural America

Many federal programs are aimed at helping people in rural areas, and funding for those programs is often determined by census statistics.

There are several programs specifically geared toward rural growth, according to the Census Bureau working paper, "Uses of Census Bureau Data in Federal Funds." There are also many general programs that focus on rural subsets, like <u>Rural Education</u> and the Department of Justice's <u>Rural Domestic Violence Assistance</u> programs.

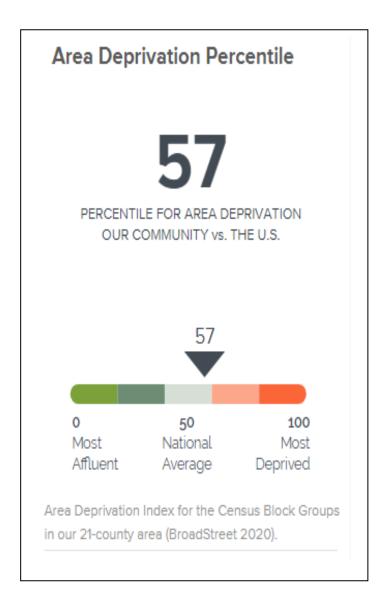
Other important programs informed by census statistics include <u>Water and Waste Disposal</u> <u>Systems for Rural Communities</u>, <u>Rural Business Development Grants</u>, and <u>Rural Housing</u> Preservation Grants.

"When residents live in an area that's more rural than urban, they are trying to make decisions like how to build schools, what services need to be offered. Really, the only source of data that we have is U.S. Census Bureau data," Craigle said. "The census is the one chance to get that really great information for rural America."

https://www.census.gov/library/stories

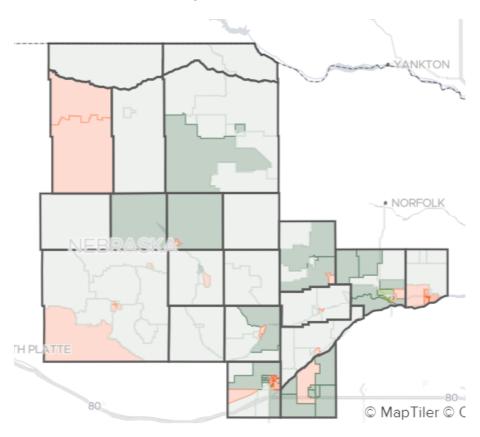
COMMUNITY NEEDS ASSESSMENT

A Community Needs Assessment is a process conducted by all Community Action Agencies every three years to determine the underlying causes and conditions of poverty within the community they serve and identify the available resources to address the unmet needs of the community's most vulnerable residents. The Community Needs Assessment is the first phase of the Results Oriented Management and Accountability (ROMA) Cycle, grounding and guiding the work to develop and implement programs and services that lift families and communities out of poverty.



PERCENT (%) OF THE **TOTAL**POPULATION OF OUR COMMUNITY BY DEPRIVATION SCORE

- Total
- White
- Black
- Most Affluent
- Average
- Most Deprived



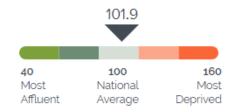
Area Deprivation Score in Our Community

- Most Affluent
- Average
- Most Deprived

Area Deprivation Score

101.9

IS THE AREA DEPRIVATION SCORE FOR OUR COMMUNITY



Area Deprivation Index for the Census Block Groups in our 21-county area (BroadStreet 2020).

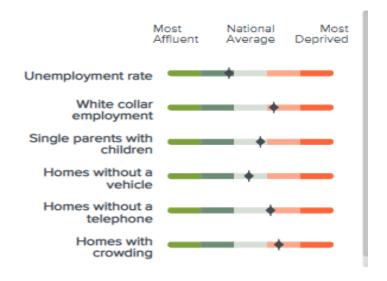
https://www.broadstreet.io/board/pubboard/Qm9hcmRDYXJkVXNlTm9kZTo1Njk5MDM%3D

Socioeconomic Status



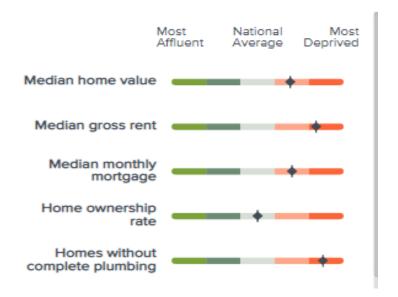
Indicators comprising The Area Deprivation Index for Census Block Groups (BroadStreet 2020).

Household Conditions



Indicators comprising The Area Deprivation Index for Census Block Groups (BroadStreet 2020).

Housing Stock



Indicators comprising The Area Deprivation Index for Census Block Groups (BroadStreet 2020).





\$68,249

U.S. Dollars per year

Under 9 Years of Education



6%

of people 25 yrs and over

Median family income in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

Education in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

High School Graduation



88%

of people 25 yrs and over

People below 150% of Poverty



21%

of the population

Education in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

Poverty in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

Families Living Below Poverty



of families are living in poverty

Poverty in our 21-county area (ACS 2014-2018) vs. U.S. Employment in our 21-county area (ACS 2014-2018) benchmark (BroadStreet 2020).

Unemployment Rate



of the workforce ages 16 years and older

vs. U.S. benchmark (BroadStreet 2020).

White-Collar Employment



of employed persons ages 16 years and older

Employment in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

Single Parents with Children



of single-parent households have children under 18 yrs

Household conditions in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

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Homes without a Motor Vehicle

Homes without a Telephone



4%

of occupied housing units



2%

of occupied housing units

Household conditions in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

Household conditions in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

Homes with Crowding



3%

of housing units have over 1 person per room

Household conditions in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

Median Home Value



\$123,713

U.S. Dollars

Housing stock in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

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Median Gross Rent



\$686

per month

Median Monthly Mortgage



per month

Housing stock in our 21-county area (ACS 2014-2018) Housing stock in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

vs. U.S. benchmark (BroadStreet 2020).

Home Ownership Rate



70%

of housing units are occupied by the owner

vs. U.S. benchmark (BroadStreet 2020).

Homes without Complete Plumbing



of occupied housing units

Housing stock in our 21-county area (ACS 2014-2018) Housing stock in our 21-county area (ACS 2014-2018) vs. U.S. benchmark (BroadStreet 2020).

AGENCY SURVEYS AND DATA COLLECTION

Surveys

Agency surveys are conducted throughout the year as a way to gain further insight into the needs of our service area. The CNCAP ECP department sends out surveys to area organizations, professionals and individuals to identify concerns and successes in serving children birth to five and their families on a local and regional basis. Our Family Outreach and Housing Departments conduct satisfaction surveys. These survey results are incorporated into the Community Assessment. The results of these surveys are also used for our annual strategic planning which is designed to improve program deliveries as well as all program outcomes for children and families served by CNCAP. Community providers, policy/decision makers and CNCAP work together to affect positive changes in availability and delivery of services by regularly attending area meetings, publishing and disseminating informational materials relevant to the healthful development of children and families assuring that key stakeholders at regional, statewide and national levels are given opportunities to comment on the design and delivery of services that best meet the needs of our populations.

Data Collection

As we mark the end of a decade, 2020 begins one of the most important as far as data collections, with highlights including the 2017 Economic Census, Statistics in Schools, America Counts and Data.census.gov opening a new data platform to store all of this information. 2020 promises to be an exciting collection and release in the world of numbers.

CNCAP strives to use the most current documentable data available. Data is compiled from sources that are published through a variety of entities including but not limited to: local, state, and federal government; educational institutions; private foundations; and public and private human service initiatives.

US Census Information (source: www.census.gov) The U.S. Census Bureau is the leading source of statistical information about the nation's people. Our population statistics come from decennial censuses, which count the entire U.S. population every ten years, along with several other surveys. The American Community Survey (ACS) helps local officials, community leaders, and businesses understand the changes taking place in their communities. It is the premier source for detailed population and housing information about our nation.

All of the information we collect through censuses and surveys, as well as the administrative data we obtain, is confidential and protected by federal law. Data are only linked to answer questions that are part of a research projects that are approved by the Census Bureau and support our mission.

Research results that are published do not identify any individuals. Rather, summarized data is released that represent groups of people—generally in tables of numbers. Before releasing any statistics to the public, the Census Bureau reviews them to make sure none of the information or characteristics could identify someone (or a business).

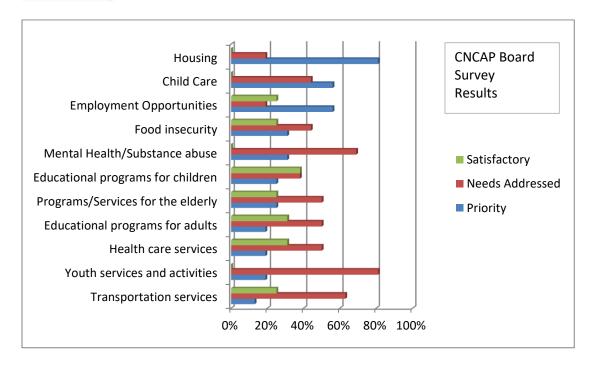
https://www.census.gov/about/what/admin-data.html

Methodology

Community demographics and census data was collected from the U.S. Census Bureau. Data was also collected from community surveys and reports available within the communities, counties, and the state. Additional data was collected from available online databases such as the Kids Count in Nebraska Report, the Dept. of Education and the Dept. of Labor. A complete listing of sources can be found in the reference section of this report.

Central Nebraska Community Action Partnership (CNCAP) surveys the Board of Directors to determine area of needs within our service area. In these surveys, members are asked to rank as to the greatest need and how satisfactorily these needs are being met in their county.

Central Nebraska Community Action Partnership (CNCAP) surveys partner agencies, area schools, community members, ECP parents and CNCAP staff to determine areas of need within our service area. In these surveys, individuals are asked to rank as to the greatest need and how satisfactorily these needs are being met in their county. (In our last survey Mental Health/Substance abuse were separated out and Immigration & Trafficking were added due to current issues)



Consensus

Community needs in our 21 counties continues to revolve heavily around 4 basic concerns: housing, child care, employment opportunities and mental health.

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Accessing affordable, quality housing continues to be a concern in CNCAP communities as rural homes age. With new home costs of \$110.53 per square foot (basic construction) it can be extremely costly to build new while reconstruction can be just as difficult when working with an older home.

If a single unit rental home becomes unlivable in rural Nebraska most do not rebuild or upgrade as the upgrade cost may outweigh the rental income for that home. The same applies to apartment houses in rural communities as there may not be enough population to support a multifamily unit if there are not income opportunities to sustain that population.

While unemployment and limited job opportunities continue to be a barrier for obtaining or improving current family situations there have been no major improvements in factory building or new industry being introduced into rural Nebraska. Median income for females in CNCAP counties averages \$45,000, males may earn up to\$60,000 while per capita income is only \$21,291.00. The majority of industries in CNCAP's 21 counties are farm related followed by construction, teaching and general medical. Unemployment rates in Nebraska during March of 2019 were at 2.8% while CNCAP counties ranged from 5.4 to 3.0%

Even with unemployment rates remaining low, daycare in rural communities continues to be hard to find. There are 313 licensed daycare facilities with space for 7,016 children. There are 49,839 school age children across CNCAP's service area. Depending on the hours parents may have to travel to work or multiple shift options after school daycare can be difficult to find in rural Nebraska. Parents may need to rely on family to provide care.

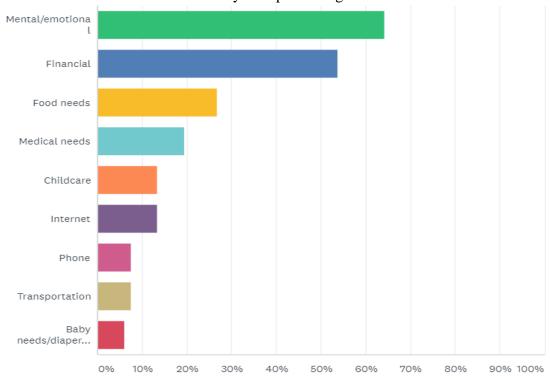
Mental health affects how we think, feel and act. It affects our emotional, psychological, and social well-being. It can determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. With recent flooding and economic hardships our rural families struggle to get the help they need. 53% of those who need help receive no mental health services.

Farming is among the most stressful jobs in America, complex factors such as markets and weather are impossible to control directly, and these influence the livelihood of a farmer. Many factors affect a farmer's financial, physical, and mental health.

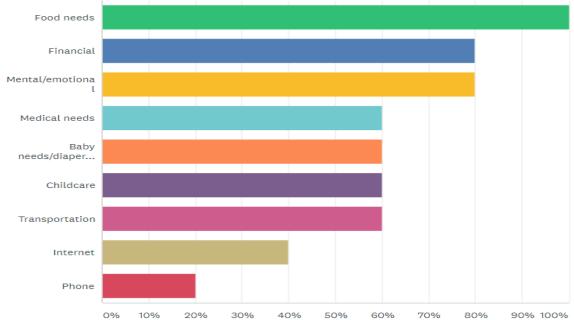
Mental health is not just an adult problem; the impact of poverty on children is severe. Higher rates of chronic health conditions; problems with hearing, vision, speech, behavioral issues; and mental health problems afflict children in poverty at much higher rates than their non-impoverished peers.

In addition to general surveys Covid-19 surveys were accessed this year. These findings reflect needs from the beginning of the pandemic. As we continue throughout the year we are certain these needs will continue to change.

COVID-19 IMPACT ON CNCAP AREA CNCAP Employee response survey report What needs are you experiencing at this time?



COVID-19 IMPACT ON CNCAP AREA CNCAP Agency response survey report What additional needs do you see families experiencing at this time?



ORGANIZATIONAL OVERVIEW

Central Nebraska Community Action Partnership Inc. (CNCAP) provides quality services to individuals, children and/or families within all of the programs offered within our 21 county service area. Adherence to these program mandates is monitored by internal and external reviews and audits to ensure progressive qualitative services are provided for the needs of our communities.

Information regarding those needs is collected from various sources throughout the year; Department of Labor, U.S. Census data, internal agency databases, Kids Count Data Center (National KIDS COUNT, Voices for Children in Nebraska), as well as other data sources published annually and listed at the end of this assessment report.

Input from low-income residents is provided through program participation surveys and the "Statewide Community Action Survey" that gathers information from residents across all demographics. Local elected officials provide input during Agency Board of Directors meetings and the Community Representative Survey. Our staff provides vital information regarding community needs and challenges during group meetings and the survey process. These combined data resources help us to discover and make informative decisions regarding what the collected data says of our community needs.

The results of the Community Needs Assessment are presented to Policy Council and the CNCAP Board of Directors annually. It is important to stay informed of the challenges that exist in our communities in order to respond with increase awareness and to make informed decisions regarding the welfare of our communities.

Policies and procedures are in place to ensure the programs remain progressive and respond to the needs of the communities we serve. This needs assessment report is just one of the many tools used in this process.

Central Nebraska Community Action Partnership (CNCAP) is one of nine Community Action Agencies in Nebraska. CNCAP is a 501 (c) 3 non-profit human services agency that offers programs related to basic health, education, community development services and human service needs of individuals and families. CNCAP provides services throughout Region 2 covering the counties of Blaine, Boone, Boyd, Brown, Colfax, Custer, Garfield, Greeley, Hall, Hamilton, Holt, Howard, Keya Paha, Loup, Merrick, Nance, Platte, Rock, Sherman, Valley and Wheeler. Satellite offices are located in Broken Bow, Columbus, O'Neill, Grand Island, and Central City, with the central office located in Loup City.

Nebraskans, from birth to the older adult population benefit from the services offered through

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CNCAP. Vulnerable populations include child dependents, youth and older adults who rely in whole, or in part, on others to help meet their personal needs. Our service area spans nearly 17,000 square miles in central and north central Nebraska.

A 27-member Board of Director's, representing the entire geographic service area, guides the organization. The tripartite board is comprised of public elected officials, low-income representatives, and private interest groups – including members from business and religious affiliations. Among these representatives are members with expertise in Finance, Early Childhood Education, and Nebraska Law. The board oversees operations providing financial oversight and direction to the CNCAP Executive Director.

Administrative Structure

<u>Administration:</u> Includes the Executive Director, administrative office staff, Fiscal Department, Human Resource Department, maintenance staff, technical support staff and resource development. The administration staff provides support to all CNCAP departments and programs.

Early Childhood Programs

Head Start - 12 Locations Head Start provides comprehensive education, health, nutrition, and parent involvement services to children and their families. The program consists of dental/health exams, vision/hearing screenings, immunizations, nutritious meals, and educational activities. Parents attend parent meetings and are actively involved in the children's activities. (Aurora, Fullerton, St. Paul, Columbus, Schuyler, Ainsworth, Burwell, Ord (2), Loup City, Centura, O'Neill)

Early Head Start - 10 Locations Early Head Start promotes healthy prenatal outcomes and enhances the development of infants and toddlers. The program provides parents with opportunities to move toward self-sufficiency. Health, parenting skills, nutrition education, and home safety checks are also provided to participants. All 10 locations offer the Home-based option. CNCAP provides an Early Head Start center-based option in Broken Bow, Columbus and Schuyler, Nebraska. (Platte, Colfax, Sherman, Brown, Howard Holt, Custer, Greeley, Valley, Garfield)

Pre-K Partnerships with Public Schools - 9 Locations CNCAP Early Childhood Programs has 9 formal partnerships with area schools to provide a comprehensive educational Pre-K program. Morning and afternoon center-based sessions are scheduled during the regular school year. Monthly contacts are made to families. Families receive assistance in goal development, parenting education, and links to the community and area resources. (Ainsworth, Burwell, Ord, Loup City, Central City, Centura, St. Paul, Schuyler, Columbus)

Early Childhood Sixpence Endowment Grants, Partnership with Public Schools - 6

Locations CNCAP Early Childhood Programs has 6 formal partnerships with area public

school districts to provide comprehensive Home Visitation Services to 108 at risk prenatal women and children from birth to age three. Risk factors include families of low income, low birth weight or premature birth, teenage parents, parents lacking a high-school diploma, incarcerated parents, and households where English is not spoken as the primary language. (Schuyler, Loup City, St. Paul, Central City, Aurora, Ord)

Early Development Network – Provides service coordination and access to resources that help families meet determined goals. Antelope, Boyd, Brown, Cherry, Holt, Keya Paha, Pierce, Rock, Stanton & Wheeler Counties

Housing

Weatherization: Income eligible homeowners and renters receive repairs and efficiency measures that result in saving energy. Available: All 21 Counties

Section 8 Rent Subsidy: Provides rent subsidy assistance to eligible households through the issuance of vouchers. Available: in the communities served by the Central Nebraska Joint Housing Authority

Affordable Rental Units: Affordable rental housing properties for income eligible families. Available: Ainsworth, Alda, Cairo, Central City, Greeley, Loup City, and O'Neill

Family Self Sufficiency Program: Case management support services provided to Section 8 participants to assist clients in achieving economic self-sufficiency with the potential to build a savings account. Available: in the communities served by the Central Nebraska Joint Housing Authority

4) Family Outreach Programs Homeless and near homeless persons are offered services through:

Stability assistance: Funds available to provide financial assistance to homeless or near homeless individuals/families for utility or rental assistance, or deposits. Available: All 21 Counties and Cherry County

THRIVES (Traditional Housing for Rural Independence, Viability and Economic Stability): Assists homeless individuals in obtaining safe and suitable permanent housing. Participants receive intensive case management to enhance their skills for self-sufficiency and secure and maintain permanent housing. Available: All 21 Counties and Cherry County

HOPE (Hope Offers People Empowerment): Case management that focuses on strengths of the family and provides intensive support services to families/individuals that want toaddress challenges and improve their quality of life. Available: All 21 Counties and Cherry County

SSVF (**Supportive Services for Veteran Families**): Case management for individual Veteran's or a family in which the head of the household is a Veteran. The program focuses onhousing stabilization through temporary assistance that serves as a bridge to long term stability. Available: All 21Counties +41 additional counties.

Veterans RRH (Veterans Rapid Re-Housing):

Provides housing assistance and case management to homeless, disabled Veterans, and their families to stabilize them in their housing situation.

Available: All 21 Counties and Cherry County

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Snap Outreach: Assists individuals and families applying for SNAP benefits. Can assist with getting documentation and expediting the application or renewal application. Available: All 21 Counties and Cherry County

HART (Homes, Advocacy and Referrals for Totality): Provides rent/utility assistance to individuals and families in crisis. Available: All 21 Counties and Cherry County

KIND (**Keeping Independent Needs Defined**) is a JOINT TH-RR housing program that serves lieterally homeless youth between the ages of 18-24 with crisis intervention housing assistance as well as serving homeless and near homeless youth ages 18-24 by rapidly re-housing them and offering cas management, with possible financial assistance to work towards permanent housing while focusing on employment and education.

Food Pantries: Central City, Loup City

CSFP (Commodity Supplemental Food Program): Food supplement packages are provided to income eligible elderly over age 60. Available: All 21 Counties and Cherry County Clinic locations in Broken Bow, Columbus, O'Neill, Grand Island and Loup City

5) <u>Community Health Programs</u> *(Under the direction of Admin):

Women Infants & Children (WIC): Pregnant and postpartum women and children through age five receive monthly food checks and basic health monitoring and nutrition counseling. ClinicSites in Ainsworth, Atkinson, Aurora Bassett, Broken Bow, Burwell, Central City, Greeley, Loup City, O'Neill, Ord, Spencer, St. Paul & Valentine

Peer Counseling: Adds a critical dimension in WIC's efforts to enhance personal experience with breastfeeding and training basic breastfeeding information and support to mothers.

Immunizations: Vaccinations to reduce risk of contracting childhood illnesses and diseases for children ages birth through 18 years of age.

CNCAP Service Area AT A GLANCE

2019 Area population 179,044 17,000 sq miles

ECONOMY

2.91% unemployment rate overall
73.7% lack job opportunties in the Area
33.5% are overqualified
26.3% lack training
10.7% lack childcare
3.7% have a disability

HEALTH & SAFETY

158,288 Insured/18,428 Uninsured 11.13 % children are in the welfare system

2020 Community Assessment

Central Nebraska Community Action Partnership, Inc.

13 counties report 5.51% are in non-court welfare

17 counties report 8.46% are in out of home care

15 counties report 47.91% juveniles without attorney representation in court situations 40.8% of CNCAP's service area children are in low-income homes

11.04% are in poverty

10.75% are food insecure

9.62% are enrolled in SNAP benefits

DIVERSITY

Ethnicity Race

21% Hispanic 1% Asian

72% Non-Hispanic 1% Native Hawaiian

7% not reported 2% Multi race

1% American Indian

2 % Black 88% White 4% Other 1% Unknown

EDUCATION

49,839 or 10.64 % population of children

72.55% are children 3 and 4 years old

47.98% of school age children are enrolled in the free or reduced school lunch programs

94.28% of high schoolers graduate in 4 years

HOUSING & LIVING

33% owned their home

69.35% families with children own their own home

34% rented

3% other permanent housing

8% homeless

34% unknown or not reported

CNCAP COUNTY DEMOGRAPHICS

COUNTY: BLAINE

TOTAL POPULATION1

476

POPULATION OF CHILDREN²

102

HEALTH

ECONOMIC STABILITY

16.7%

CHILDREN UNINSURED³ 22.2%

BIRTHS WITH INADEQUATE PRENATAL CARE

30.9%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE⁵ 32.1%

CHILDREN IN LOW-INCOME FAMILIES⁶ 12.8%

HOUSEHOLDS WITH CHILDREN IN POVERTY⁷

CHILDREN OF COLOR IN
POVERTY⁵
POVERTY⁵

13.4%

CHILDREN WHO ARE FOOD INSECURE® 12.8%

HOUSEHOLDS
WITH CHILDREN
ENROLLED IN
SNAP BENEFITS¹⁰

EDUCATION

74.5%

N/A

CHILDREN

FAMILIES WITH CHILDREN WHO OWN THEIR HOME¹¹

CHILD WELFARE & JUVENILE JUSTICE 🏖

9.8

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹² 0.0

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT¹³ 66.7%

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL¹⁴ 100%

GRADUATING IN 4-YEARS¹⁷

9.8

RATE OF CHILDREN IN OUT-OF-HOME CARE¹⁴ N/A

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵ 52.3%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS¹⁸ COUNTY: BOONE

TOTAL POPULATION'

5,239

POPULATION OF CHILDREN²

1,312

HEALTH



ECONOMIC STABILITY

CHILDREN UNINSURED³

BIRTHS WITH INADEQUATE PRENATAL CARE

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCES 31.3%

CHILDREN IN LOW-INCOME FAMILIES*

9.2%

HOUSEHOLDS WITH CHILDREN IN POVERTY'

OF COLOR IN POVERTY[®]

CHILDREN WHO ARE FOOD INSECURE®

HOUSEHOLDS

WITH CHILDREN ENROLLED IN SNAP BENEFITS10

9.0%

CHILDREN

FAMILIES WITH CHILDREN WHO OWN THEIR HOME!



EDUCATION

WELFARE SYSTEM INVOLVEMENT[©]

RATE OF CHILDREN IN

OUT-OF-HOME CARE¹⁴

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT13

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY'S

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL14

HIGH SCHOOLERS GRADUATING IN 4-YEARS17

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS¹⁸ COUNTY: BOYD

TOTAL POPULATION'

1,955

POPULATION OF CHILDREN²

409

HEALTH

ECONOMIC STABILITY

16.5%

CHILDREN UNINSURED³ 0.0%

BIRTHS WITH INADEQUATE PRENATAL CARE

32.3%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE⁵ 42.7%

CHILDREN IN LOW-INCOME FAMILIES* 4.2%

HOUSEHOLDS WITH CHILDREN IN POVERTY CHILDREN OF COLOR IN POVERTY[®]

11.1%

11.2%

ARE FOOD INSECURE® 3.5%

WITH CHILDREN ENROLLED IN SNAP BENEFITS¹⁰

EDUCATION

73.8%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME¹¹

CHILD WELFARE & JUVENILE JUSTICE

24.4

WELFARE SYSTEM
INVOLVEMENT

19.6

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT¹³

N/A

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹³ E4 70/

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL¹⁴ 100%

HIGH SCHOOLERS GRADUATING IN 4-YEARS¹⁷

58.1%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS¹⁸

12.

RATE OF CHILDREN IN OUT-OF-HOME CARE¹⁴ COUNTY: BROWN

TOTAL POPULATION¹

2,973

POPULATION OF CHILDREN²

696

HEALTH

ECONOMIC STABILITY

CHILDREN UNINSURED³

BIRTHS WITH INADEQUATE PRENATAL CARE®

24.1%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCES 53.4%

CHILDREN IN LOW-INCOME FAMILIES*

34.8%

HOUSEHOLDS WITH CHILDREN IN POVERTY'

13.5%

CHILDREN WHO ARE FOOD INSECURE[®]

WITH CHILDREN ENROLLED IN SNAP BENEFITS10

EDUCATION

11.1%

CHILDREN OF COLOR IN POVERTY⁶

71.1%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME!

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹²

RATE OF CHILDREN IN OUT-OF-HOME CARE¹⁴

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT13

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY'S

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL¹⁸

HIGH SCHOOLERS GRADUATING IN 4-YEARS17

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS18 COUNTY: COLFAX

TOTAL POPULATION'

10,881

POPULATION OF CHILDREN²

3,500

HEALTH

6

ECONOMIC STABILITY

10.8%

CHILDREN UNINSURED 21.2%

BIRTHS WITH INADEQUATE PRENATAL CARE

34.0%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE¹ 57.5%

CHILDREN IN LOW-INCOME FAMILIES* 8.1% HOUSEHOLDS

WITH CHILDREN
IN POVERTY

11.3% CHILDREN OF COLOR IN

POVERTY*

5.2%

ARE FOOD INSECURE 10.6%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS**

EDUCATION

60.6%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME"

CHILD WELFARE & JUVENILE JUSTICE,

6.0

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹²

5.4

RATE OF CHILDREN IN OUT-OF-HOME CARE¹⁶ 0.6

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT¹³

59.2%

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵ 41.4%

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL** 88.2%

HIGH SCHOOLERS GRADUATING IN 4-YEARS17

51.1%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS!* COUNTY: CUSTER

TOTAL POPULATION'

10,840

POPULATION OF CHILDREN²

2,803

HEALTH

ECONOMIC STABILITY

9.4%

CHILDREN UNINSURED[®] 12.2%

BIRTHS WITH INADEQUATE PRENATAL CARE®

34.0%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE¹ 43.5%

CHILDREN IN LOW-INCOME FAMILIES* 12.3% HOUSEHOLDS

WITH CHILDREN
IN POVERTY

CHILDREN OF COLOR IN POVERTY

20.6%

11.7%

ARE FOOD INSECURE* 11.0%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS"

EDUCATION

68.8%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME"

CHILD WELFARE & JUVENILE JUSTICE

16.8

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹¹

11.4

RATE OF CHILDREN IN OUT-OF-HOME CARE¹⁴ 3.6

RATE OF NON-COURT
CHILD WELFARE SYSTEM
INVOLVEMENT¹

59.3%

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵ 14 50/

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL 97.0%

GRADUATING IN 4-YEARS¹⁷

43.9%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS* COUNTY: GARFIELD

TOTAL POPULATION'

1,987

POPULATION OF CHILDREN²

407

HEALTH

(a)

ECONOMIC STABILITY

6.3%

CHILDREN UNINSURED[®] 8.3%

BIRTHS WITH INADEQUATE PRENATAL CARE

34.0%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE 50.9%

CHILDREN IN LOW-INCOME FAMILIES* 5.6%

HOUSEHOLDS WITH CHILDREN IN POVERTY 11.1%

OF COLOR IN POVERTY

10.3%

ARE FOOD INSECURE* 8.0%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS" 43.2%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME!

CHILD WELFARE & JUVENILE JUSTICE

0.0

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹³

0.0

RATE OF CHILDREN IN OUT-OF-HOME CARE¹⁴ 0.0

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT^S

100%

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵ 1

EDUCATION

81.3%

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL¹⁶ 92.3%

GRADUATING IN 4-YEARS¹⁷

39.5%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS¹⁸ COUNTY: GREELEY

TOTAL POPULATION'

2,356

POPULATION OF CHILDREN²

589

HEALTH

ECONOMIC STABILITY

CHILDREN UNINSURED[®] 3.6%

BIRTHS WITH INADEQUATE PRENATAL CARE®

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCES 37.7%

CHILDREN IN LOW-INCOME FAMILIES*

HOUSEHOLDS WITH CHILDREN

11.8%

IN POVERTY

11.2%

CHILDREN WHO ARE FOOD INSECURE"

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS* 23.8% CHILDREN OF COLOR IN

POVERTY*

FAMILIES WITH CHILDREN WHO OWN THEIR HOME"

75.0%

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹³

RATE OF CHILDREN IN OUT-OF-HOME CARE!

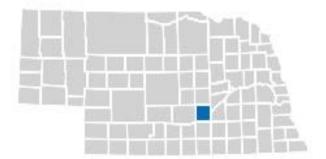
RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT^G

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY^{ta}

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL*

HIGH SCHOOLERS GRADUATING IN 4-YEARS

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS** COUNTY: HALL



TOTAL POPULATION¹

61,607

POPULATION OF CHILDREN²

18,358

HEALTH



ECONOMIC STABILITY

704%

CHILDREN UNINSURED¹ 20.4%

BIRTHS WITH INADEQUATE PRENATAL CARE

37.3%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE¹ 45.2%

CHILDREN IN LOW-INCOME FAMILIES* 17.8%

HOUSEHOLDS WITH CHILDREN IN POVERTY⁷ CHILDREN OF COLOR IN POVERTY

31.9%

10.2%

ARE FOOD INSECURE 21.9%

HOUSEHOLDS
WITH CHILDREN
ENROLLED IN
SNAP BENEFITS**

EDUCATION

63.8%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME!

CHILD WELFARE & JUVENILE JUSTICE

17.8

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹² 9.0

RATE OF NON-COURT

CHILD WELFARE SYSTEM

INVOLVEMENT¹³

25.3%

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵ 11 0%

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL¹⁴ 87.0%

GRADUATING IN 4-YEARS¹⁷

61.2%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS!*

8.9

RATE OF CHILDREN IN OUT-OF-HOME CARE¹⁴ COUNTY: HAMILTON

TOTAL POPULATION1

9,280

POPULATION OF CHILDREN²

2,448

HEALTH



ECONOMIC STABILITY

6.0%

CHILDREN UNINSURED

5.2%

BIRTHS WITH INADEQUATE PRENATAL CARE

23.2%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE⁵ 30.9%

CHILDREN IN LOW-INCOME FAMILIES⁴ 12.4%

WITH CHILDREN IN POVERTY 29.5%

OF COLOR IN POVERTY

9.5%

ARE FOOD INSECURE 14.4%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS³⁰

EDUCATION

67.1%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME!!

CHILD WELFARE & JUVENILE JUSTICE !



RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹²

6

RATE OF CHILDREN IN OUT-OF-HOME CARE 1.2

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT¹¹

71.7%

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵ 18 2%

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL 97.5%

HIGH SCHOOLERS GRADUATING IN 4-YEARS¹⁷

35.5%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS! COUNTY: HOLT



TOTAL POPULATION¹

10,178

POPULATION OF CHILDREN²

2,759

HEALTH

ECONOMIC STABILITY

6.0%

CHILDREN UNINSURED?

BIRTHS WITH INADEQUATE PRENATAL CARE

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCES 39.5%

CHILDREN IN LOW-INCOME FAMILIES*

6.0%

HOUSEHOLDS WITH CHILDREN IN POVERTY

1.8%

CHILDREN OF COLOR IN POVERTY*

10.8%

CHILDREN WHO ARE FOOD INSECURE*

1.8%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS*

EDUCATION

73.0%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME"

CHILD WELFARE & JUVENILE JUSTICE 35

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹²

RATE OF CHILDREN IN OUT-OF-HOME CARE!

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT13

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY18

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL¹⁶

HIGH SCHOOLERS GRADUATING IN 4-YEARS17

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS! COUNTY: HOWARD

TOTAL POPULATION'

6,468

POPULATION OF CHILDREN²

1,694

HEALTH



ECONOMIC STABILITY

7.4%

CHILDREN UNINSURED³

BIRTHS WITH INADEQUATE PRENATAL CARE

16.6%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE⁵ 28.6%

CHILDREN IN LOW-INCOME FAMILIES⁶

HOUSEHOLDS WITH CHILDREN

11.4%

CHILDREN OF COLOR IN IN POVERTY POVERTY*

11.3%

CHILDREN WHO ARE FOOD INSECURE*

11.8%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS*

EDUCATION

80.4%

37.7%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME"

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹³

RATE OF CHILDREN IN OUT-OF-HOME CARE!

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT"

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL*

HIGH SCHOOLERS GRADUATING IN 4-YEARS17

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS¹⁸

COUNTY: KEYA PAHA

TOTAL POPULATION'

810

POPULATION OF CHILDREN²

167

HEALTH



ECONOMIC STABILITY

0.0%

CHILDREN UNINSURED 12.5%

BIRTHS WITH INADEQUATE PRENATAL CARE

26.7%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE⁶ 35.7%

CHILDREN IN LOW-INCOME FAMILIES⁴ 7.2%

WITH CHILDREN
IN POVERTY

CHILDREN OF COLOR IN POVERTY

16.7%

11.0%

ARE FOOD INSECURE 4.8%

HOUSEHOLDS
WITH CHILDREN
ENROLLED IN
SNAP BENEFITS**

EDUCATION

72.8%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME"

CHILD WELFARE & JUVENILE JUSTICE 🔉



RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹³ 0.0

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT^{IS}

93.3%

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL**



HIGH SCHOOLERS GRADUATING IN 4-YEARS¹⁷

0.0

RATE OF CHILDREN IN OUT-OF-HOME CARE* N/A

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵

51.1%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS¹⁶ COUNTY: LOUP

TOTAL POPULATION'

618

POPULATION OF CHILDREN²

128

HEALTH E

ECONOMIC STABILITY

0.0%

CHILDREN UNINSURED³ 0.0%

BIRTHS WITH INADEQUATE PRENATAL CARE

28.8%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE⁵ 43.3%

CHILDREN IN LOW-INCOME FAMILIES⁶ 13.6%

HOUSEHOLDS WITH CHILDREN IN POVERTY N/A

OF COLOR IN POVERTY

10.7%

ARE FOOD INSECURE 1.7%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS**

EDUCATION

67.8%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME!

CHILD WELFARE & JUVENILE JUSTICE 35

0.0

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹² 0.0

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT¹¹ 100%

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL* ***

HIGH SCHOOLERS GRADUATING IN 4-YEARS¹⁷

0.0

RATE OF CHILDREN IN OUT-OF-HOME CARE! N/A

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵ 57.8%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS'8 COUNTY: MERRICK



TOTAL POPULATION'

7,733

POPULATION OF CHILDREN²

1,902

HEALTH



ECONOMIC STABILITY

6.1%

CHILDREN UNINSURED³ 19.3%

BIRTHS WITH INADEQUATE PRENATAL CARE

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE⁶ 34.7%

CHILDREN IN LOW-INCOME FAMILIES*

9.9%

HOUSEHOLDS WITH CHILDREN IN POVERTY'

24.0%

CHILDREN OF COLOR IN POVERTY*

11.0%

CHILDREN WHO ARE FOOD INSECURE*

12.1%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS** 73.8%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME!

CHILD WELFARE & JUVENILE JUSTICE 35

WELFARE SYSTEM INVOLVEMENT¹²

RATE OF CHILDREN IN OUT-OF-HOME CARE¹⁴ INVOLVEMENT"

RATE OF NON-COURT

CHILD WELFARE SYSTEM

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵

EDUCATION

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL¹⁶ HIGH SCHOOLERS GRADUATING IN

4-YEARS17

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS'®

RATE OF CHILD

COUNTY: NANCE

TOTAL POPULATION¹

3,532

POPULATION OF CHILDREN²

858

HEALTH T

-

CHILDREN UNINSURED 3.2%

BIRTHS WITH INADEQUATE PRENATAL CARE

24.9%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE¹ M

ECONOMIC STABILITY

41.7%

CHILDREN IN LOW-INCOME FAMILIES⁴ 8.1%

WITH CHILDREN
IN POVERTY

7.5%

OF COLOR IN POVERTY

11.3%

ARE FOOD INSECURE 14.1%

WITH CHILDREN
ENROLLED IN
SNAP BENEFITS**

EDUCATION

74.6%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME¹¹

CHILD WELFARE & JUVENILE JUSTICE 🍮

16.3

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹²

10.5

RATE OF CHILDREN IN OUT-OF-HOME CARE* 4.7

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT¹³

50.0%

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵ 40 70/

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL¹⁶ 87.8%

GRADUATING IN 4-YEARS¹⁷

36.9%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS¹⁸

COUNTY: PLATTE

TOTAL POPULATION'

33,363

POPULATION OF CHILDREN²

9,501

HEALTH



ECONOMIC STABILITY

4.3%

CHILDREN UNINSURED³ 6.6%

BIRTHS WITH INADEQUATE PRENATAL CARE

17.8%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE¹ 32.6%

CHILDREN IN LOW-INCOME FAMILIES^a 10.2%

HOUSEHOLDS WITH CHILDREN IN POVERTY CHILDREN OF COLOR IN POVERTY^A

26.0%

8.9%

ARE FOOD INSECURE 10.0%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS**

EDUCATION

62.6% FAMILIES WITH

FAMILIES WITH CHILDREN WHO OWN THEIR HOME"

CHILD WELFARE & JUVENILE JUSTICE,

14.7

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹²

.

RATE OF CHILDREN IN OUT-OF-HOME CARE¹⁴ 3.5

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT¹³

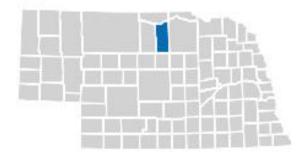
65.9%

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵ 43.0%

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL¹⁴ HIGH SCHOOLERS
GRADUATING IN
4-YEARS¹⁷

41.8%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS!8 COUNTY: ROCK



TOTAL POPULATION1

1,360

POPULATION OF CHILDREN²

292

HEALTH

00

CHILDREN UNINSURED³ 20.0%

BIRTHS WITH INADEQUATE PRENATAL CARE

14.4%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE¹

ECONOMIC STABILITY

29.6%

CHILDREN IN LOW-INCOME FAMILIES⁴ 12.3%

HOUSEHOLDS WITH CHILDREN IN POVERTY 0.0%

OF COLOR IN POVERTY

11.2%

ARE FOOD INSECURE 11.5%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS¹⁰

EDUCATION

60.8%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME"

CHILD WELFARE & JUVENILE JUSTICE 2

10.3

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹ 0.0

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT¹² 0.0%

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL¹⁶ 100%

HIGH SCHOOLERS GRADUATING IN 4-YEARS¹⁷

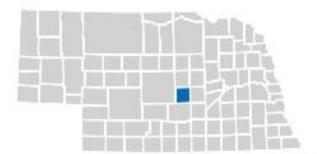
6.8

RATE OF CHILDREN IN OUT-OF-HOME CARE^M N/A

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵ 43.8%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS!

COUNTY: SHERMAN



TOTAL POPULATION'

3,038

POPULATION OF CHILDREN²

702

HEALTH



ECONOMIC STABILITY

4.0%

CHILDREN UNINSURED¹ 4.5%

BIRTHS WITH INADEQUATE PRENATAL CARE

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCES 40.8%

CHILDREN IN LOW-INCOME FAMILIES*

14.5%

HOUSEHOLDS WITH CHILDREN IN POVERTY

6.6%

CHILDREN WHO ARE FOOD INSECURE*

11.0%

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS** 0.0%

CHILDREN OF COLOR IN POVERTY*

64.8%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME"

CHILD WELFARE & JUVENILE JUSTICE 3



RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹²

RATE OF CHILDREN IN OUT-OF-HOME CARE'S

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT^Q

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹⁵

EDUCATION

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL

HIGH SCHOOLERS GRADUATING IN 4-YEARS^{II}

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS!* COUNTY: VALLEY

TOTAL POPULATION'

4,190

POPULATION OF CHILDREN²

1,038

HEALTH

6

ECONOMIC STABILITY

12.7%

CHILDREN UNINSURED 12.0%

BIRTHS WITH INADEQUATE PRENATAL CARE

33.7%

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE¹ 41.5%

CHILDREN IN LOW-INCOME FAMILIES⁶ 8.3%

HOUSEHOLDS WITH CHILDREN IN POVERTY 8.3%

OF COLOR IN POVERTY

11.9%

ARE FOOD INSECURE® 12.3%

HOUSEHOLDS
WITH CHILDREN
ENROLLED IN
SNAP BENEFITS**

72.8%

FAMILIES WITH CHILDREN WHO OWN THEIR HOME!

CHILD WELFARE & JUVENILE JUSTICE 🏖

EDUCATION

19.3

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹² 0.0

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT¹³ 15.6%

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL** 96.3%

GRADUATING IN 4-YEARS¹⁷

12.5

RATE OF CHILDREN IN OUT-OF-HOME CARE¹⁴ 41.7%

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY¹ 49.9%

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS** COUNTY: WHEELER

TOTAL POPULATION1

805

POPULATION OF CHILDREN²

171

HEALTH

CHILDREN UNINSURED³

BIRTHS WITH INADEQUATE PRENATAL CARE®

CHILDREN ENROLLED IN PUBLIC HEALTH INSURANCE® **ECONOMIC STABILITY**

63.6%

CHILDREN IN LOW-INCOME FAMILIES⁶

CHILDREN WHO ARE FOOD INSECURE*

1.3%

HOUSEHOLDS

WITH CHILDREN

IN POVERTY

HOUSEHOLDS WITH CHILDREN ENROLLED IN SNAP BENEFITS*

EDUCATION

100%

CHILDREN OF COLOR IN POVERTY*

FAMILIES WITH CHILDREN WHO OWN THEIR HOME"

RATE OF CHILD WELFARE SYSTEM INVOLVEMENT¹³

RATE OF CHILDREN IN OUT-OF-HOME CARE!

RATE OF NON-COURT CHILD WELFARE SYSTEM INVOLVEMENT"

CHILDREN IN JUVENILE COURT WITHOUT AN ATTORNEY'S

3- AND 4-YEAR-OLDS ENROLLED IN SCHOOL*

HIGH SCHOOLERS GRADUATING IN 4-YEARS17

CHILDREN ENROLLED IN FREE- OR REDUCED-PRICE SCHOOL MEALS!*

- 1. U.S. Census Bureau, 2018 Population Estimates Program.
- 2. U.S. Census Bureau, 2018 Population Estimates Program.
- 3. U.S. Census Bureau, 2017 American Community Survey 5-year estimates, Table B27001.
- 4. DHHS, 2018 Vital Statistics.
- U.S. Census Bureau, 2017 American Community Survey 5-year estimates, Table B27003.
- 6. U.S. Census Bureau, 2017 American Community Survey 5-year estimates, Table B17024.
- 7. U.S. Census Bureau, 2017 American Community Survey 5-year estimates, Table B17010.
- U.S. Census Bureau, 2017 American Community Survey 5-year estimates, Tables B17001B-I.
- Feeding America, Map the Meal Gap 2019, Child Food Insecurity in Nebraska by County in 2017.
- 10. U.S. Census Bureau, 2017 American Community Survey 5-year estimates, Table B19057.
- 11. U.S. Census Bureau, 2017 American Community Survey 5-year estimates, Table B25115.
- 12 14. DHHS; U.S. Census Bureau, 2018 Population Estimates Program.
- 15. State of Nebraska Judicial Branch, Administrative Office of the Courts & Probation, Nebraska Juvenile Justice System
- 16. U.S. Census Bureau, 2017 American Community Survey 5-year estimates, Table B14003.
- 17. Nebraska Department of Education, 2018 Cohort.
- 18. Nebraska Department of Education, 2017/2018 School Year.

https://voicesforchildren.com/



. https://www.needpix.com/photo/1769543/rural-nebraska-gravel-road-keya-paha-county-road-sign

With 47% of the CNCAP service area considered rural is it any wonder that our counties per capita income is lower than the state or national average? As populations grow and poverty rates increase our families continue to be two-income families. An increasing challenge is always with childcare and transportation.

Childcare can cost as much as what Mom makes but health insurance may be the reason she works if they farm or Dad works as hired labor and no insurance is offered. If they are lucky there is an in-home daycare provider close or in a town nearby. With some living in a small town it can be a challenge to find good daycare without needing to travel. An example is: Elba has 2 in-home daycare providers, who are both at capacity, so one family takes their young child to Farwell (10 miles to the south and west of Elba) before traveling to St Paul for work (10 miles east of Farwell). It works but that's extra time on the road.

There is no public transportation system in rural Nebraska. Families in poverty often have unreliable options for transportation whether it is a vehicle or someone they can depend on to provide transportation. People in Lincoln complain that traffic is bad during rush hour, in a rural commute to work (one way) on any given day, you may see 6 to 20 vehicles in the mornings for rush hour and any one of those may be a tractor! Most of the time it is a deer that you don't see that messes up the commute or some other type of distracted driving.

Why not move to a bigger town you ask? Housing, good affordable housing is lacking in many of our small towns but raising a child in an urban area is not something many families want to do. Requests for housing and utility payment assistance has also been on the rise in our urban areas as new construction is beyond reach for many of our residents and older homes begin to deteriorate.





ECONOMY

Income

Median income is the amount which divides the income distribution into two equal groups, half having income above that amount, and half having income below that amount. Mean income (average) is the amount obtained by dividing the total aggregate income of a group by the number of units in that group. The means and medians for households and families are based on all households and families. Means and medians for people are based on people 15 years old and over with income. — US Census Bureau, Frequently Asked Question, published by First Gov. [23]

The average Per Capita income for the report area is \$21,291.00 and is lower than the state and national averages.

		Per	Median	Median		Number of
		capita				
Rank	County	income	household	family	Population	households
			income	income		
	<u>United</u> <u>States</u>	\$27,334	\$51,914	\$62,982	308,745,538	116,716,292
	<u>Nebraska</u>	\$25,229	\$49,342	\$61,888	1,826,341	721,130
18	<u>Rock</u>	\$23,871	\$39,159	\$46,806	1,526	685
24	<u>Platte</u>	\$23,358	\$49,523	\$59,691	32,237	12,658
26	<u>Hamilton</u>	\$23,240	\$50,702	\$57,397	9,124	3,563
30	<u>Boone</u>	\$22,790	\$40,703	\$51,981	5,505	2,336
35	<u>Hall</u>	\$22,552	\$46,138	\$54,447	58,607	22,196
36	<u>Holt</u>	\$22,498	\$43,452	\$54,899	10,435	4,447
39	<u>Howard</u>	\$22,325	\$45,453	\$56,406	6,274	2,625
50	Merrick	\$21,819	\$46,116	\$52,486	7,845	3,151
51	Custer	\$21,685	\$42,364	\$50,110	10,939	4,714
55	<u>Nance</u>	\$21,457	\$41,610	\$52,083	3,735	1,525
62	<u>Valley</u>	\$21,058	\$38,588	\$49,417	4,260	1,922
63	<u>Boyd</u>	\$21,003	\$34,906	\$41,326	2,099	942
65	<u>Sherman</u>	\$20,900	\$38,631	\$48,065	3,152	1,392
66	Colfax	\$20,872	\$48,133	\$55,169	10,515	3,618
68	Keya Paha	\$20,691	\$32,000	\$40,156	824	381
69	Wheeler	\$20,614	\$37,222	\$50,083	818	350
71	<u>Blaine</u>	\$20,586	\$39,000	\$41,719	478	196

79	<u>Loup</u>	\$20,004	\$34,219	\$43,750	632	275
86	<u>Garfield</u>	\$19,235	\$38,709	\$47,056	2,049	935
87	<u>Greeley</u>	\$19,235	\$41,181	\$53,500	2,538	1,069
92	<u>Brown</u>	\$17,330	\$28,038	\$44,569	3,145	1,449

https://en.wikipedia.org/wiki/List_of_Nebraska_locations_by_per_capita_income

Nebraska Income Statistics

The following data are the most current income statistics for Nebraska from the US Census Bureau are in 2018 inflation adjusted dollars and are from the American Community Survey 2018 5-year estimates.

Median Household Income: \$59,116.

Average Household Income: \$77,278.

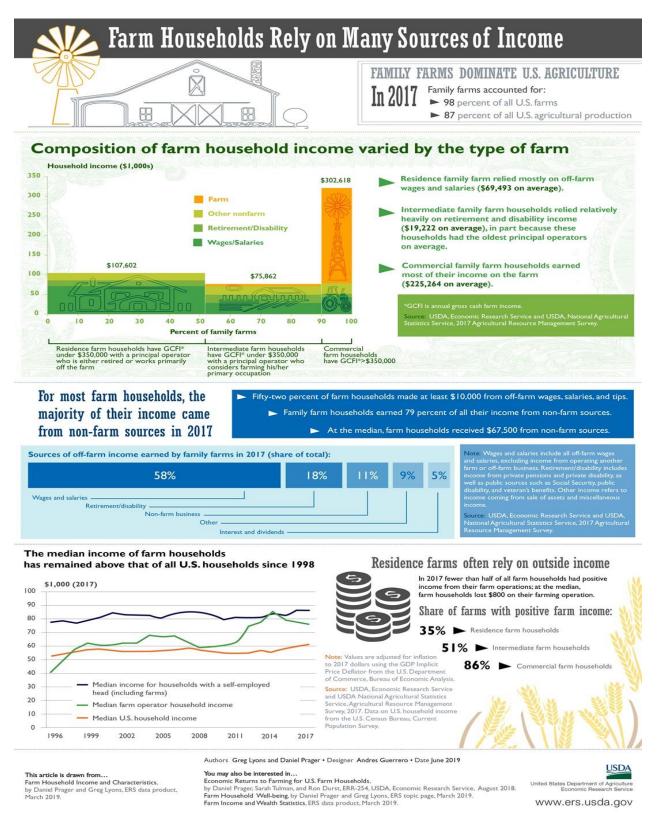
Per Capita Income: \$31,101.

4.5% of Households in Nebraska are High Income Households that make over \$200,000 a year.

Median Household Income in Nebraska by Age of Householder

	Nebraska	
Householder under 25 years	\$31,669	
Householder 25 to 44 years	\$65,648	
Householder 45 to 64 years	\$73,502	
Householder 65 years and over	\$42,172	

https://www.incomebyzipcode.com



https://www.ers.usda.gov/media/10292/farm-household-income-infographic_ac_4-01.jpg

Employment/Unemployment

In January, 2020 there were a total of 1,020,166 non-farm jobs in Nebraska (not seasonally adjusted - all workers). This is a decrease of -17,135 jobs from the prior month and an increase of not available jobs from the prior year. The top growing industries over the past month were Accounting, Tax Preparation, Bookkeeping with 363 jobs added, Insurance Carriers and Related Activitie with 230, Credit Intermediation and Related Activity with 218, Social Assistance with 200, Nursing and Residential Care Facilities with 136. https://neworks.nebraska.gov/

Area Profile for Multiple Areas

Number of Unemployed per Job Opening Table

The table below shows the non-seasonally adjusted number of unemployed, number of job openings advertised online, and the ration of the number of unemployed to number of job openings advertised online in the areas selected in January. 2020 (Jobs De-duplication Level 2).

datoricod oriniro in tito drode colocida in dandary, 2020 (cobo 20 daplicatio in2010) 27.									
Data	Blaine	Boone	Boyd	Brown					
Job Openings	4	129	43	44					
Unemployed	12	85	35	41					
Unemployed per Job Opening	3.00	0.66	0.81	0.93					
Preliminary	Yes	Yes	Yes	Yes					

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Data	Colfax	Custer	Garfield	Greeley
Job Openings	128	168	11	15
Unemployed	151	143	31	39
Unemployed per Job Opening	1.18	0.85	2.82	2.60
Preliminary	Yes	Yes	Yes	Yes

Data	Hall	Hamilton	Holt	Howard
Job Openings	2,572	321	112	43
Unemployed	1,573	187	155	184
Unemployed per Job Opening	0.61	0.58	1.38	4.28
Preliminary	Yes	Yes	Yes	Yes

Data	Keya Paha	Loup	Merrick	Nance
Job Openings	24	2	110	18
Unemployed	15	15	166	54
Unemployed per Job Opening	0.63	7.50	1.51	3.00
Preliminary	Yes	Yes	Yes	Yes

Data	Platte	Rock	Sherman	Valley	Wheeler
Job Openings	1,535	N/A	72	75	15
Unemployed	483	23	54	64	15
Unemployed per Job Opening	0.31	N/A	0.75	0.85	1.00
Preliminary	Yes	Yes	Yes	Yes	Yes

https://www.averagesalarysurvey.com/nebraska

Nebraska Unemployment

According to the BLS current population survey (CPS), the unemployment rate for Nebraska fell 0.0 percentage points in December 2019 to 3.1%. The state unemployment rate was 0.4 percentage points lower than the national rate for the month. The unemployment rate in Nebraska peaked in January 2010 at 4.9% and is now 1.8 percentage points lower. From a post peak low of 2.7% in July 2018, the unemployment rate has now grown by 0.4 percentage points. You can also see Nebraska unemployment compared to other states.

Unemployment Rate	December 2019	Month/Month	Year/Year
National	3.5%	0.0	-0.4
Nebraska	3.1%	0.0	+0.3

Note: All comparisons are made with December data as January state level unemployment data has not yet been released.

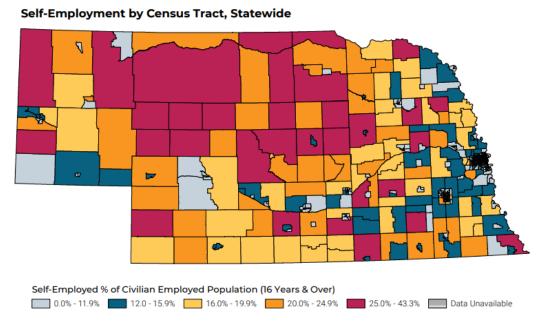
Labor force, employment, and unemployment data for the CNCAP service area 2018 is detailed below.

	Labor			Rate
County Name/State Abbreviation	Force	Employed	Unemployed	(%)
Blaine County, NE	262	250	12	4.6
Boone County, NE	2,922	2,857	65	2.2
Boyd County, NE	1,083	1,051	32	3.0

Brown County, NE	1,392	1,346	46	3.3
Colfax County, NE	5,556	5,427	129	2.3
Custer County, NE	6,425	6,289	136	2.1
Garfield County, NE	1,173	1,145	28	2.4
Greeley County, NE	1,214	1,182	32	2.6
Hall County, NE	31,628	30,629	999	3.2
Hamilton County, NE	4,682	4,566	116	2.5
Holt County, NE	5,725	5,579	146	2.6
Howard County, NE	3,316	3,216	100	3.0
Keya Paha County, NE	586	573	13	2.2
Loup County, NE	395	383	12	3.0
Merrick County, NE	4,053	3,940	113	2.8
Nance County, NE	2,026	1,977	49	2.4
Platte County, NE	17,328	16,870	458	2.6
Rock County, NE	906	884	22	2.4
Sherman County, NE	1,701	1,656	45	2.6
Valley County, NE	2,084	2,024	60	2.9
Wheeler County, NE https://www.bls.gov/lau/home.htm#cntyaa	562	548	14	2.5

The top 10 counties in Nebraska with the highest unemployment rate (not seasonally adjusted) in January, 2020 were Howard County (5.4%), Hall County (4.9%), Thomas County (4.8%), Dakota County (4.7%), Blaine County (4.4%), Hooker County (4.4%), Arthur County (4.3%), Merrick County (4.1%), Thurston County (4.0%), and Hamilton County (3.9%). (5 are CNCAP counties)

Source: Nebraska Department of Labor, Labor Market Information, Local Area Unemployment Statistics



The map above shows the percentage of Nebraska's civilian employed population, ages 16 years and over, who were selfemployed in each of Nebraska's 532 census tracts, according to the U.S. Census Bureau's American Community Survey 2013-2017 five-year estimates.

Transportation

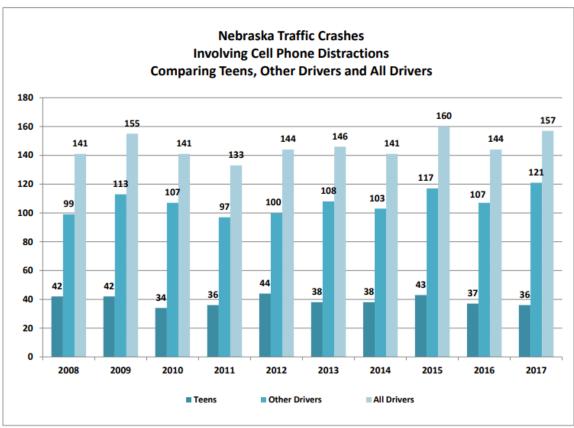


According to the study done by Dean Runyan Associates, in 2019, the Nebraska Passport program not only generated \$23.7 million in traveler spending but \$1.9 million in state and local tax revenue. For every dollar Nebraska Tourism invested in the program, \$150 was generated in traveler spending and \$12.30 was generated in tax revenue. Participants included residents from 37 states and 418 Nebraska communities. Additionally, the study found that 82 percent of passport participants made an overnight trip with 81 percent of them staying in traditional lodging.

Many of our rural residents capitalize on the fact that we have such beautiful scenery along our highways. Introducing visitors to a Chalk Mine (Scotia), the smallest town (Monowi) and its

single citizen, prehistoric animals forever preserved in ash (Royal), plywood cut-outs to double Taylor's population or just the rolling hills because Nebraska is anything but flat.

There are nine scenic stretches of two-lane that will introduce you to the diverse terrain, rich history, unusual attractions, and warm hospitality that are oftentimes just around the bend. http://nebraskapassport.com/



Note: Teen Drivers include Ages 15 thru 19, Other Drivers excludes Teens, All Drivers includes Teens
Note: Teen drivers ages 19 & younger represent 7.2% of all licensed drivers (includes all LPD, SCP, and POP permits) in 2016.
Source: Standard Summary of Nebraska Motor Vehicle Traffic Accidents

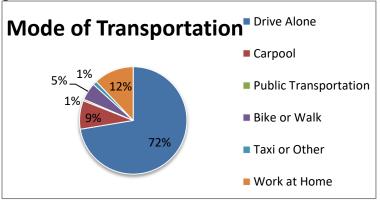
Prepared by: NDOT Highway Safety Office, PO Box 94612, Lincoln, NE 68509 Last Date Modified: October 3, 2018

https://dot.nebraska.gov/safety/crash/



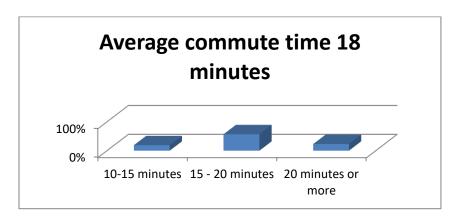
https://unsplash.com/s/photos/potholes

Method of Transportation for CNCAP Commuters



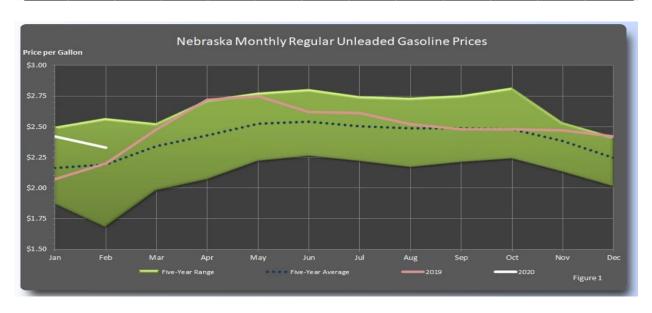
Commuting Time

Data Source: US Census Bureau, American Community Survey



Average Monthly Price per Gallon of Fuel 2016 TO 2020 **Average Monthly Retail** Nebraska Regular Unleaded Gasoline Prices

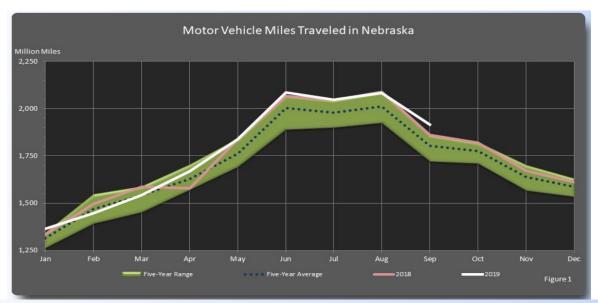
Gra	Grade–Regular Unleaded											
Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2020	\$2.42	\$2.33	NA									
2019	\$2.07	\$2.20	\$2.48	\$2.72	\$2.75	\$2.62	\$2.61	\$2.52	\$2.48	\$2.48	\$2.47	\$2.42
2018	\$2.50	\$2.57	\$2.53	\$2.60	\$2.78	\$2.81	\$2.75	\$2.74	\$2.76	\$2.82	\$2.53	\$2.18
2017	\$2.36	\$2.33	\$2.30	\$2.35	\$2.31	\$2.26	\$2.22	\$2.32	\$2.52	\$2.42	\$2.54	\$2.42
2016	\$1.87	\$1.68	\$1.98	\$2.07	\$2.22	\$2.33	\$2.22	\$2.17	\$2.21	\$2.24	\$2.13	\$2.19



Motor Vehicle Miles Traveled in Nebraska

According to the data table below, travel on all roads and streets in Nebraska in September 2019 increased 3.0 percent, or 56 million miles, compared to the same month a year ago. September travel was 8.0 percent, or 166 million miles, less than in August.

It can be seen in Figure 1 below that miles traveled in September 2019 were more than the miles traveled in September 2018 but less than the miles traveled in August 2019. Also, September travel was above the five—year range and above the five—year average.



Motor Vehicle Miles Traveled in Nebraska 1978 – 2019 (Million Miles)

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Annual Total
2019	1,364	1,446	1,543	1,669	1,838	2,085	2,047	2,083	1,917	NA	NA	NA	NA
2018	1,333	1,495	1,587	1,577	1,840	2,066	2,044	2,088	1,861	1,821	1,672	1,612	20,996
2017	1,316	1,545	1,577	1,703	1,800	2,069	1,995	2,057	1,820	1,803	1,698	1,628	21,011
2016	1,343	1,487	1,567	1,658	1,754	2,035	1,994	2,011	1,823	1,790	1,666	1,581	20,709
2015	1,326	1,424	1,529	1,628	1,722	1,961	1,963	1,974	1,786	1,761	1,585	1,571	20,230

https://neo.ne.gov/programs/stats/inf/97.htm#regular_unleaded

CNCAP's Health Department averages 2,200 miles per month. The WIC program has mobile clinics and travels to 13 communities throughout the service area. WIC staff consulted with 318 women, 377 infants and 634 children regarding nutritional information, WIC checks, and peer

counseling with new parents Our Immunization program travels to 10 communities to administer vaccinations giving families information and education on the importance of vaccinations for their children. Our Nurses gave 1052 immunizations to 716 individuals across our service area. As with any traveling, weather always plays a significant role in getting to the needed destination. In 2019, between the snow and the flooding, the staff had to deal with situations they hadn't been accustomed to.

Poverty

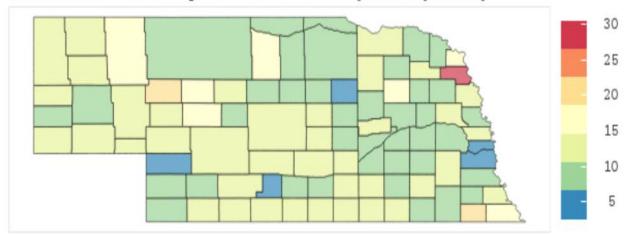
CNCAP Households in Poverty

% of Persons in poverty by Count	У	Merrick County	10.70%
Blaine County	16.20%	Nance County	11.70%
Boone County	9.20%	Platte County	8.50%
Boyd County	13.90%	Rock County	14.60%
Brown County	12.50%	Sherman County	14%
Colfax County	10.40%	Valley County	12.40%
Custer County	12%	Wheeler County	14%
Garfield County	13.10%	Source(s): U.S. Census	
Greeley County	12.80%	Bureau, 2018 Small Area	
Hall County	13%	Income and Poverty	
Hamilton County	6.50%	Estimates (SAIPE) Powered by the U.S.	
Holt County	12.10%	Census Bureau	
Howard County	10.20%	census bureau	
Keya Paha County	18.30%		
Loup County	17.10%		

https://www.indexmundi.com/facts/united-states/quick-facts/nebraska/percent-of-people-of-all-ages-in-poverty#table

Data collected (represented in the above and following charts) show CNCAP service area, per county, per capita and median income for households. The race and percent of unemployed compared to the ranking of the 93 counties of Nebraska.

Nebraska Percent of Population Below Poverty Rate By County

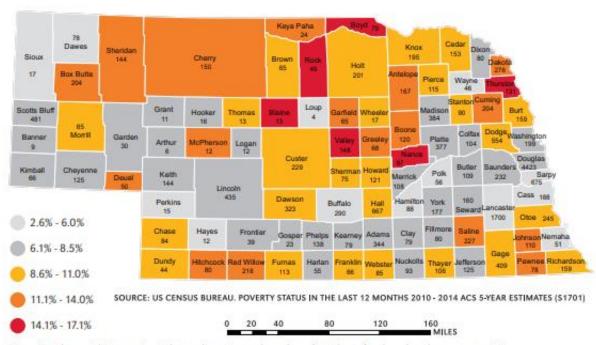


♦ Nebraska Poverty Rate By Race

Race	Population	Poverty Rate	National Poverty Rate	Population
Black	85,003	28.6%	25.2% 🧑	4.5%
American Indian	15,303	32.6%	26.8% 🧑	0.8%
Asian	40,697	19.3%	11.9%	2.1%
Pacific Islander	1,403	19.2%	19.0%	0.1%
Other	34,466	20.8%	23.8% 🧑	1.8%
Two Or More Races	43,938	20.5%	18.4% 🧑	2.3%
White	1,471,138	9.0%	10.3% 🧑	77.7%
Hispanic	193,358	22.7%	22.2% ②	10.2%

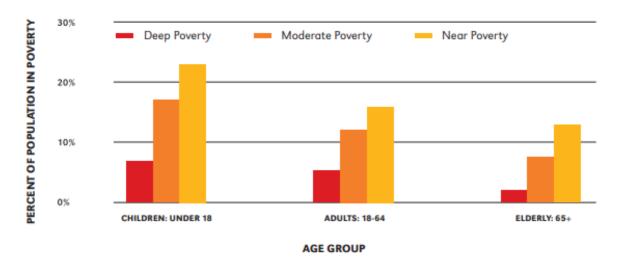
https://www.welfareinfo.org/poverty-rate/nebraska/

ELDERLY POVERTY BY COUNTY: 65+ YEARS



Note: Numbers within counties indicate the estimated number of residents for the related poverty statistic

POVERTY RATES OF CHILD, ADULT, AND ELDERLY POPULATIONS



AGE GROUP	DEEP POVERTY	MODERATE POVERTY	NEAR POVERTY
CHILDREN: UNDER 18	7.0%	17.1%	23.0%
ADULTS: 18-64	5.2%	12.1%	16.0%
ELDERLY: 65+	2.1%	7.8%	13.2%

https://digitalcommons.unl.edu/cgi/viewcontent.cgi?article=1000&context=mapquallifene

2020 Federal Poverty Guidelines

2020 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE D	ISTRICT OF COLUMBIA
PERSONS IN FAMILY/HOUSEHOLD	POVERTY GUIDELINE
For families/households with more than 8 persons, add \$4,48	80 for each additional person.
1	\$12,760
2	\$17,240
3	\$21,720
4	\$26,200
5	\$30,680
6	\$35,160
7	\$39,640
8	\$44,120

The poverty guidelines apply to both aged and non-aged units. The guidelines have never had an aged/non-aged distinction; only the Census Bureau (statistical) poverty thresholds have separate figures for aged and non-aged one-person and two-person units.

Programs using the guidelines (or percentage multiples of the guidelines — for instance, 125 percent or 185 percent of the guidelines) in determining eligibility include Head Start, the Supplemental Nutrition Assistance Program (SNAP), the National School Lunch Program, the Low-Income Home Energy Assistance Program, and the Children's Health Insurance Program. Note that in general, cash public assistance programs (Temporary Assistance for Needy Families and Supplemental Security Income) do NOT use the poverty guidelines in determining eligibility. The Earned Income Tax Credit program also does NOT use the poverty guidelines to determine eligibility. For a more detailed list of programs that do and don't use the guidelines, see the Frequently Asked Questions (FAQs).

There are two slightly different versions of the federal poverty measure: poverty thresholds and poverty guidelines.

The **poverty thresholds** are the original version of the federal poverty measure. They are updated each year by the **Census Bureau**. The thresholds are used mainly for **statistical** purposes — for instance, preparing estimates of the number of Americans in poverty each year. (In other words, all official poverty population figures are calculated using the

poverty thresholds, not the guidelines). Poverty thresholds since 1973 (and for selected earlier years) and weighted average poverty thresholds since 1959 are available on the Census Bureau's Web site. For an example of how the Census Bureau applies the thresholds to a family's income to determine its poverty status, see "How the Census Bureau Measures Poverty" on the Census Bureau's web site.

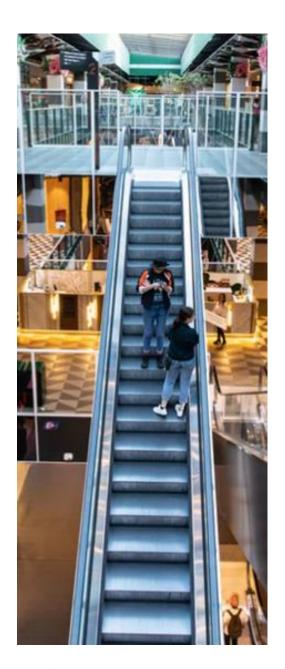
The **poverty guidelines** are the other version of the federal poverty measure. They are issued each year in the Federal Register by the **Department of Health and Human Services** (HHS). The guidelines are a simplification of the poverty thresholds for use for **administrative** purposes — for instance, determining financial eligibility for certain federal programs. The poverty guidelines are sometimes loosely referred to as the "federal poverty level" (FPL),

The poverty guidelines are sometimes loosely referred to as the "federal poverty level" (FPL), but that phrase is ambiguous and should be avoided, especially in situations (e.g., legislative or administrative) where precision is important.

https://help.ihealthagents.com/hc/en-us/articles/225377107-What-are-the-2020-Federal-Poverty-Levels-the-2020-Federal-Poverty

- 61% (40,733) of young children in low-income families have at least one parent who is employed full-time, year-round compared to 93% (82,332) of young children in above low-income families.
- 29% (19,385) of young children in low-income families have at least one parent who is employed either part-year or part-time compared to 6% (5,035) of young children in above low-income families.
- 9% (6,179) of young children in low-income families do not have an employed parent compared to 1% (732)** of young children in above low-income families.

Extreme poverty rate:	6.0%
Food insecurity:	11.9%
Minimum Wage:	\$9.00
Number of Hispanic children living in families where no parent has full-time, year- round employment:	24,000
Percent of individuals who are uninsured:	8.3%
Percent of jobs that are low- wage:	22.2%
Percent of working families under 200% of the poverty line:	29.2%
Poverty rate:	10.8%
Unemployment rate:	2.9%



https://spotlightonpoverty.org/states/nebraska/

Mitchell Luo Unsplach.com

Emergency Needs

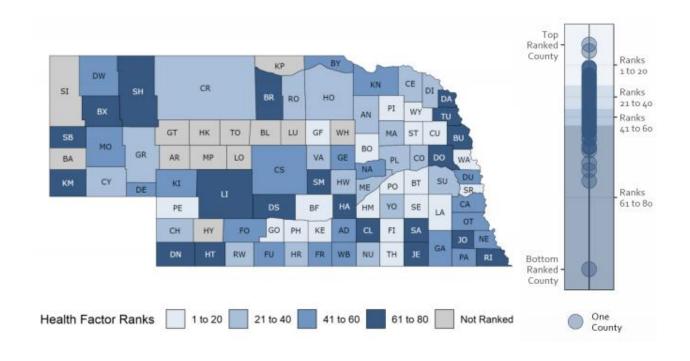
Finding new and innovative ways to communicate our services while partnering with local forprofit community businesses can offer attractive benefits from improving outreach efforts to enhancing programs and services. Many alliances can help to improve our efficacy, impact and sustainability. A strategic partnership gives us access to tools, resources, and services we all can benefit from. Many of the business' we partner with act as a "referral" program. Across our service area we collaborate with Housing Authorities on a regular basis, schools share services with our Head Start Programs, economic development can be vital to those struggling to run a new business or needing employees, health departments keep us up to date on the latest outbreaks in the area, churches are more than willing to help find services that we may not be able to provide. Some agencies we collaborate with are: Lutheran Family Services, Hope Harbor, Crisis Centers, and Bright Horizons. In a small community the residents themselves volunteer to do many things to fill in where needed.

OUTREACH ACTIVITY SUMMARY

		OUTREACH ACTIVITY SOLVIIVIANY
Staff Name:		
Month		Oct 2018-Sept 2019
		are any needs, services or requests that our clients cannot pay. This includes any pays/gives to the client. Example: CNCAP pays \$500 toward client's rent. Unmet need of the client was \$500
# of H.holds	\$ Cost of Service	Service
1,247	851,513	RENT
620	1,688,870	RENT / DEPOSIT
712	719,689	UTILITIES
315	65,920	UTILITY / DEPOSIT
86	30,817	MOTEL
144	12,548	TRANSPORTATION REQUESTS (FUEL FOR CAR, BUS PASSES, ETC.)
48	55,422	CAR REPAIRS
233	63,485	CLOTHING, FURNITURE, HYGIENE PRODUCTS, SCHOOL SUPPLIES
10	20,406	EDUCATION
248	51,512	FOOD
26	42,417	HOUSEHOLD EXPENSE (this is anything to maintain a home) (plumbing, roofing, furnace, hot water heater, etc.)
34	39,744	MEDICAL / Rx

15	25,941	MORTGAGE
128	14,607	PHONE
31	2,551	MISC. (Anything that does not fit the above categories)
3,897	\$3,685,442	Total

HEALTH AND SAFETY



	Blaine	Boone	Boyd	Brown	Colfax	Custer	Garfield	Greeley	Hall	Hamilton	Holt	Howard	Keya Paha	Loup	Merrick	Nance	Platte	Rock	Sherman	Valley	Wheeler
Length of Life																					
Life expectanc y	79.6		81.3	79.7	77.2	81	80.1	75.1	82	78.3	82.2	80.1	82.2			80.3	78.3	81.1		80	81.5
Premature age- adjusted mortality	310		250	098	420	260	290	440	300	350	270	280	200			310	028	270	480	280	240
Child mortality	20									09											

Infant mortality	9									7											
Quality of Life																					
Frequent physical distress	10%	%6	%6	%6	11%	10%	%01	10%	%6	%01	%6	%6	%6	%6	%6	10%	10%	%6	%6	%6	10%
Frequent mental distress	11%	10%	10%	11%	12%	11%	11%	11%	11%	11%	10%	10%	10%	10%	10%	11%	11%	10%	10%	11%	11%
Diabetes prevalence	%6	%2	11%	16%	%6	%2	11%	%2	10%	10%	%6	10%	11%	14%	%2	16%	11%	%6	15%	11%	11%
Health Behaviors																					
Food insecurity	12%	13%	10%	11%	14%	%9	12%	10%	11%	10%	10%	11%	11%	11%	11%	11%	11%	%6	11%	11%	12%
Limited access to healthy foods	%9	35%	%9	41%	4%	%9	17%	3%	40%	11%	3%	%6	%9	42%	30%	12%	15%	%9	%6	28%	%2
Drug overdose deaths	7									5											
Motor vehicle crash deaths	13					34	33			12	20	19	22			20		13			
Insufficient sleep	30%	28%	27%	27%	29%	27%	76%	26%	28%	31%	76%	29%	29%	25%	26%	28%	29%	27%	28%	27%	28%
Clinical Care																					
Uninsured adults	12%	13%	10%	14%	12%	21%	13%	11%	17%	17%	%8	13%	10%	18%	%6	11%	10%	12%	15%	13%	13%
Uninsured children	%9	15%	%2	13%	12%	%6	%8	%6	15%	%9	4%	%8	%2	19%	14%	%9	%9	%9	12%	12%	%6
Social & Economic Factors																					
Disconnect ed youth	%9									%9											
Reading scores	3.2		3.1		3.2	3.2	3.6			2.8	3.7		3.2			2.8	3.6	3.4		3.2	3
Math scores	3.2		3.1		2.7	3.2	3.4			2.8	3.3	3.1	3.3			2.7	3.6	3.6		2.9	3

Median household income	\$59,700	\$44,500	\$51,900	\$42,400	\$46,200	\$55,800	\$50,000	\$46,200	\$45,200	\$53,800	\$60,600	\$56,000	\$52,300	\$48,400	\$47,800	\$56,500	\$47,300	\$63,700	\$48,300	\$47,500	\$48,600
Children eligible for free or reduced price lunch	46%	%87	39%	%99	46%	%09	%17	40%	%89	%79	%78	%87	%88	%79	%79	42%	38%	%89	43%	%24	46%
Residential segregation - Black/White	65					34				40											
Residential segregation - non- White/White	45					28	28			58	99	40	22			27		23			
Homicides	3																				
Suicides	13					18	24			15								12			
Firearm fatalities	6						18			2								8			
Juvenile arrests	27		22		40	42	13	35	0	99	48	29	10	0	0	44		51		27	30

Note: Blank values reflect unreliable or missing data

https://www.countyhealthrankings.org/app/nebraska/2020/



Youth taking the tractor safety course get practical hands-on training in various aspects of tractor and ATV operation in addition to classroom instruction. At two sites, online learning eliminates the day of classroom instruction.

Youth Tractor Safety and Hazardous Occupations Courses will be held at 12 locations this year for 14- and 15-year-olds who will be working on a farm other than their own. Anyone older than 15 years is also welcome to take the Nebraska Extension class, but those under age 14 are not eligible.

The class includes extensive training on tractor and ATV safety with classroom lessons and hands-on activities. Instilling an attitude of safety and a respect for agricultural equipment are primary goals of the course.

Federal law prohibits youth under 16 years of age from using specific equipment on a farm unless parents or legal guardians own the farm. Certification received through a course provided by Nebraska Extension grants an exemption to the law, allowing 14- and 15-year-olds to drive a tractor and work with certain mechanized equipment.

The most common causes of agricultural-related deaths in Nebraska are overturned tractors and all-terrain vehicles (ATVs). Employing anyone uncertified under age 16 is a liability risk for farmers if those children operate such equipment. https://cropwatch.unl.edu/

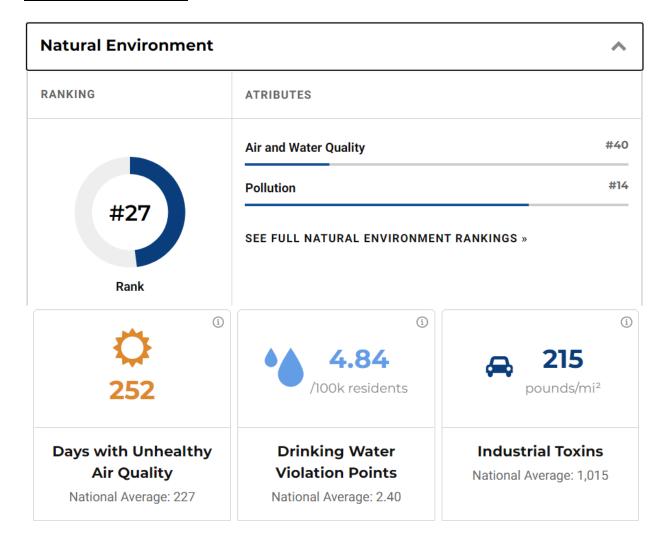
Farmers in rural CNCAP areas continue to use family members to help on the farm. Many of these are children under the age of 16. Children grow up working with Mom and Dad at a very young age and learn skills that require constant vigilance by everyone involved. FFA and 4-H are necessary classes for these young people in their schoolyears.

The 2018 data for the U.S. Bureau of Labor Statistics indicates that the agricultural sector is still the most dangerous in America with 574 fatalities, or an equivalent of 23.4 deaths per 100,000 workers. Fall harvest time can be one of the busiest and most dangerous seasons of the year for the agriculture industry. For this reason, the third week of September has been recognized as National Farm Safety and Health Week. This annual promotion initiated by the National Safety Council has been proclaimed as such by each sitting U.S. President since Franklin D. Roosevelt in 1944. National Farm Safety and Health Week is led by the National Education Center for Agricultural Safety (NECAS), the agricultural partner of the National Safety Council.



https://www.necasag.org/nationalfarmsafetyandhealthweek/

General Health Status



https://www.usnews.com/news/best-states/nebraska

Public Health

ACCESS TO HEALTH SERVICES

National Healthy People 2020 Goal Improve access to comprehensive, quality health care services.

Overview

Everyone needs to have access to high-quality health care services in order to achieve health equity and increase the quality and years of healthy life. Lack of insurance coverage, the high cost of health care, and the lack of availability of health care services have prevented many people from getting needed care. These barriers to accessing health care services lead to unmet health needs, delays in receiving appropriate care, inability to get preventive services, and hospitalizations that could have been prevented.

Nebraska Data Summary

Four indicators were selected for the Access to Health Services topic area. There are stark disparities between racial/ethnic groups in terms of having health insurance, having a personal doctor or health care provider, and being unable to see a doctor due to cost. Hispanics, African-Americans, and Native Americans are much more likely to experience lower rates of having health insurance and a personal doctor or health care provider and higher rates of being unable to see a doctor due to cost compared to White non-Hispanics and Asians/Pacific Islanders. Most notably, just half (50.5%) of Hispanics aged 18 to 64 reported having health insurance (compared to 85.9% for White non-Hispanics), and three-fifths (60.5%) of Hispanics reported having a personal doctor or health care provider from 2011 to 2013 (combined) (compared to 83.2% for White non-Hispanics). These rates of having health insurance and having a personal doctor or health care provider are considerably lower for Hispanics than for all other racial/ethnic groups (AHS-1-2).

In 2013, 13.0 percent of Nebraskans reported that they needed to see a doctor but were unable due to cost in the past year (compared to 15.3% for the nation). Again, there are stark disparities between racial and ethnic groups on this indicator, with African American, Native American, and Hispanic minority groups reporting rates of being unable to see a doctor due to cost that are approximately twice as high compared to the rates for White non-Hispanics and Asians/Pacific Islanders (AHS-4).

Links to Further Information on this Topic

National Objectives for Access to Health Services (HealthyPeople.gov): www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services

Key Facts about the Uninsured Population (The Henry J. Kaiser Family Foundation): kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population

Emergency Rooms Continue to Serve as Patients' Primary-Care Provider (Physicians Practice): www.physicianspractice.com/blog/emergency-rooms-continue-serve-patients-primary-care-provider

http://dhhs.ne.gov/CHPM%20Reports/HP2020%20Report2015.pdf

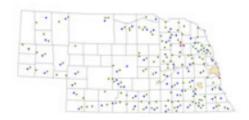


http://dhhs.ne.gov/CHPM%20Documents/SHIP%20Plan%20-%202017-2021.pdf

Nebraska Rural Healthcare Facilities

According to <u>data.HRSA.gov</u>, as of October 2019 Nebraska had:

- 64 Critical Access Hospitals
- 145 Rural Health Clinics
- 8 Federally Qualified Health Center sites located outside of Urbanized Areas



View full-size map

• 8 short term hospitals located outside of Urbanized Areas

Selected Social Determinants of Health for Rural Nebraska

9% of its residents lack health insurance (Kaiser, 2017). According to the USDA Economic Research Service, the average per capita income for Nebraskans in 2018 was \$53,263, although rural per capita income lagged at \$48,495. The ERS reports, based on 2018 ACS data, that the poverty rate in rural Nebraska is 11.5%, compared with 10.7% in urban areas of the state. 9.6% of the rural population has not completed high school, while 8.5% of the urban population lacks a high school diploma according to 2014-2018 ACS data reported by ERS. The unemployment rate in rural Nebraska is at 2.7%, while in urban Nebraska it is at 2.9% (USDA-ERS, 2018).

https://www.ruralhealthinfo.org/states/nebraska/resources

Mental Health

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.

Over the course of your life, if you experience mental health problems, your thinking, mood, and behavior could be affected. Many factors contribute to mental health problems, including:

Biological factors, such as genes or brain chemistry Life experiences, such as trauma or abuse Family history of mental health problems Mental health problems are common and help is available.

https://nebraskamentalhealth.com/

The Challenge of Rural Stress

AUGUST 16, 2019

Susan Harris-Broomfield - Extension Educator for Rural Health, Wellness, and Safety Stress has become a fact of life for farm families. Several factors are behind this: low commodity prices; the shifting international trade outlook; and damage and obstacles created by storms, floods, and other natural disasters. There's added stress this summer in Scotts Bluff and Goshen counties from the loss of irrigation water to more than 100,000 acres of crops due to the collapse of the Goshen/Gering-Ft. Laramie canal tunnel. But there are resources to help farm families address problems caused by stress.

Stress can be positive, giving us a competitive edge. However, when that stress turns into negative distress, it is no longer healthy for our well-being. In rural areas, many are subject to stresses and distress resulting from agriculture.

Farming is among the most stressful jobs in America, based on factors that affect a farmer's financial, physical, and mental health, according to John Shutske, professor and extension specialist at the University of Wisconsin – Madison with over 30 years of experience with the agricultural community.

A 2016 study showed that people involved in agriculture have the highest overall rate of suicide among all occupational groups, with their suicide rate being almost 60% higher than the next closest industry. Farmers may refer to themselves as "full-time gamblers," a fitting title. Complex factors such as markets and weather are impossible to control directly, and these influence the livelihood of a farmer.

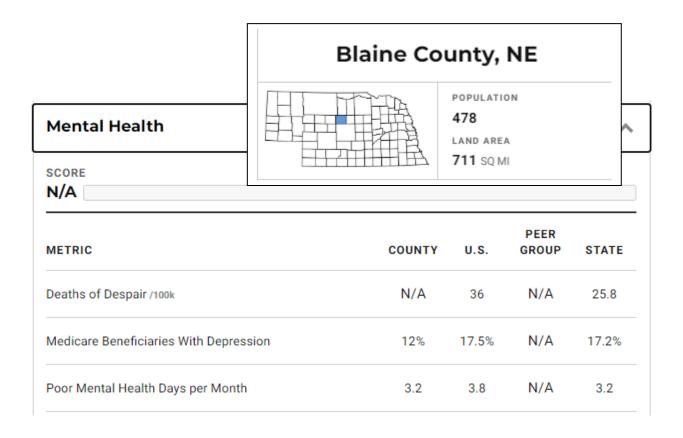
Shutske says stress is a double-edged sword. A little stress can serve as a constructive motivator,

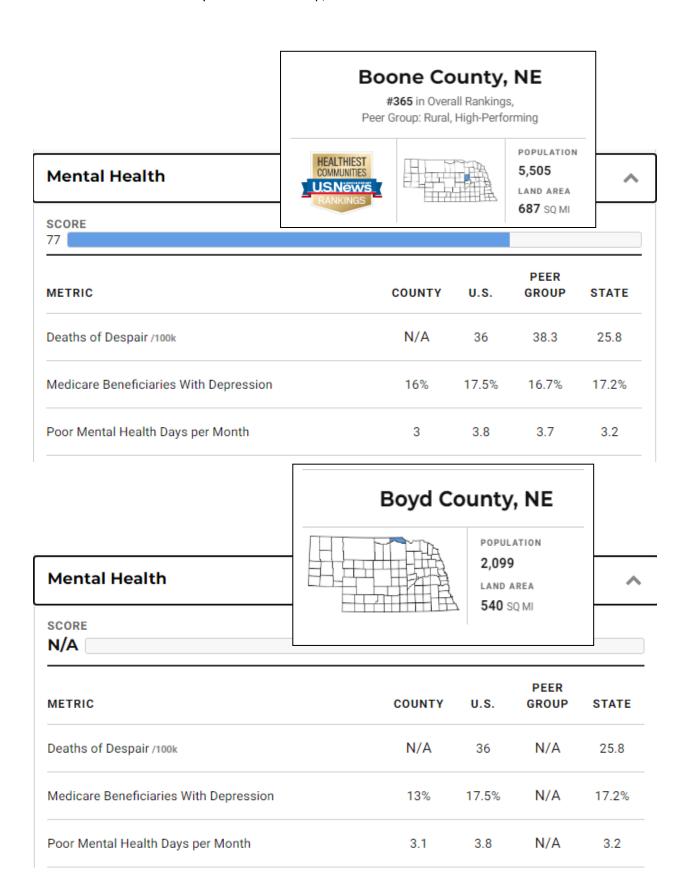
pushing us to action. However, too much stress can damage our health, compromise safety, and sabotage personal relationships. It reduces our capacity to consider and evaluate optional solutions to complex problems and can limit our power to make sound decisions. Stress can also manifest itself as a vicious cycle with escalating consequences that can paralyze business owners or their families.

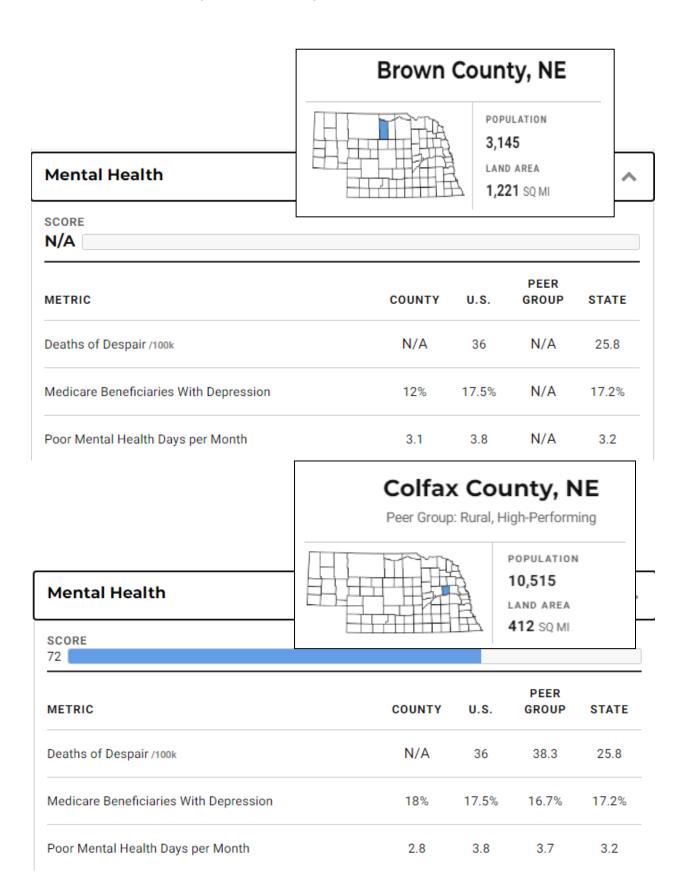
When somebody shows symptoms of stress, such as moodiness, anger, loneliness, anxiety, lack of energy, sleep deprivation, low self-esteem, constant worrying, forgetfulness, overeating, or increased use of alcohol or drugs, it might be time to talk to someone about it. https://cropwatch.unl.edu/2019/rural-stress

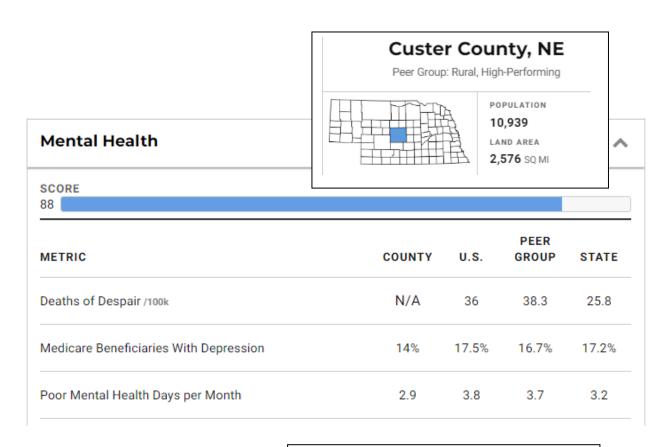
Rural, High-Performing Rankings Measuring health and wellness in similar communities

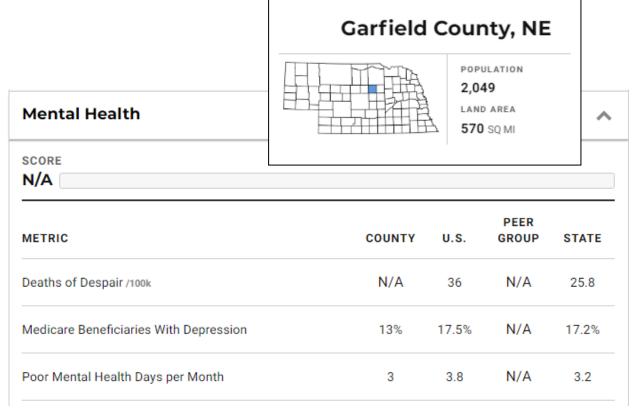
People who live in rural communities are more likely to own their homes and live in the state where they were born than those in urban areas, according to the U.S. Census Bureau. And while access to care and transportation barriers can pose challenges, residents of rural communities with high-performing economies typically live in healthier natural environments and fare better in terms of housing than their urban counterparts.

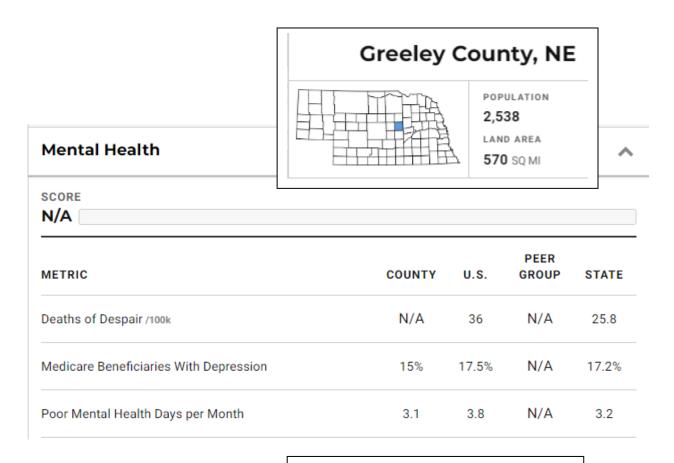


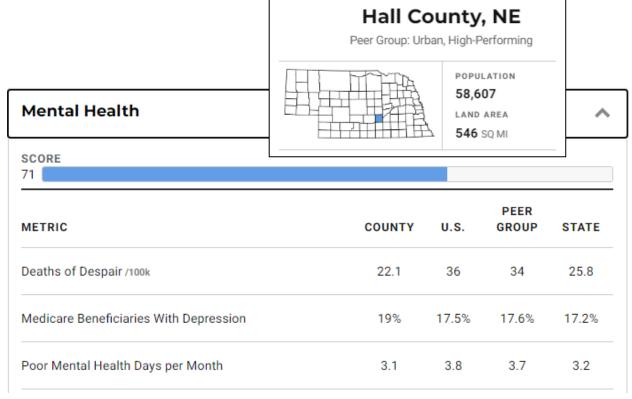






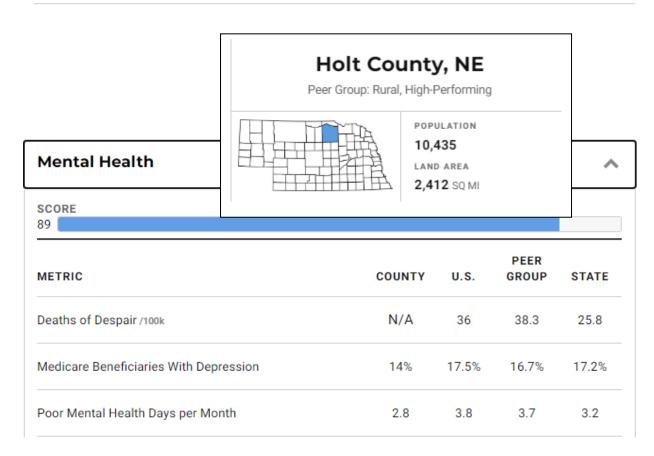


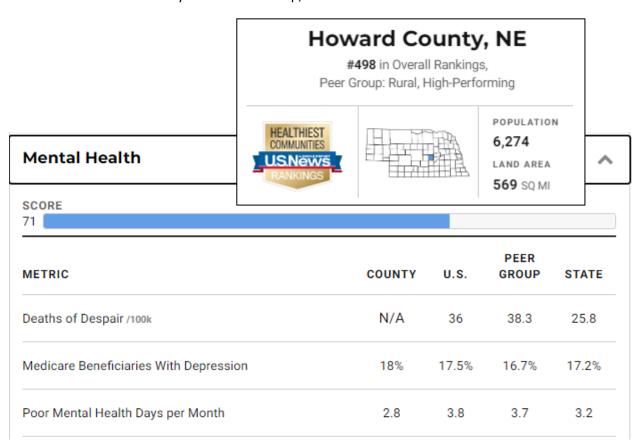


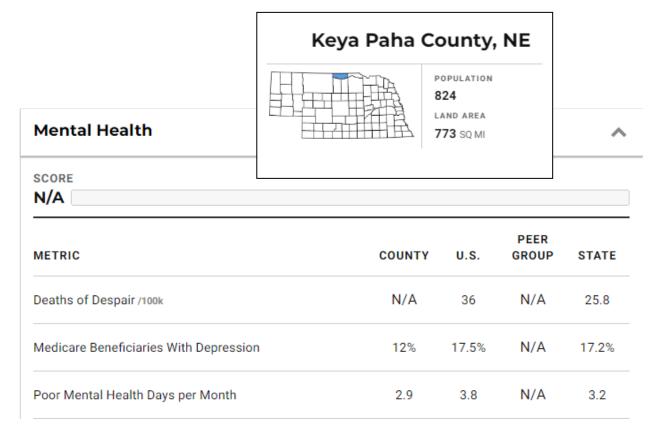


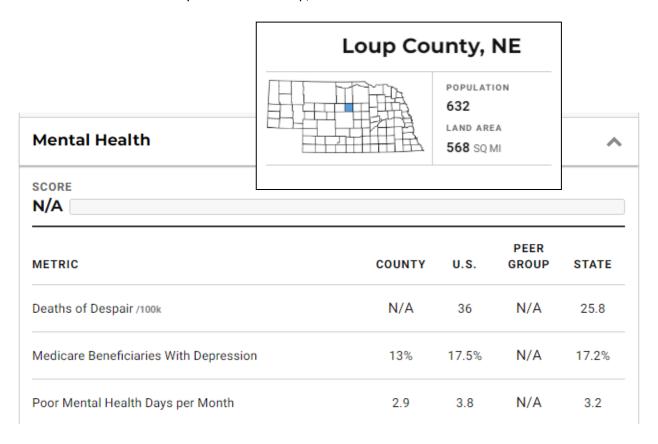
Hamilton County, NE #85 in Overall Rankings, Peer Group: #22 in Rural, High-Performing HEALTHIEST OMMUNITIES US NEWS FRANKINGS POPULATION 9,124 LAND AREA 543 SQ MI

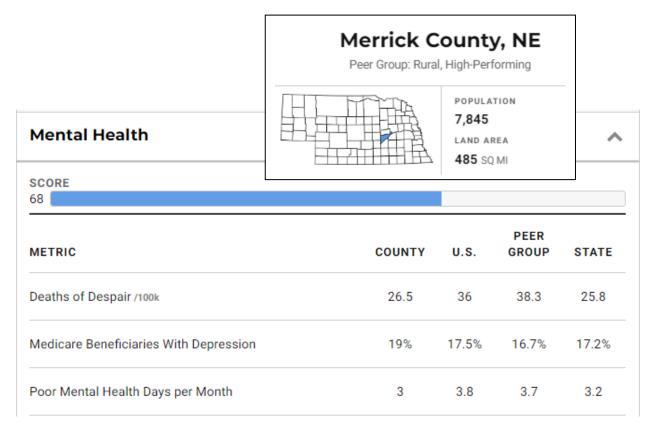
PEER **METRIC** COUNTY U.S. GROUP STATE Deaths of Despair /100k N/A 36 38.3 25.8 Medicare Beneficiaries With Depression 16% 17.5% 16.7% 17.2% Poor Mental Health Days per Month 2.9 3.2 3.8 3.7











Poor Mental Health Days per Month

Nance County, NE Peer Group: Rural, High-Performing POPULATION 3,735 **Mental Health** LAND AREA 442 SQ MI SCORE 66 PEER METRIC COUNTY U.S. GROUP STATE N/A Deaths of Despair /100k 36 38.3 25.8 Medicare Beneficiaries With Depression 18% 17.5% 16.7% 17.2%

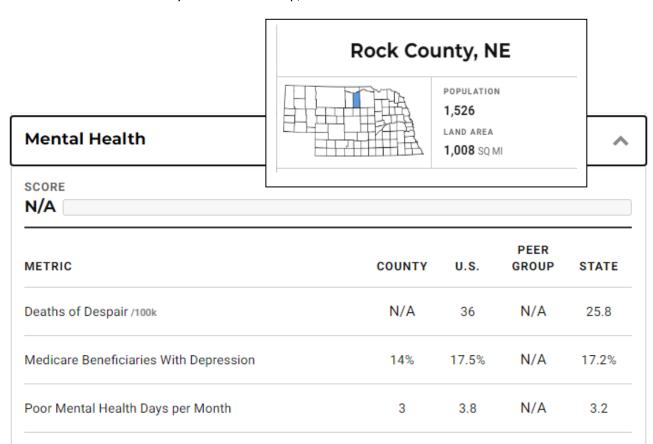
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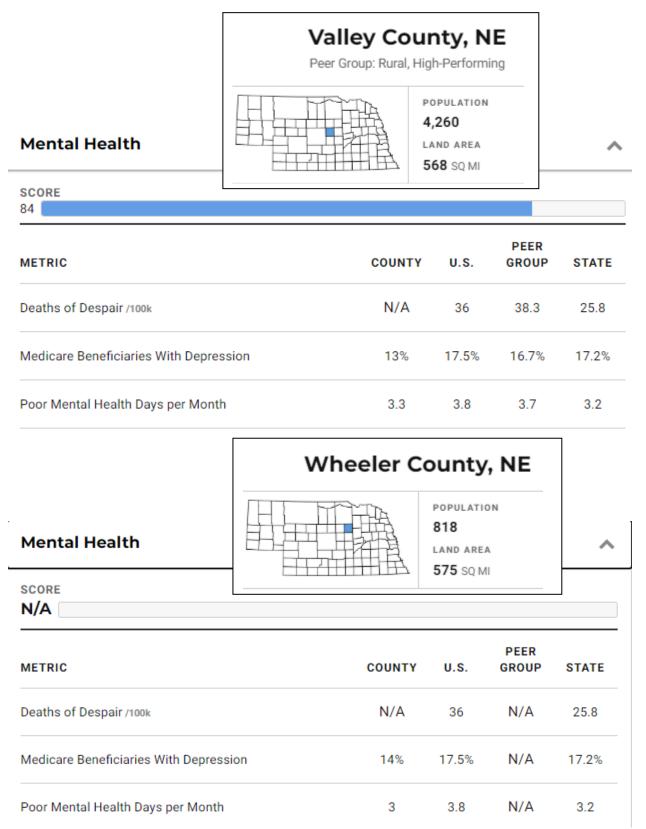
3.7

3.2

Platte County, NE #348 in Overall Rankings, Peer Group: Urban, High-Performing POPULATION HEALTHIEST 32,237 Mental Health LAND AREA 674 SQ MI **SCORE** PEER METRIC COUNTY U.S. **GROUP** STATE Deaths of Despair /100k 17.2 34 25.8 36 Medicare Beneficiaries With Depression 18% 17.5% 17.6% 17.2% Poor Mental Health Days per Month 2.9 3.2 3.8 3.7



Sherman County, NE POPULATION 3,152 **Mental Health** LAND AREA 566 SQ MI SCORE N/A PEER METRIC COUNTY U.S. GROUP STATE N/A N/A Deaths of Despair /100k 36 25.8 Medicare Beneficiaries With Depression 17% 17.5% N/A 17.2% N/A Poor Mental Health Days per Month 3 3.8 3.2



https://www.usnews.com/news/healthiest-communities/data-

2020 Community Assessment Central Nebraska Community Action Partnership, Inc.

Infant/Child/Adolescence mental health

Mental health challenges and disorders have many different signs and symptoms and can look different in different people. They can impact how a person thinks, feels and behaves.

Some common symptoms of a mental health challenge or disorder are:

changes in mood

changes in the way you perceive things

obsessions

fears

feelings of anxiety

Mental health challenges and disorders can happen to anyone. They affect people of all ages, races and social classes. No one is immune.

The best way to prevent mental health challenges from getting worse is to recognize symptoms early and get professional help. Many mental health challenges and disorders can be treated successfully. When the signs are recognized early, that person can get started on the path to a full recovery.

Here is a list of some of the most common mental health challenges and disorders experienced by children and youth.

Anxiety means feeling worried, nervous, or fearful. Anxiety becomes a problem when children experience fear or worry even when there is no real...

Attention-Deficit/Hyperactivity Disorder (ADHD) Children and youth with ADHD usually have some combination of challenges with: paying attention, being restless, or acting before thinking Autism Spectrum Disorder Autism is a developmental condition that is characterized by impaired social interactions, and verbal and non-verbal communication, and by...

Behavioral Disorders Behavioral disorders affect the way a child acts. There are two types of behavioral disorders: oppositional defiant disorder and conduct disorder.

Bipolar Disorder A person with bipolar disorder has extreme changes or swings in moods, from mania to depression. Because of the two "poles" of mood, this illness is...

Borderline Personality Disorder The diagnosis of a personality disorder must be done carefully. The symptoms need to have lasted for long periods and be stable.

Concurrent Disorders Concurrent disorders are mental illness and substance use problems that happen at the same time.

Depression & Depressive Disorders Depression is a type of mood disorder. The main sign of depression is when a child or youth are sad or irritable for weeks or longer, but there are...

Eating Disorders are a type of mental illness that involves unhealthy thoughts and behaviors towards food, weight, and your body shape

Emotional Regulation, sometimes called self-regulation, refers to the way we deal with big feelings like anger, excitement, frustration, anxiety, or...

Grief & Loss Grief is what we experience when we lose something important. We might feel numb, anxious, sad, heartbroken, angry, scared or guilty. We might even...

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Infant Mental Health means the mental health of children from newborns to the age of three. Just like everyone has physical health, everyone has...

Obsessive-Compulsive & Related Disorders OCD is made up of two different parts, obsessions and compulsions. A child or youth may avoid things or situations that trigger obsessions or...

Post-Traumatic Stress Disorder Post-Traumatic Stress Disorder (PTSD) is a trauma and stress disorder that a child or youth may develop after experiencing or witnessing a life...

Psychosis is a serious brain illness. When a person has psychosis, what they think is real is not the same as what other people think is real.

Schizophrenia is a mental illness. People with schizophrenia have problems thinking. They may have trouble understanding information and using it to...

Self-Injury Some people harm themselves on purpose to help them deal with difficult thoughts or feelings.

Somatization symptoms are experienced in the body - physical sensations, movements or experiences. Somatization is a normal human experience, but...

Substance Use Challenges Just because a youth is using substances doesn't mean they have a substance use problem, but it is important to talk to them if you are concerned...

Suicide is not an easy subject to talk about and it can be very difficult to learn that a loved one is struggling with thoughts of suicide,

Tics & Tourette Syndrome is characterized by quick or sudden movements or sounds that are repeated for no apparent reason. These movements or sounds are...

https://keltymentalhealth.ca/mental-health-challenges-and-disorders

Mental Illness

Mental Illness can affect persons of any age, race, religion or socioeconomic status.

One in four American adults experiences an episode of mental illness per year.

Individuals, both diagnosed and undiagnosed, with mental illness are those around us - our neighbors, our friends, family and co-workers.

Four million children and adolescents in this country suffer from a serious mental disorder that causes significant functional impairments at home, at school and with peers.

Mental health disorders account for more disability that any other illness, including cancer and heart disease reports the Centers for Disease Control and Prevention (CDC). (NAMI)

• Among adults served in Nebraska's public mental health system in 2015, 38.3% of those aged 18–20, 43.9% of those aged 21–64, and 81.0% of those aged 65 or older were not in the labor force.

Behavioral Health Barometer: Nebraska, Volume 4 – SAMHSA

• Senior Population

Research shows that poor mental health days, along with other self-reported measures of health-related quality of life, are significant predictors of future adverse health events among older adults resulting in a provider visit, hospitalization or death within 30 days or one year. Certain senior populations experience a greater frequency of poor mental health days. According to America's Health Rankings' analysis of the 2017 BRFSS data, several groups experience greater prevalence of poor mental health days including:

• Women: Poor mental health days are more common in female seniors (2.8 days) compared with male seniors (2.2 days).

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- Seniors with lower educational attainment: Poor mental health days are more common among seniors who did not graduate from high school (3.7 days) compared with those who graduated from college (1.7 days).
- Low-income seniors: Poor mental health days are more common among seniors who make less than \$25,000 a year (3.8 days) compared with those that make \$75,000 or more a year (1.5 days).

An analysis of 2017 data from the National Health interview Survey Adult Functioning and Disability Supplement found that the percentage of currently working adults who reported feeling worried, nervous, or anxious daily or weekly declined with age, and that among adults aged 65 and older, 47.2 percent of those looking for work reported feeling worried, nervous or anxious daily or weekly compared to 14.3 percent of those currently working.

Measures Closely Related to "Poor Mental Health Days - Seniors"

Frequent Mental Distress - Seniors

Depression - Seniors

Suicide - Seniors

Measures Related to "Poor Mental Health Days - Seniors"

Physical Inactivity - Seniors

Volunteerism

Multiple Chronic Conditions - Seniors

Community Support

Excessive Drinking - Seniors

Risk of Social Isolation - Seniors

Americas Health rankings/Nebraska/United Health Foundation Senior Report

• Nebraska Adolescent Mental Health Facts

Depression symptoms among high school students (grades 9-12), 2017 MH1

Percent of high school students who report they felt sad or hopeless almost every day for 2 or more weeks in a row so that they stopped doing some usual activities (during the 12 months before the survey)

Nebraska

United States

before the survey)	Ticoraska	Omu
Total	27%	31%
Male	19%	21%
Female	35%	41%

Depressive episodes, ages 12-17, 2015-2016 MH2

Percent of adolescents ages 12-17 who report they had at least 1 major depressive episode 1

(during the 12 months before the survey) Nebraska United States Total 13% 13%

Suicidal thoughts, attempts, and related injuries among high school students (grades 9-12), 2017 MH1

Percent of high school students who report they seriously considered attempting suicide (during

the 12 months before the survey)
Nebraska
United States
16%
17%
Male
9%
12%

Female 23% 22%

Percent of high school students who report they attempted suicide 1 or more times (during the 12

months before the survey)

Nebraska

United States

2020 Community Assessment

Central Nebraska Community Action Partnership, Inc.

Total	8%	7%
Male	6%	5%
Female	10%	9%

Percent of high school students who report they attempted suicide resulting in an injury, poisoning, or overdose that had to be treated by a doctor or nurse (during the 12 months before

the survey)	Nebraska	United Star
Total	2%	2%
Male	2%	2%
Female	3%	3%

DATA NOTES: see Resource page for notes

Rates of Mental Illness in Nebraska

Nebraska has rates of serious mental illness slightly above average for the rest of the U.S., and an overall rate of mental illness that is slightly above average as well. In all, more than 20 percent of Nebraska residents suffer from some form of mental illness.

A further breakdown, as reported by the CDC, reveals the following statistics for the state:

Prevalence of serious psychological distress: 2.6 percent (2009)

Prevalence of postpartum depression/depressive symptoms: 10.8 percent with women experiencing both hopelessness and decreased interest in activities, while additional women experienced only one symptom or the other

Prevalence of current depression: 8.5 percent (2009)

Prevalence of adults who received a diagnosis of depression in their lifetimes: 16.9 percent (2008), with women suffering at rates nearly twice that of men, and the rates highest among Caucasians at 17.3 percent.

Prevalence of adults who received a diagnosis of anxiety in their lifetimes: 10.6 percent (2008) Nursing home residents over 65 years of age with any mental illness diagnoses (across U.S. and broken down by disorder):

Dementia

Men: 25.1% (ages 65-74), 35.9% (ages 75-84), 38.3% (ages 85+)

Women – 24.5% (65-74), 34.5% (75-84), 41.6% (85+)

Alzheimer's Disease

Men: 6.8% (65-74), 17.0% (75-84), 15.7% (85+)

Women: 12.3% (65-74), 19.2% (75-84), 18.9% (85+)

Schizophrenia

Men: 7.3% (65-74), 4.2% (75-84), undetected (85+) Women: 12.0% (65-74), 4.6% (75-84), 1.2% (85+)

All Mental Disorders

Men: 60.4% (65-74), 62.7% (75-84), 63.2% (85+) Women: 62.5% (65-74), 67.4% (75-84), 68.7% (85+)

Nebraska Dual Diagnosis Centers

Mental health among neighbors in CNCAP's rural Nebraska is not generally the first topic in a conversation. Generally it is not talked about at all amongst the neighbors. Farm and ranch people think it is just normal everyday stress and we'll get over it as soon as the next "season" comes around. It's just this darn wind, snow, heat, whatever, I'll get over it soon; I wish it would just end. Sometimes it does end but not in a healthy way. Suicide is something we will never be able to understand. Finding services in central Nebraska is very hard to do as there is a shortage of providers in our area. Four of CNCAP's counties do not have a primary doctor in the area. To find a mental health provider is even more scarce. Skilled case management is a big need in rural communities as many get started and then don't stay long enough to help overcome personal barriers. CNCAP helps find services for those that will acknowledge and commit to making the necessary changes to their lives with our case managers and or partner agencies when needed.

Adult Mental Health

Mental Health Resources in Nebraska

Nebraska has a population of approximately 1.9 million people. Close to 4.4% of adults in Nebraska (according to SAMHSA) live with serious mental health conditions such as schizophrenia, bipolar disorder, and major depression.

Public mental health and substance use services in Nebraska are administered and provided by the Nebraska Department of Health and Human Services—Division of Behavioral Health Services.

Only 47% of adults with mental illness in Nebraska receive any form of treatment from either the public system or private providers (according to SAMHSA). The remaining 53% receive no mental health treatment. According to Mental Health America, Nebraska is ranked 27 out of the 50 states and Washington D.C. for providing access to mental health services.

https://www.rtor.org/directory/mental-health-nebraska/

Rural health care is lacking in Nebraska.

While there are more doctors in Nebraska than there were 10 years ago 13 counties still don't have a primary care physician. According to a report by the University of Nebraska Medical Center 1/5 of physicians in Nebraska are more than 60 and likely to retire in the near future:

The Status of the Healthcare Workforce in the State of Nebraska

February 2018 Fernando A. Wilson, PhD Nizar K. Wehbi, MD, MPH, MBA Jamie Larson, MBA Kavita Mosalpuria, MBBS, MHA Ethan Chen Marlene Deras, BS University of Nebraska Medical Center Center for Health Policy, College of Public Health In Collaboration with The Nebraska Area Health Education Center Program (AHEC)

Location (primary and satellite) data for providers were utilized to determine the number of providers per 100,000 population for each county in Nebraska. The distributions for primary care and other physician types are presented in Figures 1 to 7. There are 13 out of 93 counties that do not have any active primary care physicians (family medicine, general practice, internal medicine, OB/GYN, pediatrics) (Figure 1). All counties except Douglas and Lancaster have been designated by the State of Nebraska to be shortage areas for at least one type of primary care specialty (refer to Appendices B, C, and D). For example, 58 out of 93 counties are designated shortage areas for family physicians. Outside of Scotts Bluff and Dawes counties, much of western Nebraska either has no primary care physicians or has relatively low numbers of physicians relative to population size. Low numbers of primary care physicians are also concentrated in northeast Nebraska and various counties in southern Nebraska.

Figure 1. Number of active primary care physicians per 100,000 population by county, Nebraska

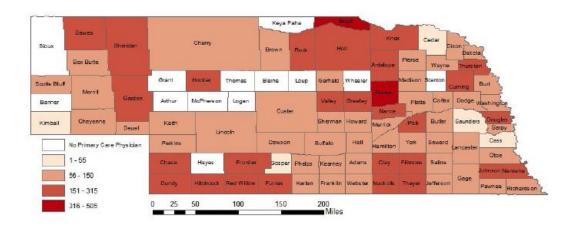
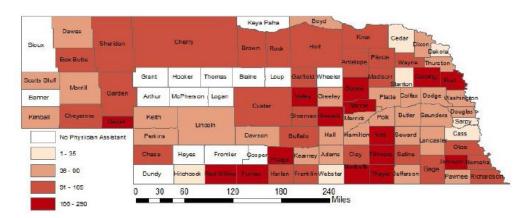


Figure 8. Number of active physician assistants per 100,000 population by county, Nebraska



https://www.unmc.edu/publichealth/hpts/news/The-Status-of-the-Healthcare-Workforce-in-the-State-of-Nebraska-February-2018.pdf

Figure 3

State-Designated Shortage Areas Psychiatry & Mental Health



Source: Runal Health Advisory Commission DHHS - Nebrasica Office of Runal Health Statiswide Review: 2013 Last Unitable: July 2013 Cartography: Clark Sinten | Community & Regional Planning Intern | DHHS For: Martens Janasen | Esec. Director. Rural Health Advisory Commission martens janusen@mibraska.gov | 402-471-2557

Nebraska's 2015 MCH/CYSHCN Needs Assessment CYSHCN Sub-Committee – Mental Health among Nebraska's CYSHCN Issue Brief Page 4

http://dhhs.ne.gov/Title V Documents/20_Mental Health_CYSHCN_MCH_Assessment.pdf

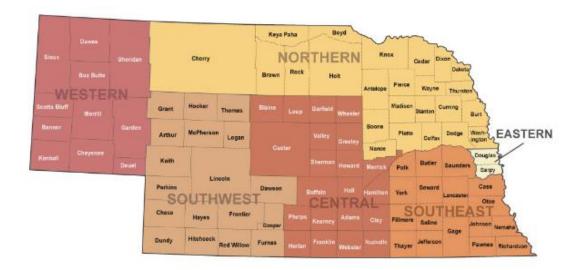
Family caregiving

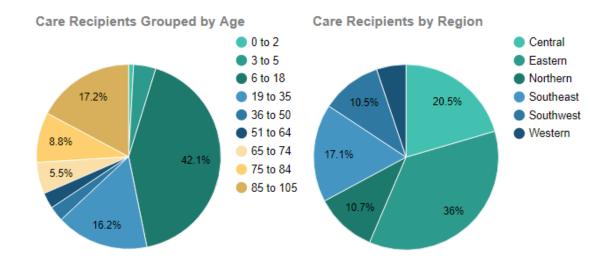
A family care-giver can be a friend, family member, or legal guardian residing with and providing ongoing care for an individual unable to care for him or herself. Family caregivers must be available 24-7 to assume responsibility for the care and supervision of their loved one.

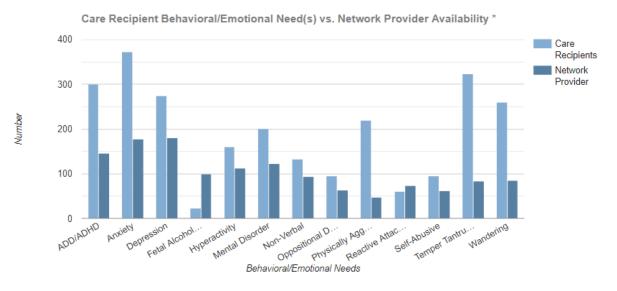
Taking care of yourself is one of the best ways to help your loved one. Family caregivers are often referred to as the backbone of America's long-term care system.

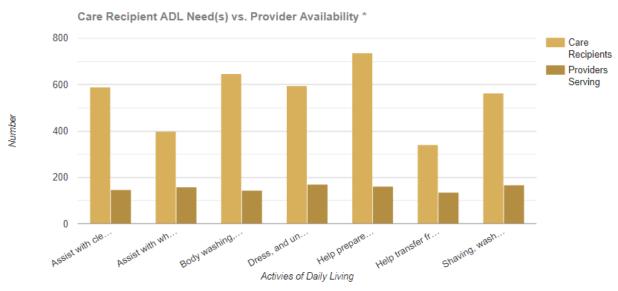
With limited ADL (Activities of Daily Living) trained providers in rural areas family caregivers seldom take time for themselves. Portions of the Central and Northern regions are located in CNCAP's service area.

20.5 % Central care recipients with 19.7% available care providers and 10.7% Northern care recipients with 12.3% available care providers.

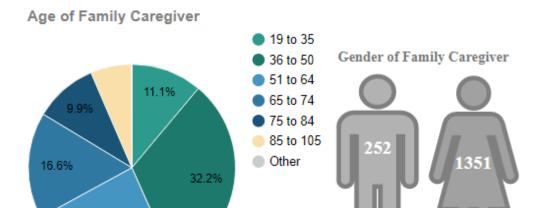






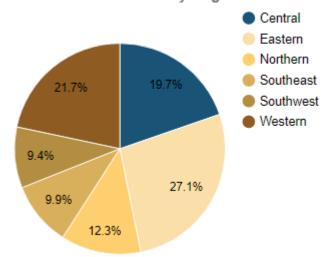


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Number of Providers by Region

23.7%



https://nrrs.ne.gov/respite/data2/elr_index.php



Mental health is something you can't see just by looking at me! No one knows the thoughts that run thru my head during the day or during the night. The reasons I can't leave my house or why I can't stop eating are unknown to those around me and sometimes not even I know why. Get over it they tell me, but it's not that easy. Mental health has no age limit. It cares not what gender or race I am. It can affect anyone at any given moment. One day I'm fine the next is total chaos. It's scary and makes me feel very alone.



https://www.livestories.com/statistics/nebraska/mental-health-overview

Mental health is an important part of Nebraska residents' overall health and well-being. Mental illnesses are conditions that affect a person's thoughts, feelings, moods, or behaviors. They include anxiety, bipolar disorder, depression, and schizophrenia. A mental illness may be chronic—meaning it lasts a long time—and can deeply affect Nebraska residents' day-to-day life.



https://www.nami.org/NAMI/media/NAMI-Media/Infographics/NAMI-Impact-Ripple-Effect-FINAL.pdf

Suicide Facts & Figures: Nebraska 2019*





On average, one person dies by suicide every 32 hours in the state.

Four times as many people died by suicide in Nebraska in 2017 than in alcohol related motor vehicle accidents.

The total deaths to suicide reflect a total of 6,317 years of potential life lost (YPLL) before age 65.



Suicide cost Nebraska a total of \$223,376,000 combined lifetime medical and work loss cost in 2010, or an average of \$1,157,386 per suicide death.

*Based on most recent 2017 data from CDC. Learn more at afsp.org/statistics. leading cause of death in Nebraska

2nd leading cause of death for ages 15-34
3rd leading cause of death for ages 35-44

5th leading cause of death for ages 45-54

Sth leading cause of death for ages 65 & older

Suicide Death Rates

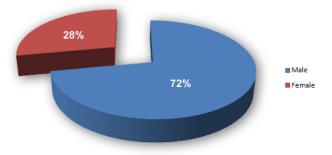
	Number of Deaths by Suicide	Rate per 100,000 Population	State Rank
Nebraska	275	14.70	34
Nationally	47,173	14.00	

https://www.afsp.org/statefacts

Substance Abuse

Nebraska Addiction Treatment Statistics

According to the Substance Abuse Treatment Episode Data Set, 15,729 people entered rehab for both alcohol and drug addiction treatment in 2010. 72 % of that number was males and 28% were females.



Total Admissions = 15,729

<u>Stimulants</u>, including methamphetamine, are the most commonly cited drugs among primary drug treatment admissions in Nebraska. Data from the Treatment Episode Data Set (TEDS)

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indicate one-third of primary drug treatment admissions in Nebraska were for stimulants, and another third were for marijuana.

Approximately 6% of Nebraska residents reported past-month use of illicit drugs; the national average was 8%.

Alcohol Addiction in Nebraska

The number of people entering treatment for both alcohol as the primary abused substance and alcohol combined with a secondary drug has been increasing since 2006. In 2010, 9,729 people entered treatment for alcohol abuse only treatment with an additional 2,580 people who suffered from alcohol abuse combined with a secondary drug.

Commonly Abused Drugs in Nebraska

Drug abuse is a national epidemic and the numbers are continuing to rise. Heroin is becoming the cheaper replacement for opiates as states continue to crack down on the "pill mills" making the cost of opiates too expensive.



Cocaine

315 people were admitted to treatment in 2010 for smoking cocaine. An additional 112 entered treatment for ingesting cocaine by other means.



Marijuana

Among the 1,070 people who entered drug addiction treatment in 2010, marijuana was the second most commonly cited drug among primary drug treatment admissions in the state. Of those admissions, 64.8% were male and 35.1% were female.



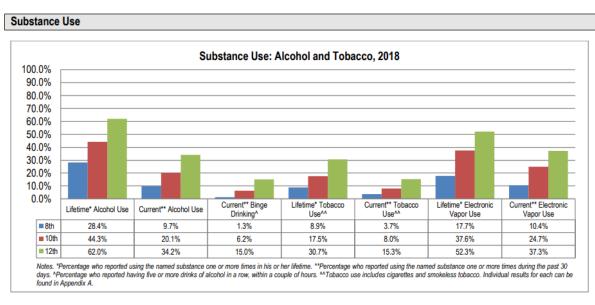
Amphetamines/Methamphetamines

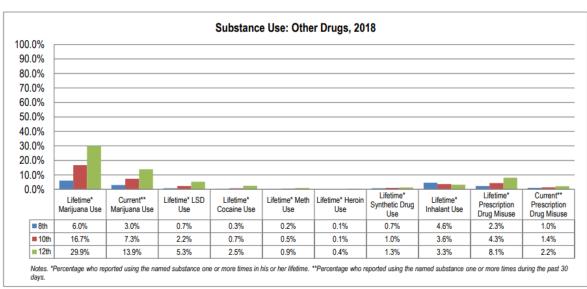
Methamphetamines are the most commonly cited drug among primary drug treatment admissions in Nebraska. In 2010, there were 1,191 people who were admitted to drug rehab for amphetamine dependence. 48.4% were male and 51.6% were female with 26-30 year olds ranking the largest age group to use these drugs.



Prescription Drugs

Nebraska Risk and Protective Factor Student Survey Results for 2018 Profile Report: State of Nebraska NRPFSS is part of the Student Health and Risk Prevention (SHARP) Surveillance System that administers surveys to youth enrolled in Nebraska schools.





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Preventing mental and/or substance use disorders and related problems in children, adolescents, and young adults are critical to promoting physical health and overall wellness. There are a variety of strategies (or interventions) that can be used to increase protective factors and reduce the impact of risk factors. Prevention in schools is often completed through educational programs and school policies and procedures that contribute to the achievement of broader health goals and prevent problem behavior.

http://dhhs.ne.gov/Behavioral%20Health%20Documents/Nebraska%20Risk

Disabilities

What is the definition of disability under the ADA?

It is important to remember that in the context of the ADA, "disability" is a legal term rather than a medical one. Because it has a legal definition, the ADA's definition of disability is different from how disability is defined under some other laws, such as for Social Security Disability related benefits.

The ADA defines a person with a disability as a person who has a physical or mental impairment that substantially limits one or more major life activity. This includes people who have a record of such impairment, even if they do not currently have a disability. It also includes individuals who do not have a disability but are regarded as having a disability. The ADA also makes it unlawful to discriminate against a person based on that person's association with a person with a disability.

https://adata.org/faq/what-definition-disability-under-ada

Of the 14,301 lives CNCAP touched

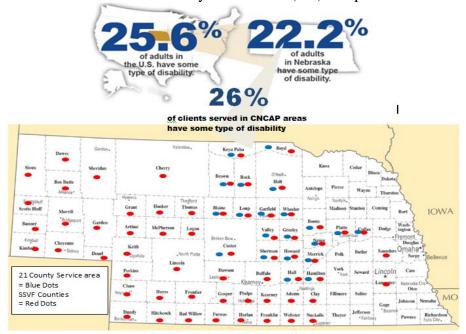
63.9% were at or below 100% Federal Poverty Lever 54% were male and 46% were female 26% are disabled adults 18% of children served by our Early Childhood Programs have some type of disability 14% are active or veteran military

Central Nebraska Community Action Partnership has two SOAR(SSI/SSDI Outreach, Access and Recovery) Advocates on staff that assist individuals in applying for disability benefits. It is difficult to navigate through the Social Security system so the advocates provide support throughout the process.

Medical information is a necessity to provide support for the client in applying and must be acquired from all medical providers.

A Snapshot of Disability in Nebraska*

This page provides an overview of disability in Nebraska (NE) compared to national estimates.



Adults with disabilities are more likely to:

Be inactive

	U.S.	Nebraska
Adults with disabilities	42.2%	39.2%
Adults without disabilities	24.3%	23.6%

Have high blood pressure

	U.S.	Nebraska
Adults with disabilities	41.9%	36.9%
Adults without disabilities	25.9%	26.0%

Smoke

	U.S.	Nebraska
Adults with disabilities	27.8%	28.2%
Adults without disabilities	13.4%	13.1%

Be obese

	U.S.	Nebraska
Adults with disabilities	39.5%	39.5%
Adults without disabilities	26.3%	30.3%

Percentage of adults with select functional disability types: *

Types of disabilities comparing U.S. with Nebraska

	U.S.	Nebraska
Mobility: Serious difficulty walking or climbing stairs.	12.9%	10.3%
Cognition: Serious difficulty concentrating, remembering, or making decisions.	11.4%	8.9%
Independent living: Difficulty doing errands alone, such as visiting a doctor's office or shopping.	7.0%	5.3%
Hearing: Deafness or serious difficulty hearing.	5.6%	6.0%
Vision: Blind or serious difficulty seeing, even when wearing glasses.	4.7%	3.4%
Self-care: Difficulty dressing or bathing.	3.8%	2.7%

Data Source: 2017 Behavioral Risk Factor Surveillance System (BRFSS)

Rural health education, care, and research will be better defined and more distributive and streamlined at UNMC.

- UNMC will become the national leader in rural health research and health care delivery.
- UNMC will become "embedded" in the support of rural health care education, training and patient access as needed.
- UNMC's brand will be recognized in rural Nebraska as a trusted source of health information, education, and patient care.
- UNMC will be nimble, creative and active change-agents to assist our rural stakeholders in addressing the "new order" of health care delivery that is emerging.

^{**} Disability-associated healthcare expenditures are presented in 2006 dollars as reported in Anderson et al, 2010. This value represents approximately 25% of total healthcare expenditures for the state of Nebraska. https://www.cdc.gov/ncbddd/disabilityandhealth/impacts/nebraska.html UNMC – 2030.

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- UNMC will be positioned to address rural educational and health delivery issues through its approach of affiliating and cooperating with local providers and public health departments to meet their needs.
- UNMC will expand and strengthen current rural health programs to address new and continuing opportunities or challenges in health care delivery, population health, and education.
- UNMC will leverage new technologies to support rural site-based education programs across the educational continuum from pipeline programs, to student and rural resident training, to life-long learning for rural practitioners.
- One "umbrella unit" at UNMC that supports required rural needs and requests in education, community services, and clinical programs will be clearly defined and named. Through creativity, hard work and strategic collaboration, UNMC and rural Nebraskans can shape a new vision for a healthy future. Some long-held assumptions must be jettisoned. New realities must be confronted through bold, innovative actions in rural health education, research and care delivery. Collectively, we not only may have "to do more with less," but almost certainly, we will have "to do different with less." Our rural partners can guide and advise, assist and teach us how to transform rural health education, outreach, and care. Disruptive change will continue to impact rural health and lead to an opportunity to create a new vision for health in rural communities. Stasis is not an option. Disruptive change is the "new normal." Let us address it head on together.

https://www.unmc.edu/_documents/ruralhealth2030.pdf

UNMC is a five (5) hour drive from Valentine, 3 hours from O'Neill and 2 hours from Grand Island. Not just a day trip for most of our CNCAP area. Health Insurance does not include an overnight stay, breakfast, lunch and dinner, fuel for the vehicle and daycare for children if needed. Filling out the request for financial help can be daunting as most do not consider that even if I own 300 acres it may not be worth the same as an acre in Douglas County. Figuring a years corn yield in monthly income figures is not an easy task. I may have too much income today but it can be wiped out in a single storm.

Health Insurance

Consider the following statistics about health care coverage in Nebraska:



1,876,100

Total Nebraska Residents



/%

Total Uninsured Nebraska Residents



256,282

Total Nebraska HMO enrollment



\$1 010

Avg annual employee premium in Nebraska employer-sponsored plan (after employer contribution)



\$1 758

Avg Nebraska hospital cost per inpatient day (before insurance)

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www.ehealthinsurance.com > nebraska-health-insurance

Health insurance isn't cheap.

In fact, premiums have risen slightly every year for the past six years, according to a 2017 Employer Health Benefits Survey by Kaiser Family Foundation/Health Research & Educational Trust. If you're in good health and don't have anyone depending on you like a spouse or children, you may be tempted to forgo the cost of buying health insurance.

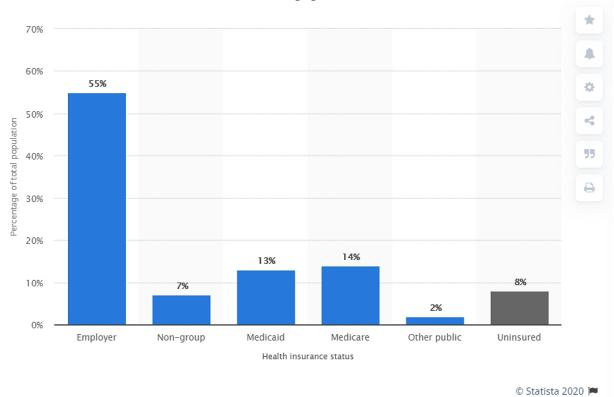
But not having health insurance can cost you far more in the long run than the cost of paying premiums. Without health insurance, you likely would be responsible for paying all costs if you get sick or injured. The more you know about health insurance and what it can — or can't — do for you, the easier it is to realize that it might be worth the cost.

"The Affordable Care Act comes with a mandate for most individuals to have minimum essential coverage," says Howard Yeh, founder and CEO of HealthCare.com. "Unless an exemption applies, individuals will have a tax penalty if they don't get health insurance."

That penalty can be calculated based on a percentage of your household income or per person in your household.

https://www.creditkarma.com/tax/i/why-get-health-insurance/

Health insurance status distribution of the total population of Nebraska in 2018



Published by Matej Mikulic, Dec 11, 2019

This statistic depicts the health insurance status distribution of the total population in Nebraska in 2018. During that year, eight percent of the total population of Nebraska was uninsured. The largest part of Nebraska's population was insured through employers.

https://www.statista.com/statistics/238782/health-insurance-status-of-the-total-population-of-nebraska/#statisticContainer

Health Insurance Marketplace helps record numbers of Nebraskans sign up for coverage in 2019 by Eric Savaiano on February 7, 2020 in Enroll NE • 0 Comments



By Blake Ellis, Economic Justice Intern at Nebraska Appleseed

For many Nebraskans, the number 90,000 has quite a resonance. That is the sell-out capacity for supporters packing into Memorial Stadium on chilly Saturdays in the fall ready to cheer on Cornhusker football. But over 90,000 Nebraskans have more than just football to celebrate in 2020. 90,845 Nebraskans have signed up for coverage through the Health Insurance Marketplace during open enrollment for the 2020 benefit year. This is 3,000 more than have ever gotten covered through the Marketplace in Nebraska.

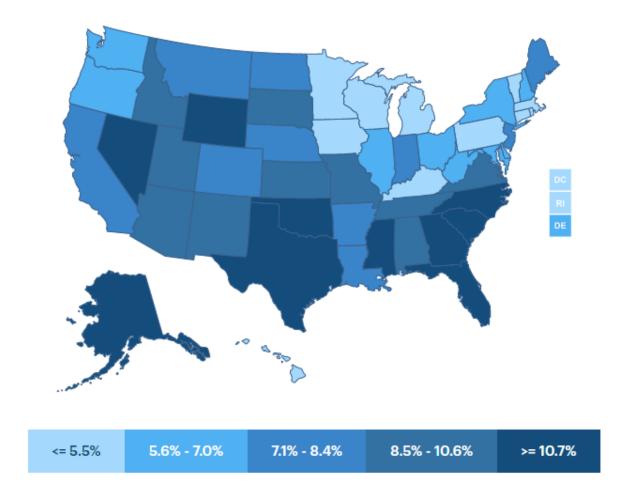
After experiencing a jump in the number of sign-ups from 2014 (43,000) to 2015 (74,000), the number of Nebraskans covered through the Marketplace plateaued at around 88,000 for several years despite Nebraska having lower premium rates than a majority of participating states. For 2019, Medica was the only insurer within Nebraska Marketplace. However, for 2020, Bright Health entered the market and became Nebraska's newest insurer offering plans across the state. Premium prices fell 7% this year compared to 2019 as well.

This year's increase along with the recent approval of Medicaid expansion expected to begin later in 2020 will hopefully lead to a continual trend of fewer Nebraskans going without coverage in our state.

https://enroll-ne.org/blog/3208



Percentage of population that does not have health insurance privately, through an employer or through the government (2-year estimate)



Source:

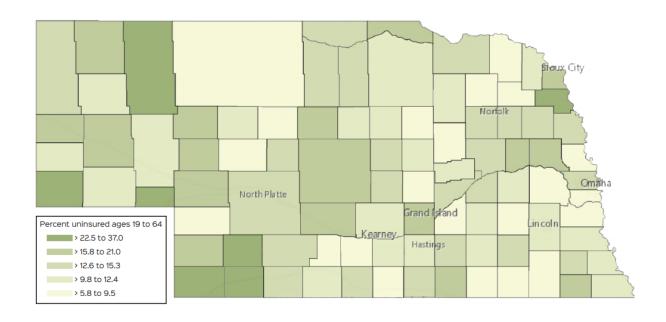
U.S. Census Bureau, Health Insurance Coverage in the United States

https://www.americashealthrankings.org/explore/annual/measure/HealthInsurance/state/NE

NEBRASKA'S UNINSURED AND THE COVERAGE GAP BY COUNTY

The U.S. Census Bureau's 2017 American Community Survey estimates about 141,000 Nebraskans are without health insurance, and about 97,000 of them are employed. This map includes American Community Survey's fiveyear estimate of the number of Nebraskans falling into the coverage gap, as well as estimated percentages of working age population without health coverage and those who are employed without coverage.

Even with the passage of Medicaid expansion in November 2017, these Nebraskans who fall into the coverage gap continue to have no way to get health insurance. They don't qualify for Medicaid—they either earn more than Medicaid's very low income threshold (about \$17,000 per year) or they don't fit into other Medicaid-eligible categories (children, elderly, people with disabilities). These Nebraskans also do not make enough income to qualify for subsidies that would help them buy coverage from the Health Insurance Marketplace. Enrollment in expanded Medicaid coverage is anticipated to begin in August 2020.



		Estimated	% of
County	% of	number in	employed
County	residents	coverage	who are
	uninsured,	gap, 19 to	uninsured,
	19 to 64	64	19 to 64
Blaine	19.6	12	18.1
Boone	8.7	12	18.1
Boyd	16.8	82	16.7
Brown	15	246	13.4
Colfax	16.9	569	11.8
Custer	16.3	490	15.2
Garfield	10.4	44	8.8
Greeley	12.1	76	10.6
Hall	19.7	3,219	17.3
Hamilton	6.9	134	5.1
Holt	11.8	364	10.3
Howard	8.4	153	7

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Keya Paha	13.7	15	13
Loup	10.9	10	11.5
Merrick	13.5	165	12.9
Nance	11	88	8.7
Platte	12.6	1,086	10.4
Rock	14.4	97	13.6
Sherman	121.8	77	12.3
Valley	13.3	109	11.1
Wheeler	9	11	10
Nebraska	12.8	141,326	10.8

https://www.cfra.org/sites/default/files/publications/2019%20NE%20Uninsured%20Coverage%20Gap%20BY%20COUNTY%20%281%29.pdf

Medicare

Types of Insurance: Coverage Alone

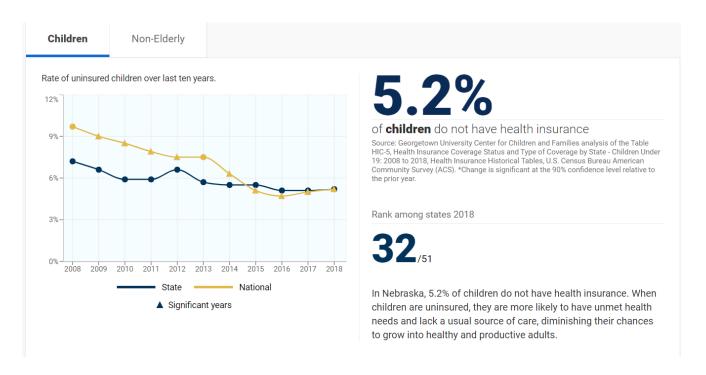
U.S. HEALTH INSURANCE MARKET DISTRIBUTION 2013 to 2017

	2013	2014	2015	2016	2017
Direct-purchase (individual)	11.4%	14.6%	16.3%	16.2%	16.1%
Employment-based	55.7%	55.4%	55.7%	55.7%	56.0%
Medicaid/CHIP	17.5%	19.5%	19.6%	19.4%	19.3%
Medicare	15.6%	16.0%	16.3%	16.7%	17.3%
Military health care	4.5%	4.5%	4.7%	4.6%	4.8%
Uninsured	13.3%	10.4%	9.1%	8.8%	8.3%

2013 to 2014: Individual increased 3.2%, uninsured decreased 2.9% 2014 to 2015: Individual increased 1.7%, uninsured decreased 1.3% 2015 to 2016: Individual decreased 0.1%, uninsured decreased 0.3% 2016 to 2017: Individual decreased 0.1%, uninsured decreased 0.5%



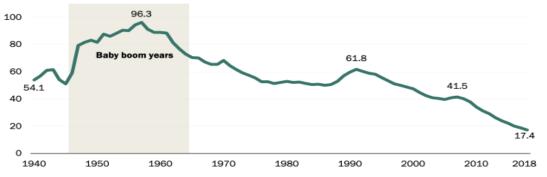
https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/ACA%20PPT%202019%20%2011-13-18.pdf



kidshealthcarereport.ccf.georgetown.edu.

U.S. teen birth rate has fallen dramatically over time

Births per 1,000 females ages 15-19



Note: Data labels shown are for 1940, 1957, 1991, 2008 and 2018. Teens younger than 15 not included. Data only accounts for live births and does not include miscarriages, stillbirths or abortions.

Source: National Center for Health Statistics published data.

PEW RESEARCH CENTER

Teen birth rates

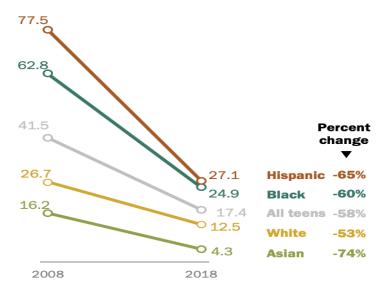
The teen birth rate in the United States is at a record low, dropping below 18 births per 1,000 girls and women ages 15 to 19 for the first time since the government began regularly collecting data on this group, according to a Pew Research Center analysis of newly released data from the National Center for Health Statistics.

In 2018, the birth rate among 15- to 19-year-old girls and women was less than half of what it had been in 2008 (41.5 births per 1,000). Asians and Pacific Islanders led the way over this time, followed by Hispanics, with teen birth rate declines of 74% and 65%, respectively. Rates for white and black teens fell by more than 50% over the past decade as well.

Despite rapid declines in teen birth rates across all major racial and ethnic groups, disparities persist. In 2018, the birth rate for Hispanic and black teens ages 15 to 19 was almost double the rate among white teens and more than five times as high as the rate among Asians and Pacific Islanders.

Across race and ethnicity, teen birth rates are less than half of what they were a decade ago

Births per 1,000 females ages 15-19



Note: Teens younger than 15 not included. Data only accounts for live births and does not include miscarriages, stillbirths or abortions. Hispanics are of any race. Racial categories are based on single race classifications. Blacks and whites include only non-Hispanics. Asians include Pacific Islanders. Following the conventions used in the 2008 NCHS births report, Asians include Hispanics. Percentage changes are based on unrounded numbers. Source: 2008 data from National Center for Health Statistics published data; 2018 data from Pew Research Center analysis of National Center for Health Statistics data and U.S. Census Bureau 2018 population estimates.

PEW RESEARCH CENTER

https://www.pewresearch.org/



Childcare

Daycare License Requirements for Nebraska Worker requirements

Must be "legal age of majority" and have a written, department-approved plan to acquire at least 3 credit hours or 15 clock hours of Department-approved in-service training in child development/early childhood education or child care administration within 12 months of hiring; **or** a CDA; **or** a bachelor's or associate's degree in a field related to care and education of children ages 0-12 years (e.g., early childhood education, child development, elementary education, or special education); **or** one year verified group experience with a positive reference from a supervisor.

Provider / Child Ratio

Age Range	Ratio For Center-based Care
Infants	(1:4)
Toddlers	(1:6)
Preschool(3 years)	(1:10)
Preschool(4 – 5 years)	(1:12)
School age	(1:15)
Mixed age group	center wide ratio count

Age Range	Ratio For Family Child Care							
Infants	(1:4)							
All ages	(1:8) [includes provider's own children under 8 years old; no more than 2 children may be under 18 months old; additionally, there may be 2 school age children during non-school hours]							
Mixed age group	(1:8) [no more than 2 infants at one time]							
School age	(1:10)							

https://www.daycarehotline.com/state-daycare-license-requirements-50-states/

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Childcare Facilities in CNCAP Counties

In Nebraska, anyone who provides child care to four or more children from different families must be licensed as a child care provider. There are five license types: Family Child Care Home I, Family Child Care Home II, Child Care Center, Preschool, and School-Age-Only Center.

Family Child Care Home I

Program in the home of the provider; maximum capacity is eight children of mixed ages and two additional school age children during non-school hours.

Family Child Care Home II

Program in the home of the provider or another site; maximum capacity is twelve with two providers.

Child Care Center

Program licensed for at least 13 children.

School-Age-Only Center

Program licensed for at least 13 children who are attending or have attended school.

Preschool

Program providing educational services where children do not nap and are not fed a meal.

Early Childhood Capacity Count by County

Boone Family Child Care Home I 7 70 Family Child Care Home II 8 96 Brown Family Child Care Home I 4 40 Family Child Care Home II 7 80 Preschool 1 12 Colfax Child Care Center 2 1 15 Family Child Care Home II 11 110 Family Child Care Home II 2 24 Provisional Child Care Center 1 36 Provisional Family Child Care Home I 1 10 Provisional Family Child Care Home II 1 12 Custer Child Care Center 3 106	
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Custer Child Care Center 3 106	
Family Child Care Home I 3 30	
Family Child Care Home II 11 132	
Preschool 3 48	
Provisional Family Child Care Home I 1 10	
Provisional Family Child Care Home II 1 12	
Provisional School-Age-Only Center 1 90	
Garfield Family Child Care Home II 2 24	
Preschool 2 24	
Greeley Family Child Care Home I 1 10	
Family Child Care Home II 4 48	
Provisional Family Child Care Home II 1 12	
Hall Child Care Center 14 1664	
Family Child Care Home I 58 577	
Family Child Care Home II 5 60	

	Preschool	3	138
	Provisional Child Care Center	1	155
	Provisional Family Child Care Home I	9	88
Hamilton	Child Care Center	2	122
	Family Child Care Home I	6	60
	Preschool	1	12
	Provisional Preschool	1	25
Holt	Child Care Center	1	50
	Family Child Care Home I	17	170
	Family Child Care Home II	9	106
	Preschool	2	24
	Provisional Family Child Care Home I	1	10
	Provisional Family Child Care Home II	1	12
	School Age Only Child Care Center	1	100
Howard	Child Care Center	1	65
	Family Child Care Home I	5	48
	Preschool	2	36
Merrick	Child Care Center	2	113
	Family Child Care Home I	3	30
	Family Child Care Home II	4	48
	Preschool	1	24
	Provisional Family Child Care Home II	1	12
	Provisional School-Age-Only Center	1	45
Nance	Family Child Care Home I	8	80
	Family Child Care Home II	2	24
	Preschool	1	12
Platte	Child Care Center	15	1084
	Family Child Care Home I	29	286
	Family Child Care Home II	14	166
	Preschool	4	80
	Provisional Child Care Center	1	29
	Provisional Family Child Care Home I	2	20
	Provisional Family Child Care Home II	3	36
	School-Age-Only Child Care Center	3	94
Rock	Family Child Care Home I	3	30
	Preschool	1	12
Sherman	Family Child Care Home I	2	20
	Family Child Care Home II	2	24
Valley	Child Care Center	1	40
•	Family Child Care Home I	3	28
	Family Child Care Home II	6	72
	Provisional Family Child Care Home I	1	10
	Provisional Family Child Care Home II	1	12
	· · · · · · · · · · · · · · · · · · ·	 13	7016

http://dhhs.ne.gov/licensure/Documents/Countycount.pdf

PROVIDER	ACCREDITED	NOT ACCREDITED
Home I & II	192 (12.77%)	798 (53.09%)
Center-based	97 (6.45%)	317 (21.09%)
School Age	20 (1.33%)	79 (5.26%)

TABLE 2. | NUMBER (%) OF ACCREDITED PROVIDERS SERVING EACH AGE GROUP BY PROVIDER TYPE AND GEOGRAPHIC LOCATION

	INF.	ANT	TODE	DLER	PRESCHO	OOL AGE	SCHOOL AGE		
PROVIDER	URBAN	RURAL	URBAN	RURAL	URBAN	RURAL	URBAN	RURAL	
Home I & II	66 (28.09%)	117 (49.49%)	66 (26.51%)	120 (48.19%)	65 (23.55%)	120 (43.48%)	50 (22.03%)	102 (44.93%)	
Center-based	35 (14.89%)	17 (7.23%)	42 (16.87%)	21 (8.43%)	49 (17.75%)	42 (15.22%)	33 (14.54%)	22 (9.69%)	
School Age	0	0	0	0	0	0	16 (7.05%)	4 (1.76%)	
Total	101	134	108	141	114	162	99	128	

Note. Percentage is calculated by dividing the number of providers within each cell by the total number of each child type (N_{infant} = 235; $N_{toddler}$ = 249; $N_{preschool}$ = 276; $N_{school-age}$ = 227).

TABLE 3. NUMBER (%) OF NON-ACCREDITED PROVIDERS SERVING EACH AGE GROUP BY PROVIDER TYPE AND GEOGRAPHIC LOCATION

	INFANT		TODDLER		PRESCHO	OOL AGE	SCHOOL AGE		
PROVIDER	URBAN	RURAL	URBAN	RURAL	URBAN	RURAL	URBAN	RURAL	
Home I & II	278 (29.20%)	476 (50.00%)	294 (29.52%)	486 (48.80%)	289 (26.69%)	480 (44.32%)	215 (24.05%)	410 (45.86%)	
Center-based	100 (10.50%)	98 (10.29%)	109 (10.94%)	107 (10.74%)	150 (13.85%)	160 (14.77%)	89 (9.96%)	103 (11.52%)	
School Age	0	0	0	0	2 (0.18%)	2 (0.18%)	56 (6.26%)	21 (2.35%)	
Total	378	574	403	593	441	642	360	534	

Note. Percentage is calculated by dividing the number of providers within each cell by the total number of each child type ($N_{infant} = 952$; $N_{toddler} = 996$; $N_{preschool} = 1,083$; $N_{school-age} = 894$).

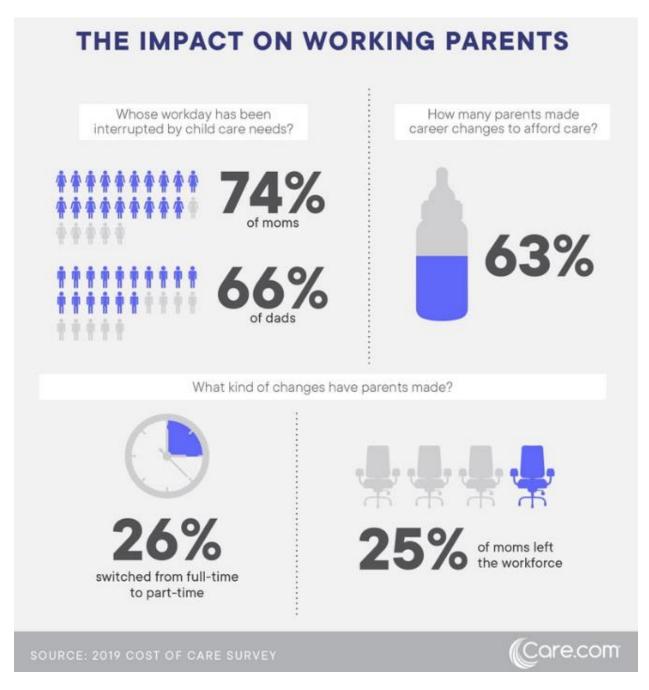
Childcare costs

TABLE 5. | HOW MUCH DO CHILD CARE PROVIDERS CHARGE IN RURAL COUNTIES?

		INF	ANT		TODDLER				PRESCHOOL				SCHOOL AGE			
		ME k II		TER- SED		ME k II		TER- Sed		ME & II		TER- Sed		ME & II		TER- Sed
PR*	HOUR	DAY	HOUR	DAY	HOUR	DAY	HOUR	DAY	HOUR	DAY	HOUR	DAY	HOUR	DAY	HOUR	DAY
50	2.85	25.00	4.35	32.00	2.75	25.00	4.00	30.00	2.75	25.00	4.00	29.00	2.75	24.00	4.00	28.00
55	3.00	25.00	4.50	32.20	2.85	25.00	4.11	30.00	2.85	25.00	4.00	30.00	3.00	25.00	4.00	29.90
60	3.00	25.00	4.73	33.00	3.00	25.00	4.25	31.00	3.00	25.00	4.00	30.00	3.00	25.00	4.00	30.00
65	3.00	25.00	5.00	33.52	3.00	25.00	4.50	31.00	3.00	25.00	4.00	30.00	3.00	25.00	4.10	30.00
70	3.00	27.00	5.00	35.20	3.00	25.00	4.50	31.10	3.00	25.00	4.32	30.00	3.00	25.00	4.46	30.00
75	3.00	28.00	5.00	36.00	3.00	25.00	5.00	33.50	3.00	25.00	4.88	31.20	3.00	25.00	5.00	30.50
80	3.00	30.00	5.20	36.80	3.00	27.00	5.50	35.00	3.00	26.60	5.40	35.00	3.00	25.00	5.40	33.00
85	3.48	30.00	5.95	40.00	3.25	29.64	6.00	36.00	3.25	28.00	6.00	35.21	3.49	28.00	6.00	34.00
90	3.56	30.00	6.42	40.00	3.50	30.00	6.45	36.00	3.50	30.00	6.49	36.00	3.60	30.00	6.45	35.42
95	4.15	35.00	8.00	40.00	3.86	30.00	8.00	38.85	4.00	30.00	8.00	37.60	4.91	30.00	8.00	36.00
100	7.00	50.00	9.00	43.00	7.00	40.00	9.00	45.00	7.00	45.00	9.00	40.00	5.00	40.00	9.00	40.00

+Urban counties included Douglas, Lancaster, Sarpy, and Dakota (all other counties were considered rural).

 $http://dhhs.ne.gov/Child\%\,20Care\%\,20Market\%\,20Rate\%\,20Surveys/2019\%\,20Market\%\,20Rate\%\,20Survey\%\,20Report\,.pdf$



https://www.care.com/c/stories/2423/how-much-does-child-care-cost/

Human Trafficking

Human trafficking by the numbers

Trafficking in Nebraska

47 Nebraska school girls are known to be trafficked each year, but the true number is likely higher. –*Governor Task Force on Human Trafficking*

40 Million People Trafficked Worldwide

5 million people are currently victims of forced commercial sexual exploitation. –*Alliance* 8.7

20 million people in the world are kept in forced labor. *–Alliance* 8.7

15 million people are living in a forced marriage. –*Alliance* 8.7

25% of human trafficking victims are children. -Free the Slaves

71% of human trafficking victims are female. –Free the Slaves

\$150 billion is the estimated annual profits made from the exploitation of trafficked persons. – *Coalition to Abolish Slavery & Trafficking*

\$90 is the average price of a slave today. By comparison, the average price of a slave in the American South in 1850 is \$40,000 in today's money. *–Free the Slaves*

Convictions

499 convictions were secured against traffickers in the United States by the Department of Justice in FY 2017. –*Trafficking In Persons Report 2018*

7,045 convictions were secured worldwide in 2017. – Trafficking in Persons Report 2018

https://nebraskafamilyalliance.org/policy/human-trafficking/

Trafficking Awareness Month by Grasz | Jan 6, 2020 | Human Trafficking

Today, Nebraska Family Alliance (NFA) joined Governor Pete Ricketts, Attorney General Doug Peterson, state senators, and other anti-trafficking groups at the state capitol for a signing ceremony declaring January as Human Trafficking Awareness Month.

In a statement, NFA Policy Director Nate Grasz said:

"Human trafficking is modern day slavery in which people profit from exploiting others through force, fraud, coercion, or deception. And it happens everywhere, even in Nebraska.

While Nebraska is not isolated from the scourge of human trafficking, we are grateful for the broad coalition of legislators, service providers, advocacy groups, churches, and diligent citizens who make our state a leader in combating human trafficking.

Nebraska Family Alliance commends Governor Pete Ricketts, Attorney General Doug Peterson, Nebraska's federal representatives, and our state senators for their dedication to fighting trafficking and ensuring justice for survivors."

Each January is recognized as Human Trafficking Awareness Month and creates an essential opportunity for Nebraskans to learn about this issue in our state.

Central Nebraska Community Action Partnership, Inc.

A 2015 report from the Governor's Task Force on Human Trafficking found that at least 47 Nebraska school girls are known to be trafficked each year, and a 2017 Human Trafficking Initiative study from Creighton University found that 900 individuals are advertised for sex online each month in Nebraska.

Thankfully, in recent years Nebraska has enacted substantial anti-trafficking laws to deter and prosecute traffickers, increase criminal penalties related to trafficking, target trafficking rings, and expand access to services for survivors.

Nebraska Family Alliance supports efforts to prevent trafficking, increase awareness, provide rescue and restoration to victims, and punish those who attempt to sell and purchase human beings as commodities.

https://nebraska family alliance.org/nfa-joins-governor-ricketts-and-attorney-general-peterson-in-recognizing-human-trafficking-awareness-month/

Recognizing Signs

Common Work and Living Conditions: The Individual(s) in Question

Is not free to leave or come and go as he/she wishes

Is under 18 and is providing commercial sex acts

Is in the commercial sex industry and has a pimp / manager

Is unpaid, paid very little, or paid only through tips

Works excessively long and/or unusual hours

Is not allowed breaks or suffers under unusual restrictions at work

Owes a large debt and is unable to pay it off

Was recruited through false promises concerning the nature and conditions of his/her work High security measures exist in the work and/or living locations (e.g. opaque windows, boarded up windows, bars on windows, barbed wire, security cameras, etc.)

Poor Mental Health or Abnormal Behavior

Is fearful, anxious, depressed, submissive, tense, or nervous/paranoid

Exhibits unusually fearful or anxious behavior after bringing up law enforcement

Avoids eye contact

Poor Physical Health

Lacks health care

Appears malnourished

Shows signs of physical and/or sexual abuse, physical restraint, confinement, or torture

Lack of Control

Has few or no personal possessions

Is not in control of his/her own money, no financial records, or bank account

Is not in control of his/her own identification documents (ID or passport)

Is not allowed or able to speak for themselves (a third party may insist on being present and/or translating)

Other

Claims of just visiting and inability to clarify where he/she is staying/address Lack of knowledge of whereabouts and/or do not know what city he/she is in Loss of sense of time

Has numerous inconsistencies in his/her story

This list is not exhaustive and represents only a selection of possible indicators. Also, the red flags in this list may not be present in all trafficking cases and are not cumulative. www.traffickingresourcecenter.org

Inventory Count Date: 1/22/2019 Population: Sheltered and Unsheltered Count Unaccompanied Youth Households (CNCAP PIT Counts)

		Sheltered		Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of unaccompanied youth households	16	24	0	0	40
Total number of unaccompanied youth	17	24	0	0	41
Number of unaccompanied children (under age 18)	1	0	0	0	1
Number of unaccompanied young adults (age 18 to 24)	16	24	0	0	40

Disconnected/Homeless Youth



https://talkpoverty.org/state-year-report/nebraska-2019-report/

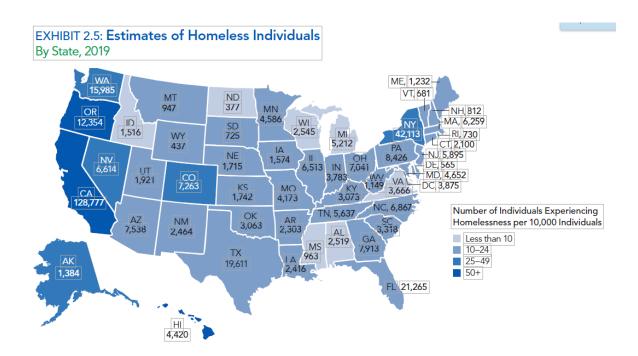
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Unaccompanied Homeless Youth (under 18) are people in households with only children who are not part of a family with children or accompanied by their parent or guardian during their episode of homelessness, and who are under the age of 18.

Unaccompanied Homeless Youth (18-24) are people in households without children who are not part of a family with children or accompanied by their parent or guardian during their episode of homelessness, and who are between the ages of 18 and 24.

Unsheltered Homelessness refers to people whose primary nighttime location is a public or private place not designated for, or ordinarily used as, a regular sleeping accommodation for people (for example, the streets, vehicles, or parks).

The 2019 Annual Homeless Assessment Report (AHAR) to Congress





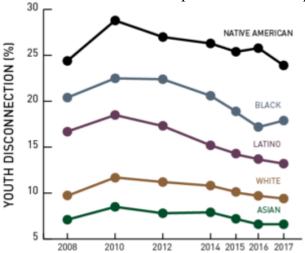
https://files.hudexchange.info/resources/documents/2019-AHAR-Part-1.pdf

Since its peak in the aftermath of the Great Recession, the number of teens and young adults disconnected from both work and school in the United States fell for the seventh year in a row. The 2017 disconnection rate is 11.5 percent, a significant drop from the post-recession high of 14.7 percent in 2010. But a look into the latest data also shows some causes for concern. First, the decrease in the national disconnection rate between 2016 (11.7 percent) and 2017 (11.5 percent) was negligible. Second, for some groups, progress has halted or even reversed. The youth disconnection rate for black teens and young adults increased between 2016 and 2017. And despite years of decline in the country's overall disconnection rate, disparities between racial and ethnic groups persist. These findings indicate we cannot rely on economic growth alone to solve the problem of youth disconnection in America—societal factors such as poverty, discrimination, and residential segregation also play significant roles. Making the Connection: Transportation and Youth Disconnection presents the latest available data on youth disconnection for the United States as a whole as well as disconnection rates by gender, race and ethnicity, region, state, and metro area. Determining who remains disconnected, and why, is vital to identifying interventions that will sustain or accelerate the positive trend we have observed over the past seven years. Because reducing youth disconnection will require an understanding of the structural factors driving it, the report also examines a key factor preventing young people from staying in school and the workforce: disparities in access to reliable and affordable transportation. Future reports will address additional structural barriers fueling disconnection.

KEY FINDINGS

Nationally: The youth disconnection rate for the United States overall was 11.5 percent in 2017—down from 11.7 percent the previous year. This represents a total of about 4.5 million young people, or about one in nine.

Disability: Disconnected young people are more than three times as likely to have a disability of some kind than connected young people—16.6 percent as compared to 5.0 percent. White male disconnected youth have the highest disability rate, 23.0 percent, but in general face fewer structural barriers to school persistence and employment than other groups.



Since the KIND program (for ages 18-24) started at CNCAP we have assisted 14 households for a total of 26 clients.

Gender: Boys and young men are slightly more likely to be disconnected than girls and young women, 11.9 percent as compared to 11.1 percent. But this ranking varies by race; among Asian, Latino, and Native American youth, young women have a slightly higher disconnection rate, whereas for black and white youth, young men do. The size of the gender gap is largest for black young people.

Race and ethnicity: Of the country's five major racial and ethnic groups, Asian American youth have the lowest disconnection rate, 6.6 percent, unchanged from their 2016 rate. White youth have the second-lowest rate (9.4 percent), followed by Latino (13.2 percent), black (17.9 percent), and Native American youth (23.9 percent). Latino youth saw the greatest improvement in their disconnection rate between 2016 to 2017, while black teens and young adults are the only group whose disconnection rate increased. Disconnection rates also vary by Asian and Latino subgroup.

Regions: Disconnection continues to be a particular challenge in the South. The East South Central area, which includes Kentucky, Tennessee, Mississippi, and Alabama, has the highest disconnection rate overall, 14.2 percent. New England has the lowest rate, 8.26 percent. **States:** Minnesota has the lowest rate of youth disconnection (6.2 percent), followed by Iowa (7.0 percent) and Massachusetts (7.1 percent). West Virginia has the highest rate, 17.0 percent, followed by New Mexico (16.5 percent) and Mississippi (16.4 percent). Idaho experienced the largest increase in the share of disconnected young people between 2016 and 2017, nearly 25 percent. The state's 2017 rate of 13.6 percent is almost as high as its 2014 peak of 14.0 percent. Alaska saw the largest drop in its disconnection rate, a decrease of 27 percent.

Metro areas: Metro area youth disconnection rates range from a low of 5.6 percent in greater Grand Rapids, Michigan, to a high of 18.0 percent in the Memphis metro area. Metro area

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disconnection rates vary by gender as well as race and ethnicity. The metro area with the largest racial or ethnic gap is Louisville, KY-IN, where the black-white gap is 17.6 percentage points. **Transportation:** An examination of disconnection rates and commute times in two major cities, Washington, DC, and Chicago, reveals a link between transportation and youth disconnection. Average commute time and the youth disconnection rate are strongly correlated across DC neighborhoods. The correlation between the youth disconnection rate and the percentage of workers with very long commutes is also strong. In Chicago, the five areas with the highest youth disconnection rates, all above 20 percent, also have the highest rates of workers commuting an hour or more each way.

http://measureofamerica.org/youth-disconnection-2019/

CNCAP's KIND (Keeping Independent Needs Defined) program is a new Joint TH (Transitional Housing) and RR (Rapid Re-housing) program to assist individuals and families whose head of household is between the ages of 18 & 24. The core elements of the KIND program are 1) Stable Housing, 2) Education & Employment, 3) Social and Emotional Wellbeing, and 4) Permanent Connections.

The Joint TH portion of the program assists homeless youth in a crisis situation get into temporary housing to address their immediate housing needs and then to assist by offering RR to get the youth rapidly re-housed and into permanent housing. While on the program youth will have the opportunity to participate in case management to address specific barriers the family is having.

The KIND program serves the counties of Hall, Buffalo, Adams and Custer counties is currently serving 10 youth with 7 additional youth searching for housing.

Youth are also requesting assistance with diapers, formula, transportation, baby items and household items. Although they may be on WIC, it only provides formula as a supplement so the additional cost can be burdensome on youth with children.

Although youth can be resilient, trying to overcome the many challenges in their life to make a positive change for themselves can be a difficult and overwhelming. A youth shared his story with his KIND Case Manager:

Jake, a 20-year old male had been in foster care and was aging out of the system and was in desperate need of help.

While in foster care, he had been living with his grandparents that were being compensated by a stipend for his care. However, since he was aging out of foster care, they wouldn't be receiving it any longer, and didn't want him in the household any longer.

Although he had struggled in the past with drugs and alcohol, he was now clean for six months. He had also been involved in some gang activity but wanted a change and wanted out.

Needless to say, Jake had no support system.

Jake was accepted into the KIND program where he was placed into housing, is employed full –time and the case manager is assisting him on options to achieve his GED. Once he accomplishes obtaining his GED, Jake wants to continue his education. There is a team of 14 people from various agencies that are supporting this young man to

ensure he has a successful life and with his determination, we are hopeful that he will succeed.

Crime

STATEWIDE CRIME SUMMARY

The number of crimes reported to Nebraska law enforcement agencies in 2018 decreased 8.1%. There were 44,997 crimes reported in 2018, compared to 48,974 crimes reported during the same period in 2017, resulting in a decrease of 3,977 crimes. These numbers include only the crimes of Murder-Manslaughter, Forcible Rape, Robbery, Aggravated Assault, Burglary, Larceny Theft, Motor Vehicle Theft, and Arson, which serve as the Crime Index used to measure crime statewide.

Violent crimes (Murder-Manslaughter, Forcible Rape, Robbery, and Aggravated Assault) decreased 6.8% in 2018. There were 5,368 violent crimes reported in 2018, compared to 5,757 reported in 2017, resulting in a decrease of 389 violent crimes.

Property crimes (Burglary, Larceny-Theft, Motor Vehicle Theft, and Arson) decreased 8.3% in 2018. There were 39,629 property crimes reported in 2018, compared to 43,217 reported in 2017, resulting in a decrease of 3,588 property crimes.

Crime Index Offenses, 2017 – 2018

	2017	2018	CHANGE
VIOLENT CRIMES	5,757	5,368	-6.8%
Murder-Manslaughter	43	46	+7.0%
Forcible Rape	1,170	1,217	+4.0%
Robbery	951	735	-22.7%
Aggravated Assault	3,593	3,370	-6.2%
PROPERTY CRIMES	43,217	39,629	-8.3%
Burglary	6,265	5,167	-17.5%
Larceny-Theft	31,556	29,398	-6.8%
Motor Vehicle Theft	5,188	4,835	-6.8%
Arson	208	229	+10.1%
COMBINED TOTAL	48,974	44,997	-8.1%

ARRESTS

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There were 70,706 arrests made in 2018, compared to 69,303 in 2017, resulting in an overall increase of 2.0%. The five categories with the highest number of arrests in 2018 were: Drug Abuse Violations (13,808); Simple Assault (8,786); Larceny (7,700); Driving under the Influence (6,750); and Liquor Law Violations (4,250).

The number of adult arrests (age 18 and over) in 2018 was 62,274, compared to 60,080 in 2017, resulting in an increase of 3.7%. The number of juvenile arrests (age 17 and under) in 2018 was 8,432, compared to 9,223 in 2017, a decrease of 8.6%.

A REVIEW OF HATE CRIMES

With the passage of Legislative Bill 90 in 1997, commonly referred to as the Hate Crime Bill, the Nebraska Crime Commission (NCC) developed a system to report hate crimes. The FBI has defined a hate crime as a "criminal offense against a person or property motivated in whole or in part by an offender's bias against a race, religion, disability, sexual orientation, ethnicity, gender, or gender identity." Nebraska law enforcement agencies voluntarily submit quarterly reports to the NCC which document the details of hate crimes that have been committed within the jurisdictions of those reporting agencies. Some of the details documented include: the type of crime committed, a general description of the location in which it occurred, and the type of bias or motivation of the offender.

In 2018, 128 law enforcement agencies participated in submitting hate crime data to the Crime Commission. In total, there were 30 incidents reported by 11 agencies statewide that involved crimes motivated by hate or bias. In comparison, 2017 had 117 agencies participate in submitting hate crime data, reporting a total of 39 incidents from 7 agencies statewide, resulting in an overall decrease of 23.1%.

https://ncc.nebraska.gov/sites/ncc.nebraska.gov/files/doc/Crime_In_Nebraska_2018_0.pdf

LAW ENFORCEMENT EMPLOYMENT DATA AND COVERAGE (2018) HIGHLIGHTS

Sworn Personnel

3,893 full-time sworn officers with 116 vacant positions.

1,091 sworn officers employed full-time in Sheriffs' Departments.

2,217 sworn officers employed full-time in Police Departments.

585 sworn officers employed full-time in State Agencies.

2.0 full-time sworn officers per 1,000 people (based on a population of 1,921,971).

318 part-time sworn officers with 19 vacant positions.

Civilian Personnel

1,634 full-time civilian employees.

239 part-time civilian employees.

61 vacant positions (both full-time and part-time).

Reserve Officers

57 reserve officers.

26 agencies use reserve officers.

Contractual Agreements

30 departments reported they have contracts with communities to provide law enforcement coverage.

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90 different communities are reportedly covered by law enforcement services as a result of these contractual agreements.

https://ncc.nebraska.gov/sites/ncc.nebraska.gov/files/doc/Employment_Data_Report_2018.pdf

Valentine Police Chief goes beyond 'protect and serve'

By ALY RINEHART aly.rinehart@nptelegraph.com

Apr 11, 2018 (Taken in part)

To better connect with the people of Valentine, the police host or participate in "lots of fun things," Miller said.

"We do National Night Out. That's a hoot," she said.

National Night Out is a nationwide event that promotes drug and alcohol awareness. The police department, fire department and EMS of Valentine compete with each other in several activities during the event. It has been going for 50 years now.

Valentine also has a Coffee with a Cop program, at which citizens can sit down and chat with police in a casual setting. "They can share what's on their mind, and we can work toward making it better," Miller said.

The department has hosted multiple self-defense classes for women. Miller and the five other officers make a habit of patrolling the town and stopping to speak with people on the streets. "I like to go out a couple times a day and you wave and stop to visit with people walking, ask kids how school was," Miller said. "It lets everyone know you're out watching and making sure things are OK. We even do this at night. It's good that people know we're out here if they need something."

Many projects are aimed at Valentine's youth. Miller started a "CSI Valentine" program for advanced biology students at the high school. Another officer put together a program for local parents, educating them on how to recognize signs of drug use in their children. The department is planning a large event in May at which all fifth- through eighth-grade students can play games while learning about avoiding drugs and alcohol.

"We try to get involved with kids as much as we can," Miller said. "We want them to have a certain level of respect (for police) but know that we're here whenever they need us." Building connections in the community has benefited the department too. Miller recalls a time that a fugitive was caught because residents who saw him immediately alerted police. As police chased the man on foot, people would come to their front doors or porches and point officers in the right direction.

"If we weren't invested in our community, people may not take the time to help like that," Miller said.

Miller said Valentine is a great community and the department has a caring bunch of officers. "It's great to be able to put that all together," she said.

 $https://www.nptelegraph.com/connect/valentine-police-chief-goes-beyond-protect-and-serve/article_86ad69e2-3d3f-11e8-a5b1-8b23ec1bb4a8.html\\$

Health Trends

Nebraska's 'monumental' data project key in improving health outcomes, reducing costs, officials say
By Julie Anderson World-Herald staff writer
Sep 24, 2019

Partners in Nebraska's health information system are taking next steps to improve health outcomes — and the state's IT workforce — through data.

The Nebraska Health Information Initiative, or NEHII, has been working to link patient records collected by physicians, hospitals, pharmacies and other health care entities across the state for roughly a decade. An ER doctor in Kearney, for instance, now can check the medications and health history of a visiting Omahan who lands in her hospital.

But so far, that data has been put to limited use with questions involving larger groups of patients, known as population health. That may involve checking whether at-risk groups, such as diabetics, are getting recommended eye and foot screenings on time and reaching out to those who aren't.

The new Nebraska Healthcare Collaborative will focus on bolstering both the expertise and tools needed to tap that data, said Jamie Bland, NEHII's CEO.

"The promise of health information technology will be realized through this partnership," she said.

 $https://www.omaha.com/livewellnebraska/health/nebraska-s-monumental-data-project-key-in-improving-health-outcomes/article_38b851a0-a312-59ad-b94e-0e1033192b47.html\\$

Looming crisis in rural health in Nebraska

Nebraska View

Apr 1, 2019

Editor's Note

The author John L. Roberts, MA, is executive director of the Nebraska Rural Health Association. NeRHA membership is comprised of more than 500 individuals and organizations with an interest in rural health.

The decline of rural hospitals has been a slow-moving train wreck. It now is accelerating. Since 2010, 102 rural hospitals have closed. As bad as that may seem, things are likely to get much worse, and soon. Currently, 46 percent of rural hospitals nationally operate at a loss, compared to 44 percent in 2018 and 40 percent in 2017. Due to financial strains, nearly 700 rural hospitals are financially vulnerable and at high risk of closure, representing more than one-third of rural hospitals in the U.S.

Hospitals in our state provide access to high quality care for thousands to rural Nebraskans; however, Nebraska is not immune to these national trends. Nebraska has had only one hospital close during this time period but many hospitals in rural Nebraska are struggling with low or quickly declining operating margins. The most recent data shows that 39 out of 71 rural Nebraska hospitals have a 2 percent or less operating margin. An addition, 29 rural hospitals

experienced negative operating margins in 2018 with 22 of those having a minus-3 percent operating margin or worse.

There are a number of factors converging to place downward pressure on rural hospital operating margins. These factors include federal government policies such as Sequestration and Bad Debt, health disparities (rural populations are older, sicker and less affluent), low patient volumes, the shifting nature of patient care, population migration and staff recruitment and retention.

It's not one or two issues; it's a whole swatch of things rural hospitals have to confront. As a result, many hospitals across the state have had to cut costs by reducing some services, such as obstetrics, long-term care or assisted living.

You're going to start see hospitals continue to make decisions about what they can sustain based on their patient volumes and based on their revenue. As the things you're making a margin on continue to evaporate, then you start looking at what services you can afford to continue.

There is a growing sense of urgency. When a hospital closes, the community struggles. Pharmacies close, grocery stores close, companies choose not to locate to a place where their employees won't have access to a hospital. More is at stake, it seems, than convenient access to the services hospitals provide.

How many more rural health hospitals need to close or cut their services for meaningful action to be taken? We all have a responsibility to take action — rural providers, community leaders and state and federal policymakers, to stop the bleeding and prevent further rural hospital closures. If we do not, millions of rural citizens will lose direct access to care nationally while local economies will suffer in those communities.

All of this is happening during the longest uninterrupted period of economic growth in U.S. history, which should be added cause for concern. In other words, what recently may have looked like a slow-moving train wreck now should be accompanied by flashing red lights and blaring sirens.

jroberts@mwhc-inc.com https://www.kearneyhub.com/opinion/looming-crisis-in-rural-health-in-nebraska/article 5eac1d32-5493-11e9-88d8-432b898f8faf.html

Women, Infants and Children (WIC) Program

The Special Supplemental Nutrition Program for Women, Infants and Children, popularly known as WIC, is a nutrition program for pregnant, breastfeeding women and families with children younger than 5. WIC is the nations most successful and cost-effective public health nutrition program. We provide wholesome food, nutrition education and community support for income eligible women who are pregnant, breastfeeding, or post-partum, and for infants and children up to five years old.

In Nebraska, WIC helps approximately 34,000 people at over 100 clinic sites.

WIC helps eligible families with:

Healthy Food
Breastfeeding Support
Nutrition Education
Health and community resources

Who can apply?

Pregnant women Infants

Breastfeeding women Children – up to age 5

New mothers Foster children – up to age 5

We talk a lot about moms. But we offer support to anyone—working or not—who cares for a child including: • Moms • Single fathers • Grandparents • Foster parents • Step-parents •

Guardians

http://dhhs.ne.gov/Pages/WIC

CNCAP WIC served:

318 Women

377 Infants

634 Children

1,329 Total Participants

Central Nebraska Community Action Partnership WIC

Spencer		2018			2019		2020				
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	28	30	93%	22	25	88%	18	19	95%		#DIV/0!
November	30	32	94%	22	25	88%	16	18	89%		#DIV/0!
December	32	34	94%	22	25	88%	17	18	94%		#DIV/0!
January	34	35	97%	19	23	83%	16	19	84%		#DIV/0!
February	34	35	97%	20	21	95%	16	17	94%		#DIV/0!
March	30	33	91%	20	22	91%	19	20	95%		#DIV/0!
April	33	38	87%	21	23	91%	18	19	95%		#DIV/0!
May	28	36	78%	20	20	100%	0	0	#DIV/0!		#DIV/0!
June	28	31	90%	18	19	95%	0	0	#DIV/0!		#DIV/0!
July	26	37	70%	18	18	100%	0	0	#DIV/0!		#DIV/0!
August	26	34	76%	19	19	100%	0	0	#DIV/0!		#DIV/0!
September	22	32	69%	17	19	89%	0	0	#DIV/0!		#DIV/0!
Average	29	34	86%	20	22	92%			95%		#DIV/0!

Aurora		2018			2019		2020				
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	38	40	95%	56	59	95%	51	52	98%		#DIV/0!
November	44	44	100%	49	53	92%	48	49	98%		#DIV/0!
December	48	51	94%	48	52	92%	50	55	91%		#DIV/0!
January	44	47	94%	46	50	92%	45	51	88%		#DIV/0!
February	44	46	96%	46	49	94%	49	51	96%		#DIV/0!

2020 Community Assessment Central Nebraska Community Action Partnership, Inc.

March	39	43	91%	47	49	96%	50	51	98%	#DIV/0!
April	39	42	93%	52	53	98%	49	51	96%	#DIV/0!
May	40	42	95%	45	50	90%	0	0	#DIV/0!	#DIV/0!
June	52	54	96%	50	53	94%	0	0	#DIV/0!	#DIV/0!
July	51	53	96%	46	52	88%	0	0	#DIV/0!	#DIV/0!
August	57	59	97%	51	55	93%	0	0	#DIV/0!	#DIV/0!
September	57	58	98%	45	52	87%	0	0	#DIV/0!	#DIV/0!
Average	46	48	95%	48	52	93%			95%	#DIV/0!

Burwell		2018			2019			202	0		
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	90	96	94%	37	38	97%	30	33	91%		#DIV/0!
November	98	101	97%	35	36	97%	33	34	97%		#DIV/0!
December	96	100	96%	27	37	73%	31	34	91%		#DIV/0!
January	96	103	93%	29	33	88%	34	34	100%		#DIV/0!
February	96	103	93%	29	39	74%	33	36	92%		#DIV/0!
March	96	104	92%	30	38	79%	31	32	97%		#DIV/0!
April	91	107	85%	28	31	90%	32	32	100%		#DIV/0!
May	83	102	81%	24	28	86%	0	0	#DIV/0!		#DIV/0!
June	86	97	89%	22	26	85%	0	0	#DIV/0!		#DIV/0!
July	82	102	80%	29	30	97%	0	0	#DIV/0!		#DIV/0!
August	78	93	84%	28	33	85%	0	0	#DIV/0!		#DIV/0!
September	82	90	91%	34	38	89%	0	0	#DIV/0!		#DIV/0!
Average	90	100	90%	29	34	87%			95%		#DIV/0!

Greeley		2018			2019			2020)		
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	24	28	86%	26	27	96%	14	19	74%		#DIV/0!
November	22	25	88%	29	28	104%	11	16	69%		#DIV/0!

2020 Community Assessment Central Nebraska Community Action Partnership, Inc.

December	22	25	88%	28	27	104%	13	17	76%	#DIV/0!
January	21	24	88%	25	25	100%	13	14	93%	#DIV/0!
February	25	26	96%	23	25	92%	14	15	93%	#DIV/0!
March	26	27	96%	20	25	80%	14	15	93%	#DIV/0!
April	32	33	97%	18	24	75%	12	14	86%	#DIV/0!
May	31	33	94%	17	22	77%	0	0	#DIV/0!	#DIV/0!
June	28	30	93%	19	22	86%	0	0	#DIV/0!	#DIV/0!
July	25	27	93%	17	21	81%	0	0	#DIV/0!	#DIV/0!
August	26	28	93%	17	21	81%	0	0	#DIV/0!	#DIV/0!
September	24	26	92%	16	21	76%	0	0	#DIV/0!	#DIV/0!
Average	26	28	92%	21	24	88%			83%	#DIV/0!

Atkinson		2018			2019			202	0		
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	29	37	78%	32	41	78%	21	25	84%		#DIV/0!
November	26	36	72%	33	39	85%	20	24	83%		#DIV/0!
December	26	34	76%	32	37	86%	17	20	85%		#DIV/0!
January	24	31	77%	31	38	82%	21	23	91%		#DIV/0!
February	23	24	96%	31	35	89%	21	22	95%		#DIV/0!
March	22	27	81%	31	36	86%	19	23	83%		#DIV/0!
April	19	23	83%	26	34	76%	26	29	90%		#DIV/0!
May	27	29	93%	27	31	87%	0	0	#DIV/0!		#DIV/0!
June	27	28	96%	27	30	90%	0	0	#DIV/0!		#DIV/0!
July	31	34	91%	26	28	93%	0	0	#DIV/0!		#DIV/0!
August	33	33	100%	23	28	82%	0	0	#DIV/0!		#DIV/0!
September	35	41	85%	25	26	96%	0	0	#DIV/0!		#DIV/0!
Average	27	31	86%	29	34	86%			87%		#DIV/0!

O'Neill	2018	2019	2020

2020 Community Assessment Central Nebraska Community Action Partnership, Inc.

	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	159	197	81%	205	227	90%	190	223	85%		#DIV/0!
November	143	180	79%	199	235	85%	194	221	88%		#DIV/0!
December	146	172	85%	208	231	90%	189	220	86%		#DIV/0!
January	148	176	84%	195	223	87%	199	217	92%		#DIV/0!
February	146	175	83%	192	216	89%	201	221	91%		#DIV/0!
March	150	168	89%	196	222	88%	201	221	91%		#DIV/0!
April	161	175	92%	199	219	91%	199	224	89%		#DIV/0!
May	165	175	94%	207	228	91%	0	0	#DIV/0!		#DIV/0!
June	169	185	91%	198	220	90%	0	0	#DIV/0!		#DIV/0!
July	169	186	91%	197	221	89%	0	0	#DIV/0!		#DIV/0!
August	177	194	91%	197	220	90%	0	0	#DIV/0!		#DIV/0!
September	179	195	92%	196	219	89%	0	0	#DIV/0!		#DIV/0!
Average	159	182	88%	199	223	89%			89%		#DIV/0!

St. Paul		2018			2019			202	.0		
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	45	47	96%	49	54	91%	48	52	92%		#DIV/0!
November	49	53	92%	52	53	98%	45	47	96%		#DIV/0!
December	45	52	87%	54	56	96%	40	45	89%		#DIV/0!
January	48	55	87%	53	55	96%	44	49	90%		#DIV/0!
February	41	49	84%	55	56	98%	50	53	94%		#DIV/0!
March	44	49	90%	50	56	89%	50	54	93%		#DIV/0!
April	38	45	84%	53	54	98%	50	55	91%		#DIV/0!
May	40	44	91%	52	53	98%	0	0	#DIV/0!		#DIV/0!
June	40	44	91%	54	56	96%	0	0	#DIV/0!		#DIV/0!
July	38	43	88%	49	55	89%	0	0	#DIV/0!		#DIV/0!
August	40	46	87%	49	51	96%	0	0	#DIV/0!		#DIV/0!
September	37	43	86%	50	52	96%	0	0	#DIV/0!		#DIV/0!
Average	42	48	89%	52	54	95%			92%		#DIV/0!

Ainsworth		2018			2019			202	0		
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	201	221	91%	87	92	95%	68	75	91%		#DIV/0!
November	201	219	92%	88	94	94%	61	70	87%		#DIV/0!
December	198	225	88%	86	95	91%	53	69	77%		#DIV/0!
January	203	225	90%	85	96	89%	50	59	85%		#DIV/0!
February	204	230	89%	81	92	88%	52	60	87%		#DIV/0!
March	206	226	91%	81	88	92%	52	59	88%		#DIV/0!
April	199	225	88%	76	88	86%	53	60	88%		#DIV/0!
May	193	226	85%	75	83	90%	0	0	#DIV/0!		#DIV/0!
June	196	214	92%	77	83	93%	0	0	#DIV/0!		#DIV/0!
July	200	217	92%	71	77	92%	0	0	#DIV/0!		#DIV/0!
August	194	220	88%	69	73	95%	0	0	#DIV/0!		#DIV/0!
September	201	230	87%	67	76	88%	0	0	#DIV/0!		#DIV/0!
Average	200	223	89%	79	86	91%			86%		#DIV/0!

Broken Bow		2018			2019			202	0		
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	52	58	90%	176	194	91%	184	198	93%		#DIV/0!
November	51	60	85%	172	194	89%	185	196	94%		#DIV/0!
December	47	58	81%	178	201	89%	181	196	92%		#DIV/0!
January	46	52	88%	182	211	86%	171	192	89%		#DIV/0!
February	45	49	92%	174	199	87%	173	191	91%		#DIV/0!
March	45	49	92%	175	197	89%	160	180	89%		#DIV/0!
April	43	48	90%	183	201	91%	165	179	92%		#DIV/0!
May	41	45	91%	183	200	92%	0	0	#DIV/0!		#DIV/0!
June	45	49	92%	182	195	93%	0	0	#DIV/0!		#DIV/0!
July	45	49	92%	176	193	91%	0	0	#DIV/0!		#DIV/0!
August	48	51	94%	180	191	94%	0	0	#DIV/0!		#DIV/0!

September	47	50	94%	188	193	97%	0	0	#DIV/0!	#DIV/0!
Average	46	52	90%	179	197	91%			91%	#DIV/0!

Central City		2018			2019			202	: 0		
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	47	55	85%	59	63	94%	49	54	91%		#DIV/0!
November	47	54	87%	69	75	92%	52	54	96%		#DIV/0!
December	56	65	86%	74	75	99%	52	55	95%		#DIV/0!
January	56	65	86%	73	79	92%	52	54	96%		#DIV/0!
February	66	70	94%	71	79	90%	52	54	96%		#DIV/0!
March	63	69	91%	72	78	92%	53	55	96%		#DIV/0!
April	63	69	91%	67	71	94%	53	58	91%		#DIV/0!
May	61	67	91%	60	67	90%	0	0	#DIV/0!		#DIV/0!
June	55	59	93%	58	68	85%	0	0	#DIV/0!		#DIV/0!
July	50	60	83%	54	63	86%	0	0	#DIV/0!		#DIV/0!
August	49	62	79%	55	63	87%	0	0	#DIV/0!		#DIV/0!
September	57	65	88%	46	57	81%	0	0	#DIV/0!		#DIV/0!
Average	56	63	88%	63	70	90%			95%		#DIV/0!

Loup City		2018			2019		2020				
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	66	84	79%	58	68	85%	73	79	92%		#DIV/0!
November	62	74	84%	61	66	92%	69	77	90%		#DIV/0!
December	56	65	86%	62	70	89%	68	72	94%		#DIV/0!
January	61	67	91%	64	69	93%	64	71	90%		#DIV/0!
February	64	78	82%	64	70	91%	63	70	90%		#DIV/0!
March	59	66	89%	65	69	94%	66	72	92%		#DIV/0!
April	60	65	92%	67	80	84%	73	78	94%		#DIV/0!
May	60	69	87%	75	83	90%	0	0	#DIV/0!		#DIV/0!

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June	56	63	89%	78	80	98%	0	0	#DIV/0!	#DIV/0!
July	57	68	84%	74	80	93%	0	0	#DIV/0!	#DIV/0!
August	58	69	84%	77	81	95%	0	0	#DIV/0!	#DIV/0!
September	57	65	88%	81	85	95%	0	0	#DIV/0!	#DIV/0!
Average	60	69	86%	69	75	92%			91%	#DIV/0!

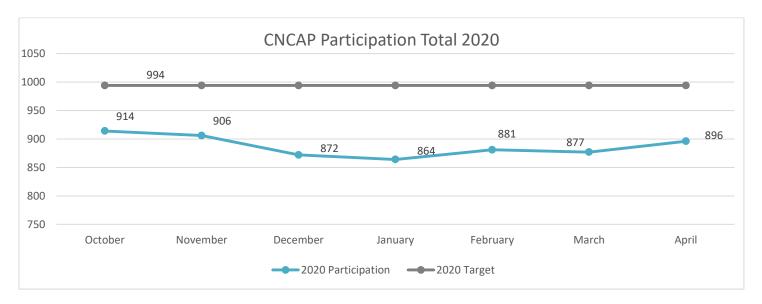
Ord		2018			2019			202	.0		
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	83	96	86%	84	92	91%	83	92	90%		#DIV/0!
November	86	98	88%	84	86	98%	87	94	93%		#DIV/0!
December	87	99	88%	78	88	89%	84	90	93%		#DIV/0!
January	82	100	82%	73	90	81%	89	94	95%		#DIV/0!
February	85	94	90%	70	80	88%	93	98	95%		#DIV/0!
March	83	92	90%	73	82	89%	97	103	94%		#DIV/0!
April	77	87	89%	69	84	82%	101	108	94%		#DIV/0!
May	74	83	89%	76	84	90%	0	0	#DIV/0!		#DIV/0!
June	74	85	87%	85	91	93%	0	0	#DIV/0!		#DIV/0!
July	74	84	88%	81	91	89%	0	0	#DIV/0!		#DIV/0!
August	85	90	94%	82	90	91%	0	0	#DIV/0!		#DIV/0!
September	90	91	99%	81	90	90%	0	0	#DIV/0!		#DIV/0!
Average	82	92	89%	78	87	89%			93%		#DIV/0!

Valentine		2018		2019			2020				
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	98	113	87%	93	106	88%	85	93	91%		#DIV/0!
November	103	112	92%	101	101	100%	85	92	92%		#DIV/0!
December	100	110	91%	89	97	92%	77	87	89%		#DIV/0!
January	102	114	89%	91	103	88%	66	79	84%		#DIV/0!
February	104	113	92%	101	108	94%	64	78	82%		#DIV/0!

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March	94	105	90%	109	115	95%	65	75	87%	#DIV/0!
April	96	105	91%	110	114	96%	65	72	90%	#DIV/0!
May	101	112	90%	103	121	85%	0	0	#DIV/0!	#DIV/0!
June	105	112	94%	97	111	87%	0	0	#DIV/0!	#DIV/0!
July	107	110	97%	95	105	90%	0	0	#DIV/0!	#DIV/0!
August	100	111	90%	90	103	87%	0	0	#DIV/0!	#DIV/0!
September	96	107	90%	92	95	97%	0	0	#DIV/0!	#DIV/0!
Average	101	110	91%	98	107	92%			87%	#DIV/0!

Total		2018			2019			202	0		
	Participation	Enrollment	%	Participation	Enrollment	%	Participation	Enrollment	%	Target	%
October	960	1,102	87%	984	1,086	91%	914	1,014	90%	994	92%
November	962	1,088	88%	994	1,085	92%	906	992	91%	994	91%
December	959	1,090	88%	986	1,091	90%	872	978	89%	994	88%
January	965	1,094	88%	966	1,095	88%	864	956	90%	994	87%
February	977	1,092	89%	957	1,069	90%	881	966	91%	994	89%
March	957	1,058	90%	969	1,077	90%	877	960	91%	994	88%
April	951	1,062	90%	969	1,076	90%	896	979	92%	994	90%
May	944	1,063	89%	964	1,070	90%	0	0	#DIV/0!	994	0%
June	961	1,051	91%	965	1,054	92%	0	0	#DIV/0!	994	0%
July	955	1,070	89%	933	1,034	90%	0	0	#DIV/0!	994	0%
August	971	1,090	89%	937	1,028	91%	0	0	#DIV/0!	994	0%
September	984	1,093	90%	938	1,023	92%	0	0	#DIV/0!	994	0%
Average	962	1,079	89%	964	1,066	90%	887	978	91%	994	89%



CNCAP Immunizations

Central Nebraska Community Action Partnership was awarded a grant for \$50,888 for immunization activities supporting the rural clinics in Ord, O'Neill, Loup City, Greeley, St. Paul and Broken Bow.

Along with administering the vaccinations, families are provided information and education on the importance of vaccinations for their children. The program focuses efforts on children 0-18 who are uninsured or underinsured, that may have health insurance that doesn't cover immunizations, or those receiving Medicaid. The funding originates from the Center of Disease Control and is provided to the Department of Health and Human Services' Immunization Program.

A total of 1052 vaccinations were provided to 716 individuals in 2019. CNCAP Annual Report

Nutrition

What does it feel like to go to bed hungry? Do you remember the days of "fried bologna sandwiches" or "crushed saltines cereal"? Many families from the 50's and 60's remember those meals and think they had it okay. Programs like SNAP, WIC and the school lunch programs have been implemented since those "good old days"

Statistics show one in five kids in Nebraska may still go to bed hungry. 13 million children in America experience hunger (meaning that they frequently skip meals, eat too little, and sometimes go without food for a whole day). And some elderly wish they had the "good old days" back.

Many may not realize that even today in our own communities, people still struggle with hunger in every county in Nebraska. They could be our elderly neighbors, kids in the classrooms or homeless on the streets. There are available resources:

In order to be eligible for SNAP, a family must meet certain tests, including resource and income tests. SNAP benefits can only be used to buy food. Alcoholic beverages, pet food, tobacco, paper products, or other nonfood items can't be purchased with SNAP benefits. The benefit amount is placed on an Electronic Benefits Transfer (EBT) card. EBT cards are accepted by most supermarkets and grocery stores. Some "Meals on Wheels" services may accept them, and recipients over age 60 and their spouses may be able to use them to pay for congregate meals.

If you've heard that Meals on Wheels doesn't work, don't believe it. Just ask those who receive daily meals from Meals on Wheels. They depend on the meals being delivered every day because they can't prepare their own meals anymore, and can't get out to shop for food. In addition, the daily check-in by a driver is invaluable.

Donated food, household and personal items are available for low income families on an emergency basis from CNCAP. Nutritional food packages are provided for approximately 1 week to households in crisis (limited times per year per food pantry location). Households will receive other information and referrals, as needed.

WIC is here to serve moms across the U.S. With over 10,000 clinic sites, there's almost always a WIC center nearby. We talk a lot about moms. But we offer support to anyone—working or not—who cares for a child including: • Moms • Single fathers • Grandparents • Foster parents • Step-parents • Guardians

Did you know children who eat breakfast have better focus, miss less school, have higher grades and test scores, and are more likely to have a lower body mass index than children who skip breakfast? Despite knowing these facts, Nebraska continues to rank very low in school breakfast participation.

Food insecurity is a <u>social and economic condition</u> where access to food is limited or uncertain. It differs from hunger in that hunger is a physiological feeling. In 2017, an estimated <u>40 million Americans</u>, including 12 million children were food insecure. Food insecurity has broad effects on health due to the mental and physical stress that it places on the body.

Central Nebraska Community Action Partnership, Inc.

Among women, food insecurity is associated with:

Obesity

Anxiety and depressive symptoms

Risky sexual behavior

Negative pregnancy outcomes such as low birthweight and gestational diabetes

Children are particularly susceptible to the negative impacts of food insecurity because their brains and bodies are still developing.

Among children, food insecurity is associated with:

Anemia

Asthma

Depression and anxiety

Cognitive and behavioral problems

Higher risk of being hospitalized

Health-related costs attributed to hunger were conservatively estimated at \$160 billion in 2014. Adding in lost economic productivity, education costs (such as special education support and costs of school dropout) and charity to combat hunger brings the total to \$178.9 billion.

WHO IS AFFECTED?

Food insecurity is a <u>complex problem</u> and does not exist in isolation for low-income families. Many of the same families also struggle with issues like affordable housing, medical costs and low wages.

Populations disproportionately affected by food insecurity include:

Racial and ethnic minorities: The prevalence of food insecurity was more than two times greater for households whose head was non-Hispanic black or Hispanic compared with households headed by a non-Hispanic white adult.

Low-income families: The prevalence of food insecurity is higher among low-income families.

Households headed by a single parent: households that are headed by a single adult with no spouse have a higher prevalence of food insecurity compared with households headed by a married couple.

Commodities & Food Pantries

Commodity participants must be 60 or over and fall within certain income guidelines. They may receive a box of food every two months as long as their income does not change (per the basic intake information) Distribution goes to St Paul, Greeley, Burwell, Ord and Broken Bow on a monthly rotating basis. Loup City participants can stop at the warehouse to receive their supplies or have someone pick it up for them.

Central Nebraska Community Action Partnership, Inc.

Volunteers from the community offer a fork lift to unload a commodity truck that brings boxes of food at our CNCAP building, Hours of labor to inventory, rotate stock and assemble packages for those in need are also done with the help of volunteers. Local Housing Authorities are in contact with our personnel on a regular basis to help new applicants while current participants use word of mouth to recruit new members.

Food Pantry

CNCAP has two food pantries that offer food packages to eligibile households. Located in Loup City and Central City, the packages provide nutritious food for approximately one week. A case manager meets with the participant to ensure they are referred to additional resources to help with their nutritional needs as well as addressing any other needs.

Mobile Food Pantries

Mobile food pantries are open to all residents of their respective area with no income or age guidelines. CNCAP offers a mobile food pantry on a quarterly basis in Loup City.







MOBILE PANTRY HELPING MEET YOUR FAMILY'S

NEEDS
SPONSPORED BY:

THE SHERMAN COUNTY
FOOD PANTRY

<u>Date</u>: Saturday, October 26th
<u>Time</u>: 9:30 am-Until food is gone
<u>Location</u>: Community Center, 803 O St.
<u>Loup City</u>, NE 68853
<u>Instructions</u>: Please bring your own basket

FOODBANK

Call Tanya at (308) 745-0780 ext. 122 with questions. A mobile pantry is a traveling food pantry that delivers food directly to families for a one-day distribution.

The goal is to provide food where there is a high need but limited resources.

The mobile pantry is available to you free of charge!

No income guidelines or age limits!



Since January 1 to June 30, 2020 CNCAP has served:

SNAP

24 served

20 Regular 4 Pandemic SNAP

Food Pantry

24 Households

87 Beneficiaries

Mobile Food Pantries

53 Households

151 Beneficiaries

National School Lunch Program (NSLP)

Attachment A

NUTRITION SERVICES INCOME ELIGIBILITY GUIDELINES

JULY 1, 2019 - JUNE 30, 2020

Household Size		Free Meals					Reduced Price Meals					
	Annual	Monthly	Twice per Month	Every Two Weeks	Weekly	Annual	Monthly	Twice per Month	Every Two Weeks	Weekly		
1	16,237	1,354	677	625	313	23,107	1,926	963	889	445		
2	21,983	1,832	916	846	423	31,284	2,607	1,304	1,204	602		
3	27,729	2,311	1,156	1,067	534	39,461	3,289	1,645	1,518	759		
4	33,475	2,790	1,395	1,288	644	47,638	3,970	1,985	1,833	917		
5	39,221	3,269	1,635	1,509	755	55,815	4,652	2,326	2,147	1,074		
6	44,967	3,748	1,874	1,730	865	63,992	5,333	2,667	2,462	1,231		
7	50,713	4,227	2,114	1,951	976	72,169	6,015	3,008	2,776	1,388		
8	56,459	4,705	2,353	2,172	1,086	80,346	6,696	3,348	3,091	1,546		
For each additional family member add:	5,746	479	240	221	111	8,177	682	341	315	158		

If households report multiple frequencies of pay, total income must be calculated on an annual basis. Use the following conversions: Annual Income Conversion: Weekly X 52; Every 2 Weeks X 26; Twice a Month X 24; Monthly X 12

Nebraska Department of Education Nutrition Services - NS-402-G

Free/Reduced per School enrollment 2019-2020

COUNTY	SCHOOLNAME	SCHOOLTYPE	GRADE	ENROLLED	F/R	%
BLAINE	HIGH SCHOOL AT DUNNING	SECONDARY	07-12	45	21	46.67%
BLAINE	ELEMENTARY SCHOOL AT HALSEY	ELEMENTARY	K -06	45	20	44.44%
		HIGH				
BOONE	BOONE CENTRAL HIGH SCHOOL	SCHOOL	09-12	207	63	30.43%
BOONE	BOONE CENTRAL ELEM-ALBION	ELEMENTARY	PK-05	312	109	34.94%
		MIDDLE				
BOONE	BOONE CENTRAL MIDDLE SCHOOL	SCHOOL	06-08	109	44	40.37%
BOONE	ST EDWARD HIGH SCHOOL	SECONDARY	07-12	78	42	53.85%
BOONE	ST EDWARD ELEMENTARY SCHOOL	ELEMENTARY	PK-06	99	59	59.60%
		HIGH				
BOONE	RIVERSIDE HIGH SCHOOL	SCHOOL	09-12	58	29	50.00%
		MIDDLE				
BOONE	RIVERSIDE MIDDLE SCHOOL	SCHOOL	06-08	55	30	54.55%
BOONE	RIVERSIDE ELEMENTARY - CEDAR RAPIDS	ELEMENTARY	PK-05	84	56	66.67%

BOONE	RIVERSIDE ELEMENTARY - SPALDING	ELEMENTARY	PK-05	51	20	39.22%
BOONE	ST MICHAEL'S ELEMENTARY SCHOOL	ELEMENTARY	K -08	99	14	14.14%
500112	5Sin lee 3 Element nitt 301100E	HIGH	55	33	4-7	± 1.4∓70
BOYD	BOYD COUNTY HIGH SCHOOL (SPENCER)	SCHOOL	09-12	93	59	63.44%
	2 3	MIDDLE				
BOYD	BOYD COUNTY MIDDLE SCHOOL (SPENCER)	SCHOOL	05-08	104	69	66.35%
BOYD	BOYD COUNTY ELEMENTARY (BUTTE)	ELEMENTARY	PK-04	122	60	49.18%
BOYD	BOYD COUNTY ELEMENTARY (LYNCH)	ELEMENTARY	PK-04	38	27	71.05%
		HIGH				
BROWN	AINSWORTH HIGH SCHOOL	SCHOOL	09-12	144	54	37.50%
BROWN	AINSWORTH ELEMENTARY SCHOOL	ELEMENTARY	K -04	136	67	49.26%
		MIDDLE				
BROWN	AINSWORTH MIDDLE SCHOOL	SCHOOL	05-08	113	63	55.75%
BROWN	AINSWORTH LITTLE PAWS PRESCHOOL	PREK ONLY	PK-PK	34	17	50.00%
COLFAX	LEIGH HIGH SCHOOL	SECONDARY	07-12	88	28	31.82%
COLFAX	LEIGH ELEMENTARY SCHOOL	ELEMENTARY	PK-06	158	35	22.15%
COLFAX	CLARKSON JR-SR HIGH SCHOOL	SECONDARY	07-12	101	32	31.68%
COLFAX	CLARKSON ELEMENTARY SCHOOL	ELEMENTARY	PK-06	119	54	45.38%
COLFAX	HOWELLS SENIOR HIGH SCHOOL	SECONDARY	07-12	147	48	32.65%
	HOWELLS-DODGE ELEMENTARY					
COLFAX	SCHOOL/HOWELLS	ELEMENTARY	PK-01	55	15	27.27%
	HOWELLS-DODGE ELEMENTARY					
COLFAX	SCHOOL/DODGE	ELEMENTARY	02-06	75	38	50.67%
		HIGH				
COLFAX	SCHUYLER CENTRAL HIGH SCHOOL	SCHOOL	09-12	588	397	67.52%
COLFAX	RICHLAND ELEMENTARY SCHOOL	ELEMENTARY	K -08	75	48	64.00%
COLFAX	SCHUYLER ELEMENTARY SCHOOL	ELEMENTARY	K -05	707	541	76.52%
COLFAX	SCHUYLER ELEMENTARY-FISHER'S	ELEMENTARY	K -08	61	23	37.70%
		MIDDLE				
COLFAX	SCHUYLER MIDDLE SCHOOL	SCHOOL	06-08	394	288	73.10%
COLFAX	NORTH WARD PREKINDERGARTEN	PREK ONLY	PK-PK	102	40	39.22%
COLFAX	SCHUYLER HEADSTART	PREK ONLY	PK-PK	99	15 *	15.15%
COLFAX	ST JOHN NEUMANN ELEMENTARY SCH	ELEMENTARY	01-06	22		*
COLFAX	HOWELLS COMMUNITY CATHOLIC SCHOOL	ELEMENTARY	01-06	42	*	*
CUSTER	ANSELMO-MERNA HIGH SCHOOL	SECONDARY	07-12	115	29	25.22%
CUSTER	ANSELMO-MERNA ELEMENTARY-MERNA	ELEMENTARY	PK-06	174	78	44.83%
CLICTED	BROKEN BOW FICH SCHOOL	HIGH	00.12	226	01	20 560/
CUSTER	BROKEN BOW HIGH SCHOOL	SCHOOL	09-12	236	91	38.56%
CUSTER	NORTH PARK ELEMENTARY SCHOOL	ELEMENTARY	K -05	345	165	47.83%
CUSTER	EARLY CHILDHOOD SERVICES	PREK ONLY	PK-PK	41	17	41.46%
CLISTED	BROKEN BOW MIDDLE SCHOOL	MIDDLE SCHOOL	06-08	189	85	44.97%
CUSTER	NEW DISCOVERIES PRESCHOOL		PK-PK	64	31	48.44%
CUSTER CUSTER	ANSLEY HIGH SCHOOL	PREK ONLY	07-12	80	45	56.25%
CUSTER	ANSLEY HIGH SCHOOL ANSLEY ELEMENTARY SCHOOL	SECONDARY				
	SARGENT HIGH SCHOOL	SECONDARY	PK-06	112 82	59 46	52.68% 56.10%
CUSTER			07-12			
CUSTER	SARGENT ELEMENTARY SCHOOL	ELEMENTARY	PK-06	91	51	56.04%
CUSTER	ARNOLD FLEMENTARY SCHOOL	SECONDARY	07-12 V 06	78 101	24	30.77%
CUSTER	ARNOLD ELEMENTARY SCHOOL	SECONDARY	K -06	101	45	44.55%
CUSTER	CALLAWAY FIEMENTARY SCHOOL	SECONDARY	07-12	92	44 61	47.83%
CUSTER	CALLAWAY ELEMENTARY SCHOOL	ELEMENTARY	PK-06	111	61	54.95%

GARFIELD	BURWELL JR-SR HIGH SCHOOL	SECONDARY	07-12	143	63	44.06%
GARFIELD	BURWELL ELEMENTARY SCHOOL	ELEMENTARY	PK-06	167	62	37.13%
GREELEY	CENTRAL VALLEY HIGH SCHOOL	SECONDARY	07-12	123	64	52.03%
GREELEY	CENTRAL VALLEY ELEM - SCOTIA	ELEMENTARY	PK-06	170	88	51.76%
GREELEY	CENTRAL VALLEY PK - GREELEY	PREK ONLY	PK-PK	8	*	*
GREELEY	CENTRAL VALLEY PK - WOLBACH	PREK ONLY	PK-PK	8	*	*
5112221		HIGH		_		
GREELEY	SPALDING ACADEMY HIGH SCHOOL	SCHOOL	09-12	26	14	53.85%
GREELEY	SPALDING ACADEMY ELEM SCHOOL	ELEMENTARY	PK-08	46	21	45.65%
		HIGH				
HALL	GRAND ISLAND SENIOR HIGH SCHOOL	SCHOOL	09-12	2606	1764	67.69%
		MIDDLE				
HALL	BARR MIDDLE SCHOOL	SCHOOL	06-08	783	546	69.73%
HALL	NEWELL ELEMENTARY SCHOOL	ELEMENTARY	K -05	448	277	61.83%
		MIDDLE				
HALL	WALNUT MIDDLE SCHOOL	SCHOOL	06-08	765	606	79.22%
HALL	GATES ELEMENTARY SCHOOL	ELEMENTARY	K -05	376	212	56.38%
HALL	DODGE ELEMENTARY SCHOOL	ELEMENTARY	K -05	423	321	75.89%
HALL	HOWARD ELEMENTARY SCHOOL	ELEMENTARY	K -05	391	337	86.19%
HALL	JEFFERSON ELEMENTARY SCHOOL	ELEMENTARY	K -05	365	287	78.63%
HALL	LINCOLN ELEMENTARY SCHOOL	ELEMENTARY	PK-05	372	305	81.99%
HALL	WASMER ELEMENTARY SCHOOL	ELEMENTARY	K -05	369	270	73.17%
HALL	WEST LAWN ELEMENTARY SCHOOL	ELEMENTARY	K -05	302	194	64.24%
HALL	STARR ELEMENTARY SCHOOL	ELEMENTARY	PK-05	458	343	74.89%
HALL	KNICKREHM ELEMENTARY SCHOOL	ELEMENTARY	K -05	228	189	82.89%
HALL	SEEDLING MILE ELEM SCHOOL	ELEMENTARY	K -05	125	80	64.00%
HALL	STOLLEY PARK ELEM SCHOOL	ELEMENTARY	K -05	200	66	33.00%
HALL	SHOEMAKER ELEMENTARY SCHOOL	ELEMENTARY	K -05	430	186	43.26%
HALL	ENGLEMAN ELEMENTARY SCHOOL	ELEMENTARY	K -05	537	135	25.14%
		MIDDLE				
HALL	WESTRIDGE MIDDLE SCHOOL	SCHOOL	06-08	620	231	37.26%
HALL	EARLY LEARNING CENTER	PREK ONLY	PK-PK	272	189	69.49%
		HIGH				
HALL	NORTHWEST HIGH SCHOOL	SCHOOL	09-12	759	194	25.56%
HALL	CEDAR HOLLOW SCHOOL	ELEMENTARY	K -08	396	97	24.49%
HALL	1R ELEMENTARY	ELEMENTARY	K -08	185	52	28.11%
HALL	ST LIBORY ELEMENTARY SCHOOL	ELEMENTARY	K -08	131	50	38.17%
HALL	CHAPMAN ELEMENTARY SCHOOL	ELEMENTARY	PK-05	103	57	55.34%
		HIGH				
HALL	WOOD RIVER RURAL HIGH SCHOOL	SCHOOL	09-12	150	67	44.67%
		MIDDLE				
HALL	WOOD RIVER RURAL MIDDLE SCHOOL	SCHOOL	06-08	121	66	54.55%
HALL	WOOD RIVER ELEMENTARY SCHOOL	ELEMENTARY	PK-05	250	124	49.60%
HALL	DONIPHAN-TRUMBULL SECONDARY	SECONDARY	07-12	215	51	23.72%
HALL	DONIPHAN-TRUMBULL ELEMENTARY	ELEMENTARY	PK-06	245	59	24.08%
		HIGH				
HALL	CENTRAL CATHOLIC HIGH SCHOOL	SCHOOL	09-12	157	*	*
		MIDDLE				
HALL	CENTRAL CATHOLIC MIDDLE SCHOOL	SCHOOL	06-08	114	*	*
HALL						
TIALL	TRINITY LUTHERAN ELEM SCHOOL	ELEMENTARY	PK-08	167	40	23.95%

HALL	NEW HOPE CHRISTIAN ELEM SCHOOL	ELEMENTARY	K -07	47	*	*
		HIGH				
HALL	HEARTLAND LUTHERAN HIGH SCHOOL	SCHOOL	09-12	56	*	*
HAMILTON	GILTNER HIGH SCHOOL	SECONDARY	07-12	82	24	29.27%
HAMILTON	GILTNER ELEMENTARY SCHOOL	ELEMENTARY	PK-06	140	37	26.43%
HAMILTON	HAMPTON HIGH SCHOOL	SECONDARY	07-12	83	26	31.33%
HAMILTON	HAMPTON ELEMENTARY SCHOOL	ELEMENTARY	PK-06	94	23	24.47%
		HIGH				
HAMILTON	AURORA HIGH SCHOOL	SCHOOL	09-12	408	124	30.39%
		MIDDLE				
HAMILTON	AURORA MIDDLE SCHOOL	SCHOOL	06-08	281	112	39.86%
HAMILTON	AURORA ELEMENTARY SCHOOL	ELEMENTARY	K -05	524	196	37.40%
HAMILTON	AURORA PRESCHOOL	PREK ONLY	PK-PK	70	26	37.14%
HAMILTON	IMMANUEL LUTHERAN ELEM SCHOOL	ELEMENTARY	K -08	13	*	*
HAMILTON	HAMPTON LUTHERAN ELEM SCHOOL	ELEMENTARY	PK-06	32	*	*
HOLT	O'NEILL HIGH SCHOOL	SECONDARY	07-12	347	170	48.99%
HOLT	O'NEILL ELEMENTARY SCHOOL	ELEMENTARY	PK-06	446	244	54.71%
HOLT	EWING HIGH SCHOOL	SECONDARY	07-12	60	28	46.67%
HOLT	EWING ELEMENTARY SCHOOL	ELEMENTARY	PK-06	76	52	68.42%
HOLT	STUART HIGH SCHOOL	SECONDARY	07-12	81	57	70.37%
HOLT	STUART ELEMENTARY SCHOOL	ELEMENTARY	PK-06	105	55	52.38%
HOLT	CHAMBERS HIGH SCHOOL	SECONDARY	07-12	58	18	31.03%
HOLT	CHAMBERS ELEMENTARY SCHOOL	ELEMENTARY	K -06	77	22	28.57%
HOLT	WEST HOLT HIGH SCHOOL	SECONDARY	07-12	183	76	41.53%
HOLT	ATKINSON ELEMENTARY SCHOOL	ELEMENTARY	K -06	216	99	45.83%
HOLT	UNION ELEMENTARY SCHOOL	ELEMENTARY	01-06	4	*	*
HOLT	WEST HOLT LITTLE PAWS PRESCHOOL	PREK ONLY	PK-PK	44	20	45.45%
HOLT	ST MARY'S HIGH SCHOOL	SECONDARY	07-12	78	*	*
HOLT	ST MARY'S ELEMENTARY SCHOOL	ELEMENTARY	PK-06	108	20	18.52%
HOLT	ST JOSEPH'S ELEMENTARY SCHOOL	ELEMENTARY	PK-08	55	10	18.18%
HOWARD	ST PAUL ELEMENTARY SCHOOL	ELEMENTARY	PK-06	403	132	32.75%
HOWARD	ST PAUL JR/SR HIGH SCHOOL	SECONDARY	07-12	300	117	39.00%
HOWARD	CENTURA SECONDARY SCHOOL	SECONDARY	07-12	221	80	36.20%
HOWARD	CENTURA ELEMENTARY SCHOOL	ELEMENTARY	PK-06	272	104	38.24%
HOWARD	ELBA SECONDARY SCHOOL	SECONDARY	07-12	51	35	68.63%
HOWARD	ELBA ELEMENTARY SCHOOL	ELEMENTARY	PK-06	69	45	65.22%
KEYA						
PAHA	KEYA PAHA COUNTY HIGH SCHOOL	SECONDARY	07-12	50	28	56.00%
KEYA						
PAHA	SPRING VIEW ELEMENTARY SCHOOL	ELEMENTARY	K -06	41	21	51.22%
LOUP	LOUP COUNTY HIGH SCHOOL	SECONDARY	07-12	26	16	61.54%
LOUP	LOUP COUNTY ELEMENTARY SCHOOL	ELEMENTARY	PK-06	48	17	35.42%
		HIGH				
MERRICK	CENTRAL CITY HIGH SCHOOL	SCHOOL	09-12	227	103	45.37%
		MIDDLE				
MERRICK	CENTRAL CITY MIDDLE SCHOOL	SCHOOL	05-08	214	102	47.66%
MERRICK	CENTRAL CITY ELEMENTARY SCHOOL	ELEMENTARY	PK-04	326	149	45.71%
MERRICK	PALMER JUNIOR-SENIOR HIGH	SECONDARY	07-12	129	58	44.96%
MERRICK	PALMER ELEMENTARY SCHOOL	ELEMENTARY	PK-06	197	97	49.24%
MERRICK	NEBRASKA CHRISTIAN HIGH	HIGH	09-12	100	*	*

		SCHOOL				
		MIDDLE				
MERRICK	NEBR CHRISTIAN JR HIGH SCHOOL	SCHOOL	07-08	32	*	*
MERRICK	NEBRASKA CHRISTIAN ELEMENTARY	ELEMENTARY	PK-06	63	*	*
NANCE	FULLERTON HIGH SCHOOL	SECONDARY	07-12	146	61	41.78%
NANCE	FULLERTON ELEMENTARY SCHOOL	ELEMENTARY	PK-06	168	68	40.48%
NANCE	TWIN RIVER SR HIGH SCHOOL	SECONDARY	07-12	178	54	30.34%
NANCE	TWIN RIVER ELEM-GENOA	ELEMENTARY	PK-06	254	94	37.01%
		HIGH				
PLATTE	COLUMBUS HIGH SCHOOL	SCHOOL	09-12	1309	640	48.89%
		MIDDLE				
PLATTE	COLUMBUS MIDDLE SCHOOL	SCHOOL	05-08	1165	639	54.85%
PLATTE	EMERSON ELEMENTARY SCHOOL	ELEMENTARY	PK-04	312	144	46.15%
PLATTE	NORTH PARK ELEMENTARY	ELEMENTARY	PK-04	354	190	53.67%
PLATTE	WEST PARK ELEMENTARY	ELEMENTARY	PK-04	262	149	56.87%
PLATTE	LOST CREEK ELEMENTARY SCH	ELEMENTARY	PK-04	386	155	40.16%
PLATTE	CENTENNIAL ELEMENTARY SCHOOL	ELEMENTARY	PK-04	396	232	58.59%
	PATHWAYS BEYOND/EARLY STEPS TO					
PLATTE	SUCCESS BUILDING	PREK ONLY	PK-PK	20	*	*
		HIGH				
PLATTE	LAKEVIEW HIGH SCHOOL	SCHOOL	09-12	297	98	33.00%
PLATTE	SHELL CREEK ELEMENTARY SCHOOL	ELEMENTARY	K -06	336	122	36.31%
PLATTE	PLATTE CENTER ELEMENTARY SCHOOL	ELEMENTARY	K -06	130	77	59.23%
		MIDDLE				
PLATTE	LAKEVIEW JUNIOR HIGH SCHOOL	SCHOOL	07-08	133	56	42.11%
PLATTE	HUMPHREY JR-SR HIGH SCHOOL	SECONDARY	07-12	113	28	24.78%
PLATTE	HUMPHREY ELEMENTARY SCHOOL	ELEMENTARY	PK-06	151	24	15.89%
PLATTE	LINDSAY ATTENDANCE CENTER	ELEMENTARY	K -K	10	*	*
PLATTE	IMMANUEL LUTHERAN ELEM SCHOOL	ELEMENTARY	PK-08	158	20	12.66%
PLATTE	ST ANTHONY ELEMENTARY SCHOOL	ELEMENTARY	PK-06	107	33	30.84%
PLATTE	ST BONAVENTURE ELEM SCHOOL	ELEMENTARY	PK-06	236	42	17.80%
PLATTE	ST ISIDORE ELEMENTARY SCHOOL	ELEMENTARY	PK-06	279	11	3.94%
PLATTE	SCOTUS CENTRAL CATHOLIC	SECONDARY	07-12	351	47	13.39%
PLATTE	HOLY FAMILY HIGH SCHOOL	SECONDARY	07-12	37	*	*
PLATTE	HOLY FAMILY ELEMENTARY SCHOOL	ELEMENTARY	PK-06	74	11	14.86%
PLATTE	ST FRANCIS HIGH SCHOOL	SECONDARY	07-12	89	13	14.61%
PLATTE	ST FRANCIS ELEMENTARY SCHOOL	ELEMENTARY	K -06	123	12	9.76%
PLATTE	ST JOHN LUTHERAN ELEM SCHOOL	ELEMENTARY	PK-08	43	*	*
PLATTE	CHRIST LUTHERAN ELEMENTARY SCH	ELEMENTARY	PK-08	43	*	*
PLATTE	COLUMBUS CHRISTIAN SCHOOL	ELEMENTARY	PK-08	22	*	*
ROCK	ROCK COUNTY HIGH SCHOOL	SECONDARY	07-12	115	50	43.48%
ROCK	PONY LAKE SCHOOL	ELEMENTARY	K -08	6	*	*
ROCK	BASSETT GRADE SCHOOL	ELEMENTARY	PK-06	127	57	44.88%
SHERMAN	LOUP CITY HIGH SCHOOL	SECONDARY	07-12	145	75	51.72%
SHERMAN	LOUP CITY ELEMENTARY SCHOOL	ELEMENTARY	PK-06	196	82	41.84%
SHERMAN	LITCHFIELD HIGH SCHOOL	SECONDARY	07-12	43	22	51.16%
SHERMAN	LITCHFIELD ELEMENTARY SCHOOL	ELEMENTARY	PK-06	77	35	45.45%
VALLEY	ORD JR-SR HIGH SCHOOL	SECONDARY	07-12	261	107	41.00%
VALLEY	ORD ELEMENTARY SCHOOL	ELEMENTARY	PK-06	339	148	43.66%
VALLEY	ARCADIA HIGH SCHOOL	SECONDARY	07-12	46	24	52.17%

2020 Community Assessment

Central Nebraska Community Action Partnership, Inc.

VALLEY	ARCADIA ELEMENTARY SCHOOL	ELEMENTARY	PK-06	82	41	50.00%
VALLEY	ST MARY'S ELEMENTARY SCHOOL	ELEMENTARY	K -06	40	18	45.00%
WHEELER	WHEELER CENTRAL HIGH	SECONDARY	07-12	35	14	40.00%
WHEELER	WHEELER CENTRAL ELEMENTARY #45	ELEMENTARY	PK-06	70	31	44.29%

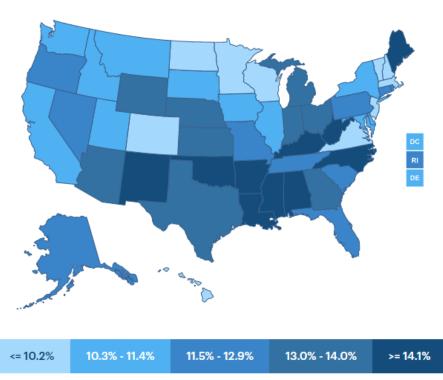
Local food banks

In 2017, SNAP lifted <u>3.4 million people</u> out of poverty. Despite this success, it is estimated that <u>27 percent</u> of food-insecure individuals live in a household that does not qualify for assistance.

GOALS

Healthy People 2020 recognize and affirms the need for more secure food through their <u>goals</u> of eliminating very low food security among children and reducing the percentage of all households facing food insecurity.

Percentage of households unable to provide adequate food for one or more household members due to lack of resources



 $https://www.americashealthrankings.org/explore/health-of-women-and-children/measure/food_insecurity_household/state/NE\\$

If you live in a rural community, you understand that our grocery store is arguably one of the most important businesses in town.

Our store means more than just ready access to healthy food. Rural grocery stores provide jobs and generate tax revenue. Without a local grocery, the revenue that our food purchases generate goes elsewhere.

Having a grocery store also helps attract new residents to a town. Similar to a school, a post office, restaurants and churches, a grocery store makes a community a more attractive place to live. Grocery stores can also be social places where you run into neighbors in the produce aisle, introduce yourself to someone new in town, or catch up on local happenings with the cashier. Not all small towns are as lucky as we are. The lack of a grocery store means residents have less access to healthy fresh fruits and vegetables, and the elderly and others without reliable transportation will tend to buy their food at convenience stores with more limited selections or go for longer periods of time between visits to the store.

These are just some of the reasons why the local grocery store is a crucial part of any viable community.

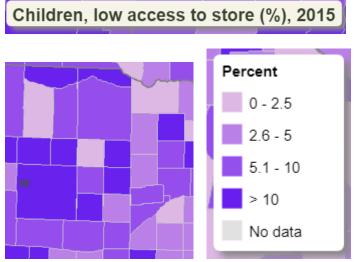
https://www.cfra.org/renewrural/grocery

Food environment factors—such as store/restaurant proximity, food prices, food and nutrition assistance programs, and community characteristics—interact to influence food choices and diet quality. These interactions are complex and more research is needed to identify causal relationships and effective policy interventions.

The objectives of the Atlas are:

to assemble statistics on food environment indicators to stimulate research on the determinants of food choices and diet quality, and

to provide a spatial overview of a community's ability to access healthy food and its success in doing so.



Last updated: Tuesday, August 27, 2019

https://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas/

What Hunger Looks Like in Nebraska

In Nebraska, 223,170 people are struggling with hunger - and of them 82,370 are children.

1 in 9 people



struggles with hunger.



People facing hunger in Nebraska are estimated to report needing

\$107,760,000

more per year to meet their food needs.

The average cost of a meal in Nebraska is \$2.83. Data from Feeding America's Map the Meal Gap 2019 study. Learn more >

Supplemental Nutrition Assistance Program (SNAP) in Nebraska

Charitable programs are unable to fully support those struggling with hunger. The combination of charity and government assistance programs are necessary to help bridge the meal gap.

SNAP, formerly food stamps, provides temporary help for people going through hard times – providing supplemental money to buy food until they can get back on their feet.

In Nebraska,

48.0% of households receiving SNAP benefits have

\$229,206,174 distributed through SNAP generated

\$389,650,496

in economic activity*.

*Economists estimate that every dollar a household redeems through SNAP generates about \$1.70 in economic activity.

DIVERSITY

Three Major Trends in Population

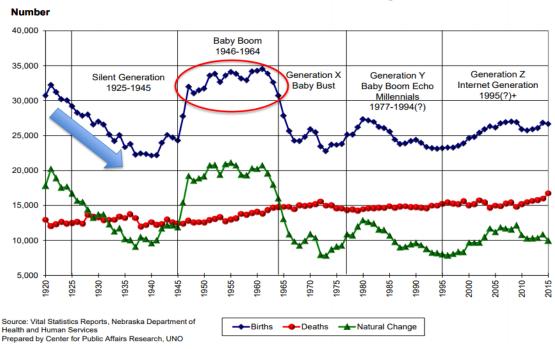
- 1. The state's population is getting older and will continue to age.
- 2. The state's population is becoming more racially and ethnically diverse
- 3. Nebraska's population is becoming more and more concentrated in its most populous counties.

Age and Gender



The baby boom in the 1950s has had a ripple effect every 30 years (1980, 2010); likewise low births in the late 1930s have led to lows every 30 years (late 60s, mid 90s)

Nebraska Births, Deaths, and Natural Change: 1920-2015





Age it's only a number!

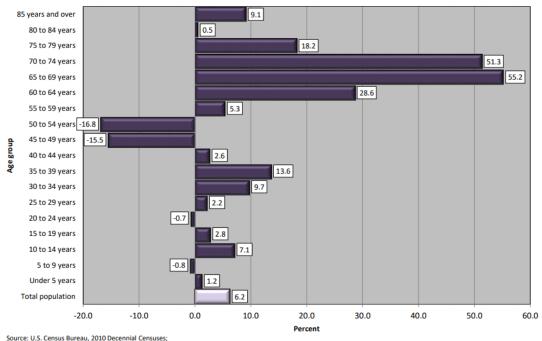
2020 Community Assessment

	Central Nebraska Community Action Partnership, Inc.							
Central Nebrask	a Commur 0 to	nity Action I 0 to	artnershi 5 to	p, Inc. 5-	18 to	18 to	Over	Over
Report Area	4Male	4Female	17Male	17Female	64Male	64Female	64Male	64Female
Report Area	6,292	5,939	17,019	16,057	52,272	49,830	12,217	17,084
Blaine County,	,	,	,	,	,	,	,	,
NE	16	20	47	61	188	140	56	51
Boone County,								
NE	178	163	449	448	1,571	1,402	389	647
Boyd County,					,	,		
NE	66	68	180	163	525	484	223	267
Brown County,								
NE ,,	64	72	244	245	795	850	303	416
Colfax County,								
NE	490	448	1,133	1,067	3,211	2,776	538	759
Custer County,			•	•	,	,		
NE	311	323	934	953	3,063	2,936	875	1,241
Garfield					,	,		,
County, NE	53	44	147	160	530	505	222	277
Greeley								
County, NE	71	69	222	226	650	626	249	306
Hall County,								
NE	2,369	2,245	6,184	5,773	18,246	17,667	3,386	4,700
Hamilton	,	, -	-, -	-,	-,	,	-,	,
County, NE	260	241	900	825	2,664	2,600	662	892
Holt County,					,	,		
NE ,,	352	311	934	883	2,899	2,805	845	1,216
Howard					,	,		ŕ
County, NE	186	183	610	527	1,836	1,703	518	720
Keya Paha					,	,		
County, NE	17	16	48	67	236	170	70	96
Loup County,								
NE	12	24	29	40	152	152	62	68
Merrick								
County, NE	231	228	669	648	2,288	2,205	596	858
Nance County,								
NE	108	88	320	301	1,038	1,012	258	425
Platte County,								
NE	1,220	1,181	3,221	2,937	9,730	9,273	2,053	2,824
Rock County,								
NE	25	22	95	85	418	398	131	214
Sherman								
County, NE	90	63	246	268	831	785	304	452
Valley County,								
NE	149	123	348	324	1,156	1,117	400	548
Wheeler								
County, NE	24	7	59	56	245	224	77	107
			172,72		576,21			
Nebraska	67,076	63,504	0	164,301	4	565,946	106,069	151,573
	10,154,	9,712,93	27,455	26,289,6	98,851,	99,913,79	18,244,7	25,876,50
United States	024	6	,869	09	301	1	16	4



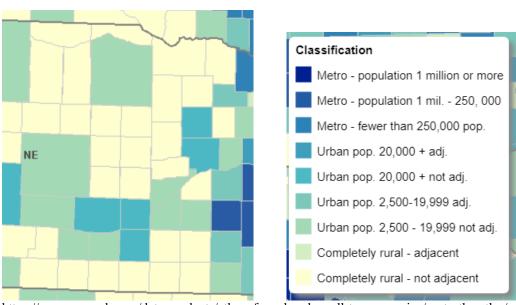
Population change by age projected for this 2010s decade

Percentage Change in Nebraska Population by 5-year Age Group: 2010-20



Projections by Center for Public Affairs Research, UNO, Aug. 2013

Rural Populations



https://www.ers.usda.gov/data-products/atlas-of-rural-and-small-town-america/go-to-the-atlas/

Rural Population per					% change 10-
County Change	1990	2000	2010	2018	18
Nebraska	1,578,417	1,711,230	1,826,305	1,929,268	5.60%
Blaine County	675	583	478	476	-0.40%
Boone County	6,667	6,259	5,505	5,239	-4.80%
Boyd County	2,835	2,443	2,099	1,955	-6.90%
Brown County	3,657	3,525	3,143	2,973	-5.40%
Colfax County	9,139	10,434	10,515	10,881	3.50%
Custer County	12,270	11,794	10,943	10,840	-0.90%
Garfield County	2,141	1,902	2,049	1,987	-3.00%
Greeley County	3,006	2,714	2,538	2,356	-7.20%
Hall County	48,925	53,577	58,607	61,607	5.10%
Hamilton County	8,862	9,408	9,114	9,280	1.80%
Holt County	12,599	11,544	10,435	10,178	-2.50%
Howard County	6,057	6,561	6,274	6,468	3.10%
Keya Paha County	1,029	985	824	810	-1.70%
Loup County	683	712	628	618	-1.60%
Merrick County	8,062	8,189	7,855	7,733	-1.60%
Nance County	4,275	4,042	3,735	3,532	-5.40%
Platte County	29,820	31,574	32,237	33,363	3.50%
Rock County	2,019	1,754	1,528	1,360	-11.00%
Sherman County	3,718	3,312	3,152	3,038	-3.60%
Valley County	5,169	4,651	4,260	4,190	-1.60%
Wheeler County	948	888	818	805	-1.60%

 $https://data.ers.usda.gov/reports.aspx?ID=17827\#Pa4fa00232c4146a1b5c60e9df8426b61_3_38iT2$

Family

Ask any Nebraskan and they will tell you, hands down, that this corner of the country is the best: they have the best people, they have the best corn, and they have the best places for families to live. Not surprising, considering Nebraska is the fifth best state in the country to raise a family.

https://www.homesnacks.net/best-cities-for-families-in-nebraska-1211114/

Family types

∅ Nebraska Households by Type

Count ▼	Average Size	Owned
754.063	2.46	66.1
379.707	3.11	83.9
270.029	1.25	47.9
72.877	3.2	45.4
31.450	3.18	55.3
	754.063 379.707 270.029 72.877	754.063 2.46 379.707 3.11 270.029 1.25 72.877 3.2

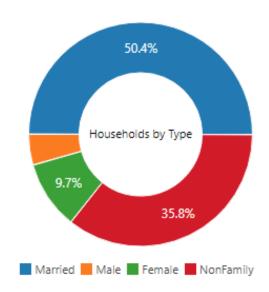
3.05 Average Family Size @

2.46 Average Household Size @

5.8% Unmarried (Opposite Sex) @

0.2% Unmarried (Same Sex) @

Source: US Census 2018 ACS 5-Year Survey (Table S1101)



https://worldpopulation review.com/states/nebraska-population/

Families with Children

Families Location	Total	Percent of total households					Average population			
		Family households			Nonfamily households			per-		
		Total	With own children	Туре	of family	Total		holder alone	Household	Family
			under 18 years	Married couple family	Female household no husband present		Total	65 years and over		
United	105,480,	68.1	32.8	51.7	12.2	31.9	25.8	9.2	2.59	3.14
States Nebraska	666,184	66.6	32.7	54.2	9.1	33.4	27.6	10.7	2.49	3.06
Blaine Co.	238	71	30.3	66	2.5	29	26.9	13.9	2.45	2.98
Boone Co.	2,454	69.3	33.9	60.8	5.5	30.7	29.1	16.5	2.5	3.11
Boyd Co.	1,014	66.1	29	59.4	3.7	33.9	32	19.6	2.36	2.98
Brown Co.	1,530	65.1	26.6	57	5.9	34.9	31.6	16.9	2.27	2.86
Colfax Co.	3,682	70.4	35.6	58.9	7.1	29.6	25.7	15.4	2.8	3.31
Custer Co.	4,826	68.8	30.3	60.9	5.4	31.2	28.9	15	2.39	2.95
Garfield Co.	813	65.1	26.1	59.7	3.6	34.9	32.7	20	2.27	2.88
Greeley Co.	1,077	68.2	29.3	59	6.4	31.8	30.5	18.8	2.46	3.08
Hall Co.	20,356	69.2	34.8	55.9	9.7	30.8	25.5	10.5	2.57	3.08
Hamilton Co.	3,503	76.4	37.3	67.4	5.9	23.6	21.1	10.1	2.64	3.07
Holt Co.	4,608	68.8	31.6	60.7	5.6	31.2	28.7	15.1	2.46	3.06
Howard Co.	2,546	70.6	33.8	61	6.2	29.4	26	15	2.56	3.09
Keya Paha Co.	409	71.4	24.9	64.3	4.4	28.6	26.2	13.9	2.4	2.91
Loup Co.	289	71.6	31.8	64.7	4.2	28.4	27	17	2.46	2.99
Merrick Co.	3,209	71.9	33.3	61.1	6.5	28.1	25	13.1	2.51	2.99
Nance Co.	1,577	70.2	32.8	60.5	5.6	29.8	27.6	13.8	2.49	3.05
Platte Co.	12,076	70.1	36.1	59.2	7.6	29.9	25.9	11.4	2.59	3.14
Rock Co.	763	65.7	26.9	57.4	6.4	34.3	31.3	15.9	2.26	2.84
Sherman Co.	1,394	67.1	27.6	59.2	5.7	32.9	30.4	16.7	2.34	2.91
Valley Co.	1,965	66.1	28	58.7	5.1	33.9	31	17.9	2.32	2.93
Wheeler Co.	352	69.3	31.8	62.8	3.1	30.7	29	14.8	2.52	3.1

Raising a grandchild, niece or nephew when I should be worrying about where to take my retirement vacation? Is that something I even want to think about? Financial challenges for the kids, the loss of a parent, divorce, or for other reasons we sometimes need to step up and help out. Whether it is part-time or full time responsibility we do what we need to do. Support makes

all the difference for the growing number of families (young or old) that give up their leisure time, traveling and independence. Statistics show:

Children thrive in a stable and loving home with a family that offers support in a safe environment. Research tells us that the relationships that children have with the adults in their lives are an extremely important component of successful development. Without these relationships, children have an increased risk of lasting health, behavioral, and psychosocial issues.

Every child needs a loving family to guide them into adulthood. When parents aren't able to provide that guidance, the community steps in to ensure that the future will be led by generations of happy and healthy adults. Child welfare systems should function to help families by providing the necessary services and supports for families to raise their children. In most cases, relatives and other trusted adults step forward to provide care for children before child welfare involvement is necessary. The practice of nonparental caregiving has deep and cross-cultural roots in human history, and it is currently estimated that about 2.7 million American children live in such arrangements.

Every story is unique, but the experience of kinship care can be very different from typical foster care providers. Kinship care often arises before adequate financial and emotional preparations for raising a child can be made. Historically, kinship caregivers have been older, poorer, single, less educated, and underemployed as compared to families with at least one parent present. The typical kinship caregiver is also more likely to be living on a fixed income or struggling with

The typical kinship caregiver is older, struggles with financial stability, and is a racial or ethnic minority. Many are retirees living on a fixed income with chronic health issues.

chronic health problems, which exacerbate the lifechanging challenges of unexpectedly raising a child. Additionally, unlike traditional foster parents, kinship caregivers often have strong preexisting relationships with the birth parents, and may need to navigate complex family dynamics while balancing the best interests of the child with the interests of other family members.

Today, there are approximately 14,000 children in

Nebraska who are living with an informal kinship family. While there is limited data on kinship families, some data on grandparent-headed households provides insight into the needs of kinship families.

In Nebraska:

✓ Median family income is approximately 28% lower among kinship families (\$42,708) than all families (\$58,926)

2020 Community Assessment

Central Nebraska Community Action Partnership, Inc.

- ✓ Nearly 70% have had full-time care of their children for at least 1 year; 32% have had full-time care of their children for 5 or more years
- ✓ About 31% are single-parent caregivers
- ✓ Families of color are overrepresented and about 52% are racial and ethnic minorities;
 - o Black or African Americans are twice as likely to be a kinship caregiver, while American Indians are nearly six times as likely to be a kinship caregiver
- ✓ Nearly 63% are female
- ✓ Nearly 12% reported living with some disability of their own

Kinship caregivers provide an invaluable service to the larger community by nurturing and caring for children who are unable to remain in the care of their parents. In spite of this, there is a lack of adequate supports available to kinship families in Nebraska.

https://voicesforchildren.com/wp-content/uploads/2016/06/Kinship-Care-Issue-Brief.pdf

The Children

- 11,000 (2%) children live with a relative with no parent present.
- 28,206 (6.1%) children under 18 live in homes where householders are grandparents or other relatives.
 - 20,808 (4.5%) of these children live with grandparents.
 - 7,398 (1.6%) of these children live with other relatives.

The Grandparents

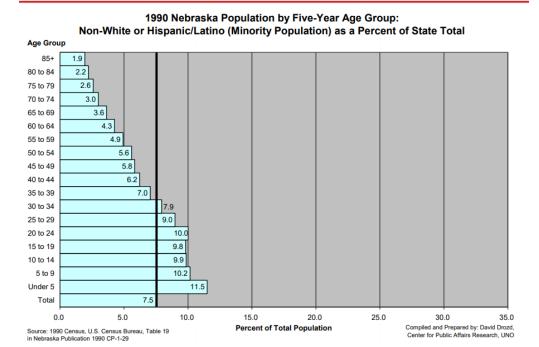
- 10,859 grandparents are householders responsible for their grandchildren who live with them. Of these:
 - 4,192 (38.6%) do not have parents present.
 - 7,334 (67.5%) are under age 60.
 - 7,666 (70.6%) are in the workforce.
 - 1,618 (14.9%) are in poverty.
 - **2**,291 (21.1%) have a disability.
 - **3**,095 (28.5%) are unmarried.
 - Race/Ethnicity:
 - > 7,949 (73.2%) are white (not Hispanic or Latino)
 - > 706 (6.5%) are black or African American
 - > 1,629 (15.0%) are Hispanic or Latino origin
 - > 98 (0.9%) are Asian
 - ➤ 456 (4.2%) are American Indian or Alaska Native
 - > 0 (0.0%) are Native Hawaiian or other Pacific Islander
 - > 109 (1.0%) are multiracial
 - > 641 (5.9%) are some other race

http://www.grandfamilies.org/Portals/0/State%20Fact%20Sheets/Grandfamilies-Fact-Sheet-Nebraska091519.pdf

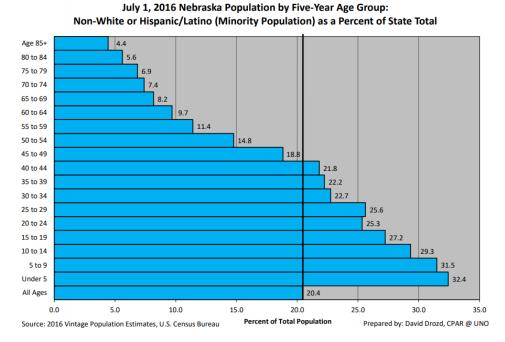
Minorities



Minorities had low percentages in 1990 before the inmigration wave started



The minority percentage steadily increases each year, especially among children



The 2018 Census population counts also indicated that some aspects of the racial composition of Nebraska changed. From 2010 through 2018, the white population increased by only 3.3 percent, while black and American Indian populations changed by 14.9 percent and 22.4 percent

respectively, and the "two or more races" demographic group changed by 35.3 percent. While the population estimates were low in absolute terms, the Asian population outpaced the growth of any other race, rising from 33,322 persons in 2010 to 52,343 persons by 2018, or by 57.1 percent, as shown below in Table I.3.

Population Estimates by Race and Ethnicity State of Nebraska 2010 Census Data and 2018 Intercensal Estimates						
Race	2010 Census	% of Total	2018 Estimates	% of Total	% Change 10-18	
White	1,649,264	90.3%	1,703,446	88.7%	3.3%	
Black	85,971	4.7%	98,757	5.1%	14.9%	
American Indian	23,418	1.3%	28,663	1.5%	22.4%	
Asian	33,322	1.8%	52,343	2.7%	57.1%	
Native Hawaiian & Pacific Islander	2,061	0.1%	2,338	0.1%	13.4%	
Two or More Races	32,305	1.8%	43,721	2.3%	35.3%	
Total	1,826,341	100.0%	1,920,076	100.0%	5.6%	
Hispanic (Ethnicity)	167,405	9.2%	215,872	11.2%	29.0%	

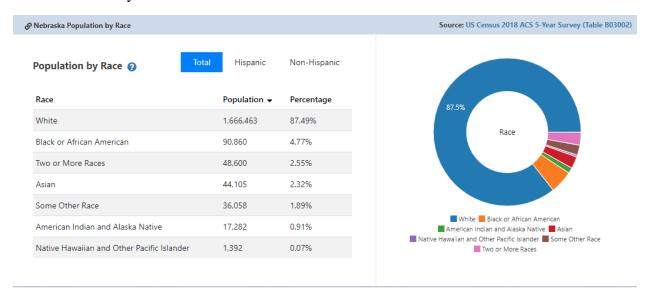
Another significant demographic change was shown in the Hispanic population, which increased by 29 percent from 2010 through 2018, to approximately 215,872 people. The Metropolitan Region had the largest Hispanic population at 91,347 people, an increase of 31 percent over the 8- year period. However, this growth rate was less than the Central Region. While this region had a much smaller Hispanic population, it grew by 75 percent from 2010 through 2018.

The change in race and ethnicity between 2010 and 2018 is shown in Table I.5. The total nonHispanic population was 1,701,479 persons in 2018 compared to the Hispanic population of 03,281 persons.

	Table I	l. 5		
	tion by Race State of Neb Census & 2018	raska		
Race	2010 C	ensus	2018 Five-	Year ACS
Race	Population	% of Total	Population	% of Total
	Non-Hispa	anic		
White	1,499,753	90.4%	1,512,314	88.9%
Black	80,959	4.9%	88,442	5.2%
American Indian	14,797	0.9%	13,918	0.8%
Asian	31,919	1.9%	43,839	2.6%
Native Hawaiian/ Pacific Islander	966	0.1%	1,091	0.1%
Other	2,116	0.1%	1,982	0.1%
Two or More Races	28,426	1.7%	39,893	2.3%
Total Non-Hispanic	1,658,936	100.0%	1,701,479	100.0%
	Hispani	ic		
White	73,085	43.7%	154,149	75.8%
Black	1,926	1.2%	2,418	1.2%
American Indian	3,630	2.2%	3,364	1.7%
Asian	374	0.2%	266	0.1%
Native Hawaiian/ Pacific Islander	313	0.2%	301	0.1%
Other	76,993	46.0%	34,076	16.8%
Two or More Races	11,084	6.6%	8,707	4.3%
Total Hispanic	167,405	100.0	203,281	100.0%
Total Population	1,826,341	100.0%	1,904,760	100.0%

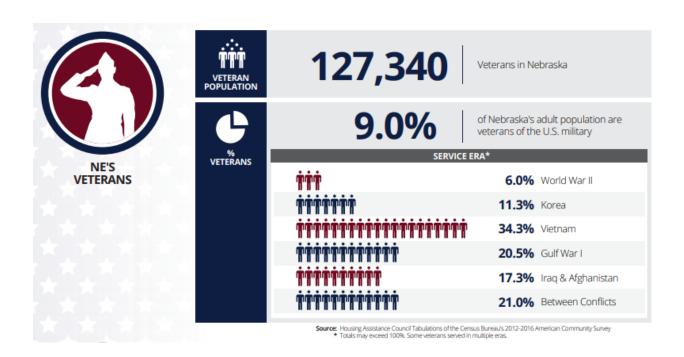
https://www.westernes.com/nepdfs/current/Volume%20I.pdf

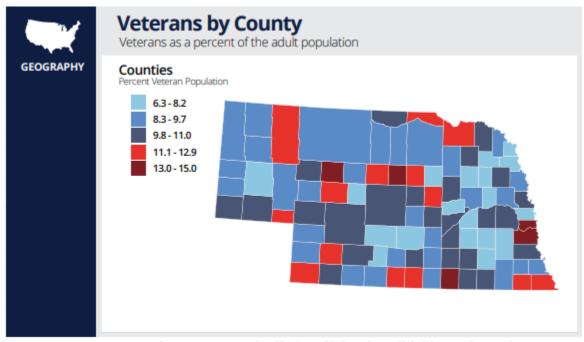
Race and Ethnicity



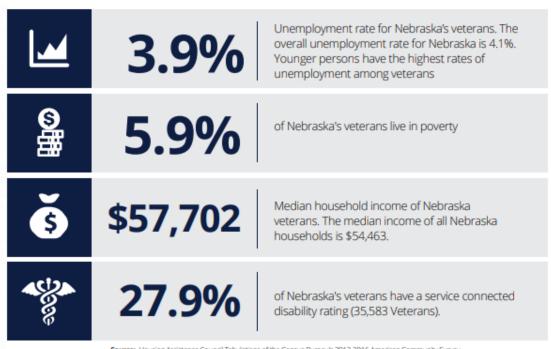
https://worldpopulationreview.com/states/nebraska-population/

Veterans

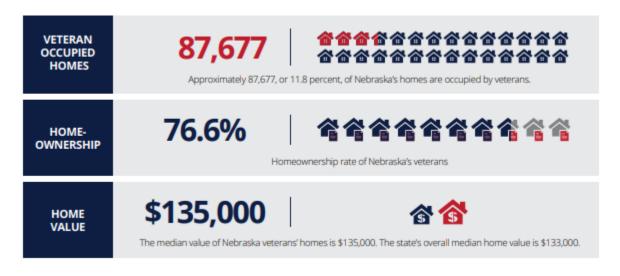




Source: Housing Assistance Council Tabulations of the Census Bureau's 2012-2016 American Community Survey

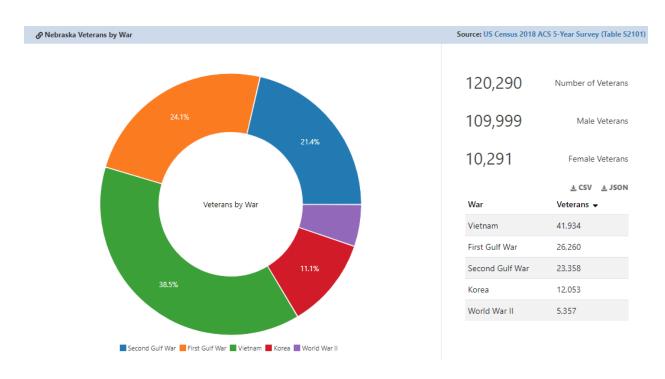


Source: Housing Assistance Council Tabulations of the Census Bureau's 2012-2016 American Community Survey



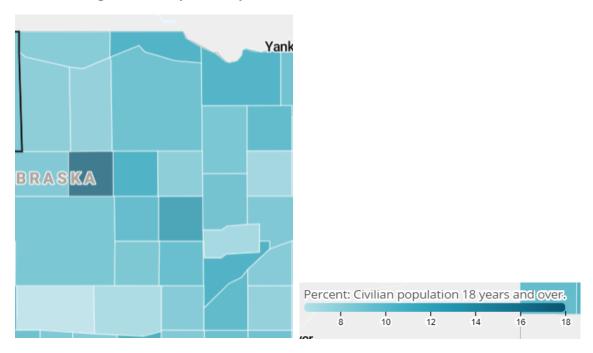
http://veterans data.info/states/2310000/NEBRASKA.pdf

Veteran Population by Conflict



https://worldpopulationreview.com/states/nebraska-population/

Veteran Population: by County (2011 - 2015)



https://www.livestories.com/statistics/nebraska/veteran-demographics

EDUCATION

School Information

There are 4,045 public and private PK-12 schools in Nebraska. https://www.greatschools.org/nebraska/

Did You Know...The overwhelming evidence shows that children who enter kindergarten behind are likely to remain behind throughout their educational careers and beyond. These gaps in achievement are difficult and expensive to close with K-12 education alone. We can help ensure children show up to kindergarten ready to learn by providing our youngest learners with options to access high-quality early childhood programs from ages zero to five—where they can develop the full range of skills necessary to be successful in school and life.

Every week in the United States, childcare providers care for nearly 11 million children younger than age 5 whose parents are working. On average, these children spend 36 hours a week in child care, and one quarter (nearly 3 million) are in multiple childcare arrangements due to the traditional and nontraditional working hours of their parents. Source: Child Care Aware of America

High quality, dependable, affordable, and accessible child care for children of all ages is more important than ever as we continue to see growth in both the opportunity and achievement gaps children across the country face.

An analysis by the President's Council of Economic Advisers describes the economic returns to investments in childhood development and early education. Some of these benefits, such as increases in parental earnings and employment, are realized immediately, while other benefits, such as greater educational attainment and earnings, are realized later when children reach adulthood.

Their report, The Economics of Early Childhood Investments, makes the following points:

High-quality early education for all would narrow the achievement gap. Dozens of preschool programs have been rigorously examined since the 1960s. Overall, across all studies and time periods, early childhood education increases cognitive and achievement scores by 0.35 standard deviations on average, or nearly half the black-white difference in the kindergarten achievement gap. Since higher income children are currently more likely to have access to high-quality early education, expanding access to all would narrow the achievement.

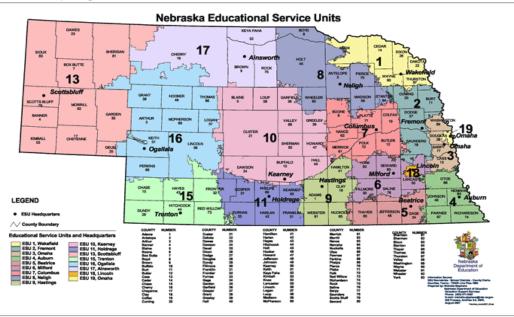
Early childhood education can boost children's earnings later in Long-term analyses suggest that early childhood education can increase earnings in adulthood by 1.3 to 3.5 percent. These earnings gains alone are bigger than the costs of such programs.

Earnings gains from increased enrollment in early childhood education would provide benefits that outweigh the costs of the program. Researchers estimate the gain in income for recent statewide programs over a child's career to be \$9,166 to \$30,851, after taking out the cost of the program. If all families were able to enroll their children in preschool at the same rate as high-income families, enrollment would increase nationwide by about 13 percentage points and yield net present value of \$4.8 billion to \$16.1 billion per cohort from earnings gains alone after accounting for the cost of the program. In the long run, these earnings gains translate into an increase in GDP of 0.16 to 0.44 percent.

https://everychildmatters.org/the-importance-of-early-childhood-education/

Nebraska ESUs

There are 17 Educational Service Units operating within the state of Nebraska. Their individual contact information can be found below.



http://www.esucc.org/nebraska-esus/

The CNCAP Service area utilizes ESU # 17, 10, 8 and 7 for service needs within our area.

Nebraska Department of Education - Data. Research. Evaluation

ebraska Department of Education - D	December 19, 2019				
2019-2020 Number of Districts/Systems					
Class of District	Number of Districts	Number of Districts Participating in a Unified System			
ESU	17				
Interim Program Schools	13				
Public	244	7			

Public	244	7
State-Operated	5	
Non Public	182	
STATE TOTAL*	431*	7

^{*} State Total:

Does not include districts that participate in a Unified System. (7)
 Does not include ESU"s (17)
 Does not include Interim Program Schools (13)

2019-2020 Number of Districts/Systems				
Class of District	Number of Districts	Number of Districts Participating in A Unified System		
ESU	17			
Interim Program Schools	13			
Class 3	242	7		
Class 4	1			
Class 5	1			
PUBLIC TOTAL	244	7		
State Operated	5			
Non Public	182			
STATE TOTAL*	431*	7		

^{*} State Total:

- 1) Does not include districts that participate in a Unified System (7)
- 2) Does not include ESU"s (17) 3) Does not include Interim Program Schools (13)

2019-2020 Number of Programs and Schools

December 19, 2019

Number of Programs (Programs do not report student data)

5 - ESU

15 – Interim

29 - Alternative

25 - Special Education

5 - Focus

79 - TOTAL PROGRAMS

2019-2020 Number of Schools						
Class	Prekindergarten	Elementary	Middle School	High School	Secondary	TOTAL
ESU Schools	14	0	0	0	0	14
Public						
Class 3	42	442	98	81	169	832
Class 4	6	39	12	6	0	63
Class 5	6	63	12	7	0	88
PUBLIC TOTAL	54	544	122	94	169	983
Special Purpose (State Operated)	0	0	1	3	2	6
Non Public Systems	1	158	15	28	15	217
STATE TOTAL*	69	702	138	125	186	1220*

^{*}State Total of Schools does not include Programs (79)

2018-2019

Nebraska Public Schools State Snapshot

Demographics



Student Membership

325,984



Teachers

23,702

Program Participation



English Learners

7%



Free/Reduced Lunch

45%



Gifted

13%



Special Education

15%

Metrics



Attendance Rate

94%

Performance



NSCAS English Language Arts

52%

NSCAS Mathematics

52%



NSCAS Science



NSCAS ACT (11th Grade)

51% 52% 53%

ELA Math

Science

Financial



State Aid (TEEOSA)

\$998.73M



Per Pupil Expenditures

\$12,614



Other State Receipts

\$456.37M



Expenditures

\$3.85B

Age	Number of Exempt Students
5	279
6	829
7	820
8	830
9	792
10	787
11	765
12	739
13	746
14	658
15	631
16	572
17	471
Total	8,919

Home schooling numbers 2017/2018 in Nebraska

Dual enrollment is when a student takes some courses at the local public or private school while also being home schooled. Of the total 8,919 students, 408 were marked as dual enrolled for the 2017/18 school year. This information is not verified against school enrollment records.

https://cdn.education.ne.gov/wp-content/uploads/2019/04/1718ESP_Annual-Report.pdf

Districts

District	District Name	Class							Grad	e Level							Tot
Code			PK	K	1	2	3	4	5	6	7	8	9	10	11	12	1
05-0071	SANDHILLS PUBLIC SCHOOLS	2	2	7	8	3	5	7	8	5	9	4	6	10	10	6	9
03-0071	PUBLIC TOTAL	3	2	7	8	3	5	7	8	5	9	4	6	10	10	6	9
	BLAINE COUNTY TOTAL		2	7	8	3	5	7	8	5	9	4	6	10	10	6	9
		_					· -	<u> </u>				_	-				_
06-0001	BOONE CENTRAL SCHOOLS	3	75	35	47	35		51	37	36	33	40	45	59	50		-
06-0017	ST EDWARD PUBLIC SCHOOLS	3	10	17	12	12	13	11	11	13	14	16	18	13	7	10) 1
06-0075	RIVERSIDE PUBLIC SCHOOLS	3	35	20	18	14	17	15	16	15	24	16	13	19	11	. 15	2
00 00.0	PUBLIC TOTAL	Ť	120	72	77	61	62	77		64	71	72	76	91	68		_
06-0701	ST MICHAEL'S ELEMENTARY SCHOOL	NP	0	9	10	7		9	-	11	10	13	0	0	0		-
	NON PUBLIC TOTAL		0	9	10	7	13	9	-	11	10	13	0	0	0		-
	BOONE COUNTY TOTAL	Ш	120	81	87	68	75	86	-	75	81	85	76	91	68		_
					-		- 10				*-						
08-0051	BOYD COUNTY SCHOOLS	3	45	24	20	28	25	18	28	29	20	27	14	26	30	23	35
	PUBLIC TOTAL		45	24	20	28	25	18	28	29	20	27	14	26	30	23	3.
	BOYD COUNTY TOTAL		45	24	20	28	25	18	28	29	20	27	14	26	30	23	35
08-0051	BOYD COUNTY SCHOOLS	3	45	24	20	28	25	18	28	29	20	27	14	26	30	23	3
	PUBLIC TOTAL	Ш	45	24	20	28	25	18	28	29	20	27	14	26	30	23	3
	BOYD COUNTY TOTAL		45	24	20	28	25	18	28	29	20	27	14	26	30	23	3
19-0039	LEIGH COMMUNITY SCHOOLS	3	39	21	16	15	13	14	20	20	16	19	14	16	12	11	24
19-0058	CLARKSON PUBLIC SCHOOLS	3	29	16	9	7	13	14	16	15	18	18	13	21	18	13	22
19-0070	HOWELLS-DODGE CONSOLIDATED SCHOOLS	3	19	21	15	14	13	15	17	16	19	20	28	24	31	25	27
19-0123	SCHUYLER COMMUNITY SCHOOLS	3	201	117	133	138	131	133	169	148	130	138	166	142	139	141	2,02
	PUBLIC TOTAL		288	175	173	174	170	176	222	199	183	195	221	203	200	190	2,7
19-0703	ST JOHN NEUMANN ELEMENTARY SCH	NP	0	0	5	3	3	5	3	3	0	0	0	0	0	0	
19-0704	HOWELLS COMMUNITY CATHOLIC SCHOOL	NP	0	0	6	3	12	4	10	7	0	0	0	0	0	0	
	NON PUBLIC TOTAL		0	0	11	6	15	9	13	10	0	0	0	0	0	0	
	COLFAX COUNTY TOTAL		288	175	184	180	185	185	235	209	183	195	221	203	200	190	2,83
21-0015	ANSELMO-MERNA PUBLIC SCHOOLS	3	23	22	21	20	19	20	28	21	16	18	21	29	18	13	28
	BROKEN BOW PUBLIC SCHOOLS	3	105	62	56	46	63	59	59	66	55	68	59	63	69	45	87
	ANSLEY PUBLIC SCHOOLS	3	16	18	12	15	12	13	13	13	11	14	10	13	18	14	19
	SARGENT PUBLIC SCHOOLS	3	14	12	6	9	10	14	9	17	9	16	19	9	11	18	17
	ARNOLD PUBLIC SCHOOLS	3	4	12	14	19	15	15	12	10	14	19	8	7	20	10	17
	CALLAWAY PUBLIC SCHOOLS	3	21	15	12	17	13	6	12	15	19	14	15	19	10	15	20
	PUBLIC TOTAL		183	141	121	126	132	127	133	142	124	149	132	140	146	115	1,91
	CUSTER COUNTY TOTAL	\vdash	183	141	121	126	132	127	133	142	124	149	132	140	146	115	1,91

		1															
36-0100	BURWELL PUBLIC SCHOOLS	3	37	20	13	23	13	16	26		19	21	28	23	31	21	_
	PUBLIC TOTAL	-	37	20	13	23	13	16	26	19	19	21	28	23	31	21	
	GARFIELD COUNTY TOTAL	_	37	20	13	23	13	16	26	19	19	21	28	23	31	21	310
						-											
39-0060	CENTRAL VALLEY PUBLIC SCHOOLS	3	37	29	20	18	21	25	19	17	17	16	21	23	24	22	309
	PUBLIC TOTAL		37	29	20	18	21	25	19	17	17	16	21	23	24	22	309
39-0702	SPALDING ACADEMY	NP	7	5	3	6	2	6	4	7	2	4	5	6	10	5	72
	NON PUBLIC TOTAL		7	5	3	6	2	6	4	7	2	4	5	6	10	5	72
	GREELEY COUNTY TOTAL		44	34	23	24	23	31	23	24	19	20	26	29	34	27	381
	1																
40-0002	GRAND ISLAND PUBLIC SCHOOLS	3	705	823	742	697	759	772	798	757	699	712	672	643	655	636	10,070
40-0082	NORTHWEST PUBLIC SCHOOLS	3	35	94	79	95	86	93	85	86	89	73	200	180	200	179	1,574
40-0083	WOOD RIVER RURAL SCHOOLS	3	36	27	30	35	40	40	42	42	33	46	36	40	34	40	521
40-0126	DONIPHAN-TRUMBULL PUBLIC SCHS	3	26	28	37	27	33	25	35	34	36	31	45	34	27	42	460
	PUBLIC TOTAL		802	972	888	854	918	930	960	919	857	862	953	897	916	897	12,625
40-0701	CENTRAL CATHOLIC SCHOOLS	NP	0	0	0	0	0	0	0	36	36	42	41	39	42	35	271
40-0704	TRINITY LUTHERAN ELEM SCHOOL	NP	26	25	21	15	23	13	14	5	6	19	0	0	0	0	167
40-0705	PLATTE VALLEY SDA ELEMENTARY SCHOOL	NP	0	0	1	0	1	2	1	3	2	2	0	0	0	0	12
			, ,	•	•	,	•	•	'	,	•	•	-	-	-	•	
40-0707	NEW HOPE CHRISTIAN ELEM SCHOOL	NP	0	6	13	6	3	6	8	1	4	0	0	0	0	0	47
40-0711	HEARTLAND LUTHERAN HIGH SCHOOL	NP	0	0	0	0	0	0	0	0	0	0	10	12	15	19	56
10 0/11	NON PUBLIC TOTAL	···	26	31	35	21	27	21	23	45	48	63	51	51	57	54	553
	HALL COUNTY TOTAL		828	1,003	923	875	945	951	983	964	905	925	1,004	948	973	951	13,178
	The Country To The		020	2,000	525	0,0	545	332	500	301	505	525	2,001	540	370	352	10,170
41-0002	GILTNER PUBLIC SCHOOLS	3	33	16	17	12	15	14	14	19	13	19	6	15	14	15	222
41-0002	HAMPTON PUBLIC SCHOOL	2	27	10	9	13	9	10	9	7	12	18	11	15	17	10	177
41-0504	AURORA PUBLIC SCHOOLS	2	70	80	89	87	79	101		97	99	85	99	98	108	103	1,283
41-0504	PUBLIC TOTAL	3	130	106	115	112	103	125	88 111	123	124	122	116	128	139	128	1,682
41-0701	IMMANUEL LUTHERAN ELEM SCHOOL	NP	0	2	0	112	3	123	2	123	0	0	0	0	0	0	13
41-0702	HAMPTON LUTHERAN ELEM SCHOOL	NP	8	2	4	4	3	2	3		0	0	0	0	0	0	32
41-0702	NON PUBLIC TOTAL	INF	8	4	4	8	6	4	5	6	0	0	0	0	0	0	45
	HAMILTON COUNTY TOTAL		138	110	119	120	109	129	116	129	124	122	116	128	139	128	1,727
	HAMILTON COUNTY TOTAL		130	110	119	120	103	123	110	123	124	122	110	120	133	120	1,727
45.0007	Olygua Bubus sausous	١.	40				60	45			50		C.F.		50	50	700
45-0007	O'NEILL PUBLIC SCHOOLS	3	49	57	57	54	69	45	58	57	59	62	65	52	50	59	793
45-0029	EWING PUBLIC SCHOOLS	3	7	4	12	12	11	12	10	8	14	4	10	9	6	17	136
45-0044	STUART PUBLIC SCHOOLS	3	27	12	8	14	9	19	3	13	22	10	17	14	8	10	186
45-0137	CHAMBERS PUBLIC SCHOOLS	3	3	11	9	15	12	11	9	7	11	9	9	10	13	6	135
45-0239	WEST HOLT PUBLIC SCHOOLS	3	44	25	17	36	29	42	37	34	30	36	40	22	27	28	447
45.070	PUBLIC TOTAL	LUE.	130	109	103	131	130	129	117	119	136	121	141	107	104	120	1,697
45-0701	ST MARY'S SCHOOLS	NP	0	8	23	14	15	13	20	15	9	18	13	15	11	12	186
45-0703	ST JOSEPH'S ELEMENTARY SCHOOL	NP	15	5	7	7	7	1	3	4	2	4	0	0	0	0	55
				1			[1	1	1		1			
<u> </u>	NON PUBLIC TOTAL		15	13	30	21	22	14	23	19	11	22	13	15	11	12	241
I	HOLT COUNTY TOTAL		145	122	133	152	152	143	140	138	147	143	154	122	115	132	1,938

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47-0001	ST PAUL PUBLIC SCHOOLS	3	48	47	57	53	38	53	54		51	52	55	49	57	36	
47-0100	CENTURA PUBLIC SCHOOLS	3	34	36	26	34	30	32	39	41	32	35	38	40	37	39	493
47-0103	ELBA PUBLIC SCHOOLS	3	17	7	12	8	2	8	9	6	5	12	10	6	12	6	120
	PUBLIC TOTAL	┞	99	90	95	95	70	93	102	100	88	99	103	95	106	81	1,316
	HOWARD COUNTY TOTAL		99	90	95	95	70	93	102	100	88	99	103	95	106	81	1,316
	 											_					_
52-0100	KEYA PAHA COUNTY SCHOOLS	3	0	3	11	. 5	3	6	6	7	7	7	8	12	5	11	_
	PUBLIC TOTAL	_	0	3	11	. 5	3	6	6	7	7	7	8	12	5	11	_
	KEYA PAHA COUNTY TOTAL	_	0	3	11	5	3	6	6	7	7	7	8	12	5	11	1 9
	 																
58-0025	LOUP COUNTY PUBLIC SCHOOLS	3	8	6	6	7	6	5	2	8	6	6	1	3	5	5	74
	PUBLIC TOTAL		8	6	6	7	6	5	2	8	6	6	1	3	5	5	74
	LOUP COUNTY TOTAL		8	6	6	7	6	5	2	8	6	6	1	3	5	5	74
61-0004	CENTRAL CITY PUBLIC SCHOOLS	3	65	54	46	47	55	59	56	62	50	46	57	50	54	66	767
61-0049	PALMER PUBLIC SCHOOLS	3	50	17	21	24	20	17	27	21	19	14	20	23	27	26	326
	PUBLIC TOTAL		115	71	67	71	75	76	83	83	69	60	77	73	81	92	1,093
61-0701	NEBRASKA CHRISTIAN SCHOOLS	NP	8	2	10	7	9	10	6	11	11	21	29	28	23	20	195
	NON PUBLIC TOTAL		8	2	10	7	9	10	6	11	11	21	29	28	23	20	195
	MERRICK COUNTY TOTAL		123	73	77	78	84	86	89	94	80	81	106	101	104	112	1,288
							·							·			
63-0001	FULLERTON PUBLIC SCHOOLS	3	3	23	16	29	26	25	23	23	24	21	29	17	29	26	314
63-0030	TWIN RIVER PUBLIC SCHOOLS	3	31	37	24	41	24	34	26	37	35	24	29	34	33	23	432
	PUBLIC TOTAL		34	60	40	70	50	59	49	60	59	45	58	51	62	49	746
	NANCE COUNTY TOTAL		34	60	40	70	50	59	49	60	59	45	58	51	62	49	746
			•	'		•	•	'			'	'	,	'			
71 0001	COLUMBUS PUBLIC SCHOOLS	2	236	298	299	320	263	314	271	294	291	309	287	333	345	344	4 204
/1-0001	COLUMBOS PUBLIC SCHOOLS	3	230	290	299	320	203	314	2/1	294	291	309	20/	333	545	344	4,204
													1				
	LAKEVIEW COMMUNITY SCHOOLS	3	16	64	64	62	54	70	66	70	67	66	71	77	77	72	896
-	HUMPHREY PUBLIC SCHOOLS	3	37	24	17	15	17	17	15	19	17	23	18	20	16	19	274
	PUBLIC TOTAL		289	386	380	397	334	401	352	383	375	398	376	430	438	435	5,374
	IMMANUEL LUTHERAN ELEM SCHOOL	NP	0			13	20	20	20		13	19	0	0		0	
	ST ANTHONY ELEMENTARY SCHOOL	NP	11	15	11	14	14	17	9	16	0	0	0	0	0	0	107
	ST BONAVENTURE ELEM SCHOOL ST ISIDORE ELEMENTARY SCHOOL	NP NP	57 77	31	27	19	31	20	20	31	0	0	0	0	0	0	236 279
	SCOTUS CENTRAL CATHOLIC	NP NP	0	32 0	31 0	32 0	27 0	24 0	28	28 0	65	53		65	58	42	
	HOLY FAMILY SCHOOLS	NP NP	19	0	8	9	8	14	11	5	10	0	68	8	7	42	351 111
	ST FRANCIS SCHOOLS	NP	0	24	19	19	13	16	13	19	11	16	15	12	15	20	
	ST JOHN LUTHERAN ELEM SCHOOL	NP	12	24	19	7	13	8	13	19	2	10	0	0	0	0	43
	CHRIST LUTHERAN ELEMENTARY SCH	NP	18	5	5	2	5	2	1	1	2	1	0	0	0	0	43
	COLUMBUS CHRISTIAN SCHOOL	NP	0	5	8	1	4	3	1	0	0	0	0	0	0	0	22
		· · ·	-	424		1	-7				_	$\overline{}$	_		$\overline{}$		
	NON PUBLIC TOTAL		194	134	131	117	124	124	104	117	103	92	90	85	80	67	1,562

	1	_		_			_				-	-		-	-		$\overline{}$
75-0100	ROCK COUNTY PUBLIC SCHOOLS	3	25	16	15	11	16	17	17	16	19	14	22	25	18	17	248
	PUBLIC TOTAL		25	16	15	11	16	17	17	16	19	14	22	25	18	17	248
	ROCK COUNTY TOTAL		25	16	15	11	16	17	17	16	19	14	22	25	18	17	248
82-0001	LOUP CITY PUBLIC SCHOOLS	3	52	20	23	17	25	16	22	21	20	29	16	31	23	26	341
82-0015	LITCHFIELD PUBLIC SCHOOLS	3	15	16	9	6	9	8	5	9	8	4	7	10	6	8	120
	PUBLIC TOTAL		67	36	32	23	34	24	27	30	28	33	23	41	29	34	461
	SHERMAN COUNTY TOTAL		67	36	32	23	34	24	27	30	28	33	23	41	29	34	461
88-0005	ORD PUBLIC SCHOOLS	3	57	44	38	44	40	38	37	41	33	52	38	39	53	46	600
88-0021	ARCADIA PUBLIC SCHOOLS	3	20	6	10	7	13	7	7	12	5	4	8	10	9	10	128
	PUBLIC TOTAL		77	50	48	51	53	45	44	53	38	56	46	49	62	56	728
88-0701	ST MARY'S ELEMENTARY SCHOOL	NP	0	7	4	7	9	3	3	7	0	0	0	0	0	0	40
	NON PUBLIC TOTAL		0	7	4	7	9	3	3	7	0	0	0	0	0	0	40
	VALLEY COUNTY TOTAL		77	57	52	58	62	48	47	60	38	56	46	49	62	56	768
92-0045	WHEELER CENTRAL SCHOOLS	3	23	8	4	7	5	10	6	7	5	9	3	8	5	5	105
									-								
	PUBLIC TOTAL		23	8	4	7	5	10	6	7	5	9	3	8	5	5	105
	WHEELER COUNTY TOTAL		23	8	4	7	5	10	6	7	5	9	3	8	5	5	105
											. – –						

ECP Assessment 2019

Blaine County	96.30%	Valley County
Boone County	94.20%	Wheeler Count
Boyd County	94.60%	
Brown County	92%	
Colfax County	70.20%	
Custer County	92.90%	Nebr
Garfield County	96.10%	Attai
Greeley County	93.70%	grad
Hall County	84.70%	01
Hamilton County	94.70%	Source
Holt County	92.70%	Surve
Howard County	92.80%	
Keya Paha County	95.30%	
Loup County	97.80%	
Merrick County	94%	
Nance County	91.50%	
Platte County	88.70%	
Rock County	94.90%	
Sherman County	93%	

Nebraska | Educational Attainment: Percent high school graduate or higher

92.50%

95.20%

91.1 %

Wheeler County

Source: 2014-2018 American Community Survey 5-Year Estimates

It's All About the Dollars: Reducing Unmet Financial Need for Students with Dependents BLOG POST



By Caroline Siegel Singh Nov. 25, 2019

Today, 1 in every 5 undergraduate students have an additional responsibility on top of the physical and mental demands of being a college student - being a parent. And even though these students with dependents are a significant part of the student body, their needs are often ignored in mainstream educational policy discourse. Higher education can and should do more to financially support students with dependents considering the high cost of attending college while caring for dependent children. Failing to do so has resulted in students with dependents facing a higher cost of attendance, combined with limited financial aid options. If left unchecked, this can create financial challenges and even higher amounts of student debt, thus putting them at a disadvantage compared to their peers who do not have dependent children. With a disproportionate amount of students with dependents being students of color, there is an imperative to better serve this population to close existing racial equity gaps in higher education.

On average, students with dependents can expect to pay hundreds of dollars a month for childcare, as well as any other costs associated with raising a child such as food, clothing, housing, and healthcare. For low-income students with dependents, these costs can quickly add up. We can see from the higher amounts of debt taken on by this population, students with dependents are not being awarded enough grant aid or even loans to cover their higher total cost of attendance. This results in students with dependents usually having to make up this difference in cost with excessive work hours. This can have very real consequences on the academic success of these students - roughly half of students with dependents leave school without a degree. Often, this can be a result of not receiving the needed financial aid and having to increase their work hours to compensate.

While increased long term investments in federal programs - such as increasing the Pell Grant allocation for student parents and increasing funding for federally subsidized child care - are needed to help student parents with their financial challenges, this can be difficult to accomplish with different versions of the Higher Education Act still under consideration. Change at the federal level would most likely need to come through the re-authorization of the Higher Education Act - a process that can span over multiple legislative sessions. But what can institutions and higher education stakeholders do in the meantime?

There are two policy solutions that can be implemented to increase access to financial resources, and better support the growing student parent population:

Ensure schools are providing students with the maximum available aid options through the federal dependent care allowance and

Craft targeted grant aid programs at the state and institutional level to help student parents lower their unmet financial need.

At the state level and institutional level, targeted aid programs could be implemented to provide students with dependents with grant aid that would offset costs like childcare. With the average unmet need of unmarried student parents being \$6,000 per year versus only \$3,000 for students without children, targeted financial aid offerings could help reduce this disparity by providing direct financial assistance in the form of grant aid. As the conversation around updating our federal financial aid system continues, it is important that state and institutional leadership step up in the meantime to immediately serve students with dependents better. For example, Michigan State University has worked to address the gap in unmet financial need for students with dependents by offering programs such as the Michigan State University Child Care Grant which requires students to apply for additional funds to cover the costs of childcare. On the other side of the country, California has recently implemented a Cal-Grant Access Award for Student Parents which supplements student parents' financial aid awards with up to \$6,000 a year in grant aid.

At the federal level, the Department of Education can remedy inadequate financial aid packages by requiring Title IV institutions to properly advertise and inform students of the availability of the federal dependent care allowance for students with dependent children. Currently, the federal dependent care allowance allows financial aid administrators to increase the expected total cost of attendance in a financial aid award to more accurately reflect the actual expenses of parenting students but only if the student requests the modification. A higher cost estimate allows financial aid offices to award additional grants, scholarships, and federal loans, thus lowering the unmet need for parenting students and potentially reducing their risk of dropping out. And while providing students with additional federal loans may seem counter-intuitive, we see a trend within the students with dependents population of students taking on debt and still not being able to complete their education. Supplementing financial aid packages to get these students to the finish line is better than having students who take on some debt, but do not complete a degree before leaving the institution.

Of all the challenges faced by students with dependents, receiving the financial aid they need should not be one of them. With the population of students with dependents only expected to further grow, it is time for higher education to better serve their needs. By increasing available financial aid at the federal, state, and institutional levels, we can eliminate the disparities in unmet need for student parents, and ensure this vulnerable population is able to successfully complete post-secondary education. It will also ensure that students with dependents are offered equitable access to an affordable education. If we fail to properly provide this population with resources, we fail to ensure that all students are provided with what they need to succeed. Moving forward, students with dependents need to be prioritized in the allocation of financial aid program

https://www.newamerica.org/education-policy/edcentral/its-all-about-dollars/

Adult Education

Should You Go Back To School As An Adult?

Written by **Amy Bergen**

Modified date: March 12, 2019

Older students have lots of options, from online courses to professional certifications to doctoral programs. Here's how to decide which route is right for you.

School days aren't always over once you hit your mid-twenties. The percentage of students over 25 who pursue higher education will increase over the next ten years, according to the National Center for Education Statistics. Older students have lots of options, from online courses to professional certifications to doctoral programs.

Why go back to school? Adult students tend to have two main motivators: learning and earning. Associates, bachelors, and master's degrees each qualify their recipients for higher-paying jobs. And pre-professional programs aim to transition students straight into careers.

Here are a few scenarios which might make you think about returning to school:

You want to move into a higher earning bracket and you're confident a degree will help.

You want specific educational training to further your career.

You're switching career fields completely and want training in the new field so you'll be competitive in the job market.

You took time off while in school and now you're ready to return.

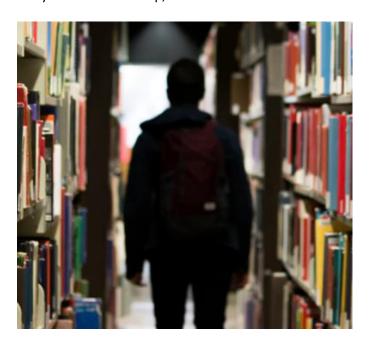
You have some financial security but you'd like a career you're more passionate about.

You're interested in a field or course of study but not ready to devote yourself to it full-time. It can be tough to fit school into an already busy lifestyle. The difficulties adult students report most frequently are finding the money and finding the time. While younger undergraduate students often orient their lives around campus, older students tend to structure their coursework around their lives.

How can you navigate student life and adult responsibilities? We've answered a few back-to-school FAQs below.

When should I go back to school?
How will I pay for school?
How should I choose a program?
Should I pursue a certificate, a professional certification, or a degree?
What if you just want to learn more about a subject?
Should I take classes online or on campus?

https://www.moneyunder30.com/should-you-go-back-to-school-as-an-adult



Education levels

Table 2. Educational Attainment of the Population 25 Years and Over, by Selected Characteristics: 2019
(Numbers in thousands. Civilian noninstitutionalized population.¹)

					Educa	tional attai	nment			
				High	Some					Doct
		None	9th -	school	college,	Associa	Bachel	Master	Professi	oral
		- 8th	11th	gradua	no	te's	or's	's	onal	degre
Both sexes	Total	grade	grade	te	degree	degree	degree	degree	degree	е
Total	221,478	8,603	13,372	62,259	34,690	22,738	49,937	22,214	3,136	4,529
Marital Status										
Married, spouse present Married, spouse absent, not	126,768	4,476	6,069	32,493	18,378	13,410	31,280	15,096	2,240	3,32
separated	3,633	294	339	1,063	468	293	692	355	39	89
Separated	4,643	342	585	1,618	759	454	617	206	34	28
Widowed	14,852	1,218	1,414	5,459	2,411	1,284	1,960	872	100	134
Divorced	25,235	697	1,645	7,790	4,815	3,038	4,707	1,983	235	327
Never married	46,348	1,576	3,320	13,836	7,858	4,259	10,681	3,704	488	625
Household Relationship										
Family householder	80,502	2,608	4,497	20,288	13,436	8,923	18,642	9,004	1,232	1,872
Married, spouse present	61,073	1,865	2,683	14,226	9,613	6,630	15,539	7,705	1,097	1,71
Other family householder	19,429	742	1,814	6,062	3,823	2,293	3,103	1,299	136	157
Nonfamily householder	41,973	1,494	2,646	11,553	7,323	4,281	9,321	4,045	513	795
Living alone	34,952	1,333	2,284	9,880	6,149	3,552	7,347	3,306	432	668
Living with nonrelatives	7,020	161	362	1,673	1,174	729	1,974	739	82	127
Relative of householder	86,578	3,972	5,399	26,395	12,019	8,459	19,187	8,181	1,266	1,69
Spouse	61,000	2,029	2,897	16,692	8,220	6,379	14,984	7,117	1,102	1,57

Other	25,577	1,943	2,501	9,703	3,799	2,081	4,203	1,064	163	121
Nonrelative	12,426	529	830	4,022	1,912	1,074	2,786	985	125	162
Nomelative	12,420	329	630	4,022	1,912	1,074	2,700	963	125	102
Citizenship, Nativity, and Year of Entry										
Native born	181,283	2,767	9,420	52,024	31,198	19,984	41,686	18,120	2,568	3,515
Native parentage ²	163,644	2,382	8,627	47,620	28,126	18,083	37,290	16,212	2,208	3,096
Foreign or mixed parentage ³	17,639	385	793	4,404	3,072	1,901	4,396	1,907	361	419
Foreign born	40,195	5,836	3,952	10,235	3,492	2,754	8,250	4,095	568	1,014
Naturalized citizen	20,751	1,856	1,427	5,263	2,246	1,794	5,036	2,102	394	634
Not a citizen	19,444	3,980	2,525	4,972	1,245	960	3,214	1,993	174	380
Year of entry										
2010 or later	7,963	766	560	1,845	568	446	2,145	1,329	96	207
2000-2009	10,252	1,636	1,224	2,732	747	620	1,943	929	162	259
1990-1999	9,796	1,413	1,086	2,578	822	771	1,870	876	138	242
1980-1989	6,414	1,064	692	1,597	684	464	1,208	480	82	142
1970-1979	3,446	653	245	807	356	238	672	311	51	112
Before 1970	2,324	303	146	676	314	216	412	168	38	52
Labor Force Status										
Employed	137,478	3,597	5,726	34,453	20,731	15,235	35,820	16,050	2,425	3,440
Unemployed	4,531	169	464	1,403	860	450	809	293	45	37
Not in civilian labor force	79,470	4,837	7,182	26,403	13,099	7,053	13,307	5,871	666	1,052
Occupation (Franklaus)										
Occupation (Employed Civilians Only)	137,478	3,597	5,726	34,453	20,731	15,235	35,820	16,050	2,425	3,440
Management, business, and	·		-	-	-	-		-		
financial occupations Professional and related	25,465	170	329	3,412	3,315	2,342	10,185	4,848	323	540
occupations	34,622	37	117	2,204	2,575	3,677	12,658	8,720	1,914	2,721
Service occupations	20,981	1,191	1,816	7,926	3,913	2,557	2,940	525	61	52
Sales and related occupations	12,598	148	447	3,450	2,388	1,390	3,908	787	36	44
Office and administrative										
occupations Farming, forestry, and fishing	15,040	95	331	4,586	3,672	2,122	3,385	768	30	51
occupations	929	256	140	314	88	54	62	15	-	-
Construction and extraction										_
occupations Installation, maintenance, and	7,283	741	864	3,238	1,016	691	641	69	18	5
repair occupations	4,132	119	250	1,751	816	783	370	36	6	2
Production occupations	7,705	490	621	3,496	1,422	850	699	105	13	8
Transportation and material	0.722	240	044	4.070	4.526	760	072	470	22	47
moving occupations	8,723	349	811	4,078	1,526	769	972	178	23	17
Industry (Employed Civilians										
Only)	137,478	3,597	5,726	34,453	20,731	15,235	35,820	16,050	2,425	3,440
Agricultural, forestry, fishing,	2.017	207	104	657	254	102	247	00	6	10
and hunting	2,017	297	194	657	254	193	317	80	6	18
Mining Construction	704 9,849	14 775	33 982	263 3,948	115 1,458	60 956	142 1,384	65 289	39	11 17
Manufacturing	9,849 14,450	517	982 746	3,948 4,663	2,203	1,608	3,280	1,212	39 49	172
Wholesale and retail trade	15,893	307	746	5,240	3,155	1,794	3,601	771	49 81	146
Transportation and utilities	8,009	175	403	2,972	1,676	959	1,447	327	27	25
Information	2,455	173	31	391	385	218	985	390	12	31
Financial activities	9,847	43	120	1,621	1,495	979	4,036	1,312	120	122
Professional and business	17,821	448	520	3,009	2,183	1,549	6,119	2,689	724	579
1 Torcosional and business	1,021	770	1 320	3,003	2,100	1,545	1 0,113	2,000	, 44	3/3

2020 Community Assessment

Central Nebraska Community Action Partnership, Inc.

services										
Educational and health										
services	33,060	222	670	5,019	3,756	4,281	9,078	6,895	1,102	2,037
Leisure and hospitality	9,980	503	755	3,299	1,801	928	2,143	500	34	17
Other services	6,590	255	400	2,223	1,018	862	1,171	515	57	90
Public administration	6,802	29	73	1,147	1,232	847	2,117	1,005	176	175

https://www.census.gov/data/tables/2019/demo/educational-attainment/cps-detailed-tables.html

HOUSING

	Statewide Income Limits For Nebraska FY 2019 Very Low-Income (50%) Limit (VLIL)										
Median Family Income	1 Person	2 Person	3 Person		5 Person	6 Person	7 Person	8 n Person			
78,100	27,350	31,250	35,150	39,050	42,150	45,300	48,400	51,550			
	FY	2019 Ext	remely L	ow-Inco	me Limi	t (ELIL)					
1 Person	2 Person	3 Person	4 Person	n 5 Pers	son 6 Pe	erson 7	Person	8 Person			
16,400	18,750	21,100	23,450	25,30	00 27,	,200 2	9,050	30,950			
		FY 2019 l	Low-Inco	me (80%	(b) Limit	(LIL)					
1 Person	2 Person	3 Person	4 Person	n 5 Pers	son 6 Pe	erson 7	Person	8 Person			
43,750	50,000	56,250	62,500	67,50	00 72,	500 7	7,500	82,450			

https://www.huduser.gov/portal/datasets/il/il2019/2019summary.

Cost

Price-to-Rent Ratio Definition

By Marshall Hargrave

Updated Jan 22, 2020

What Is the Price-to-Rent Ratio?

The price-to-rent ratio is the ratio of home prices to annualized rent in a given location and is used as a benchmark for estimating whether it is cheaper to rent or own property.

How the Price-to-Rent Ration Works

The price-to-rent ratio is used as an indicator for whether housing markets are fairly valued, or in a bubble. The dramatic increase in the ratio leading up to the 2008-2009 housing market crash was, with hindsight, a red flag for the housing bubble. Trulia produces a price-to-rent ratio called

the Trulia Rent Versus Buy Index, which compares the total costs of homeownership with the total cost of renting a similar property.

https://www.investopedia.com/terms/p/price-to-rent-ratio.asp

Here's How Much Money You Need to Make to Live Comfortably in Nebraska

When it comes to the cost of living, Nebraska isn't the cheapest state in the nation, but housing is, without a doubt, the biggest drain on your paycheck. In Nebraska, to buy a home, you'll need a salary of just \$51,520 per year. The numbers were calculated assuming that you'd come in with a 10 percent down-payment, and that you'd take out a standard, 30-year mortgage. It's far from the most expensive.

Of course, not everyone wants to buy a home, and some people don't have the credit worthiness or income to do so. HowMuch.net took a look at what kind of monthly salary you'll need to rent a home. Considering that you should only spend around 30 percent of your after-tax income on housing, the website calculated that Nebraskans should be earning \$4,137 per month in order to afford the average rental property in the state. Our rental costs are higher than those of our Kansas neighbors to the south, but we're faring much better than residents in Colorado or Wyoming. And of course, rural areas of Nebraska will be much less expensive than our larger cities. We love our small towns!

There's more good news. When it comes to debt, Nebraskans average just \$40.3K per capita. That includes mortgage, credit cards, auto loans, and student loans. Auto loans are an increasingly large factor in the personal finances of people all over the country, but Nebraskans are doing a pretty good job of holding back when it comes to spending a lot of money on vehicles. The average debt for auto loans in Nebraska is just over \$4,000 per capita, so if you're eyeing that \$65,000 truck, you might want to think twice.

Utilities always seem to hit the pocketbook where it hurts. It's simply no fun to pay for electricity instead of buying new shoes. Of course, you can always go without shoes, but it's impossible to live without lights! In Nebraska, we pay 10.5 cents per kilowatt hour, lower than the average of 12.7 cents. We're not going to complain - crank up the air-conditioning, and flip on that light switch.

Overall, Nebraskans can be pretty happy about our cost of living. We're just below the average in almost every factor when it comes to spending our hard-earned money on the things we can't do without. While it costs more to be comfortable here in Nebraska than it does in places like West Virginia, we're content knowing that we're also paying only about half of what it costs to live in Colorado. We'll stay here, thank you very much!

Posted in Nebraska July 27, 2019 by Catherine Armstrong https://www.onlyinyourstate.com/nebraska/cost-of-living-in-ne/

integration of the state of the

Nikki Oltman, representing CNCAP Outreach programs, has been a part of the Sandhill Community Collaborative monthly meetings with 8 counties (4 of which are based within CNCAP's area) bringing together local service providers, educators, health care professionals, law enforcement, businesses, government agencies, parents and youth. Utilizing support to identify gaps in service in new ways for affordability and sustainability this group of individuals and organizations bring diverse and relevant voices to a community creating solutions for families. Everyone has something to contribute to the family-strengthening effort as community sectors need to be aware of protective factors and the role they play in supporting families and children. Each community has unique needs, interests and approaches to support families with diverse racial and ethnic background, lifestyles and values.

Working together with the LB 1184 committees the local school districts, Sheriff Offices, DHHS representatives, Community Response team members and CNCAP stay on top of possible struggles families may have with limited resources in the communities to provide families in all areas. Monthly meetings have been held via Zoom since the beginning of the Covid-19 crisis so they may continue to cover family needs that arise from this pandemic.

CNCAP owns 36 rental units that are currently at full capacity with a growing waiting list. Housing needs are based on income and assessed based on Fair Market Rent.

Section 8 Rental	Subsidy	Rental Units
113	Households	36
203	Beneficiaries	122
117	Vouchers per month	14

Weatheri	zation needs met			
Househol	ds		39	
	Beneficiaries		87	
		Handicapped		11
		Elderly		18
Owners	33			
Renters	6			

New Installations	
Furnaces	9
Water Heaters	3
Refridgerators	3



The Gap: A Shortage of Affordable Rental Homes Nebraska 59,654

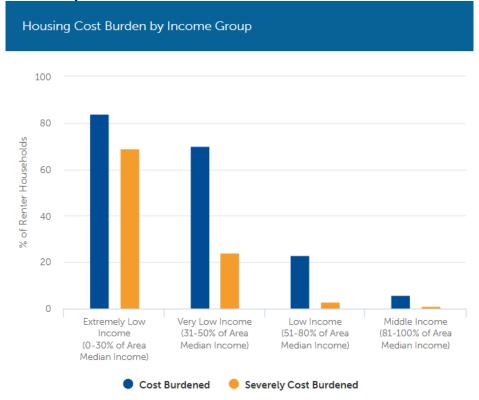
Number of extremely low income renter households

37

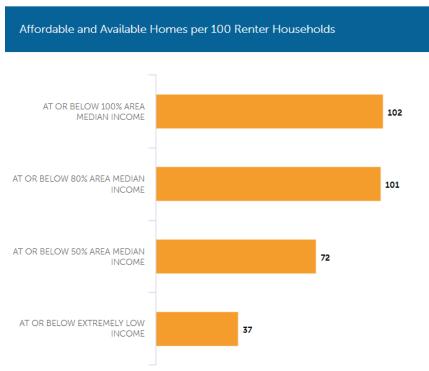
Number of affordable and available rental homes per 100 extremely low income renter households

69%

Extremely low income renter households with severe cost burden



Renter households spending more than 30% of their income on housing costs and utilities are cost burdened; those spending more than half of their income are severely cost burdened.



https://reports.nlihc.org/gap

Vacancy

The disposition of vacant units between 2010 and 2018 are shown in Table III.8. By 2018, for rent units accounted for 19.5 percent of vacant units, while for sale units accounted for 7.2 percent. "Other" vacant units accounted for 44.5 percent of vacant units, representing a total of 34,125 "other" vacant units. "Other" vacant units are not for sale or rent, or otherwise available to the marketplace. These units may be problematic if concentrated in certain areas, and may create a "blighting" effect. Table III.8 Disposition of Vacant Housing Units State of Nebraska 2010 Census & 2018

Table III.8 Disposition of Vacant Housing Units State of Nebraska 2010 Census & 2018 Five-Year ACS Data				
Disposition	2010 Census		2018 Five-Year ACS	
	Units	% of Total	Units	% of Total
For Rent	24,404	32.3%	14,921	19.5%
For Sale	9,167	12.1%	5,535	7.2%
Rented Not Occupied	1,279	1.7%	2,558	3.3%
Sold Not Occupied	2,804	3.7%	3,094	4.0%
For Seasonal, Recreational, or Occasional Use	13,881	18.3%	16,326	21.3%
For Migrant Workers	60	0.1%	125.0	0.2%
Other Vacant	24,068	31.8%	34,127	44.5%
Total	75,663	100.0%	76,686	100.0%

Rural Nebraska is rich with history. From the ancient barn and old equipment on the farm to a dilapidate house. For many it happens without even thinking about it. Dad passes away and Mom lives on the farm until moving into the nursing home leaving the house empty. If there is no "family" to come back and live in the house it sits empty until the kids decide what to do sometimes to the point of no return. A house that is unlived in and unloved begins to show its age. The lack of industry in the area and sometimes the distance to town makes it unworthy of repairs and renting out until it makes more sense to tear it down and add the land to the farm ground. In a small town it can sometimes take years before something is done to an abandon home. Urban cities handle vacant homes with ordinances that require maintanence or demolation of the house making room for new construction.

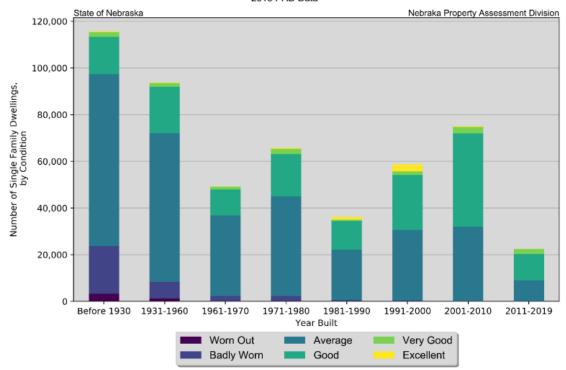
A young family who may be looking to move to a small town also has to think about medical services, shopping, job market, transportation issues, and schools which all plays a huge part in the plan. In the city you can get whatever you want at almost anytime you want. A variety of jobs or careers are available. There is always someone needing to rent or move at any given time. There is never a dull moment in the city.



Housing Age

About 214,632 single-family dwellings sold between 1999 and 2019 were constructed prior to 1961, with 115,950 built prior to 1931. Homes built during the 1970s sold reasonably well, with 78,732 units sold, as did homes built during the 1990s, with 62,576 housing units changing hands. 81,776 housing units sold that were constructed from 2001 through 2010 and an additional 25,037 units built between 2011 and 2019, as shown in Diagram III.5.

Diagram III.5
Single-Family Dwellings by Year Built, Condition
State of Nebraska
2019 PAD Data



SUBSTANDARD HOUSING

Incomplete plumbing and kitchen facilities are another indicator of potential housing problems. According to the Census Bureau, a housing unit is classified as lacking complete plumbing facilities when any of the following are not present: piped hot and cold water, a flush toilet, and a bathtub or shower. Likewise, a unit is categorized as deficient when any of the following are missing from the kitchen: a sink with piped hot and cold water, a range or cook top and oven, and a refrigerator. There were a total of 2,392 households with incomplete plumbing facilities in 2018, representing 0.3 percent of households in State of Nebraska. This is compared to 0.4 percent of households lacking complete plumbing facilities in 2000.

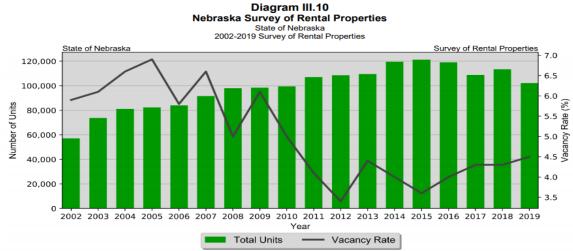
Table III.16 Households with Incomplete Plumbing Facilities State of Nebraska 2000 Census SF3 & 2010 & 2018 Five-Year ACS Data					
Households	2000 Census	2010 Five-Year ACS	2018 Five-Year ACS		
With Complete Plumbing Facilities	663,776	709,231	751,671		
Lacking Complete Plumbing Facilities	2,408	2,540	2,392		
Total Households	666,184	711,771	754,063		
Percent Lacking	0.4%	0.4%	0.3%		

There were 8,356 households lacking complete kitchen facilities in 2018, compared to 3,990 households in 2000. This was a change from 0.6 percent of households in 2000 to 1.1 percent in 2018.

Table III.17							
Households with Incomplete Kitchen Facilities							
State of Nebraska 2000 Census SF3 & 2018 Five-Year ACS Data							
Households	2000 Census	2010 Five-Year ACS	2018 Five-Year ACS				
With Complete Kitchen Facilities	662,194	706,197	745,707				
Lacking Complete Kitchen Facilities	3,990	5,574	8,356				
Total Households	666,184	711,771	754,063				
Percent Lacking	0.6%	0.8%	1.1%				

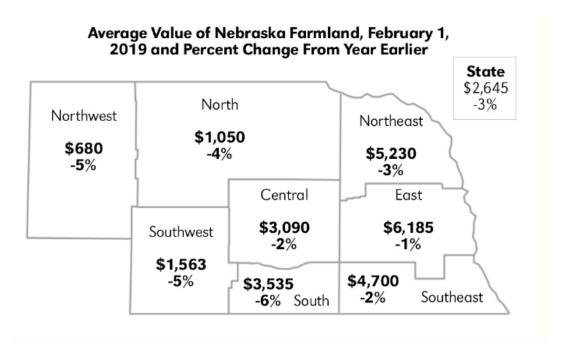
A telephone survey of rental properties was conducted throughout Nebraska in the last quarter of 2019. The survey instrument was designed to inquire about several attributes of rental units. The survey sample was comprised of apartment listings selected from various business indexes, properties known to NIFA, and a review of local newspapers throughout the state. Also surveyed were Low Income Housing Tax Credit project managers, public housing authorities, and other residential real estate rental service agencies. The list comprised both market rate and assisted or subsidized rental properties. This survey has been conducted at the same time of year for the past 17 years.

The number of units counted in the surveys increased from 57,009 in 2002 to 102,140 units in 2019, as shown in Diagram III.10. The vacancy rate rose slightly from 4.3 percent in 2018 to 4.5 percent in 2019.



https://www.westernes.com/nepdfs/current/Volume%20I.pdf

Farm Land Values



Average Value of Nebraska Farmland by Land Type						
Land Type	\$/Acre	%Change				
All Land Average	2,645	-3				
Center Pivot Irrigated Cropland	5,970	-3				
Gravity Irrigated Cropland	5,690	-2				
Dryland Cropland (Irrigation Potential)	4,010	-3				
Dryland Cropland (No Irrigation Potential)	3,040	-2				
Grazing Land (Tillable)	1,185	-5				
Grazing Land (Nontillable)	795	-5				
Hayland	1,615	-6				



The all-land average value in Nebraska for the year ending February 1, 2019 averaged about 3 percent lower than the year before. This marks five consecutive years of declining land values. The state average was \$2,645 per acre or about a \$75 per acre decline to the prior year's value of \$2,720 per acre.

Based on 2019 market values, the estimated total value of agricultural land and buildings in Nebraska fell to approximately \$125.3 billion. Between 2018 and 2019, the market value decline in agricultural land and building totaled about \$3.6 billion.

https://agecon.unl.edu/realestate/2019-farm-real-estate-report

Fair Market Rate

The FY 2020 Nebraska FMR Summary (effective April 1, 2020)

Final FY2020 Nebraska FMR Metropolitan Area Summary								
Metropolitan Area Name	Efficiency	One- Bedroom	Two- Bedroom	Three- Bedroom	Four- Bedroom	FMR Percentile		
Hall County, NE HUD Metro FMR Area	\$557	\$605	\$780	\$1,068	\$1,093	40		
Hamilton County, NE HUD Metro FMR Area	\$504	\$537	\$707	\$1,020	\$1,241	40		
Howard County, NE HUD Metro FMR Area	\$498	\$530	\$698	\$949	\$1,046	40		
Merrick County, NE HUD Metro FMR Area	\$498	\$530	\$698	\$942	\$946	40		

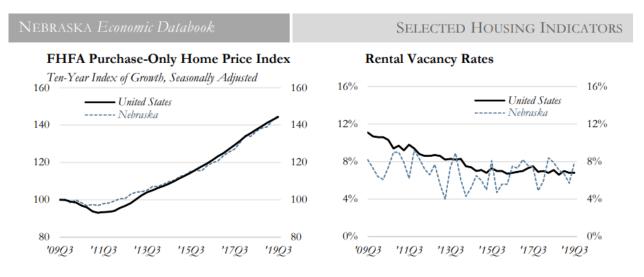
FY2020 Nebraska FMR Local Area Summary							
Locality Name	Metropolitan Area Name	Efficiency	One- Bedroom	Two- Bedroom	Three- Bedroom	Four- Bedroom	FMR Percentile
Blaine County	Blaine County, NE	\$455	\$530	\$698	\$896	\$983	40
Boone	Boone	\$455	\$550	\$698	\$870	\$1,075	40

	FY2020 Nebraska FMR Local Area Summary							
Locality Name	Metropolitan Area Name	Efficiency	One- Bedroom	Two- Bedroom	Three- Bedroom	Four- Bedroom	FMR Percentile	
County	County, NE							
Boyd County	Boyd County, NE	\$455	\$613	\$698	\$899	\$970	40	
Brown County	Brown County, NE	\$475	\$554	\$729	\$908	\$1,027	40	
Colfax County	Colfax County, NE	\$455	\$538	\$698	\$874	\$946	40	
Custer County	Custer County, NE	\$455	\$530	\$698	\$870	\$946	40	
Garfield County	Garfield County, NE	\$455	\$534	\$698	\$870	\$983	40	
Greeley County	Greeley County, NE	\$455	\$530	\$698	\$870	\$983	40	
Hall County	Hall County, NE HUD Metro FMR Area	\$557	\$605	\$780	\$1,068	\$1,093	40	
Hamilton County	Hamilton County, NE HUD Metro FMR Area	\$504	\$537	\$707	\$1,020	\$1,241	40	
Holt County	Holt County, NE	\$455	\$613	\$698	\$926	\$1,107	40	
Howard County	Howard County, NE HUD Metro FMR Area	\$498	\$530	\$698	\$949	\$1,046	40	
Keya Paha County	Keya Paha County, NE	\$455	\$530	\$698	\$896	\$983	40	
Loup County	Loup County, NE	\$455	\$530	\$698	\$896	\$983	40	
Merrick County	Merrick County, NE	\$498	\$530	\$698	\$942	\$946	40	

FY2020 Nebraska FMR Local Area Summary							
Locality Name	Metropolitan Area Name	Efficiency	One- Bedroom	Two- Bedroom	Three- Bedroom	Four- Bedroom	FMR Percentile
	HUD Metro FMR Area						
Nance County	Nance County, NE	\$455	\$577	\$698	\$889	\$1,156	40
Platte County	Platte County, NE	\$494	\$576	\$758	\$1,023	\$1,027	40
Rock County	Rock County, NE	\$455	\$530	\$698	\$980	\$983	40
Sherman County	Sherman County, NE	\$455	\$555	\$698	\$1,007	\$1,010	40
Valley County	Valley County, NE	\$455	\$530	\$698	\$870	\$1,133	40
Wheeler County	Wheeler County, NE	\$455	\$530	\$698	\$896	\$983	40

NOTE: Locality Names are links to the Final FY2020 FMR Documentation System for the specific area.

https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2020_code/2020state_summary.odn



2020 Community Assessment Central Nebraska Community Action Partnership, Inc.

Nov '09 Nov '11 Nov '13 Nov '15 Nov '17 Nov '19

Summary	Statistics	
	United States	Nebraska
Prices (2019Q3)*	4.9%	6.1%
Vacancy Rates (2019Q3)	6.8%	7.9%
Permits (Year-to-Date)*		
Single Family	-1.0%	-9.6%
Multifamily	11.3%	-0.4%

^{*}Percent change year-over-year.

 $https://www.kansascityfed.org/\sim/media/files/publicat/research/indicatorsdata/regionaldatabook/2020/01-2020/2020-01-27-nerdb.pdf$

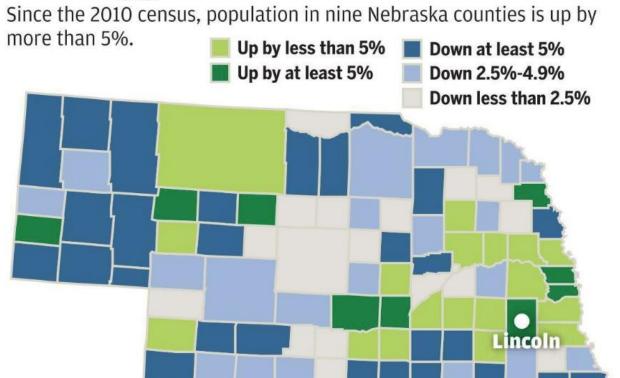
Rural vs Urban

In Nebraska, the urban and rural economies are closely intertwined, and it's important for residents to appreciate those connections, Rainbolt told The World-Herald.

State Sen. John McCollister of Omaha notes that "despite the fact that 56% of the state's population is in just three counties, rural- urban cooperation is essential if the state is going to reach its full potential."

State Sen. Tom Briese of Albion, an energetic booster of rural interests in the Legislature, echoes the point. "We all need to recognize that we have a common goal to create opportunities for all Nebraskans, urban and rural."

Tracking growth



https://journalstar.com/news/state-and-regional/nebraska/nebraska-leads-in-response-to-2020-census

Homelessness

Poverty is Down — But Concerns about Homelessness Remain

Written by Jackie Janosko October 7, 2019

Poverty rates are down: the U.S. Census Bureau has been documenting modest declines since 2010. And, in a <u>recent report</u>, the agency detailed a 0.5 percent decrease in the number of people living below the poverty line in 2018. Since poverty status puts people at risk of homelessness, such declines are a positive sign. However, other data points raise concerns about homelessness risks among older adults, racial minorities, uninsured people, and those most vulnerable to an economic recession.

Elder Poverty

Elder poverty is on the rise. In 2015, 8.8 percent of elderly people were poor. The 2018 data showed the rate of elderly homelessness to be up to 9.7%. Similarly, the portion of the aging population living in deep poverty was 2.8% in 2015, but that grew to 4% in 2018.

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Researchers have already been <u>sounding the alarm</u> on elder homelessness. They predict that the homeless population over the age of 65 will triple in the next decade. The Census is already reflecting these changes among older adults.

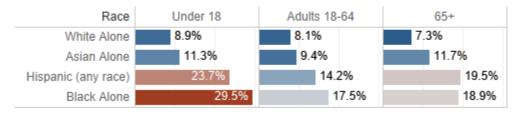
Inventory Count Date: 1/22/2019 Population: Sheltered and Unsheltered Count Unaccompanied Youth Households (CNCAP PIT Counts)

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of unaccompanied youth households	16	24	0	0	40
Total number of unaccompanied youth	17	24	0	0	41
Number of unaccompanied children (under age 18)	1	0	0	0	1
Number of unaccompanied young adults (age 18 to 24)	16	24	0	0	40

Race & Ethnicity

Poverty rates for people of color are on the decline. However, the inequity between the percentage of Whites in poverty compared to Blacks, Asians, and Hispanics is staggering. This is particularly striking among children. White children's rate of poverty was 8.9%, while Asian children were 11.3%, Hispanic children were 23.7%, and Black children were 29.5%.

Poverty Rates by Age, Race, & Ethnicity



The <u>impact</u> of poverty on children is severe. Higher rates of chronic health conditions; problems with hearing, vision, speech, behavioral issues; and mental health problems afflict children in poverty at much higher rates than their non-impoverished peers.

Of course, this disparity extends to adults. While Black people make up about 14% of the US population, they are about 23% of the impoverished population and <u>40 percent</u> of the homeless population. Similarly, Hispanics make up about 16% of the population but are impoverished at 23% and homeless at 22%.

Inventory Count Date: 1/22/2019 Population: Sheltered and Unsheltered Count (CNCAP PIT Counts)

Ethnicity	Shelt	ltered		
(adults and children)	Emergency	Transitional		
Non-Hispanic/Non- Latino	58	81		
Hispanic/Latino	26	32		

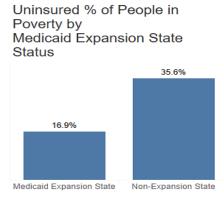
Total	Unsheltered	
141	2	
59	1	

Race	Shelt	tered
(adults and children)	Emergency	Transitional
White	66	107
Black or African- American	8	0
Asian	0	0
American Indian or Alaska Native	7	3
Native Hawaiian or Other Pacific Islander	0	0
Multiple Races	3	3

Unsheltered	Total
0	173
0	8
0	0
1	11
0	0
2	8

CNCAP has had numerous requests for rent and utilities, however with our current funding sources, clients have to be in crisis so we haven't actually been able to help, and people are seeing it coming since they are laid off and are trying to be proactive but unfortunately we can't help until they are in crisis. How many more calls I can't really say. Survey results about the same. Childcare has been an issue as they have closed but people are laid off as well so they are able to stay home with kids. Respite is an issue as Caregivers are tied down even more now and are not getting any kind of break.

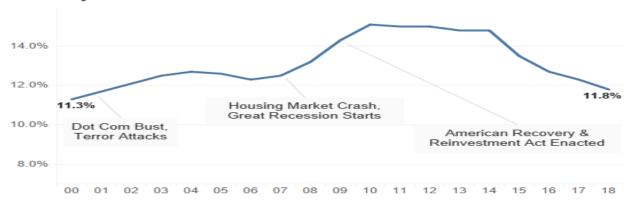
Spotlight on Medicaid



Health insurance coverage rates fell a half of percentage point leaving 8.5% of the nation uninsured. The most significant loss was a 0.7% reduction in the number of people receiving Medicaid, which has a direct correlation.

Part of the decline may be attributable to the growing use of Medicaid work requirements. Currently, six states have them and they are pending approval in an additional seven. Individuals losing Medicaid only worsens an existing problem of not all poor people having access to the program. Significantly, some states refused the expansion offered through the ACA. According to census data, people living below 100% of the Federal Poverty Level in Medicaid Expansion states had an uninsured rate of 16.9%. Conversely, in Non-Expansion states, the uninsured rate of people in poverty was 35.6%. People experiencing homelessness are amongst those not receiving services in non-expansion stat





While the overall picture of poverty in the US is improving, <u>fears of another recession</u> loom. This could drive the poverty numbers back up, putting more people at risk of homelessness. Those at the bottom of the economic ladder often need many years to financially recover from a recession; some <u>never fully recover</u>.

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Conclusion

Poverty increases the risk someone may become homeless. People of color are impoverished at higher percentages than their white peers. This inequity is amplified among people who experience homelessness. More research needs to be done to fully understand the connection between race, ethnicity, age, and gender in both poverty and homelessness. Additionally, people experiencing homelessness are more vulnerable to health challenges, so it is critical that Medicaid be available to them—without burdensome work requirements that disproportionately impact people living in shelters or on the street. States should be willing to expand their Medicaid coverage, especially in the face of a potential new recession. This safety net program, among others, can be the difference between living in poverty and falling into homelessness and staying stably housed.

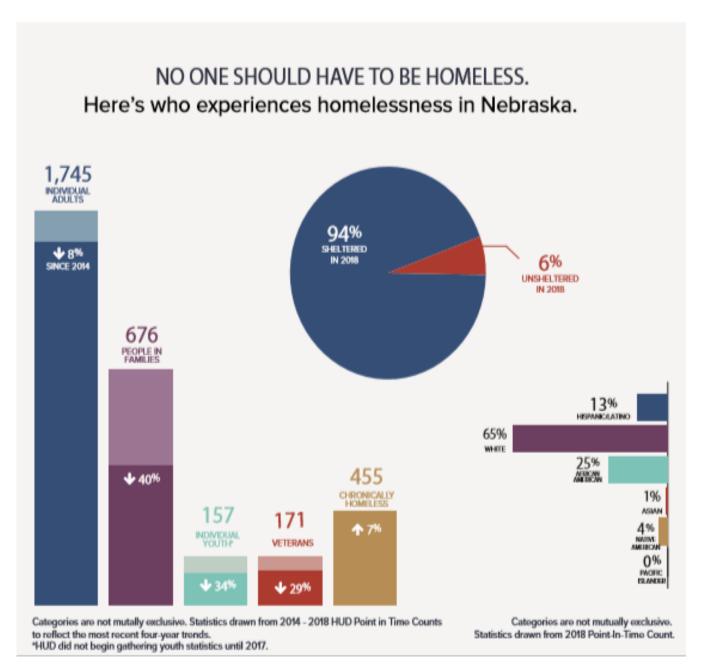
 $\underline{https://endhomelessness.org/poverty-is-down-but-concerns-about-homelessness-remain-up/}$

Homelessness Is a Problem in Nebraska

2,421

NEBRASKANS EXPERIENCED HOMELESSNESS IN 2018.

BUT WE'RE MAKING PROGRESS.



https://endhomelessness.org/wp-content/uploads/2019/08/NE-fact-sheet-2019.pdf

Point-in-Time Count (PIT)

The Point-in-Time Count provides homeless assistance communities with data needed to understand the number and characteristics of persons who are homeless on a single night. Housing and Urban Development (HUD) mandates a PIT must be collected during the last 10 days of January.

The Point-in-Time only counts people who are literally homeless according to HUD's definition. There are two types of literally homeless included in the count:

- Sheltered people who are at emergency shelters, including Domestic Violence Shelters, Transitional Housing, including Domestic Violence and Hotel/Motel paid by an agency on the night of the PIT.
- Unsheltered people who meet the HUD definition of living in a place not meant for human habitation, such as a car, park, abandoned building, sidewalk, bus/train station, etc.

In 2014, Lincoln and Balance of State conducted an Expanded Unaccompanied Homeless Youth Point-in-Time Count that included youth up to age 24, who may have been couch surfing, staying temporarily with friends.

Point In Time for CNCAP counties

The night of the PIT we reported the following: CNCAP NHAP RR- 1 family CNCAP SSVF RR- 32 single 10 families CNCAP Thrives- 23 singles 34 families CNCAP Vets RRH- 8 singles 3 families CNCAP KIND- 1 single 2 families

Point-in-Time Count NE-500 Nebraska Balance of State CoC

Population: Sheltered and Unsheltered Count

Persons in Households with at least one Adult and one Child

	Sheltered	
	Emergency	Transitional
Total Number of Households	24	36
Total Number of persons (Adults & Children)	84	113
Number of Persons (under age 18)	51	70
Number of Persons (18 - 24)	4	9
Number of Persons (over age 24)	29	34

Unsheltered	Total
1	61
3	200
1	122
0	13
2	65

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Gender	Sheltered	
(adults and children)	Emergency	Transitional
Female	49	72
Male	35	41
Transgender	0	0
Gender Non- Conforming (i.e. not exclusively male or female)	0	0

Unsheltered	Total
2	123
1	77
0	0
0	0

Ethnicity	Sheltered	
(adults and children)	Emergency	Transitional
Non-Hispanic/Non- Latino	58	81
Hispanic/Latino	26	32

Total	Unsheltered	
141	2	
59	1	

Race	Sheltered	
(adults and children)	Emergency	Transitional
White	66	107
Black or African- American	8	0
Asian	0	0
American Indian or Alaska Native	7	3
Native Hawaiian or Other Pacific Islander	0	0
Multiple Races	3	3

Unsheltered	Total
0	173
0	8
0	0
1	11
0	0
2	8

Chronically Homeless	Shelt	tered
(adults and children)	Emergency	Transitional
Total number of households	0	
Total number of persons	0	

Unsheltered	Total
0	0
0	0

Point-in-Time Count Veterans NE-500 Nebraska Balance of State CoC Inventory Count Date: 1/22/2019 Population: Sheltered and Unsheltered Count

Persons in Households with at least one Adult and one Child

	Sheltered	
	Emergency	Transitional
Total Number of Households	2	2
Total Number of Persons	8	7
Total Number of Veterans	2	2

Unsheltered	Total
0	4
0	15
0	4

Gender	Sheltered		
(veterans only)	Emergency	Transitional	
Female	2	2	
Male	0	0	
Transgender	0	0	
Gender Non- Conforming (i.e. not exclusively male or female)	0	0	

Unsheltered	Total
0	4
0	0
0	0
0	0

Ethnicity	Sheltered		
(veterans only)	Emergency	Transitional	
Non-Hispanic/Non- Latino	2	1	
Hispanic/Latino	0	1	

Unsheltered	Total
0	3
0	1

Race	Sheltered		
(veterans only)	Emergency	Transitional	
White	2	2	
Black or African- American	0	0	
Asian	0	0	
American Indian or Alaska Native	0	0	
Native Hawaiian or Other Pacific Islander	0	0	
Multiple Races	0	0	

Unsheltered	Total
0	4
0	0
0	0
0	0
0	0
0	0

Chronically Homeless	Sheli	tered
(veterans only)	Emergency	Transitional
Total number of households	0	
Total number of persons	0	

Unsheltered	Total	
0	0	
0	0	

Inventory Count Date: 1/22/2019 Population: Sheltered and Unsheltered Count Unaccompanied Youth Households

-	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of unaccompanied youth households	16	24	0	0	40
Total number of unaccompanied youth	17	24	0	0	41
Number of unaccompanied children (under age 18)	1	0	0	0	1
Number of unaccompanied young adults (age 18 to 24)	16	24	0	0	40

Gender		Sheltered		Unsheltered	Total
(unaccompanied youth)	Emergency	Transitional	Safe Haven		
Female	10	8	0	0	18
Male	7	15	0	0	22
Transgender	0	0	0	0	0
Gender Non- Conforming (i.e. not exclusively male or female)	0	1	0	0	1
Ethnicity		Sheltered		Unsheltered	Total
(unaccompanied youth)	Emergency	Transitional	Safe Haven		
Non-Hispanic/Non- Latino	13	18	0	0	31
Hispanic/Latino	4	6	0	0	10

Race	Sheltered			Unsheltered	Total
(unaccompanied youth)	Emergency	Transitional	Safe Haven		
White	14	20	0	0	34
Black or African- American	2	2	0	0	4
Asian	0	0	0	0	0
American Indian or Alaska Native	0	0	0	0	0
Native Hawaiian or Other Pacific Islander	0	1	0	0	1
Multiple Races	1	1	0	0	2

Chronically Homeless	Sheltered			Unsheltered	Total
(unaccompanied youth)	Emergency	Transitional	Safe Haven		
Total number of persons	0		0	0	0

Inventory Count Date: 1/22/2019

Population: Sheltered and Unsheltered Count

Parenting Youth Households

	Shelt	tered	Unsheltered	Total
	Emergency Transitional			
Total number of parenting youth households	2	8	0	10
Total number of persons in parenting youth households	6	19	0	25
Total Parenting Youth (youth parents only)	2	8	0	10
Total Children in Parenting Youth Households	4	11	0	15
Number of parenting youth (under age 18)	0	0	0	0
Children in households with parenting youth under age 18 (children under age 18 with parent under 18)	0	0	0	0
Number of parenting youth (age 18 to 24)	2	8	0	10
Children in households with parenting youth age 18 to 24 (children under age 18 with parents under age 25)	4	11	0	15

Gender	Sheli	tered	Unsheltered	Total
(parenting youth)	Emergency	Transitional		
Female	2	8	0	10
Male	0	0	0	0
Transgender	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0

Ethnicity	Shel	tered	Unsheltered	Total
(parenting youth)	Emergency	Transitional		
Non-Hispanic/Non-Latino	2	7	0	9
Hispanic/Latino	0	1	0	1

Race	Shelt	tered	Unsheltered	Total
(parenting youth)	Emergency	Transitional		
White	0	6	0	6
Black or African-American	0	0	0	0
Asian	0	0	0	0
American Indian or Alaska Native	2	2	0	4
Native Hawaiian or Other Pacific Islander	0	0	0	0
Multiple Races	0	0	0	0

Additional Homeless Populations Summary for NE-500 - Nebraska Balance of State CoC Date of PIT Count: 1/22/2019 Population: Sheltered and Unsheltered Count

Other Homeless Subpopulations

	Sheltered			Unsheltere d	Total		
	Emergency	Transitional	Safe Haven				
Adults with a Serious Mental Illness	24	21	0	3	48		
Adults with a Substance Use Disorder	20	11	0	1	32		
Adults with HIV/AIDS	0	0	0	0	0		
Adult Survivors of Domestic Violence	41	17	0	1	59		

https://ccfl.unl.edu/community-services-management/2019_BOSNE500_SubpopulationsSummary.pdf

Community Satisfaction

Community leadership and involvement are important parts of community development. Rural communities rely on volunteers for many community development activities as well as local leadership positions. In smaller communities in particular, community members often take on multiple roles. Given these challenges, how involved are rural Nebraskans in community and political activities? How do they feel about the leadership in their community? How often do they have social interactions with others during a typical month?

This report details 1,776 responses to the 2019 Nebraska Rural Poll, the 24th annual effort to understand rural Nebraskans' perceptions. Respondents were asked a series of questions about their community involvement and community leadership. Trends for some of the questions are examined by comparing data from the 2015 Rural Poll. In addition, comparisons are made among different respondent subgroups, that is, comparisons by age, occupation, region, etc. Based on these analyses, some key findings emerged:

- During the past year, many rural Nebraskans have worked with others to solve a problem in their community and served in a community organization in an unpaid role. Over one-third (35%) of rural Nebraskans worked together with someone or some group to solve a problem in the community where they live during the past year. Just under one-third (32%) served in a community organization in an unpaid role. Almost three in ten have spoken with their pocketbooks on political and social issues during the past year. However, rural Nebraskans have not been as involved in some other political activities during the past year.
- The proportion of rural Nebraskans working together with someone to solve an issue in their community during the past year increased compared to 2015. When comparing responses to 2015, the level of involvement in most activities remained about the same. However, the proportion saying they have worked together to solve an issue in their community during the past year increased from 29 percent in 2015 to 35 percent.
- Persons living in or near smaller communities are more likely than persons living in or near larger communities to have worked together with someone to solve a problem in their community, to have served in a community organization in an unpaid role, and to have contacted or visited a public official to express their opinion. As an example, at least 70 percent of persons living in or near communities with populations less than 5,000 have worked together with someone or some group to solve a problem in their community, compared to approximately 63 percent of persons living in or near communities with populations of 5,000 or more.
- Younger persons are involved in their community. Younger persons are more likely than older persons to have worked together to solve a problem in their community and to have signed an email petition about a social or political issue. Approximately 43 percent of persons under the age of 40 have worked with others to solve a problem in their community, compared to 24 % of persons age 65 and older.

Research Report 19-1 of the Nebraska Rural Poll Page ii

- Most rural Nebraskans have positive feelings about their community leadership. Over half of rural Nebraskans (57%) agree or strongly agree that their community's leaders are effective and do a good job. And, although opinions are somewhat mixed on whether or not they have a leadership crisis in their community today, more disagree with that statement than agree with it.
- Most rural Nebraskans agree that strong and effective community leadership can prevent their community's decline and can solve the problems their community faces today. Over three-quarters of rural Nebraskans agree or strongly agree that strong effective leadership will prevent their community's decline. And, two-thirds agree that the problems their community faces today can be solved through effective leadership.
- Opinions are mixed on whether or not the youth are being prepared to be effective leaders in their community. While just over four in ten rural Nebraskans agree that "we are preparing our youth to be effective leaders in our community," three in ten (30%) disagree with that statement. Twenty-eight percent neither agree nor disagree with the statement.
- Most rural Nebraskans agree that ordinary citizens have a great deal of power to help make their community's leadership more effective. However, when asked about their personal responsibility to actively participate in making their community's leadership more effective, opinions are mixed. Almost six in ten rural Nebraskans agree or strongly agree that ordinary citizens have a great deal of power to help make their community's leadership more effective. Just over one-third (34%) agree that they feel a great deal of personal responsibility to actively participate in making their community's leadership more effective. Just over two in ten disagree with that statement and almost one-half (46%) neither agree nor disagree.

 The proportions agreeing that ordinary citizens have a great deal of power to help make their community's leadership more effective and that they feel a great deal of personal responsibility to actively participate in making their community's leadership more effective both declined from 2015 to 2019.
- Many rural Nebraskans see technology as a tool that can be used by community leaders to engage more residents. However, opinions are mixed on if they would participate more in community issues if given an opportunity to participate through digital platforms. One-half of rural Nebraskans (50%) agree or strongly agree that community leaders would be more effective if they engaged more with residents through digital platforms in addition to traditional methods. However, only three in ten (30%) agree that they would participate more in community issues if given an opportunity to participate through digital platforms. A similar proportion (29%) disagrees with the statement and four in ten neither agree nor disagree.
- Persons living in or near larger communities are more likely than persons living in or near smaller communities to agree that strong effective leadership will prevent their community's decline. Eighty-one percent of persons living in or near communities with populations of 10,000 or more agree with this statement, compared to 72% of persons living in or near communities with less than 500 people.

Research Report 19-1 of the Nebraska Rural Poll Page iii

- Persons living in or near smaller communities are more likely than persons living in or near larger communities to agree that ordinary citizens have a great deal of power to help make their community's leadership more effective. Almost two-thirds (65%) of persons living in or near communities with populations under 1,000 agree with this statement, compared to 53 percent of persons living in or near communities with populations of 5,000 or more.
- Rural Nebraskans frequently interact with other members of their household, neighbors, and other friends and family not in their household. Most rural Nebraskans eat dinner with other members of their household every day. Most of rural Nebraskans do the following at least a few times per week: talk with any of their neighbors, see or hear from friends and family they don't live with using social media, see or hear from friends or family they don't live with by texting, and see or hear from friends and family they don't live with by phone.

https://ruralpoll.unl.edu/pdf/19communityinvolvement.pdf

Breakdown of Community Involvement by ECP Staff

2019-2020

There was 122 /153 ECP staff or 80% that responded to the survey.

•	NeHSA Advisory Board	2
•	Region 7 HAS Board	2
•	NeHSA Vice-President	1
•	NeHSA	122
•	National Head Start Assoc.	122
•	LB 1184	20
•	Planning Region Team #28	4
•	Planning Region Team #17	1
•	Planning Region Team #8	1
•	CCC Early Childhood Advisory	2
•	Child Well-Being	2
•	Platte Valley Planning Region Team	1
•	Child Find	1
•	Health Networking/State Health Coo	ordinators 1
•	Pre-K /Sixpence Advisories	55
•	Sherman County Care Team	2
•	Ne State Board of Nursing	1
•	American Heart Association	1
•	Dream Big Committee (Schuyler Con	nmunity for Kids)- 2
•	Dream Big Committee (Columbus Co	ommunity for Kids)- 2
•	Colfax CHIP	1
•	Stuart ECP Team	1
•	TEACH	1
•	Safe Kids Nebraska	1

2020 Community Assessment

Central Nebraska Community Action Partnership, Inc.

•	VCHS Development Committee	2	
•	Big Give	1	
•	Safety Committee	3	
•	CCC Student Health	2	
•	PRT 10	1	
•	PRT 9	1	
•	Child Abuse Prevention Council	1	
•	National Safety Comm.	1	
•	Broken Bow Childcare Support	1	
•	Region 7 Partnership Committee	1	
•	Dream Big (Schuyler)	1	
•	Communities for Kids	2	
•	Health Networking/State Health	1	
•	Health Services Advisory		1
•	Ministerio International Dios Amor		1
•	Chamber of Commerce		1
•	Sandhill Coop. Service Array		1
•	Planning Commission		1

All staff are members of the National Head Start Association and Nebraska Head Start Association.

Central Nebraska Community Action Partnership Early Childhood Programs 2019-20 Parent Satisfaction Survey **EHS- HB and CB** 105/117 or 90%

This survey is completed every year to help us improve service delivery to our families. A report of the results of this survey will be given out at the April Policy Council meeting.

How would you rate the overall program

Excellent 81 Good 20 Fair 1 Poor How would you rate the program on each of the following?

Staff Members:

	CITIDEI 3.				
1.	Overall Quality				
	Excellent 81	Good	22	Fair	Poor
2.	Staff Warmth ar	nd Friend	liness		
	Excellent 90	Good	13	Fair	Poor

2020 Community Assessment

Central Nebraska Community Action Partnership, Inc.

3. Staff Communication with Parents

Excellent **82** Good **21** Fair Poor

4. Staff Communication with Children

Excellent **87** Good **16** Fair Poor

5. Staff Confidentiality

Excellent **81** Good **20** Fair **1** Poor

Program:

1. Planned Educational Activities (classroom and/or home visit)

Excellent 83 Good 20 Fair Poor

2. Parent Meetings and/or Socializations

Excellent 67 Good 30 Fair 3 Poor

Facilities:

1. Safety and Security

Excellent **81** Good **19** Fair **1** Poor

2. Cleanliness

Excellent 84 Good 16 Fair 1 Poor

3. Outdoor Space

Excellent **73** Good **27** Fair **1** Poor

General:

1. Meals/Snacks

Excellent 76 Good 22 Fair 2 Poor

2. Written Information about the Program or Activities (newsletters, calendars)

Excellent 79 Good 26 Fair 1 Poor

Additional Questions:

1. Is your child excited to come to school or for home visits?

Always 72 Usually 26 Sometimes 5 Never

2. Why did you choose this program?

My other child was in it and he liked it.

Helps them learn

Developmental delays in both my girls.

Because it helps my child

Wanted my child to learn as much as possible.

For my child's education and interactions

Convenience and curriculum

To let my kids get an early start on development.

To give my daughter an education

Help with my boys.

Sounded fun and thought it would help my daughter develop.

To help my child learn and develop social skills

Have a way to start learning things at an early age.

I have seen improvement with my children

It's a good program

3. Would you recommend this program to other parents? Please explain your answer

Yes. Because it's very good for children and their development

Yes, being able to be part of your child's growth and learning is so good and important.

Yes, It's a great way to learn activities to help a child's education with recycling household items.

Yes, the staff is amazing and helped my daughter so much.

Well organized and helpful program to learn and also help kids to learn.

Yes, more families need this program Just hard to get into.

Yes. very beneficial to our family.

Program works very well.

Yes, teachers/home visitors are very friendly.

Yes, kids learn a lot

Please share with us any suggestions for improvement or additional comments you might have.

- Love the suppers at the parent meetings, more interaction
- No improvements. Everything is great.
- Honestly I love everything.

Pre-K/Head Start 369/438 or 84%

This survey is completed every year to help us improve service delivery to our families. A report of the results of this survey will be given out at the April Policy Council meeting.

1.	How would you	rate the ove	erall program?		
	Excellent 269	Good	Fair	9	Poor

How would you rate the program on each of the following?

Staff

fΜ	embers:					
1.	Overall Quality Excellent 281	Good	83	Fair	4	Poor
2.	Staff Warmth an	d Friendli	ness			
	Excellent 301	Good	65	Fair	3	Poor
3.	Staff Communica	ntion with	Parents			
	Excellent 277	Good	71	Fair	18	Poor
4.	Staff Communica	ntion with	Childrer	1		
	Excellent 284	Good	77	Fair	6	Poor 1

2020 Community Assessment

Central Nebraska Community Action Partnership, Inc.

5. Staff Confidentiality

Excellent 290 Good **75** Fair **3** Poor

Program:

1. Planned Educational Activities (classroom and/or home visit)

Excellent 256 Good 91 Fair 7 Poor 1

2. Parent Meetings and/or Socializations

Excellent 234 Good 111 Fair 9 Poor 1

Facilities:

1. Safety and Security

Excellent 295 Good 83 Fair 2 Poor

2. Cleanliness

Excellent 293 Good 85 Fair 4 Poor

3. Outdoor Space

Excellent 259 Good 99 Fair 6 Poor 2

General:

1. Meals/Snacks

Excellent 230 Good 130 Fair 6 Poor

2. Written Information about the Program or Activities (newsletters, calendars)

Excellent 275 Good 82 Fair 6 Poor

Additional Questions:

1. Is your child excited to come to school or for home visits?

Always 240 Usually 108 Sometimes 19 Never

- 2. Why did you choose this program?
 - It's a good program with access to IEP
 - Heard it was good.
 - excellent recommendations
 - Previous kids have been in.
 - Because we moved
 - The staff are amazing, and the curriculum is fun. Easy for kids to learn.
 - It was available
 - Location and reputation.
 - The flyer
 - I feel my child gets the right teaching he needs.
 - Great learning structure and benefits low income families.
 - My mom lined it up.
 - Great teachers.
 - Only place that had an opening.
 - I started out with sixpence and fell in love with the program.
 - Program is more like school
 - Best one around/Amazing staff

- To expose my child to more of his future classmates
- Local and other children have attended.
- Location
- Close to daycare, I felt it was a better program if a child would have any disabilities the help would be offered ASAP.
- Because early education is important and the curriculum taught is in line with the public school standards.
- Improve education, socialization and better prepare for longer school days.
- Majority of my child's classmates attend the program
- It is a great way to help my child get ready for Kindergarten.
- Socialization
- Great way to get the kids ready for Kindergarten.
- I previously worked at CNCAP and have seen the excellent job the staff have done. You should be very proud of your staff at CNCAP. They do an awesome job.
- I have heard good things about the program.
- It was available and it's a good program.
- Good school hours.
- Good reports from other parents
- Worked well with his speech teacher.
- Heard good reviews
- Heard nothing but positive reviews.
- Great staff
- Awesome program
- My son needed Speech help
- Offered through the school with easy access to SPED program/teachers
- Convenient
- For my child to have a head start.
- I was a previous participant
- 3. Would you recommend this program to other parents? Please explain your answer.
 - Yes, I am very pleased with the education my son is getting and the staff is great.
 - Yes, our child's verbal and reading have improved greatly.
 - Yes, I think the teachers are doing a wonderful job.
 - Yes, my child has been making letters on her own
 - Yes, a good all-around program.
 - Yes because it's a great community.
 - Absolutely. I love the attention and goals set up for students and also teacher to parent to make sure the whole family is succeeding.
 - You guys are doing great. Keep up the good work.
 - Yes, because our kids have learned a lot
 - Yes, I have never been disappointed
 - Yes, the teachers are great.
 - Yes the activities and staff are great.
 - Definitely!! My child has grown so much since he started.
 - Heard it was a good program from last year's parents.
 - Heard it was a good program
 - School Affiliation
 - To get my child ready for school

- Child Development
- To help my kids early before kindergarten
- Because there was an opening and it's close to town.
- Learns with kids his age.
- It is fantastic.
- Yes
- It is very helpful
- Had siblings in preschool before. All good.
- Very good Parent Meetings.
- Yes, my kids have learned so much here.
- Yes great people
- Yes, my child loves school and there are lots of great activities.
- Yes, great routine.
- Yes, my child always looks forward to going to school.
- Absolutely, Good preschool before the child goes to Kindergarten.
- Yes, fosters early education and other important skills needed to smoothly transition to kindergarten.
- Yes, the school readiness is amazing.
- Yes, well structured.
- Saw a lot of growth in my child developmentally.
- Great location and great staff.
- Yes they offer great activities and play areas that they change out during the school year.

Please share with us any suggestions for improvement or additional comments you might have.

- A lot of no school due to staff illness. Consistency is important for preschoolers.
 Communication lacks sometimes calendars are received after the month has started.
 Our son has not worked on writing his address or phone number. At this point of the year he is unable to write his name and it's his second year.
- More communication and advances on meetings for the working parents.
- Send information at the beginning of week instead of at the end of the week.
- It would be nice to have transportation.
- I wish the pre-school was able to take more advantage of the local beef program.
- Keep up the good work
- I think you are doing awesome.
- Doing a fantastic job.
- Thank you for all you do.
- You guys are doing great.
- Not having to do the absent percentage thing due to so many illnesses going around.
- Wish school lunches were not required.
- You guys are amazing. I greatly appreciate you for going over and beyond for our overactive son. Not only in school but helping me with ideas at home as well. You have so much patience with him and giving him his "breaks" to regroup is much more than I ever expected going into this.
- By the second year I think there should be less play and more education. Kids need structure and need to follow step by step directions. I feel they are not prepared for Kindergarten.
- I have come to visit and heard teachers yelling.

- I don't like that the children switch teachers in mid-year. I don't understand the point of home visits.
- I would suggest implementing a celebration during mid-year holidays. But centered around giving spirit and satisfaction from giving to others.
- Newsletters always have lots of grammar mistakes. I would like better communication about field trips beforehand so I know my child will not be at the center. Parent meetings seem disorganized. The parent reps don't really know what they are supposed to be doing.



Sixpence Parent Survey

Program Name: <u>Central Nebraska Community</u> <u>Action Partnership</u>

Date March 2020

How long have you participated in this program? Check one:

 \square Less than 6 months (8) \square 6 to 11 months (11) \square 1 to 2 years (15) \square More than 2 years (21)

What is the age of your oldest child enrolled in this program?

 \square Less than 6 months (2) \square 6 to 11 months (3) \square 1 to 2 years (40) \square More than 2 years (27)

Thank you for completing this survey about your child's program. Your responses will help us learn about the ways the program is helping children and families. It will also help us find ways to improve the program. Your responses will be kept confidential. Please return the survey in the stamped envelope that was provided.

Please indicate how much you agree or disagree with the following statements. (If you are in a program with a family facilitator AND a classroom teacher, please respond to the questions based on your relationship with your child's teacher.)	Stron gly disagr ee	Somewh at disagre e	Somewh at agree	Stron gly agre e
1. My home visitor or my child's teacher has helped me to learn more about my child's development	1	2	3(2)	4 (53)
2. My home visitor or my child's teacher has encouraged me to do more fun activities and play with my child.	1	2	3 (1)	4 (54)
3. My home visitor or my child's teacher has encouraged				

me to read more books with my child.	1	2	3 (1)	4 (54)
4. My home visitor or my child's teacher has encouraged me to talk more with my child.	1	2	3 (1)	4 (54)
5. My child has benefitted from participating in this program.	1	2	3 (1)	4 (54)
6. I am a better parent because of this program.	1	2	3 (6)	4 (48)
7. I know that my teacher and home visit can help me find services I might need, such as transportation or medical care.	1	2	3 (5)	4 (50)
8. I have a positive relationship with my home visitor or my child's teacher.	1	2	3	4 (55)
9. My home visitor or my child's teacher cares about me and my child.	1	2	3	4 (55)
10. I am very satisfied with this program.	1	2	3	4 (55)

What do you like most about this program?

- The awesome gifts each child gets as well is an awesome bonus.
- The resources provided
- I like that it teaches me new activities to do with my child and different ways and things to help her grow emotionally, physically and mentally.
- It helps me grow as a parent.
- The Home visitor gets us to try new things and think outside the box. She has a vested interest in making sure my child's development is on target.
- I like all the great opportunities my child and I get to experience together.
- All the socializations and home visits.
- Love the program
- Helps me and my family out.
- The activities that are done at the home visits.
- I also like that Stacy allows my son to lead the activities.
- I love getting new books all the time to read to my children
- The Social factor of the program.
- All the great resources and programs they offer. Also if myself or my family needed help then they try to help me the best they could.

- I love the activities that are planned and the knowledge of early education that my provider offers.
- I enjoy learning about how simple games can help my child learn.
- The different activities
- Helps me learn different ways to play with my child while helping him learn
- The activities are really great for my child.
- I like coming up with new activities to do with my children and knowing the importance of those activities.
- That the home visitor comes to our house. They teach and advise us in the learning area.
- The weekly visits
- The educational aspect of the program is amazing
- The program is beneficial to us parents also.

What could this program do to improve?

- Maybe having occasional weekend visit options
- More holiday themed activities.
- I think it already works great.
- Nothing for right now.
- A few rules like no cell phones at socialization
- Have more parents involved with kids at socializations instead of with other parents.
- Nothing I can think of.
- Having socializations closer so we wouldn't have to drive close to an hour away.
- Not sure at this time.
- Wish more people would come to socialization.
- I love it the way it is.
- I wish it went past the age of three.
- Haven't had any problems and can't see any improvements that are needed

Sixpence Program 2019-2020 Parent Survey Summary 55/57 or 96%

This survey is completed every year to help us improve service delivery to our families. A report of the results of this survey will be given out at the April Policy Council meeting. The Policy Council hopes to have 100% returns.

To keep the survey anonymous, please do not include your child's name or any staff person's name.

How Long in the Sixpence Program:

Less than 6 months (8) 6 to 11 months (11) 1 to 2 years (15) more than 2 years (21)

What is the age of your oldest child enrolled in this program?)

Less than 6 months (2) 6 to 11 months (3) 1 to 2 years (23) More than 2 years (27)

Questions are rated as follows:

- 1. Strongly Disagree
- 2. Somewhat Disagree
- 3. Somewhat agree
- 4. Strongly agree
- 1. My home visitor or my child's teacher has helped me to learn more about my child's development? 53 strongly disagree 2- somewhat agree strongly agree
- 2. My home visitor or my child's teacher has encouraged me to do more fun activities and play with my child. 54- strongly disagree 1- somewhat agree strongly agree
- 3. My home visitor or my child's teacher has encouraged me to read more books with my child. 54- strongly disagree 1- somewhat agree strongly agree
- 4. My home visitor or my child's teacher has encouraged me to talk more with my child.
 - 54- strongly disagree 1- somewhat agree strongly agree
- 5. My child has benefitted from participating in this program.
 - 54- strongly disagree 1- somewhat disagree somewhat agree strongly agree
- 6. I am a better parent because of this program.
 - 48- strongly disagree 6- somewhat disagree somewhat agree strongly agree
- 7. I know that my teacher and home visit can help me find services I might need, such as transportation or medical care. **50- strongly disagree 5- somewhat agree strongly agree**
- 8. I have a positive relationship with my home visitor or my child's teacher.
 - 55- strongly disagree somewhat agree strongly agree
- 9. My home visitor or my child's teacher cares about me and my child.
 - 55- strongly disagree somewhat agree strongly agree
- 10. I am very satisfied with this program.
 - 55- strongly disagree somewhat agree strongly agree

What do you like most about this program?

- The awesome gift each child gets as well is an awesome bonus.
- The resources provided
- I like that it teaches me new activities to do with my child and different ways and things to help her grow emotionally, physically and mentally.
- It helps me grow as a parent.
- The Home visitor gets us to try new things and think outside the box. She has a vested interest in making sure my child's development is on target.
- I like all the great opportunities my child and I get to experience together.
- All the socializations and home visits.
- Love the program
- Helps me and my family out.
- The activities that are done at the home visits.
- I also like that Stacy allows my son to lead the activities.
- I love getting new books all the time to read to my children

- The Social factor of the program.
- All the great resources and programs they offer. Also if myself or my family needed help then they try to help me the best they could.
- I love the activities that are planned and the knowledge of early education that my provider offers.
- I enjoy learning about how simple games can help my child learn.
- The different activities
- Helps me learn different ways to play with my child while helping him learn
- The activities are really great for my child.
- I like coming up with new activities to do with my children and knowing the importance of those activities.
- That the home visitor comes to our house. They teach and advise us in the learning area.
- The weekly visits
- The educational aspect of the program is amazing
- The program is beneficial to us parents also.

What could this program do to improve?

- Maybe having occasional weekend visit options
- More holiday themed activities.
- I think it already works great.
- Nothing for right now.
- A few rules like no cell phones at socialization
- Have more parents involved with kids at socializations instead of with other parents.
- Nothing I can think of.
- Having socializations closer so we wouldn't have to drive close to an hour away.
- Not sure at this time.
- Wish more people would come to socialization.
- I love it the way it is.
- I wish it went past the age of three.
- Haven't had any problems and can't see any improvements that are needed

Head Start/Pre-K, EHS HB/CB 2019-2020 Parent Survey Summary 474/555 or 85%

How would you rate the overall program? Excellent 350 Good 110 Fair 10 0 Poor 1. Overall Quality Excellent 362 Good 105 4 0 Fair Poor 2. Staff Warmth and Friendliness Excellent 391 Good 78 Fair 3 Poor 0 3. Staff Communication with Parents Excellent 359 Good 92 Poor 0 Fair 18

4. Staff communication with Children

Excellent 371 Good 93 Fair 6 Poor 1

5. Staff Confidentiality

Excellent 371 Good 95 Fair 4 Poor 0

6. Planned Educational Activities (classroom and /or home visit)

Excellent 339 Good 111 Fair 7 Poor 1

7. Parent Meetings and/or Socializations

Excellent 301 Good 167 Fair 12 Poor 1

8. Safety and Security

Excellent 376 Good 102 Fair 3 Poor 0

9. Cleanliness

Excellent 377 Good 101 Fair 5 Poor 0

10. Outdoor Space

Excellent 332 Good 126 Fair 6 Poor 2

11. Meals and Snacks

Excellent 306 Good 152 Fair 8 Poor 0

12. Written Information about the Program or Activities (newsletters, calendars)

Excellent 354 Good 102 Fair 7 Poor 0

13. Is your child excited to come to school or for home visits?

Always 312 Usually 134 Sometimes 24 Never 0

- 14. Why did you choose this program?
 - Close to daycare, I felt it was a better program if a child would have any disabilities the help would be offered ASAP.
 - Early education is important and the curriculum taught is in line with the public school standards.
 - Improve my child's education, socialization and better prepare my child for longer school days.
 - Majority of my child's classmates attend the program
 - It is a great way to help my child get ready for Kindergarten.
 - Socialization
 - Great way to get the kids ready for Kindergarten.
 - I previously worked at CNCAP and have seen the excellent job the staff has done. You should be very proud of your staff at CNCAP. They do an awesome job.
 - I have heard good things about the program.
 - It was available and it's a good program.
 - Good school hours.
 - Good reports from other parents
 - The preschool worked well with his speech teacher.
 - Heard good reviews about the program
 - Heard nothing but positive reviews.
 - Great staff
 - My son needed Speech help which was offered through the school with easy access to SPED program/teachers
 - Convenient

Central Nebraska Community Action Partnership, Inc.

- Wanted my child to have a head start.
- I was a previous participant
- 15. Would you recommend this program to other parents?
 - Yes, I am very pleased with the education my son is getting and the staff is great.
 - Yes, our child's verbal and reading have improved greatly.
 - Yes, I think the teachers are doing a wonderful job.
 - · Yes, my child has been making letters on her own
 - Yes, a good all-around program.
 - Yes because it's a great community.
 - Absolutely. I love the attention and goals set up for students and also teacher to parent to make sure the whole family is succeeding.
 - Yes, because our kids have learned a lot
 - Yes, I have never been disappointed
 - Yes the activities and staff are great.
 - Definitely!! My child has grown so much since he started.
 - Heard it was a good program from last year's parents.
 - School Affiliation
 - To get my child ready for school
 - There was an opening and it's close to town.
 - Learns with kids his age.
 - It is fantastic.
 - Had siblings in preschool before. All good.
 - Very good Parent Meetings.
 - Yes, my kids have learned so much here.
 - Yes, my child loves school and there are lots of great activities.
 - Yes, great routine.
 - Yes, my child always looks forward to going to school.
 - Absolutely, Good preschool before the child goes to Kindergarten.
 - Yes, fosters early education and other important skills needed to smoothly transition to kindergarten.
 - Yes, the school readiness is amazing.
 - Yes, well structured.
 - Saw a lot of growth in my child developmentally.
 - Great location and great staff.
 - Yes they offer great activities and play areas that they change out during the school year.

Please share with us any suggestions for improvement or additional comments you might have.

- More communication and advances on meetings for the working parents.
- I wish the pre-school was able to take more advantage of the local beef program.
- Not having to do the absent percentage thing due to so many illnesses going around.
- Wish school lunches were not required.
- I don't like that the children switch teachers in mid-year.
- I would suggest implementing a celebration during mid-year holidays. But centered on giving spirit and satisfaction from giving to others.

Weatherization gets kudos!

Sharon, Thank you for the
Sharon, Thank you for the
window, new door, insulation
window, new furnace. Trevor
and new furnace.

Thank you so much for replacing and have a new furnace installed in my home. There are not enough words to express how much that gesture has meant to my son and myself. The stress of not having to worry about such an issue is indescribable. Again I can't thank you Sharon and the staff of CNCP enough for helping us. God's Blessing, S. B.

Thank you so much for all the help you did for me or the weatherization. Sharon you're awesome, talking on the phone helping me so often. Thank you Eric, Tim and Mark for all the hard work. Keep up the good work! Stay Healthy! Thanks Again! O.M. & D.B.

Sharon, Larry & workers, George and I really really appreciate all of you for helping us with our furnace, back door & windows and just in the nick of time. You (all) were too nice, polite and very thorough. Thank you for everything. You all help God help us! Linda

First I want to thank you for guiding me through the application process and keeping me informed of my process of where I stood on the waiting list. Then there is Eric & Tim who were very professional and explained everything as they moved along getting things done. And they did a great job cleaning up a mess they made! Simple words don't seem to be enough to let you know how grateful I truly feel! I know the quality of my life has been improved by the service you have provided. Again Thank You Connie K

While numbers are important, it is the families behind the statistics that show the need for improved housing in Central Nebraska. This is why we share these heartfelt thank yous and hope you can feel the emotion behind their words.

CNCAP

NE Continuum of Care 2019 Consumer Satisfaction Survey

1. How long have you been on the program?	1. How	long have	you been	on the	program?
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I. HOW IOTIE	; ilave y	ou been on the progr	aiii:		40	_	
					13 months t		_
< 1 n	nonth	1 to 6 months	7 to 1	2 months	1/2 y		-
	3%	50%		28%		7%	12%
					(check all that		
2. What ser	vices d	o you receive from th	is agency or p	rogram?	apply)		
Case Management Services						37	
Substance Abuse Services					0		
	Rent/Utility Assistance						
						49	
		Assisting accessing b	enefits (SSI)			4	
		Food/Nutrition Assis	stance			14	
		Vocational/rehabilit	ation services			1	
		Mental Health					
		Services				7	
		Medical				5	
HIV Prevention Education						0	
		Security Deposits (re				26	
		Income Tax	arrey demences,			20	
		Assistance				1	
	Employment Education Transportation					15	
						6	
						10	
		Life Skills				18	
					12		
		Parenting				12	
25			+h:a) /ah aal			
-	rservic	e needs being met in	this program	r (check			
one)		Nact of the Time	Cama af +1a	. +:	Navan		
Always	000/	Most of the Time	Some of th		Never		
	90%	5%		5%		0	
3. Overall h	ow sati	sfied are you with the	•	ou have re	ceived from this a	igency or program?	
		Somewhat					
Very satisfie		Somewhat satisfied	dissatisfied		Very dissatisfied		
	93%	3%		3%		0	
	tance f	rom this agency helpe	d you to mair	ntain your	housing or impro	ve your housing	
situation?							
Very much		Somewhat	A little		Rarely/never	NA	
	91%	3%		3%			2%

		n been helpful ir Not relevant to		taining or increasi grams)	ng yo	our income (emp	loyme	ent assistance,	
Very much		somewhat		A little		Rarely/never		NA	
	64%		16%		5%		2%		13%
6. Overall di	d Staff	:							
		Treat you with	dignity	y and respect					
		Always		Most of the time	9	Sometimes		Rarely/never	
			95%		3%		2%		0
		Seem to under needs	m to understand your situation and ds						
		Always		Most of the time	9	Sometimes		Rarely/never	
			95%		3%		2%		0
		Do a good job	of expl	aining program re	equire	ements			
		Always		Most of the time	9	Sometimes		Rarely/never	
			90%		7%		2%		0
7. Overall was Staff:									
		Responsive in a	a tiiiiei	Most of the time	_	Comotimos		Daroh /povor	
		Always	000/			Sometimes	20/	Rarely/never	0
		Sensitive to yo background	Sensitive to your ethnic and cultural			2%		0	
		Always		Most of the time	9	Sometimes		Rarely/never	
		,	93%		5%		0	••	0
		Able to communicate with you in a language you can understand							
		Always		Most of the time	9	Sometimes		Rarely/never	
			98%		2%		0		0
		Knowledgeable	nowledgeable about available services						
		Always		Most of the time	9	Sometimes		Rarely/never	
			93% 7%				0		0
		Treat your personal information confidentially							
		Always		Most of the time	9	Sometimes		Rarely/never	
			96%		2%		2%		0
8. Do you feel that you can make decisions about what happens to you in this program?									
		Always		Most of the time	9	Sometimes		Rarely/never	

10%

90%

0

0

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9. Have you had the chance to give input into how the program is run (for example: consumer advisory board or tenants; council, grievance procedure, suggestion boxes, consumer involvement in agency/board membership)?

Yes No N/A 71% 26% 2%

10. Do you feel safe in this program/facility

Always Most of the time Sometimes Rarely/never 91% 5% 2% 0

11. Is the program's facility clean and well maintained?

Always Most of the time Sometimes Rarely/never 93% 2% 0 0

12. When you have a problem or complaint, is a staff person available to help you?

Always Most of the time Sometimes Rarely/never 91% 7% 2% 0

13. Has the quality of your life improved since you entered this facility or program?

Greatly Somewhat Stayed the same Gotten worse 93% 5% 0 2%

Clients were given the option to make additional comments.

Has the quality of your life improved since you entered this facility or program?

Better living, Better Money situation

I would have been homeless without this program; it has helped me regain my independence and belief in myself again.

Has helped greatly with getting my children & I stable housing & other household supplies. Just overall grateful for the program.

I have a home thanks to the program.

I am getting more financially stable and able to do things with my family.

Great program.

I am more confident on maintaining housing for myself.

I had become homeless and this program helped me get into a place of my own – as well as being able to keep my pets.

When you go from nothing to "this" is nothing short of a miracle, they do that every day!

I have apartment.

I became self-sufficient, I have better parenting skills, budgeting skills provide by Dee.

Lived in house with no utility for summer. They turn on power for winter.

My foster daughter continues to get up to the point where she is not in the home.

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Yes, help with my rent has helped me be less stressed about paying all the bills.

The staff were very kind, friendly, and knowledgeable and explained all benefits available. Were very helpful through all the application processes.

Before I was living in a basement and isolating. Now I feel like I can grow as a person.

More positive attitude

They have treated me better than my sisters.

An awesome beautiful bunch of people!! Smile

We would still be homeless without this program!

Has been awesome, but for job issue had trouble on my own.

New housing learn how to budget better.

Security deposit helped get us into a new apartment with much better conditions.

I have a place of my own I love it. Can't thank them enough!

The program helped me get back on my feet.

No more motel

Without asst. I would have been homeless

This is what I like about the program/facility...

Great staff and lots of help and flexibility with meetings

The listening and guidance

They helped me get a place.

Efficient

Budgeting & someone to talk to.

I greatly appreciate the assistance w/ rent/deposits, daycare bill. Fuel, pullups & groceries. Those things really have helped out over the year.

Staff is very friendly and approachable when there are any problems.

Very helpful

Great employees

How much they helped me get back on my feet, and how good they were to me.

Everyone has been understanding of my situation and respectful about it.

Everything about the assistance provided tome by this program has made my life better.

The written word is impossible to explain how I feel about what they have done for me.

I felt comfortable sharing my situations with Dee. She was understanding, helped me problem solve and went out of her way to five me support, emotionally at times she would just let me sit and get myself together before continuing on.

Seems knowledgeable

The knowledge of the people and the programs

The staff was always available. To answer questions, help where they could, help find resources when they couldn't.

I like how they treat me with respect and that they care. It was really hard for me to open up and let

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people know about my personal life.

You all do care and give the dignity and respect of others indeed

How different services work together seamlessly, I feel very welcome as a veteran in this town.

Cooperation and staff always upbeat.

Friendly and compation with my needs

The people! Dee is awesome!

Helped me when I needed it most.

I love everything it is awesome.

Very helpful

Helped with payments and baby stuff

Helping veterans, office needs updating in Gering NE

This is what I wish were different about the program/facility

It was longer

Just nervous of being on my own once I'm done w/ the program. I pray that

I can afford it.

They did a wonderful job, wouldn't change anything.

Nothing

They had a better office with more room at least new carpet.

I would like to stay on the program longer to become totally successful in all areas of my life.

Life skills is consistent and counseling to help improve our relationship

I only wish the program was not a "time limited" program. I am trying to get disability through SSA and that process takes longer that the 8 months allowed.

I wish more veterans knew that there is help out there. Just have to ask for it and swallow your pride.

Nothing

Wish someone was available in the evenings or on call on weekends.

Is a hard question to answer nothing at this time.

Nothing was very satisfied.

More funding/accessibility to help more people more fully.

Can't think of anything.

Nothing.

Longer help.

Very helpful if phone bill was allowed with rent & utilities

Any other comments?

Thanks for help. Helping get a new place for kids & learn to save.

Rainier was very helpful & listened to my problems.

I will miss Dee Orlando not just for helping me during my time of need, but also for the person she is and how I have felt welcome every time I have stepped into her office. She is amazing.

My case worker, Terri O'Brien of the Grand Island, Ne has been a god send who has gone above and beyond to help e and I am eternally grateful to her and the program.

Thanks to them it is possible for me to "Pay It Forward" That is a promise, thanks everybody for your help!

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Wish NHAP would provide other assistance other than rent & utilities.

Thank you for being there.

Concerned that I am not being treated fairly as the parent concerns for members influencing my daughters disrespectful behavior.

The staff were always there to help – without making me feel less or small for needing the help. It is very difficult for me to ask for help – and they never make me feel like I was not worth the help.

Thank you for everything beautiful people indeed!

Thank you for all the help.

Thanks for all the help God Bless you all for everything.

Did great help Thank you!

Glad able to work with us; flexible to individual situations.

Thank you from the bottom of my heart.

Local office "rocks" Please update building/office area.

Participant Satisfaction Survey for CNCAP WIC

How often do WIC appointments work for you? 63% Always 35% Usually 2% Sometimes 0% Never

How would you like to be reminded about your appointment? 42 phone call 134 text alert 4 mailed letter

Have you ever missed an appointment 46% Yes 54% No

How long do you usually have to wait in the clinic waiting room past the time of your appointment?

72% Less than 5 minutes 26% 6-15 minutes 2% 16-30 minutes 1% more than 30 minutes

Is your clinic space private enough for you to feel comfortable asking or answering personal questions?

65.92% Always 27.93% Usually 6.15% Sometimes 0% Never

Do you feel comfortable asking the WIC staff when you have questions? 100% Yes 0% No

Which 3 things do you like most about WIC?

- 1. Check for foods
- 2. Nutrition education
- 3. Checks for formula

Comments: I like the whole program!

Would you recommend WIC to a friend?

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96.1% Yes 3.9%

Comment: No friends that have babies. I am an old mom.

How helpful is the nutrition information you receive: 89.8% Very helpful 10.2% Slightly helpful 0% Not at all helpful

Has the WIC program helped you learn about healthy eating? 96.1% Yes 3.9% No

If WIC could give information in any of the following ways, which top 2 ways would you choose?

- 1. Individual counseling
- 2. Pamphlets

Have you heard about the online nutrition education website called WIC Health.org 42.13% Yes 57.87% No
If yes, have you used WIChealth.org
17.57% Yes 82.43% No
If yes, was the breastfeeding counselor helpful?
94.64% Yes 6.15% No

Is your WIC office breastfeeding friendly? 89.60% Yes 10.40% No If yes, why?

Accepting of breastfeeding

allowing people to breast feed as long as possibble Anwsered questions very well. areas to breastfeed ayudan alas madres derle la leche edecuada [They help mothers by giving them proper milk] because no one minds if you feed your kid because we encourge breastfeeding before i had my daughter i wasn't sure if i wanted to breastfeed or not and they just gave me all the things that would be helpful to help me decide Breastfeeding posters, staff offer nursing covers if we need one breastfeeding welcome & peer counselors encourage women to breastfeed and trys to normalize it and make you more comfortable

feel open to breastfeed

Gave me very helpful tips to get my child to latch on.

give support about it has plenty of space

encouraged

haven't used helpful with breastfeeding concerns I ASSUME i didnt know exactly how to go about breastfeeding and she helped me out with that. ive felt comfortable breastfeeding my child

while here

ive seen people breastfeeding

N/A

never denied a mother to breastfeed

nice

no one judges you for it not a lot of people

Not busy which leads to ability of being

able to breastfeed

not lots of people

not to crowded nurses are knoledgeable

open to feed baby when hungry por que proporcionan la ayuda necesaria sobre esetema [Because they provide the necessary helponthe subject] PORQUE ME AYUDARON CON MUCHA INFORMACION [BECAUSE THEY HELPED ME WITH A LOT OF INFORMATION] private rooms that make you feel comfortable

promote people doing while waiting

providing good information and a peer

She always anwsers my questions she explains everything very well

they are supportive

they call and listen and help with any questions

they do classes for it

they dont care if you breastfeed

They encourage it

They encourage it. They encourage it. they encourage you

they encouraged me to try it

they gave me breastfeeding tips They have other rooms for it

they have plenty of space they help out very much with it

they help with breastfeeding with peers.

they offer couselors they offered lots of help with different ways to try breastfeeding they offered pamplets they promote bf

They show that it is welcome they support breast feeding

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i dont breast feed but if i did i wouldnt see a problem doing it here

i fed my child wherever need be

i have before

I havent seen it, but I imagine they would be pro breastfeeding I receive no judgement when I nurse at the appointments

I would never feel uncomfortable feeding my child here if nessessary

child here it nessessar im assuming it is

I'm not shy about breastfeeding im sure they allow people to breastfeed without feeling guilty informational on breastfeeding its allowed and no judging

its heathy

she explaned things vary will

she helped me through everything that i needed help with and encouraged me. the freedom to breastfeed freely The staff encourage you to breastfeed

There are places to go if breastfeeding that no one could see there is a back room

there is rooms for someone that may be uncounterfeiter They

they allow me to feed when nessary

they alow me to feed n here

They always encourage breastfeeding over formula and they give me helpful they answered my breastfeeding questions

they try to get u to

They welcome it.

very helpful

very helpful with any questions

Very informational and encouraging

Very supportive and helpful.

was very helpful and understaing

we can breastfeed if needed wic is always nice

Women breastfeed and they support it!

you dont get imbarised

you have privacy to do so.

If no, why?

All open space Child to old for breastfeeding Do not breast feed

I didn't know there was as much information about breast feeding available

Did the WIC staff tell you how to use your WIC checks at the store?

100% Yes 0% No

Please rate your understanding of how to use your WIC checks. 98.31% Good 1.69% Fair 0% Poor

How easy are WIC checks to use? 86.52% Easy 13.48% Moderate 0% Difficult

Do you usually buy all the food listed on your WIC checks? 79.8% Yes 20.2% No

Do you usually use the full dollar amount of your fruit/vegetable checks? 94.44% Yes 5.56% No

If no, why?

Don't get food for me just baby

Guessing how much the food is i get close to it

I'm afraid to go over the amount and feel embarrassed

I'm usually off by some change if not a dollar.

Just didn't work out.

Not used

How helpful is the WIC food list? 94.86% Very helpful 5.14% Slightly helpful 0% Not at all

How often are the cashiers at the grocery store or pharmacy helpful? 41.9% Always 41.9% Usually 14.53% Sometimes 1.68% Never

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Do you ever feel embarrassed using the WIC checks at the store? 31.51% Yes 66.49% No

Are you Hispanic? 9.66% Yes 90.34% No

Please indicate your race.

88.7% White 1.6% Black or African American 7.5% Indian or Alaskan Native 0% Asian 0.5% Pacific Islander/Native Hawaiian 1/6% Other

Which of these describe you? (Check all that apply) 12.24% Pregnant 9.39% Not Breastfeeding 8.98% Breastfeeding 51.02% Parent of Child 18.37% Parent of Baby

How long have you been coming to WIC? 9.5% 6 months 17.88% 6-12 months 27.37% 1-2 years 22.91% 3-5 years 22.35% 5 years +

Where did you first hear about the WIC program? 78% Family or friends 9% hospital 5% Dr. office 6% Access Nebraska 1% Pharmacy

Do you have children under the age of 5 who are not on WIC? 97% No 3% Yes

How old are your children that are on WIC? 26% Under 1 year 27% 1-2 years 24% 2-3 years 23% 3-4 years

Additional comments:

At the clinics the staff are very nice and helpful. At the local store, hometown market, there is one clerk that ALWAYS is a problem and has an attitude with me when I use my checks. She is either very nosy asking how much longer i can get checks or is shouting louder than necessary about me using the checks. I try to not use them when she is there but sometimes it does not work with my schedule to shop around her work schedule.

Having the money on a card would be easier than checks help with purchasing meat would be great

How to wing a child off a pacifier when they are just a young age. Different way to latch a child to the breast more info on breastfeeding

I love the program it is so helpful

I appreciate all the help from wic and the ladies.

I enjoy how nice and patient all the WIC staff are with me and my kids. I like the fact that they are willing to help.

I love all the staff in my wic clinic

I really cant think of anything else off the top of my head.

I think the maximum amount of formula cans should be more than 7 past the age of 6 months

I wish there was other ways to get checks sent when im working and cant make it to my appointment. Sometimes wish it wasnt every 2 months too. So HAPPY they added Life cereal back on WIC items. Also my home town store doesnt always have everything, so we go without that item. Why cant it be substituted for similar item.

I'm very pleased to have their help! More \$\$ for fruits & veggies

no need to say much more. The wic staff for Broken Bow Nebraska are amazing people please don't stop

Sad that this is our last visit! It was wonderful getting to know the staff and feeling like family. Love all the resources it offers.

Thanks

Thanks for all the great information you provide. Especially where my 1 year old should be such as using a cup and brushing teeth. Before I moved to this state I had WIC where I lived and they never told me any of that for my first child. It took me until she was almost 4 that she could drink and use silverware on her own. You guys gave me tips for my 2nd child and now she is 1 and using a cup and silverware on her own. So thank you! Makes my life a little easier!

The staff are very friendly and always greet me with a smile.

We are thankful for wic and how kind the staff have been my oldest is 13 so we have used wic in a few counties now and they are helpful switching stuff when you move too We love and appreciate WIC very much. Our son is on a feeding tube and they provide all of his monthly formula for the feeding tube. They are very flexible with scheduling and understanding if we cannot come to an appointment because our son his sick. I always feel like I can ask questions and they are very helpful with everything. Thank you for all you do you are so helpful and appreciated by many families. We are lucky to have this in our communities.

Would like more options for dairy more cheese if possible. We never use all of the milk we are given You all do a very good job, and its nice to come in to a friendly environment! You guys are awesome:) You guys are doing a good job



Resources

Americans with Disabilities Act

https://adata.org/faq/what-definition-disability-under-ada

American Foundation for Suicide Prevention

afsp.org/StateFacts

Americas Health Ranking

https://www.americashealthrankings.org/explore/health-of-women-and-children/measure/food_insecurity_household/state/NE

Broadstreet

https://www.broadstreet.io/board/pubboard/Qm9hcmRDYXJkVXNlTm9kZTo1Njk5MDM%3D

Care.com

https://www.care.com/c/stories/2423/how-much-does-child-care-cost/

Centers for Disease Control and Prevention

https://www.cdc.gov/ncbddd/disabilityandhealth/impacts/nebraska.html

Center for Rural Affairs

https://www.cfra.org/sites/default/files/publications/2019% 20NE% 20Uninsured% 20Coverage% 20Gap% 20BY% 20COUNTY% 20% 281% 29.pdf

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County Helath Rankings

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https://www.daycarehotline.com/state-daycare-license-requirements-50-states/

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Department of Numbers

https://www.deptofnumbers.com/unemployment/nebraska/

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Enroll Nebraska

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Every Child matters

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Great Schools.org

https://www.greatschools.org/nebraska/

Homesnacks

https://www.homesnacks.net/best-cities-for-families-in-nebraska-1211114/

HUD

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Income by Zip

https://www.incomebyzipcode.com

Index Mundi

https://www.indexmundi.com/facts/united-states/quick-facts/nebraska/percent-of-people-of-all-ages-in-poverty#table

Investopedia

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https://journalstar.com/news/state-and-regional/nebraska/nebraska-leads-in-response-to-2020-census

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Kearney Hub

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Kelty Mental Health

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Live Stories

https://www.livestories.com/statistics/nebraska/veteran-demographics

Live Well Nebraska

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https://endhomelessness.org/wp-content/uploads/2019/08/NE-fact-sheet-2019.pdf

National Foundation for Infectious Diseases

https://www.nfid.org/wp-content/uploads/2020/01/NFID-Annual-Report-FY19-Final.pdf

National Low Income Housing Coalition

https://nlihc.org/housing-needs-by-state/nebraska www.nlihc.org

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Nebraska Crime Commission

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http://dhhs.ne.gov/CHPM%20Reports/HP2020%20Report2015.pdf

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Nebraska.gov

https://www.nebraska.gov/gas/index.cgi

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https://nebraskafamilyalliance.org/policy/human-trafficking/

https://nebraskafamilyalliance.org/nfa-joins-governor-ricketts-and-attorney-general-peterson-in-recognizing-human-trafficking-awareness-month/

Nebraska Health Insurance

www.ehealthinsurance.com > nebraska-health-insurance

Nebraska Legislature

http://news.legislature.ne.gov

Nebraska Passport

http://nebraskapassport.com/

Nebraska Resource and Referral System

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https://nrrs.ne.gov/respite/data2/elr_index.php

Nebraska Wesleyan

https://www.nebrwesleyan.edu/academics/honors-academy-dual-credit/honors-academy-dual-credit

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NTV

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Unsplash.com

Mitchell Luo

https://unsplash.com/s/photos/potholes

USDA United States Department of Agriculture

https://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas/

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 $https://data.ers.usda.gov/reports.aspx?ID=17827\#Pa4fa00232c4146a1b5c60e9df8426b61\\3~38iT$

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U.S Census Bureau

American Community Survey

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All percentages have been rounded to the nearest whole number. National and state data sheets are updated annually. The specific timing of updates depends on the release schedule of the data sources cited for each topic. N/A: data are not available on this measure for this state. 1 The National Survey on Drug Use and Health uses the Diagnostic and Statistical Manual of Mental Disorders Fourth Edition's MH3 definition of a major depressive episode as having had five or more of the following nine symptoms nearly every day in the same 2-week period, where at least one of the symptoms is a depressed mood or loss of interest or pleasure in daily activities: (1) depressed mood most of the day; (2) markedly diminished interest or pleasure in all or almost all activities most of the day; (3) significant weight loss when not sick or dieting, or weight gain when not pregnant or growing, or decrease or increase in appetite; (4) insomnia or hypersomnia; (5) psychomotor agitation or retardation; (6) fatigue or loss of energy; (7) feelings of worthlessness; (8) diminished ability to think or concentrate or indecisiveness; and (9) recurrent thoughts of death or suicidal ideation.