

COUNTY DATA BOOK



KENTUCKY KIDS COUNT 30TH ANNIVERSARY



Kentucky *youth* Advocates

A PROJECT OF KENTUCKY YOUTH ADVOCATES AND THE KENTUCKY STATE DATA CENTER, UNIVERSITY OF LOUISVILLE





**Better together—
Giving you MORE!**



**PASSPORT
HEALTH PLAN**

BY MOLINA HEALTHCARE



2020 COUNTY DATA BOOK



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ACKNOWLEDGMENTS

The 2020 Kentucky KIDS COUNT *County Data Book* is the 30th annual report of both state and county data to measure and improve on child well-being. Many individuals and organizations devote significant time, energy, and ideas to the creation of this book. In particular, we would like to extend special thanks to Matthew Ruther and Thomas Sawyer of the Kentucky State Data Center at the University of Louisville for their dedicated work collecting and processing some of the data featured in this book and online. Kentucky Youth Advocates also thanks graphic designer Rob Gorstein for his contributions.

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KIDS COUNT Data Partners

The following KIDS COUNT data partners make this project possible through special data runs, and Kentucky Youth Advocates is particularly grateful for their support:

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Council on Postsecondary
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Kentucky Cabinet for Health and
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Department for Community
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Division of Child Care

Division of Family Support

Division of Protection and
Permanency

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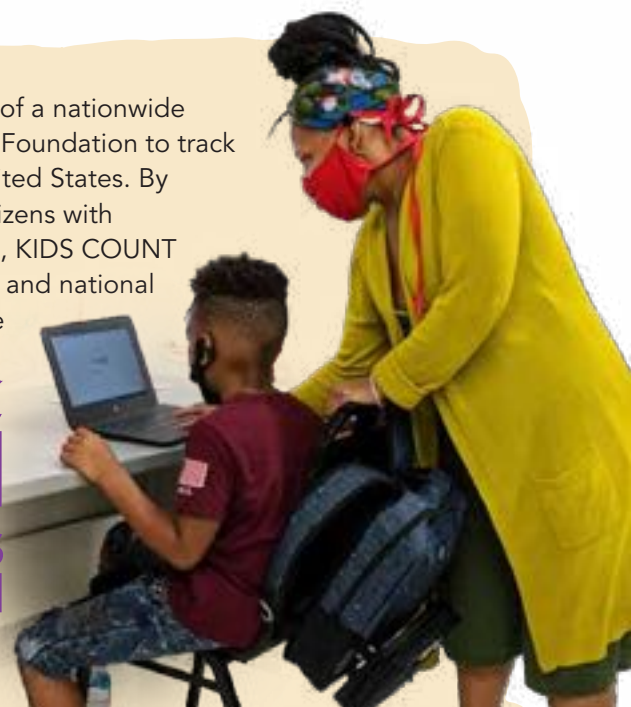
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Kentucky KIDS COUNT is part of a nationwide initiative of the Annie E. Casey Foundation to track the status of children in the United States. By providing policymakers and citizens with benchmarks of child well-being, KIDS COUNT seeks to enrich the local, state, and national discussion about how to secure better futures for all children. For more information on the KIDS COUNT initiative, visit the Annie E. Casey Foundation web site at aecf.org.



CONTENTS

4	FOREWORD
6	USING THE DATA BOOK AND KIDS COUNT DATA CENTER
8	FEATURED SPONSORS
10	ESSAY
22	STATE DATA TRENDS
24	CHILD POPULATION DATA
26	ECONOMIC SECURITY
28	Data Tables <ul style="list-style-type: none">• Children in Deep Poverty• Children in Poverty• Children in Low-Income Families• Children Living in Food Insecure Households
32	EDUCATION
34	Data Tables <ul style="list-style-type: none">• Kindergarteners Ready to Learn• High School Students Graduating on Time• Students with an Individualized Education Plan• Student Homelessness
40	HEALTH
42	Data Tables <ul style="list-style-type: none">• Smoking During Pregnancy• Low-Birthweight Babies• Children Under 19 With Health Insurance• Young Adults With Health Insurance• Teen Births
46	FAMILY AND COMMUNITY
48	Data Tables <ul style="list-style-type: none">• Births to Mothers Without a High School Degree• Children in Foster Care• Children Exiting Foster Care to Reunification• Youth Incarcerated in the Juvenile Justice System
52	DEFINITIONS AND DATA SOURCES
55	ENDNOTES
57	EXPLORE THE KIDS COUNT DATA CENTER
BACK COVER	COUNTY MAP AND PHOTO CREDITS



FOREWORD

Our mantra at Kentucky Youth Advocates is “what gets measured gets changed.” And this year, there’s no denying it: By every measure, 2020 has been rough—and especially so for kids and families in Kentucky.

As this book goes to print, over 100,000 Kentuckians have contracted COVID-19, and more than 1,400 have died. COVID-19 has impacted everyone. It has disrupted our daily routines; hurt our ability to meet basic needs; and presented serious threats to the health and safety of us and our loved ones.

COVID-19 HAS ALSO MADE US PAINFULLY AWARE OF THE DEEP DISPARITIES AMONG US, as we know that some Kentucky children and families are feeling a much heavier burden as a result of COVID-19 and its many ripple effects.

CHILDREN WITH SPECIAL NEEDS, many of whom already lacked the educational supports they deserved before the COVID-19 pandemic, struggle greatly with remote learning.

CHILDREN BEING RAISED BY GRANDPARENTS, many of whom are at high risk due to their age, have limited to no options when it comes to quarantining and struggle with the technology required for online schooling.

CHILDREN IN LOW-INCOME FAMILIES are more likely to have parents with low-wage jobs, such as staffing a cash register or stocking shelves, putting their families at greater risk of contracting the virus. Yet they are much less likely to have paid sick leave to cover them if they fall ill.

And while parents of all income levels are facing the unique challenge of juggling child care, work, and schooling, low-income and single-parent households struggle the most when schools and child care centers don't reopen for in-person instruction or permanently close.

The COVID-19 pandemic reminds us once again that opportunities differ based on where you live, your family's earnings, and the color of your skin.

Importantly, 2020 shined a bright light on the systemic racism that limits opportunities for Black and Brown children in Kentucky. The disparities exacerbated by COVID-19, as well as the secondary trauma of seeing the deaths of Black people at the hands of police, have brought attention to the dual pandemics facing the Commonwealth and our nation.

One pandemic is related to a mysterious and highly contagious virus, and the other is the result of centuries of racial injustice and oppression.

Due to systematic and historical inequities, Black and Brown children are being left behind. Children of color are much more likely to grow up in poverty than their White peers. They are less likely to read at grade level or be proficient in math. They are more likely to be removed from their homes and placed in foster care or juvenile detention centers.

On all measures of child well-being, we witness the impact of systemic racism. We aren't talking about overt actions by individuals who treat people differently because of their skin

color, though we are aware that this kind of racism is still too common. Systemic racism refers to the longstanding and historical structures that were built to put Black Americans at a disadvantage. For example, discriminatory housing and hiring practices that were legal just decades ago have limited the ability of Black families to build wealth, making it harder to weather a financial crisis brought on by job loss, illness, or even car repairs.

While we weren't surprised, we were disheartened by new data showing that the COVID-19 pandemic is negatively impacting children of color more than their White peers. Our opening essay uses this data to outline the disparate impact of the COVID-19 pandemic on children of color. For example, approximately two-thirds of Kentucky's Latinx households

with children reported losing income from employment since the pandemic began. Several months into the pandemic, fewer than half of Kentucky's Black households with children reported being employed in the past week.

We believe in the power of data to shine light on inequities and inspire action. The dual pandemics have shown us that the status quo was not working for many Kentucky kids and their families. We must use this opportunity to rethink and rebuild our systems in a way that achieves the vision of Kentucky being the best place in American to be young. And to truly reach that vision, we must achieve equity for every Black and Brown child in Kentucky.

— Terry I. Brooks, Ed.D.
Executive Director
Kentucky Youth Advocates



USING THE DATA BOOK AND KIDS COUNT DATA CENTER

For 30 years, Kentucky Youth Advocates has produced an annual Kentucky KIDS COUNT *County Data Book* providing data on child well-being for professionals, policymakers, and community members working to improve the lives of children and families in the Commonwealth.

A Holistic Look at Child Well-Being

For optimal well-being children need strong families, good health, protection from harm, economic security, a high-quality education, and thriving communities. The Data Book provides a snapshot on how Kentucky's youth are faring in these areas by looking at 17 key indicators. These indicators span childhood, from birth to adolescence, using the latest and strongest available data from federal and state agencies for Kentucky's communities. For a complete description of the definitions and data sources for each indicator, see page 52.

K-PREP tests were not administered in Kentucky public schools during Spring 2020 due to the COVID-19 pandemic. Therefore, in this year's Data Book the indicators on reading and math proficiency are temporarily replaced with data on the proportion of students with an Individualized Education Plan due to having a disability and the percentage of students experiencing homelessness.

Data are portrayed as rates (which account for differences in population size), so each county can easily compare their situation to that of the state as a whole or surrounding counties. In addition to offering the most recent data, this Data Book shows whether outcomes have improved, worsened, or stayed

the same since five years prior (or as close as possible). This information enables communities to see whether they are moving in the right direction on improving child well-being.

Supplemental County Profiles, available on our website at kyyouth.org/kentucky-kids-count/, provide additional information for each county, including the baseline rates used for comparison and county rankings for the 17 indicators in the Data Book. The indicator-specific rankings represent a comparison between counties at a specific point in time, but a high rank does not necessarily mean a county is doing very well, or as well as desired, on that indicator; it simply means a county is doing better than most other counties.



Check out the interactive KIDS COUNT Data Dashboard at kyyouth.org/kentucky-kids-count/data for additional information on the 17 indicators in the Data Book, including data broken out by race and ethnicity to show how children fare often differs greatly across racial groups.

Important Data Reminders

- Data are based on different timeframes (i.e., calendar year, school year, three-year aggregates, and five-year aggregates). Readers should check each indicator, definition, and data source to determine the reported time period.
- When there are only a small number of incidents representing a particular indicator, the original data source or Kentucky Youth Advocates may choose to not provide (i.e. suppress) that data, either to protect confidentiality – individuals may be easy to identify when there are a very small number of incidents in a county – or because reporting a small number of intermittent incidents would create an inaccurate picture. When this occurs, rates cannot be calculated.
- Data are portrayed as rates to account for varying population sizes – that is, the data identifies the number of instances something occurred per a fixed number of people. Percentages and rates were calculated using standard mathematical formulas. Check each indicator, definition, and data source to determine the denominator used in the rate calculation and whether the rate is per 100 or per 1,000.

The KIDS COUNT Data Center

The KIDS COUNT Data Center provides easy access to county and school district data for the approximately one hundred indicators tracked by the Kentucky KIDS COUNT project. To access the data, go to datacenter.kidscount.org/KY. Use the navigation tools on

the left side of the page to choose the desired level of geography and home in on topics of interest. The KIDS COUNT Data Center also contains national and state data provided by the National KIDS COUNT project of the Annie E. Casey Foundation. The KIDS COUNT Data Center allows users to:

- Rank states, Kentucky counties, and Kentucky school districts on key indicators of child well-being;

- Create a customized profile of data for a selected county or school district including any or all of the indicators in the Kentucky KIDS COUNT project;
- Generate customized maps for presentations and publications that show how children are faring across communities; and
- Embed automatically updated maps and graphs in websites or blogs.

KIDS COUNT data center

datacenter.kidscount.org/ky

Hundreds of child well-being indicators at your fingertips to support smart decision making and good policies for children and families.



SEARCH

Compare Kentucky to other states, or compare Kentucky counties and school districts, on hundreds of statistics relevant to your community.

Search by characteristic

 Search by age

 Search by family nativity

 Search by race and ethnicity





VISUALIZE

Create custom profiles, maps, line graphs and bar charts with the data that you find.





SHARE

Post data visualizations on Facebook, add custom graphics to Tumblr and tweet about how the well-being of your state's children compares with the region and nation.

SIGNATURE
SPONSOR



WITH DECADES OF LOCAL AND NATIONAL EXPERIENCE, Passport Health Plan by Molina Healthcare is committed to improving the health and lives of our members by delivering high-quality healthcare. Our Medicaid-focused approach is built upon our whole-person, locally based care philosophy of meeting members where they are—whether we are serving mothers and children or disabled adults in urban or rural settings. We understand that medical coverage is foundational to health, particularly among children, and are committed to ensuring all Kentucky families and children receive the quality healthcare they need.

We are proud to once again sponsor the KIDS COUNT *County Data Book*. To ensure our children's wellbeing, it is crucial to know where our communities stand today and where we need to go. The data included in this book helps us all evaluate both our progress and our shortcomings so we can collectively make course corrections to support our kids.

Passport shares Kentucky Youth Advocates' goal to help Kentucky children live happier, healthier lives, and Kentucky KIDS COUNT can help shape the lives of our young people and the future of our state.

—Ryan Sadler, Plan President of Passport Health Plan by Molina Healthcare, Inc.



PRESENTING SPONSOR



Since 1923, Kosair Charities has enhanced the health and well-being of children in our community by delivering financial support for child advocacy, healthcare, education, and social services. As we work together with our partner organizations to help children reach their potential, we rely on the Kentucky KIDS COUNT data. The KIDS COUNT data on child well-being highlights our community's progress and identifies areas where we still have work to do. We are honored to work alongside Kentucky Youth Advocates to ensure kids in our community grow up healthy, happy, and safe.

—Keith Inman, President, Kosair Charities



FACING THE DUAL PANDEMICS OF COVID-19 AND RACIAL INJUSTICE



Rebuilding a better Kentucky for ALL CHILDREN AND FAMILIES

THE YEAR 2020 HAS UPENDED LIFE AS WE KNEW IT. Kentucky was just beginning to see signs of Spring. Students were looking forward to spring break, and March Madness was around the corner. All of that changed suddenly when COVID-19 cases began showing up in Kentucky in early March. School closings, business closings, working from home (unless an essential worker), and layoffs soon followed. Across the Commonwealth, in urban and rural settings, and among children and families of all races and ethnicities, we all experienced significant disruptions.

Changes were especially disruptive to children and youth who thrive on routine. By mid-March, many school districts were pausing in-person learning to slow the spread of COVID-19, and in April, most school districts decided to remain closed for the remainder of the school year. Some children and families were able to transition smoothly to online learning because they already had a strong internet connection at home and a device to use. Other students – in both urban and rural communities – did not have reliable

internet connections or even a place to call home with a space for learning. Children also have missed out on milestones, such as prom and graduation ceremonies, and other typical activities with peers, such as sports. The combination of lacking the tools needed to connect online, missing the personal interaction with teachers, and social-emotional impacts of the pandemic put many students at risk of experiencing a COVID-19 learning slide, similar to what students experience after a summer away from the classroom.

Parents and caregivers have also experienced major disruptions and uncertainty, especially on the financial front. With most places of business closed for over a month, some parents were laid off or furloughed, others juggled working at home, and still others who work in essential jobs were going to work while schools and child care centers were closed. In a survey on the impact of the COVID-19 pandemic,* 53 percent of Kentucky households with children reported losing income from employment since March 13, 2020. Additionally, even months into the pandemic, about one in three households with children anticipated they would lose employment income in the month ahead (see chart). Among Kentucky households, Latinx households with children were affected at a higher rate, with at least two out of three reporting losing income from employment since the pandemic began.¹ This is consistent with national data showing Black and Latinx households were more likely to lose income due to work in vulnerable jobs, including 58 percent of Latinx households and 53 percent of Black households, compared to 39 percent of White households.²

On top of the disruptions and economic impacts of COVID-19 experienced by so many, this pandemic has exposed – and amplified – deep disparities for people of color. In fact, Kentucky and the U.S. have also been reckoning with another pandemic – one of racial injustice marked by centuries of persistent and systemic racism. This other pandemic has gained significant attention due to the racial disparities in COVID-19 cases and fatalities alongside egregious and deadly instances of police violence against people of color. Though these injustices have been a daily experience for our Black and Brown family members, friends, colleagues, and neighbors, the stark realities of increased rates of COVID-19 hospitalizations and deaths, as well as the videos and reports of violence by law enforcement, have highlighted the blatant disparities in human treatment based on race. **Kentucky children and families are navigating the dual pandemics of COVID-19 and racial injustice.**

The health of Black and Latinx communities have been impacted especially hard by COVID-19 due to pre-existing disparities that are

KEY TERMS

Equity: a state of justice and fairness

Latinx: a gender-neutral term to describe a person or group of people of Latin-American descent

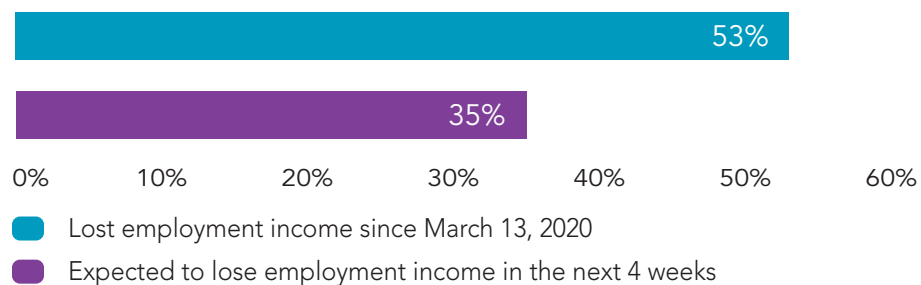
Pandemic: a disease prevalent throughout an entire country, continent, or the whole world

Racial Disparities: differences between racial groups in their treatment or the opportunities afforded them

Racial Trauma: the mental and emotional injury caused by experiencing or witnessing race-based discrimination or violence

Systemic Racism: the normalization and legitimization of an array of dynamics – historical, cultural, institutional and interpersonal – that routinely advantage Whites while producing cumulative and chronic adverse outcomes for people of color

More than half of Kentucky households with children reported losing income from employment since the pandemic began, and more than a third expected to lose income in the month ahead

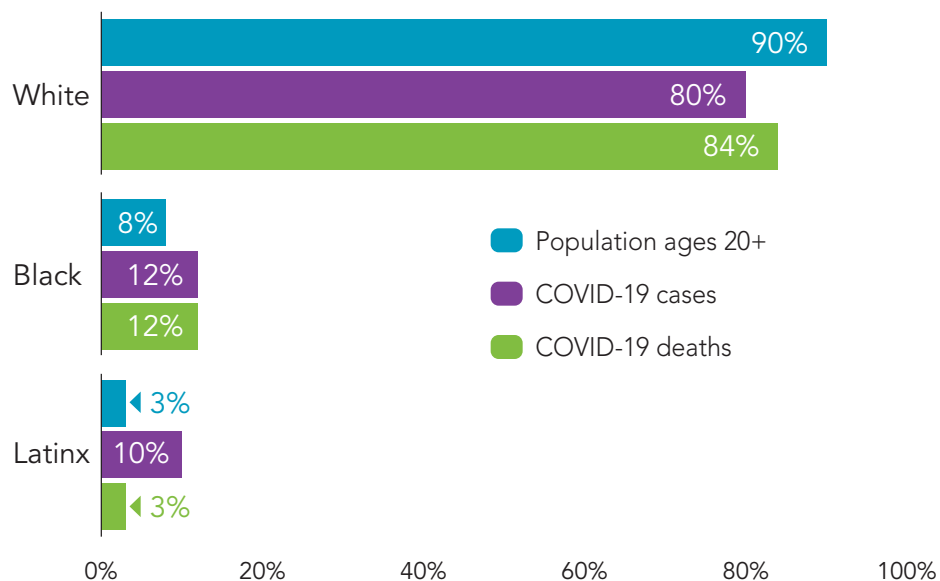


SOURCE: Population Reference Bureau analysis of the U.S. Census Bureau, Household Pulse Survey, 2020 (June 25-July 21 responses).

* The U.S. Census Bureau began a weekly survey, the Household Pulse Survey, in April 2020 to gauge the impact of the pandemic on U.S. households. Due to the experimental nature of the survey and fluctuating sample sizes, the results should be interpreted as approximations. For many of the questions, the Kentucky data was not reliable enough to report by race, but data is included where reliable. For various reasons, including limited English language skills, fear and distrust of government agencies, and different preferences on how to be invited to surveys, the results may not be representative of the Latinx population or immigrant populations in Kentucky.

the result of a variety of historic and present-day factors rooted in systemic racism. These factors range from unequal access to health coverage and differential treatment in healthcare, to being more likely to live in areas with less access to healthy foods, safe outdoor spaces and clean air, along with education and employment barriers that have concentrated Black and Brown people in lower-wage jobs.^{3,4} As a result of these unjust systems, Black residents are more likely to have underlying health conditions, including obesity, certain cancers, and sickle cell disease, which increase their risk of serious illness and even death from COVID-19.^{5,6,7}

Black and Latinx Kentuckians are overrepresented in COVID-19 cases and deaths



SOURCE: Kentucky Department of Public Health, KY COVID-19 Daily Summary 10/21/2020 and National Center for Health Statistics' 2019 Bridged-Race Population Estimates.

DATA NOTES: White and Black race categories include persons with and without Latinx ethnicity. COVID-19 case and death data exclude instances in which the race and ethnicity were unknown. Among cases with known age, 84 percent have been for persons age 20 or older, and only one death has been under age 20.

Latinx residents appear to be more exposed to COVID-19 due to higher rates of living in crowded housing or working jobs that place them in close quarters with other employees or frequent interaction with the public.^{8,9} These risk factors are, unfortunately, reflected in the data on COVID-19 cases and differences in death rates from COVID-19.

Among COVID-19 cases and deaths in which the race and ethnicity are known, Black and Latinx Kentuckians are overrepresented compared to their proportion of the total population, whereas White Kentuckians are underrepresented (see chart).¹⁰

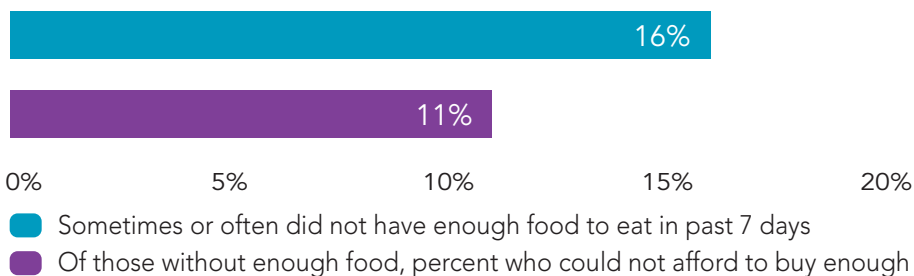
For Latinx families with mixed immigration status, challenges have been compounded by fears about implications for immigration if they sought care for being sick or help with basic needs like food assistance. Some families fear being picked up and detained by immigration

officials, while others are concerned about assistance being considered part of the public charge rule* and impacting their ability to become a legal permanent resident. Even Latinx citizens and residents with legal status sometimes avoid seeking help out of fear of being stopped by immigration officials who suspect they are undocumented. Additionally, the economic stimulus payments mailed to households required that every adult

in a household have a social security number to receive the payment; this denied the emergency funds to children who are U.S. citizens but live with at least one immigrant parent without a social security number. Immigrants are also excluded from receiving many supports available to U.S. citizens due to the public charge rule¹¹ or find the applications difficult to access and complete, and immigrants without documentation are not eligible for government supports.

The economic impacts have also impinged on families' ability to afford housing expenses and food. From mid-August to mid-September, only 72 percent of Kentucky families with children reported being able to pay their rent on time in the previous month.¹² With less wealth and savings to rely on during the economic crisis, Black households in Kentucky were significantly more likely than households overall to struggle to pay rent.¹³ Additionally, Black and Latinx families already were more likely than White families to live in more crowded housing, making quarantining from family members hard to do should someone be exposed to COVID-19. Kentucky families have also struggled to provide sufficient food for children, with 16 percent not always having enough food to eat (see chart).¹⁴

Nearly 1 in 6 Kentucky households with children did not have enough food in the past 7 days



SOURCE: Population Reference Bureau analysis of the U.S. Census Bureau, Household Pulse Survey, 2020 (August 19-September 14 responses) and Center on Budget and Policy Priorities analysis of U.S. Census Bureau, Household Pulse Survey, 2020 (September 2-28 responses).

* The Department of Homeland Security implemented the "public charge" rule to prevent low-income immigrants from becoming legal permanent residents by taking into consideration if an applicant has used or is likely to use food assistance, housing assistance, or non-emergency Medicaid while in the U.S. as a legal immigrant.

On top of the disparate health and economic effects of COVID-19, communities of color have had their mental and emotional health strained by the steady stream of Black and Brown lives lost due to police violence. Nationally, the number of people shot and killed by police has remained fairly consistent over the past five years, as has the overrepresentation of people of color. Black Americans are more than twice as likely to be killed by police as White Americans. Latinx Americans are also killed by police at a disproportionate rate.¹⁵ The experience of witnessing racial injustice, directly or indirectly, can result in race-based traumatic stress, also known as racial trauma.¹⁶ Racial trauma may be even more heightened for Kentuckians due to the killing of Breonna Taylor – an innocent Black woman – by police and the resulting protests demanding justice for her death.

As Kentucky works to rebuild the economy and address the impacts of these pandemics, an opportunity exists to take advantage of the creativity forced by COVID-19 and the increased awareness of racial injustice. That may mean reimagining how schools operate and drawing from positive aspects of online learning to address and end longstanding achievement gaps. For families, it can mean rebuilding an economy that invests in communities that have been marginalized and assists low-income workers – who are disproportionately people of color – in finding sustainable jobs. And for the health of our Commonwealth, it can mean modifying our health delivery systems to reach communities that have not had equitable access to care. While the changes and challenges created by the dual pandemics have not been easy to manage, we can create a stronger Kentucky as a result.

Challenges we face

Health

As the COVID-19 pandemic began to hit Kentucky, it became clear the challenge was an issue of collective health. The health of people on whom we all rely – hospital staff, grocery store workers, teachers, and restaurant employees – was intertwined. Decisions about social distancing and mask wearing impacted community spread, which affected vulnerable populations, including many parents and caregivers. The importance of paid sick leave became clear, because workers in jobs without it would not be able to quarantine if sick or exposed to someone who was, if it meant losing income for several weeks.

During a health pandemic, it is vital everyone has health insurance so they can get the care they need, but COVID-19 has highlighted some pre-existing racial disparities in health coverage and use of care. In Kentucky, Latinx youth and adults are least likely to have health insurance coverage.^{17,18} Additionally, many Latinx families nationally have lost health coverage when they lost their jobs.¹⁹ Many immigrant families see healthcare as a luxury instead of a routine need due to how health care was provided in their country of origin. Families with mixed immigration status may avoid seeking health care out of fear of deportation, and there is persistent mistrust of the health care field by Black residents due to infamous examples of historic mistreatment.²⁰

Early in the pandemic, as data began to show people of color being impacted harder by COVID-19, Governor Beshear made a long-term commitment to address the disparities in chronic health conditions and in access to health insurance. Kentucky's past action of

Local nonprofits fill the gaps for families during pandemic

Nonprofits, such as La Casita Center in Louisville, have stepped in to provide help to families who have had trouble applying for government assistance or are not eligible.



935 FAMILIES received essential groceries and care items



466 SPANISH-SPEAKING PATIENTS with COVID-19 connected to supports



255 DIAPER KITS to families

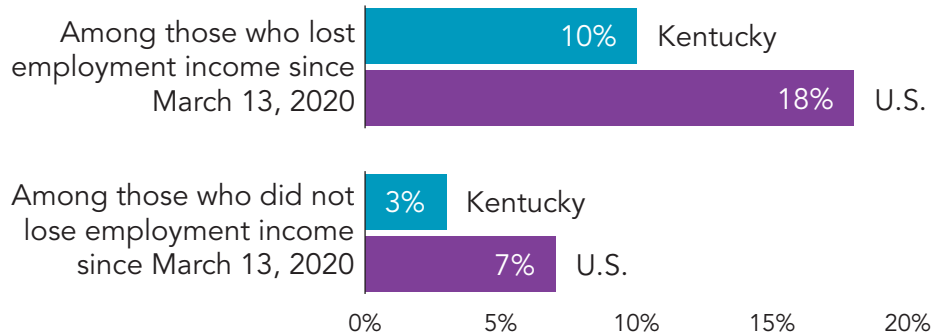
SOURCE: La Casita Center, Week 25 Report.

expanding the Medicaid program and decision to open Medicaid enrollment during the pandemic have helped buffer the effects of job lay-offs on health coverage. Comparing April to June of this year with the past year, adult enrollment in Kentucky's Medicaid program has increased by 10 percent.²¹

In Kentucky, an estimated 6 percent of adults in households with children were uninsured during late June to late July, compared to 14 percent nationally.²² It is unsurprising that uninsured rates vary by loss of income during the pandemic, as reduced income can make a private health insurance plan unaffordable. Still, Kentucky's state rates are lower than the national rates, as workers with reduced income may now qualify for coverage due to Medicaid expansion (see chart).²³

Compared to the nation, more Kentucky adults in households with children have health insurance, even among those who lost income

Percentage of uninsured adults in households with children



SOURCE: Population Reference Bureau analysis of the U.S. Census Bureau, Household Pulse Survey, 2020 (June 25-July 21 responses).

The pandemic has also increased stress and anxiety among many Kentuckians. For caregivers, the combined stressors of staying healthy, dealing with loss of employment and income, and experiencing racial trauma have increased anxiety and depression in Kentucky. For Latinx families, fears are compounded by concerns of family separation and deportation.²⁴ Those pressures can make the work of parenting even more challenging. Among households with children, more than a third of respondents reported feeling anxious during more than half of the past week, and more than one in four reported feeling depressed (see chart). Those who reported losing employment income and those not working were most likely to report experiencing anxiety or depression. Despite their higher likelihood of being impacted by COVID-19, Black respondents consistently were less likely to report anxiety or depression.²⁵ These findings are consistent with research that has shown over time that even in the face of significant challenges, Black people report higher levels of resilience and optimism about

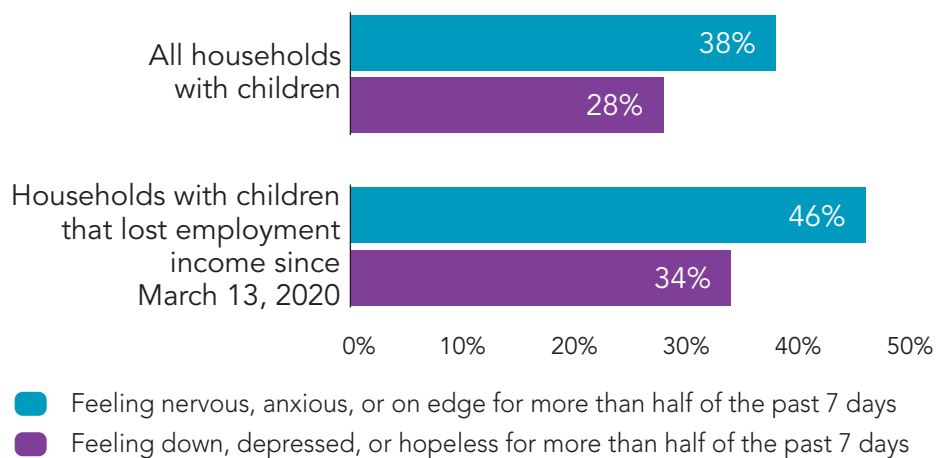
the future than White people, likely due to having more experience overcoming adversity and job insecurity.²⁶ Among young adults who had experienced foster or kinship care, 95 percent reported needing more emotional support than before the pandemic; many shared they were struggling with isolation and experiencing anxiety and depression.²⁷

Providing adequate food for children's health and development represents another challenge

parents have faced in recent months. With school closures, many children were missing out on meals provided in school. For families with teenagers especially, having adequate food to feed growing children has been difficult. Among families who reported not having enough food in the past 7 days, 30 percent said they always had enough food to eat prior to the beginning of the pandemic.²⁸ Food challenges hit families differently by race and ethnicity, and Black families more often experienced food insecurity before the pandemic. Of those who did not have enough food in the past 7 days, 32 percent of White families used to always have enough food prior to the pandemic, compared to only 14 percent of Black families.²⁹

Among Kentucky households with children that did not have enough food to eat, 83 percent of families reported receiving free food or groceries from a school or other program aimed at children (see chart), compared to 63 percent of families nationally.³⁰

Many adults in Kentucky households with children reported regularly feeling anxiety or depression



SOURCE: Population Reference Bureau analysis of the U.S. Census Bureau, Household Pulse Survey, 2020 (June 25-July 21 responses).

Federal action provided flexibility to help feed Kentucky students during the pandemic, by allowing school districts to supply school meals for pickup and by giving eligible students money to purchase groceries, called Pandemic EBT (P-EBT). Kentucky was a leader in distributing the P-EBT food assistance, reaching more than 541,800 students in the 2019-20 school year.³¹ P-EBT provided critical assistance to Latinx families, since many families were not eligible to receive other supports. P-EBT has allowed parents to grocery shop for food for their family, providing food for families in both urban and rural districts when a family couldn't pick up meals from school due to work hours or lack of transportation, or their district did not provide meals.

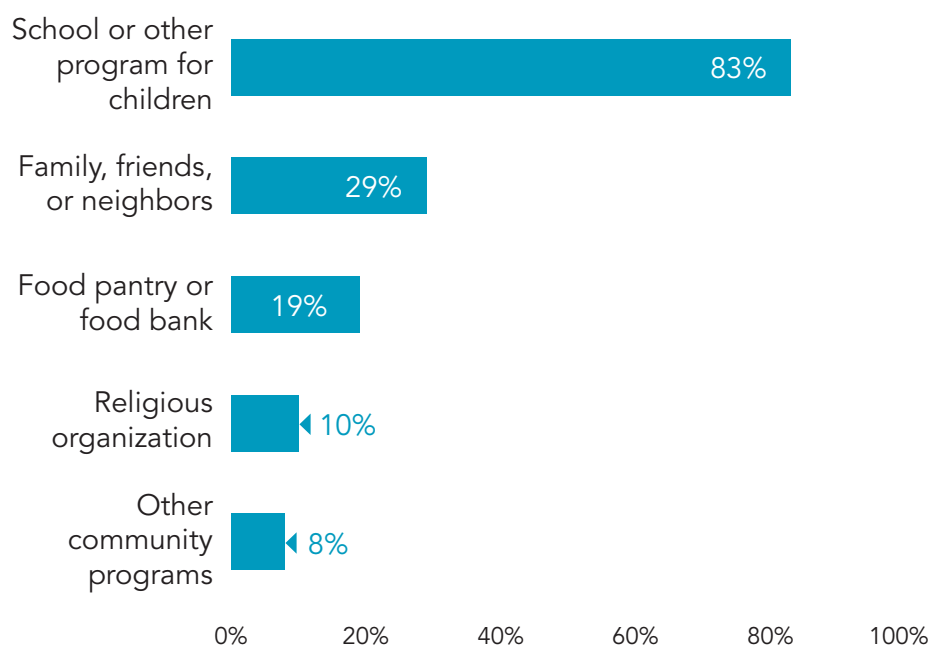
Still, thousands of eligible families did not receive the benefit for various reasons. For many Latinx families, fear of receiving any

assistance from the government, language barriers, and not knowing how to apply kept many from applying for P-EBT, even though every student attending a community eligibility school could receive the benefit. In September, Kentucky announced a second phase of P-EBT covering meals for August and September of 2020 for students continuing to receive classroom instruction virtually or by a hybrid model.³²

Economic Security

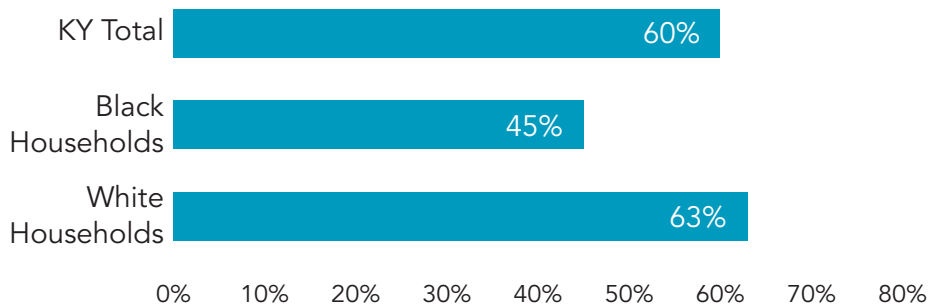
The economic effects of the health pandemic have also impacted Black and Latinx people more intensely due to long-standing gaps in the quality and security of jobs held compared to White people. Prior to the pandemic, Black and Latinx workers were more likely to work in low-wage jobs that did not offer benefits such as health insurance, described as "vulnerable jobs."³³ While gaps in the quality of jobs were masked under a strong economy, they were laid bare during COVID-19. Such jobs are often first in line for lay-offs. On the other hand, Black and Latinx workers are also overrepresented among essential workers, which offers stability in employment but often means higher exposure to, and increased risk of catching, COVID-19.^{34,35} For too many parents and caregivers, this meant making the difficult choice between either putting their health and the health of their families at risk by going to work or staying safe at home and not earning enough money to cover basic needs for their families. Several months into the pandemic, only 60 percent of adults in households with children reported being employed in the past week, including fewer than half of Black households (see chart).³⁶

Kentucky households with children who did not have enough food received free food from a variety of sources



SOURCE: Population Reference Bureau analysis of the U.S. Census Bureau, Household Pulse Survey, 2020 (June 25-July 21 responses).

Only 60 percent of Kentucky adults in households with children reported being employed in the past 7 days, and disparities exist by race



SOURCE: Population Reference Bureau analysis of the U.S. Census Bureau, Household Pulse Survey, 2020 (June 25-July 21 responses).

Kentucky closed non-essential businesses to the public in late March, which left many workers furloughed or laid off. A stimulus payment for all adults with a social security number and each of their children, as well as temporary supplements to unemployment benefits, helped some families weather the loss of income. The number of initial unemployment claims jumped from fewer than 2,000 in the weeks leading up to the COVID-19 pandemic to more than 102,000 the week of March 22nd. In the initial weeks of the pandemic, the accommodation and food services industry – with high concentrations of vulnerable jobs – was among the industries with the highest percentage of initial unemployment claims.³⁷

People of color have been overrepresented in unemployment claims for most weeks during the pandemic, even as the overall numbers of initial claims have steadily decreased (see chart).³⁸ Data from surveys of households found that 26 percent of adults in households with children applied for unemployment benefits, and 77 percent of those who applied received them.³⁹ Research has shown, however, that even when taking into consideration differences in employment history,

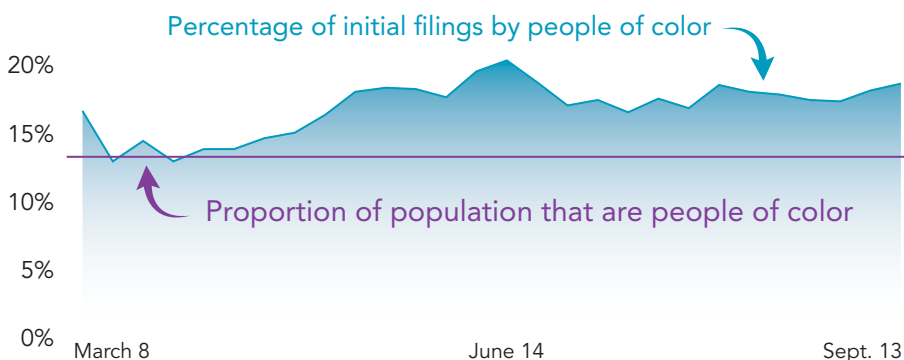
reason for unemployment, and education level, Black workers are less likely to receive unemployment insurance, likely due to differences in reasons for leaving jobs, employers contesting claims, and thinking they are not eligible for benefits.⁴⁰ While data is not available for Kentucky, Latinx families nationally have been hit especially hard by job and/or business losses, as well as by underemployment (working fewer hours than preferred).⁴¹

Parents who have been able to maintain work face their own set of challenges. To curb the spread of COVID-19, child care centers were asked to close by March 20th, with limited exceptions for caring for children of healthcare workers,

emergency responders, and other essential workers. While many parents found alternative solutions for child care, 20 percent of adults surveyed from late June to late July reported that they were not working because they were caring for children who were not in school or child care.⁴² By the mid-August to mid-September surveys, only 6 percent of adults reported not working for that reason.⁴³ Some parents also question the safety of their children attending daycare in the midst of a pandemic. Still, a Kentucky survey of parents who relied on child care pre-pandemic showed 27 percent of families were still having difficulty finding child care, several months into the pandemic.⁴⁴ Even before the pandemic, many child care centers were struggling to keep their doors open, and the additional challenges created by COVID-19 will decrease the availability of child care options for parents returning to the workforce (see page 27 for additional information).

Another fallout of the hit to family incomes has been the risk of people losing housing. A combination of state and federal orders during the pandemic have protected renters from being evicted during the health crisis.

For most weeks of the pandemic, people of color have been overrepresented among initial unemployment claims



SOURCE: Kentucky Center for Statistics, County Unemployment Update, 2020 and National Center for Health Statistics' 2019 Bridged-Race Population Estimates for ages 15+.

Preventing evictions helps the many Kentucky families with difficulties covering rent to maintain stable housing, which is important to public health. Only 72 percent of households with children reported that they were able to pay last month's rent, and only 33 percent were very confident they could pay rent the following month (see chart).⁴⁵ Data on households with and without children in Kentucky shows Blacks were significantly more likely to be concerned about being able to pay next month's rent (at approximately 50 percent in late May to late June).⁴⁶ Though eviction protections are currently in place, estimates suggest that almost half (47 percent) of renters not caught up on rent payments reported feeling somewhat or very likely to be evicted in the next 2 months.⁴⁷

Education

One of the biggest impacts to children's routines from COVID-19 has been the closure of schools with a shift to learning at home. Schools had to quickly adapt and modify their plans for teaching during Spring 2020 to accommodate the sudden shift. The summer provided schools an opportunity to prepare an enhanced remote learning experience for school year 2020-21. Still, remote learning presents numerous challenges for students, due not only to the change in setting and modality, but also the various learning styles of students and the loss of face-to-face support from teachers and peers. Remote learning also means children are separated from social interactions with their peers – which is especially important for the social-emotional development of young children – and can miss out on the other benefits of school, such as meals and wraparound services.

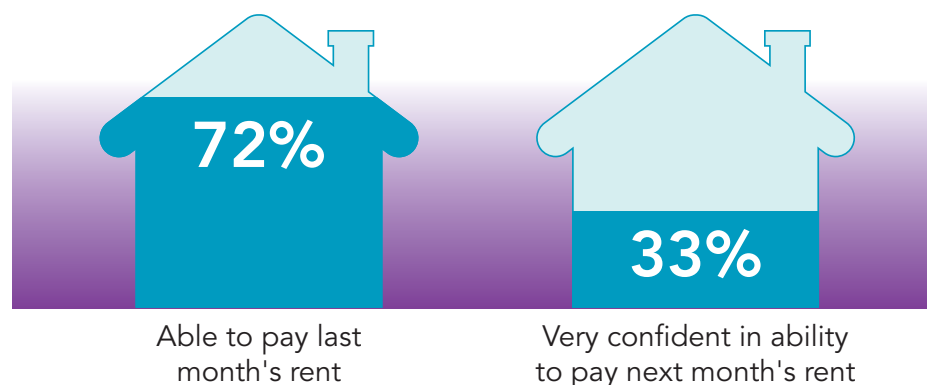
At the beginning of the 2020-21 school year, 63 percent of families reported that their student spent less time on learning activities than prior to the pandemic. Though we know the importance of relationships between students and teachers, as well as other school staff, only one-third of Kentucky students had live interaction with a teacher four or more days of the week.⁴⁸ Reduced live contact with teachers is concerning, as feeling connected to school acts as a protective factor against students dropping out.⁴⁹

Some students may thrive in a setting where they work from home and engage electronically with teachers, but many students do not have the resources at home to succeed in online school. An immediate challenge faced by schools and families was ensuring all students had the tools in place to connect to school, including a device on which to work and high-speed access to the internet to join online classes, a challenge experienced in urban as well as rural parts of the Commonwealth. Among Kentucky parents surveyed about the end of the 2019-20 school year, 61 percent reported that children always had a device available for educational

purposes. Of students who always or usually had a computer/device, 20 percent received it from school. Access to the internet was slightly higher, with 67 percent of families reporting children always had internet access available for educational purposes.⁵⁰ However, data did not report on the speed of the connection, and slow internet speeds can impact a child's ability to fully engage in virtual learning (see page 33 for additional information).

In addition to having the necessary tools, many other factors impact the likelihood of success in an online setting. Many families with higher incomes and wealth have been able to provide a quiet learning space, tutoring assistance, and help with technology to children. Parents and caregivers working low-wage jobs, who are disproportionately Black and Brown, are less likely to have the physical space due to crowded housing, money for tutors, or ability to work at home and supervise their child's learning, all of which can exacerbate existing achievement gaps by race and ethnicity.⁵¹ Students who are homeless face the greatest difficulty finding a quiet space and the technology and internet access necessary for online learning.

Too many Kentucky households with children face instability in their rental housing



SOURCE: Household Pulse Survey, 2020 (August 19-September 14 responses).

Gaps in technology skills for families, such as knowing how to operate a Wi-Fi hot spot or a computer and even knowing how to describe and seek help on technology issues, could also exacerbate achievement gaps. In addition to lacking technology skills to support online learning, some parents who are new immigrants do not have the ability to read or write in any language or know how to navigate the education system to support their children, due to different education systems in countries of origin.⁵²

In school year 2019-20, there were 104,928 students in public preschool through high school with an Individualized Education Plan (IEP), meaning they received special education services at school due to a disability. This equates to 15 percent of the statewide public school student population.⁵³ Students with special needs are especially vulnerable to falling behind when they cannot receive the personalized supports typically provided in school. As with all children, many students with special needs rely on structure, routine, and consistency to an even greater degree to manage emotions and behaviors related to a disability. While some students with disabilities thrive in a setting of remote learning, others are experiencing regression and reaching a crisis level without the consistent therapeutic supports they would typically receive during the day at school.⁵⁴

Family and Community

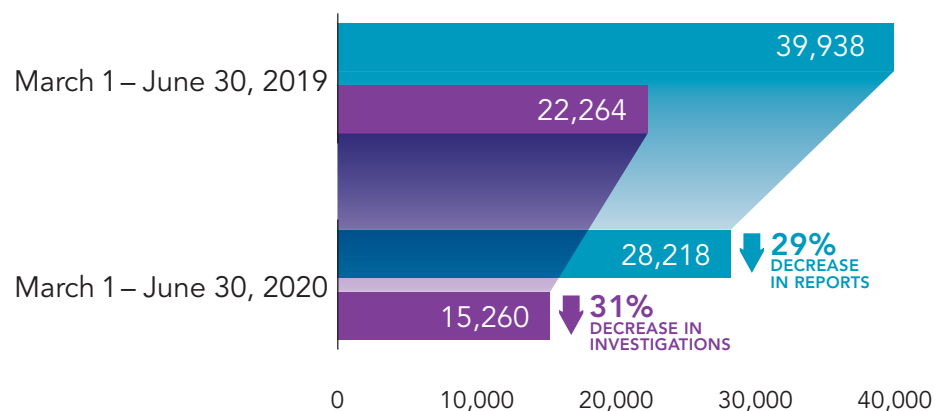
Without question, the COVID-19 pandemic has brought unique stress to families with children – juggling child care, helping students manage online learning, fewer options for obtaining social support, and many facing lost income to cover basic expenses. Though many students, as well as their families, would

benefit from supports such as community learning hubs while remote learning continues, such options have not been widely offered. At the same time that many families are under significant stress, children are at home more and interacting less with adults who are not their parents, such as child care workers and teachers. In Kentucky, reports of suspected child abuse or neglect have dropped substantially compared to the previous year. Unfortunately, the drop likely has more to do with less interaction of children with adults outside of the home than with an actual reduction in maltreatment. Intakes to report suspected abuse or neglect dropped March-June 2020 from the previous year, with a proportional drop in investigations* (see chart). Notably, intakes from school personnel dropped by 70 percent between the two time periods, and investigations resulting from reports by schools dropped by 77 percent.⁵⁵ While significant family stressors represent a risk factor for child abuse and neglect, supportive social networks and community support for parents act as protective factors.

Older youth recently in foster care, kinship care, or currently in independent living services have also experienced added difficulties due to the pandemic. Prior to the pandemic, youth who left the care of the state without a permanent family connection were already facing challenges in transitioning to adulthood without the family support and guidance most youth receive. Focus groups with foster and kinship care alumni during the pandemic found that 88 percent were concerned about the stability of where they were living.⁵⁶

Families with incarcerated loved ones have also experienced heightened stress due to COVID-19. As the pandemic began to hit Kentucky, the Department of Juvenile Justice and the courts in some counties began taking steps to move certain youth with little time left to serve and those with non-violent offenses out of group facilities, with some moved to supervised community placement to reduce the risk of spreading the virus. Even as some youth were being sent home to parents or other community-based supervision, others were still being sent to juvenile detention centers.

Kentucky saw a substantial drop in reports and investigations of suspected child abuse or neglect during pandemic closures compared to the previous year



SOURCE: Kentucky Department for Community Based Services.

* The Kentucky Department for Community Based Services investigates all reports meeting acceptance criteria to determine if child abuse, neglect, or dependency was committed.

Bookings into juvenile detention facilities in April through August 2020 were lower each month compared to 2019, but there were still 542 new admissions during that 2020 time period. Of the new bookings, fewer than half (48 percent) were for the most serious type of offenses, felonies (see chart).⁵⁷ Despite recent improvements in reducing the number of children incarcerated for offenses that don't pose a safety threat, youth of color continue to be overrepresented in the youth justice system at all points, and the disparities have grown in recent years.⁵⁸ Youth of color were extremely overrepresented among youth booked into detention during the pandemic, with Black youth representing 33 percent of new bookings, despite constituting only 11 percent of the youth population ages 10-17.^{59,60}

Kentucky has the third highest rate in the nation of children who have had a parent incarcerated, with 12 percent of children having experienced it at some point during childhood (see page 47 for additional information).⁶¹ Maintaining healthy relationships with parents who are incarcerated helps both the child and the incarcerated parent. Due to concerns about COVID-19 spread, visitation with family members was closed at Kentucky prisons at the beginning of the pandemic, and prisons have allowed those incarcerated to have one free phone call and two free secure email messages per week to maintain contact with family.⁶² To reduce the potential for an outbreak in prisons, Governor Beshear commuted sentences for some people who were incarcerated, including people with underlying conditions who were nearing the end of their sentence for non-violent, non-sexual offenses.⁶³

Despite increased risk of viral spread in incarceration settings, more than half of new bookings into juvenile detention were for offenses that can safely be addressed in the community



SOURCE: Kentucky Department of Juvenile Justice, April-August 2020.

Despite efforts to protect those incarcerated and working in prisons from COVID-19, more than 900 inmates have tested positive, and more than a dozen have lost their life.⁶⁴ Communities of color have historically experienced discriminatory policies in criminal justice, as well as policies and practices in modern times that perpetuate disparities, such as a higher likelihood of arrest for drug crimes than white people who use drugs at a similar rate, more intense policing in high-poverty neighborhoods, as well as bias in arrest, pretrial detention, charging, and sentencing.⁶⁵ In Kentucky, families of color have been disproportionately impacted by having a loved one incarcerated during the health pandemic. In March 2020, 21 percent of state inmates were Black, despite making up only 8 percent of Kentucky adults. Even after commutations, Black people remained overrepresented in the prison population, at 22 percent in April through August 2020.⁶⁶

Creating a Stronger Kentucky

The dual pandemics have created challenges for Kentucky children and families on so many fronts. Two factors, however, create a major opportunity for Kentucky to reinvent

systems to ensure that all children – Black children, Latinx children, children in families with limited income, children from Kentucky cities, children from rural areas, children with special needs, and children who have experienced trauma – have the opportunity to thrive. First, the substantial disruption to the status quo creates an opportunity for innovation and for implementing proven strategies to achieve goals. Second, the clarity that has come to the national spotlight regarding the stark racial inequities that dramatically limit opportunities for people of color have galvanized many advocacy organizations, policymakers, and community leaders to prioritize solutions that address racial disparities. Kentucky's future will be stronger when every child of every race and ethnicity can grow up to have a healthy and prosperous future.

Create a strong, equitable recovery that reaches all Kentuckians

Recovery efforts must intentionally focus on racial equity and embed the emphasis in the overall recovery planning and decision making. Additionally, recovery teams should set benchmarks for progress that include measures of improvement in racial equity.

Strengthen access to health coverage and care for communities of color

Kentucky should continue efforts to make sure all residents have equitable access to health care coverage, because children do better when their parents have health insurance, are healthy, and can provide for them. Solutions must also include improving access to health care services for communities of color by:

- Having more providers of color;
- Offering incentives for providers to locate in communities of color;
- Permanently expanding telehealth, so people can access care no matter where they live;
- Requiring or incentivizing certification in providing culturally sensitive care; and
- Reimbursing providers for interpreter services and ensuring such services are made available.

Respond to trauma and mental health challenges

During this time of heightened anxiety, schools, healthcare providers and other entities interacting with children and families must elevate efforts to identify signs of grief, stress, anxiety and depression, and improve communication across sectors. Schools, child care providers, and other organizations can implement trauma-informed trainings, that also incorporate training on implicit bias and racial trauma, to help adults more effectively respond to the needs of children and connect them to meaningful supports.

- Schools will be required to implement a trauma-informed plan, which includes adopting policies by the 2021-22 school

year. These plans should include strong practices, procedures, and feedback loops to achieve the intended effect of recognizing trauma and supporting students in receiving help.

- Schools can take advantage of Kentucky Medicaid's implementation of expanded care in school settings to increase access to behavioral health supports.
- To ensure equitable access to effective care, children of color should have access to a mental health practitioner of their race and ethnicity, which supports increased rapport and retention rates.⁶⁷
- Multi-sector efforts are needed to normalize the use of mental health care and reduce the stigma on seeking help that exists among communities of color.

Address the vulnerability of low-wage workers and families of color

Kentucky can promote an equitable recovery that strengthens the economic security of families and the ability to weather economic downturns by implementing the following measures:

- Provide low-wage workers access to paid sick leave, allowing people to make decisions when sick that are best for their health, as well as the health of coworkers and customers, without jeopardizing their ability to put food on the table or pay rent.
- Ensure that when the economy enters a recession, strong economic supports – such as those in the CARES Act – are ready to implement to help families meet basic needs.
- Create opportunities for low-wage workers to achieve upward mobility with state investments

in job skills training for those impacted by lay-offs.

- Invest in small businesses in underserved communities by providing start-up costs for new businesses and helping existing businesses expand.
- Promote targeted investments to support equity in the tech industry to help Black communities tap into opportunities in a field that continues to grow high-quality jobs.
- Support home ownership for Black families to reduce wealth disparities resulting from historic practices such as redlining.
- Assure high-quality child care is affordable for working families, especially families of color who have faced greater challenges in accessing affordable, quality care.
- Reassess the applicability of current planning and zoning regulations to build the capacity of regulated family child care, which is care offered in an individual's home to a small number of children.
- Allocate additional federal emergency relief to the child care sector, which was struggling even prior to the pandemic, to avoid exacerbating child care deserts, where families have limited or no access to child care centers.

Bridge the digital divide for employment, education, and health

The barriers faced by many families in accessing and using technology has become glaringly apparent during the pandemic. Kentucky can promote job quality and education, as well as improved access to health care via telehealth, by bridging the digital divide.

- Guarantee all communities have adequate and affordable internet choices.
- Create an office focused on digital equity to lead work to develop and implement a plan to ensure access to the internet, promote affordability, and coordinate trainings to build digital skills in communities with limited access.

Prioritize closing gaps in achievement exacerbated by the pandemic

Many school districts worked to ensure students had tools, such as computers and Wi-Fi hotspots, for children to engage in online learning and keep up with school work, though many families have experienced delays in receiving the technology. Schools can work to prevent an exacerbation of achievement gaps by:

- Taking the extra step of ensuring parents and students understand how to fully use the technology tools to engage in online learning;
- Tailoring outreach to immigrant families by offering learning resources in multiple languages and utilizing a messaging service that translates messages into other languages;
- Creating community learning hubs that offer a more substantive approach, with more supervision, structure and tutoring than families can provide at home;
- Enhancing communication with families of students with special needs and by creating specific contingency plans for their education and treatment needs; and
- Preparing to help students catch up academically when they return to in-person instruction.



Ensure basic needs are met until the economy recovers

Fundamental for measuring the success of our state in achieving an equitable economic recovery is the ability of families to provide for basic needs, such as stable housing and enough food to eat to keep children healthy and ready to learn. A number of steps have been taken, by both the state and federal governments, though families still need supports, such as:

- A moratorium on evictions, such as that announced by the CDC;
- Sufficient emergency funds for rent and utility assistance;
- Stronger communication on Pandemic EBT, using trusted messengers, as well as multiple languages and verbal messages to reach more Latinx and immigrant families;
- Congressional authorization of a 15 percent increase in SNAP benefits as families work to regain financial stability;

- An additional economic stimulus payment for those earning low wages, made available to families with mixed immigration status; and
- Extension of the boost in unemployment insurance benefits until the recovery reaches workers of all income and skill levels.

The pandemics of COVID-19 and racial inequality have certainly shaken the foundations of our Commonwealth. The impacts have been extremely difficult for many, if not most, families. As we rebuild, Kentucky can seize the opportunity to apply inventive changes to ensure children and families have the support to emerge stronger from the challenges we have faced. A core component of that work must be listening to and understanding what communities of color need and working in collaboration to address systemic racism. Using culturally responsible and meaningful efforts, we can ensure all youth, regardless of where they live or the color of their skin, grow up with fair and equitable opportunities to thrive. ■

State Data Trends

ECONOMIC SECURITY



CHILDREN IN DEEP POVERTY

(below 50% of the federal poverty level)

NUMBER OF CHILDREN:
113,000

**BASELINE
DATA**

12%
2009-13

**LATEST
DATA**

11%
2014-18

**CHANGE SINCE
BASELINE***



CHILDREN IN POVERTY

(below 100% of the federal poverty level)

NUMBER OF CHILDREN:
219,000

25.5%
2013

22.3%
2018



CHILDREN IN LOW-INCOME FAMILIES

(below 200% of the federal poverty level)

NUMBER OF CHILDREN:
459,000

49%
2009-13

46%
2014-18



CHILDREN LIVING IN FOOD INSECURE HOUSEHOLDS

NUMBER OF CHILDREN:
191,000



18.9%
2018



EDUCATION



KINDERGARTENERS READY TO LEARN

NUMBER OF CHILDREN:
24,570

50.0%
SY 2014-15

51.0%
SY 2019-20



HIGH SCHOOL STUDENTS GRADUATING ON TIME

NUMBER OF TEENS:
44,584

88.0%
SY 2014-15

90.9%
SY 2019-20



STUDENTS WITH AN INDIVIDUALIZED EDUCATION PLAN

NUMBER OF CHILDREN:
104,928



15%
SY 2019-20















STUDENT HOMELESSNESS

NUMBER OF CHILDREN:
21,648

4%
SY 2015-16

3%
SY 2019-20



		BASELINE DATA	LATEST DATA	CHANGE SINCE BASELINE*
<div>HEALTH</div> 	SMOKING DURING PREGNANCY	20.4% 2011-13	17.8% 2016-18	
	NUMBER OF BIRTHS: 28,841			
	LOW-BIRTHWEIGHT BABIES	8.8% 2011-13	8.9% 2016-18	
	NUMBER OF BABIES: 14,552			
	CHILDREN UNDER 19 WITH HEALTH INSURANCE	93.5% 2013	96.3% 2018	
	NUMBER OF CHILDREN: 996,000			
<div>FAMILY & COMMUNITY</div> 	YOUNG ADULTS (AGES 19-25) WITH HEALTH INSURANCE		89% 2014-18	
	NUMBER OF YOUNG ADULTS: 368,000			
	TEEN BIRTHS (rate per 1,000 females ages 15-19)	40.4 2011-13	28.2 2016-18	
	NUMBER OF BIRTHS: 11,810			
	BIRTHS TO MOTHERS WITHOUT A HIGH SCHOOL DEGREE	16.2% 2011-13	13.6% 2016-18	
	NUMBER OF BIRTHS: 22,854			
	CHILDREN IN FOSTER CARE (rate per 1,000 children ages 0-17)	37.2 2012-14	51.1 2017-19	
	NUMBER OF CHILDREN: 51,547			
	CHILDREN EXITING FOSTER CARE TO REUNIFICATION	41% 2012-14	37% 2017-19	
	NUMBER OF CHILDREN: 6,998			
	YOUTH INCARCERATED IN THE JUVENILE JUSTICE SYSTEM (rate per 1,000 youth ages 10-17)	37.5 2012-14	27.1 2017-19	
	NUMBER OF YOUTH: 12,358			

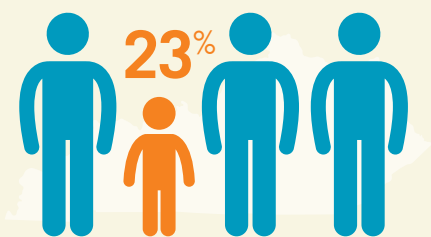
 Better
  No Change
  Worse

 Baseline data is not comparable, data overlaps with latest timeframe, or the change is neither positive nor negative

*Changes were not tested for statistical significance

Child Population Ages 0-4 and Ages 0-17

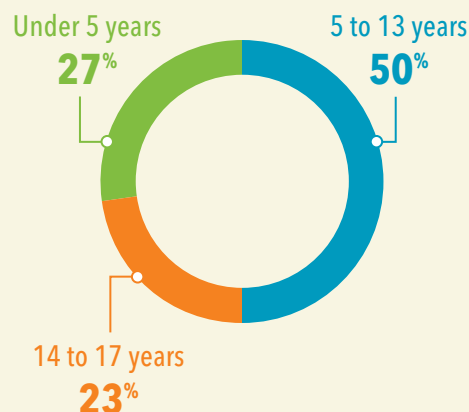
Nearly 1 in 4 Kentuckians are children.



Percentage of Kentucky Population Under Age 18: 2019

SOURCE: U.S. Census Bureau, 2019 Population Estimates.

Child population by age groups: 2019



SOURCE: U.S. Census Bureau, 2019 Population Estimates.

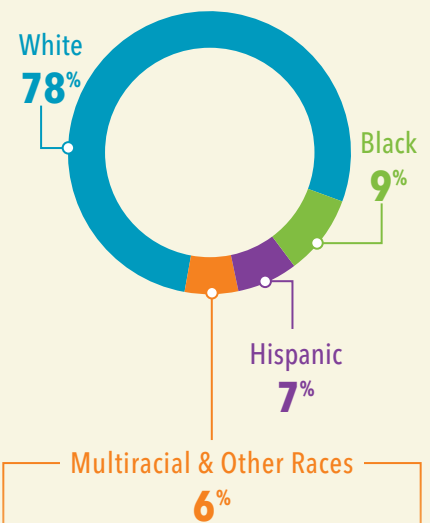
	2019			2019	
	Ages 0-4	Ages 0-17		Ages 0-4	Ages 0-17
Kentucky	272,610	1,002,871	Daviess	6,775	24,651
Adair	991	3,817	Edmonson	545	2,162
Allen	1,271	4,903	Elliott	336	1,334
Anderson	1,388	5,345	Estill	780	3,018
Ballard	393	1,649	Fayette	19,113	67,164
Barren	2,882	10,388	Fleming	952	3,556
Bath	901	3,195	Floyd	2,093	7,808
Bell	1,530	5,462	Franklin	2,928	10,585
Boone	8,649	34,516	Fulton	321	1,272
Bourbon	1,142	4,457	Gallatin	559	2,118
Boyd	2,619	9,954	Garrard	1,010	3,907
Boyle	1,563	5,967	Grant	1,824	6,573
Bracken	492	1,955	Graves	2,542	8,980
Breathitt	784	2,627	Grayson	1,660	6,129
Breckinridge	1,253	4,605	Green	586	2,248
Bullitt	4,249	17,631	Greenup	1,895	7,502
Butler	792	2,920	Hancock	572	2,163
Caldwell	743	2,857	Hardin	7,394	27,138
Calloway	1,882	6,988	Harlan	1,636	5,977
Campbell	5,400	19,442	Harrison	1,175	4,278
Carlisle	312	1,097	Hart	1,407	4,675
Carroll	778	2,738	Henderson	2,639	10,297
Carter	1,627	5,967	Henry	963	3,742
Casey	1,029	3,702	Hickman	193	803
Christian	6,668	19,062	Hopkins	2,678	10,128
Clark	2,193	8,048	Jackson	827	2,992
Clay	1,177	4,186	Jefferson	47,660	168,575
Clinton	601	2,267	Jessamine	3,365	12,842
Crittenden	472	1,941	Johnson	1,250	4,919
Cumberland	380	1,388	Kenton	10,874	39,420

Data source: U.S. Census Bureau, 2019 Population Estimates.

	2019	
	Ages 0-4	Ages 0-17
Knott	781	2,939
Knox	1,928	7,194
LaRue	819	3,269
Laurel	3,770	14,058
Lawrence	993	3,636
Lee	395	1,369
Leslie	546	2,113
Letcher	1,244	4,676
Lewis	783	2,909
Lincoln	1,622	5,814
Livingston	499	1,860
Logan	1,772	6,318
Lyon	258	1,180
McCracken	3,901	14,516
McCreary	990	3,706
McLean	514	2,168
Madison	5,227	19,194
Magoffin	690	2,710
Marion	1,232	4,637
Marshall	1,635	6,374
Martin	510	2,177
Mason	1,018	3,947
Meade	1,530	6,315
Menifee	310	1,191
Mercer	1,319	4,867
Metcalfe	618	2,354
Monroe	709	2,416
Montgomery	1,816	6,570
Morgan	615	2,374
Muhlenberg	1,704	6,236

	2019	
	Ages 0-4	Ages 0-17
Nelson	2,858	10,841
Nicholas	466	1,759
Ohio	1,478	5,833
Oldham	3,465	16,941
Owen	556	2,385
Owsley	304	1,002
Pendleton	918	3,326
Perry	1,691	5,912
Pike	3,054	11,952
Powell	808	2,949
Pulaski	3,809	14,484
Robertson	112	432
Rockcastle	894	3,540
Rowan	1,325	4,770
Russell	1,095	4,060
Scott	3,694	14,286
Shelby	2,937	10,986
Simpson	1,182	4,410
Spencer	1,095	4,347
Taylor	1,653	5,775
Todd	912	3,257
Trigg	757	3,103
Trimble	458	1,843
Union	680	2,604
Warren	8,572	30,375
Washington	756	2,784
Wayne	1,119	4,122
Webster	869	3,021
Whitley	2,694	9,171
Wolfe	477	1,652
Woodford	1,461	5,832

Child population by race/ethnicity: 2019



American Indian & Alaska Native	1,552
Asian	17,403
Native Hawaiian & Other Pacific Islanders..	832
Two or More Races	42,499

SOURCE: U.S. Census Bureau, 2019 Population Estimates.

Find county-level estimates for race/ethnicity at <https://kyyouth.org/race-equity/>.



Economic Security

Parents rely on safe, affordable child care to be able to work. Even before the pandemic, Kentucky parents lacked child care options, especially families of color and those in rural parts of the state. Now, with the closures and limitations on the number of children who can be served, the fragile ecosystem of child care is under further threat. Women of color make up a large percentage of the early childhood workforce and are facing double threats to their health and livelihood.

EVEN BEFORE THE PANDEMIC KENTUCKY'S CHILD CARE SECTOR WAS INSUFFICIENT FOR FAMILIES AND UNSTABLE FOR CHILD CARE CENTERS



WHERE FAMILIES HAVE **LIMITED OR NO ACCESS TO CHILD CARE**

SOURCE: Center for American Progress' Early Learning Kentucky fact sheet, 2019.

14% OF PARENTS
QUIT A JOB,
DID NOT TAKE A JOB,
OR GREATLY CHANGED THEIR JOB
DUE TO PROBLEMS WITH CHILD CARE
FOR CHILDREN UNDER 6

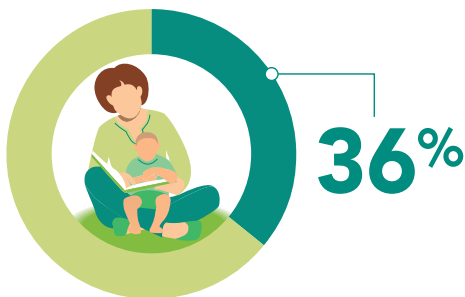


SOURCE: National Survey of Children's Health, 2017-2018.

\$9²⁸ MEDIAN **HOURLY WAGE**
FOR **CHILD CARE WORKERS**

SOURCE: Center for American Progress' Early Learning Kentucky fact sheet, 2019.

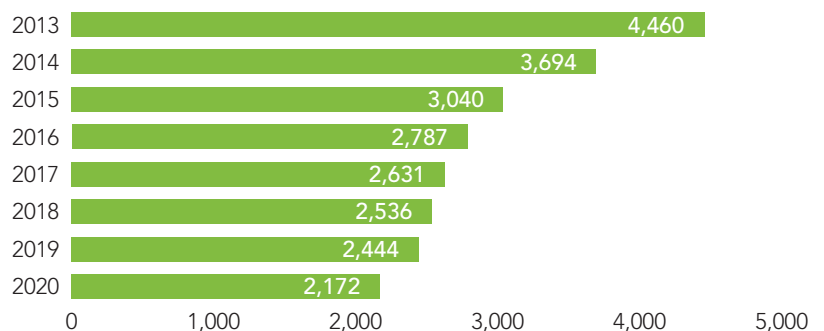
Child care expenses for an infant take up more than a third of a single parent's income



Amount of a single parent's income spent on center-based care for an infant

SOURCE: Child Care Aware of America's Price of Child Care in Kentucky fact sheet, 2019.

The number of regulated child care providers in Kentucky has declined over time, leaving fewer options for parents and caregivers



Number of regulated child care providers in Kentucky, 2013-2020

SOURCE: Kentucky Cabinet for Health and Family Services, Division of Child Care.

SOLUTIONS

Federal and state support is critical to help child care centers weather the COVID-19 pandemic so that Kentucky families have access to child care. Federal CARES Act funds early in the pandemic provided emergency relief to child care centers, but further investments are needed. Kentucky has taken steps to encourage the growth of regulated family child care by offering start-up funds to providers. This type of child care option offered in private homes to a small number of children complements the care offered by centers to fill gaps in access. Kentucky can expand access by amending zoning laws to allow regulated family child care in residential neighborhoods.



Economic Security

	Children in deep poverty (below 50% of the federal poverty level)		Children in poverty (below 100% of the federal poverty level)		Children in low-income families (below 200% of the federal poverty level)		Children living in food insecure households ^A
	2014-18	Change since 2009-13	2018	Change since 2013	2014-18	Change since 2009-13	2018
Kentucky	11%	✓	22.3%	✓	46%	✓	18.9%
Adair	10%	✗	35.0%	✓	57%	✗	21.4%
Allen	12%	✓	24.6%	✓	56%	=	20.0%
Anderson	9%	✗	14.4%	✓	43%	✗	16.2%
Ballard	13%	N/A	24.4%	✓	51%	✗	22.0%
Barren	15%	✗	26.8%	✓	61%	✗	23.4%
Bath	10%	✓	33.1%	✓	67%	=	24.6%
Bell	24%	✗	43.5%	✓	69%	✓	32.9%
Boone	4%	=	8.7%	✓	27%	✗	10.5%
Bourbon	S	N/A	24.2%	✓	47%	✓	17.8%
Boyd	15%	=	26.8%	✗	48%	✓	23.0%
Boyle	3%	✓	20.3%	✓	47%	✓	16.2%
Bracken	10%	✗	21.6%	✓	38%	✓	17.5%
Breathitt	29%	✗	43.4%	✓	76%	✗	34.5%
Breckinridge	9%	✓	23.7%	✓	45%	✓	19.9%
Bullitt	5%	✗	12.6%	✓	32%	✓	14.3%
Butler	14%	✓	22.1%	✓	62%	✓	21.5%
Caldwell	15%	✓	26.6%	✓	44%	✓	20.6%
Calloway	9%	=	23.1%	✓	46%	✗	18.4%
Campbell	9%	✗	14.4%	✓	34%	✓	13.0%
Carlisle	S	N/A	23.7%	✓	61%	✗	19.4%
Carroll	26%	✓	24.8%	✓	53%	✓	23.1%
Carter	19%	✗	33.4%	✗	63%	✗	28.0%
Casey	15%	✓	38.5%	✓	64%	✗	24.0%
Christian	13%	✗	26.3%	=	59%	✓	19.8%
Clark	9%	✓	24.8%	✓	43%	✓	18.2%
Clay	22%	✓	47.2%	✓	72%	✗	33.5%
Clinton	16%	N/A	37.5%	✓	70%	✓	21.8%
Crittenden	8%	✗	28.7%	✓	44%	✓	20.5%
Cumberland	13%	✓	33.1%	✓	42%	✓	16.7%



	Children in deep poverty (below 50% of the federal poverty level)		Children in poverty (below 100% of the federal poverty level)		Children in low-income families (below 200% of the federal poverty level)		Children living in food insecure households ^Δ
	2014-18	Change since 2009-13	2018	Change since 2013	2014-18	Change since 2009-13	2018
Daviess	11%	=	19.2%	Better	46%	×	17.1%
Edmonson	S	N/A	22.1%	✓	45%	✓	21.6%
Elliott	21%	=	29.1%	✓	64%	✓	32.2%
Estill	18%	✓	33.0%	✓	65%	✓	28.7%
Fayette	10%	×	17.3%	✓	41%	✓	14.2%
Fleming	11%	✓	29.1%	✓	52%	✓	22.5%
Floyd	28%	×	44.3%	×	63%	✓	31.7%
Franklin	9%	✓	18.8%	✓	35%	✓	15.9%
Fulton	25%	×	46.1%	×	65%	×	29.4%
Gallatin	9%	✓	23.6%	✓	57%	=	16.5%
Garrard	13%	×	23.5%	✓	45%	✓	19.8%
Grant	20%	×	20.3%	✓	58%	×	20.7%
Graves	11%	=	25.4%	✓	46%	✓	18.4%
Grayson	8%	✓	28.7%	✓	62%	×	24.2%
Green	S	N/A	26.1%	✓	55%	=	21.2%
Greenup	11%	✓	21.3%	✓	43%	✓	21.9%
Hancock	17%	×	16.3%	✓	44%	×	17.5%
Hardin	7%	✓	17.7%	✓	42%	✓	16.8%
Harlan	24%	×	43.6%	×	73%	×	34.4%
Harrison	8%	✓	21.7%	✓	41%	✓	18.1%
Hart	11%	✓	28.5%	✓	57%	✓	20.5%
Henderson	10%	✓	21.6%	✓	48%	=	19.3%
Henry	16%	×	21.7%	✓	52%	×	20.1%
Hickman	S	N/A	27.8%	✓	58%	✓	20.6%
Hopkins	16%	×	23.6%	✓	50%	✓	19.2%
Jackson	17%	✓	36.5%	✓	59%	✓	29.7%
Jefferson	10%	✓	22.4%	×	43%	✓	16.1%
Jessamine	14%	×	17.0%	✓	44%	✓	17.3%
Johnson	12%	✓	29.0%	✓	44%	✓	24.3%
Kenton	10%	=	14.1%	✓	36%	✓	14.2%

✓ Better = No Change × Worse

S = Data is suppressed when the estimate is unreliable. N/A = No change calculated due to data suppression. Δ = Comparable baseline data not available for this indicator.



Economic Security

	Children in deep poverty (below 50% of the federal poverty level)		Children in poverty (below 100% of the federal poverty level)		Children in low-income families (below 200% of the federal poverty level)		Children living in food insecure households ^A
	2014-18	Change since 2009-13	2018	Change since 2013	2014-18	Change since 2009-13	2018
Knott	26%	✗	41.4%	✗	79%	✗	34.2%
Knox	22%	✗	44.5%	✓	72%	=	27.3%
LaRue	12%	✓	22.2%	✓	53%	✓	18.6%
Laurel	22%	✗	29.4%	✓	61%	✗	23.8%
Lawrence	14%	✗	31.1%	✓	65%	✗	27.0%
Lee	27%	✓	43.7%	✓	71%	✓	31.8%
Leslie	21%	✗	38.8%	✗	56%	✗	31.4%
Letcher	28%	✗	36.0%	✗	65%	✗	31.6%
Lewis	20%	✓	33.1%	✓	64%	✓	28.6%
Lincoln	11%	✓	28.7%	✓	59%	✓	22.2%
Livingston	S	N/A	23.3%	✗	42%	✓	21.4%
Logan	10%	✓	26.5%	✓	51%	✓	17.7%
Lyon	S	N/A	20.1%	✓	55%	=	21.6%
McCracken	12%	✗	21.7%	✓	44%	✓	18.7%
McCreary	26%	✗	39.4%	✓	77%	✗	30.7%
McLean	14%	✗	19.0%	✓	47%	✓	19.8%
Madison	7%	✓	17.6%	✓	39%	✓	16.3%
Magoffin	20%	✓	37.6%	✓	61%	✓	36.6%
Marion	10%	✓	22.3%	✓	59%	✗	22.7%
Marshall	7%	✓	17.6%	✓	35%	✓	16.7%
Martin	14%	✓	44.1%	✓	53%	✓	25.5%
Mason	11%	✓	24.8%	✓	48%	✓	20.6%
Meade	9%	✓	15.7%	✓	39%	✓	16.0%
Menifee	22%	✓	39.2%	✓	59%	✓	28.7%
Mercer	8%	✓	20.8%	✓	43%	✓	17.5%
Metcalfe	S	N/A	37.0%	✓	65%	✗	23.5%
Monroe	19%	✗	34.6%	✓	57%	✓	23.9%
Montgomery	8%	✓	21.1%	✓	55%	✓	22.2%
Morgan	16%	✓	32.2%	✓	62%	✓	27.4%
Muhlenberg	9%	✓	22.7%	✓	52%	✓	22.0%
Nelson	8%	✓	16.4%	✓	33%	✓	15.2%



	Children in deep poverty (below 50% of the federal poverty level)		Children in poverty (below 100% of the federal poverty level)		Children in low-income families (below 200% of the federal poverty level)		Children living in food insecure households ^A
	2014-18	Change since 2009-13	2018	Change since 2013	2014-18	Change since 2009-13	2018
Nicholas	11%	N/A	28.2%	✓	71%	✗	27.9%
Ohio	18%	✗	25.0%	✓	57%	✓	24.6%
Oldham	3%	=	5.1%	✓	15%	✓	7.7%
Owen	15%	✗	21.9%	✓	64%	✗	19.4%
Owsley	S	N/A	47.8%	✓	62%	✓	28.9%
Pendleton	13%	✗	22.7%	✓	38%	✓	19.0%
Perry	16%	✓	37.0%	✗	61%	✗	28.0%
Pike	18%	✗	31.5%	✗	60%	✗	27.6%
Powell	14%	✓	32.9%	✓	56%	=	24.0%
Pulaski	15%	✓	26.4%	✓	48%	✓	21.7%
Robertson	25%	✓	28.9%	✓	59%	✗	29.0%
Rockcastle	11%	✓	30.2%	✓	52%	✓	22.7%
Rowan	10%	✓	23.9%	✓	58%	✗	22.2%
Russell	13%	✓	30.5%	✓	57%	✗	22.6%
Scott	7%	✓	10.9%	✓	34%	✓	13.5%
Shelby	8%	✗	13.6%	✓	45%	✗	13.9%
Simpson	S	N/A	21.5%	✓	45%	✓	17.2%
Spencer	S	N/A	9.7%	✓	21%	✓	11.4%
Taylor	15%	✓	26.7%	✓	60%	✓	23.4%
Todd	6%	✓	24.2%	✓	52%	✓	16.5%
Trigg	S	N/A	25.0%	✓	32%	✓	15.9%
Trimble	S	N/A	20.6%	✓	47%	✗	21.0%
Union	10%	✓	21.9%	✓	51%	✓	19.1%
Warren	6%	✓	19.6%	✓	46%	=	16.2%
Washington	S	N/A	20.9%	✓	35%	✓	16.1%
Wayne	17%	✓	36.0%	✓	58%	✓	25.5%
Webster	8%	✗	22.0%	✓	58%	✗	23.2%
Whitley	21%	✗	33.9%	✓	62%	✓	23.6%
Wolfe	27%	✓	43.6%	✓	64%	✓	32.6%
Woodford	11%	✓	13.2%	✓	39%	✗	16.2%

✓ Better = No Change ✗ Worse

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Education

Students need affordable and accessible internet connections to fully engage in learning, and school closings due to the COVID-19 pandemic have made internet even more crucial for succeeding in school. Yet Kentucky faces a digital divide with too many families in both rural and urban areas lacking quality internet access. A gap in infrastructure impacts rural communities, and lack of affordability drives gaps in access in urban areas, which results in fewer families of color having strong internet connections. Without equitable access to quality internet, many students are at risk of falling behind their peers even after in-person classes resume, and racial achievement gaps may be exacerbated.

KENTUCKY RANKS 40TH IN BROADBAND ACCESS

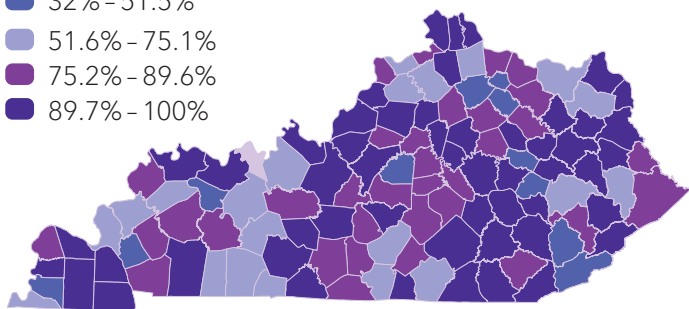
*Measured by Access to Low-price Plans,
Wired Broadband Coverage, and
Friendliness to Broadband Competition*

SOURCE: BroadbandNow, <https://broadbandnow.com/Kentucky>.



High quality internet access is limited in many Kentucky counties

- Less than 15%
- 32% – 51.5%
- 51.6% – 75.1%
- 75.2% – 89.6%
- 89.7% – 100%

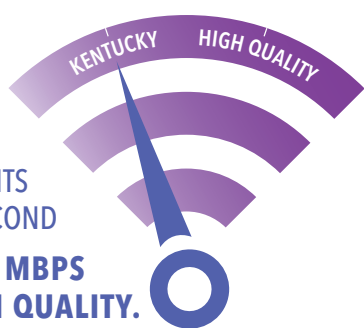


Percent of Kentuckians by county who have access to broadband internet at a speed of at least 100 megabits per second

SOURCE: BroadbandNow, <https://broadbandnow.com/custom-maps>.

THE AVERAGE BROADBAND SPEED IN KENTUCKY IS

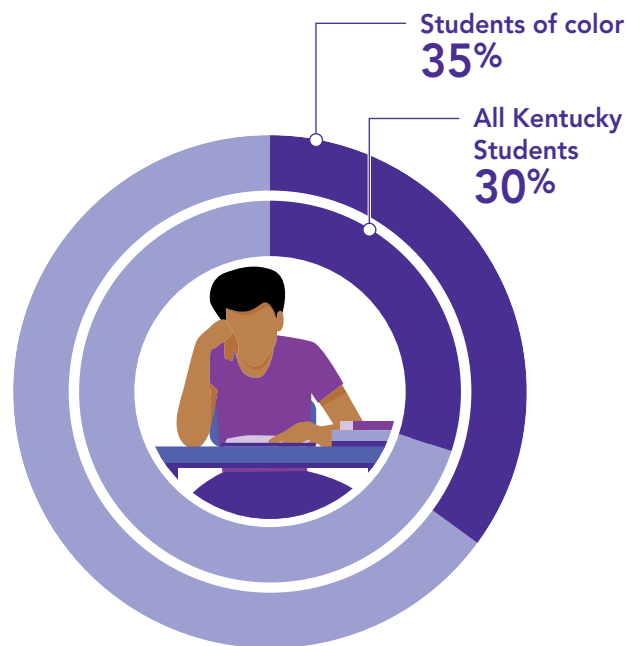
62.8
MEGABITS
PER SECOND



WHILE SPEEDS OF **100+ MBPS**
ARE CONSIDERED HIGH QUALITY.

SOURCE: BroadbandNow, <https://broadbandnow.com/Kentucky>.

Even before the pandemic, more than one in three students of color lacked adequate technology at home, putting them at higher risk of falling behind



Percent of students ages 5-17 who lack a computer, broadband internet access, or both at home, 2018

DATA NOTE: Students of color include students of any racial/ethnic group who are not White or Asian.

SOURCE: Population Reference Bureau's Digital Divide Dashboard, <https://www.prb.org/economic-and-digital-divide/>.

SOLUTIONS

Kentucky can encourage the extension of broadband to rural communities to ensure availability throughout the Commonwealth. Additionally, federal actions can improve access for households that have not been able to afford high-speed internet access. These include allowing cable companies, which often provide high-speed internet, to participate in the Lifeline program that subsidizes internet service for low-income families or shifting funding that supported schools and libraries in getting high-speed internet to serve low-income families.



Education

	Kindergarteners ready to learn		High school students graduating on time		Students with an Individualized Education Plan^	Student homelessness	
School Year	2019-20	Change since 2014-15	2019-20	Change since 2014-15	2019-20	2019-20	Change since 2015-16
Kentucky	51.0%	✓	90.9%	✓	15%	3%	✓
Adair County	26.0%	✗	99.5%	✓	13%	S	N/A
Allen County	63.2%	✓	93.5%	✓	15%	S	N/A
Anderson County	49.2%	✗	94.1%	✗	14%	<1%	✓
Ballard County	36.8%	✗	91.8%	✗	16%	3%	✗
Barren County	65.8%	✓	91.4%	✓	17%	11%	✗
Caverna Independent	40.0%	✓	94.4%	✓	21%	11%	✓
Glasgow Independent	73.1%	✓	95.5%	✓	16%	2%	✓
Bath County	30.5%	✗	87.0%	✗	12%	7%	✗
Bell County	50.3%	✓	96.1%	✓	16%	17%	=
Middlesboro Independent	37.7%	✗	94.9%	✓	22%	5%	✗
Pineville Independent	39.4%	✗	100.0%	✓	17%	S	N/A
Boone County	57.0%	✗	95.6%	✓	13%	1%	✓
Walton-Verona Independent	62.1%	✗	99.3%	✓	14%	S	N/A
Bourbon County	66.1%	✓	92.9%	✓	15%	9%	✓
Paris Independent	42.6%	✓	89.1%	✗	17%	2%	✓
Boyd County	53.9%	✓	92.3%	✗	24%	4%	✓
Ashland Independent	45.5%	✓	93.4%	✓	19%	4%	✓
Fairview Independent	50.0%	✓	93.2%	✗	15%	5%	✓
Boyle County	67.4%	✓	97.0%	✗	23%	3%	✓
Danville Independent	41.4%	✓	88.5%	✗	20%	2%	✗
Bracken County	43.2%	✗	98.9%	✓	17%	2%	=
Augusta Independent	76.2%	✓	91.3%	✗	20%	5%	✓
Breathitt County	52.7%	✓	94.1%	✓	20%	18%	✗
Jackson Independent	28.6%	✗	100.0%	✓	13%	S	N/A
Breckinridge County	53.2%	✓	95.0%	✓	16%	4%	=
Cloverport Independent	36.4%	✗	100.0%	=	15%	S	N/A
Bullitt County	44.7%	✗	90.9%	✓	14%	3%	=
Butler County	42.2%	✗	96.8%	✓	17%	S	N/A



School Year	Kindergarteners ready to learn		High school students graduating on time		Students with an Individualized Education Plan ^Δ	Student homelessness	
	2019-20	Change since 2014-15	2019-20	Change since 2014-15	2019-20	2019-20	Change since 2015-16
Caldwell County	64.4%	✓	99.3%	✓	11%	1%	✓
Calloway County	49.3%	✓	96.3%	✓	17%	1%	✗
Murray Independent	62.3%	✓	96.3%	✗	15%	S	N/A
Campbell County	49.0%	✓	98.2%	✓	16%	7%	✗
Bellevue Independent	71.0%	✓	97.9%	✓	17%	5%	N/A
Dayton Independent	44.3%	✓	91.7%	✓	22%	8%	N/A
Fort Thomas Independent	81.2%	✗	96.0%	=	7%	<1%	N/A
Newport Independent	29.6%	✗	95.7%	✓	14%	14%	✓
Southgate Independent	47.4%	✗	~	~	17%	14%	N/A
Carlisle County	73.7%	✓	97.1%	✓	19%	15%	=
Carroll County	52.7%	✓	94.6%	✗	13%	1%	N/A
Carter County	63.0%	✓	98.4%	✗	16%	8%	✓
Casey County	41.2%	✓	91.9%	✗	17%	4%	✗
Christian County	41.6%	✗	93.1%	✓	15%	1%	✓
Clark County	61.6%	✗	97.1%	✓	16%	1%	✓
Clay County	46.4%	✓	87.8%	✓	22%	S	N/A
Clinton County	35.7%	✗	93.8%	✓	20%	2%	✗
Crittenden County	46.8%	✗	91.8%	✓	13%	15%	✓
Cumberland County	56.8%	✓	100.0%	✓	14%	8%	✓
Daviess County	54.5%	=	91.1%	✗	15%	1%	✓
Owensboro Independent	48.0%	✓	88.5%	✓	16%	2%	✓
Edmonson County	60.3%	✓	93.8%	✓	19%	2%	=
Elliott County	30.4%	✗	96.0%	✓	17%	2%	✓
Estill County	63.8%	✓	94.4%	✓	15%	1%	✓
Fayette County	51.6%	✗	87.9%	✓	11%	2%	✓
Fleming County	42.0%	✗	99.4%	✓	15%	2%	✗
Floyd County	56.4%	✓	93.7%	✗	20%	1%	✓
Franklin County	42.8%	✗	94.5%	✓	14%	2%	✓

✓ Better = No Change ✗ Worse

S = Data suppressed by the source. N/A = No change calculated due to data suppression. ~ = School district has no high school. Δ = Change in data is neither positive nor negative.



Education

School Year	Kindergarteners ready to learn		High school students graduating on time		Students with an Individualized Education Plan [^]	Student homelessness	
	2019-20	Change since 2014-15	2019-20	Change since 2014-15	2019-20	2019-20	Change since 2015-16
<i>Frankfort Independent</i>	80.0%	✓	89.3%	✗	14%	2%	✓
Fulton County	60.4%	✓	94.6%	✗	16%	6%	✗
<i>Fulton Independent</i>	50.0%	✗	95.2%	=	19%	20%	✗
Gallatin County	35.5%	✗	90.7%	✓	14%	10%	✗
Garrard County	48.3%	✓	94.4%	✓	15%	1%	✗
Grant County	44.4%	✗	94.6%	✓	17%	1%	✓
<i>Williamstown Independent</i>	63.3%	✓	98.3%	✓	15%	S	N/A
Graves County	59.0%	✗	95.5%	✓	15%	3%	✓
<i>Mayfield Independent</i>	60.7%	✓	95.8%	✓	17%	4%	✓
Grayson County	52.8%	✓	91.0%	✓	16%	S	N/A
Green County	64.4%	✓	92.9%	✗	17%	1%	N/A
Greenup County	60.9%	✓	96.4%	✓	16%	1%	✓
<i>Raceland-Worthington Independent</i>	59.2%	✓	95.7%	✗	11%	1%	✓
<i>Russell Independent</i>	60.3%	✗	98.4%	✗	14%	S	N/A
Hancock County	57.4%	✓	92.8%	✗	14%	S	N/A
Hardin County	49.1%	✗	88.7%	✗	15%	1%	=
<i>Elizabethtown Independent</i>	56.7%	✓	94.0%	✓	16%	1%	✓
<i>West Point Independent</i>	50.0%	✓	~	~	10%	S	N/A
Harlan County	37.8%	✗	91.6%	✓	23%	37%	✗
<i>Harlan Independent</i>	41.4%	✗	100.0%	✓	22%	26%	✗
Harrison County	54.1%	✓	96.3%	✓	16%	4%	✓
Hart County	56.1%	✓	98.3%	✓	25%	<1%	✓
Henderson County	57.3%	✓	90.5%	✗	15%	2%	✓
Henry County	63.6%	✓	96.6%	✗	15%	2%	✗
<i>Eminence Independent</i>	44.7%	✗	75.8%	✗	13%	9%	✓
Hickman County	74.5%	✓	97.7%	✗	18%	S	N/A
Hopkins County	54.0%	✗	92.1%	✓	19%	1%	=
<i>Dawson Springs Independent</i>	29.7%	✗	97.7%	✓	19%	S	N/A
Jackson County	51.6%	✗	90.0%	✓	30%	4%	✓



School Year	Kindergarteners ready to learn		High school students graduating on time		Students with an Individualized Education Plan ^Δ		Student homelessness	
	2019-20	Change since 2014-15	2019-20	Change since 2014-15	2019-20	2019-20	Change since 2015-16	
Jefferson County	51.7%	✗	83.5%	✓	13%	5%	✓	
Anchorage Independent	97.1%	✓	~	~	8%	S	N/A	
Jessamine County	47.8%	✓	93.7%	✓	16%	4%	✗	
Johnson County	46.4%	✓	97.8%	✓	19%	1%	=	
Paintsville Independent	69.6%	✓	95.9%	✗	14%	5%	✗	
Kenton County	55.2%	✓	93.7%	✓	14%	4%	✗	
Beechwood Independent	79.2%	✓	100.0%	✓	9%	1%	✓	
Covington Independent	35.1%	✗	75.3%	✗	21%	17%	✗	
Erlanger-Elsmere Independent	35.2%	✗	87.7%	✓	14%	11%	✓	
Ludlow Independent	51.0%	✓	98.0%	✓	19%	S	N/A	
Knott County	62.1%	✓	96.1%	✓	22%	7%	✓	
Knox County	40.2%	✓	88.9%	✓	23%	<1%	✓	
Barbourville Independent	55.8%	✗	100.0%	✓	10%	S	N/A	
LaRue County	45.2%	✗	97.5%	✗	17%	<1%	✓	
Laurel County	48.4%	✓	84.5%	✗	21%	1%	=	
East Bernstadt Independent	58.1%	✓	~	~	27%	2%	N/A	
Lawrence County	34.7%	✗	91.5%	✗	20%	20%	✓	
Lee County	23.3%	✗	90.6%	✗	16%	17%	✓	
Leslie County	59.8%	✓	91.0%	✗	21%	8%	✓	
Letcher County	25.5%	✗	96.6%	✓	29%	16%	✗	
Jenkins Independent	43.8%	✓	92.9%	✓	25%	S	N/A	
Lewis County	50.7%	✗	96.0%	✗	17%	S	N/A	
Lincoln County	40.1%	✓	91.5%	✗	16%	1%	=	
Livingston County	52.1%	✓	91.3%	✗	14%	2%	✓	
Logan County	44.2%	✗	85.7%	✗	19%	3%	✓	
Russellville Independent	40.0%	✓	90.0%	✓	20%	3%	✓	
Lyon County	78.7%	✓	98.3%	✓	12%	1%	✓	
McCracken County	56.4%	✗	96.5%	✓	13%	<1%	✓	
Paducah Independent	53.6%	✓	79.7%	✗	10%	8%	✗	

✓ Better = No Change ✗ Worse

S = Data suppressed by the source. N/A = No change calculated due to data suppression. ~ = School district has no high school. Δ = Change in data is neither positive nor negative.



Education

School Year	Kindergarteners ready to learn		High school students graduating on time		Students with an Individualized Education Plan ^A	Student homelessness	
	2019-20	Change since 2014-15	2019-20	Change since 2014-15	2019-20	2019-20	Change since 2015-16
McCreary County	68.2%	✓	97.4%	✓	21%	S	N/A
McLean County	34.9%	✗	96.5%	✓	15%	S	N/A
Madison County	47.6%	✗	93.0%	✓	17%	1%	=
<i>Berea Independent</i>	50.0%	✗	90.7%	✗	23%	3%	=
Magoffin County	50.4%	✓	98.6%	✓	22%	5%	✓
Marion County	55.3%	✗	95.6%	✓	14%	1%	=
Marshall County	55.3%	✗	91.4%	✗	14%	5%	=
Martin County	63.1%	✓	98.4%	✓	19%	1%	=
Mason County	28.4%	✗	91.2%	✓	19%	1%	N/A
Meade County	48.3%	✓	95.4%	✓	17%	3%	✗
Menifee County	32.8%	✗	90.2%	✗	20%	2%	✗
Mercer County	42.6%	✗	97.5%	✓	21%	9%	✗
<i>Burgin Independent</i>	42.4%	✗	93.1%	✗	18%	3%	N/A
Metcalfe County	57.6%	✓	90.6%	✓	14%	S	N/A
Monroe County	62.0%	✓	98.6%	=	18%	2%	✓
Montgomery County	32.8%	✗	94.4%	✓	18%	1%	✓
Morgan County	31.9%	✗	97.9%	✓	18%	1%	✓
Muhlenberg County	45.5%	✓	90.8%	✓	17%	<1%	✓
Nelson County	53.7%	✓	93.4%	✗	15%	S	N/A
<i>Bardstown Independent</i>	68.0%	✓	92.7%	✓	16%	S	N/A
Nicholas County	58.6%	✓	93.4%	✓	15%	S	N/A
Ohio County	53.9%	✓	91.1%	✗	15%	1%	✓
Oldham County	64.0%	✗	97.0%	✓	12%	<1%	=
Owen County	56.4%	✗	96.8%	✓	14%	2%	✗
Owsley County	46.8%	✗	92.7%	✓	14%	S	N/A
Pendleton County	41.1%	✓	96.2%	✓	18%	S	N/A
Perry County	44.6%	✗	90.8%	✗	22%	10%	✓
<i>Hazard Independent</i>	65.5%	✓	98.9%	✓	18%	7%	✓
Pike County	46.4%	✗	95.1%	✓	16%	7%	=



	Kindergarteners ready to learn		High school students graduating on time		Students with an Individualized Education Plan ^A	Student homelessness	
School Year	2019-20	Change since 2014-15	2019-20	Change since 2014-15	2019-20	2019-20	Change since 2015-16
<i>Pikeville Independent</i>	83.1%	✓	97.5%	✓	10%	S	N/A
Powell County	46.5%	✓	87.4%	✗	18%	S	N/A
Pulaski County	45.6%	✓	98.2%	✓	16%	1%	=
<i>Science Hill Independent</i>	69.8%	✓	~	~	18%	S	N/A
<i>Somerset Independent</i>	47.2%	✗	96.2%	✓	14%	2%	✓
Robertson County	32.3%	✗	96.6%	✓	17%	12%	✓
Rockcastle County	43.4%	✓	98.7%	✓	22%	6%	✓
Rowan County	43.6%	✗	97.8%	✗	13%	7%	✓
Russell County	38.2%	✗	95.9%	✓	13%	8%	✓
Scott County	47.8%	✗	91.7%	✓	18%	4%	✓
Shelby County	52.2%	✗	87.0%	✗	16%	<1%	=
Simpson County	52.3%	✓	95.0%	✓	16%	4%	✗
Spencer County	46.3%	✗	93.4%	✗	18%	2%	✓
Taylor County	46.6%	✓	99.0%	✗	16%	1%	✓
<i>Campbellsville Independent</i>	43.8%	✓	94.5%	✗	19%	2%	✓
Todd County	47.1%	✓	98.3%	✓	19%	1%	=
Trigg County	45.7%	✗	94.2%	✓	14%	1%	=
Trimble County	30.4%	✗	92.3%	✓	13%	1%	=
Union County	53.7%	✓	95.9%	✓	14%	1%	✗
Warren County	50.1%	✗	96.4%	✓	14%	<1%	✓
<i>Bowling Green Independent</i>	60.5%	✓	96.3%	✓	12%	1%	✓
Washington County	37.8%	✗	98.6%	=	18%	4%	✗
Wayne County	51.1%	✓	94.5%	✓	17%	2%	=
Webster County	47.3%	✓	86.7%	✗	17%	23%	✗
Whitley County	49.1%	✗	95.3%	✓	24%	7%	✗
<i>Corbin Independent</i>	52.3%	✗	98.3%	✓	13%	2%	✓
<i>Williamsburg Independent</i>	40.7%	✗	89.4%	✗	16%	S	N/A
Wolfe County	39.0%	✓	93.6%	✓	25%	S	N/A
Woodford County	48.3%	✗	96.9%	✓	13%	1%	=

✓ Better = No Change ✗ Worse

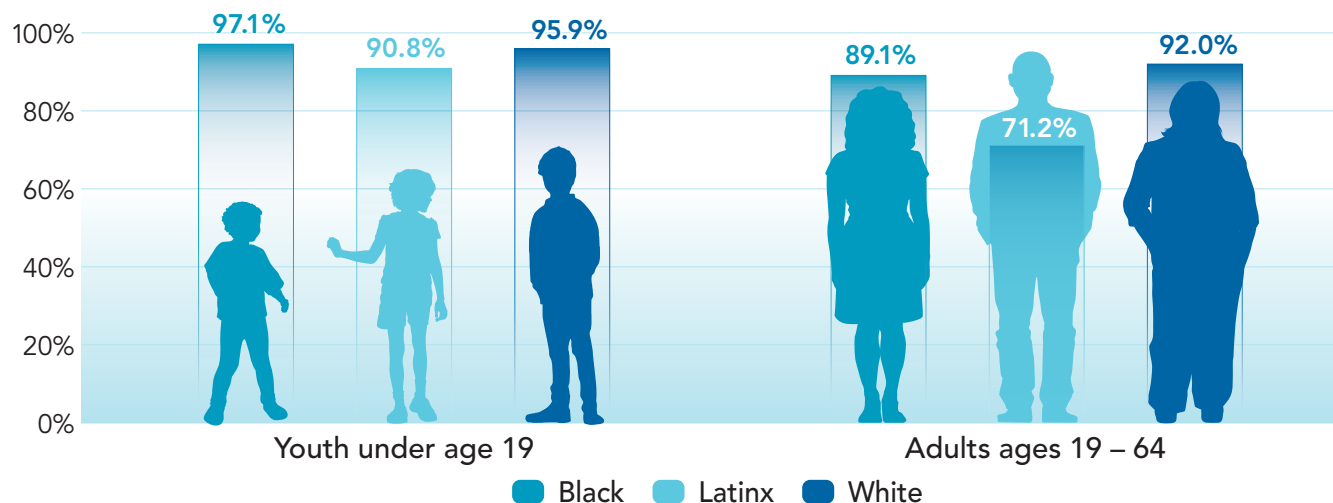
S = Data suppressed by the source. N/A = No change calculated due to data suppression. ~ = School district has no high school. Δ = Change in data is neither positive nor negative.



Health

Children and their parents rely on affordable and accessible health care to get help when sick and receive preventative services to stay healthy. Medicaid and the Kentucky Children's Health Insurance Program (KCHIP) provide coverage to low-income Kentucky families, and Kentucky's commitment to ensuring people have health insurance throughout the pandemic resulted in an increase in Medicaid enrollment. While the COVID-19 pandemic resulted in people delaying routine care, the use of telehealth increased substantially compared to the previous year, in part due to regulatory changes that made it more accessible.

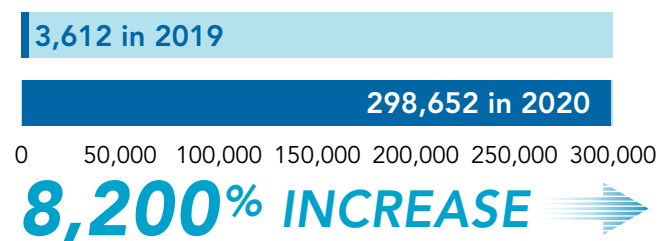
Prior to the pandemic, gaps by race/ethnicity existed in health insurance coverage among youth and adults in Kentucky



Percent of Kentucky youth and adults with health insurance, 2019

SOURCE: 2019 1-year American Community Survey estimates.

The use of telehealth services for children with Medicaid and KCHIP spiked during the pandemic

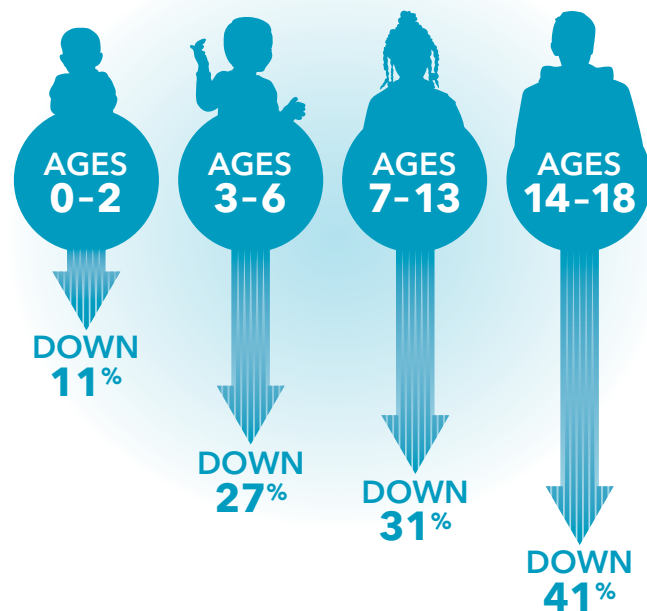


Number of services billed to Medicaid and KCHIP, April-June 2019 and 2020



SOURCE: Kentucky Department for Medicaid Services.

The percent of children receiving routine vaccinations has dropped substantially across age groups due to COVID-19



Percent decrease in the number of children receiving routine vaccinations, April-September 2019 and 2020

SOURCE: Kentucky Department for Public Health.

SOLUTIONS

We can improve the overall health of Kentucky by ensuring parents and children of all races have equitable access to health insurance and to health care providers, both for routine care and for when they get sick. Beyond access to care, gaps in health outcomes can be addressed through improving the cultural appropriateness of care, training and developing more providers of color, and providing interpreter services for patients not fluent in English. Kentucky can also expand access to care by building on the use of telehealth which grew during the pandemic.



Health

	Smoking during pregnancy		Low-birthweight babies		Children under 19 with health insurance		Young adults (ages 19-25) with health insurance ^A	Teen births (rate per 1,000 females ages 15-19)	
	2016-18	Change since 2011-13	2016-18	Change since 2011-13	2018	Change since 2013	2014-18	2016-18	Change since 2011-13
Kentucky	17.8%	✓	8.9%	✗	96.3%	✓	89%	28.2	✓
Adair	26.7%	✗	8.8%	✗	96.0%	✓	90%	19.3	✓
Allen	19.8%	✓	10.2%	✗	95.7%	✓	85%	29.3	✓
Anderson	20.4%	✓	9.2%	✗	96.2%	✓	89%	29.3	✓
Ballard	22.2%	✗	8.5%	✓	95.6%	✓	87%	39.1	✓
Barren	19.4%	✓	7.5%	✗	94.3%	✓	86%	38.0	✓
Bath	27.0%	✓	6.9%	✓	94.6%	✓	88%	35.6	✓
Bell	35.2%	✓	11.0%	✗	96.4%	✓	86%	56.3	✓
Boone	12.5%	✓	7.0%	✓	97.0%	✓	91%	16.4	✓
Bourbon	22.4%	✓	8.0%	✓	94.5%	✓	86%	31.4	✓
Boyd	23.9%	✓	10.4%	✓	97.0%	✓	89%	41.2	✓
Boyle	20.4%	✓	8.9%	✓	96.5%	✓	87%	25.4	✓
Bracken	28.3%	✓	10.1%	✓	96.1%	✓	93%	31.4	✓
Breathitt	35.2%	✓	11.5%	✗	96.8%	✓	90%	53.8	✓
Breckinridge	21.9%	✓	8.6%	✓	94.8%	✓	76%	36.1	✗
Bullitt	15.7%	✓	8.5%	✗	96.7%	✓	94%	20.7	✓
Butler	15.1%	✓	5.9%	✓	94.4%	✓	82%	41.6	✓
Caldwell	28.0%	✗	7.7%	✓	96.2%	✓	87%	41.0	✓
Calloway	15.5%	✓	6.9%	✗	95.7%	✓	95%	16.1	✓
Campbell	17.5%	✓	7.7%	✓	97.5%	✓	92%	20.9	✓
Carlisle	16.9%	✓	5.6%	✓	95.0%	✓	90%	39.3	✓
Carroll	29.2%	✓	9.6%	✗	95.7%	✓	93%	41.5	✓
Carter	27.1%	✓	8.7%	✓	95.7%	✓	86%	44.3	✓
Casey	22.4%	✓	7.3%	✓	93.9%	✓	79%	50.6	✓
Christian	13.7%	✓	9.0%	✓	96.2%	✓	86%	30.9	✓
Clark	21.1%	✓	8.6%	✓	96.7%	✓	84%	39.4	✓
Clay	36.6%	✓	10.6%	✓	96.2%	✓	85%	53.0	✓
Clinton	24.5%	✓	9.8%	✗	95.3%	✓	91%	31.4	✓
Crittenden	19.0%	✓	8.4%	✗	95.5%	✓	80%	29.8	✓
Cumberland	25.4%	✓	8.4%	✗	95.5%	✓	70%	27.7	✓



	Smoking during pregnancy		Low-birthweight babies		Children under 19 with health insurance		Young adults (ages 19-25) with health insurance ^A	Teen births (rate per 1,000 females ages 15-19)	
	2016-18	Change since 2011-13	2016-18	Change since 2011-13	2018	Change since 2013	2014-18	2016-18	Change since 2011-13
Daviess	9.6%	✓	8.1%	✗	96.7%	✓	91%	32.2	✓
Edmonson	21.3%	✗	7.0%	✗	95.5%	✓	90%	35.1	✗
Elliott	30.3%	✓	11.5%	✗	96.5%	✓	91%	57.3	✗
Estill	29.3%	✓	9.0%	✓	96.1%	✓	86%	37.2	✓
Fayette	9.8%	✓	8.8%	✗	96.0%	✓	90%	16.9	✓
Fleming	18.3%	✓	6.8%	✓	94.5%	✓	82%	33.0	✓
Floyd	27.0%	✓	10.9%	✓	96.3%	✓	87%	52.0	✓
Franklin	22.0%	✗	10.0%	✓	96.1%	✓	85%	26.3	✓
Fulton	27.7%	✗	10.5%	✗	96.9%	✓	81%	29.9	✓
Gallatin	29.6%	✗	9.4%	✓	95.2%	✓	88%	40.9	✓
Garrard	26.3%	=	9.8%	✓	95.5%	✓	80%	33.6	✓
Grant	29.7%	✓	9.4%	✗	96.0%	✓	90%	43.6	✓
Graves	20.6%	✗	8.4%	✗	95.8%	✓	88%	38.0	✓
Grayson	29.4%	✗	7.8%	✓	95.7%	✓	85%	40.9	✓
Green	15.7%	✓	8.5%	✗	94.2%	✓	87%	29.7	✓
Greenup	21.1%	✓	8.8%	✓	96.7%	✓	90%	34.3	✓
Hancock	10.6%	✓	7.0%	✓	96.5%	✓	98%	38.8	✓
Hardin	17.2%	✗	7.9%	✗	96.6%	✓	86%	28.9	✓
Harlan	35.0%	✓	10.7%	✓	96.5%	✓	94%	44.2	✓
Harrison	29.0%	✓	8.2%	✓	95.5%	✓	88%	44.2	✗
Hart	16.0%	✓	8.2%	✓	95.6%	✓	85%	44.7	✓
Henderson	20.3%	✓	11.4%	✗	96.6%	✓	90%	33.8	✓
Henry	22.5%	✗	9.3%	✗	95.2%	✓	77%	36.2	✓
Hickman	20.7%	✓	8.3%	✗	95.4%	✓	96%	29.1	✗
Hopkins	23.7%	✓	7.8%	✓	96.6%	✓	87%	43.8	✓
Jackson	34.1%	✓	8.5%	✓	96.0%	✓	97%	56.4	✓
Jefferson	10.2%	✓	9.4%	✗	96.8%	✓	90%	22.6	✓
Jessamine	18.4%	✓	9.4%	✗	95.8%	✓	92%	20.7	✓
Johnson	22.7%	✓	9.0%	✓	96.4%	✓	90%	30.0	✓
Kenton	19.7%	✓	8.6%	✗	96.9%	✓	90%	24.6	✓

✓ Better = No Change ✗ Worse

* = Rate not calculated for fewer than 6 events. N/A = No change calculated due to data suppression. Δ = Non-overlapping baseline data not available for this indicator.



Health

	Smoking during pregnancy		Low-birthweight babies		Children under 19 with health insurance		Young adults (ages 19-25) with health insurance ^A	Teen births (rate per 1,000 females ages 15-19)	
	2016-18	Change since 2011-13	2016-18	Change since 2011-13	2018	Change since 2013	2014-18	2016-18	Change since 2011-13
Knott	33.3%	✗	8.6%	✓	95.5%	✓	92%	31.3	✓
Knox	28.9%	✓	11.8%	✗	96.9%	✓	86%	46.6	✓
LaRue	23.1%	✗	11.1%	✗	95.3%	✓	89%	35.6	✓
Laurel	26.0%	✓	7.6%	✓	96.4%	✓	88%	42.9	✓
Lawrence	25.9%	✓	9.3%	✓	96.2%	✓	88%	33.1	✓
Lee	35.7%	✓	6.3%	✓	96.7%	✓	81%	38.9	✓
Leslie	34.4%	✓	11.4%	✓	96.0%	✓	84%	27.2	✓
Letcher	27.1%	✓	11.2%	✓	96.0%	✓	91%	42.3	✓
Lewis	28.6%	✓	9.1%	✓	95.6%	✓	94%	42.3	✓
Lincoln	23.8%	✓	10.5%	✗	94.5%	✓	87%	52.1	✗
Livingston	23.9%	✓	6.4%	✓	95.8%	✓	95%	35.5	✓
Logan	16.1%	✓	7.8%	✓	95.9%	✓	92%	29.2	✓
Lyon	22.5%	✓	7.9%	✓	95.2%	✓	70%	31.9	✓
McCracken	16.2%	✓	8.4%	✓	96.3%	✓	92%	32.2	✓
McCreary	28.6%	✓	9.6%	✓	96.1%	✓	88%	48.9	✓
McLean	18.1%	✓	11.2%	✗	95.7%	✓	92%	29.3	✓
Madison	17.7%	✓	9.8%	✗	96.7%	✓	92%	16.8	✓
Magoffin	30.2%	✓	11.4%	✗	95.3%	✓	87%	42.0	✓
Marion	27.8%	✓	10.2%	✗	96.1%	✓	91%	36.4	✓
Marshall	20.6%	✓	8.4%	✗	95.8%	✓	95%	26.5	✓
Martin	38.1%	✗	12.7%	✗	96.0%	✓	91%	49.6	✓
Mason	26.5%	✓	8.5%	✗	96.4%	✓	85%	40.0	✓
Meade	21.0%	✓	7.5%	✗	96.2%	✓	87%	22.9	✓
Menifee	30.0%	✓	10.6%	✗	96.1%	✓	93%	42.7	✓
Mercer	19.8%	✓	9.3%	✓	95.2%	✓	83%	33.5	✓
Metcalfe	23.6%	✓	9.3%	✗	95.5%	✓	95%	40.2	✓
Monroe	25.7%	✗	8.9%	✗	94.8%	✓	84%	40.0	✓
Montgomery	20.9%	✓	8.9%	✗	96.6%	✓	89%	45.8	✓
Morgan	27.9%	✗	10.1%	✗	95.5%	✓	86%	39.5	✓
Muhlenberg	19.0%	✓	8.1%	✗	96.2%	✓	90%	48.9	✓
Nelson	18.4%	✓	7.4%	✓	96.7%	✓	91%	21.7	✓



	Smoking during pregnancy		Low-birthweight babies		Children under 19 with health insurance		Young adults (ages 19-25) with health insurance ^Δ	Teen births (rate per 1,000 females ages 15-19)	
	2016-18	Change since 2011-13	2016-18	Change since 2011-13	2018	Change since 2013	2014-18	2016-18	Change since 2011-13
Nicholas	26.0%	✓	8.9%	✓	94.8%	✓	93%	46.9	✗
Ohio	13.9%	✓	7.7%	✓	96.6%	✓	92%	46.3	✓
Oldham	9.0%	✗	6.3%	✓	97.6%	✓	96%	7.5	✓
Owen	24.3%	✓	7.6%	✓	95.2%	✓	92%	30.4	✓
Owsley	45.3%	✗	10.6%	✓	97.0%	✓	95%	30.2	✓
Pendleton	32.5%	✗	9.6%	✗	95.2%	✓	86%	35.4	✓
Perry	33.7%	✓	10.0%	✓	96.6%	✓	85%	50.2	✓
Pike	23.7%	✓	11.0%	✗	95.9%	✓	88%	36.2	✓
Powell	30.2%	✓	8.8%	✗	96.4%	✓	86%	67.3	✓
Pulaski	25.5%	✗	8.7%	✗	95.9%	✓	90%	44.2	✓
Robertson	32.8%	✓	*	N/A	95.4%	✓	75%	*	N/A
Rockcastle	23.8%	✓	9.8%	✓	96.3%	✓	88%	30.7	✓
Rowan	26.3%	✓	8.2%	✓	96.2%	✓	94%	17.6	✓
Russell	28.9%	✓	9.0%	✓	95.0%	✓	85%	47.7	✓
Scott	13.9%	✓	7.3%	=	96.9%	✓	91%	20.7	✓
Shelby	13.0%	✓	9.4%	✗	95.1%	✓	84%	21.5	✓
Simpson	16.3%	✓	8.9%	✓	96.3%	✓	85%	29.2	✓
Spencer	17.0%	✗	7.0%	=	96.3%	✓	94%	18.9	✓
Taylor	24.0%	✓	10.1%	✗	95.8%	✓	83%	33.4	✓
Todd	14.2%	✓	8.6%	✓	93.6%	✓	73%	30.4	✓
Trigg	17.7%	✓	9.2%	✗	95.0%	✓	93%	29.9	✓
Trimble	24.7%	✓	9.9%	✓	96.3%	✓	92%	27.0	✓
Union	20.3%	✓	12.7%	✗	95.8%	✓	85%	31.2	✓
Warren	9.1%	✓	8.4%	✗	95.5%	✓	91%	17.2	✓
Washington	22.9%	✗	8.0%	✓	94.2%	✓	87%	23.3	✓
Wayne	28.6%	✗	9.6%	✗	96.2%	✓	72%	47.3	✓
Webster	18.2%	✓	12.0%	✗	94.2%	✓	89%	49.6	✓
Whitley	27.2%	✓	12.0%	✗	96.5%	✓	91%	38.7	✓
Wolfe	33.1%	✓	9.3%	✓	96.4%	✓	90%	58.0	✓
Woodford	13.4%	✓	8.4%	✓	95.0%	✓	88%	15.0	✓

✓ Better = No Change ✗ Worse

* = Rate not calculated for fewer than 6 events. N/A = No change calculated due to data suppression. Δ = Non-overlapping baseline data not available for this indicator.



Family & Community

Children thrive when they have healthy and strong relationships with adults in their lives. Having a parent incarcerated can negatively impact their behavioral, educational, and health outcomes. Even short stays in jail for a parent can create negative consequences for children and for the parent's ability to financially support the family. During the pandemic, it also puts those parents at greater risk of contracting COVID-19. Due to systemic inequities within the criminal justice system, children of color are disproportionately impacted by having a loved one incarcerated.

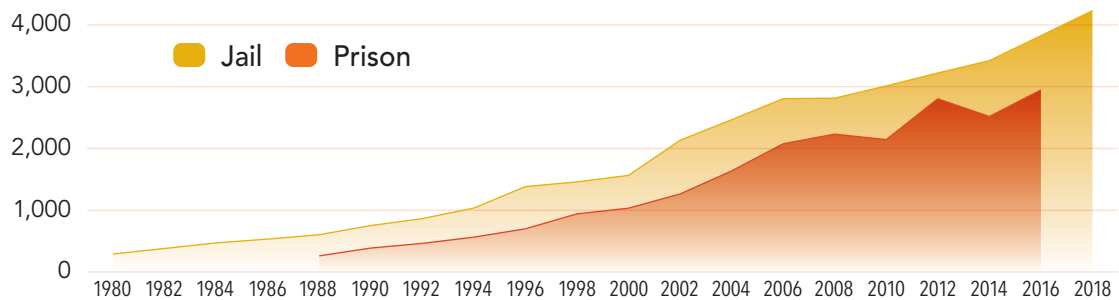


12% of Kentucky children have had a **PARENT INCARCERATED**

AND KENTUCKY RANKS **3RD HIGHEST** in the nation

SOURCE: National Survey on Children's Health, 2017-2018.

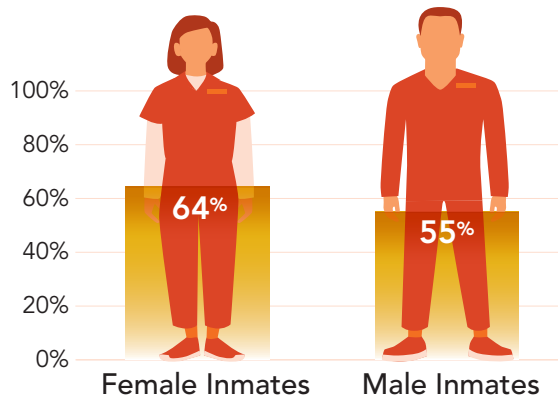
The number of women incarcerated has grown dramatically in recent decades



Number of Women in Kentucky Jails and Prisons, 1980 to 2018

SOURCE: Vera Institute of Justice, Incarceration Trends project.

Women who are incarcerated are more likely to be a parent than men

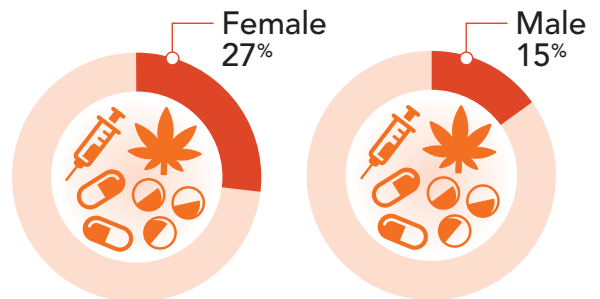


Kentuckians in State Custody Who are Parents, Dec. 2019

SOURCE: Kentucky Department of Corrections.

DATA NOTE: Data on incarceration provided by the Department of Corrections includes all people who are being held in state custody and housed in prisons or local jails.

Women are more likely than men to be incarcerated for a drug offense as their most serious offense



Kentuckians in State Custody Who are Incarcerated for a Drug Crime, Dec. 2019

SOURCE: Kentucky Department of Corrections.

SOLUTIONS

Kentucky can minimize the impact of parental incarceration on children by using alternatives to arrest and prosecution for minor offenses, reducing the use of incarceration prior to trial for less serious offenses, and connecting people with underlying substance abuse issues to treatment. When a parent is incarcerated, supporting visitation between the parent and child in a child-friendly way allows parents and children to continue building and maintaining relationships. This is especially important as Kentucky builds stronger, more equitable communities in response to COVID-19 and calls for addressing racial inequities in the justice system.



Family & Community

	Births to mothers without a high school degree		Children in foster care (rate per 1,000 children ages 0-17)		Children exiting foster care to reunification with parent/primary caretaker		Youth incarcerated in the juvenile justice system (rate per 1,000 children ages 10-17)	
	2016-18	Change since 2011-13	2017-19	Change since 2012-14	2017-19	Change since 2012-14	2017-19	Change since 2012-14
Kentucky	13.6%	✓	51.1	✗	37%	✗	27.1	✓
Adair	11.9%	✓	58.6	✗	53%	✓	7.0	✓
Allen	18.2%	✓	56.4	✗	39%	✗	17.6	✓
Anderson	7.2%	✓	51.7	✓	15%	✗	23.5	✓
Ballard	10.7%	✗	52.6	✗	39%	✗	25.8	✗
Barren	22.7%	✓	77.1	✗	48%	✗	17.1	✓
Bath	28.5%	✗	62.7	✗	21%	✗	9.0	✓
Bell	21.8%	✓	26.9	✗	30%	✗	47.3	✗
Boone	8.1%	✓	34.3	✗	45%	✗	12.7	✓
Bourbon	13.9%	✓	41.0	✗	40%	✓	22.5	✓
Boyd	11.6%	✓	105.5	✗	39%	✗	24.1	✓
Boyle	13.6%	✓	56.4	✗	36%	✓	12.5	✓
Bracken	6.3%	✓	61.9	✓	35%	✓	8.9	✓
Breathitt	14.7%	✓	52.8	✗	43%	✗	31.7	✓
Breckinridge	21.2%	✓	56.1	✗	35%	✗	32.6	✓
Bullitt	8.4%	✓	34.8	✗	46%	✓	32.1	✓
Butler	20.7%	✓	93.5	✗	26%	✗	21.6	✓
Caldwell	15.3%	✗	51.3	✗	21%	✓	23.6	✗
Calloway	7.1%	✓	56.0	✗	48%	✗	14.6	✓
Campbell	8.7%	✓	59.0	✓	24%	✓	26.1	✓
Carlisle	12.9%	✗	49.7	✗	78%	N/A	12.6	N/A
Carroll	19.5%	✓	78.3	✗	38%	✓	54.1	✓
Carter	14.0%	✓	89.5	✗	30%	✗	21.8	✓
Casey	29.1%	✓	23.0	✓	36%	✗	7.4	✓
Christian	13.8%	✓	37.9	✗	42%	✗	70.6	✓
Clark	12.0%	✓	59.8	✗	56%	✓	31.0	✓
Clay	26.2%	✓	88.6	✓	45%	✓	13.6	✓
Clinton	21.5%	✓	66.7	✗	27%	✗	16.1	✗
Crittenden	28.7%	✗	48.8	✗	33%	✗	19.7	✓
Cumberland	17.8%	✓	33.3	✗	62%	N/A	22.8	✓



Find detailed county profiles at kyyouth.org

	Births to mothers without a high school degree		Children in foster care (rate per 1,000 children ages 0-17)		Children exiting foster care to reunification with parent/primary caretaker		Youth incarcerated in the juvenile justice system (rate per 1,000 children ages 10-17)	
	2016-18	Change since 2011-13	2017-19	Change since 2012-14	2017-19	Change since 2012-14	2017-19	Change since 2012-14
Daviess	12.3%	✓	50.7	✗	45%	✗	38.3	✗
Edmonson	13.8%	✗	86.6	✗	40%	✗	6.6	✓
Elliott	22.0%	✓	77.4	✓	17%	✗	*	N/A
Estill	16.0%	✓	58.8	✓	22%	✓	32.8	✗
Fayette	11.8%	✓	52.1	✗	28%	✗	33.2	✓
Fleming	30.4%	✗	41.7	✓	31%	✗	6.3	✓
Floyd	17.0%	✓	50.3	✗	37%	✗	7.6	✓
Franklin	12.0%	✓	62.0	✗	47%	✓	46.5	✓
Fulton	10.2%	✓	51.4	✗	69%	N/A	29.0	✓
Gallatin	16.0%	✓	44.4	✗	70%	N/A	13.0	✓
Garrard	12.4%	✓	49.7	✓	16%	✗	19.0	✓
Grant	14.6%	✓	59.2	✗	43%	✓	27.7	✓
Graves	18.0%	✓	67.3	✓	21%	✗	44.9	✗
Grayson	16.4%	✓	94.9	✗	39%	✓	13.8	✓
Green	10.2%	✓	29.9	✗	33%	✗	26.9	✓
Greenup	9.7%	✓	35.0	✗	46%	✓	11.9	✓
Hancock	9.8%	✓	27.7	✗	*	N/A	12.3	✓
Hardin	7.8%	✓	77.1	✗	37%	✗	12.9	✓
Harlan	24.6%	✓	25.6	✗	34%	✓	22.4	✗
Harrison	17.1%	✓	66.0	✗	45%	✓	23.5	✓
Hart	36.6%	✓	50.3	✗	36%	✗	13.4	✓
Henderson	13.5%	✓	27.7	✗	32%	✗	71.2	✗
Henry	16.1%	✗	27.6	✓	38%	⚖	10.4	✗
Hickman	8.3%	✓	16.6	✗	*	N/A	46.6	✓
Hopkins	14.0%	✓	27.8	✗	55%	✗	48.2	✗
Jackson	26.1%	✗	82.2	✗	26%	✗	18.4	✗
Jefferson	13.6%	✓	37.8	✗	34%	✗	42.5	✓
Jessamine	9.9%	✓	45.7	✗	32%	✗	37.1	✓
Johnson	14.2%	✓	46.7	✓	46%	✓	6.5	✓
Kenton	12.2%	✓	54.7	✗	43%	✓	17.5	✓

✓ Better ⚖ No Change ✗ Worse

* = Rate not calculated for fewer than 6 events. N/A = No change calculated due to data suppression.



Family & Community

	Births to mothers without a high school degree		Children in foster care (rate per 1,000 children ages 0-17)		Children exiting foster care to reunification with parent/primary caretaker		Youth incarcerated in the juvenile justice system (rate per 1,000 children ages 10-17)	
	2016-18	Change since 2011-13	2017-19	Change since 2012-14	2017-19	Change since 2012-14	2017-19	Change since 2012-14
Knott	23.8%	✓	28.2	✓	43%	✓	11.0	✓
Knox	19.8%	✓	72.0	✗	31%	✗	24.8	✓
LaRue	10.8%	✓	51.5	✗	39%	✗	27.0	✓
Laurel	19.4%	✓	51.0	✗	40%	✗	17.9	✓
Lawrence	15.7%	✓	53.1	✗	44%	✗	9.0	✓
Lee	17.5%	✓	54.0	✗	50%	✓	47.2	✓
Leslie	15.0%	✓	54.7	✗	61%	✓	*	N/A
Letcher	19.9%	✓	23.6	✓	40%	✗	18.5	✓
Lewis	18.2%	✗	43.1	✗	43%	✗	33.8	✓
Lincoln	19.4%	✓	51.4	✗	44%	✓	22.0	✓
Livingston	9.5%	✓	45.7	N/A	26%	N/A	14.9	✗
Logan	16.2%	✓	46.6	✗	44%	✗	28.7	✓
Lyon	13.3%	✓	75.6	✓	47%	✓	17.3	✓
McCracken	10.0%	✓	54.6	✗	39%	✗	66.1	✓
McCreary	11.9%	✓	100.4	✗	30%	✗	7.6	✓
McLean	11.3%	✓	30.4	✗	24%	✗	22.6	✓
Madison	9.8%	✓	58.7	✗	24%	✗	23.6	✓
Magoffin	17.9%	✓	58.3	✓	18%	✗	20.3	✗
Marion	12.1%	✓	37.9	✗	31%	✗	14.6	✓
Marshall	9.2%	✓	60.4	✗	30%	✗	29.2	✓
Martin	23.7%	✓	85.1	✗	41%	✗	8.4	✓
Mason	12.4%	✓	62.4	✗	51%	✗	9.2	✓
Meade	9.3%	✗	71.8	✗	42%	✗	17.4	✓
Menifee	16.5%	✓	82.1	✓	19%	✓	39.9	✗
Mercer	8.7%	✓	44.1	✗	47%	✓	6.4	✓
Metcalfe	15.6%	✓	57.1	✗	44%	✗	15.3	✓
Monroe	12.3%	✓	43.4	✗	56%	✗	19.0	✓
Montgomery	13.9%	✓	89.5	✗	47%	✗	11.7	✓
Morgan	17.1%	✓	85.7	✗	32%	✓	14.9	✓
Muhlenberg	15.2%	✓	30.0	✗	58%	N/A	9.7	✓
Nelson	7.9%	✓	24.2	✗	36%	✗	16.5	✓



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	Births to mothers without a high school degree		Children in foster care (rate per 1,000 children ages 0-17)		Children exiting foster care to reunification with parent/primary caretaker		Youth incarcerated in the juvenile justice system (rate per 1,000 children ages 10-17)	
	2016-18	Change since 2011-13	2017-19	Change since 2012-14	2017-19	Change since 2012-14	2017-19	Change since 2012-14
Nicholas	29.4%	✗	38.6	✗	47%	N/A	37.4	✗
Ohio	16.1%	✓	74.6	✗	53%	✓	28.0	✓
Oldham	5.5%	✓	13.4	✗	32%	✗	8.1	✗
Owen	12.4%	✓	68.6	✗	16%	✗	14.0	✓
Owsley	13.1%	✓	68.4	✓	33%	✗	47.6	✓
Pendleton	9.7%	✓	43.1	✗	56%	N/A	39.0	✓
Perry	18.0%	✓	110.1	✗	35%	✗	17.9	✓
Pike	14.3%	✓	36.1	✗	26%	✗	4.6	✓
Powell	15.0%	✓	60.3	✗	27%	✗	58.2	✓
Pulaski	13.6%	✓	85.6	✗	42%	✗	16.5	✓
Robertson	14.9%	✓	34.1	✓	0%	N/A	*	N/A
Rockcastle	12.8%	✓	60.8	✗	33%	✗	15.8	✓
Rowan	9.2%	✓	127.5	✗	27%	✗	15.4	✓
Russell	17.3%	✓	68.3	✗	25%	✗	7.3	✓
Scott	10.5%	✓	35.3	✓	24%	✗	23.9	✗
Shelby	14.3%	✓	40.0	✓	36%	✓	14.0	✓
Simpson	11.5%	✓	37.8	✗	27%	✗	22.1	✓
Spencer	6.8%	✓	39.4	✗	36%	✗	7.1	✓
Taylor	10.6%	✓	41.8	✓	46%	✗	10.5	✓
Todd	33.7%	✗	36.5	✗	59%	✗	16.9	✓
Trigg	29.8%	✗	28.4	✗	69%	✗	15.6	✗
Trimble	14.7%	✗	60.3	✗	39%	✗	11.2	N/A
Union	11.0%	✓	47.9	✗	24%	✗	55.3	✓
Warren	14.2%	✓	69.7	✗	31%	✗	13.1	✓
Washington	12.7%	✗	19.8	✓	27%	N/A	12.9	✗
Wayne	20.0%	✓	43.4	✗	39%	✓	23.9	✓
Webster	22.7%	✗	23.4	✗	48%	✗	52.9	✗
Whitley	17.0%	✓	82.5	✗	37%	✗	17.8	✓
Wolfe	16.1%	✓	137.0	✗	29%	✗	50.5	✓
Woodford	9.3%	✓	28.9	✗	33%	✗	11.0	✓

✓ Better = No Change ✗ Worse

* = Rate not calculated for fewer than 6 events. N/A = No change calculated due to data suppression.

DEFINITIONS AND DATA SOURCES

Economic Security

CHILDREN IN DEEP POVERTY

is the percentage of children under age 18 who live in families with incomes below 50 percent of the federal poverty line. A family's poverty status is determined using inflation-adjusted income and household size. For example, 50 percent of the poverty threshold in 2018 for a family with two adults and two children was \$12,733. The report does not determine the poverty status of children living in group quarters or of children under the age of 15 who are living with unrelated caregivers, such as children in foster care. The data are based on income received in the 12 months prior to the survey response. **SOURCE: U.S. Census Bureau, 5-Year American Community Survey Estimates, Table B17024.** *The most recent available estimates were processed on February 26, 2020.*

CHILDREN IN POVERTY is the percentage of children under age 18 who live in families with incomes below 100 percent of the federal poverty line. The data reflect model-based estimates which combine data from administrative records, population estimates, and estimates from the American Community Survey to produce single-year data for all counties. For context, the poverty threshold in 2018 for a family with two adults and two

children was \$25,465. **SOURCE: U.S. Census Bureau, Small Area Income and Poverty Estimates.** *The most recent available estimates were processed on December 19, 2019.*

CHILDREN IN LOW-INCOME FAMILIES is the percentage of children under age 18 who live in families with incomes below 200 percent of the federal poverty line. A family's poverty status is determined using inflation-adjusted income and household size. For example, 200 percent of the poverty threshold in 2018 for a family with two adults and two children was \$50,930. The report does not determine the poverty status of children living in group quarters or of children under the age of 15 who are living with unrelated caregivers, such as children in foster care. The data are based on income received in the 12 months prior to the survey response. **SOURCE: U.S. Census Bureau, 5-Year American Community Survey Estimates, Table B17024.** *The most recent available estimates were processed on February 26, 2020.*

CHILDREN LIVING IN FOOD INSECURE HOUSEHOLDS is the percentage of children under age 18 who live in households that at times lack access to enough food for a healthy life and experience limited or uncertain availability of nutritionally adequate foods.

The data reflect model-based estimates derived from: Current Population Survey data on children under 18 years old in food insecure households; data from the American Community Survey on median family incomes for households with children, child poverty rates, home ownership, disability rates and racial and ethnic demographics among children; and unemployment data from the Bureau of Labor Statistics. **SOURCE: Feeding America's Map the Meal Gap project.** *The most recent available estimates were processed on September 10, 2020.*

Education

KINDERGARTENERS READY TO LEARN is the percentage of all screened incoming public school Kindergarteners who meet readiness-to-learn standards. The standards include adaptive, cognitive, motor, communication, and social-emotional skills. The Kentucky Department of Education chose the BRIGANCE Kindergarten Screen as its school-readiness screener. However, BRIGANCE scores are not used to determine school eligibility; all Kentucky children who meet the legal age requirement are entitled to enter public school. **SOURCE: Kentucky Department of Education, Supplemental Data.** *The most recent available data were processed on October 14, 2020.*

HIGH SCHOOL STUDENTS GRADUATING ON TIME is the percentage of high school students who graduated within four years. The percentage is derived using the four-year cohort method, which tracks students over a four-year period and controls for student population changes within the cohort. **SOURCE:** Kentucky Department of Education, School Report Card. The most recent available data were processed on October 14, 2020.

STUDENTS WITH INDIVIDUALIZED EDUCATION PLANS is the percentage of students with disabilities provided special educational services under the Individuals with Disabilities Education Act. The data reflect students ages 3 up to 21. The denominator for the percent calculation is the student membership count (including preschoolers). **SOURCE:** Kentucky Department of Education, School Report Card. The most recent available data were processed on October 14, 2020.

STUDENT HOMELESSNESS is the percentage of students who lack a fixed, regular and adequate nighttime residence. This includes students who are sharing the housing of other persons due to loss of housing or economic hardship (sometimes referred to as “doubled-up”). The denominator for the percent calculation is the student membership count.

SOURCE: Kentucky Department of Education, School Report Card. The most recent available data were processed on October 14, 2020.

Health

SMOKING DURING PREGNANCY is the percentage of births to mothers who reported smoking at any point during pregnancy. Data were reported by mother’s place of residence. When the information for this variable was missing, the case was excluded from the total number of live births. The numerator for the rate calculation is the summation of the three-year time period. **SOURCE:** Kentucky Cabinet for Health and Family Services, Vital Statistics Branch, processed by the Kentucky State Data Center. The data are as of September 28, 2020.

LOW-BIRTHWEIGHT BABIES is the percentage of all infants born weighing less than 5.5 pounds. Data were reported by mother’s place of residence. When the information for this variable was missing, the case was excluded from the total number of live births. The numerator for the rate calculation is the summation of the three-year time period. **SOURCE:** Kentucky Cabinet for Health and Family Services, Vital Statistics Branch, processed by the Kentucky State Data Center. The data are as of September 28, 2020.

CHILDREN UNDER 19 WITH HEALTH INSURANCE is the percentage of children under age 19 covered by any health insurance. The data reflect model-based estimates enhanced by administrative data to produce single-year data for all counties. Primary data included in the model derive from, but are not limited to, inputs such as the American Community Survey, federal tax returns, the Supplementary Nutrition Assistance Program, Medicaid/CHIP participation, and population estimates. **SOURCE:** U.S. Census Bureau, Small Area Health Insurance Estimates. The most recent available estimates were processed on September 10, 2020.

YOUNG ADULTS (AGES 19-25) WITH HEALTH INSURANCE is the percentage of young adults ages 19 to 25 covered by any health insurance. The data represent health insurance coverage at the time of the survey; interviews are conducted throughout the year. **SOURCE:** U.S. Census Bureau, 5-Year American Community Survey Estimates, Table S2701. The most recent available estimates were processed on September 29, 2020.

TEEN BIRTHS is the number of births to teenagers ages 15 to 19 per 1,000 females in this age group. Data were reported by mother’s place of residence. The numerator for the rate calculation is the summation of the three-year time period.

The denominator for the rate calculation is the summation of the population estimates for the same three-year time period. **SOURCES:** Kentucky Cabinet for Health and Family Services, Vital Statistics Branch, processed by the Kentucky State Data Center. Teen population data for rate calculation is from the U.S. Census Bureau, Population Division, processed by the Kentucky State Data Center. *The data are as of September 28, 2020.*

Family and Community

BIRTHS TO MOTHERS WITHOUT A HIGH SCHOOL DEGREE is the percentage of all live births to women with no high school degree or its equivalent. Data were reported by mother's place of residence. When information for this variable was missing, the case was excluded from the total number of live births. The numerator for the rate calculation is the summation of the three-year time period. **SOURCE:** Kentucky Cabinet for Health and Family Services, Vital Statistics Branch, processed by the Kentucky State Data Center. *The data are as of September 28, 2020.*

CHILDREN IN FOSTER CARE is the number of children under age 18 per 1,000 children in this age group who lived in foster care due to abuse or neglect. Foster care includes placements

in licensed foster homes with relatives or unrelated caregivers, or institutional placements such as group homes or residential treatment facilities. Data are collected to reflect the county of the case manager's office, which usually corresponds with the county in which a family is being served. The numerator for the rate calculation is the summation of the three-year time period. The denominator for the rate calculation is the population estimate for the midpoint year of the three-year time period. **SOURCES:** Kentucky Cabinet for Health and Family Services, Department for Community Based Services. Child population data for rate calculation is from the U.S. Census Bureau, Population Division, processed by Kentucky Youth Advocates. *The data are as of September 28, 2020.*

CHILDREN EXITING FOSTER CARE TO REUNIFICATION is the percentage of children exiting foster care who are reunified with their parents or primary caretakers. Data are collected to reflect the county of the case manager's office, which usually corresponds with the county in which a family is being served. The numerator and denominator for the rate calculation is the summation of the three-year time period. **SOURCE:** Kentucky Cabinet for Health and Family Services, Department for Community Based Services.

The data are as of September 28, 2020.

YOUTH INCARCERATED IN THE JUVENILE JUSTICE SYSTEM is the number of children per 1,000 children ages 10 to 17 booked into a secure juvenile detention facility. The numerator for the rate calculation is the summation of the three-year time period. A child may have been booked more than once during those years. The denominator for the rate calculation is the population estimate for the midpoint year of the three-year time period. **SOURCES:** Kentucky Department of Juvenile Justice and Louisville Metro Youth Detention Services, processed by Kentucky Youth Advocates. Child population data for rate calculation is from the U.S. Census Bureau, National Center for Health Statistics, processed by Kentucky Youth Advocates. *The data are as of July 28, 2020.*



ENDNOTES

- 1 U.S. Census Bureau, Household Pulse Survey - Phase 1 analysis by the Population Reference Bureau, June 25-July 21, 2020 responses.
- 2 Cornelissen, S. and Hermann, A. (2020). *A Triple Pandemic? The Economic Impacts of COVID-19 Disproportionately Affect Black and Hispanic Households*. Harvard Joint Center for Housing Studies. Available at <https://www.jchs.harvard.edu/blog/a-triple-pandemic-the-economic-impacts-of-covid-19-disproportionately-affect-black-and-hispanic-households>. Accessed October 2020.
- 3 Institute of Medicine (2003). *Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care*. The National Academies Press. Available at <https://www.nap.edu/catalog/12875/unequal-treatment-confronting-racial-and-ethnic-disparities-in-health-care>. Accessed October 2020.
- 4 Louisville Metro Department of Public Health and Wellness, Center for Health Equity (2017). *Health Equity Report: Uncovering the Root Causes of Health*. Available at https://louisvilleky.gov/sites/default/files/health_and_wellness/che/health_equity_report/health_equity_report.pdf. Accessed October 2020.
- 5 Kentucky Department for Public Health (2018). *Kentucky Behavioral Risk Factor Survey (KyBRFS): 2018 Annual Report*. Available at <https://chfs.ky.gov/agencies/dph/dpqi/cdpb/Kentucky%20BRFSS%20Data%20Reports/2018%20KyBRFS%20Annual%20Report.pdf>. Accessed October 2020.
- 6 Kentucky Department for Public Health, Office of Health Equity. 2017 *Kentucky Minority Health Status Report*. Available at <https://chfs.ky.gov/agencies/dph/Documents/2017minorityhealthstatusreport.pdf>. Accessed October 2020.
- 7 Centers for Disease Control and Prevention (2019). *Sickle Cell Disease (SCD)*. Available at <https://www.cdc.gov/ncbddd/sicklecell/data.html>. Accessed October 2020.
- 8 National Low Income Housing Coalition (2020). *Hispanic and Native Renters Most Suffer Overcrowded Housing; Native Renters Most Suffer Incomplete Facilities*. Available at <https://nlihc.org/resource/hispanic-and-native-renters-most-suffer-overcrowded-housing-native-renters-most-suffer>. Accessed October 2020.
- 9 U.S. Bureau of Labor Statistics (2019). *Labor Force Characteristics by Race and Ethnicity, 2018*. Available at <https://www.bls.gov/opub/reports/race-and-ethnicity/2018/home.htm>. Accessed October 2020.
- 10 Kentucky Department for Public Health (2020). *KY COVID-19 Daily Summary* 10/21/2020.
- 11 National Immigration Law Center (2020). *Understanding the Impact of Key Provisions of COVID-19 Relief Bills on Immigrant Communities*. Available at <https://www.nilc.org/wp-content/uploads/2020/04/COVID19-relief-bills-understanding-key-provisions.pdf>. Accessed October 2020.
- 12 U.S. Census Bureau, Household Pulse Survey - Phase 2 analysis by the Population Reference Bureau, August 19-September 14, 2020 responses.
- 13 Urban Institute (2020). *Tracking COVID-19's Effects by Race and Ethnicity: Updates on Americans' Health, Housing, and Livelihoods*. Available at <https://www.urban.org/features/tracking-covid-19s-effects-race-and-ethnicity>. Accessed October 2020.
- 14 U.S. Census Bureau, Household Pulse Survey - Phase 2 analysis by the Population Reference Bureau, August 19-September 14, 2020 responses.
- 15 The Washington Post (2020). *Fatal Force*. Available at <https://www.washingtonpost.com/graphics/investigations/police-shootings-database/>. Accessed October 2020.
- 16 Mental Health America (2020). *Racial Trauma*. Available at <https://www.mhanational.org/racial-trauma>. Accessed October 2020.
- 17 The Annie E. Casey Foundation (2020). *Children without health insurance by race and ethnicity in Kentucky*. Available at <https://datacenter.kidscount.org/data/tables/10196-children-without-health-insurance-by-race-and-ethnicity?loc=19&loc=2#detailed/2/19/false/1729/10,11,9,12,1,185,13/19729>. Accessed October 2020.
- 18 Kaiser Family Foundation (2019). *Uninsured Rates for the Nonelderly by Race/Ethnicity*. Available at <https://www.kff.org/uninsured/state-indicator/rate-by-raceethnicity/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22kentucky%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>. Accessed October 2020.
- 19 Sanchez, G., Vargas, E., Pedroza, A. (2020). *COVID-19 is Having a Devastating Impact on the Economic Well-being of Latino Families*. Available at <https://www.brookings.edu/blog/how-we-rise/2020/07/27/covid-19-is-having-a-devastating-impact-on-the-economic-well-being-of-latino-families/>. Accessed October 2020.
- 20 Centers for Disease Control and Prevention (2020). *Health Equity Considerations and Racial and Ethnic Minority Groups*. Available at <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html>. Accessed October 2020.
- 21 Data obtained from the Kentucky Department for Medicaid Services, October 2020.
- 22 U.S. Census Bureau, Household Pulse Survey - Phase 1 analysis by the Population Reference Bureau, June 25-July 21, 2020 responses.
- 23 Ibid.
- 24 Asad, A.L. (2020). "Why Latino Citizens Are Worrying More About Deportation." *The Conversation*. Available at <https://theconversation.com/why-latino-citizens-are-worrying-more-about-deportation-133216>. Accessed October 2020.
- 25 U.S. Census Bureau, Household Pulse Survey - Phase 1 analysis by the Population Reference Bureau, June 25-July 21, 2020 responses
- 26 Graham, C., Chun, Y., Grinstein-Weiss, M., Roll, S., and Frimpong, K. (2020). *Resilience in the Face of a Pandemic: COVID Weighs Unevenly Across Racial Lines*. Available at <https://www.brookings.edu/blog/how-we-rise/2020/06/24/resilience-in-the-face-of-a-pandemic-covid-weighs-unevenly-across-racial-lines/>. Accessed October 2020.
- 27 Kentucky Youth Advocates (2020). *COVID-19 Impacts on the Kentucky Child Welfare Community: A Public Health Crisis Meets a Vulnerable System*. Available at <https://kyyouth.org/wp-content/uploads/2020/08/COVID-19-Impacts.pdf>. Accessed October 2020.
- 28 U.S. Census Bureau, Household Pulse Survey - Phase 1 analysis by the Population Reference Bureau, June 25-July 21, 2020 responses
- 29 Ibid.
- 30 Ibid.
- 31 Office of the Governor (2020, September 28). *Governor Beshear Provides Update on COVID-19*. [Press release] Available at <https://kentucky.gov/Pages/Activity-stream.aspx?n=GovernorBeshear&prId=387>. Accessed October 2020.
- 32 Kentucky Cabinet for Health and Family Services (2020, October 4). *Information about school children PEBT benefits for August and September*. [Video] Available at <https://www.youtube.com/watch?v=R2wjxC6Yc2Q>. Accessed October 2020.

- 33 Escobari, M., Geismar, N., and Gandhi, D. (2020). *Visualizing Vulnerable Jobs Across America: A Tool to Understand Your Local Economy and Inform Its Recovery*. Available at <https://www.brookings.edu/blog/up-front/2020/07/28/visualizing-vulnerable-jobs-across-america-a-tool-to-understand-your-local-economy-and-inform-its-recovery/>. Accessed September 2020.
- 34 Hardy, B. and Logan, T. (2020). *Racial Economic Inequality Amid the COVID-19 Crisis*. The Hamilton Project. Available at https://www.brookings.edu/wp-content/uploads/2020/08/EA_HardyLogan_LO_8.12.pdf. Accessed September 2020.
- 35 Grooms, J., Ortega, A., Rubalcaba, J. (2020). *The COVID-19 Public Health and Economic Crises Leave Vulnerable Populations Exposed*. Available at <https://www.brookings.edu/blog/up-front/2020/08/13/the-covid-19-public-health-and-economic-crises-leave-vulnerable-populations-exposed/>. Accessed September 2020.
- 36 U.S. Census Bureau, Household Pulse Survey - Phase 1 analysis by the Population Reference Bureau, June 25-July 21, 2020 responses.
- 37 KY STATS (2020). *County Unemployment Update*. Available at https://kystats.ky.gov/Reports/Tableau/CUU_2020. Accessed October 2020.
- 38 Ibid.
- 39 U.S. Census Bureau, Household Pulse Survey - Phase 2 analysis by the Population Reference Bureau, August 19-September 14, 2020 responses.
- 40 Nichols, A. and Simms, M. (2012). "Racial and Ethnic Differences in Receipt of Unemployment Insurance Benefits during the Great Recession." *Unemployment and Recovery Project*, Brief No. 4. Available at <https://www.urban.org/sites/default/files/publication/25541/412596-Racial-and-Ethnic-Differences-in-Receipt-of-Unemployment-Insurance-Benefits-During-the-Great-Recession.PDF>. Accessed October 2020.
- 41 Sanchez, G., Vargas, E., Pedroza, A. (2020). *COVID-19 is Having a Devastating Impact on the Economic Well-being of Latino Families*. Available at <https://www.brookings.edu/blog/how-we-rise/2020/07/27/covid-19-is-having-a-devastating-impact-on-the-economic-well-being-of-latino-families/>. Accessed October 2020.
- 42 U.S. Census Bureau, Household Pulse Survey - Phase 1 analysis by the Population Reference Bureau, June 25-July 21, 2020 responses.
- 43 U.S. Census Bureau, Household Pulse Survey - Phase 2 analysis by the Population Reference Bureau, August 19-September 14, 2020 responses.
- 44 *A Fragile Ecosystem II* (2020). Available at <https://uwky.org/childcarekentucky>. Accessed October 2020.
- 45 U.S. Census Bureau, Household Pulse Survey - Phase 2 analysis by the Population Reference Bureau, August 19-September 14, 2020 responses.
- 46 Urban Institute (2020). *Tracking COVID-19's Effects by Race and Ethnicity*. Available at <https://www.urban.org/features/tracking-covid-19s-effects-race-and-ethnicity>. Accessed October 2020.
- 47 U.S. Census Bureau, Household Pulse Survey - Phase 2 analysis by the Population Reference Bureau, August 19-September 14, 2020 responses.
- 48 Ibid.
- 49 WestEd (2020). *Preventing Students from Dropping Out During Covid-19 School Closures*. Available at <https://www.wested.org/wested-insights/preventing-students-from-dropping-out-during-covid-19/#>. Accessed October 2020.
- 50 U.S. Census Bureau, Household Pulse Survey - Phase 1 analysis by the Population Reference Bureau, June 25-July 21, 2020 responses
- 51 Hardy, B. and Logan, T. (2020). *Racial Economic Inequality Amid the COVID-19 Crisis*. The Hamilton Project. Available at https://www.brookings.edu/wp-content/uploads/2020/08/EA_HardyLogan_LO_8.12.pdf. Accessed September 2020.
- 52 Rani, R. (2020, April 4). "Imagine Online School in a Language You Don't Understand." *The New York Times*. Available at <https://www.nytimes.com/2020/04/22/us/coronavirus-immigrants-school.html>. Accessed October 2020.
- 53 Kentucky Department of Education, School Report Card, 2019-2020. Available at https://www.kyschoolreportcard.com/organization/20/school_overview/students/student_groups?year=2020. Accessed October 2020. Note that data includes students who have an Individual Education Program (IEP) and may remain in school up to age 21.
- 54 Kobin, B. (2020, September 11). "A Big Problem: Disadvantaged JCPS Students Face At-home Learning Struggles with NTI 2.0." *The Courier-Journal*. <https://www.courier-journal.com/story/news/education/2020/09/11/louisville-disadvantaged-students-face-home-learning-nti-2-0-issues/5703257002/>. Accessed October 2020.
- 55 Kentucky Department for Community Based Services presentation to the Child Welfare Oversight and Advisory Committee, July 22, 2020. *Out of Home Care in the Commonwealth*. Available at <https://apps.legislature.ky.gov/CommitteeDocuments/320/12791/7%2022%202020%20DCBS%20Foster%20Care%20Update%20Presentation.pdf>. Accessed September 2020.
- 56 Kentucky Youth Advocates (2020). *COVID-19 Impacts on the Kentucky Child Welfare Community: A Public Health Crisis Meets a Vulnerable System*. Available at <https://kyyouth.org/wp-content/uploads/2020/08/COVID-19-Impacts.pdf>. Accessed October 2020.
- 57 Data obtained from the Kentucky Department of Juvenile Justice, September 2020.
- 58 Kentucky Youth Advocates analysis of data obtained from the Kentucky Department of Juvenile Justice, Administrative Office of the Courts, and the Louisville Metro Youth Detention Center, July 2020.
- 59 Data obtained from the Kentucky Department of Juvenile Justice, September 2020.
- 60 Population data by race from U.S. Census Bureau, in collaboration with the National Center for Health Statistics, 2019 Bridged-Race Population Estimates.
- 61 The Annie E. Casey Foundation (2020). *Children who had a parent who was ever incarcerated*. Available at <https://datacenter.kidscount.org/data/tables/9688-children-who-had-a-parent-who-was-ever-incarcerated#detailed/2/2-52/false/1648,1603/any/18927,18928>. Accessed October 2020.
- 62 Kentucky Department of Corrections (2020). FAQ. Available at <https://corrections.ky.gov/Facilities/pages/covid19FAQ.aspx>. Accessed October 2020.
- 63 Kentucky Governor Andy Beshear (2020). *Kentucky's response to COVID-19*. Available at <https://governor.ky.gov/covid19>. Accessed October 2020.
- 64 Kentucky Department of Corrections. (2020). *COVID-19 Response*. Available at <https://corrections.ky.gov/facilities/pages/covid19.aspx>. Accessed October 2020.
- 65 Hinton, E., Henderson, L., and Reed, C. (2018). *An Unjust Burden: The Disparate Treatment of Black Americans in the Criminal Justice System*. Available at <https://www.vera.org/downloads/publications/for-the-record-unjust-burden-racial-disparities.pdf>. Accessed October 2020.
- 66 Kentucky Department of Corrections. *Monthly Reports*. Available at <https://corrections.ky.gov/About/researchandstats/Pages/monthlyreports.aspx>. Accessed October 2020.
- 67 Cabral, R. and Smith, T. (2011). "Racial/Ethnic Matching of Clients and Therapists in Mental Health Services: A Meta-analytic Review of Preferences, Perceptions, and Outcomes." *Journal of Counseling Psychology*. vol. 58, no. 4.

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