

COMMUNITY ASSESSMENT



March
2022-2023

Northwest Tennessee Economic Development Council
Head Start/Early Head Start



Community Assessment

NORTHWEST TENNESSEE ECONOMIC DEVELOPMENT COUNCIL HEAD START/EARLY HEAD START

EXECUTIVE SUMMARY

HEAD START/EARLY HEAD START

Northwest Tennessee Economic Development Council (NWTEDC) is a private, non-profit community action agency serving children and families in eight counties in Tennessee (Benton, Carroll, Gibson, Henry, Lake, Madison, Obion, and Weakley County). Head Start and Early Head Start is provided in all eight counties and is central to the agency achieving its mission to provide comprehensive support for child development and school readiness, from prenatal to kindergarten ages, for the community's most vulnerable children. NWTEDC is funded to serve 871 children and pregnant women in its Head Start/Early Head Start program.

SERVICE AREA DEMOGRAPHICS

The total population in the NWTEDC service area is 294,439. Over the past three years, the population in Tennessee has been increasing, while the population in the overall service area has been mostly decreasing.

NWTEDC service area residents are predominantly White and non-Hispanic, and the primary language of individuals is English. Yet, racial and ethnic diversity is more varied in some communities within the service area. Generally, racial diversity in the service area is lower than the statewide rate, with the exception of Lake and Madison County, where the rate of Black or African American individuals is 28.5% and 37.2% respectively. Ethnic diversity is also below the statewide rate in all counties in the service area. Diversity varies by community, with the greatest ethnic diversity in Obion County, where 4.4% of the population is Hispanic or Latino, followed by Madison County, where 3.9% of the population is Hispanic or Latino.

The poverty rate across the service area is greater than the statewide rate in every county, with the highest rates in Lake County (28.6%) and Obion County (21.1%). There are disparities with regard to poverty rate and race, however. The poverty rate among those identified as "some other race" is 29.1% and 24.7% for Black/African American individuals, compared to 12.9% for White individuals. Additionally, the poverty rate for Hispanic or Latino individuals is 26.2% as compared to 12.2% for non-Hispanic or Latino individuals. There are also disparities with regard to single-parent and two-parent families with young children. In Tennessee, for families with a female head of household (no husband present) the poverty rate is over 51.8%, substantially greater than married-couple families (6.2%).

In the NWTEDC service area, most children live with their biological, step, or adopted parents. However, in certain communities within the county, high percentages of children live with a grandparent or other relative. In Lake County for example, the rate is 15.7% living with a grandparent. There are also many single-parent households in the service area, ranging from 31.31 in Carroll County to 52.91% in Lake County. Nearly 76%

of children served by NWTEDC Head Start/Early Head Start are living in single-parent families, well above the statewide rate. Head Start/Early Head Start is providing a vital resource to these families.

NEEDS OF ELIGIBLE CHILDREN AND FAMILIES AND RESOURCES AVAILABLE TO MEET NEEDS

There is great diversity of need in the NWTEDC service area. Some families have few needs, while other families experience many of the factors that contribute to the cycle of poverty within their communities. During the pandemic, NWTEDC leadership report increases in mental health challenges, substance abuse, depression, anxiety, and some domestic violence, as well as delays with health screenings for enrolled children.

In the service area, a greater percentage of adults have attained a high school diploma than in the rest of the state. Educational attainment is generally below the statewide rate for higher level degrees. The highest level of educational attainment for the majority (approximately 55-60%) of residents 25 and older in the service area is a high school degree or some college with no degree. Yet, disparities exist when looking at subgroups of the student population. While school districts in the service area have high school graduation rates, ranging from 84.9% to 99% and higher, graduation rates are generally lower among economically disadvantaged students, English learners, and students with disabilities. In Humboldt City Schools (Gibson County) and Union City Schools (Obion County), there are especially low graduation rates for students with disabilities.

Further, high school dropout rates are generally low in school districts in the service area. There are only two school districts in which the high school dropout rate is greater than the statewide rate of 6.7%: Lake County School System and Madison County Schools, where the rates are 10% and 7.1% respectively.

With regard to overall health, factors related to poor health and the frequency of physically and mentally unhealthy days are generally higher across the service area as compared to the state of Tennessee. NWTEDC has strong partnerships to provide and maintain access to health services for families. Some service area residents, however, may not have optimal health outcomes and may experience challenges accessing health care (e.g., dental care). Access to transportation may also present barriers to obtaining needed care. Furthermore, during the 2022 Community Assessment process, the worldwide COVID-19 pandemic still was impacting the health and wellbeing of communities across the nation, including Tennessee.

Like adult health factors, there are strengths and disparities in the NWTEDC service area when considering infant and maternal health. For example, the rate of access to prenatal care in the first four months of pregnancy is above the statewide rate across counties in the service, with the exception of Henry County.

In Tennessee, the teen birth rate (ages 15-17) is approximately double the rate of the United States. In the NWTEDC service area, the teen birth rate is greater than the state rate in Benton, Gibson, Henry, Lake, and Obion County.

The percent of mothers with preterm births is low in the service area, with a rate above the state rate only in Lake County, though it is higher when looking at subgroups of the population. The rate is 14.6% among Black mothers and 10.3% among White mothers in Tennessee. Also, in comparison with singleton births, multiple births in Tennessee were about seven times as likely to be preterm in 2019.

Obesity is a challenge among young children in Tennessee and among families served by the Head Start/Early Head Start program. Indicators from the NWTEDC 2020-2021 Head Start Program Information Report (PIR) show that while 52.4% of enrolled children were classified as having a healthy weight, 14.6%

were classified as overweight and 19.3% classified as obese, a combined overweight and obesity rate of 33.9%.

Considering nutrition needs, the food insecurity rate is above the statewide rate (14%) in all of the counties in the service area, ranging from 15-20%, with the highest rate in Lake County. Further, data from local food banks indicate that food insecurity increased at the start of the COVID-19 pandemic and an unprecedented level of need continues. All counties in the service area have rates of free and reduced lunch above the state rate (46.7%), with the highest rates in Lake County (83.9%), Madison County (59.3%), and Benton County (51.5%), indicating greater need in communities served by these county school districts. The number of children participating in the Women, Infants, and Children (WIC) program has been decreasing or fluctuating in recent years (2019-2021); the highest WIC participation rate is in Lake County (60.2%) and is more than double the state rate.

Additionally, in Tennessee, while food insecurity increased from 31% prior to the pandemic to 39% in the first four months of the pandemic, self-reported SNAP participation stagnated. Even more alarmingly, among low-income households that were also food-insecure, 47% reported participating in SNAP prior to the pandemic but only 39% did so in the first four months following the pandemic's onset. In particular, Black households, households with children, and those in the lowest income category experienced the largest declines in SNAP participation.ⁱ

Social and economic data show that factors such as median home value and median household income vary within the service area, but all counties have a median household income (ranging from \$35,191 in Lake County to \$48,161 in Madison County) and home value (ranging from \$81,300 in Lake County to \$131,500 in Madison County) below the statewide rate. Some families in lower income communities depend on a wide range of social services to support their families, including subsidized child care, cash assistance, and WIC.

Further, violent and non-violent crime rates in are low in the service area, compared to the state of Tennessee. Violent crime rates are highest in Madison (only county above the state rate) and Gibson County, while non-violent crime rates are highest in Madison and Obion County.

In the NWTEDC service area, 64.9% of the population active is in the labor force. Many young children have all parents in the labor force; the only county with rates lower than the state rate are in Weakley County (50.8%) and the highest rate is in Benton County (76.3%). According to data on unemployment, the unemployment rates in the service area tend to be greater than the statewide rate. In 2020, the average annual unemployment rate in Lake (8.8%) and Benton County (8.2%) was greater than the state rate (7.5%), with the lowest rate in Weakley County (5.8%).

In the service area, there are many social services available to meet families' needs, including subsidized child care, cash assistance, SNAP and WIC. Workforce training and education opportunities are available to service area residents, while public transportation is limited within the county. Low-income families may face barriers accessing available resources; this is further reflected in Community Assessment survey results.

ELIGIBLE CHILDREN AND PREGNANT WOMEN

In the NWTEDC service area, there are a total of 5,682 children who are eligible for Head Start or Early Head Start services based on family income at or below the federal poverty level. The greatest estimated numbers of children who are income-eligible for participation in Head Start/Early Head Start reside in

Gibson and Madison County. Nearly 55% of income-eligible children in the service area reside in these two counties. Additionally, there are also an estimated 1,169 income-eligible pregnant women in the service area.

Data also shows approximately 900 children in the service area, birth to age 5, are eligible for Head Start/Early Head Start services based on receipt of public assistance (TANF and SSI).

Data on homelessness show high rates of students experiencing homelessness in three school districts, all in Carroll County: South Carroll County Special School District (4.8%), Huntingdon Special School District (4.2%) and Hollow Rock-Bruceton Special School District (2.6%).

Additionally, the number of reports and substantiated child abuse and neglect incidents in the service area are generally greater than the statewide rate across the service area, but have been fluctuating or declining over the past three years. Though county-level data on foster care is not accessible, in Tennessee 32% of all children in foster care are five or younger. The most recent data on child abuse and neglect show substantial declines in reporting of suspected abuse and numbers of children served by child welfare agencies during the COVID-19 pandemic, suggesting underreporting due to pandemic mitigation efforts.

Further, Head Start Program Performance Standards (HSPPS) require that at least 10% of program enrollment be children eligible for services under IDEA (i.e., early intervention and preschool special education). For the 2020-2021 program year, the NWTEDC Head Start program had an enrollment rate of children with disabilities of 10.86%, while the rate in the Early Head Start program was 11.4%. Most recent data publicly reported from the Tennessee Early Intervention System show 370 infants and toddlers receiving early intervention services in the service area, over 35% of which reside in Madison County, followed by 22% in Gibson County. There are an estimated 802 children in the service area receiving preschool special education services. Combined, this is 1,172 children birth to age 5 with a diagnosed disability.

AGENCIES SERVING ELIGIBLE CHILDREN AND PREGNANT WOMEN

In the NWTEDC service area, there are 203 licensed child care centers, group child care homes and family child care homes, with the total capacity of 13,305. A vast majority of care is provided in center-based programs (over 97%). While 46% of child care centers in the service area are licensed to serve infants/toddlers, their licensure does not always indicate that these programs are serving this age group. Licensed capacity does not necessarily reflect the number of children that a program would typically have enrolled, as other factors, such as class size limits, may impact the number of children served at any given time. It is also important to note that total capacity includes school age care, and is available for families of all income levels, reducing the number of slots available for children birth to 5 from low-income families.

When comparing the number of children under five years old in the service area to total child care capacity, (which includes school age), the number of children under 5 years old (16,623 children) far exceeds total child care capacity (13,305 slots). This does not necessarily reflect unmet need, as children may be served in other settings, such as public pre-kindergarten, and not all families with young children will need or want care. Importantly, in Lake County, child care capacity is lower than the number of children under age 5 living in poverty. Across the service area, approximately 45.3% of child care programs are participating in the Tennessee's Star-Quality Child Care Program, the state's quality rating and improvement system (QRIS). A majority of participating programs are rated 3 Stars (highest level of quality). All of Northwest Tennessee

Head Start/Early Head Start centers are rated 3 Stars (highest quality), among the highest quality programs in the state. This distinction highlights the quality of the Head Start/Early Head Start program.

The Tennessee Department of Health provides funding to eighteen agencies, to implement evidence-based home visiting services in 95 counties across the state, in addition to Early Head Start home-based services implemented by NWTEDC Early Head Start. The entire service area has access through two agencies: the University of Tennessee, Martin implementing the Healthy Families program and the Jackson-Madison County General Hospital Healthy Start – Healthier Beginnings program.

Tennessee’s public pre-kindergarten program is voluntary and available to all four-year-old children. The program prioritizes at-risk children and high-priority communities. Tennessee ranks 29th among states for access to public school preschool for 4-year-olds and 32nd for 3-year-olds and meets 9 out of 10 quality benchmarks. Enrollment data from the Tennessee Department of Education show nearly 18,465 children served in pre-kindergarten in public school classrooms, in 2019-2020, of which 1,380 slots were available in the NWTEDC Head Start/Early Head Start program service area. Publicly funded preschool is also implemented in community-based sites, and is included in licensed child care capacity data. As a provider of both Head Start and publicly funded pre-kindergarten, NWTEDC is able to leverage multiple funding streams to maintain its enrollment across programs.

FAMILY, STAFF, AND COMMUNITY INSIGHT

In February 2022, NWTEDC conducted a Head Start/Early Head Start Family Survey, Head Start/Early Head Start Staff Survey, and Community Provider Survey to inform this Community Assessment.

Families. A total of 380 parents/caregivers responded to the Family Survey (49% response rate). Approximately 96.1% of families responding to the survey indicated that the program location meets their needs and 82.5% indicated the program schedule meets their needs. When asked how the program schedule could better meet their needs, later hours/after care (54.8%) was the top response, followed by a summer program (30.1%), transportation (24.0%), and earlier hours (22.6%). Families are largely satisfied with the Head Start/Early Head Start services provided by NWTEDC (91.3%). Nearly all of families agree the program gives their child a safe place to learn (96.8%), that staff greet them warmly (96.25), and that the program is helping their child get ready for school (93.6%).

Almost half of all family respondents report having access to all the services their family needs (44.3%). The services families most need or want that they cannot currently find or access include: affordable housing (14.6), child care (13.9%), housing/rental assistance (13.3%), dental care, and help with utilities (both 11.7%). One third of families report that having enough money to pay monthly bills and utilities is a problem on some level. Of these families, most (56) consider it a small problem, but the rest (48 families) describe paying monthly bills as a medium to very large problem.

About one in five families (23%) report that having enough money to buy food is a problem. Of these families, most (38 families) consider paying for food a small problem and the rest (33 families) describe it as a medium to very large problem. The biggest personal stressors for families are COVID-19 (19.4%), access to child care (15.5%), access to dental care (13.6%), and work/life balance (13.6%).

Staff. A total of 152 staff completed the Staff Survey (70% response rate). An overwhelming majority of staff agree (95.07%) that the location of the Head Start/Early Head Start centers is convenient for them.

Further, about three-quarters of staff members commute less than 30 minutes to work (77.46%). Staff indicated their biggest personal stressors include work/life balance and COVID-19/Coronavirus, followed by finances. Other stressors include their mental health, Internet/Wi-Fi access, and access to child care and housing.

A majority of staff members (80.14%) believe the program schedules meet families' needs; most staff (81.56%) also believe the location of Head Start/Early Head Start centers meet families' needs. More than half of staff think that transportation (54.55%) would help better meet family schedule needs followed by later hours (38.18%), a summer program (36.36%), and earlier hours (30.91%). When asked about families' biggest stressors, staff indicated many areas. The top responses were financial, their child's behavior, transportation, COVID-19/Coronavirus, and employment.

The services that staff indicated they believe families most need or want are child care, job search or training, parenting support, affordable housing, housing/rental assistance, and transportation. About a third of staff also noted that families are in need of food assistance, quality education, substance/drug treatment, and mental health services.

Community Providers. A total of 36 respondents from across the service area representing the public, private, and nonprofit sectors responded to the Community Provider Survey. A majority of respondents reported observing increases in job availability, the number of low-income families contacting their agency, drug abuse in the community, and transportation needs.

When asked about the most common barriers to low-income families accessing resources, the top responses included limited knowledge of what resources are available, access to internet/Wi-Fi, availability of needed services, and affordability of needed services. Notably, few service providers (5-15%) see lack of bilingual staff at point of services, language, or citizenship as barriers to accessing resources.

REFLECTIONS

As described throughout the Community Assessment report, there is a diversity of needs throughout the NWTEDC service area. By targeting services to areas with high rates of child poverty, NWTEDC is providing services to the children and families with the greatest need in the service area.

Drawing from the data and findings of NWTEDC's 2022 Community Assessment and observations from leadership team members, the following reflections capture key takeaways.

Reflection 1: Program Design. NWTEDC's Head Start/Early Head Start program regularly engages in the best practice of reviewing slot allocations in the context of community-wide trends (e.g., availability of publicly funded pre-kindergarten, demand for infant/toddler care, and wait list data) to explore strategies that support full enrollment across the program. NWTEDC will continue this practice in order to respond to changes in community needs when they arise and to explore updates to program schedules to ensure the needs of working families are met.

Reflection 2: Staff Professional Development, Training, and Retention. Continue to communicate with staff regarding their professional development and training needs to help them meet their professional goals. Review staff's interest in management/leadership training more closely and leverage this interest to support staff members' professional growth within the agency. Review staff workloads and schedules to identify more flexible staffing patterns (while maintaining adult-child ratios) to support the work/life balance of staff. This may include rotating schedules, job shares, and/or longer days with shorter weeks.

Reflection 3: Parent Training and Employment. Continue to leverage community partnerships with Adult Education partners and formalize access to internal resources related to employment skill building and job search. Explore new strategies, including partnerships, to provide educational counseling, job training, and resources to families. Collaborate with community partners and local employers to address specific barriers to obtaining and maintaining employment (e.g., child care, transportation, work history, issues with a background check etc.).

Reflection 4: Bilingual Supports and Cultural Alignment. Continue to assess the language needs of enrolled families and provide bilingual services as needed. Focus efforts on recruiting bilingual staff, formalize a process for providing interpretation supports to families, and identify additional bilingual service providers to meet enrolled children's needs. Seek to help expand families' access to bilingual, culturally sensitive resource providers in the community. Collaborate with community agencies to address language barriers families may face when accessing resources and support.

Reflection 5: Affordable Housing and Homelessness. Continue to advocate for, and provide support to, families experiencing homelessness and those on the brink of homelessness. Ensure that families are aware of and understand the McKinney-Vento definition of homelessness and how it impacts eligibility for and services available from the Head Start/Early Head start program. Continue to explore and address housing needs and homelessness in partnership with community partners. Utilize community assessment data and updated data sources to understand the locations with high rates of homelessness in the service area.

Reflection 6: Preventive and Primary Care. Continue to strengthen collaborations with local health services providers, including dental and mental health providers. Promote the importance of preventative and primary care; address barriers to maintaining an on-time health schedule, particularly during and following the COVID-19 pandemic. Establish more robust and intentional mental health supports for children, families, and staff. Integrate national, regional, and statewide resources to enhance social and emotional supports in each center-based setting.

Reflection 7: Social Services. Continue NWTEDC staff participation on key local community Councils and Boards to build internal and external awareness of resources and services that serve the population of the service area. Continue to strengthen community partnerships to increase access to resources and comprehensive services at NWTEDC sites. Seek to alleviate transportation issues by bringing in any additional supports (health, mental health, and social services) into locations where children and families regularly gather.

Reflection 8: Promote Head Start as a Kindergarten Readiness Program. Raise awareness of the benefits of the Head Start and Early Head Start programs and the comprehensive services they provide. Integrate the message that "Head Start is a Kindergarten Readiness program" into public outreach. Focus on how Head

Start programs prepare enrolled children for future success in school, as well as provide transition supports for children entering kindergarten.

Reflection 9: Monitor Impact of COVID-19. The COVID-19 pandemic has had an extended impact on communities in the NWTEDC Head Start/Early Head Start service area. Review community data on unemployment, child welfare, food insecurity, substance abuse, mental health, and homelessness to understand the impact of COVID-19 on families. Continue to leverage partnerships and community resources to support vulnerable families, including single parents, grandparents and other relatives raising young children, families who may need job search or employment support, and those on the verge of homelessness.

Reflection 10: Providing Community Information, Resources and Referrals. Explore best practices to ensure families are aware of and connected to community resources, including other NWTEDC programs outside of Head Start/Early Head Start, such as emergency assistance, home energy assistance, etc. Explore positive relationship building techniques, in light of restrictions to face-to-face communications during the pandemic, so that Family Advocates may better support families and ensure access to resources in a timely manner. Include bilingual supports where appropriate.

Reflection 11: Transportation. Within the constraints of a national bus driver shortage that has impacted the NWTEDC service area, identify alternative strategies to provide transportation to enrolled families. This may include hiring incentives for qualified drivers, utilizing higher capacity vehicles that do not require CDL licenses, and identifying strategies implemented by other local agencies.

Reflection 12: Building Partnerships. Ensure NWTEDC representatives continue to participate on local task forces with community partners to address identified challenges and develop strategic plans for partnerships. The focus of such committees may include housing, job training/availability, child welfare/foster care, mental health, and substance misuse. As appropriate, identify potential advocacy action steps partners can take. Coordinate communication and strategic planning efforts of NWTEDC task force members to ensure community-wide efforts impact program families and activities.

Reflection 13: Policies and Procedures. Continue to develop and communicate clear policies and procedures to staff, families, and partners regarding program operations. In light of updated organizational structure and updated job descriptions, revisit policies and procedures across content areas to ensure consistent understanding and implementation.

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INTRODUCTION

Agency Overview



The Northwest Tennessee Economic Development Council (NWTEDC) is a private, non-profit community action agency serving children and families in eight counties in Tennessee (Benton, Carroll, Gibson, Henry, Lake, Madison, Obion, and Weakley County). The agency was founded in 1965 for the purpose of lessening the effects of poverty across the state of Tennessee. The network shares a commitment to helping each client achieve self-sufficiency, but each organization has tailored its programs and priorities to address those needs that are greatest in the local area.

Head Start and Early Head Start is central to NWTEDC achieving its mission. The program is an essential resource to communities in Northwest Tennessee. In its almost 60 years of existence, the Head Start and Early Head Start programs have grown to serve a funded enrollment of 871 pregnant women, infants, toddlers, and preschool age children in eight counties with 18 center-based HS/EHS sites.

Northwest Tennessee Economic Development Council's vision is "hand in hand, working together we are dedicated to helping people help themselves and each other to make a difference in our communities."

Mission: Helping People, Changing Lives in our community through education, partnerships, and delivery of quality services in Northwest Tennessee.

Head Start/Early Head Start Service Area

NWTEDC's service area includes Benton, Carroll, Gibson, Henry, Lake, Madison, Obion, and Weakley Counties in northwest Tennessee. The combined land mass of the eight counties is 4,006.22 square miles (ranging from 165.78 in Lake County to 602.74 square miles in Gibson County). This is approximately 9.7% of the total land area in the state of Tennessee.ⁱⁱ The service area is designated as rural; in seven of eight counties, the population per square mile ranges from 41.8 in Benton County (smallest density) to 82.4 in Gibson County (greatest density). In Madison County, the population per square mile is 176.4, which is more consistent with the statewide population of 153.9 people per square mile.ⁱⁱⁱ

Head Start/Early Head Start Program Summary

NWTEDC is funded to serve 871 children in its Head Start/Early Head Start program. All Head Start slots are center-based. NWTEDC also has Head Start partnerships, currently providing PreK at eight center-based sites. Early Head Start includes center-based program options, with home-based services also available to pregnant women.

A summary of NWTEDC's Head Start, Early Head Start, and Head Start Partnership funded slots by program type and location is shown in Table 1.

Table 1. NWTEDC Head Start and Early Head Start Slots by Program Type^{iv}

Geographic Area	Early Head Start	Head Start (Direct Operate)	Head Start (Partnership)	Total Slots Per County
Benton County	20	51	0	71
Carroll County	24	51	60	135
Gibson County	0	85	60	145
Henry County	0	0	80	80
Lake County	8	17	0	25
Madison County	56	159	40	255
Obion County	24	68	0	92
Weakley County	0	68	0	68
Total per program	132	499	240	871
Total slots	871			

Community Assessment

Northwest Tennessee Economic Development Council completed its last community assessment in 2019, with an additional enhancement report in 2020.

NWTEDC Head Start/Early Head Start Community Assessment, 2019, identified needs of children and families in the service area – such as employment, health, and economic support – and highlighted the important role of NWTEDC and community resource providers in helping to meet families’ needs. The 2020 enhancement report synthesized essential information from the 2019 Community Assessment report and provided new and updated data to ensure Northwest Tennessee Economic Development Council had the most current, accurate, and comprehensive information for program planning. The enhancement report also offered NWTEDC the opportunity to reflect on the potential impacts of the emerging COVID-19 pandemic on families, communities, and the child care industry.



The primary purpose of this community assessment is to provide data and information to support Head Start/Early Head Start program planning. It is an opportunity for the agency to explore the needs of children birth to age 5 within the service area, and to look closely at the availability of resources and early learning services for young children and their families.

Growing and Changing Community Need Due to COVID-19

In December 2019, COVID-19 emerged as a new infectious disease in Wuhan, China. COVID-19 quickly spread throughout the world, and on March 11, 2020, the World Health Organization (WHO) declared COVID-19 a pandemic.^v Across the service area and across the U.S., COVID-19 is impacting the health and wellbeing of communities. As of late January, 2022, there were more than 1.65 million confirmed cases of COVID-19 in the State of Tennessee, with 4.3% of cases in the state located in the NWTEDC service area. Additionally, over 22,800 deaths were reported statewide from the disease.^{vi}

Short-term impacts of COVID-19 are described throughout this report, including reflections from NWTEDC leadership team members who describe deep and lasting health and economic impacts on families and staff. Long-term impacts of COVID-19 are developing, and it will continue to be a factor in the overall health of communities and will influence the needs of children and families in the service area.

METHODOLOGY

Head Start Program Performance Standards

Community assessment is a central aspect of any Head Start or Early Head Start program, serving as a tool for program planning and implementation. The recently revised Head Start Program Performance Standards (HSPPS), Section 1302.11, *Determining community strengths, needs, and resources*, requires that programs complete a community assessment once during each five-year grant period and must review and update the community assessment annually.^{vii} This 2022 Northwest Tennessee Economic Development Council Head Start/Early Head Start Community Assessment provides data and information to describe the strengths, needs, and resources of its Head Start/Early Head Start program and service area. Data from the community assessment will be used by the agency, in collaboration with the Governing Board and Policy Council, to determine immediate and longer-term goals and objectives for the program.

Per the HSPPS, Section 1302.11^{viii}, required data presented in the 2022 Community Assessment includes:

- 1) The number of eligible infants, toddlers, preschool age children, and expectant mothers, including their geographic location, race, ethnicity, and languages they speak, including:
 - a) Children experiencing homelessness in collaboration with, to the extent possible, McKinney-Vento Local Education Agency Liaisons (42 U.S.C. 11432 (6)(A));
 - b) Children in foster care;
 - c) Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies;
- 2) The education, health, nutrition and social service needs of eligible children and their families, including prevalent social or economic factors that impact their well-being;
- 3) Typical work, school, and training schedules of parents with eligible children;
- 4) Other child-development, child-care centers, and family child care programs that serve eligible children, including home visiting, publicly funded state and local preschools, and the approximate number of eligible children served;
- 5) Resources available in the community to address the needs of eligible children and their families; and
- 6) Strengths of the community.

Process and Data Collection Methods

NWTEDC's 2022 Community Assessment was conducted in Winter 2022. Under the leadership of Rakaya Humphreys, HS/EHS Program Director and members of NWTEDC leadership, NWTEDC contracted with Foundations for Families, a consulting, training, and technical assistance company, to conduct the community assessment with input and guidance from NWTEDC's leadership team members.

Data collection methods included:

- Review of program operations, challenges and observed trends with agency staff;
- Program-level data from the Head Start/Early Head Start program;
- Needs assessments and reports gathered from county departments and community agencies;
- Information gathered from publicly available data sources (e.g., U.S. Census, state departments, federal agencies, state and national organizations); and
- Data from surveys of Head Start/Early Head Start families, staff, and community providers.

Data Analysis: An Equity Perspective



When conducting NWTEDC's 2022 Community Assessment, data were analyzed from an equity perspective to determine if there are certain types of families that are accessing or could benefit from Head Start/Early Head Start more than other families. In doing so, Foundations for Families explored layers of data to uncover disparities among subgroups within the service area and among children and families served. By taking the additional step to identify disparities, NWTEDC will be able to target its strategies to

address the most pressing service area needs through its Head Start/Early Head Start program. This is a method to continuously improve program implementation while monitoring specific data for trends indicating whether outcomes are improving for the children and families most in need.

Limitations of 2022 Community Assessment

Due to the nature of NWTEDC's geographic service area, a substantial amount of data at the county level was used to inform the agency's community assessment. State level data are provided for comparison to service area counties when county data are not available, or to set the context for Tennessee's communities within the national landscape. School district, municipal, and census tract-level information are provided for key data points and to illustrate unique and specific needs in local communities. The margins of errors for data on communities with small populations may be greater than communities with large populations.

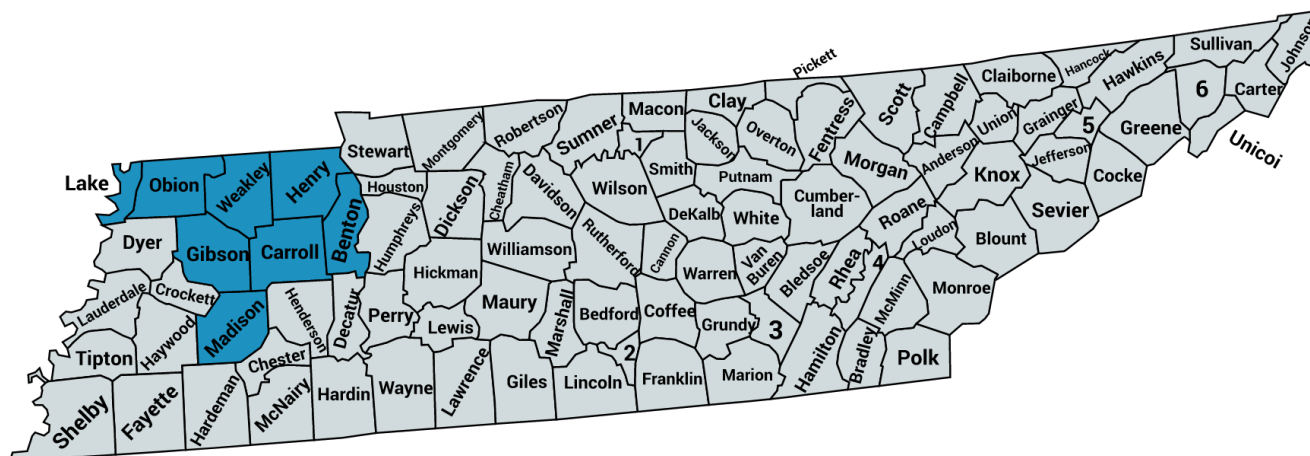
Throughout the report, when relevant or required data points could not be obtained to inform the community assessment, this is indicated in the text. Anecdotal information is provided, where possible, to balance statewide, county, and local data with observations and reflections about the experiences of children and families in NWTEDC's service area.

OVERVIEW OF SERVICE AREA

Geographic Boundaries

NWTEDC serves children and families in eight counties: Benton, Carroll, Gibson, Henry, Lake, Madison, Obion, and Weakley. The communities in the service area are located in the northwestern part of the state and border eleven Tennessee counties (Figure 1).

Figure 1. NWTEDC's Head Start/Early Head Start Service Area^{ix}



County and Local Government and Economics

There are 95 counties in the state of Tennessee. Counties oversee and implement services such as tax collection, courts, public health, parks, roadways, and other programs to support the welfare of community members. The entire area of the state is encompassed by county government except for the Metropolitan Government of Nashville and Davidson County, the Metropolitan Government of Lynchburg and Moore County, and the Hartsville-Trousdale County Government. There are 347 municipal governments that operate at the local level in Tennessee; they usually operate under special charter.^x

As reflected in Table 2, NWTEDC's service area includes fifteen federally designated Opportunity Zones (designed to increase economic development by providing investors with tax benefits).^{xi}

Table 2. Opportunity Zone Census Tracts by County^{xii}

Geographic Area	Opportunity Zones
Benton County	- Tract 47005963200
Carroll County	- Tract 47017962100
Gibson County	- Tract 47053966900 - Tract 47053967000
Henry County	- Tract 47079969000
Lake County	- Tract 47095960100

Geographic Area	Opportunity Zones
Madison County	- Tract 47113000200 - Tract 47113000500 - Tract 47113000600 - Tract 47113000700 - Tract 47113000800 - Tract 47113000900
Obion County	- Tract 47131965400 - Tract 47131965500
Weakley County	- Tract 47183968101

Service Area Demographics

Population

Population in NWTEDC's service area is 294,439. Over the past three years, the population in Tennessee has been increasing, while the population in the overall service area has been decreasing (Table 3).

Table 3. Population by Geographic Area and Year (2017-2019)^{xiii}

Geographic Area	2017	2018	2019	Three-Year Trend
Benton County	16,154	16,112	16,140	Fluctuating
Carroll County	28,137	28,018	27,886	Decreasing
Gibson County	49,222	49,175	49,228	Fluctuating
Henry County	32,263	32,279	32,284	Increasing
Lake County	7,588	7,526	7,401	Decreasing
Madison County	97,887	97,682	97,625	Decreasing
Obion County	30,659	30,520	30,365	Decreasing
Weakley County	33,776	33,626	33,510	Decreasing
Total Service Area	295,686	294,938	294,439	Decreasing
Tennessee	6,597,381	6,651,089	6,709,356	Increasing

While birth rates have been decreasing statewide, in the NWTEDC service area, they have only decreased in Carroll County (Table 4).

Table 4. Number of Live Births and Birth Rate by Year by Geographic Area^{xiv 1}

Geographic Area	2017	2018	2019	Three-Year Trend
Benton County	166 (10.4)	164 (10.1)	180 (11.1)	Increasing
Carroll County	315 (11.3)	275 (9.8)	336 (12.1)	Increasing
Gibson County	601 (12.2)	574 (11.7)	571 (11.6)	Decreasing
Henry County	322 (9.9)	304 (9.4)	324 (10.0)	Increasing
Lake County	58 (7.8)	63 (8.5)	71 (10.1)	Increasing
Madison County	1,231 (12.6)	1,196 (12.3)	1,251 (12.8)	Steady
Obion County	327 (10.8)	345 (11.4)	354 (11.8)	Increasing
Weakley County	314 (9.4)	315 (9.4)	329 (9.9)	Increasing
Tennessee	81,024 (12.1)	5,014 (11.9)	80,431 (11.8)	Decreasing

The median age in six of the eight counties in the service area is greater than the statewide rate. With the exception of Lake County, the percent of the population over age 65 is greater than the state rate. The percent of the population under age 5 is less than the statewide rate in all but two counties, Gibson and Madison (Table 5).

¹ Rates greater than the statewide rate are highlighted.

Table 5. Median Age by Geographic Area (2019)^{xv, 2}

Geographic Area	Median Age	Percent of Population Under Age 5 ³	Percent of Population Over Age 65 ⁴
Benton County	47.9	4.6%	23.8%
Carroll County	42.5	5.7%	19.9%
Gibson County	39.9	6.3%	17.7%
Henry County	45.8	5.3%	22.8%
Lake County	41.5	4.3%	15.5%
Madison County	38.7	6.2%	16.4%
Obion County	42.6	5.7%	19.8%
Weakley County	38.6	5.1%	18.0%
Tennessee	38.7	6.1%	16.0%

Tables 6 and 7 describe the race and ethnicity of the service area population by county. Six counties (Benton, Carroll, Gibson, Henry, Obion and Weakley) in the service area are less diverse than Tennessee, as a whole, while Lake and Madison Counties have greater diversity.

Ethnic diversity is below the statewide rate in all counties in the service area, and is greatest in Obion County, where 4.4% of the population is Hispanic or Latino, followed by Madison County, where 3.9% of the population is Hispanic or Latino.

Table 6. Population (and Percentage of Population) by Race and Geographic Area (2019)^{xvi, 5}

Geographic Area	White	Black or African American	American Indian and Alaskan Native	Asian	Native Hawaiian & Other Pacific Islander	Some other race	Two or more races
Benton County	15,319 (94.9%)	487 (3.0%)	65 (0.4%)	28 (0.2%)	0 (0.0%)	0 (0.0%)	241 (1.5%)
Carroll County	24,211 (86.8%)	2,867 (10.3%)	68 (0.2%)	113 (0.4%)	36 (0.1%)	30 (0.1%)	561 (2.0%)
Gibson County	38,519 (78.2%)	8,423 (17.1%)	221 (0.4%)	156 (0.3%)	40 (0.1%)	251 (0.5%)	1,618 (3.3%)
Henry County	28,754 (89.1%)	2,643 (8.2%)	84 (0.3%)	127 (0.4%)	0 (0.0%)	165 (0.5%)	511 (1.6%)
Lake County	4,997 (67.5%)	2,110 (28.5%)	10 (0.1%)	18 (0.2%)	0 (0.0%)	112 (1.5%)	154 (2.1%)
Madison County	56,534 (57.9%)	36,352 (37.2%)	112 (0.1%)	1,054 (1.1%)	0 (0.0%)	1,586 (1.6%)	1,987 (2.0%)
Obion County	25,859 (85.2%)	3,126 (10.3%)	76 (0.3%)	116 (0.4%)	7 (0.0%)	551 (1.8%)	630 (2.1%)
Weakley County	29,651 (88.5%)	2,831 (8.4%)	148 (0.4%)	84 (0.3%)	21 (0.1%)	291 (0.9%)	484 (1.4%)
Tennessee	5,205,132 (77.6%)	1,124,473 (16.8%)	18,189 (0.3%)	117,600 (1.8%)	3,771 (0.1%)	92,655 (1.4%)	147,536 (2.2%)

² Rates greater than the statewide rate are highlighted.

³ Rates greater than the statewide rate are highlighted.

⁴ Rates greater than the statewide rate are highlighted.

⁵ Rates greater than the statewide rate are highlighted.

Table 7. Ethnicity as a Percentage of the Population by Geographic Area (2019)^{xvii.6}

Geographic Area	Hispanic or Latino Origin (of any race)	Hispanic or Latino Origin: Mexican	Hispanic or Latino Origin: Puerto Rican	Hispanic or Latino Origin: Cuban	Hispanic or Latino Origin: Other
Benton County	2.4%	0.6%	0.0%	0.1%	1.7%
Carroll County	2.7%	2.1%	0.3%	0.0%	0.2%
Gibson County	2.7%	1.5%	0.2%	0.0%	1.1%
Henry County	2.6%	2.2%	0.1%	0.0%	0.3%
Lake County	2.3%	1.6%	0.4%	0.0%	0.3%
Madison County	3.9%	2.6%	0.1%	0.2%	1.0%
Obion County	4.4%	3.3%	0.1%	0.0%	1.0%
Weakley County	2.6%	1.7%	0.4%	0.1%	0.4%
Tennessee	5.4%	3.3%	0.5%	0.2%	1.5%

Poverty

The poverty rate in the NWTEDC service area, compared to the state of Tennessee, is provided in Table 8. Poverty rates across the service area are consistently greater than the statewide rate; in recent years, they have been decreasing or fluctuating in seven counties, with the exception of Henry County, where poverty rates are increasing.

Table 8. Poverty Rate by Geographic Area and Year^{xviii.7}

Geographic Area	2017	2018	2019	Three-Year Trend
Benton County	22.3	21.4	19.5	Decreasing
Carroll County	19.8	19.8	18.6	Decreasing
Gibson County	17.1	17.1	15.8	Decreasing
Henry County	19.7	19.8	20.1	Increasing
Lake County	29.9	26.9	28.6	Fluctuating
Madison County	20.3	19.4	18.5	Decreasing
Obion County	23	22.7	21.1	Decreasing
Weakley County	20.5	20.2	20.3	Fluctuating
Tennessee	16.7	16.1	15.2	Decreasing

Across the service area, there is disparity with regard to poverty by race. As highlighted in Table 9, there are many instances where counties have rates of poverty by race that are above the statewide rate. It is important to view the percentages of poverty by race within the context of the population, as some counties have a very small number of individuals of a particular race (e.g., 100% of Native Hawaiian or Other Pacific Islander individuals are below the poverty line in Weakley County, but this represents seven people).

In six counties (Carroll, Gibson, Lake, Madison, Obion, and Weakley County), the poverty rate among individuals of Hispanic or Latino origin is greater than that of individuals who are Non-Hispanic or Latino Origin, White alone; the rate is higher for Non-Hispanic or Latino Origin, White alone in Benton and Henry County. (Table 10).

⁶ Rates greater than the statewide rate are highlighted.

⁷ Rates greater than the statewide rate are highlighted.

Table 9. Number (and Percent) of Individuals Below Poverty Level by Race and Geographic Area (2019)^{xix, 8}

County	White	Black or African American	American Indian and Alaskan Native	Asian	Native Hawaiian & Other Pacific Islander	Some other race	Two or more races
Benton County	2,912 (19.2%)	190 (39.6%)	15 (23.1%)	5 (17.9%)	n/a	n/a	0 (0.0%)
Carroll County	3,962 (16.9%)	684 (25.5%)	5 (7.4%)	36 (33.6%)	36 (100.0%)	17 (77.3%)	269 (48.0%)
Gibson County	4,324 (11.5%)	2,654 (32.8%)	19 (8.6%)	16 (10.6%)	3 (7.5%)	24 (9.8%)	560 (34.6%)
Henry County	5,262 (18.6%)	830 (32.3%)	23 (27.4%)	3 (2.4%)	n/a	64 (44.4%)	200 (40.0%)
Lake County	845 (23.9%)	387 (43.8%)	0 (0.0%)	0 (0.0%)	n/a	26 (100.0%)	57 (43.5%)
Madison County	6,661 (12.2%)	9,566 (27.4%)	0 (0.0%)	102 (9.9%)	n/a	785 (50.7%)	298 (15.7%)
Obion County	4,555 (17.9%)	1,175 (39.2%)	57 (75.0%)	26 (23.6%)	3 (42.9%)	157 (28.5%)	294 (46.7%)
Weakley County	5,280 (19.1%)	646 (28.6%)	35 (28.2%)	16 (20.0%)	7 (100.0%)	144 (53.1%)	136 (28.4%)
Range Across Service Area Counties	11.5% - 23.9%	25.5% - 43.8%	0% - 75%	0% - 33.6%	7.5% - 100%	9.8% - 100%	0% - 48%
Tennessee	654,501 (12.9%)	266,778 (24.7%)	3,660 (20.8%)	11,788 (10.3%)	980 (27.6%)	26,441 (29.1%)	32,782 (22.9%)

Table 10. Number (and Percent) of Individuals Below Poverty Level by Ethnicity and Geographic Area (2019)^{xx, 9}

Geographic Area	Hispanic or Latino Origin	Non-Hispanic or Latino Origin, White Alone
Benton County	23 (5.9%)	2,889 (19.5%)
Carroll County	225 (31.3%)	3,796 (16.6%)
Gibson County	314 (24.0%)	4,132 (11.2%)
Henry County	107 (14.7%)	5,219 (18.8%)
Lake County	44 (45.4%)	829 (23.8%)
Madison County	1,386 (38.3%)	5,867 (11.2%)
Obion County	345 (26.5%)	4,422 (17.9%)
Weakley County	315 (39.3%)	5,107 (18.8%)
Tennessee	93,353 (26.2%)	592,539 (12.2%)

In the service area, there are consistent disparities with regard to single-parent and two-parent families with young children. In families with a female head of household (no husband present), the poverty rate is substantially greater than married-couple families (Table 11).^{xxi}

⁸ Rates greater than the statewide rate are highlighted.

⁹ Rates greater than the statewide rate are highlighted.

Table 11. Poverty Status of Families in the Past 12 Months by Geographic Area (2019)^{xxii 10}

Geographic Area	All Families with Related Children Under Age 5	Married-couple Families with Related Children Under Age 5	Families with Female Householder, No Spouse Present, with Related Children Under Age 5
Benton County	17.9%	15.1%	38.7%
Carroll County	11.4%	6.6%	37.9%
Gibson County	37.4%	1.7%	81.7%
Henry County	28.4%	18.1%	61.1%
Lake County	58.3%	0.0%	76.8%
Madison County	27.3%	2.2%	70.5%
Obion County	34.4%	9.8%	54.2%
Weakley County	27.0%	5.6%	66.7%
Tennessee	19.6%	6.2%	51.8%

It is relevant to note that young women/mothers disproportionately left the workforce during the start of the pandemic. This may be due to the increase in childcare responsibilities resulting from school closures and an online instruction, which offered female householders with no husband present fewer options to remain employed.^{xxiii}

Across the service area, in addition to individuals living below the poverty level, there are a growing number of households that are employed and only slightly above the poverty level, who struggle to afford basic necessities. These families are referred to as ALICE families (Asset Limited, Income Constrained, Employed). The average ALICE Household Survival Budget in Tennessee in 2018 was \$23,064 for a single adult, \$25,716 for a single senior, and \$65,040 for a family of four—significantly more than the Federal Poverty Level of \$12,140 for a single adult and \$25,100 for a family of four.^{xxiv}

While 39% of all Tennessee households are below the combined poverty level and ALICE threshold, there is also disparity by household type: 83% are headed by a single female with children, 75% are under 25 years old, 64% are Black or African American, and 62% are Hispanic. All counties in the NWTEDC service area have a greater percentage of individuals below the combined poverty level and of ALICE households than the state rate (Table 12).

NWTEDC leadership report that the majority of families over the income threshold for the Head Start/Early Head Start program are from Carroll County; in these situations, NWTEDC partners with the school district to enroll children.

Table 12. Asset Limited, Income Constrained, Employed (ALICE) Households by Geographic Area (2018)^{xxv 11}

Geographic Area	ALICE Households and Households Living Under 100% FPL (Poverty)
Benton County	58%
Carroll County	52%
Gibson County	50%
Henry County	52%
Lake County	52%
Madison County	49%
Obion County	48%
Weakley County	49%
Tennessee	39%

¹⁰ Rates greater than the statewide rate are highlighted.

¹¹ Rates greater than the statewide rate are highlighted.

In September 2021, 42 percent of Tennessee households with children had difficulty paying for usual household expenses; this represents a 12 percent increase from September 2020. Household expenses include but are not limited to food, rent or mortgage, car payments, medical expenses, and student loans. This increase is likely due to the extended effects of the pandemic. ^{xxvi}

In October 2021, the Child Tax Credit helped financially support more than 700,000 Tennessee families and make sure that more than 1 million children in Tennessee had their basic needs met. Without extension of the expanded Child Tax Credit, one in six of those children are at risk of falling back or falling deeper into poverty. ^{xxvii}

Household Composition and Family Characteristics

In the NWTEDC service area, most children live with their biological, step, or adopted parents. However, in Lake, Benton, and Weakley Counties, high percentages of children live with a grandparent. Table 13 describes the percentage of children by relationship to householder for each county in the service area.

Table 13. Percent of Children (ages 0 to 18-years-old) by Relationship to Householder and Geographic Area (2019) ^{xxviii,12}

Geographic Area	Own child (biological, step, or adopted)	Grandchild	Other relatives	Foster child or other unrelated child
Benton County	87.6%	11.9%	0.5%	0.0%
Carroll County	91.2%	6.9%	1.1%	0.8%
Gibson County	87.2%	8.7%	1.6%	2.5%
Henry County	88.7%	7.5%	1.8%	2.0%
Lake County	81.7%	15.7%	2.3%	0.3%
Madison County	88.2%	8.8%	2.1%	0.9%
Obion County	89.1%	7.2%	0.7%	3.0%
Weakley County	86.1%	10.4%	1.0%	2.4%
Tennessee	86.2%	9.7%	2.3%	1.9%

In the NWTEDC Head Start/Early Head Start program, 39 children enrolled in the 2020-2021 program year were in the care of grandparents, and eight children were in the care of other relatives. ^{xxix} This may be due, in part, to an increase in multigenerational families during the pandemic, and factors such as parental work status, or substance abuse challenges (discussed in the sections that follow). There are also many single-parent households in the service area. The NWTEDC Head Start/Early Head Start program serves a large number of single-parent families, at an overall rate of 76% (86.6% in Early Head Start and 71.3% in Head Start). This is substantially greater than the rate of single-parent families (among children birth to age 18) in the service area, which ranges from 31.31% in Carroll County to 52.91% in Lake County (Table 14). ^{xxx}

As described above, the poverty rate among single-parent families is very high in the service area. NWTEDC is providing critical, comprehensive services to single-parent families.

¹² Rates greater than the statewide rate are highlighted.

Table 14. Percent of Children Living in Single-Parent Families by Geographic Area and Year^{xxxi 13}

Geographic Area	2017	2018	2019	Three-Year Trend
Benton County	37.78	37.37	34.32	Decreasing
Carroll County	29.15	32.09	31.31	Fluctuating
Gibson County	40.47	37.27	37.14	Decreasing
Henry County	34.48	36.71	37.88	Increasing
Lake County	53.29	53.27	52.91	Decreasing
Madison County	42.13	42.84	43.44	Increasing
Obion County	38.63	34.61	36.52	Fluctuating
Weakley County	34.26	31.29	34.38	Fluctuating
Tennessee	37%	39%	37%	Fluctuating / Steady

NEEDS OF ELIGIBLE CHILDREN AND FAMILIES

The needs of children and families in the NWTEDC Head Start/Early Head service area are multi-faceted and interconnected. In an area where there is great diversity of need, some families experience many of the factors that contribute to the cycle of poverty within their communities. Together with other agencies, NWTEDC strives to meet the needs of the area's most vulnerable families.



Education

In the school districts in the NWTEDC service area, the high school graduation rate ranges from 84.9% in Humboldt City Schools (Gibson County) to 99+% in multiple districts. High school graduation rates are above the statewide rate in a majority of the service area, though disparities exist when looking at subgroups of the student population. As evident in Table 15, graduation rates in many school districts, and across the state, are generally lower among economically disadvantaged students, English learners, and students with disabilities. There are some particularly low rates for students with disabilities in Humboldt City Schools (Gibson County) and Union City Schools (Obion County).

Table 15. Four-Year Graduation Rate by School District and Student Group (2020) ^{xxxii, 14}

School District	All Students	Economically Disadvantaged	Students with Disabilities	Limited English Proficient	Homeless
Benton County					
Benton School System	96.9%	95.8%	88.9%	*	*
Carroll County					
Hollow Rock-Bruceton Special School District	95.1%	92.3%	*	*	*
Huntingdon Special School District	99%+	99%+	99%+	99%+	*
McKenzie Special School District	98.9%	97.7%	99%+	*	*
South Carroll County Special School District	99%+	99%+	*	n/a	*
West Carroll County Special School District	99%+	99%+	99%+	n/a	*

¹³ Rates greater than the statewide rate are highlighted.

¹⁴ Rates less than the statewide rate are highlighted.

School District	All Students	Economically Disadvantaged	Students with Disabilities	Limited English Proficient	Homeless
Gibson County					
Humboldt City Schools	82.7%	83.7%	46.2%	*	*
Milan Special School District	97.1%	95.5%	87%	*	*
Trenton Special School District	97.9%	96.1%	*	*	*
Bradford Special School District	93.8%	*	*	N/A	*
Gibson County Special School District	95.3%	87%	79.5%	*	*
Henry County					
Henry County Schools	97.9%	96.6%	91.7%	*	99%+
Paris Special School District, K-8	**				
Lake County					
Lake County School System	86%	86.8%	71.4%	N/A	N/A
Madison County					
Madison County Jackson	88.1%	83.6%	63.6%	78.3%	73.7%
West Tennessee School for the Deaf	*				
Obion County					
Obion County Schools	92.1%	88.1%	79.2%	*	*
Union City Schools	92.3%	89.2%	50%	*	*
Weakley County					
Weakley County Schools	93.5%	92.6%	76.7%	*	*
Tennessee	89.6%	82.7%	73.1%	68.6%	76.6%

* Data suppressed to protect student privacy.

** No data provided.

In Tennessee, there is disparity by race and ethnicity with regard to the percent of high school students graduating on time (within four years). The graduation rate for 2020 was 82.4% among Hispanic students, 83% among Black or African American students, 89.9% among American Indian or Alaska Native students, 91.4% among Native Hawaiian, or Pacific Islander students, 93.2% among White students, and 94.7% among Asian students.^{xxxiii}

Further, high school dropout rates are generally low in school districts in the service area. There are only two school districts in which the high school dropout rate is greater than the statewide rate of 6.7%: Lake County School System (Lake County) and Madison County Schools (Madison County), where the rates are 10% and 7.1% respectively (Table 16).

Table 16. Drop Out Rate by School District (2020)^{xxxiv, 15}

County	School District	Drop Out Rate (2020)
Benton County	Benton School System	Below 1%
Carroll County	Hollow Rock-Bruceton Special School District	4.9%
	Huntingdon Special School District	Below 1%
	McKenzie Special School District	1.1%
	South Carroll County Special School District	Below 1%
	West Carroll County Special School District	Below 1%
Gibson County	Humboldt City Schools	3.7%
	Milan Special School District	1.4%
	Trenton Special School District	2.1%
	Bradford Special School District	6.2%
	Gibson County Special School District	2.2%

¹⁵ Rates greater than the statewide rate are highlighted.

County	School District	Drop Out Rate (2020)
Henry County	Henry County Schools	Below 1%
	Paris Special School District, K-8	**
Lake County	Lake County School System	10%
Madison County	Madison County Schools	7.1%
	West Tennessee School for the Deaf	*
Obion County	Obion County Schools	5.8%
	Union City Schools	3.3%
Weakly County	Weakley County Schools	3.3%
Tennessee		6.7%

* Data suppressed to protect student privacy.

** No data provided.

All school districts in the service area have lower rates of enrollment of English Language Learners than the statewide rate (Table 17). The highest rates are found in Madison and Obion County, aligning with demographic data that show highest percentages of the population in these areas, whose speak Spanish at home (Table 72).

Table 17. Percent English Language Learners (Out of Total Enrollment) by School District (2020-2021) xxxv

	School District	% English Learners
Benton County	Benton School System	Less than 1%
Carroll County	Hollow Rock-Bruceton Special School District	*
	Huntingdon Special School District	*
	McKenzie Special School District	1.9%
	South Carroll County Special School District	*
	West Carroll County Special School District	Less than 1%
Gibson County	Humboldt City Schools	2.5%
	Milan Special School District	Less than 1%
	Trenton Special School District	3.3%
	Bradford Special School District	Less than 1%
	Gibson County Special School District	Less than 1%
Henry County	Henry County Schools	Less than 1%
	Paris Special School District, K-8	1.9%
Lake County	Lake County School System	Less than 1%
Madison County	Madison County Schools	5.3%
	West Tennessee School for the Deaf	*
Obion County	Obion County Schools	3.5%
	Union City Schools	6.4%
Weakley County	Weakley County Schools	Less than 1%
Tennessee		7.8%

* Data suppressed to protect student privacy.

** No data provided.

In the service area, a greater percentage of adults have attained a high school diploma than in the rest of the state. The highest level of educational attainment for the majority (approximately 55-60%) of residents, 25 and older, in the service area have a high school degree or some college with no degree.

Table 18. Education Attainment (Ages 25 and Over) by Geographic Area (2019)^{xxxvi}

Geographic Area	Less Than 9th Grade	9th-12th grade, no diploma	High school graduate	Some college, no degree	Associate's degree	Bachelor's degree	Advanced degree
Benton County	6.2%	11.4%	46.4%	19.0%	4.7%	7.8%	4.5%
Carroll County	6.6%	9.3%	42.2%	19.2%	4.7%	11.0%	7.0%
Gibson County	5.2%	9.5%	39.1%	20.7%	7.0%	12.0%	6.4%
Henry County	5.5%	8.5%	45.6%	19.1%	4.8%	9.3%	7.2%
Lake County	9.9%	17.1%	43.2%	16.5%	3.8%	6.1%	3.2%
Madison County	3.7%	7.4%	35.3%	20.9%	7.0%	16.0%	9.6%
Obion County	6.6%	9.9%	44.8%	17.9%	5.6%	10.3%	5.1%
Weakley County	5.6%	9.3%	38.9%	19.4%	5.3%	13.2%	8.4%
Tennessee	4.6%	7.9%	32.1%	20.7%	7.3%	17.2%	10.1%

The highest educational attainment level among families served by the NWTEDC Head Start and Early Head Start program trends toward a high school degree/GEDs and some college (86.5% of families). Fewer families have a bachelor's or advanced degree than statewide (Table 19).

Table 19. Highest Level of Education at Enrollment of Head Start/Early Head Start Families Served (Based on Cumulative Enrollment) by NWTEDC Head Start/ Early Head Start Program (2020-2021)^{xxxvii}

	Number of Families	Percent of Families
Less than a high school degree	136 (26 EHS/110 HS)	9%
High school graduate or GED	993 (178 EHS/815 HS)	65.8%
Associates degree, vocational school or some college	312 (61 EHS/251 HS)	20.7%
Bachelor's or advanced degree	67 (11 EHS/56 HS)	4.4%
Total	1,508	100.0%

Table 20 describes the percent of students in grades 3 through 10 who are meeting or exceeding expectations on English Language Arts and Mathematics statewide assessments. The state of Tennessee had a 94.4% participation rate in the 2020-2021 Tennessee Comprehensive Assessment Program (TCAP).^{xxxviii}

Six school districts in the service area have proficiency rates below the statewide rate: Hollow Rock-Bruceton Special School District (Carroll County), West Carroll County Special School District (Carroll County), Humboldt City Schools (Gibson County), Trenton Special School District (Gibson County), Lake County School System (Lake County) and Madison County Schools (Madison County).

Disparities exist for proficiency rates by student type as Black, Hispanic, and Native American students, students with disabilities, economically disadvantaged students and English learner students have lower proficiency rates than "all students" across the service area and the state of Tennessee (Table 20).

Table 20. Percent of Students Performing at or Above Grade Level (on Mathematics and English Language Arts TCAP Exams) by Student Group (2020-2021) ^{xxxix, 16}

County	School District	All Students	Black, Hispanic, and Native American Students	Students with Disabilities	Economically Disadvantaged Students	English Learner Students
Benton County	Benton County School System	29.3%	23.5%	8.2%	18.0%	*
Carroll County	Hollow Rock-Bruceton Special School District	24.2%	*	*	17.9%	*
	Huntingdon Special School District	34.9%	16.9%	14.6%	17.8%	
	McKenzie Special School District	35.6%	17.6%	5.7%	21.1%	*
	South Carroll County Special School District	37%	*	*	*	
	West Carroll County Special School District	19.5%	15.0%	*	12.3%	*
Gibson County	Humboldt City Schools	6.3%	5.3%	6.5%	3.3%	*
	Milan Special School District	31.2%	19.7%	3.8%	18.7%	*
	Trenton Special School District	22.6%	11.1%	12.8%	13.3%	*
	Bradford Special School District	37.2%	*	*	27.2%	*
	Gibson County Special School District	43.9%	27.6%	15.4%	23.4%	*
Henry County	Henry County Schools	28.7%	17.0%	12.9%	22.8%	*
	Paris Special School District, K-8	37.5%	19.5%	18.0%	22.9%	*
Lake County	Lake County School System	12.6%	7.1%	9.8%	9.5%	*
Madison County	Madison County Schools	13.9%	8.6%	9.2%	5.9%	8.4%
	West Tennessee School for the Deaf	*	*	*	*	*
Obion County	Obion County Schools	36.8%	26.5%	18.3%	25.6%	31.3%
	Union City Schools	33.8%	18.4%	5.9%	17.9%	*
Weakley County	Weakley County Schools	34.5%	19.6%	13.3%	22.0%	*
Tennessee		27.8%	14.4%	10.2%	13.0%	12.6%

*Results unavailable due to low student count.

One of the most significant impacts of COVID-19 on families with school age children in the service area has been the closure of K-12 schools. In March 2020, Governor Lee ordered the temporary closure of all K-12 schools in Tennessee, and then on April 15, 2020, called on schools to remain closed for the remainder of the academic year; schools reopened to in-person learning in the Fall for the 2020-2021 school year.¹

¹⁶ Rates lower than the statewide rate are highlighted.

Health

County Health Rankings & Roadmaps, a national program of the Robert Wood Johnson Foundation, ranks communities across many health and wellness factors. The rankings in health outcomes represent how healthy counties are within the state. The healthiest county in the state has a “Health Factor Rank” of #1, with the lowest rank being #95 in Tennessee. Counties in the service area range from #32 in Weakley County to the lowest ranking for health in the state in Lake County at #95.

The ranks are based on two types of measurements: how long people live and how healthy people feel while alive. The overall rankings in health factors represent what influences the health of a county. They are an estimate of the future health of counties as compared to other counties within a state, and are based on four factors: health behaviors, clinical care, social and economic, and physical environment.

As seen in Table 21, factors related to poor health, as well as the number of physically and mentally unhealthy days, are generally higher across the service area as compared to the state of Tennessee.

Table 21. Health Outcomes Data by Geographic Area (2020) ^{xli, 17}

Geographic Area	Health Factor Rank	Years of Potential Life Lost Before Age 75 per 100,000 Population (2017-2019)	% Poor or Fair Health (2018)	Average Number of Physically Unhealthy Days per Month (2018)	Average Number of Mentally Unhealthy Days per Month (2018)
Benton County	80	14,200	27%	5.9	6.0
Carroll County	52	10,200	25%	5.3	5.7
Gibson County	57	10,500	24%	5.0	5.3
Henry County	46	11,100	24%	5.4	5.7
Lake County	95	11,900	30%	6.0	5.8
Madison County	40	10,000	24%	4.9	5.3
Obion County	82	9,200	27%	5.7	6.1
Weakley County	32	9,100	24%	5.3	5.6
Tennessee		9,400	21%	4.7	5.2
Top U.S. Performers		5,400	14%	3.4	3.8

Across other health-related factors, including chronic diseases such as obesity and diabetes, rates are also generally higher in the service area than the statewide rate (Table 22).

Table 22. Adult Health Factors by Geographic Area ^{xlii, 18}

Geographic Area	% Smokers (2018)	% Obese (2017)	% Diabetic (2017)
Benton County	30%	33%	11%
Carroll County	26%	34%	12%
Gibson County	26%	41%	19%
Henry County	27%	34%	18%
Lake County	31%	35%	10%
Madison County	23%	40%	15%
Obion County	28%	39%	17%
Weakley County	26%	40%	13%
Tennessee	21%	33%	13%
Top U.S. Performers	16%	26%	8%

¹⁷ Rates greater than the statewide rate are highlighted.

¹⁸ Rates greater than the statewide rate are highlighted.

In the service area to date, the greatest number of cases of COVID-19 have been in Madison County (Table 23). Nationally and in Tennessee, it has been reported that there is generally a disproportionate impact of the COVID-19 pandemic on people from racial and ethnic minority groups. In Tennessee, 17% of the population are African American; however, in the spring of 2020, 20% of COVID-19 cases and 33% of deaths in the states were among Black or African American persons.^{xliii}

Table 23. COVID-19 Cases by County (January 22, 2022)^{xliv}

Geographic Area	Number of Confirmed Cases to Date	Percent of Total Cases in Tennessee
Benton County	3,526	0.2%
Carroll County	7,113	0.4%
Gibson County	13,680	0.8%
Henry County	6,528	0.4%
Lake County	2,337	0.1%
Madison County	23,798	1.4%
Obion County	8,793	0.5%
Weakley County	7,717	0.5%
Total Service Area	73,492	4.3%
Tennessee	1,653,144	100%

As described in Table 24, vaccination rates vary across counties from an overall rate of 36.8% in Weakley County to 61.1% in Madison County. Rates of vaccination are lowest for the 5–11-year-old age group, though the Pfizer-BioNTech COVID-19 Vaccine was only approved for this age range beginning November 2, 2021.

Table 24. Persons with Vaccine Course Complete, as a Percent of the Population, by County (January 2022)^{xlv, 19}

Municipality	Ages 5-11	Ages 12-15	Age 61 and Over ²⁰	All Ages
Benton County	5.9%	25.9%	70.9%-83.9%	47.3%
Carroll County	3.6%	21.5%	85.0%-95.2%	47.7%
Gibson County	4.7%	19.5%	83.7%-92.3%	44.3%
Henry County	5.2%	25.9%	72.6%-81.9%	45.5%
Lake County	6.9%	27.4%	73.1%-104.3%	40.8%
Madison County	13.1%	43.7%	84.7%-100.5%	61.1%
Obion County	3.4%	15.0%	69.5%-78.2%	39.5%
Weakley County	5.3%	19.7%	64.8%-71.3%	36.8%
Tennessee	--	--	--	51.9%

COVID-19 has had an immediate and lasting impact on Tennessee residents' wellbeing.

In Tennessee, at the beginning of the 2021 school year, 58% of Tennessee's young adults reported feeling anxious or on edge for more than half of the days in the last two weeks. This was the highest reported rate in the country. During that same time, one in three young adults reported feeling down, depressed, or hopeless. Although the pandemic has impacted mental health across the country, the decline in Tennessee teen mental health pre-dates COVID-19.^{xlvi}

¹⁹ Rates less than the statewide rate are highlighted.

²⁰ Tennessee reports vaccinations by age groups 61-70, 71-80, and 81+. A range of vaccinations rates is provided.

NWTEDC leadership report seeing additional behavioral challenges in the Head Start/Early Head Start classrooms. Mental Health Consultants evaluate referred children and develop a plan after a collaborative meeting with teachers and parent/guardians. The consultant will model strategies with the teacher and child and provide services inside the classroom setting, with visits generally two or three days a week, depending on severity of the behavior.

Substance Misuse

The isolating effects of the COVID-19 pandemic had a dramatic impact on drug overdose deaths both nationally and in Tennessee. From March 2020 to March 2021, drug overdose deaths in the United States rose by around 30%, and in Tennessee there were 3,400 overdose deaths, a 49.5% increase from the year prior (March 2019–2020), representing the 6th largest state increase.^{xlvi} ^{xlvi}

The CDC warns that the street drug supply has become more contaminated and more dangerous. Fentanyl — a synthetic, highly potent drug often added to street drugs — was the primary driver of the increase in overdose deaths. Additionally, a marked increase in the potency of fentanyl has fueled a fifty-five percent increase in the number of drug-overdose deaths in 2020 over 2019. CDC data suggests Fentanyl was involved in more than 60% of overdose deaths in 2020. In Tennessee in 2020-2021, opioid-related deaths increased by 60.6% and synthetic opioid-related deaths increased by 83.6%.^{xlvi}

While community-level data on the impact of COVID-19 on populations with substance use disorders has yet to be fully reported, this provisional data provides a snapshot into what those impacts might look like in some communities.

The rate of fatal drug overdoses in Tennessee in 2020 for all types of drugs was 46 per 100,000 individuals, which is 87% greater than the nationwide rate (28.3 per 100,000). The rate of opioid-related drug overdose deaths (2020) was 37 per 100,000 individuals and over 80% of drug overdose deaths in Tennessee (2020) (Table 25).ⁱ

In the service area, the drug overdose rate was highest in Henry County, with the most deaths in Madison County. In Tennessee, 80.67% of drug overdoses are White individuals, 18.21% are Black or African American and, 1.12% are Other races. Tennesseans who died of a drug overdose were more likely to be White, but the proportion of White Tennesseans who died of drug overdose has decreased from 88% in 2016 to 81% in 2020. Between 2019 and 2020, drug overdose deaths involving Black Tennesseans have increased 73%.ⁱⁱ

Table 25. Drug Overdose Mortality Deaths (2020)^{lii}

Geographic Area	Number (rate per 100,000)	Number of Fatal Drug Overdoses (all drugs)	Number of Fatal Drug Overdoses (Opioid Related)
Benton County	7*	7	4
Carroll County	4*	4	2
Gibson County	24	10	8
Henry County	46	14	7
Lake County	0*	0	0
Madison County	31	31	23
Obion County	*	2	2
Weakley County	*	9	6
Tennessee	46	3,032	2,388
United States	28.3 ²¹	91,799	68,630

*rate unstable due to fewer than 10 overdoses

The rate of physician-ordered opioids in Tennessee has a very high dispensing rate (filled prescriptions) of 74.6%, significantly greater than the national rate of 43.3%. In the service area, Carroll and Madison County have dispensing rates that are greater than the number of residents that live in the county (Table 26).^{liii}

Table 26. Opioid Dispensing Rate per 100 (2019)^{liv 22 23}

Geographic Area	Opioid Dispensing Rate per 100
Benton County	49.6
Carroll County	129.2
Gibson County	69.1
Henry County	72.8
Lake County	10.4
Madison County	149.4
Obion County	91.2
Weakley County	89.3
Tennessee	74.6
United States	43.3

Neonatal abstinence syndrome (NAS) or neonatal opioid withdrawal syndrome (NOWS) occurs when a pregnant woman uses drugs such as opioids during her pregnancy. In 2020, the rate of NAS diagnosis in live births in Tennessee was 10.2 per 1,000 births, a slight increase from 10.0 in 2019 to 10.2.^{lv}

The rate of excessive drinking alcohol across the NWTEDC service area is lower than the Tennessee state rate (Table 27).

Table 27. Excessive Drinking (Percentage of Adults Reporting Binge or Heavy Drinking)^{lvi}

Geographic Area	% Excessive Drinking (2018)
Benton County	15%
Carroll County	15%
Gibson County	15%
Henry County	16%
Lake County	15%
Madison County	14%
Obion County	15%
Weakley County	16%
Tennessee	17%
Top U.S. Performers	15%

²¹ Age adjusted rate.

²² Starting in 2019, prescriptions were based on the location of the prescriber.

²³ Rates above the statewide rate are highlighted.

Healthcare and Clinical Care

The rate of uninsured individuals under age 65 is moderately high in Tennessee (12%) and is double the rate of top U.S. performers (6%). Benton and Weakley County have uninsured rates for adults that are slightly greater than the state rate.

The state and all counties in the service area have a consistent rate of uninsured children (under age 19) (5%). Still, this is a higher rate compared with top U.S. performers (3%) (Table 28).

Table 28. Percent of the Population that is Uninsured by Geographic Area (2018)^{lvii 24}

Geographic Area	Adults (Under Age 65)	Children (Under Age 19)
Benton County	13%	5%
Carroll County	12%	5%
Gibson County	11%	5%
Henry County	12%	5%
Lake County	12%	5%
Madison County	11%	5%
Obion County	12%	5%
Weakley County	13%	5%
Tennessee	12%	5%
Top U.S. Performers	6%	3%

At the county level, data show that individuals have limited access to health providers. The ratio of primary care providers, dentists, and mental health providers to individuals in the service area is described in Table 29. In every category, the provider ratio is above (less optimal) the statewide rate in Benton, Carroll, Gibson, and Weakley County. Madison County has ratios across all provider types that are below (more optimal) the Tennessee rate.

Table 29. Ratio of Health Care Providers by Geographic Area^{lviii 25}

Geographic Area	Primary Care Provider ²⁶ Ratio (2018)	Dentist Ratio (2019)	Mental Health Provider Ratio (2020)
Benton County	5,390:1	5,390:1	2,310:1
Carroll County	2,340:1	3,470:1	1,980:1
Gibson County	2,340:1	2,590:1	4,090:1
Henry County	1,470:1	1,900:1	530:1
Lake County	n/a	7,020:1	7,020:1
Madison County	760:1	1,460:1	390:1
Obion County	2,160:1	1,880:1	2,000:1
Weakley County	1,860:1	3,330:1	2,380:1
Tennessee	1,400:1	1,800:1	630:1
Top U.S. Performers	1,030:1	1,210:1	270:1

The NWTEDC leadership team members note that access to dental care is a bigger challenge for adults due to the cost of services and lack of insurance. There are no financial assistance programs for adult dental care. Occasionally, local dentists have offered free services at health fairs; some county Health Departments offer emergency dental care on a sliding scale. NWTEDC reports that another challenge accessing dental care for children is lack of parental follow through with dental appointments.

²⁴ Rates above the statewide rate are highlighted.

²⁵ Ratios above the statewide rate are highlighted.

²⁶ Includes nurse practitioners, physician's assistants, and clinical nurse specialists.

Infant and Maternal Health

There are strengths in the NWTEDC service area when considering infant and maternal health. Yet, disparities remain with regard to health factors and health outcomes.

Prenatal Care. Child health and wellbeing begins with adequate prenatal care. In the NWTEDC service area, 64.3%-86.8% of pregnant women received access to prenatal care in the first four months of pregnancy in 2020; rates were all above the statewide rate, with the exception of Henry County (Table 30).

Data on the percent of mothers with no prenatal care in Tennessee show disparities by race. The rate is highest among Native American (15%), Hispanic (12%), and Black or African American (9%) mothers (Table 31).

Table 30. Percent of Mothers with Adequate Prenatal Care as a Percentage of Live Births by Geographic Area (Began by Fourth Month) (2020)^{lix 27 28}

Geographic Area	Adequate Prenatal Care
Benton County	76.7%
Carroll County	77.4%
Gibson County	78.5%
Henry County	64.3%
Lake County	75%
Madison County	75%
Obion County	86.8%
Weakley County	81.2%
Tennessee	72.9%

Table 31. Percent of Mothers with No Prenatal Care by Race/Ethnicity in Tennessee (2019)^{lx 29}

Geographic Area	Total	Native American	Hispanic	Black or African American	Asian and Pacific Islander	Two or more races	White
Tennessee	7%	15%	12%	9%	8%	7%	5%

Teen Pregnancy. In Tennessee, the teen birth rate (ages 15-17) is approximately double the rate of the United States. In the NWTEDC service area, the rate is greater than the state rate in Benton, Gibson, Henry, Lake, and Obion County (Table 32).

Table 32. Teen Birth Rate (Ages 15-19), per 1,000, by Geographic Area (2019)^{lxi 30}

Geographic Area	Teen Birth Rate per 1,000
Benton County	50
Carroll County	32
Gibson County	40
Henry County	44
Lake County	76
Madison County	31
Obion County	41
Weakley County	20
Tennessee	33
United States	16.7

²⁷ Prenatal care begun by the 4th month of pregnancy and 80-109% of recommended visits received.

²⁸ Rates lower than the statewide rate are highlighted.

²⁹ Rates above the statewide rate are highlighted.

³⁰ Rates above the statewide rate are highlighted.

Preterm and Low Birth Weight. In Tennessee, 11.2% of mothers gave birth to their babies preterm in 2019. The rate was only above the state rate in Lake County, 12.1% (Table 33). However, there are disparities by race. The rate of mothers with preterm births is highest among Black infants (14.6%), followed by White infants (10.3%), Asian/Pacific Islander infants (9.8%), Hispanic infants (9.7%) and American Indian/Alaska Native infants (9.1%) (Table 34). Compared with singleton births (one baby), multiple births in Tennessee were about seven times as likely to be preterm in 2019.^{lxii}

Table 33. Percent of Mothers with Preterm Births as a Percentage of Live Births by Geographic Area (2016-2019 average)^{lxiii 31}

Geographic Area	Preterm Births
Benton County	10.9%
Carroll County	9.1%
Gibson County	10.8%
Henry County	10.3%
Lake County	12.1%
Madison County	10.9%
Obion County	11.2%
Weakley County	7.4%
Tennessee	11.2%

Table 34. Percent of Mothers with Preterm Births by Race/Ethnicity in Tennessee (2017-2019)^{lxiv 32}

Geographic Area	Total	Asian	White	Hispanic	Black
Tennessee	11.1%	9.8%	10.3%	9.7%	14.6%

NWTEDC service area rates for babies born at a low birthweight are generally lower than the statewide rate, with the exception of Lake and Madison County (Tables 35).

Table 35. Low Birthweight (Percent of Births) by Geographic Area (2021)^{lxv 33}

Geographic Area	Percent Low Birthweight
Benton County	8%
Carroll County	8%
Gibson County	9%
Henry County	8%
Lake County	10%
Madison County	10%
Obion County	9%
Weakley County	7%
Tennessee	9%
United States	8.3%

The highest rate of infant mortality in the service area is in Madison County. Data is limited due to health guidelines regarding the release of aggregate data. Of the data available, Madison County and Obion County reflected the highest rates of infant mortalities, though contextually, it is notable that the rate in Obion County represents four total deaths.

³¹ Rates above the statewide rate are highlighted.

³² Rates above the statewide rate are highlighted.

³³ Rates above the statewide rate are highlighted.

Table 36. Infant Mortality Rate (per 1,000 Live Births) by Geographic Area (2018)^{lxvi 34}

Geographic Area	Number of Infant Deaths per 1,000 Births (Rate)
Benton County	**
Carroll County	2 (7.3)
Gibson County	1 (1.7)
Henry County	**
Lake County	**
Madison County	11 (9.2)
Obion County	4 (11.6)
Weakley County	1 (3.2)
Tennessee	(6.9)
United States	5.8

** Count is not displayed, according to the Tennessee Department of Health guidelines for release of aggregate data to the public.

Child Health and Wellbeing

Primary and Preventative Health. In NWTEDC's programs, many children are up to date on primary and preventative health care at enrollment. NWTEDC has strong partnerships to provide health services to families and helps families to maintain access to health services throughout the program year (Table 37). NWTEDC leadership noted that during the pandemic, some clinics and health care facilities were not open for preventative care. Additionally, some families were reluctant to seek care.

Table 37. Percent of Head Start/Early Head Start Children Up to Date on Age-Appropriate Preventative and Primary Health Care (EPSDT) (2020-2021)^{lxvii}

Program Option	At Enrollment	End of Enrollment Year
Early Head Start	76.9% (212 out of 277)	89.9% (249 out of 277)
Head Start	53.4% (658 out of 1,232)	70.9% (873 out of 1,232)

NWTEDC's leadership team members report that access to pediatric health specialists is a challenge for families due to access and affordability. Some families must travel at least two hours to receive care from specialists. The program leverages its partnerships with community organizations to help connect families to specialized health services, assists families in scheduling appointments, and provides resources for public transit and/or financial support (e.g., gas money) if needed.

Obesity and Chronic Diseases. Indicators from the NWTEDC 2020-2021 Head Start PIR Report show that the majority of enrolled children are at a healthy weight. Yet, out of 1,316 Head Start children served during the 2020-2021 program year, 192 children (14.6%) were classified as overweight and 254 children (19.3%) classified as obese, for a combined overweight and obesity rate of 33.9% (Table 38).^{lxviii}

Table 38. Overweight and Obesity Status of Head Start Children (for Whom BMI is Recorded) (2020-2021)^{lxix}

Status	Percent of Enrolled Children
Underweight	5.0% (66 out of 1,316)
Healthy weight	52.4% (689 out of 1,316)
Overweight	14.6% (192 out of 1,316)
Obese	19.3% (254 out of 1,316)

³⁴ Rates above the statewide rate are highlighted.

The obesity rate among Head Start children (19.3%) is above the obesity rate among 2-4-year-old WIC participants in Tennessee (15.2%) and below the obesity rate of all children 10-17 years old in the state (20.8%).^{lxx} This highlights the importance of nutrition services provided by the Head Start/Early Head Start program in helping to meet enrolled children's health needs.

During the 2020-2021 program year, the primary chronic health condition experienced by NWTEDC Head Start and Early Head Start children was asthma (12 children), followed by seizures (5 children), life-threatening allergies (3 children), and Autism spectrum disorder (1 child).^{lxxi} Additionally, NWTEDC leadership reports an increase in the severity of disabilities in some of the enrolled children and an increasing number of children with severe developmental and behavioral challenges due to maternal drug use.

Data from 2014 indicates that asthma hospitalization rates vary widely among the counties in the service area. More current data regarding asthma and hospitalization rates is not publicly available. As described in Table 39, Lake County had rates of asthma hospitalizations at about three times the state rate; all other counties had rates similar or below the state rate.

Table 39. Asthma Hospitalizations, for Children Under 5, by Geographic Area (2014)^{lxxii, 35}

Geographic Area	Rate per 100,000
Benton County	Not reported
Carroll County	5.9
Gibson County	15.9
Henry County	18.7
Lake County	58.5
Madison County	7.7
Obion County	5.6
Weakley County	5.5
Tennessee	18.7

Nutrition

Food Insecurity and Access. Healthy nutrition is a critical factor for children's development, particularly given high rates of childhood obesity in Tennessee and in the Head Start/Early Head Start program. Children's rapidly developing brains and bodies make them particularly vulnerable to the negative impacts of food insecurity.

Through the Northwest Commodities Distribution (TEFAP), NWTEDC provides support on a quarterly basis for all counties except Madison County (served by Southwest Human Resource Agency), and provides food vouchers to families. Many Head Start families may be eligible to utilize these resources.

More than one in four Tennessee children facing food insecurity are not eligible for federal nutrition assistance programs.

Feeding America (2022). Child Food Insecurity in Tennessee. <https://map.feedingamerica.org/county/2019/child/tennessee>

The food insecurity rate is above the statewide rate in all counties in the service area, ranging from 15-20%, with the highest rate in Lake County (Table 40).^{lxxiii} Madison County indicates the largest percent of limited access to healthy foods (11%) and also has the most food deserts (seven) (Table 41).

³⁵ Rates greater than the total rate are highlighted.

Table 40. Food Access by Geographic Area (2015 & 2018)^{lxiv 36}

Geographic Area	Food Environment Index ³⁷	% Limited Access to Healthy Foods	% Food Insecurity
Benton County	6.8	7%	18%
Carroll County	7.3	3%	16%
Gibson County	7.3	6%	15%
Henry County	7.1	8%	15%
Lake County	6.9	0%	20%
Madison County	7.0	11%	15%
Obion County	7.0	5%	17%
Weakley County	7.6	7%	15%
Tennessee	6.2	8%	14%
Top U.S. Performers	8.7	-	-

Food deserts are geographic areas where residents lack convenient options for securing affordable and healthy foods, especially fresh fruits and vegetables; they are disproportionately found in high-poverty areas. There are 21 low-income and low-access census tracts (food deserts) in the service area. Madison County has the greatest number of food deserts, followed by Henry and Gibson Counties (Table 41).^{lxv} Since 2020, there are four new food tracts in the service area, as indicated in Table 41. Additionally, in the same time period, Gibson County no longer has a food desert in census tract 47053966500 (west of Milan).

Table 41. Low-income and Low-Access Census Tracts (Food Deserts)^{lxvi}

Geographic Area	Food Deserts
Benton County	1. Tract 47005963300 (Camden, in central Benton County) 2. Tract 47005963200 (southern Benton County)
Carroll County	None
Gibson County	1. Tract 47053966200 (Dyer) 2. Tract 47053966700 (Trenton) 3. Tract 47053966900 (Humboldt) 4. Tract 47053967000 (Humboldt)
Henry County	1. Tract 47079969400 (Paris) 2. Tract 47079969300 (west of Paris) 3. Tract 47079969000 (along Kentucky border, in northern county) NEW 4. - Tract 47079969100 (along Kentucky border, in northern county) NEW
Lake County	None
Madison County	1. Tract 47113001605 (northwest of Jackson) 2. Tract 47113000100 (north of Jackson) 3. Tract 47113000300 (Jackson) 4. Tract 47113000400 (Jackson) 5. Tract 47113000500 (Jackson) 6. Tract 47113000600 (Jackson) 7. - Tract 47113000800 (Jackson)
Obion County	1. - Tract 47131965700 (Union City) NEW
Weakley County	1. Tract 47183968700 (Palmersville) 2. Tract 47183968101 (Martin) 3. - Tract 47183968203 (Martin) NEW

³⁶ Rates above the statewide rate are highlighted.

³⁷ The Food Environment Index ranges from 0 (worst) to 10 (best) and equally weights two indicators of the food environment: limited access to healthy food and food insecurity.

Free and Reduced Lunch. Nutrition needs are also evident in the rates of free and reduced-price lunch in school districts in the service area. All counties in the service area have rates of free and reduced lunch above the state rate, with particularly high rates in Lake County (83.9%) (Table 42).

Table 42. Percent of Students Eligible for Free or Reduced-Price Lunch (2019) by Geographic Area^{lxxvii, 38}

Geographic Area	Percent
Benton County	51.5%
Carroll County	50.4%
Gibson County	48.8%
Henry County	50.2%
Lake County	83.9%
Madison County	59.3%
Obion County	50.5%
Weakley County	48.5%
Tennessee	46.7%

During the COVID-19 pandemic, the U.S. Department of Agriculture began a universal free lunch program to provide free meals to all students regardless of their income level (currently extended through the 2021-22 school year).^{lxxviii} NWTEDC also provided meals for Head Start/Early Head Start families to pick up.

WIC and SNAP. The number of children participating in the Women, Infants, and Children (WIC) program has been decreasing statewide in recent years; it is decreasing or fluctuating across the counties in the service area. The highest WIC participation rate is in Lake County (60.2%) which is more than double the state rate, in line with data regarding high percentages of food insecurity and free and reduced lunch eligibility rates in the county.

Table 43. Number and Percent of Infants and Children Receiving Women, Infants, and Children (WIC) Benefits (2021)^{lxxix 39}

Geographic Area	2019	2020	2021	Three-Year Trend
Benton County	364 44.6%	347 41.9%	276 34.2%	Decreasing
Carroll County	495 31.5%	595 38.9%	454 29.7%	Fluctuating
Gibson County	1,028 33.0%	924 30.6%	826 27.5%	Decreasing
Henry County	616 36.6%	618 37.0%	542 34.3%	Fluctuating
Lake County	177 61.5%	181 62.0%	171 60.2%	Fluctuating
Madison County	2,130 35.3%	2,365 38.9%	2,571 41.9%	Increasing
Obion County	650 38.0%	739 42.8%	652 37.0%	Fluctuating
Weakley County	640 37.7%	544 31.7%	440 26.8%	Decreasing
Tennessee	27.7%	26.9%	26.4%	Decreasing

While food insecurity increased from 31% prior to the pandemic to 39% in the first four months of the pandemic in Tennessee, self-reported SNAP participation stagnated. Even more alarmingly, among low-income households that were also food-insecure, 47% reported participating in SNAP prior to the pandemic,

³⁸ Rates greater than the statewide rate are highlighted.

³⁹ Rates greater than the statewide rate are highlighted.

but only 39% did so in the first four months following the pandemic's onset. In particular, Black households, households with children, and those in the lowest income category experienced the largest declines in SNAP participation.^{lxxx}

As described in Table 44, there was a decrease in children receiving SNAP benefits across the state and service area between 2020 and 2021 for nearly all counties. In Lake County, the rate increased by 0.8%.^{lxxxi} In the service area, more than 20,357 children were recipients of SNAP benefits in 2021. In 2021, all counties in the service area had SNAP participation rates above the state rate, with the highest in Lake County (62.4%) (Table 44).

Table 44. Children Receiving SNAP Benefits by County (2021)^{lxxxii}

Geographic Area	2021 Number	2021 Percent	% Change from 2020
Benton County	937	30.1%	-1.2%
Carroll County	1,795	29.1%	-0.9%
Gibson County	3,468	29.5%	-1.1%
Henry County	2,155	33.9%	-1.1%
Lake County	617	62.4%	+0.8%
Madison County	7,568	34%	-0.4%
Obion County	2,015	31.4%	-2.9%
Weakley County	1,802	27.43%	-1.8%
Total Service Area	20,357		
Tennessee	401,350	26%	-0.6%

Social and Economic Factors Impacting Wellbeing

Home Value and Affordability

Home value and affordability vary across the service area, with median home values below the statewide rate in all counties, ranging from \$81,300 in Lake County to \$131,500 in Madison County. Median monthly owner and renter costs vary as well, and rates in the service area are generally lower than the statewide rates (Table 45).

Table 45. Median Home Value and Costs by Geographic Area (2019)^{lxxxiii}

Geographic Area	Median Home Value ⁴⁰	Median Owner Costs	Median Rent ⁴¹
Benton County	\$85,600	\$899	\$658
Carroll County	\$88,300	\$901	\$622
Gibson County	\$98,600	\$1,065	\$680
Henry County	\$103,300	\$926	\$643
Lake County	\$81,300	\$864	\$519
Madison County	\$131,500	\$1,167	\$877
Obion County	\$91,500	\$929	\$621
Weakley County	\$97,800	\$919	\$626
Tennessee	\$167,200	\$1,244	\$869

The vacant housing rate in the service area ranges from 4.5-10.5%. Five counties have a rental vacancy rate below the statewide rate, which means there is less housing available to renters (Table 46).

⁴⁰ Home values lower than the statewide rate are highlighted.

⁴¹ Median rents above the statewide rate are highlighted.

Also described in Table 46, the rental cost burden in the service area is high. In many communities, more than 40% of households are spending 30% or more of their monthly income on rent. A high rental cost burden can strain a family's finances and make it difficult to sustain stable housing and have enough income available to support other expenses (e.g., food, medical care). In Madison County, 41.9% of households are spending 35% or more of their income on rent (the other counties in the service area range from 30.3-37.9%).

Table 46. Housing Characteristics by Geographic Area (2019) ^{lxxxiv}

Geographic Area	Rental Vacancy Rate ⁴²	Households Spending 30-34.9% of Monthly Income on Rent ⁴³	Households Spending 35% or More of Monthly Income on Rent ⁴⁴
Benton County	5.5%	9.1%	37.5%
Carroll County	10.5%	7.9%	30.3%
Gibson County	7.1%	11.2%	37.5%
Henry County	6.2%	11.5%	37.9%
Lake County	4.5%	9.6%	35.3%
Madison County	9.6%	9.9%	41.9%
Obion County	5.5%	13.1%	33.5%
Weakley County	7.0%	12.5%	37.9%
Tennessee	7.1%	9.4%	37.9%

Many factors impact housing stability and affordability in Tennessee. Tennessee has a moderate percentage of households that are experiencing severe housing problems (overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities). In the state, fourteen percent of households are experiencing a severe housing problem. In the service area, rates are greater than the state rate in Benton and Madison County (Table 47).

Table 47. Percentage of Households with at Least 1 of 4 Housing Problems by Geographic Area (2013-2017) ^{lxxxv 45}

Geographic Area	Percent of households experiencing at least 1 of 4: Overcrowding, high housing costs, lack of kitchen, lack of plumbing
Benton County	16%
Carroll County	14%
Gibson County	13%
Henry County	11%
Lake County	13%
Madison County	17%
Obion County	13%
Weakley County	11%
Tennessee	14%
Top U.S. Performers	9%

Affordable housing is an issue for NWTEDC Head Start/Early Head Start families who do not qualify for housing assistance because they cannot pass the background or credit check.

Some families faced recent housing insecurity at the end of the national eviction moratorium. NWTEDC was able to use pandemic funds to help support families with back rent; families also received support from local churches. NWTEDC connects families with the local housing authority and provides resources regarding income-based apartments.

⁴² Rates below the statewide rate are highlighted.

⁴³ Rates greater than the statewide rate are highlighted.

⁴⁴ Rates greater than the statewide rate are highlighted.

⁴⁵ Rates greater than the statewide rate are highlighted.

Additionally, in December 2021, Weakley County experienced a tornado; many families were displaced and are now staying with family members. The pandemic and related job losses are also contributing factors for families moving in with relatives.

Income Inequality

Median household incomes are lower than the state rate across the service area and range from \$35,191 in Lake County to \$48,161 in Madison County (Table 48).

Table 48. Median Household Income by Geographic Area (2019)^{lxxxvi, 46}

Geographic Area	Median Household Income
Benton County	\$37,512
Carroll County	\$42,637
Gibson County	\$43,171
Henry County	\$40,502
Lake County	\$35,191
Madison County	\$48,161
Obion County	\$39,615
Weakley County	\$39,937
Tennessee	\$53,320

Income inequality is further described in Table 49. A higher income inequality ratio indicates greater division between the top and bottom ends of the income spectrum; inequality is high in Tennessee and across the service area. In Benton, Gibson, Henry, Lake, and Madison Counties, income inequality is above the state rate.

Table 49. Income Inequality by Geographic Area (2015-2019)^{lxxxvii}

Geographic Area	80 th percentile income	20 th percentile income	Income Ratio ⁴⁷
Benton County	\$73,911	\$15,549	4.8
Carroll County	\$82,940	\$17,691	4.7
Gibson County	\$89,236	\$17,871	5.0
Henry County	\$83,198	\$16,879	4.9
Lake County	\$78,628	\$12,532	6.3
Madison County	\$96,073	\$20,108	4.8
Obion County	\$79,994	\$16,901	4.7
Weakley County	\$78,646	\$17,237	4.6
Tennessee	n/a	n/a	4.7
Top U.S. Performers	n/a	n/a	3.7

Many families depend on a wide range of social services to support their families, including subsidized child care, cash assistance, and WIC. Public assistance is described in the Eligible Children and Pregnant Women section.

⁴⁶ Incomes less than the statewide rate are highlighted.

⁴⁷ A higher inequality ratio indicates greater division between the top and bottom ends of the income spectrum. Rates greater than the statewide rate are highlighted.

Community Safety and Incarceration

NWTEDC leadership report that there is gang violence in Madison, Henry, and Gibson County, as well as an abundance of methamphetamine use leading to violence in Benton, Henry, and Weakley County.

In 2020, in the NWTEDC service area, there were more than 640 reported incidents of domestic violence. County level data, described in Table 50, show that the highest number of domestic violence offenses were reported in Madison, Gibson, Henry, and Obion Counties. NWTEDC administrators report noticing a slight increase of domestic violence incidences during the pandemic.

Table 50. Number of Domestic Violence (DV) Incidents (2020)^{lxxxviii}

Geographic Area	# of DV Incidents
Benton County	27
Carroll County	41
Gibson County	119
Henry County	112
Lake County	11
Madison County	178
Obion County	110
Weakley County	44
Total Service Area	642
Tennessee	69,245

Violent and non-violent crime rates in the service area are generally lower than the state, with the exception of Madison and Obion County (property crime only) (Table 51).

Table 51. Crime Rate per 1,000 Persons by Geographic Area (2000)^{lxxxix 48}

Geographic Area	Violent Crime ⁴⁹ Rate per 1,000	Non- Violent Property Crime ⁵⁰ Rate per 1,000
Benton County	1.86	12.96
Carroll County	1.81	15.46
Gibson County	5.28	25.09
Henry County	2.84	25.26
Lake County	4.90	21.93
Madison County	7.36	51.24
Obion County	4.79	39.12
Weakley County	2.78	23.11
Tennessee	6.37	38.80

Further, data on the number and rate of offenses show a wide range among counties in the service area. Again, Madison County stands out with an exceptionally elevated rate of offenses and arrests, followed by Gibson and Henry County (Table 52).

⁴⁸ Rates greater than the statewide rate are highlighted.

⁴⁹ Violent Crime consists of murder, non-consensual sex offenses and aggravated assault. Victims are always individuals. One offense is counted for each victim.

⁵⁰ The offender's intent is to obtain money, property, or some other benefit, e.g., robbery, bribery, burglary. One offense is counted for each distinct (each incident/case) except motor vehicle theft, where one offense is counted for each vehicle stolen.

Table 52. Number of Offenses and Arrests by Geographic Area (2020)^{xc}

Geographic Area	Number of Offenses	Number of Arrests
Benton County	356	471
Carroll County	365	728
Gibson County	698	1,014
Henry County	726	196
Lake County	71	73
Madison County	1,374	1,920
Obion County	640	424
Weakley County	335	831
Tennessee	506,558	265,115

The incarceration rate in Tennessee is 838 per 100,000, well above the nationwide rate of 359 per 100,000 people (2019).^{xcj} A majority of individuals in the corrections system are on probation (Table 53).

Table 53. Number of Individuals in the Corrections System in Tennessee by Type (2019) ^{xcii}

Geographic Area	Prison	Jail	Parole	Probation
Tennessee	26,349	31,330	11,058	62,472

In 2020, the counties in the NWTEDC service area had a rate of juvenile court referrals that are generally lower than the rate in Tennessee, with the exception of Gibson and Lake County (Table 55).

Juvenile court referrals decreased in all counties in 2020, possibly associated with the pandemic and the closure of in person proceedings and a decline in the number of juvenile arrests. While rates in Gibson County increased in 2020, the pandemic may have had an impact on the rate of juvenile arrests as seen in Madison County in 2020, where the juvenile arrest rate is less than a third of the previous two years (possibly due to isolation of youths).

Table 54. Number of Juvenile Arrests and Rate per 1,000 Youth Under Age 18 by Geographic Area (2018-2020)^{xciii}

Geographic Area	2018	2019	2020
Benton County	3	0	1
Carroll County	4	14	8
Gibson County	21	18	30
Henry County	27	28	24
Lake County	2	3	1
Madison County	178	162	46
Obion County	15	7	16
Weakley County	7	25	13
Tennessee	20,621	20,378	13,118

Table 55. Juvenile Court Referrals in Tennessee (2018-2020)^{xciv 51}

Geographic Area	2018		2019		2020	
	Number	%	Number	%	Number	%
Benton County	28	0.9%	34	1.1%	0	0.0%
Carroll County	203	3.3%	203	3.3%	81	1.3%
Gibson County	1115	9.5%	967	8.3%	797	6.8%
Henry County	243	3.7%	211	3.2%	95	1.5%
Lake County	106	10.3%	78	7.9%	57	5.8%
Madison County	225	1.0%	228	1.0%	120	0.5%
Obion County	304	4.7%	188	2.9%	52	0.8%
Weakley County	275	4.1%	0	0.0%	n/a	n/a
Tennessee	53,110	3.5%	47,561	3.2%	32,248	2.1%

⁵¹ Rates greater than the statewide rate are highlighted.

In three counties in the NWTEDC service area, Carroll, Henry and Lake County, the rate for White and Black/African American juvenile arrests is similar. In all other counties in the service area, there are large discrepancies in the juvenile referral rate by race (Table 56).

Table 56. Juvenile Court Referral Rate by Race (2019)^{xcv}

Geographic Area	White		Black/African American	
	Number	Rate	Number	Rate
Benton County	22	7.3	4	27.4
Carroll County	161	31.2	20	27.9
Gibson County	494	53.7	359	143.4
Henry County	173	29.9	21	29.1
Lake County	55	76.8	18	62.9
Madison County	52	4.6	160	16.1
Obion County	139	25.5	46	47.6
Weakley County	197	34.3	46	77.3
Tennessee	29,276	25.7	11,742	36.4

EMPLOYMENT, WORKFORCE, AND TRANSPORTATION

Labor Force, Industries, and Occupations



In the NWTEDC service area, 64.9% of the population is in the labor force and many young children have all parents in the labor force.

Labor force participation rates may not capture the full extent of the workforce, as some populations, particularly undocumented individuals, are not reflected in these numbers.

Table 57. Percent of the Population in Labor Force (Age 16+) by Geographic Area (2019)^{xcvi,52}

Geographic Area	Population Age 16+	Living in Households with Children Under Age 6, All Parents in the Family in the Labor Force
Benton County	47.5%	76.3%
Carroll County	52.2%	67.5%
Gibson County	55.5%	66.5%
Henry County	50.4%	65.4%
Lake County	30.5%	72.8%
Madison County	58.9%	68.2%
Obion County	55.8%	67.2%
Weakley County	54.5%	50.8%
Tennessee	61.4%	64.9%

Labor force data speaks to the need for child care services for families, as many communities have high percentages of families in which all parents are in the workforce. In communities like Lake County, Benton County, and Madison County, where child poverty rates are high (described in the section that follows) and labor force participation rates are high, data suggest that many families may be employed in low paying jobs. Individuals in the service area are employed in a variety of occupations and industries, and a majority of individuals are private wage and salary workers.^{xcvii}

⁵² Rates less than the statewide rate are highlighted.

According to data from the U.S. Census Bureau, using Census-defined occupation categories, the top occupations in the service area are management, business, science, and arts occupations; sales and office occupations; and production, transportation, and material moving occupations. (Table 58).

The top industries in the service area are educational services, and health care and social assistance, followed by construction and wholesale trade (Table 59).

Table 58. Percentage of the Employed Workforce (Age 16+) by Occupation and Geographic Area (2019) ^{xcviii, 53}

Geographic Area	Management, business, science, and arts occupations	Service occupations	Sales and office occupations	Natural resources, construction, and maintenance occupations	Production, transportation, and material moving occupations	Total
Benton County	25.6%	17.0%	21.1%	9.8%	26.5%	100%
Carroll County	28.1%	18.3%	19.6%	12.1%	21.8%	100%
Gibson County	29.2%	17.3%	22.4%	9.1%	22.0%	100%
Henry County	27.0%	17.8%	21.1%	11.3%	22.8%	100%
Lake County	21.5%	23.3%	24.5%	9.2%	21.5%	100%
Madison County	34.6%	19.1%	21.6%	7.0%	17.6%	100%
Obion County	28.6%	18.6%	20.6%	9.2%	23.0%	100%
Weakley County	33.9%	17.9%	19.5%	10.6%	18.1%	100%
Tennessee	35.3%	16.9%	22.1%	8.8%	16.8%	100%

Table 59. Percentage of the Employed Workforce (Age 16+) by Industry and Geographic Area (2019) ^{xcix, 54}

Geographic Area	Agriculture, Forestry, Fishing & Hunting	Utilities	Construction	Manufacturing	Wholesale Trade	Retail Trade	Transportation & Warehousing	Information	Finance and insurance, and real estate and rental and leasing	Professional, scientific, and management, and administrative and waste management services	Educational services, and health care and social assistance	Arts, entertainment, and recreation, and accommodation and food services	Other services, except public administration	Public Administration
Benton County	1.9	7.0	18.8	0.8	16.8	9	1.1	4.5	1.9	6.4	18.3	6	5.3	4.2
Carroll County	2.3	7.5	17.3	1.7	11.9	5.6	1.5	3.4	2.3	7	24.1	7.2	5.8	4.7
Gibson County	1.4	6.6	17.3	2.8	13.2	5.3	2.2	5	1.4	7.3	21.4	7.8	4.7	5
Henry County	2.8	6.9	16.9	2.6	15.4	7.2	0.9	4.7	2.8	4.5	19.8	8.5	4.6	5.2
Lake County	4.7	5.3	12.5	1.0	16.8	6.3	0.1	2.4	4.7	6.1	22.1	6.3	4.2	12
Madison County	0.6	4.5	14.5	2.3	11.7	3.8	1.0	4.3	0.6	8.2	29.3	9.6	5.7	4.3
Obion County	3.1	6.5	20	2.5	14.3	5.4	1.7	4.1	3.1	6.3	19.4	7.3	4.7	4.9
Weakley County	3.4	4.8	18.2	2.9	11.1	5.2	1.0	2.1	3.4	5.2	27.6	10.2	3.7	4.7
Tennessee	1	6.5	13	2.6	11.7	6.6	1.7	5.8	1	9.9	22.5	9.8	4.8	4.1

⁵³ The top three occupations are highlighted for each geographic area.

⁵⁴ The top three industries are highlighted for each geographic area.

Top industries in the Western Tennessee, including the service area, reflect the occupations and industries described in this section (Table 60).

Table 60. Top Industries in the West Region⁵⁵ of Tennessee (2019)^c

Employer	Employees
Transportation and Material Moving	106,920
Office and Administrative Support	97,320
Sales and Related	63,680
Food Preparation and Serving Related	58,570
Production	58,500
Healthcare Practitioners and Technical	50,240
Management	40,660
Education, Training, and Library	38,650
Installation, Maintenance, and Repair	28,320
Business and Financial Operations	25,650
Protective Service	23,110
Construction and Extraction	22,050
Building and Grounds Cleaning/Maintenance	19,420
Personal Care and Service	13,390
Computer and Mathematical	10,730
Architecture and Engineering	8,840
Community and Social Services	8,590
Arts, Design, Entertainment, Sports, and Media	5,730
Life, Physical, and Social Science	4,640
Legal	3,180
Farming, Fishing, and Forestry	1,780
Total Employment	716,040

Employment

According to data on unemployment, the unemployment rates in the service area tend to be greater than the statewide rate, as highlighted in Tables 61a and 61b.

Table 61a. Quarterly Unemployment Rate by Geographic Area and Month/Year (2020-2021)^{ci 56}

Geographic Area	Jan. 2020	Apr 2020	Jul 2020	Oct 2020	Jan 2021	Apr 2021	Jul 2021	Oct 2021
Benton County	5.8	15.8	8.4	8.6	6.5	5.0	5.1	4.1
Carroll County	6.0	14.2	8.0	7.8	6.2	4.8	4.9	3.7
Gibson County	5.1	12.3	8.1	7.7	5.4	4.6	4.7	3.4
Henry County	5.5	14.6	7.6	7.9	6.1	4.4	4.7	3.7
Lake County	7.2	13.9	9.6	10.2	8.3	7.3	6.5	4.8
Madison County	3.9	14.3	9.6	8.0	5.4	4.8	5.0	3.4
Obion County	5.3	11.0	8.0	8.3	6.6	5.2	5.8	3.8
Weakley County	4.2	9.8	7.3	6.5	4.7	3.8	5.5	3.2
Tennessee	4.0	15.6	9.4	7.4	5.4	4.7	4.7	3.3

⁵⁵ The West Region consists of three Local Workforce Development Areas (LWDAs): Greater Memphis, Southwest, and Northwest, encompassing a total of 21 counties, including those in the service area.

⁵⁶ Rates greater than the statewide rate are highlighted.

Table 61b. Unemployment Rate by Geographic Area, past Six Months (2020-2021)^{cii 57}

Geographic Area	Jul 2021	Aug 2021	Sept 2021	Oct 2021	Nov 2021	Dec 2021
Benton County	5.1	4.9	4.2	4.1	3.6	4.2
Carroll County	4.9	4.4	3.6	3.7	3.2	3.7
Gibson County	4.7	4.4	3.7	3.4	3.1	3.4
Henry County	6.1	4.2	3.5	3.7	3.4	3.8
Lake County	6.5	6.3	4.8	4.8	4.5	5.1
Madison County	5.0	4.6	3.7	3.4	3.1	3.3
Obion County	5.8	4.9	4.0	3.8	3.6	4.0
Weakley County	5.5	4.1	3.2	3.2	2.9	3.2
Tennessee	4.7	4.3	3.5	3.3	3.1	3.3

When exploring annual unemployment data on a local level, rates vary from 5.8% to 8.8% in the service area (Table 62).

Table 62. Average Annual Unemployment Rate by Geographic Area (2020)^{ciii 58}

Geographic Area	Unemployment Rate
Benton County	8.2
Carroll County	7.4
Gibson County	7.0
Henry County	7.5
Lake County	8.8
Madison County	7.5
Obion County	7.0
Weakley County	5.8
Tennessee	7.5

In Tennessee and in the service area, the unemployment rate was elevated with the extended impact of COVID-19. Unemployment data show low unemployment rates in early 2020 and a sharp increase in April 2020.^{civ} Some recovery in employment rates took place during the second half of 2020 and in early 2021; compared to pre-pandemic levels, unemployment rates remained elevated until the fall of 2021.

Further, data from NWTEDC show a majority of Head Start/Early Head Start families had at least one parent who was employed at the start of the 2020-2021 program year, but not to the same degree as the larger population. At the end of enrollment, a majority of families had neither (or no) parent employed, in job training, or in school. This was likely a reflection of the impact of intermittent school and child care program closures and/or in-person learning. Many families faced employment challenges while also caring for young children (Table 63).^{cv}

Table 63. NWTEDC Head Start/Early Head Start Families Employment Status (2020-2021)^{cvi}

Program	At Enrollment	End of Enrollment
At least one parent/guardian is employed, in job training, or in school	837 (64.3%)	671 (39.1%)
Neither/No parent/guardian is employed, in job training, or in school	465 (35.7%)	1,043 (60.9%)
Total	1,302 (100%)	1,714 (100%)

⁵⁷ Rates greater than the statewide rate are highlighted.

⁵⁸ Rates greater than the statewide rate are highlighted.

During the COVID-19 pandemic, most Head Start/Early Head Start family members did not have the opportunity to work from home. Many are first line workers, or work in restaurants and in retail, among other industries. When businesses were forced to close, work opportunities were lost. Many families also had children at home that needed supervision. This emphasizes the continued need for the services provided by NWTEDC.

Table 64 reflects the top and bottom industries projected for growth in employment through 2028, in Tennessee. The top industry, projected to grow 1.85% annually is Professional, Scientific, and Technical Services, while Retail Trade is projected to experience the largest loss of 0.78% in employment annually.

Table 64. Projected Growth in Employment for Top/Bottom Industries in Tennessee (2018-2028)^{cvii}

Industry	Base Employment (2018)	Projected Employment (2028)	Numeric Change	% Change	Annual Growth Rate
Professional, Scientific, and Technical Services	140,711	168,965	28,254	20.08%	1.85%
Information	38,816	45,977	7,161	18.45%	1.71%
Health Care and Social Assistance	409,421	481,868	72,447	17.70%	1.64%
Transportation and Warehousing	179,410	209,827	30,417	16.95%	1.58%
Arts, Entertainment and Recreation	39,667	45,881	6,214	15.67%	1.47%
Admin and Support and Waste Management and Remediation	226,168	259,393	33,225	14.69%	1.38%
Accommodations and Food Services	297,486	339,639	42,153	14.17%	1.33%
Management and Company and Enterprises	50,188	56,514	6,326	12.60%	1.19%
Construction	124,500	137,723	13,223	10.62%	1.01%
Retail Trade	337,294	312,016	-25,278	-7.49%	-0.78%
Wholesale Trade	119,745	113,141	-6,604	-5.52%	-0.57%
Finance and Insurance	123,784	119,015	-4,769	-3.85%	-0.39%
Mining, Quarrying, Oil and Gas Extraction	3,511	3,384	-127	-3.62%	-0.37%

Table 65 describes the occupations that are projected to have the most growth in the west region of Tennessee, which includes the counties in the service area. The jobs with the largest projected growth require a mix of educational preparation, ranging from a high school diploma to a bachelor's or specialized degree. This highlights an ongoing need for access to educational opportunities in the service area.

Table 65. Rapidly Growing Occupations in Western Tennessee (2020)^{cviii}

Occupation	Educational Requirements	Projected Growth
Home Health Aides	High school diploma	199.22%
Personal Care Aides	High school diploma	133.74%
Physical Therapist Assistants	Associates Degree	71.82%
Residential Advisors	High school diploma	54.50%
Nursing Assistants	Specialized medical	51.33%
Medical and Health Services Managers	Bachelor's Degree	44.95%

According to the Workforce Innovation and Opportunity Act (WIOA), individuals with significant barriers to employment in West Tennessee include the population aged 55 and above, individuals below poverty, and a number of youth ages 16-24. Compared to the other regions, the West Region had the highest percentage of individuals 24 months from exiting TANF. The average number of those unemployed for 27 weeks or more in 2019 statewide (regional data not available) was 16,475. Of those, Black individuals represented 3,850, Hispanic individuals were 950, youth (ages 16-19) were 825, and females were 7,500 of the total.^{cix}

Total nonfarm employment in Tennessee decreased by 376,900 jobs between March 2020 and April 2020 as businesses were forced to close to contain the spread of COVID-19. The largest decreases occurred in leisure/hospitality, manufacturing, and professional/business services sectors.

The preliminary seasonally adjusted statewide unemployment rate for April 2020 was 14.7%, which is an unprecedented spike of 11.4% when compared to March's revised rate of 3.3%. This is Tennessee's highest unemployment rate in a generation. Before the pandemic, the state's all-time highest seasonally adjusted rate was 12.9%, which occurred in back-to-back months in December 1982 and January 1983.^{cx}

Education and Training

Educational opportunities within and outside the service area are accessible to residents. Community and technical schools provide trades training to students in the service area, and professional programs are available for certifications and licenses. However, access to these opportunities may be limited for some individuals due to factors such as finances, scheduling, child care, internet access, caring for a child with special needs, and transportation.

For individuals seeking employment as day laborers, onsite training is typically provided, as opposed to more formal training or required education.

NWTEDC has partnerships with University of Tennessee at Martin, University of Memphis, and Dyersburg State College. They also refer parents to TN College of Applied Technology and to TN Reconnect grants for free tuition at two-year programs at Dyersburg State and Nashville State Community College. New staff are also able to participate in professional development opportunities through local colleges, as well as online coursework through ProSolutions.

NWTEDC leadership report that due to poor internet connections, online learning is not readily available as a viable option in rural areas in the service area. Gibson County Connect is working toward providing connections to the most rural areas. Most families are using cell phones for internet connection, especially in Lake County.

Transportation

Public Transportation. NWTEDC administrators report that transportation is a challenge for enrolled families. Limited ride scheduling services are available, public transportation systems in the service area are inconsistent, and only Madison County has a public bus system.

The lack of public transportation can be a barrier for families seeking to obtain and maintain employment, access healthcare, and meet their families' daily needs. While many families own a vehicle, one of the largest challenges is paying for gas.

Access to Vehicles. In all counties within the service area, the percent of households with no vehicle available ranges from 5.9% to 11.5%, which is greater than the statewide rate. In Lake County, the rate of households with no vehicle available is more than double the state rate. Households without a vehicle (and households with one vehicle for two working parents) have to rely more heavily on alternative transportation, such as sharing vehicles or relying on public transportation, which is limited in the area.

Table 66. Households with No Vehicle Available by Geographic Area (2019)^{cx i} 59

Geographic Area	Percent of Households with No Vehicle Available
Benton County	6.9%
Carroll County	8.0%
Gibson County	7.0%
Henry County	5.9%
Lake County	11.5%
Madison County	8.0%
Obion County	7.1%
Weakley County	7.7%
Tennessee	5.7%

Most residents in the service area drive themselves to work in their own cars (Table 67), adding to the cost of living for the area. Commute times are under 30 minutes, varying from 18-26 minutes, which is fairly consistent with the rate in Tennessee (Table 68).

Table 67. Transportation to Work by Geographic Area (2019) ^{cx ii}

Geographic Area	Car, truck, or van: drove alone	Car, truck, or van: carpooled	Public transportation	Walked	Other means	Worked from home
Benton County	88.5%	8.2%	0.5%	0.2%	1.6%	1.0%
Carroll County	87.3%	5.6%	0.0%	1.3%	2.5%	3.3%
Gibson County	85.8%	7.9%	0.0%	1.2%	2.1%	3.0%
Henry County	83.6%	8.4%	0.1%	0.8%	4.3%	2.8%
Lake County	83.8%	8.9%	0.0%	2.5%	1.8%	3.1%
Madison County	83.3%	8.6%	0.6%	1.1%	3.4%	3.1%
Obion County	86.9%	7.4%	0.2%	1.9%	1.0%	2.6%
Weakley County	83.2%	6.8%	0.2%	3.4%	4.4%	2.0%
Tennessee	83.1%	8.9%	0.7%	1.3%	1.3%	4.7%

Table 68. Mean Travel Time to Work by Geographic Area (2019) ^{cx iii, 60}

Geographic Area	Mean Travel Time to Work (Minutes)
Benton County	24.2
Carroll County	26.8
Gibson County	24.3
Henry County	21.3
Lake County	18.1
Madison County	19.0
Obion County	20.6
Weakley County	20.7
Tennessee	25.2

Availability, reliability, and the cost of vehicles and gas may be barriers to transportation for Head Start/Early Head Start families.

Work and Training Schedules

While specific work and training schedules of families in the service area are not readily available, the top industries in the service area suggest a variety of schedules. Many Head Start/Early Head Start families served by NWTEDC work in factories or fast-food restaurants. With a mix of full-time and part-time occupations in the service area in management, business, science, and arts occupations; sales and office occupations; and production, transportation, and material moving occupations, it can be assumed that some individuals work traditional business hours while others work second or third shift.

⁵⁹ Rates greater than the statewide rate are highlighted.

⁶⁰ Values greater than the statewide rate are highlighted.

ELIGIBLE CHILDREN AND PREGNANT WOMEN



Children must meet an age requirement to participate in Early Head Start or Head Start. The age requirement is birth to 2 years old (up to age 3) for Early Head Start and 3 to 5 years old for Head Start. Children are eligible to receive services if they meet one or more of the Head Start/Early Head Start eligibility requirements: their family has an income at or below the federal poverty level, the family is eligible for public assistance (e.g., TANF, SSI), the child is experiencing homelessness, or the child is in foster care. At least 10% of program enrollment must be children eligible for services under IDEA (children with disabilities).

Table 69 provides estimated numbers of eligible children in the service area by primary eligibility type as compared to the number of children served by NWTEDC (2020-2021). Primary eligibility captures only one factor by which a child is eligible for services, and many children have needs that fall into multiple categories.

Table 69. Estimated Number of Children in Service Area Eligible for Head Start or Early Head Start Services Compared to the Number of Head Start/Early Head Start Children Served (2020-2021) by NWTEDC (based on primary eligibility)⁶¹

Eligibility Criteria	Estimated Number of Eligible Children in Northwest Tennessee Economic Development Council Service Area		Number of Children Served by Northwest Tennessee Economic Development Council ^{cxiv}
	Age 0-3	Age 0-5	Age 0-5
Income-eligible children		5,682	948
Income-eligible pregnant women	1,169		8
Children experiencing homelessness		<193	193
Children in foster care		<81	81
Children receiving public assistance	540	900	169
Other/Over income		10,941	153
Eligibility based on other type of need, but not counted above			137
Children with disabilities (10% program enrollment requirement)	370	1,172	178

⁶¹ The source for each of the data points in this table is described in the sections that follow.

Child Poverty and Geographic Location

In most of the NWTEDC service area, the child poverty (0-18) rate and the poverty rate among children birth to age 5 is greater than the statewide rate. While there is a wide range within the county, poverty rates are significantly higher (almost double) in Lake County, where over half of the children under five are living below the poverty level.

There are an estimated 5,682 children in the service area under age 5 and living in poverty who are income-eligible for participation in Head Start/Early Head Start. Of these, 3,409 are birth to age 3 (Table 70).

Table 70. Poverty Rate and Number of Children Birth to Age 5 Living in Poverty by Geographic Area (2019)^{cxv,62}

Geographic Area	Poverty Rate for Children 0-18	Poverty Rate for Children < 5 Years Old	Number of Children <5 Years Old	Number of Children < Age 5 Living in Poverty	Number of Children < Age 3 Living in Poverty ⁶³
Benton County	23.4%	39.2%	740	290	174
Carroll County	24.8%	17.1%	1,566	268	161
Gibson County	20.2%	33.0%	3,047	1,006	604
Henry County	32.2%	35.3%	1,666	588	353
Lake County	41.5%	55.2%	319	176	106
Madison County	30.6%	35.3%	5,994	2,113	1,268
Obion County	30.3%	36.1%	1,659	599	359
Weakley County	27.6%	39.3%	1,632	642	385
Service Area			16,623	5,682	3,409
Tennessee	21.9%	25.6%	397,754	101,810	61,086

The greatest estimated number of children who are income-eligible for participation in Head Start/Early Head Start reside in Madison, Gibson, and Weakley County, with 66% of income-eligible children in the service area residing in these three counties.

In the service area, there were 3,416 live births in 2019. While exact data on the number of pregnant women who would be income-eligible for Early Head Start in the service area is not available, the number can be estimated by applying the county poverty rate for children birth to age 5 to the number of live births annually (Table 71). There are an estimated 1,169 pregnant women who are eligible for NWTEDC Early Head Start.

Table 71. Estimated Number of Income-Eligible Pregnant Women by County (2019)

Geographic Area	Total Births (2019)	Poverty Rate of Children < Age 5	Estimated Number of Income-Eligible Pregnant Women ⁶⁴
Benton County	180	39.2%	71
Carroll County	336	17.1%	57
Gibson County	571	33.0%	188
Henry County	324	35.3%	114
Lake County	71	55.2%	39
Madison County	1,251	35.3%	442
Obion County	354	36.1%	128
Weakley County	329	39.3%	129
Service Area	3,416		1,169

⁶² Rates greater than the statewide rate are highlighted.

⁶³ Estimated by calculating 3/5 of the number of children birth to age 5 living in poverty.

⁶⁴ Estimated by multiplying the total number of births by the poverty rate for children under age 5

Race and Ethnicity of Eligible Children in Poverty

Data for the number of young children living in poverty by race is not readily accessible from public sources. As described in the Overview of Service Area section, there are disparities with regard to poverty rate and race. In Tennessee, in 2019, poverty rates were highest among children that are Hispanic (32%), Black or African American (31%) or two or more races (30%).^{cxvi}

Language of Eligible Children

The primary language of individuals in the service area is English. Table 72 describes the percent of people in the service area by language spoken at home and county of residence. The largest populations of Spanish speaking individuals reside in Madison and Obion County.

Table 72. Language Spoken at Home (Age 5 and Over) by Geographic Area and Percentage of Population (2019)^{cxvii}

Geographic Area	English	Spanish	Other Indo-European	Asian and Pacific Island	Other
Benton County	98.9%	0.4%	0.5%	0.1%	0.1%
Carroll County	97.4%	1.8%	0.5%	0.2%	0.1%
Gibson County	97.3%	1.7%	0.8%	0.2%	0.1%
Henry County	97.4%	1.6%	0.4%	0.5%	0.1%
Lake County	97.9%	1.7%	0.1%	0.3%	0.0%
Madison County	95.3%	3.5%	0.4%	0.5%	0.2%
Obion County	95.9%	2.8%	0.6%	0.2%	0.4%
Weakley County	98.0%	1.3%	0.3%	0.2%	0.2%
Tennessee	92.8%	4.2%	1.2%	1.1%	0.7%

In NWTEDC Head Start/Early Head Start, a majority of enrolled children are Non-Hispanic or Latino. A majority of enrolled families speak English as their primary language at home, followed by Spanish.^{cxviii}

Cultural Trends

The percent of the population in the service area that is foreign born ranges from 1.1% to 3%, all well below the statewide rate of 5.1%.

Within the service area, Madison County has the highest rate of individuals who are foreign-born (Table 73). Three counties (Gibson, Lake, and Obion) have a high percentage of foreign-born population that is not a U.S. citizen, representing 898 individuals. Here, the percentage is greater than the statewide rate.

Table 73. Foreign-Born Population by Geographic Area (2019)^{cxix, 65}

Geographic Area	Number and Percent Foreign-Born	Number and Percent of Foreign-Born Population that is non-US Citizen
Benton County	249 (1.5%)	56 (22.5%)
Carroll County	330 (1.2%)	154 (46.7%)
Gibson County	687 (1.4%)	445 (64.8%)
Henry County	350 (1.1%)	130 (37.1%)
Lake County	94 (1.3%)	61 (64.9%)
Madison County	2,959 (3.0%)	1,582 (53.5%)
Obion County	589 (1.9%)	392 (66.6%)
Weakley County	574 (1.7%)	340 (59.2%)
Tennessee	344,162 (5.1%)	209,885 (61.0%)

⁶⁵ Rates greater than the statewide rate are highlighted.

Children Experiencing Homelessness

In all counties in the service area, public school homeless liaisons will reach out to NWTEDC if an older sibling is enrolled in their school and a younger sibling may be eligible for Head Start/Early Head Start.

In the service area, data on the percent of homeless students, by school district, may provide insight into where young children experiencing homelessness reside or take shelter. As described in Table 74, school districts with rates of students experiencing homelessness that are greater than the statewide rate are all in Carroll County: Hollow Rock-Bruceton Special School District, Huntingdon Special School District, and South Carroll County Special School District.

Table 74. Percent Homeless Students (Out of Total Pre-K to Grade 12 Enrollment) by School District (Fall 2021)^{cxx, 66}

County	School District	Homeless
Benton County	Benton School System	1.1%
Carroll County	Hollow Rock-Bruceton Special School District	2.6%
	Huntingdon Special School District	4.2%
	McKenzie Special School District	Less than 1%
	South Carroll County Special School District	4.8%
	West Carroll County Special School District	Less than 1%
Gibson County	Humboldt City Schools	Less than 1%
	Milan Special School District	Less than 1%
	Trenton Special School District	Less than 1%
	Bradford Special School District	*
	Gibson County Special School District	Less than 1%
Henry County	Henry County Schools	Less than 1%
	Paris Special School District, K-8	Less than 1%
Lake County	Lake County School System	*
Madison County	Madison County Schools	1%
	West Tennessee School for the Deaf	*
Obion County	Obion County Schools	*
	Union City Schools	Less than 1%
Weakley County	Weakley County Schools	Less than 1%
	Tennessee	1.1%

* Data suppressed to protect student privacy.

During the 2020-2021 program year, NWTEDC Head Start/Early Head Start served 187 children who experienced homelessness at some point during the program year: 62 in Early Head Start and 125 in Head Start, helping to meet the unique needs of families experiencing homelessness.^{cxxi}

As of January 2020, Tennessee had an estimated 7,256 people experiencing homelessness on any given day, as reported by Continuums of Care to the U.S. Department of Housing and Urban Development (HUD). Of that total, 508 were family households, 570 were Veterans, 353 were unaccompanied young adults (aged 18-24), and 1,153 were individuals experiencing chronic homelessness.^{cxxii} This represents a 3% reduction from 2019.

Public school data reported to the U.S. Department of Education during the 2018-2019 school year shows that an estimated 19,747 public school students experienced homelessness over the course of the year. Of that total, 585 students were unsheltered, 1,367 were in shelters, 1,903 were in hotels/motels, and 15,892 were doubled up.

⁶⁶ Rates greater than the statewide rate are highlighted.

In Tennessee, eviction moratoriums put in place during the COVID-19 pandemic have ended. Protection from eviction through the federal CARES Act eviction moratorium and CDC's Emergency Order, *Temporary Halt in Residential Evictions to Prevent the Further Spread of COVID-19* ended in summer 2021.

As of March 13, 2020, Tennessee renters who have experienced economic hardship as a result of the COVID-19 pandemic and who meet additional eligibility requirements can qualify for the Tennessee Housing Development Agency's COVID-19 Rent Relief program. Households receiving other federal housing assistance ("section 8") are eligible to receive rent relief assistance funds if overlapping costs are not already covered by other federal sources. Eligibility requires that individuals have an income equal to or less than 80% of the area median income. ^{cxixiii}

The expiration of the eviction moratorium and eventual expiration of protections for renters may cause some families to face eviction from their residences. Repayment barriers and challenges agreeing upon a repayment schedule could also make it difficult for families to maintain affordable housing.

Children in Foster Care

In 2019, there were 9,290 children in foster care in Tennessee. Of the children in foster care, there were 563 children under age 1, and 2,454 children ages 1 to 5 years old. There are an estimated 3,017 children birth to age 5 in foster care in Tennessee who would be categorically eligible for Head Start/Early Head Start. ^{cxixiv} County level data for the number of children in foster care are not readily publicly available. NWTEDC enrolled 81 children who were in foster care at any point during the program year.

NWTEDC leadership reports that in the service area, many children are removed from their homes due to parental abuse of opioids. NWTEDC has a strong relationship with the Department of Children Services (DCS) who refer foster children for the Head Start/Early Head Start program. DCS caseworker often start the application process with Head Start/Early Head Start. NWTEDC leadership report that referrals decreased during the start of the pandemic and began to increase upon the reopening of in-person learning. Many foster children in the service area are placed in kinship care.

Table 75. Children in Foster Care by Age Group in Tennessee (2019) ^{cxixv}

Age Group	Number	Percent of all Children in Foster Care
<1	563	6%
1 to 5	2,454	26%
6 to 10	1,811	19%
11 to 15	2,385	26%
16 to 20	2,077	22%
Total	9,290	100%

In the service area, data on the percent of students in foster care by school district may provide insight into where children in foster care reside. As described in Table 76, school districts with rates of students in foster care that are greater than the statewide rate include Humboldt City Schools and Bradford Special School District, both in Gibson County.

Table 76. Percent of Students in Foster Care (Out of Total Enrollment) by School District (2021)^{cxxvi,67}

County	School District	% Foster Care
Benton County	Benton School System	Less than 1%
Carroll County	Hallow Rock-Bruceton Special School District	*
	Huntingdon Special School District	Less than 1%
	McKenzie Special School District	Less than 1%
	South Carroll County Special School District	*
	West Carroll County Special School District	Less than 1%
Gibson County	Humboldt City Schools	2.2%
	Milan Special School District	Less than 1%
	Trenton Special School District	Less than 1%
	Bradford Special School District	1.2%
	Gibson County Special School District	Less than 1%
Henry County	Henry County Schools	Less than 1%
	Paris Special School District, K-8	Less than 1%
Lake County	Lake County School System	*
Madison County	Madison County Schools	Less than 1%
	West Tennessee School for the Deaf	*
Obion County	Obion County Schools	Less than 1%
	Union City Schools	Less than 1%
Weakley County	Weakley County Schools	Less than 1%
	Tennessee	Less than 1%

* Data suppressed to protect student privacy.

Across the service area, the number of reports and incidents of substantiated child abuse and neglect are generally greater than the statewide rate, but have been fluctuating or declining over the past three years.

Table 77. Number of Reported Child Abuse/Neglect (0-18) by Year and Geographic Area (2018-2020)^{cxxvii 68}

Geographic Area	2018	2019	2020	2020 Substantiated Cases	Three-Year Trend
Benton County	227 (7.1%)	228 (7.2%)	177 (5.6%)	20 (6.3%)	Declining
Carroll County	371 (6%)	381 (6.3%)	335 (5.5%)	41 (6.7%)	Declining
Gibson County	553 (4.7%)	590 (5.0%)	539 (4.6%)	79 (6.7%)	Declining
Henry County	375 (5.7%)	399 (6.1%)	342 (5.2%)	51 (7.8%)	Fluctuating
Lake County	76 (7.4%)	90 (9.1%)	61 (6.1%)	5 (5.0%)	Fluctuating
Madison County	976 (4.3%)	1,105 (4.9%)	994 (4.4%)	78 (3.5%)	Fluctuating
Obion County	354 (5.5%)	400 (6.2%)	293 (4.6%)	30 (4.7%)	Fluctuating
Weakley County	343 (5.1%)	356 (5.3%)	319 (4.8%)	43 (6.4%)	Declining
Tennessee	70,137 (4.7%)	75,759 (5.0%)	67,158 (4.5%)	6,916 (4.6%)	Fluctuating

Shortly after COVID-19 mitigation measures were implemented in Tennessee, a decline in reports of suspected child abuse and neglect was observed. Additionally, calls handled by the Tennessee Child Abuse Hotline decreased nearly 19 percent in March 2020, when compared to March 2019.^{cxxviii}

During stay-at-home orders and closures, children were not seen by school staff, medical professionals, and other individuals who are mandated reporters of suspected abuse and neglect. In Tennessee, the Children's Advocacy Center noted "when this pandemic is lifted and children go back to school, we'll see a large influx of reports of child abuse, because it's typically when children are home for Christmas or out of school, we'll generally not see as many cases of abuse."

⁶⁷ Rates greater than the statewide rate are highlighted.

⁶⁸ Rates greater than the statewide rate are highlighted.

Children Receiving Public Assistance

Children are eligible to enroll in Head Start/Early Head Start if they are recipients of public assistance, including Temporary Assistance for Needy Families (TANF) or Supplemental Security Income (SSI). Tables 78 and 79 describe the number and rate of children who are recipients of TANF. Table 80 describes the number of child recipients of SSI.

Table 78. Number of Child (0-18) Recipients of TANF by Geographic Area and Date^{xxxix}

Geographic Area	2019	2020	2021	Trend
Benton County	95	85	78	Decreasing
Carroll County	214	219	166	Decreasing
Gibson County	380	359	316	Decreasing
Henry County	189	175	156	Decreasing
Lake County	73	63	50	Decreasing
Madison County	1,167	1,174	961	Decreasing
Obion County	213	190	131	Decreasing
Weakley County	246	227	156	Decreasing
Service Area	2,577	2,492	2,014	Decreasing
Tennessee	43,088	38,585	30,524	Decreasing

Table 79. Rate of Child (0-18) Recipients of TANF by Geographic Area and Date^{xxxx 69}

Geographic Area	2019	2020	2021	Trend
Benton County	5.9	5.3	4.8	Decreasing
Carroll County	7.7	7.9	6.0	Decreasing
Gibson County	7.7	7.3	6.4	Decreasing
Henry County	5.9	5.5	4.9	Decreasing
Lake County	10.5	9.0	7.2	Decreasing
Madison County	11.9	11.9	9.8	Decreasing
Obion County	7.1	6.3	4.3	Decreasing
Weakley County	7.4	6.8	4.7	Decreasing
Tennessee	6.3	5.6	4.4	Decreasing

Table 80. Number of Child (0-18) Recipients of SSI by Geographic Area (December 2020)^{xxxxi}

Geographic Area	2020
Benton County	45
Carroll County	105
Gibson County	202
Henry County	111
Lake County	33
Madison County	514
Obion County	125
Weakley County	91
Service Area	1,226
Tennessee	22,315

To estimate the number of children birth to age 5 who are receiving TANF and SSI benefits in the service area, birth to age 18 data can be used as a proxy. Using the most recent data available (2020-2021), the estimated number of children birth to age 5 who are eligible for Head Start/Early Head Start based on receipt of public assistance is 900 children.⁷⁰

⁶⁹ Rates greater than the statewide rate are highlighted.

⁷⁰ Estimated by calculating 5/18 of the number of children birth to age 18 who are recipients of TANF and SSI benefits.

Children with Disabilities

Head Start Program Performance Standards (HSPPS) require that at least 10% of program enrollment is allocated to children eligible for services under IDEA (i.e., early intervention and preschool special education). In the 2020-2021 program year, children with a diagnosed disability in the NWTEDC Head Start program represented 10.86% of enrollment and 11.4% of enrollment in the Early Head Start program. As described in Table 81, a majority of school districts in the service area have rates of students with disabilities (out of total enrollment) that are greater than the statewide rate.

Table 81. Percent Students with Disabilities (Out of Total PreK-12th Grade Enrollment) by School District (2019-2020)^{xxxxii, 71}

County	School District	Total Enrollment	% Students with Disabilities	Students with Disabilities
Benton County	Benton School System	1,927	18.9%	364
Carroll County	Hollow Rock-Bruceton Special School District	617	16.2%	100
	Huntingdon Special School District	1,277	14.3%	183
	McKenzie Special School District	1,167	17.1%	200
	South Carroll County Special School District	312	13.5%	42
	West Carroll County Special School District	834	17.5%	146
Gibson County	Humboldt City Schools	1,101	13.8%	152
	Milan Special School District	1,836	16%	294
	Trenton Special School District	1,258	15.4%	194
	Bradford Special School District	578	13.1%	76
	Gibson County Special School District	3,793	12.6%	478
Henry County	Henry County Schools	2,935	14.8%	434
	Paris Special School District, K-8	1,519	18.9%	287
Lake County	Lake County School System	737	22.1%	163
Madison County	Madison County Schools	11,813	14.3%	1,689
	West Tennessee School for the Deaf	26	Greater than 99%	26
Obion County	Obion County Schools	2,995	14.7%	440
	Union City Schools	1,524	12.6%	192
Weakley County	Weakley County Schools	3,823	14.7%	562
	Total Service Area	40,072		6,022
	Tennessee	957,423	13.5%	129,252

NWTEDC partners with the Tennessee Early Intervention Services (TEIS) and local school districts to ensure children enrolled in the Head Start/Early Head Start programs receive timely referrals and services, if eligible, as well as transition services into kindergarten.

The Tennessee Early Intervention System (TEIS) coordinates services to infants and toddlers (birth to age 3) with disabilities. Preschool (ages 3-5) special education services are coordinated by the Tennessee Department of Education. Most recent data publicly reported from TEIS show 370 infants and toddlers receiving early intervention services in the service area. These 370 children make up 4.4% of the total number of children served by early intervention statewide (Table 82).

Table 83 provides an estimate of students receiving early childhood special education services (age 3-5). While the data on children with disabilities is reported in the aggregate for PreK through grade 12, the number can be estimated, assuming an even distribution across the grade levels.

⁷¹ Rates greater than the statewide rate are highlighted.

Table 82. Early Child Intervention (Birth to Age 3) by Geographic Area and Year^{cxxxiii}

	2018	2019	2020
Benton County	19	16	18
Carroll County	28	24	36
Gibson County	84	94	81
Henry County	31	30	28
Lake County	11	12	12
Madison County	121	137	132
Obion County	46	34	32
Weakley County	24	30	31
Service Area	364	377	370
Tennessee	6,800	7,656	8,323

Table 83. Percent of Students with Disabilities (Out of Total PreK- 12th Grade Enrollment) by School District (2019-2020)^{cxxxiv, 72}

County	School District	Students with Disabilities PreK-12	Estimate of Pre-K Children (Age 3-5) Served in Public School Special Education
Benton County	Benton School System	364	49
Carroll County	Hollow Rock-Bruceton Special School District	100	13
	Huntingdon Special School District	183	24
	McKenzie Special School District	200	26
	South Carroll County Special School District	42	5.6
	West Carroll County Special School District	146	19
Gibson County	Humboldt City Schools	152	20
	Milan Special School District	294	39
	Trenton Special School District	194	26
	Bradford Special School District	76	10
	Gibson County Special School District	478	64
Henry County	Henry County Schools	434	58
	Paris Special School District, K-8	287	38
Lake County	Lake County School System	163	22
Madison County	Madison County Schools	1,689	225
	West Tennessee School for the Deaf	26	3
Obion County	Obion County Schools	440	59
	Union City Schools	192	26
Weakley County	Weakley County Schools	562	75
	Total Service Area	6,022	802
	Tennessee	129,252	17,233

Table 84 describes the total number of children birth to age 5 with disabilities in the service area.

Table 84. Number of Children Birth to Age 5 with Disabilities by Age Group and Geographic Area

	Children Birth to Age 3 (Early Intervention)	Children Ages 3 to 5 (Preschool Special Education)	Children Birth to Age 5 with Disabilities
NWTEDC Service Area	370	802	1,172

During the 2020-2021 program year, Northwest Tennessee Head Start/Early Head Start served 143 Head Start children with a disability. Combining the number of children served in TEIS as well as the number of children receiving special education services in the school districts in the service area, it is estimated that approximately 1,172 children with disabilities are categorically eligible for Head Start/Early Head in the service area.

⁷² While data on children with disabilities is reported in the aggregate for PreK - grade 12, the number can be estimated by assuming an even distribution across the 15 grades (2 PreK grades, k-12; students with disabilities x 15, divided by two).

AGENCIES SERVING ELIGIBLE CHILDREN

Child Care Centers and Family Child Care

The COVID-19 pandemic has caused dramatic changes in the landscape for child care and early education programs in the United States. Historically, child care programs have provided care on thin margins and were asked to continue to do so during the pandemic, leading to extreme financial upheaval.

Nationwide, the child care industry has been greatly impacted as child care facilities are reporting a stark lack of staff and inability to retain existing staff. The National Association for the Education of Young Children found that four in five child care programs nationwide are understaffed, with 78% of those surveyed indicating that low wages are the main reason for the difficulty in recruiting new employees.^{cxv}

Additional burdens were placed (and often continue) on these strained programs to meet a fluctuating and unpredictable demand for child care, increase health and safety procedures (e.g., decreased ratios, more stringent cleaning procedures), and shift programming to full or partial virtual learning upon mandate. As a result of these burdens, costs for providers increased while enrollment in child care programs decreased, leaving child care programs across the county to navigate the ensuing financial consequence.^{cxvi}

In the NWTEDC service area, the total capacity of licensed child care centers, group child care homes, and family child care homes is 13,305.

The number and capacity of licensed child care centers is described in Table 85, along with the number of child care centers that are licensed to serve infants/toddlers. While 46% of child care centers in the service area are licensed to serve infants/toddlers, this reflects the maximum capacity of programs to serve infants; these programs are not always serving this age group. It is also important to note that licensed capacity does not necessarily reflect the number of children that a program would typically have enrolled. Other factors, such as class size limits, may impact the number of children served at any given time.



Table 85. Number (and Capacity) of Child Care Centers by Geographic Area (February 2022) ^{cxvii 73}

Geographic Area	# of Child Care Centers	Capacity of Child Care Centers	# of Child Care Facilities Participating in PreK	# of Child Care Facilities Participating in HS or EHS	# of Child Care Facilities Serving Infants / Toddlers
Benton County	5	341	1	2	2
Carroll County	14	921	5	1	6
Gibson County	30	2,039	7	3	12
Henry County	22	1,635	5	3	8
Lake County	2	104	1	1	1
Madison County	50	4,293	8	1	27
Obion County	26	2,391	5	1	13
Weakley County	24	1,266	6	1	11
Service Area Total	173	12,990	38	13	80

Table 86 describes the number and capacity of registered family child care homes. Family child care providers may provide care for at least five, and up to seven, unrelated children in their home. Henry County

⁷³ TN child care centers may provide care for 13 or more children.

has the greatest number of family child care homes (3), which represents a third of all family child care home capacity in the service area.

Table 86. Number and Capacity of Licensed Family Child Care Homes by Geographic Area (February 2022) ^{cxviii}

Geographic Area	Number of Family Child Care Homes	Capacity of Family Child Care Homes	Number Serving Infants/Toddlers
Benton County	0	0	0
Carroll County	1	7	1
Gibson County	2	14	2
Henry County	3	21	3
Lake County	0	0	0
Madison County	2	14	2
Obion County	1	7	1
Weakley County	0	0	0
Service Area Total	9	63	9

Table 87 describes the number of group child care homes (21) in the service area (out of the 488 in the state). The homes are licensed by DHS and provide care for at least eight but not more than twelve children.

Table 87. Number and Capacity of Group Child Care Homes by Geographic Area (February 2022) ^{cxvix}

Geographic Area	Number of Group Child Care Homes	Capacity of Group Child Care Homes	Number Serving Infants/Toddlers
Benton County	4	48	3
Carroll County	5	60	5
Gibson County	3	36	3
Henry County	0	0	0
Lake County	0	0	0
Madison County	4	48	4
Obion County	2	24	2
Weakley County	3	36	3
Service Area Total	21	252	20

In the service area, 109 programs are licensed to serve infants/toddlers. This represents 53.7% of all child care programs.

Table 88. Summary of Child Care Providers Serving Infants by Geographic Area (February 2022) ^{cxl}

Geographic Area	Child Care Centers serving Infants / Toddlers	Family Child Care Homes serving Infants / Toddlers	Group Child Care Homes serving Infants / Toddlers	Total serving Infants / Toddlers	% of all Programs serving Infants / Toddlers
Benton County	2	0	3	5	55.6%
Carroll County	6	1	5	12	60.0%
Gibson County	12	2	3	17	48.6%
Henry County	8	3	0	11	44.0%
Lake County	1	0	0	1	50.0%
Madison County	27	2	4	33	58.9%
Obion County	13	1	2	16	55.2%
Weakley County	11	0	3	14	51.9%
Service Area Total	80	9	20	109	53.7%

There are 203 total child care programs in the NWTEDC service area, with the licensed capacity to serve 13,305 children. It is important to note that total capacity includes school age care, and is available for families of all income levels, reducing the number of slots available for children birth to age 5 from low-income families.

Table 89. Summary of Number and Capacity of Child Care Providers by Geographic Area (February 2022) ^{cxli}

Geographic Area	Child Care		Family Child Care Homes		Group Child Care Homes		Total	
	Number	Capacity	Number	Capacity	Number	Capacity	Number	Capacity
Benton County	5	341	0	0	4	48	9	389
Carroll County	14	921	1	7	5	60	20	988
Gibson County	30	2,039	2	14	3	36	35	2,089
Henry County	22	1,635	3	21	0	0	25	1,656
Lake County	2	104	0	0	0	0	2	104
Madison County	50	4,293	2	14	4	48	56	4,355
Obion County	26	2,391	1	7	2	24	29	2,422
Weakley County	24	1,266	0	0	3	36	27	1,302
Service Area Total	173	12,990	9	63	21	252	203	13,305

Child care program quality in the state is measured by Tennessee's Star-Quality Child Care Program, a voluntary quality rating and improvement system (QRIS) that evaluates and recognizes programs that meet quality standards. Child care programs may earn up to 3 Stars. In Northwest Tennessee Head Start/Early Head Start's service area, 45.3% of child care programs are participating in the Star-Quality Child Care Program.

A majority of participating programs are rated 3 Stars. All of Northwest Tennessee Head Start/Early Head Start centers are rated 3 Stars, among the highest quality programs in the state.⁷⁴ This distinction highlights the quality of the Head Start/Early Head Start program.

Table 90. Number and Rating of Star Quality Programs by Geographic Area ^{cxlii}

Geographic Area	0 Stars	1 Star	2 Stars	3 Stars	N/P	New	Total Star Quality Programs	% of programs enrolled in the Star Quality Program
Benton County	1	0	0	6	0	1	8	88.9%
Carroll County	0	0	1	8	1	3	13	65.0%
Gibson County	0	0	1	13	1	2	17	48.6%
Henry County	0	0	2	6	3	0	11	44.0%
Lake County	0	0	0	1	0	0	1	50.0%
Madison County	1	0	0	13	0	1	15	26.8%
Obion County	0	0	1	10	0	2	13	44.8%
Weakley County	0	0	2	12	0	0	14	51.9%
Service Area Total	2	0	7	69	5	9	92	45.3%

When comparing the number of children under 5 years old in the service area to total child care capacity, which includes school age children, the number of children under 5 years old (16,623 children) far exceeds total child care capacity (13,305 slots) (Table 91). This does not necessarily reflect unmet need, as children may be served in other settings, such as public pre-kindergarten, and not all families with young children will need or want care. Lake County is the only county in which the child care capacity is even lower than the number of children under age 5 living in poverty.

⁷⁴ While PreK partnership sites are high quality programs, they may not be participating in the QRIS.

Table 91. Number of Children Under Five Years Old and Number of Children Under Five Years Old Living Below Poverty Compared to Total Child Care Capacity^{cxliii}

Geographic Area	Number of Children <5 Years Old ^{cxliv}	Number of Children < Age 5 Living in Poverty ^{cxlv}	Child Care Capacity (including School Age) ^{cxlvi 75}
Benton County	740	290	389
Carroll County	1,566	268	988
Gibson County	3,047	1,006	2,089
Henry County	1,666	588	1,656
Lake County	319	176	104
Madison County	5,994	2,113	4,355
Obion County	1,659	599	2,422
Weakley County	1,632	642	1,302
Service Area Total	16,623	5,682	13,305

Further, Northwest Tennessee Head Start/Early Head Start shares its service area with another Head Start/Early Head Start grantee. Tennessee State University's Tennessee CAREs provides Early Head Start in Henry, Gibson, and Weakley Counties.^{cxlvii}

Home Visiting

Evidence Based Home Visiting (EBHV) is a key service known to prevent and mitigate the impact of ACEs and is a voluntary, in-home service for at-risk pregnant women and caregivers of infants and children up to age five. EBHV services help prevent child abuse and neglect, support positive parenting, improve maternal and child health, and promote child development and school readiness.^{cxlviii}

Both EBHV and the Child Health and Development Program (CHAD) were essential to the development of a new statewide model of care coordination: Community Health Access and Navigation in Tennessee (CHANT). CHANT represents the integration and streamlining of three public health programs - Help Us Grow Successfully (HUGS), Children's Special Services (CSS) and TennCare Kids Community Outreach - with the goal of enhancing family-centered engagement, navigation of medical and social services referrals, and impacting pregnancy, child and maternal health outcomes. Care coordination addresses interrelated medical, social, developmental, behavioral, educational, and financial needs to achieve optimal health and wellness outcomes.^{cxlix}

The Tennessee Department of Health completed implementation of CHANT in all Tennessee counties by July 2019. CHAD referrals originating from the Department of Children's Services (DCS) are sent directly to local CHANT teams for screening, assessment, and care coordination. Each state county health department now incorporates the CHANT process for engaging the following target populations:

- Pregnant and Postpartum adolescents and women
- All children 0-21 years
- Children and Youth with Special Healthcare Needs (CYSHCN) (Birth – 21 years)

The priority population for EBHV services includes families with:

- Low income
- Pregnant women younger than age 21

⁷⁵ Includes licensed child care centers, registered family child care homes, and registered group child care homes. Child care capacity totals that are less than the number of children birth to age 5 are highlighted.

- A history of child abuse or neglect, or have had interactions with child welfare services
- A history of substance abuse or need for substance abuse treatment
- Users of tobacco products in the home
- Children with developmental delays or disabilities and/or families that include individuals who are serving or have formerly served in the Armed Forces, including such families that have members of the Armed Forces who have had multiple deployments outside of the United States.

While both EBHV and CHANT provide home based visits, the programs differ in both intent and intensity. Each program has different service delivery models and enrollment criteria that are designed to result in different outcomes for participants. The model provided by CHAD/CHANT is evidence informed care coordination, while EBHV programs are evidence based and longer term. EBHV programs are most effective when families participate in the program for the recommended period, with services beginning prenatally or at birth.

The Tennessee Department of Health provides funding to 18 agencies to implement evidence-based home visiting services in 95 counties across the state; this expansion from 2020 currently covers all counties in the service area that were previously not served.^{cl}

In Tennessee, a total of 2,914 children and their families received home visiting services from July 1, 2019–June 30, 2020 through evidence-based or research-based home visiting programs (EBHV and CHAD). Services included 28,909 EBHV home visits and 97 CHAD home visits.^{cli}

Table 92 summarizes home visiting services available in Northwest Tennessee’s Head Start/Early Head Start service area. Data on the number of children and families served in the home visiting programs is not publicly available.

Table 92. Evidence-based Home Visiting Offered in Northwest Tennessee Head Start/Early Head Start’s Service Area as of June 2020^{clii}

Implementing Agency	Counties in Service Area Served	Eligibility Criteria
University of Tennessee, Martin – Healthy Families West TN	Lake, Benton, Carroll, Weakley, Henry, Obion	- First time mothers - Mothers under the age of 21 with multiple children (enrollment prenatally and until the child is 2 months old)
Jackson-Madison County General Hospital - Madison	Gibson Madison	- First time mothers - Mothers under the age of 21 with multiple children (enrollment prenatally and until the child is 2 months old)

Publicly Funded Preschool

Tennessee preschool enrolled 18,465 children in 2019-2020, an increase of 586 children from the prior year. Tennessee ranks 29th among states for access for 4-year-olds and 32nd for 3-year-olds. Tennessee meets 9 out of 10 quality benchmarks.^{cliii} In the NWTEDC service area, PreK programs are beginning to enroll three-year-old children and are permitted to do so after exhausting the number of eligible four-year-old children, which can present a challenge for Head Start enrollment.

Pre-kindergarten enrollment by school district, as reported by the Tennessee Department of Education, is described in Table 93. There are 1,380 publicly funded pre-kindergarten slots available in Northwest Tennessee's Head Start/Early Head Start service area. NWTEDC leadership report that some local school districts may also use local funds to support additional PreK classrooms. Tennessee's public pre-kindergarten program is voluntary and available to all four-year-old children. The program prioritizes at-risk children and high-priority communities.^{cliv}

Table 93. Public Pre-kindergarten Enrollment by School District (2019-2020)^{clv}

County	School District	Number of Classes	Capacity
Benton County	Benton School System	2	40
Carroll County	Hollow Rock-Bruceton Special School District	1	20
	Huntingdon Special School District	3	60
	McKenzie Special School District	1	20
	South Carroll County Special School District	1	20
	West Carroll County Special School District	2	40
Gibson County	Humboldt City Schools	5	100
	Milan Special School District	5	100
	Trenton Special School District	4	80
	Bradford Special School District	1	20
	Gibson County Special School District	4	80
Henry County	Henry County Schools	3	60
	Paris Special School District, K-8	3	60
Lake County	Lake County School System	2	40
Madison County	Jackson Madison County	18	360
	West Tennessee School for the Deaf	0	0
Obion County	Obion County Schools	5	100
	Union City Schools	3	60
Weakley County	Weakley County Schools	6	120
	Tennessee	69	1,380

NWTEDC is a provider of publicly funded pre-kindergarten services in twelve classrooms at eight sites through collaborative partnership agreements with local school systems. Sites are located in Carroll County (2), Gibson County (2), Henry County (2) and Madison County (2). Each classroom is led by a pre-kindergarten state licensed Teacher (school district funded) and an Assistant Teacher (NWTEDC HS/EHS funded) in each Pre-K HS classroom, with 20 children per classroom. The school systems and NWTEDC are responsible for collaboratively observing and monitoring center operations and staff performance.

These partnership programs leverage funds and coordinate systems to provide current services for Head Start children in pre-kindergarten classrooms for 180 days. This has been critical to the successful implementation of NWTEDC's early childhood education programs and has enhanced the agency's ability to meet the needs of local communities across a large geographic area.

FAMILY, STAFF, AND COMMUNITY INSIGHTS

Family, staff, and community input are valuable sources of data to guide program options and services and to enhance collaborations among partners. In February 2022, NWTEDC conducted a Head Start/Early Head Start Family Survey, a Head Start/Early Head Start Staff Survey, and a Community Provider Survey as important sources of data to inform this Community Assessment. Survey instruments are provided in the Appendix. Responses to the surveys were collected between February 10-24, 2022. Response rates were high for all groups, indicating high investment in program activities by all members of the NWTEDC community.



Family Input

NWTEDC implemented a Family Survey in February 2022 to gather information from parents and guardians about their experiences and ideas related to the Head Start/Early Head Start program. The survey was available in English and Spanish. Responses to the survey were submitted by 380 parents/guardians. This is a 49% response rate based on approximately 775 families who received the survey, as reported by NWTEDC. Respondents mirrored the demographic makeup of the Head Start/Early Head Start program; all program types and centers were well represented.

Respondent Snapshot. Most respondents (83.7%, 318) have one child enrolled in the NWTEDC Head Start (HS)/Early Head Start (EHS) program; 15.5% (59) have two children enrolled; and 0.8% (3) have three or more children enrolled. Respondents did not include a pregnant woman enrolled in the Early Head Start program. The majority of respondents' children attend Center Based Head Start (68.8%), followed by 40.5% who attend Center-Based Early Head Start.

All Head Start and Early Head Start centers were represented by families responding to the survey, including: Benton, Carroll, Gibson, Henry, Lake, Madison, Obion, and Weakley Counties. The top three centers represented were Washington Douglas HS/EHS (17.1%), Weakley County HS (13.6%), and McKenzie HS/EHS (9.0%).

Altogether, more than half of parents/caregivers work either full time (51.6%) or part time (10.8%). Another 28.1% of respondents indicated they are unemployed. Just over 10% of the parents/caregivers are enrolled in school full time (6.4%) or part time (4.1%).

Most families live in either Carroll County (18.3%) or Madison County (18.1%), followed by Gibson County (15.0%) and Weakley County (13.6%). Fewer families that responded to the survey live in Benton County (12.5%), Henry County (9.7%), Obion County (9.2%) and Lake County (2.5%). Most families are renters (62.8%) and some are homeowners (26.4%). Ten percent of families live with a family member and do not pay rent, and 0.8% of families are living with a non-family member or in temporary housing.

Communication with Families. Respondents are most comfortable communicating in English (98.0%). The majority of families prefer to receive information from NWTEDC through text messages (84.1%), face-to-face (70.1%), or phone calls (60.6%). Many also prefer written communications, via email (49.7%) and flyer/newsletter distribution (35.5%).

Meeting Family Needs. As part of the Family Survey, families were asked about the program location and schedule. For most families, the location of their center meets their needs (96.1%). Most (82.5%) also found the program schedule meets their needs. When asked how the program schedule could better meet their needs, later hours/after care (54.8%) was the top response, followed by a summer program (30.1%), transportation (24.0%), and earlier hours (22.6%).

Satisfaction with Services. Families are overwhelmingly satisfied with the services provided by NWTEDC. Nearly all of families agree the program gives their child a safe place to learn (96.8%), that staff greet them warmly (96.25%), and that the program is helping their child get ready for school (93.6%). Most families responding to the survey agree that they are satisfied with the services they receive from the Head Start/Early Head Start program (91.3%).

Barriers to Participation. Families experience some barriers to participating in NWTEDC's activities, such as Policy Council, fatherhood activities, parenting curriculum, home visits, and parent-teacher meetings. The most frequently encountered barriers are work obligations and child care, followed by transportation, internet access, or access to technology. A few families (8) reported a language barrier.

Community Snapshot. When families were asked what is best about the community where they live, the top three areas were safety, parks and playgrounds, and neighborhood relationships. Alternatively, the top areas where families indicated they would like to improve their community include affordable housing, availability of jobs, and more parks/playgrounds.

Nearly all of families agree the Head Start / Early Head Start program gives their child a safe place to learn, that staff greet them warmly, and that the program is helping their child get ready for school.

Other Services Offered by NWTEDC. In addition to Head Start/Early Head Start services, a few families currently receive additional services provided by NWTEDC, as the agency is a private, non-profit community action agency. These families report receiving home energy assistance (6.85%), emergency assistance (3.6%), food assistance (5.5%), and employment assistance (1.3%). Moreover, some families expressed an interest in receiving these additional services. Most desired is home energy assistance (15.0%), followed by emergency assistance (12.6%), food assistance (10.4%), and employment assistance (8.1%).

Access to Services. Almost half of all family respondents report having access to all the services their family needs (44.3%). The services families most need or want that they cannot currently find or access include: affordable housing (14.6%), child care (13.9%), housing/rental assistance (13.3%), and dental care or help with utilities (both 11.7%).

Family Problems. One third of families report that having enough money to pay monthly bills and utilities is a problem on some level. Of these families, most (56) consider it a small problem, but the rest (48 families) describe paying monthly bills as a medium to very large problem.

About one in five families (23%) report that having enough money to buy food is a problem. Of these families, most (38 families) consider paying for food a small problem and the rest (33 families) describe it as a medium to very large problem.

About one in five families report having some level of difficulty accessing financial, medical, or other help. For 19.1%, this is because they don't know what services are available. Others are uncomfortable asking for help (13.9%), and a few (0.7%) cannot access services due to their immigration status.

Safety and Well-Being. Most families report that their safety and well-being are not a problem. About one in five families (18.9%) report that having someone to talk to when things go wrong is a problem, but for most this is a small problem. Similarly, some families report having trouble doing things they normally enjoy (16.9%), with most reporting this as a small problem. Twenty-nine families report small to very large problems with health insurance coverage. Twenty-nine families also report problems with having a doctor to go to. Most families (90.6%) are not concerned about the safety of their neighborhood. It is also of concern that nine families report that physical, verbal, or emotional abuse in their household is a small to large problem.

Family Stressors The biggest personal stressors for families are COVID-19 (19.4%), access to child care (15.5%), access to dental care (13.6%), and work/life balance (13.6%).

In open-ended responses, families commented on the program schedule and access to transportation, and reflected on their positive experiences with the Head Start/Early Head Start program.

Limited Services During the Pandemic. Currently, due to staffing shortages, NWTEDC offers a hybrid/staggering schedule in two centers (Washington Douglas and Weakley) and offer programming to two cohorts, two days each during the week. A number of respondents noted that their child's part-time schedule is an issue. For parents who are working, their children are going full week and are provided with before/after care. Children with disabilities attend when their LEA provider is at the center to ensure they receive services. Additionally, some respondents noted that classrooms are also sometimes closed due to COVID exposure. In these cases, NWTEDC calls parents and sends a letter to let them know when the center will reopen. It is sometimes short notice, but the closures are to ensure the health and safety of children/staff. A few families also note that they feel there are too many early dismissal days (one a month) that lead into holidays and are used to allow for teacher/family conferences. Families also showed a strong interest in longer hours in the Head Start/Early Head Start program.

Themes of Note. Overall, the themes of the families' responses included concerns regarding a lack of affordable housing, financial issues including paying their bills and affording food, child care and the COVID-19 pandemic. Additional concerns were expressed, including access to dental care, job availability, health care and work/life balance.

Though not many families (5-8%) indicated access to technology devices or the internet/Wi-Fi as a need, the staff survey (20-26%) indicates this is a stressor for families, and community providers (43-66%) indicate that this is a barrier for families. The survey was available on paper and electronically; 84% of respondents completed the family survey electronically. This would indicate a strong relationship to the survey respondent and access to technology. It is possible that those lacking technology or Wi-Fi access likely did not participate in the survey, leading to a potential underreporting of technological gaps by families. Additionally, with the exception of face-to-face communication, most families indicated they prefer to be contacted by text message, email, and phone calls. Again, as 84% of survey respondents completed the survey electronically, responses may not be fully representative of the preferences of all parents. When triangulating the data from all respondent types, it is likely that the family survey may underrepresent families' access to technology and internet.

Staff Input



As part of its 2022 Community Assessment, NWTEDC also conducted a Head Start/Early Head Start Staff Survey. A total of 152 staff members responded to the survey; this is a 70% response rate.

Staff Snapshot. Four categories of staff were surveyed: Management and Administrative Staff (15.1%), Instructional Staff (54.6%), Support Staff (16.45%), and Social Services Staff (10.53%). Most staff work for the Head Start program (79.6%, 121), with 46% (70) working for the Early Head Start program. About a quarter of staff (27.6%, 42) work for both programs. All eighteen of NWTEDC's Head Start, Early Head Start or Pre-K locations were represented in survey responses. Washington Douglas (17.11%) and McKenzie HS/EHS (17.11%) had the highest representation. The NWTEDC Central Office is also represented almost 15.79% of the staff responses. Staff live in all counties of the service area.

Program Location and Schedule. NWTEDC staff were asked to reflect on the program location and schedule. An overwhelming majority of staff agree (95.07%) that the location of the Head Start/Early Head Start centers is convenient for them. Further, about three-quarters of staff members commute less than 30 minutes to work (77.46%).

Reflecting on the Head Start/Early Head Start program, most respondents (81.56%) think the locations of Head Start/Early Head Start centers meet families' needs and 80.14% of staff members believe the program schedules meet the needs of families. More than half of staff think that transportation (54.55%) would help better meet family schedule needs followed by later hours (38.18%), a summer program (36.36%), and earlier hours (30.91%).

Feedback About the Program. Staff were asked their opinion about several factors of the Head Start/Early Head Start program. Feedback was mixed about these statements, which may warrant further discussion with staff. Three-quarters (77.7%) of respondents believe the Head Start/Early Head Start staff reflect the language and culture of children and families served, and one in five (20.14%) are neutral about this statement. While most (66.19%) believe the Head Start/Early Head Start program is helping to prepare children for school, 21.58% are neutral and 12.23% disagree with this statement. Safety also appears to be a concern for staff. While 74.1% believe the neighborhood of the office or center where they work is safe, 23.74% are neutral, and 2.16% disagree. When asked whether the communities in which Head Start/Early Head Start families live are safe, less than half agree or are neutral about this statement (46.04%), and 7.91% disagree.

Personal Stressors for Staff. When asked about stressors in their personal lives, respondents indicated their biggest personal stressors are work/life balance (38.03%) and COVID-19/Coronavirus (37.32%), followed by financial (33.10%). Other stressors include mental health (16.9%), Internet/Wi-Fi access (12.68%), and access to child care and housing (both 11.97%).

Stressors for Families. The family survey has limitations as it solely captures the opinions of the families that have responded to the survey. In order to gain a more holistic viewpoint regarding the needs and interests of families in the service area, the NWTEDC staff that work closely with these families were also asked to provide reflections on the larger population of families. When staff were asked to think about families'

biggest stressors, survey results suggest there are multiple factors impacting families' lives. The top areas that emerged as families' biggest stressors according to staff are financial (58.99%), their child's behavior (51.8%), transportation (49.64%), COVID-19/Coronavirus (47.48%), and employment (46.76%). Other stressors include drug abuse in the community, housing, education/job training, access to child care, and mental health.

When asked about families' biggest stressors, staff suggest there are multiple factors impacting families' lives including finances, child's behavior, transportation, COVID-19, and employment.

Need for Services. When asked what services NWTEDC families most need or want, about half of staff indicated child care (52.17%) and job search or training (50.0%). Staff also indicated that families are in need of services for parenting (47.83%), affordable housing (47.1%), housing/rental assistance (46.38%), and transportation (44.93%). About a third of staff also noted that families are in need of food assistance, quality education, substance/drug treatment, and mental health services.

Meeting Families' Needs. Staff indicated that there are many ways the Head Start/Early Head Start program can do a better job meeting the needs of families. More than half indicated that NWTEDC should work to improve communication with parents (53.62%). Further, staff indicated that NWTEDC could offer more and/or a greater variety of services or training opportunities (47.1%), establish new or improved partnerships with community agencies (45.65%), improve referrals to community service providers (37.68%), and provide a greater degree of case management support (26.09%).

In response to open-ended questions, staff provided feedback about the program schedule and locations, the need for transportation, and reiterated families' needs for more support (training, access to resources). They also expressed concerns about lack of planning time, need for greater classroom instruction linked to educational preparedness to get children ready for kindergarten (curriculum and summer program), and maintaining supportive communication with parents. Specifically, one comment noted: "Head Start would be an option for more families, over PreK, if they could offer after-care hours, programs need additional staff, specifically a family advocate and a position, such as a social worker, that could help families access more resources and supports." One staff member noted that improved communication with parents may increase the relationships and trust they have with the program.

Additionally, multiple comments highlighted themes related to the effects of being short staffed, with impacts on the mental health of staff, as well as the lack of planning time, cleaning time, and "down-time". When offering before and after care, comments indicated that teachers feel like they are babysitting rather than working in a professional role. Concerns were also noted regarding the need to raise salaries of staff and also around classroom management when there are multiple teachers in a classroom. Several members of the teaching staff noted they felt a lack of respect and appreciation, would like more support in their role, and would like to feel valued.

In terms of challenging behaviors in the classroom, it was noted that screening before enrollment would allow teachers to better prepare to meet the needs of children and families. These behaviors distract the teachers from providing educational programming. A few comments noted the need for Early Head Start in the area (did not note area), and that Head Start should promote itself as a Kindergarten Readiness program, because currently parents believe Pre-K is the program their children need to be able to gain these readiness skills.

One comment noted that the extension of the Kenton Head Start program year into June impacts the ability of those staff to care for their own children.

Staff also made positive comments about the NWTEDC program and its impact on children and families.

Community Input



A Community Provider Survey gathered information from community agencies about their experiences in the service area and their ideas for improved collaboration and coordination. Forty-three respondents completed the Community Provider Survey, representing all counties in the NWTEDC service area.

Provider Snapshot. These providers represent community-based and faith-based organizations, the public and private sector, educational institutions, and healthcare and childcare providers. Agencies responding to the survey provide an array of services such as food assistance, child care, health, mental health, and dental care, training, legal aid, and parenting and senior services. Thirty-six respondents to the Community Provider Survey are current partners of NWTEDC. Of these, 27 have been partners for more than five years. Most respondents provide their services for free (79.0%).

Respondents to the Community Provider Survey indicated that the best ways to communicate with families include face-to-face (67.5%) and text messages (60%), followed by email and phone calls (both 55.0%). It is possible that some indicate phone calls as a preferred method of communication due to a lack of access to technology or Wi-Fi in the service area. Many providers also use Facebook (50.0%), and print media such as flyers and newsletters (47.5%). A small number of providers use video chat, Instagram, and Twitter for communications.

Community Snapshot. Reflecting on what they think is best about their community, many respondents selected the quality of educational institutions (67.5%), services offered by community organizations (57.5%), and safety (55%). This was followed by neighborhood relationships (35.0%), housing affordability (32.5%), and parks and playgrounds (30.0%). About one fifth of community partners also believe that diversity, the quality of health care services, and the availability of jobs are a positive aspect of their community.

Changes in Use of Community Resources. In the past year, a majority of respondents reported observing increases in their communities in the following areas: job availability (61.4%), the number of low-income families contacting their agency (60.5%), drug abuse in the community and transportation needs (both 59.0%).

Many respondents indicated observing a decrease in average household income (44.7%) and in low-income housing availability (37.5%).

A majority of respondents reported *no change* in these areas: the number of individuals slightly over the agency's income guidelines (70.3%), the number of teen pregnancies (67.57%), the number of licensed child care providers (64.9%), the services offered by community providers (60.5%), low-income housing availability (57.5%), and the number of female head of households (55.3%).

For homelessness, respondents either noted no change (48.7%) or an increase (43.6%). Similarly, for the number of multi-generational families they serve, respondents observed either an increase (48.7%) or no change (46.0%).

Barriers. When asked about the most common barriers for low-income families accessing resources, a majority of community providers noted the following: limited knowledge of what resources are available (76.9%), access to internet/Wi-Fi (66.7%), and availability of needed services (61.5%). Affordability of needed services and fear/reluctance to access services were observed by 53.9% of respondents, followed by access to technology (43.6%). Notably, few service providers (5-15%) see lack of bilingual staff at point of services, language, or citizenship as barriers to accessing resources.

Stressors for Families. When asked what they believe are families' biggest stressors, community providers indicated many areas, such as financial (69.2%), substance/drug abuse (66.7%), mental health (64.1%), COVID-19 (53.9%), employment (51.3%), and housing and food insecurity (both 51.3%).

A majority of respondents believe low-income families may not be able to find or access internet/Wi-Fi (69.2%), child care (61.5%), affordable housing (53.9%), mental health services (53.9%), or substance/drug treatment (53.9%). Some respondents also believe low-income families may not be able to find or access transportation, technology, job search or training, dental care and health care, among others.

Reflections on Local Agencies. Most respondents believe their agency strengths include the ability to connect families with resources (84.6%), having established relationships with families (76.9%), and staff experience and expertise (69.2%). A few providers also selected culturally aligned services (20.5%) and bilingual staff (15.4%) as strengths. Community partners offered several ideas for future partnerships including:

- Hosting story time at the library for Head Start children;
- Bilingual educational and parenting classes;
- Coordinating open houses to provide information about community resources; and
- Referrals to the food bank.

NWTEDC has formal and informal partnerships that help the agency to provide comprehensive services to children and connect families to resources.

In response to open-ended questions, community providers offered suggestions about opportunities to better meet the needs of children and families in the service area. This included suggestions such as training, education/awareness, and enhanced referrals. Additionally, eleven agencies provided contact information for NWTEDC to follow up to create synergies and partnerships.

RESOURCES AVAILABLE TO MEET THE NEEDS OF ELIGIBLE CHILDREN AND FAMILIES

In the NWTEDC service area, there are social services resources available to families in addition to those offered by the program. NWTEDC also has formal and informal partnerships that help the agency to provide comprehensive services to children and connect families to resources.

Serving a diverse population of children and families, NWTEDC strives to connect families to services and make information available to families in their primary language.

Education. Community education resources – early education, K-12, and higher education – provide a continuum of education support from birth through college. Having resources available to support child development and student achievement enhances the overall economic welfare of a community. In NWTEDC's service area, there are many educational opportunities for children and families. Public and private higher education programs are available across the service area, as well as adult education and GED programs. Post-secondary education opportunities include four-year universities, technical colleges, and community college, in addition to educational training provided by local organizations. While opportunities are prevalent, families may face barriers accessing needed services.

Health. The health, mental health, oral health, and nutrition service providers and partners in the service area are essential for eligible children and families to maintain an up-to-date health status and access preventative and ongoing healthcare. NWTEDC is skilled at identifying and implementing partnerships that support children and families.

In general, health care services are widely available throughout the service area. There are rehabilitation hospitals, psychiatric hospitals, substance abuse treatment facilities, and behavioral health centers, as well as general hospitals. In the service area, the ratios of individuals to health providers (primary, dental, mental health) are generally high, with gaps in access as described in the report, specifically in regard to affordable adult dental services and accessible pediatric specialty care.

NWTEDC leadership note that there is a shortage of specialty providers for pediatric care in rural communities. Specifically, some families must travel two to three hours away to get services from specialty providers for infants and toddlers. This is an additional challenge because parents may not have adequate transportation to get to these appointments, or the price of gas creates a financial hardship. TennCare, Tennessee's state Medicaid program, offers some limited public transportation services for such appointments, but a lack of flexibility in the schedule can present additional challenges for families with young children. Adult health resources tend to be more accessible, as providers set hours at the rural clinics multiple days each week, which reduces the burden of travel.

Social Services. Across the service area, there are a number of organizations providing social services to individuals in addition to NWTEDC, such as clothing assistance, food assistance, or public assistance coordination. Families also have access to public health departments, housing authorities, and WIC providers, among other state, city, and local departments supporting the public assistance needs of service area families. While there are many social services available, as highlighted in survey data, there are barriers for Head Start/Early Head Start families in accessing those resources (e.g., awareness of available resources and

uncomfortable asking for help). Survey results also suggest that lack of affordable housing is a challenge for families, as is finding child care, housing/rental assistance, dental care and help with utilities.

Services for Vulnerable Populations. NWTEDC serves a critical role in supporting vulnerable populations. Through Head Start/Early Head Start services, NWTEDC partners with other community organizations to meet the needs of a diverse group of families. NWTEDC offers documents translated into Spanish and parent volunteers facilitate interpretation during parent communications (e.g., conferences). NWTEDC also utilizes a language interpretation service when necessary.

REFLECTIONS



As described throughout the Community Assessment report, there is a diversity of needs throughout the NWTEDC service area. By targeting services to areas with high rates of child poverty, NWTEDC is providing services to the children and families with the greatest need in the service area.

Drawing from the data and findings of NWTEDC's 2022 Community Assessment and observations from leadership team members, the following reflections capture key takeaways.

Reflection 1: Program Design. NWTEDC's Head Start/Early Head Start program regularly engages in the best practice of reviewing slot allocations in the context of community-wide trends (e.g., availability of publicly funded pre-kindergarten, demand for infant/toddler care, and wait list data) to explore strategies that support full enrollment across the program. NWTEDC will continue this practice in order to respond to changes in community needs when they arise and to explore updates to program schedules to ensure the needs of working families are met.

Reflection 2: Staff Professional Development, Training, and Retention. Continue to communicate with staff regarding their professional development and training needs to help them meet their professional goals. Review staff's interest in management/leadership training more closely and leverage this interest to support staff members' professional growth within the agency. Review staff workloads and schedules to identify more flexible staffing patterns (while maintaining adult-child ratios) to support the work/life balance of staff. This may include rotating schedules, job shares, and/or longer days with shorter weeks.

Reflection 3: Parent Training and Employment. Continue to leverage community partnerships with Adult Education partners and formalize access to internal resources related to employment skill building and job search. Explore new strategies, including partnerships, to provide educational counseling, job training, and resources to families. Collaborate with community partners and local employers to address specific barriers to obtaining and maintaining employment (e.g., child care, transportation, work history, issues with a background check etc.).

Reflection 4: Bilingual Supports and Cultural Alignment. Continue to assess the language needs of enrolled families and provide bilingual services as needed. Focus efforts on recruiting bilingual staff, formalize a process for providing interpretation supports to families, and identify additional bilingual service providers to meet enrolled children's needs. Seek to help expand families' access to bilingual, culturally sensitive resource providers in the community. Collaborate with community agencies to address language barriers families may face when accessing resources and support.

Reflection 5: Affordable Housing and Homelessness. Continue to advocate for, and provide support to, families experiencing homelessness and those on the brink of homelessness. Ensure that families are aware of and understand the McKinney-Vento definition of homelessness and how it impacts eligibility for and services available from the Head Start/Early Head start program. Continue to explore and address housing needs and homelessness in partnership with community partners. Utilize community assessment data and updated data sources to understand the locations with high rates of homelessness in the service area.

Reflection 6: Preventive and Primary Care. Continue to strengthen collaborations with local health services providers, including dental and mental health providers. Promote the importance of preventative and primary care; address barriers to maintaining an on-time health schedule, particularly during and following the COVID-19 pandemic. Establish more robust and intentional mental health supports for children, families, and staff. Integrate national, regional, and statewide resources to enhance social and emotional supports in each center-based setting.

Reflection 7: Social Services. Continue NWTEDC staff participation on key local community Councils and Boards to build internal and external awareness of resources and services that serve the population of the service area. Continue to strengthen community partnerships to increase access to resources and comprehensive services at NWTEDC sites. Seek to alleviate transportation issues by bringing in any additional supports (health, mental health, and social services) into locations where children and families regularly gather.

Reflection 8: Promote Head Start as a Kindergarten Readiness Program. Raise awareness of the benefits of the Head Start and Early Head Start programs and the comprehensive services they provide. Integrate the message that “Head Start is a Kindergarten Readiness program” into public outreach. Focus on how Head Start programs prepare enrolled children for future success in school, as well as provide transition supports for children entering kindergarten.

Reflection 9: Monitor Impact of COVID-19. The COVID-19 pandemic has had an extended impact on communities in the NWTEDC Head Start/Early Head Start service area. Review community data on unemployment, child welfare, food insecurity, substance abuse, mental health, and homelessness to understand the impact of COVID-19 on families. Continue to leverage partnerships and community resources to support vulnerable families, including single parents, grandparents and other relatives raising young children, families who may need job search or employment support, and those on the verge of homelessness.

Reflection 10: Providing Community Information, Resources and Referrals. Explore best practices to ensure families are aware of and connected to community resources, including other NWTEDC programs outside of Head Start/Early Head Start, such as emergency assistance, home energy assistance, etc. Explore positive relationship building techniques, in light of restrictions to face-to-face communications during the pandemic, so that Family Advocates may better support families and ensure access to resources in a timely manner. Include bilingual supports where appropriate.

Reflection 11: Transportation. Within the constraints of a national bus driver shortage that has impacted the NWTEDC service area, identify alternative strategies to provide transportation to enrolled families. This may include hiring incentives for qualified drivers, utilizing higher capacity vehicles that do not require CDL licenses, and identifying strategies implemented by other local agencies.

Reflection 12: Building Partnerships. Ensure NWTEDC representatives continue to participate on local task forces with community partners to address identified challenges and develop strategic plans for partnerships. The focus of such committees may include housing, job training/availability, child welfare/foster care, mental health, and substance misuse. As appropriate, identify potential advocacy action steps partners can take. Coordinate communication and strategic planning efforts of NWTEDC task force members to ensure community-wide efforts impact program families and activities.

Reflection 13: Policies and Procedures. Continue to develop and communicate clear policies and procedures to staff, families, and partners regarding program operations. In light of updated organizational structure and updated job descriptions, revisit policies and procedures across content areas to ensure consistent understanding and implementation.

LOOKING AHEAD



NWTEDC will use the data and information emerging from the 2022 Community Assessment to support program planning in the agency's continued efforts to meet children and families' needs, in partnership with community resource providers.

The HSPPS requirement to annually review and update the Community Assessment provides NWTEDC with an opportunity to continuously reflect upon data and respond to community trends. With Community Assessment

data as a driving factor for understanding and meeting community needs, NWTEDC will continue its mission to partner with families to support child development in the county's most vulnerable communities.

Monitoring Community Data in Response to COVID-19

Due to lag times in the collection and reporting of community data to help understand the impact of COVID-19 on families, additional data and information on unemployment, child welfare, food insecurity, substance abuse, mental health, and homelessness is not currently available, but will become available in coming months and years. Monitoring data on a regular basis will assist with Head Start/Early Head Start program planning, and allow NWTEDC to collect and respond to evolving community needs.

The 2020 Census data will contain key information about children and families in the service area. Census data will include information such as: poverty rate of the general population, poverty rate for children birth to age 5 (and thereby the number of Head Start/Early Head Start income-eligible children), and many other population demographics and characteristics of families. NWTEDC will use 2020 Census data to supplement this Community Assessment, as it becomes available.

It is likely that Head Start/Early Head Start providers will experience increasing demand for services as families continue to face high rates of unemployment and mounting economic challenges. Regular analysis of community data will assist NWTEDC to adapt and respond to the most pressing needs of eligible children and families in the service area.

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