



Tennessee Commission on Children and Youth's

THE STATE OF THE CHILD IN TENNESSEE

2025



TN.GOV/TCCY/STATEOFTHECHILD



TENNESSEE COMMISSION ON **CHILDREN & YOUTH**

Advocating for data-driven decisions to improve the lives of children and youth in Tennessee.

ABOUT THE TENNESSEE COMMISSION ON CHILDREN AND YOUTH (TCCY):

The Tennessee Commission on Children and Youth (TCCY) is an independent, nonpartisan agency created to ensure the state's policies and programs effectively promote and protect the health, well-being, and development of children and youth.

Established by the Tennessee General Assembly as a permanent commission, TCCY is the state's centralized informational resource and advocacy agency for timely, fact-based information to aid policymaking and coordination of resources.

WHAT TCCY DOES:

Data and Insights: Monitors various child and youth indicators to identify trends and areas of concern; keeps up with best practices for addressing issues affecting children and youth.

Collaboration: Convenes various agencies and organizations in leading efforts to improve services for children and youth.

Policy Advocacy: Reviews data and outcomes of various policies related to children and youth to provide evidence-based suggestions for improvement.

Public Awareness: Promotes public awareness about children's issues and advocates for community engagement in addressing these concerns.

TCCY's Data Dashboard

FUTURE

Building Tomorrow: Tracking Progress, Shaping Success

Tennessee Commission on Children & Youth's
Data Dashboard



FUTURE

Building Tomorrow: Tracking Progress, Shaping Success

The State of the Child is one of several reports that TCCY releases annually (alongside County Profiles, Budget Recommendations, the Youth Transitions Advisory Council Report, Council on Children's Mental Health Report, and Resource Mapping Report). Each report relies heavily on data gathered by state and federal departments as well as non-governmental organizations. Many of the indicators used for each of the reports can be found in one location, TCCY's data dashboard, FUTURE.

This new public-facing dashboard supports TCCY's mission to lead systems improvement for all Tennessee children and families through data-driven advocacy, education and collaboration. FUTURE provides an invaluable resource to our partners, citizens and communities who rely on the data we gather for policy-making, program planning and grant funding. FUTURE is the next step in our efforts to advocate for data-driven decisions to improve the lives of children and youth in Tennessee.

Visit www.TN.gov/TCCY-FUTURE to learn more.

Tennessee Commission on Children and Youth Commission Members

Judge Robert Philyaw, Chair

Ella Britt
Randy Butler
Cameron Carver
Jennifer Donnals
Ashley Dunkin
Judge Sharon Green

Raymond Jenkins
TJ King
Charmaine Kromer
Matt Marshall
Elaina Sanders

Tracey Silverman
Brandon Smith
Allan Sterbinsky, Ph.D.
Altha J. Stewart, M.D.
Billy Worsham



TN Commission on Children and Youth, Authorization # N48DZ2-1, 200 copies, December 29, 2025. This public document was promulgated at a cost of \$12.47 per copy.

ABOUT THE STATE OF THE CHILD REPORT

TCA 37-3-103(a)(1)(E) requires the commission to (E) Publish annually, on or before December 31, a comprehensive report on the status of children and youth in Tennessee; and distribute the report to the governor, to each member of the general assembly and to each of the state's depository libraries.

The purpose of the State of the Child is to provide an annual overview of the well-being of children, youth, and families in Tennessee through the available data. The report seeks to cover as many topics affecting children as possible, spanning from maternal and prenatal health to youth aging out of foster care.

The data contained in this report come from publicly available reports or data sets. The Commission relies heavily on reporting from state and federal departments as well as non-governmental organizations. Without their continual work and dedication to the children in Tennessee, this report would not be possible.

Demographics

Race
Ethnicity
Age
Experiences

Economics

Measures of Poverty
Official Poverty Measure
Supplemental Poverty Measure
Tax Credits
Economic Stress and Tennessee Families
Housing & Homelessness
Homelessness by Region

Child Care & Early Education

Accessibility
Affordability
Infant Care
Toddler Care
Cost of Quality Care
Workforce

Education

Tennessee Comprehensive Assessment Program (TCAP) Results
National Assessment of Educational Progress (NAEP)
Discipline
Support Services
School Infrastructure

Health

Chronic Health & Disability
Diagnosis
Obesity
Food Insecurity & Tennessee Food Banks
Health Insurance
Private Coverage
Infant & Maternal Care
Immunizations & Vaccinations
Dental Care
Infant Mortality
Child & Teen Deaths

Mental Health

Suicide
Treatment
Depression & Anxiety
Substance Use
Tobacco & Nicotine
Alcohol
Marijuana
Prescription Pain Medication
Perception of Risk Among Teens

Adversity & Resilience

Adverse Experiences
Bullying
Flourishing

Child Welfare

Child Maltreatment
Hotline Referrals
Time in Care
Custodial Demographics
Exits from Care
Transition Age Youth
Relative Caregivers
Abuse Deaths
Human Trafficking

Youth Justice

Placements
Prevention & Intervention
Crime Rate Trends
Crime Rate by County
Crime Rate by Offense
Youth and Firearm Crimes

DEMOGRAPHICS



Race & Ethnicity

Demographics

Race categories are mutually exclusive, but individuals of any race may also be of Hispanic ethnicity. The "Hispanic/Latino" column includes all people who identify as Hispanic/Latino, regardless of their race.

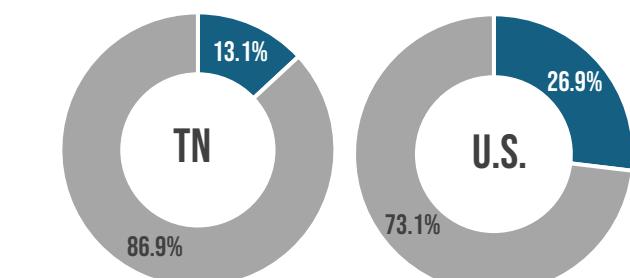


Among those under 18 in Tennessee in 2024: ¹

- 63.5 percent were White
- 16.5 percent were Black or African American
- 13.1 percent were Two or More Races
- 4.8 percent were Other Race
- 1.7 percent were Asian
- 0.4 percent were American Indian and Alaskan Native
- 0.0 percent were Native Hawaiian and Other Pacific Islander
- 13.1 percent were Hispanic or Latino

Over the last decade, Tennessee's children have become more diverse. In 2014, the largest racial/ethnic group (Non-Hispanic White) comprised 66 percent of the child population, now it is 61 percent. ²

2024 Under 18 Population by Race/Ethnicity ¹

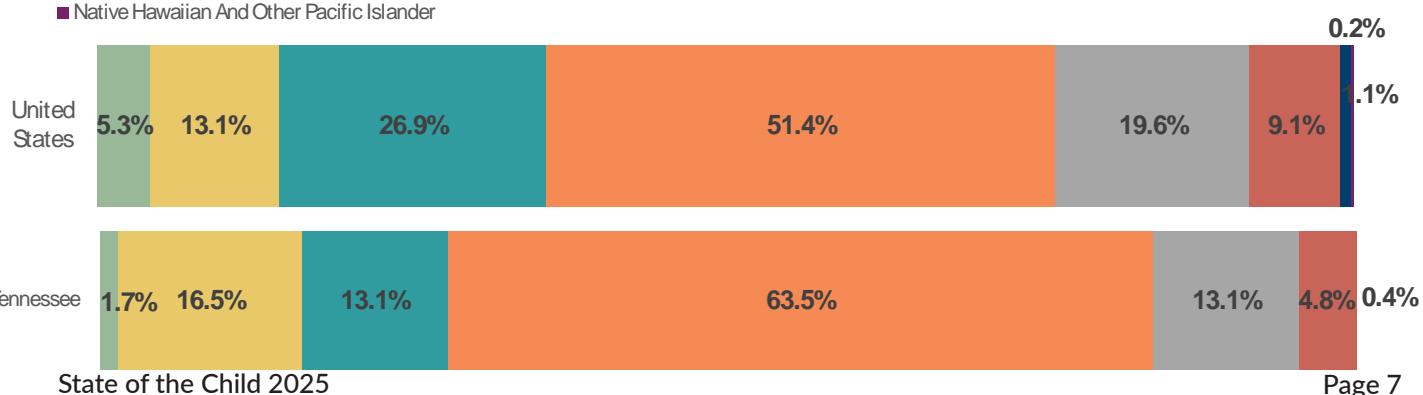


■ Hispanic or Latino ■ Not Hispanic or Latino

■ Asian
■ Two or More Race Groups
■ Native Hawaiian And Other Pacific Islander

■ Black or African American
■ Other Race

■ White
■ American Indian And Alaskan Native



Age Demographics

The types of services and level of investment needed from the state to support healthy and thriving varies across stages of child development. Ensuring services are available to meet the needs of Tennessee children (from prenatal care through career development) is critical to a more successful future.

**In 2024,
more than one in five Tennesseans
were under 18.³**

**32.3 percent of Tennessee
children were under 6¹**

**32.8 percent of Tennessee
children were ages 6 to 11¹**

**35.9 percent of Tennessee
children were ages 12 to 17¹**

Though there was a small decline, the percent of Tennessee's population under 18 has remained relatively stable over the previous decade, ranging from 22.9 percent in 2014 to 21.8 percent in 2024.^{4,5}

In 2014:²

32.4 percent were under 6

33.8 percent were age 6 to 11

33.8 percent were age 12 to 17



Experiences

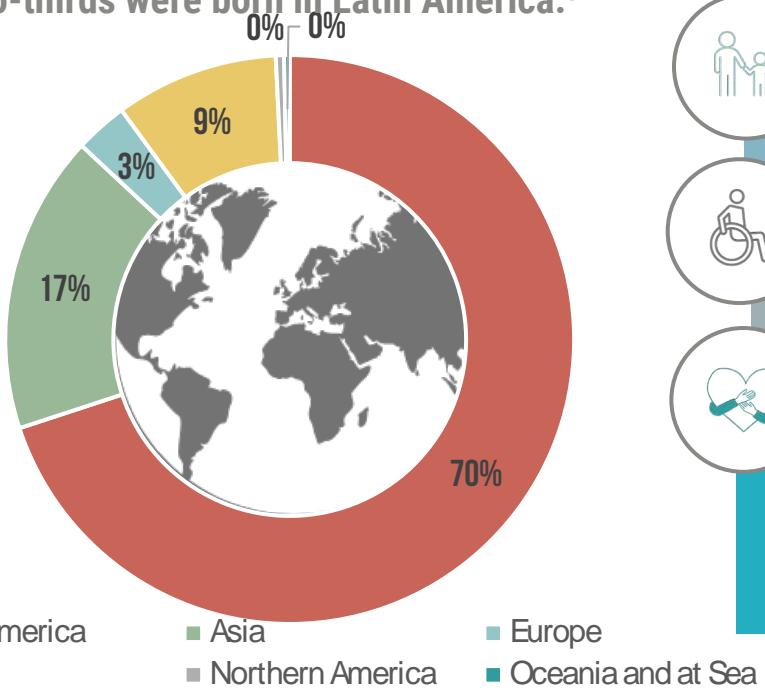
Demographics

In addition to a child's age, life experiences inform which services and supports are needed to thrive.



Nearly 1 in 8 Tennessee children age 5-17 spoke a language other than English at home. Of those children, 74 percent spoke Spanish.⁶

15 percent of Tennessee children were part of an immigrant family.⁷ Of Tennessee children born in another country, more than two-thirds were born in Latin America.⁸



80.5 percent of Tennessee children age 3 to 17 were enrolled in a public school.¹



Approximately 22 percent of all Tennessee children lived in a household that received public assistance in the last 12 months.¹



36 percent of Tennessee children lived in renter-occupied housing units.¹



1 in 10 Tennessee children lived with their grandparent as the householder. Another 2.5 percent live with a different relative.¹



42.5 percent of teens 15 to 19 were in the labor force.⁹



Nearly 8 in 10 children lived with their biological parent as the householder.¹



4.8 percent of Tennessee children were reported to have a disability.¹



More than 1 in 3 Tennessee children age 12 through 17 were bullied, picked on or excluded in the last year. For those with special healthcare needs it was nearly half.¹⁶

ECONOMICS





Measures of Poverty

Economics

There are two major measures of poverty, the Official Poverty Measure and the Supplemental Poverty Measure, each considering different factors and expenses. Understanding which measure is being referenced and what is included is critical to properly assessing the challenges our children are facing and how we can improve resources and protections for them. Below is a brief explanation of the two commonly used measures, the Official Poverty Measure and Supplemental Poverty Measure.¹

Official Poverty Measure²

U.S. Census Bureau

The Official Poverty Measure (OPM) was developed in the mid-1960's. It was calculated based upon the cost of a minimum food diet in 1963 multiplied by three. Each year it is updated to reflect current prices. The OPM only includes pre-tax cash income and does not include any government assistance or subsidies. The OPM is the same across the continental United States.

Supplemental Poverty Measure³

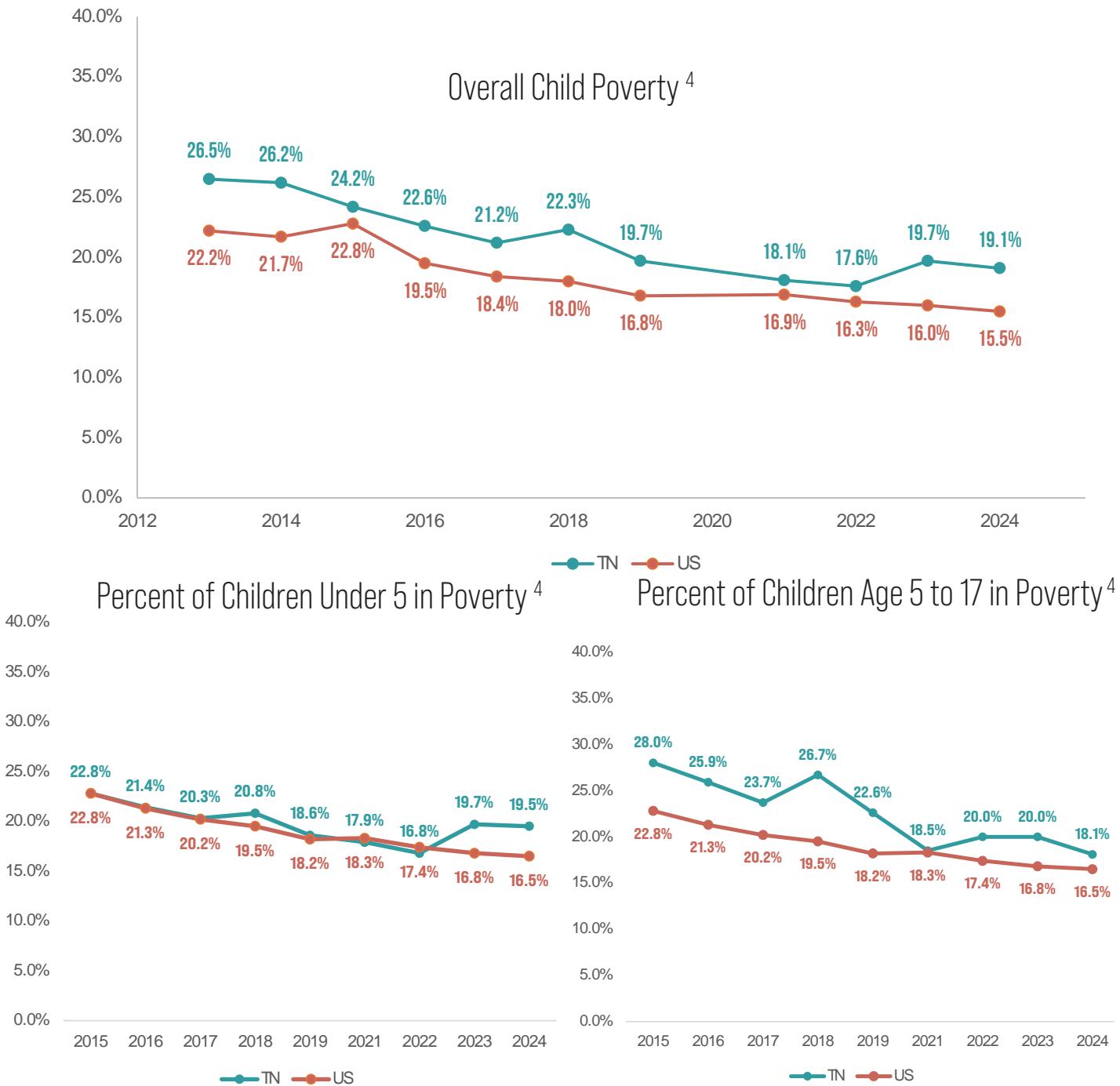
Bureau of Labor Statistics & U.S. Census Bureau

"In November 2011, the Census Bureau released its first report on the new SPM. The SPM addresses numerous concerns of official-measure critics, and its intent is to provide an improved statistical picture of poverty. The SPM income or resource measure is cash income plus in-kind government benefits (such as food stamps and housing subsidies) minus non-discretionary expenses (taxes, medical out-of-pocket expenses, and work expenses). The SPM thresholds are based on a broad measure of necessary expenditures—food, clothing, shelter, and utilities (FCSU)—and are based on recent, annually updated expenditure data. The SPM thresholds are adjusted for geographic differences in the cost of living. The SPM uses a broader unit of analysis that treats cohabiters and their relatives in a more satisfactory way." - Social Security Administration.

Official Poverty Measure

Economics

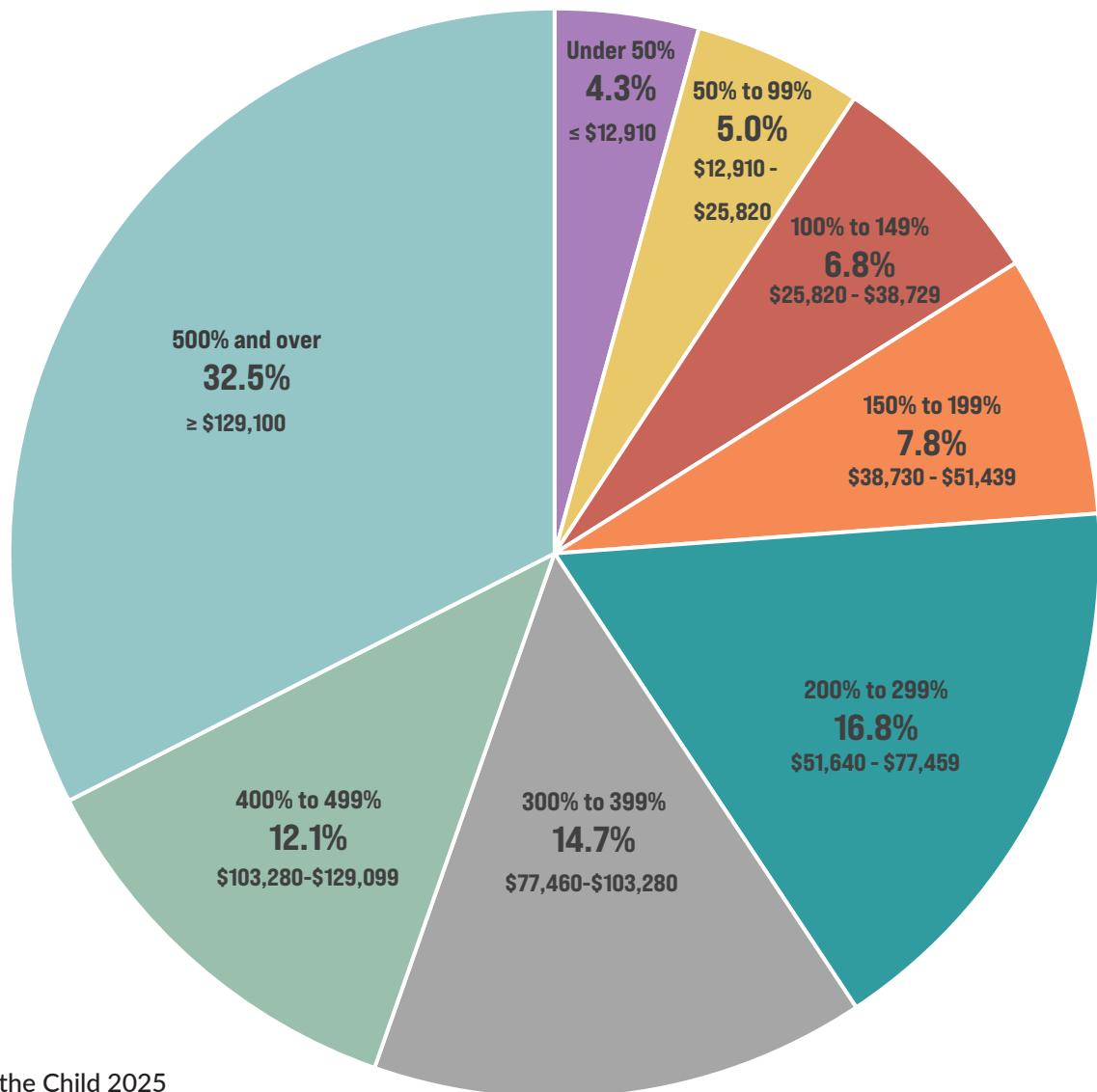
Tennessee saw a slight decrease in the percent of children living in poverty (from 2023 to 2024), yet still remains above the low of 17.6 percent in 2022. Poverty among those under 5 decreased from 20 percent to 18.1 percent, the lowest rate in more than 10 years. For children ages 5 to 17, the percent living in poverty increased from 16.8 percent in 2022 to 19.5 in 2024.





Nearly one in three Tennessee families had an income of 500% or more of the Federal Poverty Level in 2024.⁵ For a family of three, 500% of the Federal Poverty Level is equivalent to \$129,100.⁶

Percent of Tennessee families by income relative to Federal Poverty Level in 2024⁵
The income range displayed correlates to threshold for family of three.⁶



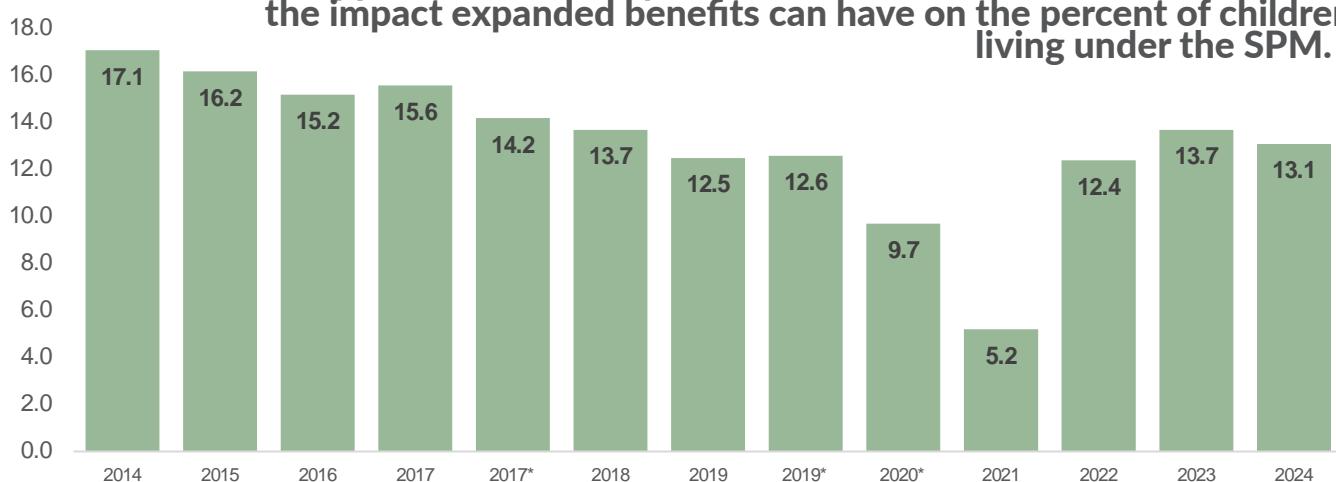
Supplemental Poverty Measure (SPM)

Economics

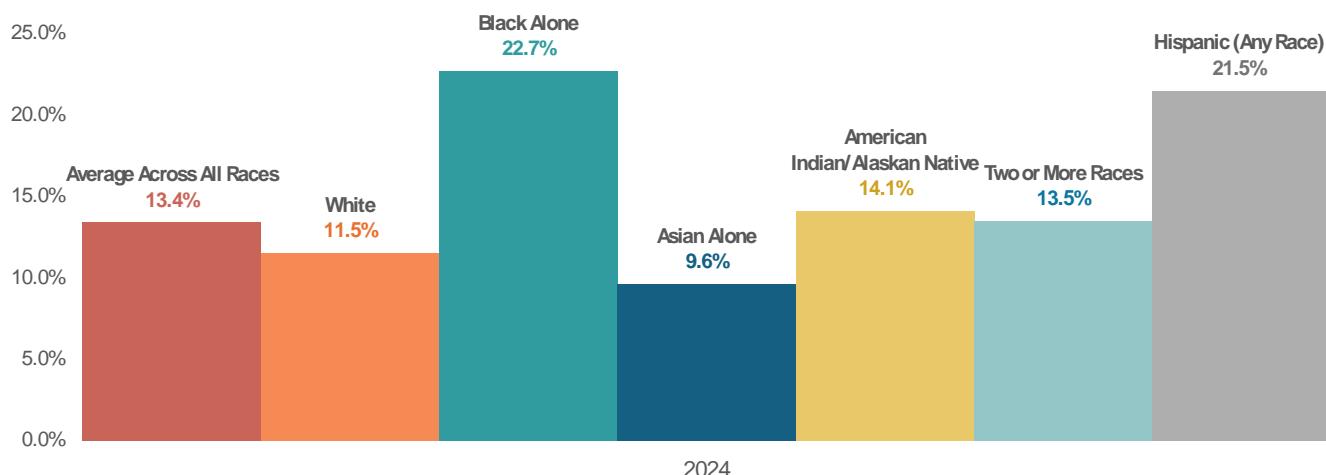
The Supplemental Poverty Measure provides a more comprehensive look at the experience of families across the country and considers factors not accounted for by the Official Poverty Measure, such as government assistance, expenses, and location .

National Supplemental Poverty Measure

The historic drop in number of U.S. children under the Supplemental Poverty Measure in 2020 and 2021 demonstrates the impact expanded benefits can have on the percent of children living under the SPM.⁷



Percent of Children in the United States Under the Supplemental Poverty Measure by Race/Ethnicity⁷



Race categories are mutually exclusive, but individuals of any race may also be of Hispanic ethnicity. The 'Hispanic' column includes all people who identify as Hispanic, regardless of their race

Supplemental Poverty Measure

Economics

Tennessee Supplemental Poverty Measure

At a state level, the Supplemental Poverty Measure figures are available as a three-year average.

Under 18 Years ⁸

2022 - Tennessee: 8.2 percent
2024 National: 13.1 percent

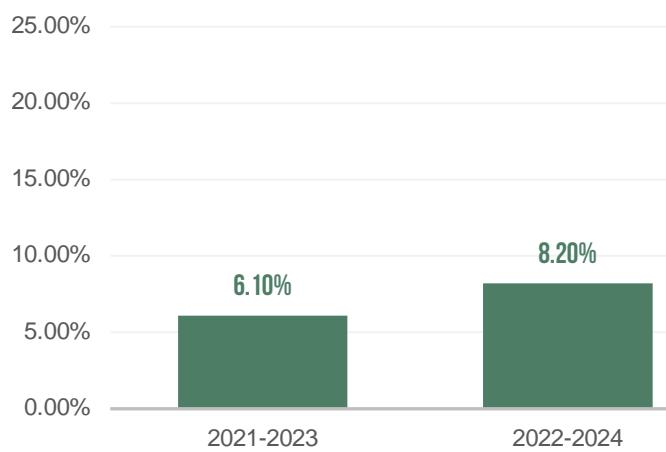
18 to 64 Years ⁸

2022 - Tennessee: 9.6 percent
2024 National: 12.1 percent

65 Years and Older⁸

2022 - Tennessee: 13.4 percent
2024 National: 14.4 percent

PERCENT OF TENNESSEE CHILDREN UNDER SUPPLEMENTAL POVERTY MEASURE (3 YEAR AVERAGE)⁸



Supplemental Poverty Measure

Economics

Number of United States children lifted out of poverty by program⁹

Since the Supplemental Poverty Measure includes non-cash benefits such as tax credits or programs such as SNAP, WIC or TANF, the number of children those identified programs lift out of poverty can be measured.^{19,20} Though these numbers are only available on a national level, they still provide significant insight into how children, youth and families can be further supported. While children may receive many of these programs, these numbers evaluate the individual impact of each program on its own.

Refundable Tax Credits

3,704,000



Refundable Child Tax Credit

1,464,000

Supplemental Nutrition Assistance Program

1,417,000



Social Security

1,358,000

School Lunch

666,000



Housing Subsidies

634,000

Temporary Assistance for Needy Families

181,000

Women, Infants and Children

207,000

Changes in Weekly Wages by County

Economics

United States change in weekly wages between Q1 2023 and Q1 2025: \$124^{10,11}

United States percent change in weekly wages Q1 2023 and Q1 2025: +8%^{10,11}

Tennessee change in weekly wages between Q1 2023 and Q1 2025: \$100^{10,11}

Tennessee percent change in weekly wages between Q1 2023 and Q1 2025: +8%^{10,11}



County	Q1 2023 Weekly Wages	Q1 2025 Weekly Wages	Change in Weekly Wages	Percent Change	County	Q1 2023 Weekly Wages	Q1 2025 Weekly Wages	Change in Weekly Wages	Percent Change	County	Q1 2023 Weekly Wages	Q1 2025 Weekly Wages	Change in Weekly Wages	Percent Change
United States	\$1,465	\$1,589	\$124	8%	Hamblen	\$916	\$989	\$73	8%	Morgan	\$854	\$951	\$97	11%
Tennessee	\$1,264	\$1,364	\$100	8%	Hamilton	\$1,252	\$1,329	\$77	6%	Obion	\$865	\$927	\$62	7%
Anderson	\$1,465	\$1,590	\$125	9%	Hancock	\$600	\$703	\$103	17%	Overton	\$817	\$999	\$182	22%
Bedford	\$945	\$1,024	\$79	8%	Hardeman	\$962	\$1,004	\$42	4%	Perry	\$754	\$869	\$115	15%
Benton	\$828	\$870	\$42	5%	Hardin	\$988	\$1,057	\$69	7%	Pickett	\$647	\$746	\$99	15%
Bledsoe	\$874	\$950	\$76	9%	Hawkins	\$947	\$1,091	\$144	15%	Polk	\$746	\$831	\$85	11%
Blount	\$1,164	\$1,206	\$42	4%	Haywood	\$1,002	\$1,313	\$311	31%	Putnam	\$902	\$988	\$86	10%
Bradley	\$1,003	\$1,084	\$81	8%	Henderson	\$867	\$907	\$40	5%	Rhea	\$977	\$1,019	\$42	4%
Campbell	\$792	\$842	\$50	6%	Henry	\$868	\$899	\$31	4%	Roane	\$1,498	\$1,650	\$152	10%
Cannon	\$853	\$917	\$64	8%	Hickman	\$916	\$1,028	\$112	12%	Robertson	\$958	\$1,052	\$94	10%
Carroll	\$881	\$1,024	\$143	16%	Houston	\$737	\$811	\$74	10%	Rutherford	\$1,148	\$1,262	\$114	10%
Carter	\$845	\$962	\$117	14%	Humphreys	\$1,185	\$1,152	-\$33	-3%	Scott	\$740	\$796	\$56	8%
Cheatham	\$1,061	\$1,172	\$111	10%	Jackson	\$790	\$906	\$116	15%	Sequatchie	\$789	\$809	\$20	3%
Chester	\$753	\$822	\$69	9%	Jefferson	\$959	\$1,035	\$76	8%	Sevier	\$803	\$829	\$26	3%
Claiborne	\$825	\$908	\$83	10%	Johnson	\$914	\$1,020	\$106	12%	Shelby	\$1,341	\$1,410	\$69	5%
Clay	\$700	\$769	\$69	10%	Knox	\$1,235	\$1,278	\$43	3%	Smith	\$1,043	\$999	-\$44	-4%
Cocke	\$789	\$890	\$101	13%	Lake	\$879	\$1,004	\$125	14%	Stewart	\$1,190	\$1,245	\$55	5%
Coffee	\$1,066	\$1,154	\$88	8%	Lauderdale	\$940	\$973	\$33	4%	Sullivan	\$1,207	\$1,325	\$118	10%
Crockett	\$1,041	\$1,029	-\$12	-1%	Lawrence	\$844	\$883	\$39	5%	Sumner	\$1,094	\$1,157	\$63	6%
Cumberland	\$842	\$888	\$46	5%	Lewis	\$766	\$840	\$74	10%	Tipton	\$911	\$956	\$45	5%
Davidson	\$1,574	\$1,702	\$128	8%	Lincoln	\$874	\$964	\$90	10%	Trousdale	\$975	\$1,049	\$74	8%
Decatur	\$813	\$933	\$120	15%	Loudon	\$1,021	\$1,066	\$45	4%	Unicoi	\$1,072	\$1,207	\$135	13%
De Kalb	\$882	\$931	\$49	6%	McMinn	\$911	\$1,022	\$111	12%	Union	\$892	\$903	\$11	1%
Dickson	\$925	\$992	\$67	7%	McNairy	\$793	\$882	\$89	11%	Van Buren	\$718	\$745	\$27	4%
Dyer	\$974	\$1,092	\$118	12%	Macon	\$812	\$1,060	\$248	31%	Warren	\$904	\$972	\$68	8%
Fayette	\$1,051	\$1,275	\$224	21%	Madison	\$1,066	\$1,128	\$62	6%	Washington	\$1,025	\$1,125	\$100	10%
Fentress	\$757	\$825	\$68	9%	Marion	\$945	\$1,003	\$58	6%	Wayne	\$849	\$871	\$22	3%
Franklin	\$949	\$1,013	\$64	7%	Marshall	\$1,007	\$1,078	\$71	7%	Weakley	\$819	\$858	\$39	5%
Gibson	\$870	\$939	\$69	8%	Maury	\$1,231	\$1,363	\$132	11%	White	\$836	\$861	\$25	3%
Giles	\$944	\$1,007	\$63	7%	Meigs	\$966	\$1,034	\$68	7%	Williamson	\$1,767	\$1,868	\$101	6%
Grainger	\$964	\$1,050	\$86	9%	Monroe	\$921	\$973	\$52	6%	Wilson	\$1,064	\$1,148	\$84	8%
Greene	\$903	\$993	\$90	10%	Montgomery	\$923	\$1,055	\$132	14%					
Grundy	\$693	\$710	\$17	2%	Moore	\$1,092	\$1,126	\$34	3%					

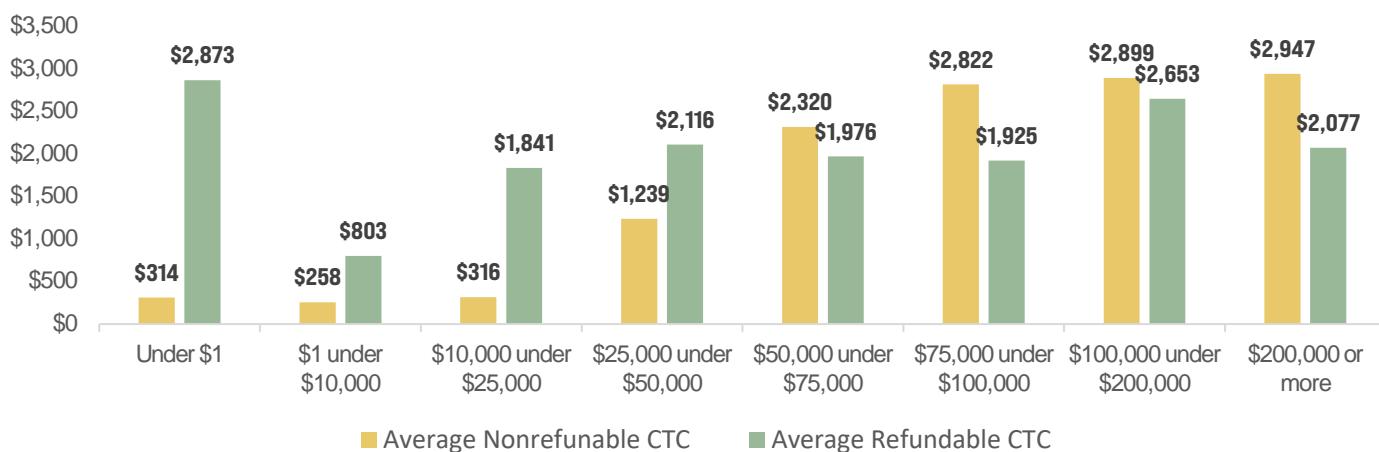
Tax Credits

Economics

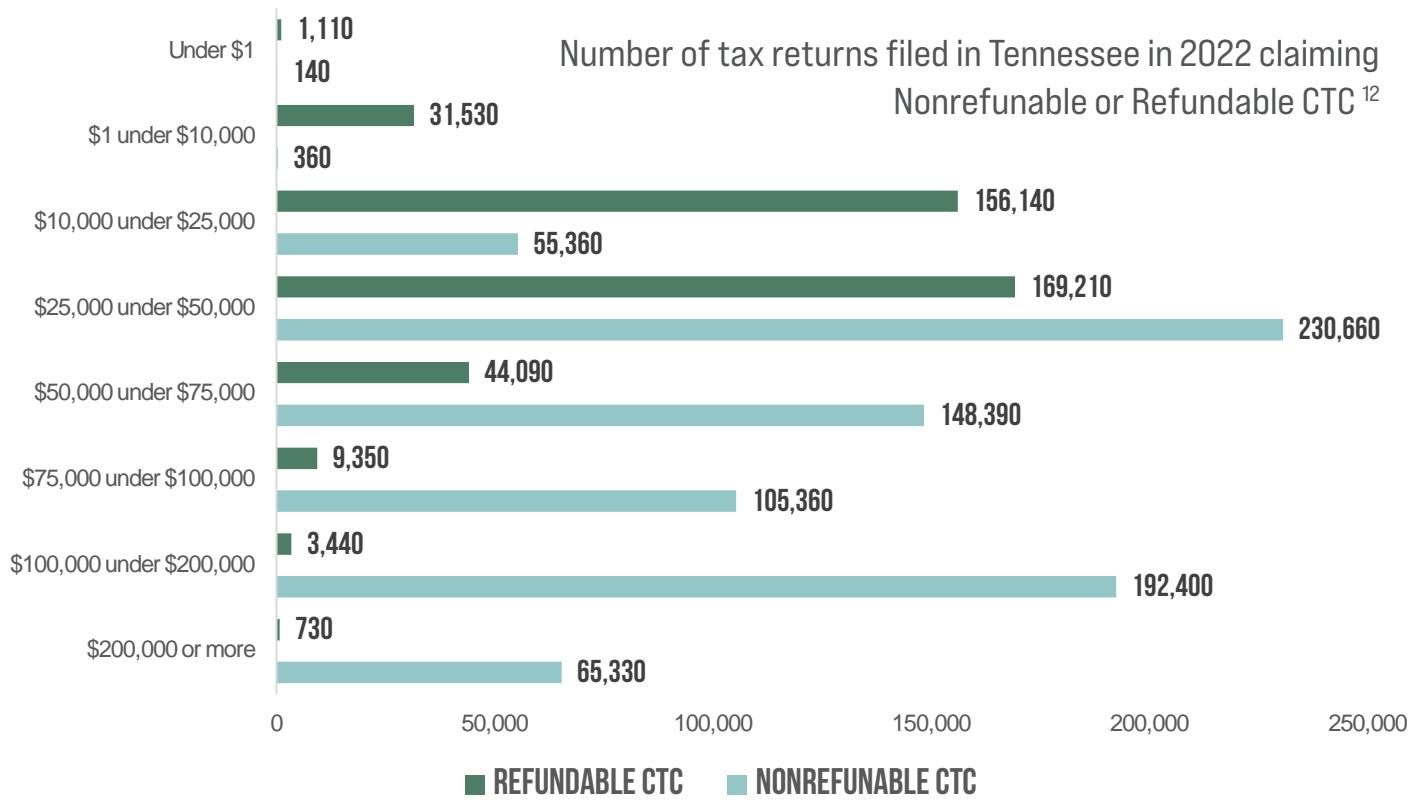
In 2022, 25 percent of Tennessee tax returns received a Nonrefundable Child and Other Dependent Tax Credit for a total of \$1.7 billion statewide.¹²

Additionally, 13 percent of returns received the Refundable Child Tax Credit or Additional Child Tax Credit (CTC) for a total of \$788 million.¹²

Average Nonrefundable & Refundable Child Tax Credit by Gross Income¹²



Number of tax returns filed in Tennessee in 2022 claiming Nonrefundable or Refundable CTC¹²



Economic Stress and Tennessee Families

Economics

“Utilities are a growing burden. Every bill feels heavier than the last—electricity, water, gas, internet. We’re constantly juggling, trying to figure out what can wait and what absolutely has to be paid right away. **It’s exhausting to live like this. We’re not asking for luxury, we just want to be able to meet our basic needs without constant fear.**”

- Parent in Tennessee ¹³

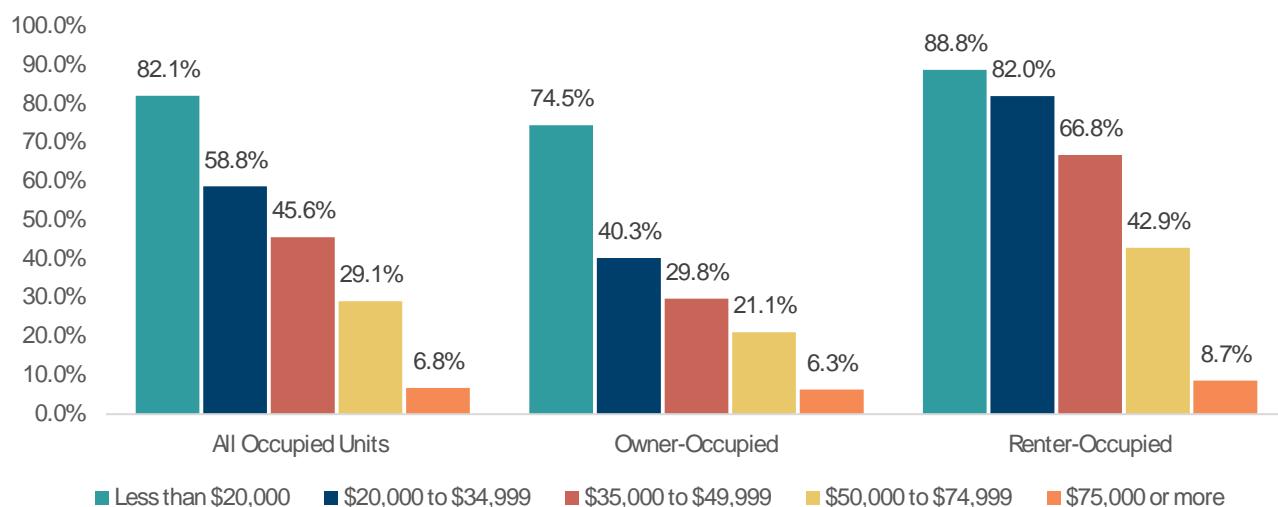
“We try to support each other the best we can, but **the emotional load is heavy, especially with kids who are also feeling the stress in their own ways.** We wish there were more accessible resources and less stigma around asking for help.”

- Parent in Tennessee ¹³





Though many lower-income households are housing cost-burdened (spending 30 percent or more of their income on housing), it is more common among renter-occupied units and those making less than \$20,000.¹⁴



- Three out of four households with children in Tennessee were living in a one-family detached house.¹⁵
- More than one in three Tennessee households with children lived in a structure built before 1979.¹⁶
- 13 percent of Tennessee children had a non-relative living in the household.¹⁷
- 13 percent of Tennessee children had a grandparent living in the household.¹⁸
- More than half of Tennessee households with children had lived in their current home or apartment for 2 to 9 years, while 12 percent moved in less than 12 months ago.¹⁹
- 23 percent of Tennessee renter households were extremely low income, making \$30,380 or less as a 4-person household.²⁰
- In 2023, Tennessee had a shortage of 127,601 rental homes that are affordable and available for extremely low-income renters, an increase of 5,791 from the previous year²⁰
- In 2023, 71 percent of extremely low income renter households (\$30,380 for a family of four) were spending more than half of their income on rent.²⁰

Homelessness

Economics

The numbers below are from Point-in-Time (PIT) information provided to HUD by Continuum of Care homeless assistance programs. The PIT Count provides a count of sheltered and unsheltered people experiencing homelessness on a single night during the last week in January 2024 and are specific to Tennessee.²¹



In 2024, there were 1,013 children experiencing homelessness across the state of Tennessee and 514 young adults age 18 to 24.

Sheltered:

There were 628 children living in an emergency shelter and 78 in transitional housing.

Among young adults, 181 lived in an emergency shelter and 42 were in transitional housing.

Chronically Homeless:

131 families with at least one child were experiencing chronic homelessness. Among those, 70 percent were in an emergency shelter and the remaining 30 percent were unsheltered.

Unaccompanied youth:

There were 15 young people under 18 who were unaccompanied by an adult and experiencing homelessness. Six were in an emergency shelter and nine were unsheltered. Among those ages 18-24, 384 were on their own. Of those, 123 were in an emergency shelter, 37 were in transitional housing and 224 were unsheltered.

Unsheltered definition: In general, for purposes of the Point-in-Time (PIT) count, HUD considers individuals and families sleeping in a place not designed for or ordinarily used as a regular sleeping accommodation (e.g., abandoned buildings, train stations, or camping grounds) as “unsheltered” homeless. Additionally, HUD would generally consider individuals and families sleeping in a garage, shed, or other location outside of a housing structure, but on the property of a housing structure as “unsheltered” homeless for purposes of the PIT count.⁴⁶

Chronically Homeless Definition: A person who: A. Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and B. Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least four separate occasions in the last 3 years where the combined length of time homeless in those occasions is at least 12 months; and C. Has a disability.

Unsheltered:

208 children were living unsheltered.

392 young adults were living unsheltered.

Parenting Youth:

There were 72 young adults parenting children while experiencing homelessness. Of those, 42 were unsheltered, 29 lived in an emergency shelter, and 1 lived in a transitional home.

There were 91 children of parenting young adults who were experiencing homelessness.

Homelessness

Economics

The numbers below are from Point-in-Time (PIT) information provided to HUD by Continuum of Care homeless assistance programs. The PIT Count provides a count of sheltered and unsheltered people experiencing homelessness on a single night during the last week in January 2024 and are specific to Tennessee.²¹

By Continuum of Care regions:

Continuums of Care (CoC) are local planning bodies responsible for coordinating the full range of homelessness services in a geographic area, which may cover a city, county, metropolitan area, or an entire state. Tennessee has 10 Continuums of Care. Each of Tennessee's CoCs and their 2024 data are included below.

Appalachian Regional CoC:

Children experiencing homelessness: 72
Young adults experiencing homelessness: 34
Unsheltered children: 37
Unsheltered young adults: 20

Memphis/Shelby County CoC:

Children experiencing homelessness: 197
Young adults experiencing homelessness: 61
Unsheltered children: 0
Unsheltered young adults: 26

Central Tennessee CoC:

Children experiencing homelessness: 29
Young adults experiencing homelessness: 13
Unsheltered children: 1
Unsheltered young adults: 0

Morristown/Blount, Sevier, Campbell, Cocke Counties CoC:

Children experiencing homelessness: 189
Young adults experiencing homelessness: 84
Unsheltered children: 111
Unsheltered young adults: 66

Chattanooga/Southeast Tennessee CoC:

Children experiencing homelessness: 103
Young adults experiencing homelessness: 46
Unsheltered children: 22
Unsheltered young adults: 31

Murfreesboro/Rutherford County CoC:

Children experiencing homelessness: 21
Young adults experiencing homelessness: 19
Unsheltered children: 0
Unsheltered young adults: 10

Jackson/West Tennessee CoC:

Children experiencing homelessness: 112
Young adults experiencing homelessness: 73
Unsheltered children: 104
Unsheltered young adults: 65

Nashville/Davidson County CoC:

Children experiencing homelessness: 191
Young adults experiencing homelessness: 96
Unsheltered children: 5
Unsheltered young adults: 36

Knoxville/Knox County CoC:

Children experiencing homelessness: 32
Young adults experiencing homelessness: 41
Unsheltered children: 0
Unsheltered young adults: 15

Oak Ridge/Upper Cumberland CoC:

Children experiencing homelessness: 67
Young adults experiencing homelessness: 47
Unsheltered children: 27
Unsheltered young adults: 22

CHILD CARE & EARLY EDUCATION



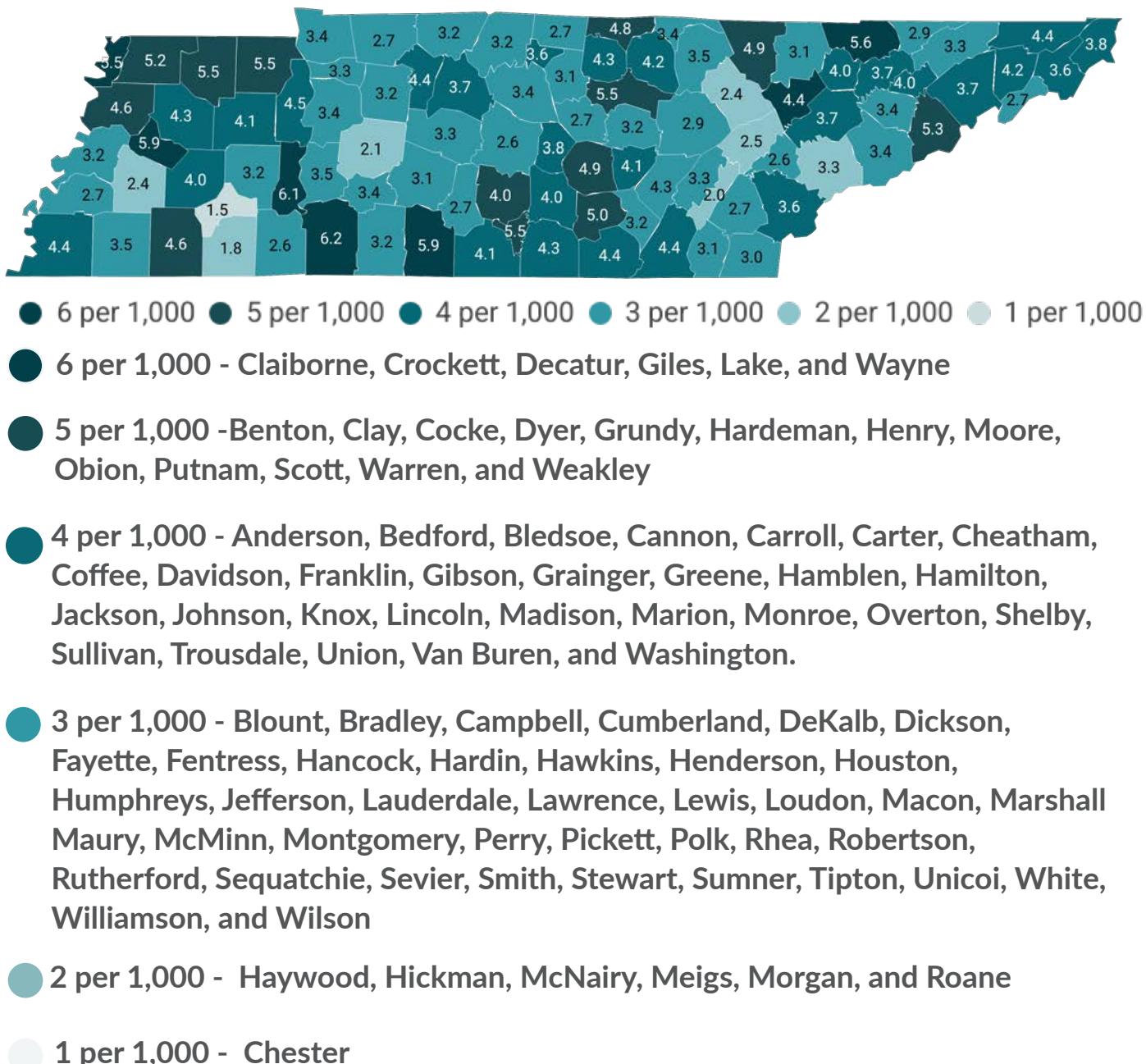
Accessibility

Child Care & Early Education

In 2025 across Tennessee, there were 3.7 child care centers per 1,000 children aged 0-12.¹

The map below breaks this out by county. This includes providers licensed by Tennessee Departments of Human Service (2,350 providers), approved by Tennessee Department of Education (1,759 providers), or Exempt (36 providers).¹

Across all licensed child care facilities in the state, the average capacity was 82 children.¹ The median was 65, though this does not take into consideration challenges with capacity that arise with a fluctuating workforce.



Affordability

Child Care & Early Education

FY2025 median market rate child care in Tennessee by type ^{2,3}

	Infant Center-Based	Infant Group Homes	Infant Family Homes	Toddler Center-Based	Toddler Group Homes	Toddler Family Homes
FY2025	\$13,926	\$9,697	\$9,378	\$12,800	\$9,744	\$9,179
FY2021	\$11,511	\$7,994	\$7,481	\$10,591	\$7,532	\$7,018
Increase in Market Rate Price Over 5 Years	\$2,415 (+21%)	\$1,703 (+21%)	\$1,897 (+25%)	\$2,209 (+21%)	\$2,212 (+21%)	\$2,161 (+31%)

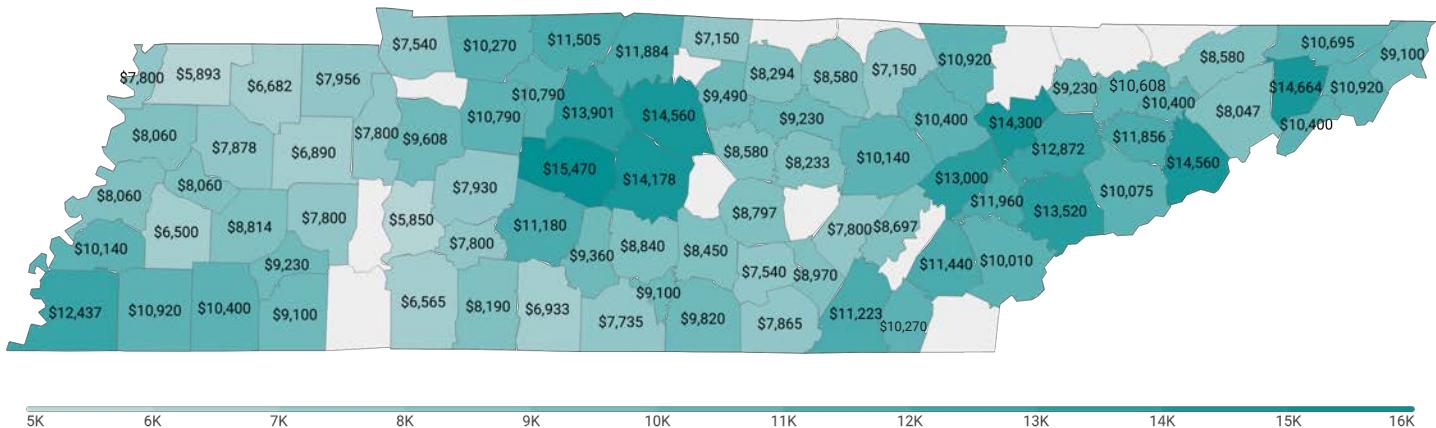
Child care costs continue to be out of reach for many families, particularly single-income households. For many families, child care is the largest household expense, totaling more than their rent or mortgage.

Infant center-based care is more than 2025 in-state tuition at all of Tennessee's four-year public universities.⁴



Affordability

Child Care & Early Education



Blank counties indicate no reporting providers in the county.

Average Annual Infant Care ⁵

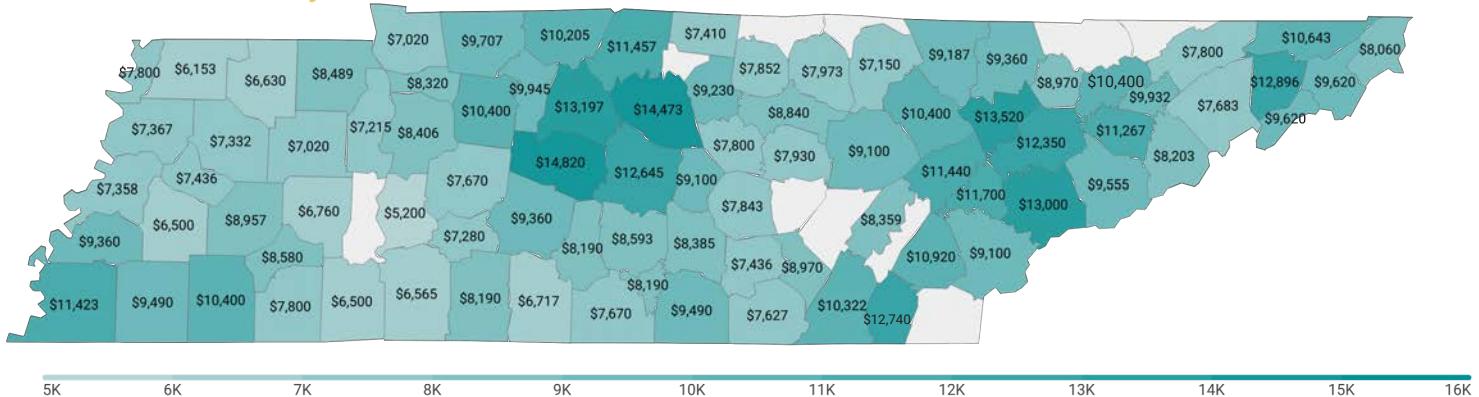
Average of FY2025 median market rate for Center-Based, Group Home and Family Home providers in the county

County	Average Annual Infant Cost	County	Average Annual Infant Cost	County	Average Annual Infant Cost	County	Average Annual Infant Cost	County	Average Annual Infant Cost
Anderson	\$14,300	Decatur		Henderson	\$7,800	Maury	\$11,180	Sequatchie	\$8,970
Bedford	\$8,840	DeKalb	\$8,580	Henry	\$7,956	McMinn	\$11,440	Sevier	\$10,075
Benton	\$7,800	Dickson	\$10,790	Hickman	\$7,930	McNairy	\$9,100	Shelby	\$12,437
Bledsoe	\$7,800	Dyer	\$8,060	Houston		Meigs		Smith	\$9,490
Blount	\$13,520	Fayette	\$10,920	Humphreys	\$9,608	Monroe	\$10,010	Stewart	\$7,540
Bradley	\$10,270	Fentress	\$7,150	Jackson	\$8,294	Montgomery	\$10,270	Sullivan	\$10,695
Campbell		Franklin	\$9,820	Jefferson	\$11,856	Moore	\$9,100	Sumner	\$11,884
Cannon		Gibson	\$7,878	Johnson	\$9,100	Morgan	\$10,400	Tipton	\$10,140
Carroll	\$6,890	Giles	\$6,933	Knox	\$12,872	Obion	\$5,893	Trousdale	
Carter	\$10,920	Grainger	\$10,608	Lake	\$7,800	Overton	\$8,580	Unicoi	\$10,400
Cheatham	\$10,790	Greene	\$8,047	Lauderdale	\$8,060	Perry	\$5,850	Union	\$9,230
Chester	\$9,230	Grundy	\$7,540	Lawrence	\$8,190	Pickett		Van Buren	
Claiborne		Hamblen	\$10,400	Lewis	\$7,800	Polk		Warren	\$8,797
Clay		Hamilton	\$11,223	Lincoln	\$7,735	Putnam	\$9,230	Washington	\$14,664
Cocke	\$14,560	Hancock		Loudon	\$11,960	Rhea	\$8,697	Wayne	\$6,565
Coffee	\$8,450	Hardeman	\$10,400	Macon	\$7,150	Roane	\$13,000	Weakley	\$6,682
Crockett	\$8,060	Hardin		Madison	\$8,814	Robertson	\$11,505	White	\$8,233
Cumberland	\$10,140	Hawkins	\$8,580	Marion	\$7,865	Rutherford	\$14,178	Williamson	\$15,470
Davidson	\$13,901	Haywood	\$6,500	Marshall	\$9,360	Scott	\$10,920	Wilson	\$14,560

Blank cells indicate no reporting providers in the county

Affordability

Child Care & Early Education



Blank counties indicate no reporting providers in the county.

Average Annual Toddler Care⁵

Average of FY2025 median market rate for Center-Based, Group Home and Family Home providers in the county

County	Average Annual Toddler Cost	County	Average Annual Toddler Cost	County	Average Annual Toddler Cost	County	Average Annual Toddler Cost	County	Average Annual Toddler Cost
Anderson	\$13,520	Decatur		Henderson	\$6,760	Maury	\$9,360	Squatchie	\$8,970
Bedford	\$8,593	DeKalb	\$7,800	Henry	\$8,489	McMinn	\$10,920	Sevier	\$9,555
Benton	\$7,215	Dickson	\$10,400	Hickman	\$7,670	McNairy	\$7,800	Shelby	\$11,423
Bledsoe		Dyer	\$7,367	Houston	\$8,320	Meigs		Smith	\$9,230
Blount	\$13,000	Fayette	\$9,490	Humphreys	\$8,406	Monroe	\$9,100	Stewart	\$7,020
Bradley	\$12,740	Fentress	\$7,150	Jackson	\$7,852	Montgomer	\$9,707	Sullivan	\$10,643
Campbell	\$9,360	Franklin	\$9,490	Jefferson	\$11,267	Moore	\$8,190	Sumner	\$11,457
Cannon	\$9,100	Gibson	\$7,332	Johnson	\$8,060	Morgan	\$10,400	Tipton	\$9,360
Carroll	\$7,020	Giles	\$6,717	Knox	\$12,350	Obion	\$6,153	Trousdale	
Carter	\$9,620	Grainger	\$10,400	Lake	\$7,800	Overton	\$7,973	Unicoi	\$9,620
Cheatham	\$9,945	Greene	\$7,683	Lauderdale	\$7,358	Perry	\$5,200	Union	\$8,970
Chester	\$8,580	Grundy	\$7,436	Lawrence	\$8,190	Pickett		Van Buren	
Claiborne		Hamblen	\$9,932	Lewis	\$7,280	Polk		Warren	\$7,843
Clay		Hamilton	\$10,322	Lincoln	\$7,670	Putnam	\$8,840	Washington	\$12,896
Cocke	\$8,203	Hancock		Loudon	\$11,700	Rhea	\$8,359	Wayne	\$6,565
Coffee	\$8,385	Hardeman	\$10,400	Macon	\$7,410	Roane	\$11,440	Weakley	\$6,630
Crockett	\$7,436	Hardin	\$6,500	Madison	\$8,957	Robertson	\$10,205	White	\$7,930
Cumberland	\$9,100	Hawkins	\$7,800	Marion	\$7,627	Rutherford	\$12,645	Williamson	\$14,820

Blank cells indicate no reporting providers in the county

Cost of Quality Care

Child Care & Early Education

"The Provider Cost of Quality Calculator (PCQC) was used to investigate the costs per child across the different operating contexts of licensed child care providers in Tennessee. The PCQC was created and is supported by the U.S. Department of Health and Human Services Administration for Children and Families. This tool uses a set of assumptions to estimate the operating costs and revenue for child care providers of varying quality levels and/or across different geographical regions based on a combination of default national and state-specific values including enrollment and payment rate information by care level, personnel costs, non-personnel costs, revenue, and quality levels." -2024 Cost of Quality Care Study⁶

In 2022, Tennessee Department of Human Services updated their Quality Rating Improvement System (QRIS) to a score from 0 to 100. Because the new QRIS had not been in place for a full year when data for the Cost of Quality Care Study were gathered, the report used the prior scale of 0 to 3 Stars, with higher numbers indicating higher quality environments for early childhood care.

Center-Based Care⁶

Total Costs Per-Child for Center Based Care by Classroom Age & Star Rating - Tier 1 Market (based upon 2023 expenditures)

	< 3 Stars	3 Stars
Infant	\$12,775	\$14,141
Toddler	\$9,653	\$10,523
Preschool	\$6,976	\$6,984

Total Costs Per-Child for Center Based Care by Classroom Age & Star Rating - Tier 2 Market (based upon 2023 expenditures)

	< 3 Stars	3 Star
Infant	\$15,093	\$14,579
Toddler	\$7,806	\$10,496
Preschool	\$5,889	\$6,984

Home Providers⁶

Total Costs Per-Child for Home-Based Providers by Star Rating and Tier - (based upon 2023 expenditures)

	< 3 Stars	3 Stars
Tier 1	\$5,474	\$6,571
Tier 2	\$4,796	\$6,204

Tennessee counties that were either one of the top-20 highest population counties or one of the top-20 highest average per capita three-year personal income counties are identified as Tier 1, all other counties are identified as Tier 2.

Workforce

Child Care & Early Education

Ensuring a strong child care workforce is a critical component of a healthy and functioning society. Creating a workforce that is highly skilled and well compensated allows for more opportunities for children's brains to develop and parents to engage in the workforce.



Income ⁶

Income by Star Rating - Center-Based

	< 3 Stars	3 Stars
Average Salary for Teacher/Educator	\$24,960	\$29,110

Benefits ⁶

Percent of surveyed child care providers (including center-based, family home and group home providers) reporting benefits offered to their employees

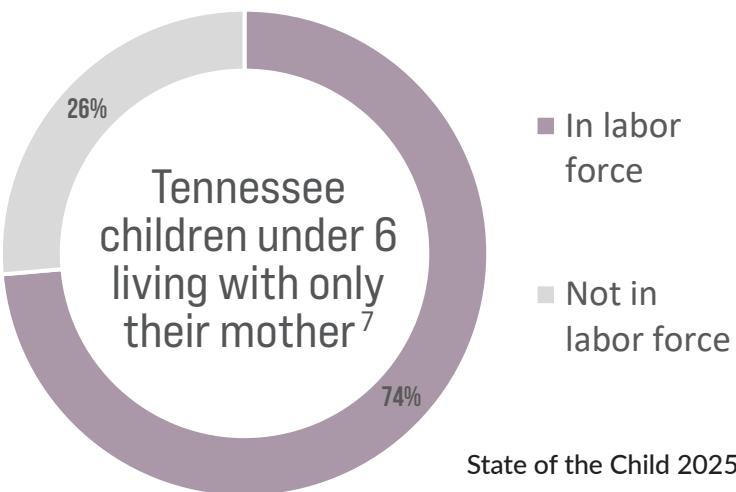
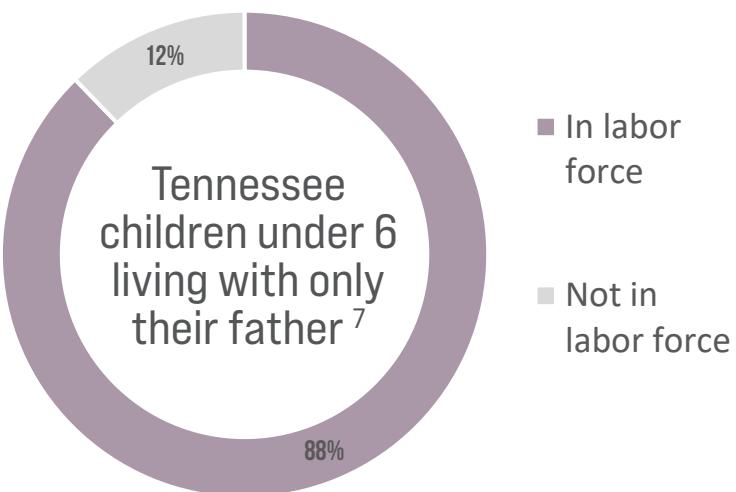
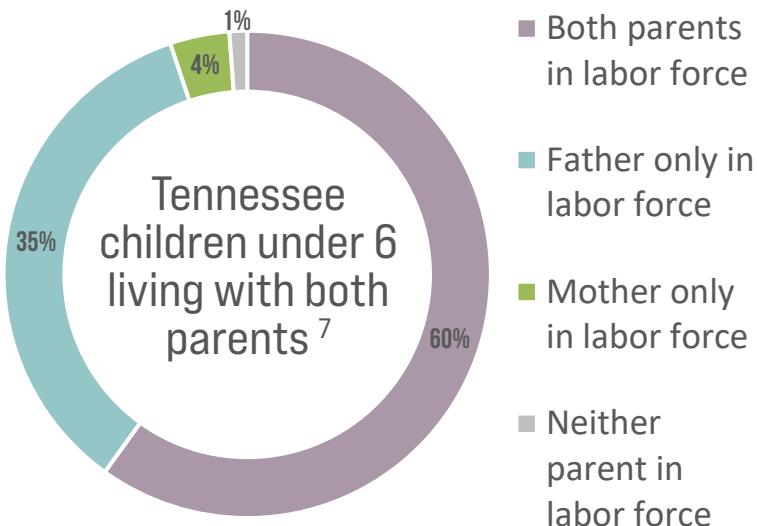


Workforce

Child Care & Early Education



65 percent of Tennessee children under 6 had all available parents in the workforce in 2024.⁷

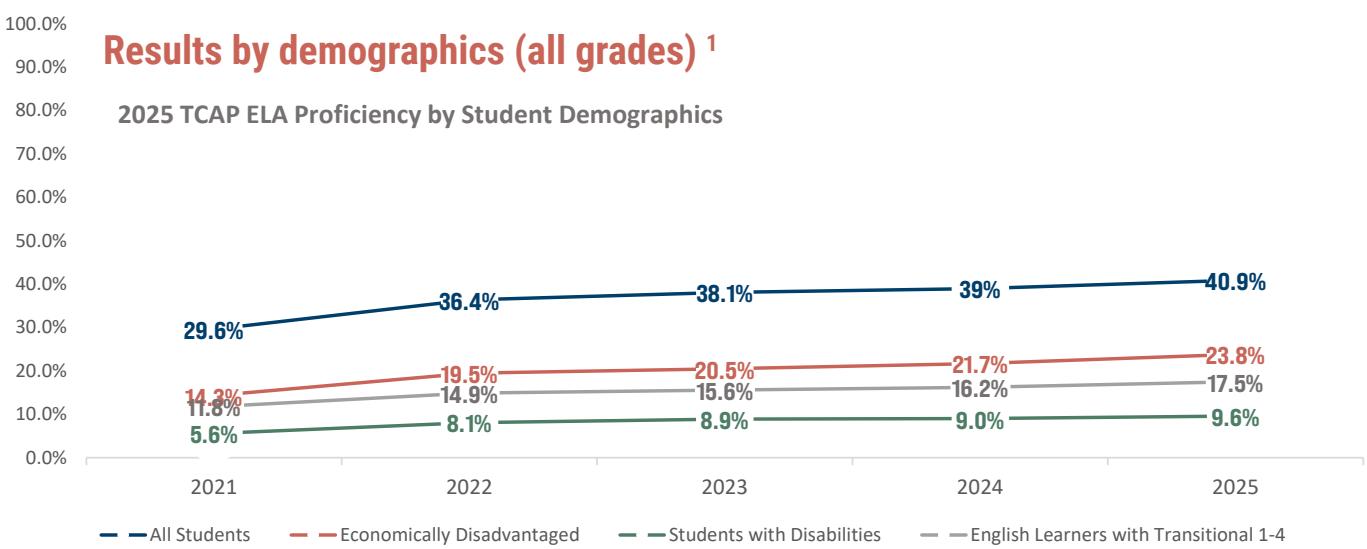
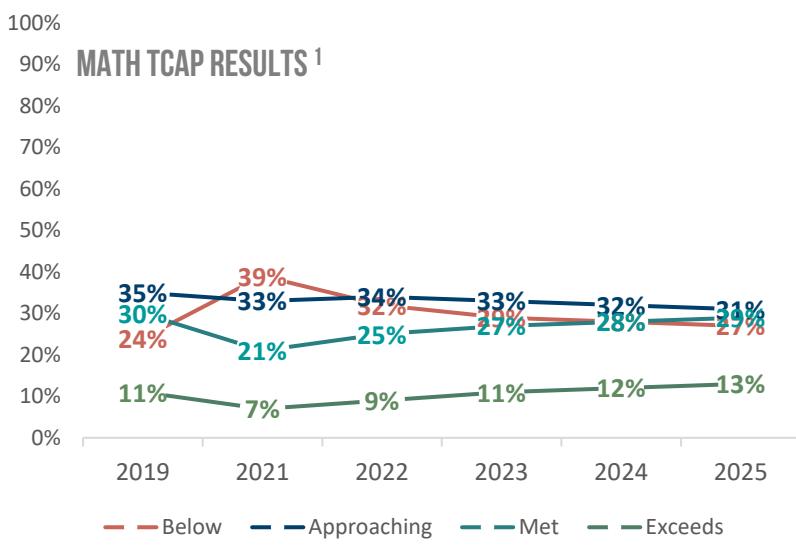
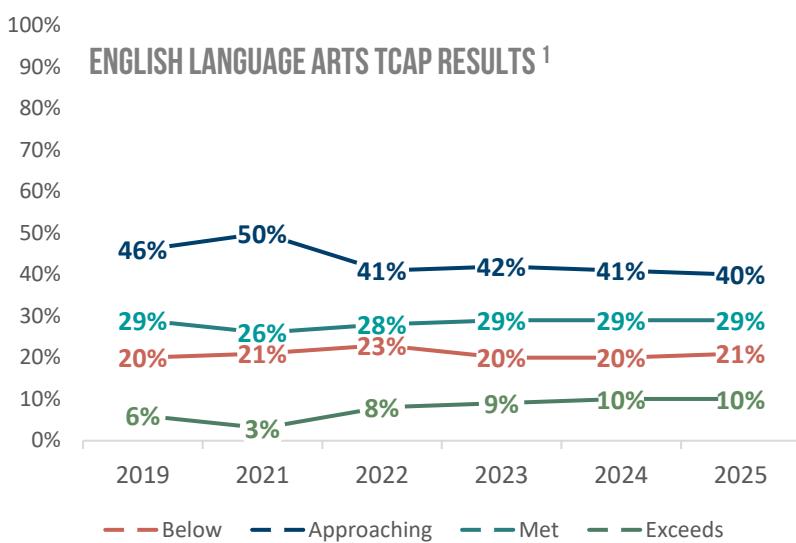


EDUCATION



Tennessee Comprehensive Assessment Program (TCAP) Results

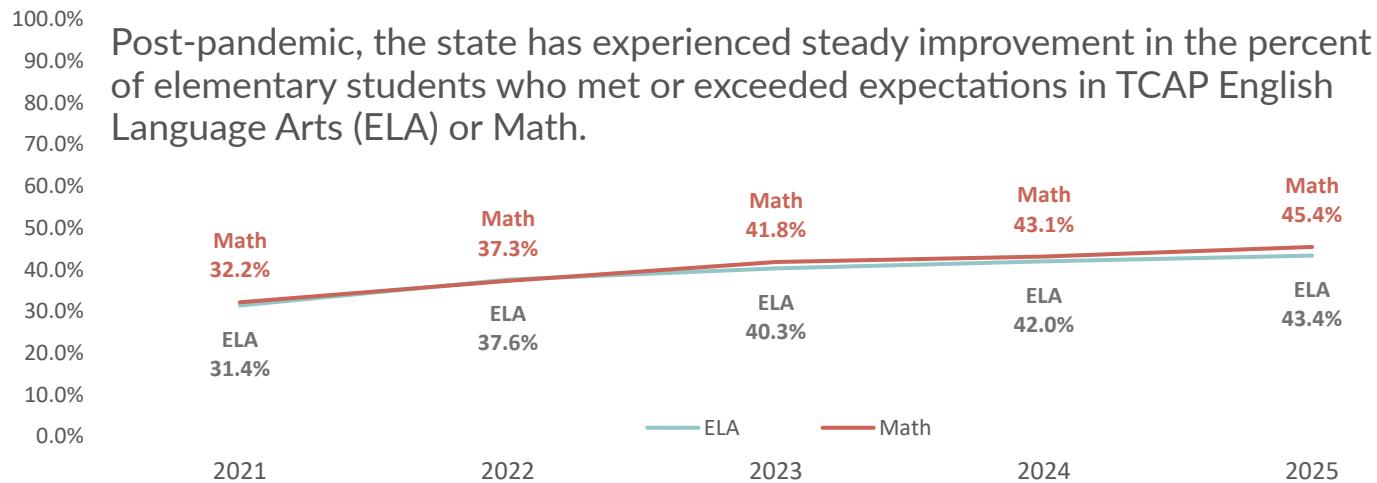
Education



TCAP Results

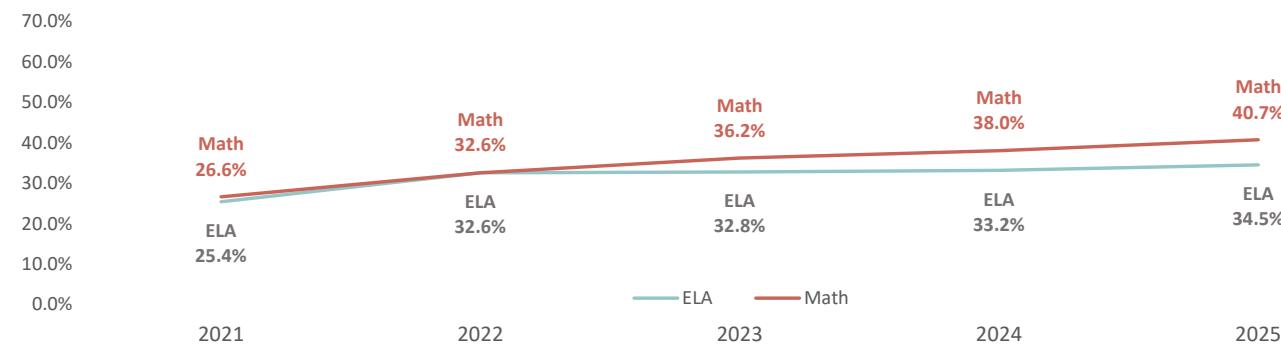
Education

Elementary School ¹



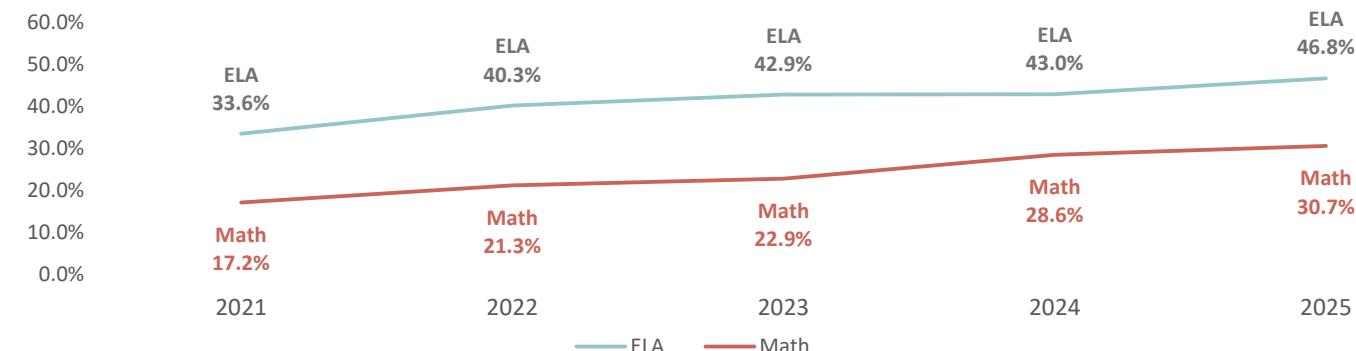
Middle School ¹

After the pandemic, middle school gains in Math have outpaced improvements in English Language Arts.



High School (End of Course Assessment) ¹

Historically, high school students have performed much better in English Language Arts than in Math but the state continues to see improvement in both.



National Assessment of Educational Progress

Education



The National Assessment of Educational Progress (NAEP) is the largest nationally-representative assessment of student achievement in the United States. Often called the “Nation’s Report Card,” NAEP provides consistent, comparable data on student performance across states and over time. In addition to testing, NAEP conducts a survey regarding experiences and opportunities in education, providing insight into school climate.

This analysis focuses on **Math and Reading** scores for **Grades 4 and 8**, comparing Tennessee to the national public average. The goal was to understand how Tennessee’s performance has evolved over time compared to the rest of the United States, especially in relation to key historical events such as **major education policy changes** and the **COVID-19 pandemic**.

To do this, a piecewise multilevel modeling approach was used, which accounts for differences between states and allows opportunity to examine changes in score trends before and after specific years. This method is particularly useful for identifying whether Tennessee’s trajectories differ meaningfully from national patterns.

Data Analysis:

Focused on three key years:

2011: A year associated with major education policy changes.

2019: The year just before the COVID-19 pandemic disrupted schooling.

2022: The first full year of post-pandemic NAEP data, reflecting potential recovery.

For each subject and grade, a piecewise regression model was built that:

- Estimated the trend in scores before and after each breakpoint year.
- Compared Tennessee’s performance to national public averages.
- Included an interaction term to measure whether Tennessee’s **post-breakpoint trend differed from the national trend** (i.e., whether Tennessee’s scores changed faster or slower than the national average after each breakpoint).

NAEP data can be accessed here: <https://www.nationsreportcard.gov/ndecore/landing>

National Assessment of Educational Progress

Education

Before and After 2011 (Policy Change)

- Before 2011, Tennessee lagged behind the national average in both Math and Reading.
- After 2011, Tennessee's scores continued to improve, reaching the national average, while the national average began to decline.
 - Math: Tennessee's growth was significantly stronger than the national trend in both Grades 4 and 8.
 - Reading: Tennessee's growth was slightly stronger than the national average, but the difference was not statistically significant.

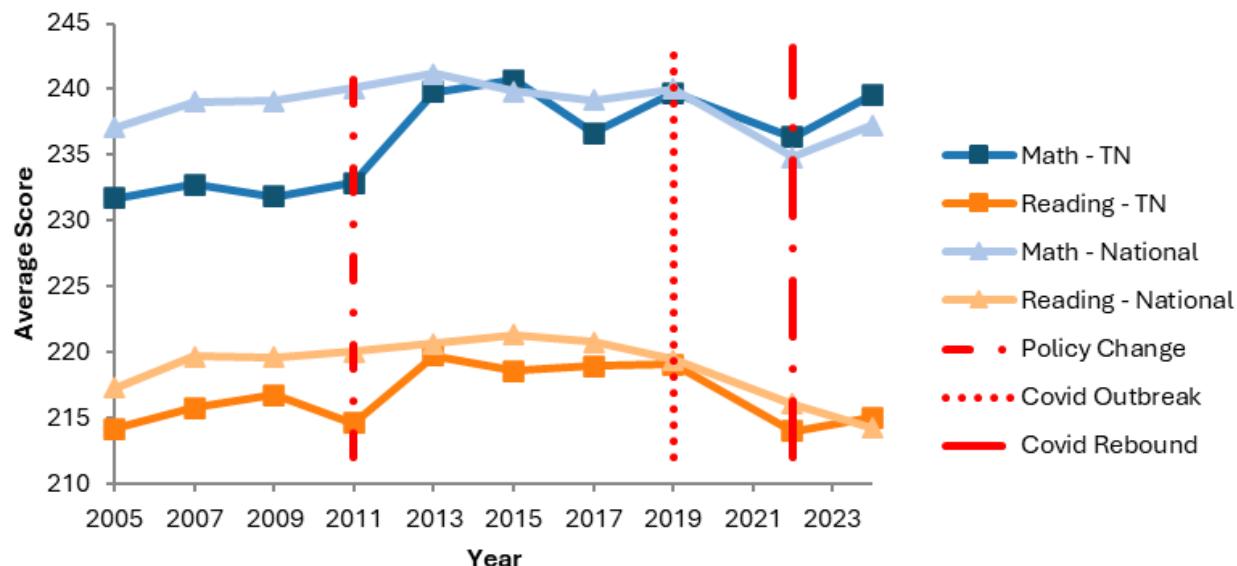
After 2019 (COVID Outbreak)

- Scores declined nationwide in both subjects and grades.
- Tennessee's decline was less severe than the national average, especially in Math.
 - Math: Tennessee's post-2019 trend was significantly more positive than the national trend.
 - Reading: Tennessee's decline was similar to the national average, with no significant difference.

Since 2022 (COVID Rebound)

- Tennessee has shown strong signs of academic rebound, particularly in Math.
 - Math Grade 8: Tennessee's scores improved significantly faster than the national average.
 - Math Grade 4: Also showed a positive rebound, though marginally significant.
 - Reading: Tennessee's scores improved slightly, but not significantly different from national trends.

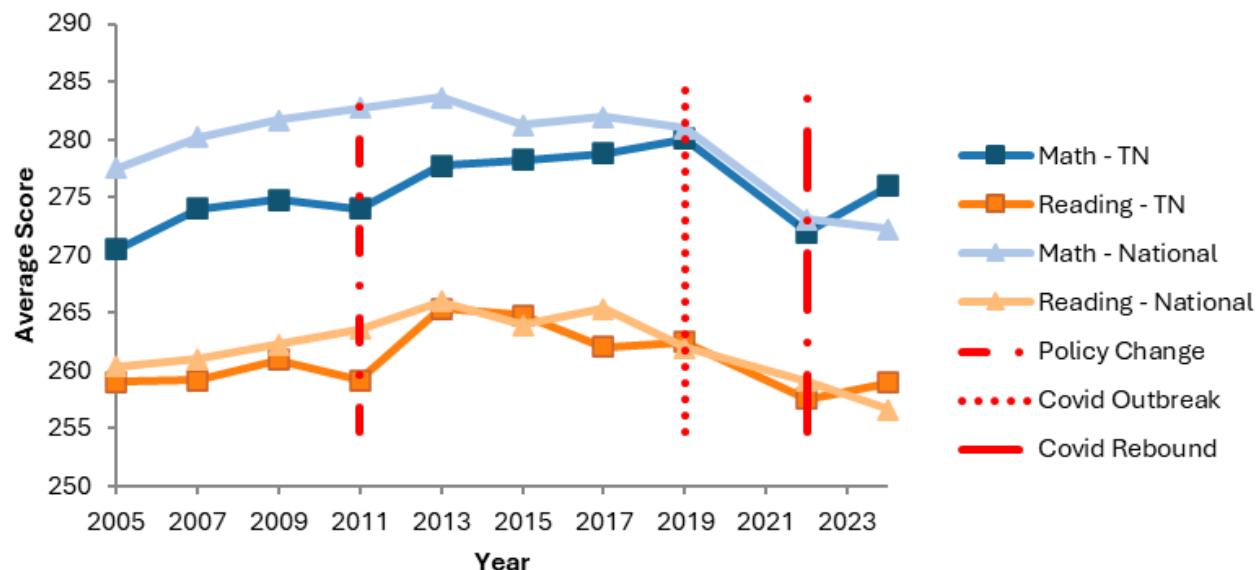
Comparison of 4th Grade Scores ²



National Assessment of Educational Progress

Education

Comparison of 8th Grade Scores²



This analysis reveals a compelling story of Tennessee's academic trajectory:

- Tennessee has made substantial progress in Math since 2011, moving from below-average performance to outpacing national trends.
- During the COVID-19 pandemic, Tennessee's students experienced less severe declines than the national average, suggesting greater resilience.
- Since 2022, Tennessee has shown strong signs of recovery, especially in middle school Math, where the rebound is statistically significant.
- Reading scores have had a slower recovery and remain an area for focus and investment.

National Assessment of Educational Progress

Education

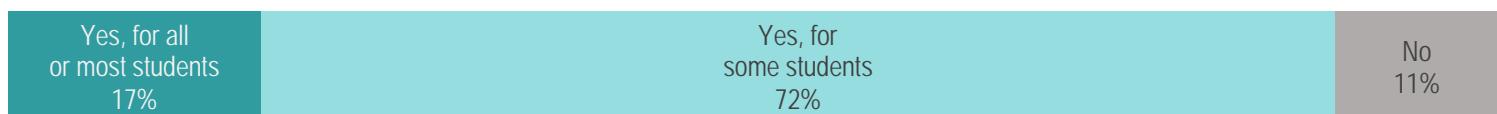
Experiences and Opportunities in Education Among Tennessee 4th Grade Students²

Access to Academic Supports

Did you receive any tutoring in math this school year?



In this school year, have in-school tutoring programs been provided to students since the period of extended remote and hybrid learning because of the COVID-19 pandemic?



Access to Social-Emotional Supports

In this school year, have social-emotional supports (e.g., counseling or a toll-free hotline) been provided to students since the period of extended remote and hybrid learning because of the COVID-19 pandemic?



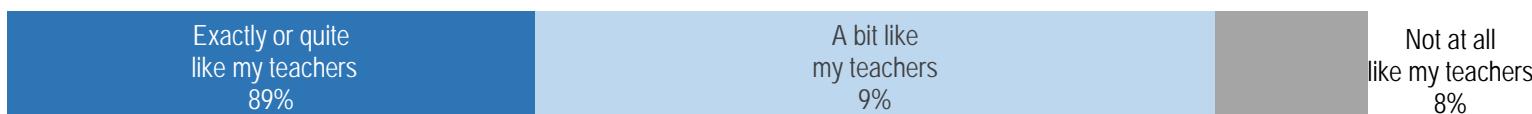
School Climate

How much does the following statement describe the teachers at your school this year?

“Students feel comfortable talking with their teachers.”



“Teachers expect students to do well.”



“Teachers are available when students need them.”



Discipline

Education

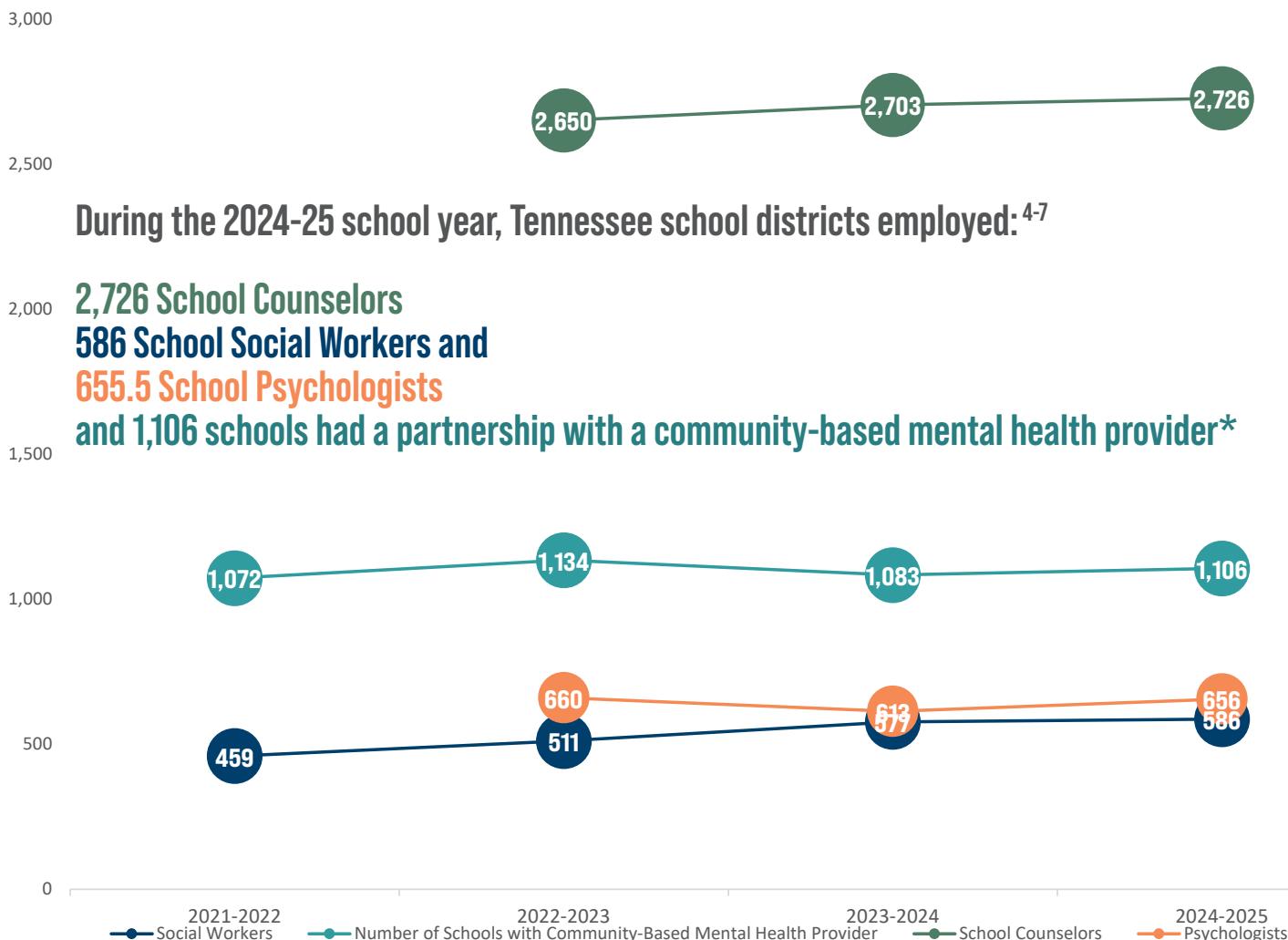
Corporal Punishment

In 2023-24 there were 524 instances of corporal punishment in public schools. Of those, 16 involved a student with an 504 Plan and at least 83 involved a student with an IEP. In total, 27 LEAs reported instances of corporal punishment occurring in the 2023-24 school year.³

Among LEAs that used corporal punishment, 48 percent reported fewer than 10 instances. The number of instances per LEA ranged from fewer than 10 to 135. One LEA accounted for a quarter of the instances of corporal punishment.³

Support Services

Education

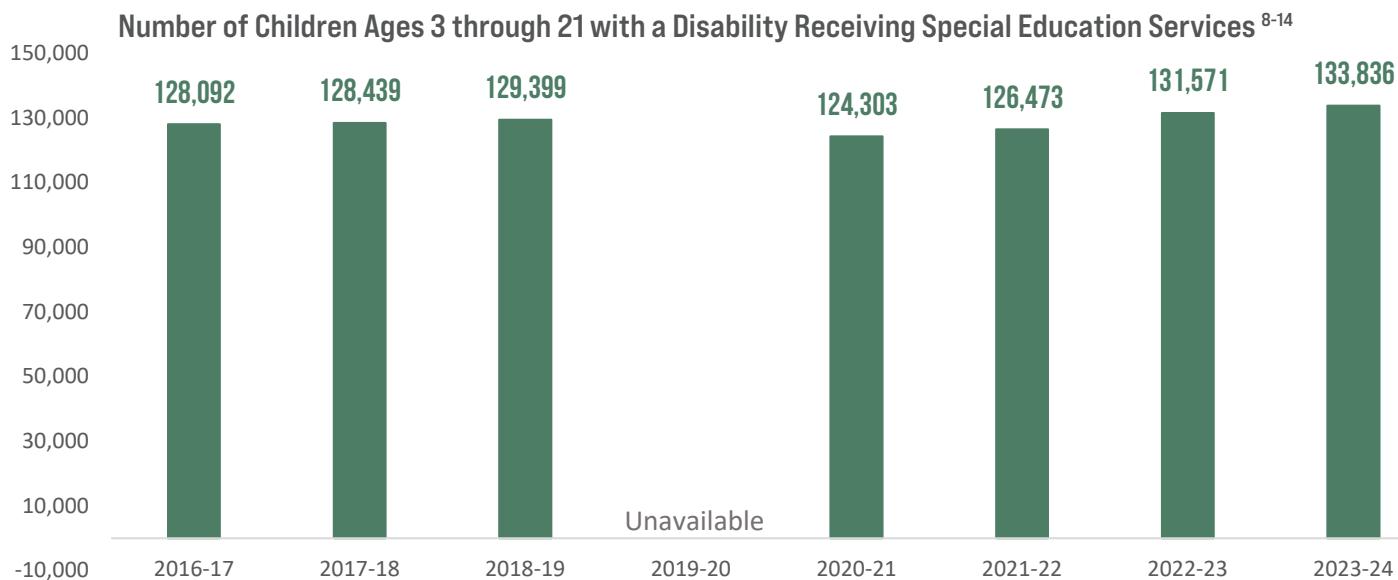


*To provide therapy for students with parental permission

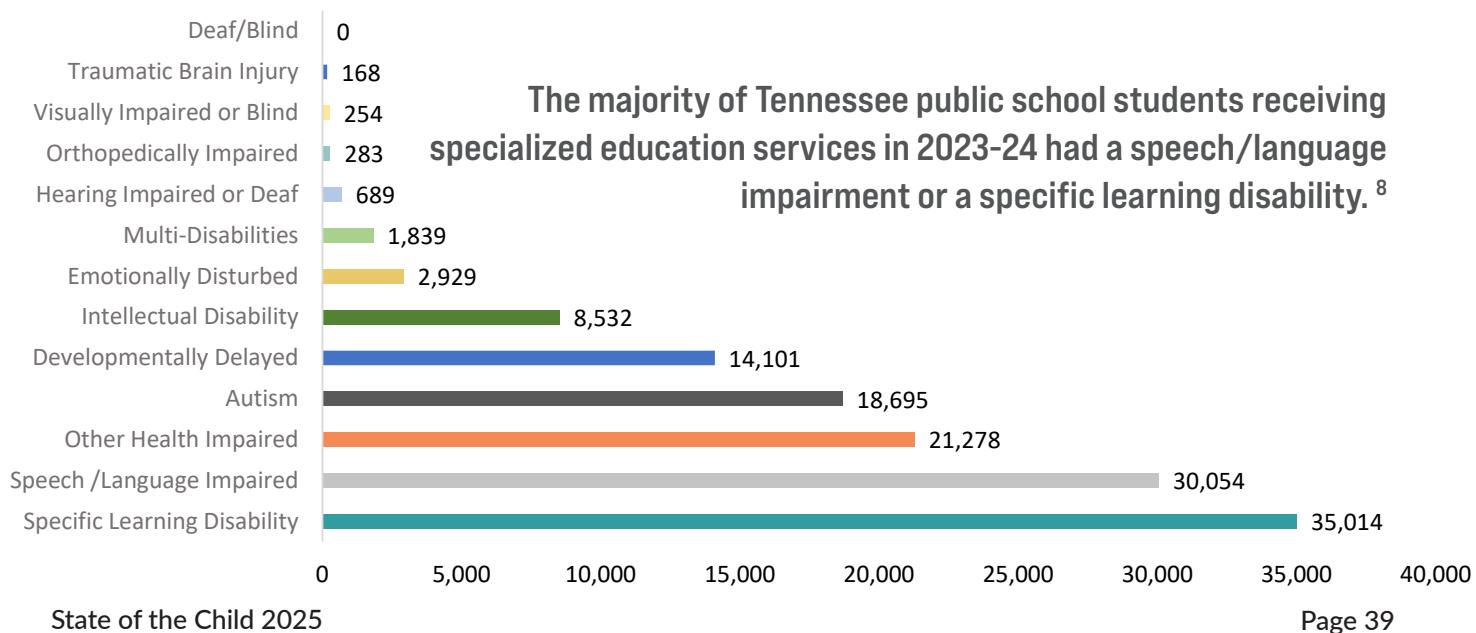
Support Services

Education

In 2023-24, 133,836 public school students with disabilities categorized under part B of Individuals with Disabilities Education Act (IDEA) received special education services.⁸



Number of Children Ages 3 through 21 with a Disability Receiving Special Education Services by the 13 Disability Categories Established in IDEA.



School Infrastructure

Education

Building Tennessee's Tomorrow: Anticipating the State's Infrastructure Needs is the most recent in a series of legislatively required reports produced by the Tennessee Advisory Commission on Intergovernmental Relations. The report maintains an inventory of infrastructure needs across the state. Each year the report reviews needs over a five-year period. The 2025 report reviewed state-wide needs from July 2023-June 2028. All of the figures reflected below represent that time period. The 2025 report found school renovations and new public schools & additions to be the fourth and fifth highest need across the state, totaling \$11.2 billion.¹⁵

One in 10 Tennessee schools had infrastructure rated in fair or poor condition.¹⁶

School districts where at least one in three schools have infrastructure rated in fair or poor condition:¹⁶

Germantown - 66.7 percent

Lake County - 66.7 percent

Bledsoe County - 60.0 percent

Davidson County - 43.4 percent

Marion County - 40.0 percent

Fayetteville- 33.3 percent

Humphreys County - 33.3 percent

Milan SSD - 33.3 percent

Tennessee's public schools needed 79.6 million dollars in infrastructure improvements to be in compliance with state and federal laws.¹⁷

Funds needed for compliance by state and federal law:¹⁷

\$17 million for asbestos compliance

\$47 million for Americans with Disabilities Act compliance

\$13 million for Education Improvement Act compliance

\$8.6 million for fire codes compliance.

School districts with the greatest need for compliance funding:¹⁷

\$36.7 million - Shelby County

\$6.7 million - Bristol

\$5.2 million - Sullivan County

\$4.2 million - Collierville

\$3.5 million - Madison County

\$3.5 million - Germantown

\$3.0 million - McNairy County

\$2.0 million - Lauderdale County

\$1.9 million - Montgomery County

\$1.9 million - Oak Ridge



School Infrastructure

Education

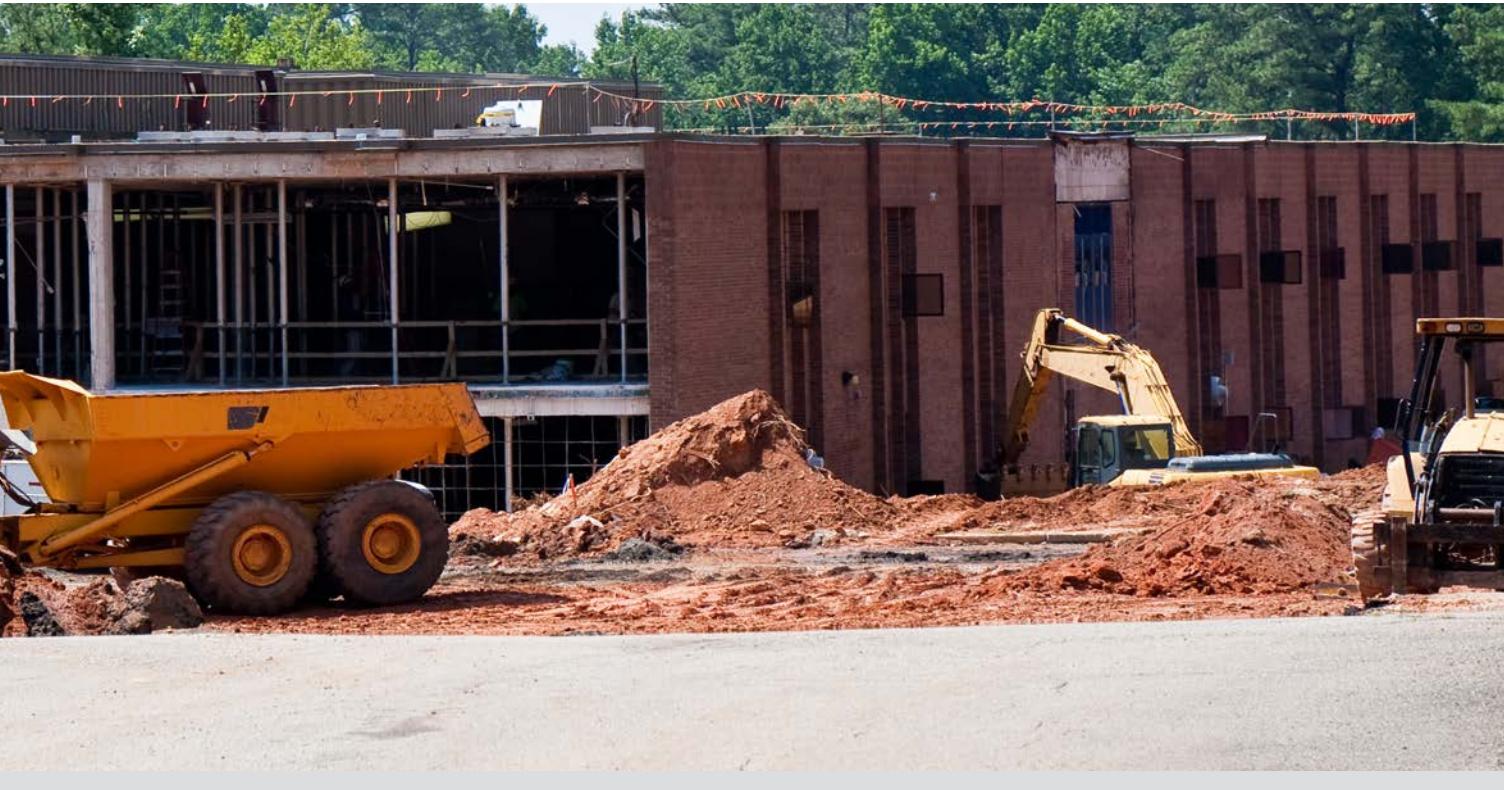
Across all existing Tennessee public schools, **\$6.6 billion** is needed to bring all existing public schools' components up to good or excellent condition according to the report's Facility Rating Scale, averaging **\$6,885 per student.**¹⁸

School districts with greatest need for infrastructure funding at existing public schools:¹⁸

\$4.0 billion - Davidson County
\$432 million - Shelby County
\$241 million - Wilson County
\$240 million - Rutherford County
\$196 million - Williamson County
\$143 million - Montgomery County
\$74 million - Robertson County
\$57 million - Maury County
\$56 million - Bartlett

Tennessee public schools need **\$4.6 billion in infrastructure funds for new public schools and additions.**¹⁵

Tennessee public schools in fair or poor condition need **2.6 billion dollars in infrastructure improvement.**¹⁸



HEALTH



Chronic Health & Disability Diagnosis

Health

Many of Tennessee's public-school students work to manage chronic health conditions and disabilities while at school. School nurses, social workers, counselors, and other support staff are crucial in maintaining a healthy and safe learning environment for all children.



In the 2024-25 school year, 158,053 public-school students had a chronic health condition medically diagnosed by a healthcare provider.¹

The three most common chronic health conditions among public school students were:¹

ADHD

40,114

Asthma

30,356

Severe/life-threatening allergy/anaphylaxis

29,990

In the 2024-25 school year at public school or during a school-sponsored activity¹

● Albuterol was administered 28,363 times.

● Epinephrine was administered 407 times.

● Emergency seizure medication was administered 293 times.

● An opioid antagonist was administered 46 times.

Chronic Health & Disability Diagnosis

Health



In the 2024-25 school year, 180,625 public-school students had a chronic illness or disability diagnosis.²

Automated External Defibrillators (AED):¹
LEA
99% of districts had an AED in every school
Public Charter
97% had an AED on site
Non-Public
71% of reporting schools had an AED on site.

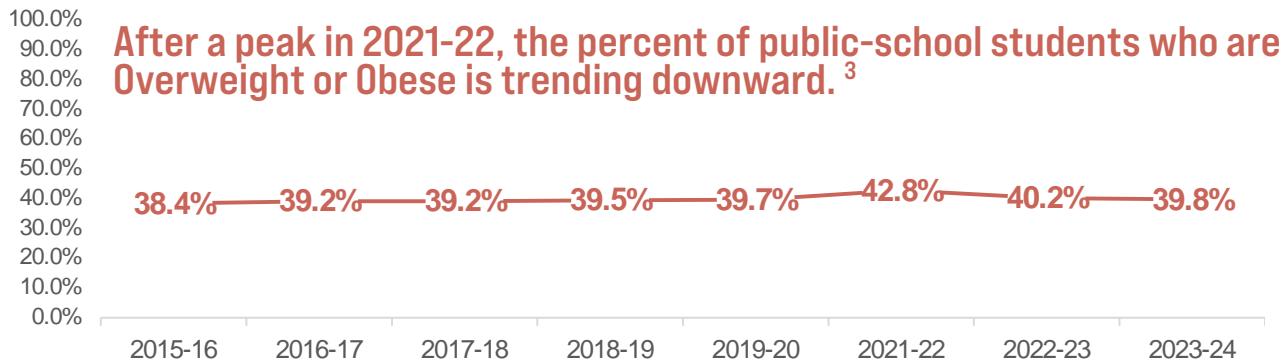
In the 2024-25 school year, school nurses conducted more than 1 million health screenings in public schools. The most common screenings were vision, hearing, and Body Mass Index (BMI).¹

Tennessee public schools had 1,712 full-time nurses and 136 part-time nurses. Across the state, there are 6 districts and 12 public charter schools that did not meet the recommended 1:750 ratio during the 2024-25 school year.¹

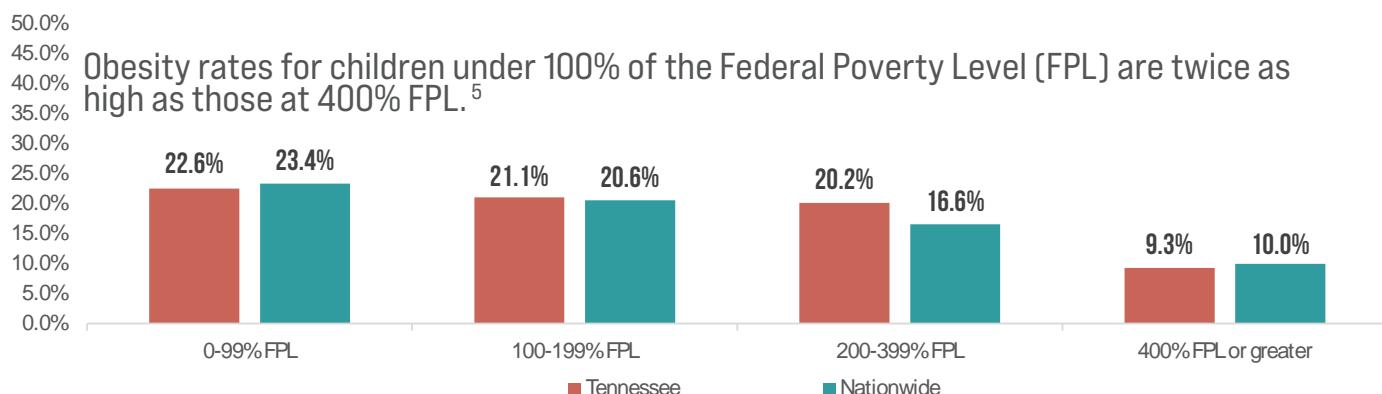
Obesity

Health

Obesity in childhood can be a risk factor for diabetes, high blood pressure, or high cholesterol. Addressing and reducing childhood obesity requires a systemic approach that evaluates a child's access to affordable, and nutritious foods, safe green space and parks to play, and other contributing health factors. In addition to the listed physical health contributors, mental health can play a large role in childhood obesity.



In 2023-24, nearly one in four Tennessee children ages 6 through 11 were physically active for at least 60 minutes per day.⁴



97 percent of schools have water bottle refilling stations.²

In the 2024-25 school year, 1,849 schools had a school produce garden, an increase from 1,723 the previous year.²

84 percent of districts report no schools allowing the denial of physical activity as a form of punishment.²

24 percent of students were withheld from PE for academic remediation, preparation for other classes, or standardized tests.⁶

Food Insecurity & Tennessee Food Banks

Health



During the Fall 2025 government shutdown, the temporary suspension of SNAP benefits left thousands of Tennessee families without critical food support. In response to this urgent need, we connected with five regional food banks across the state to understand how their communities were affected. Each organization shared data on the rising demand, the challenges they faced, and the swift actions they took to meet the surge in food insecurity.

Food Insecure Population ⁷	Overall	Children
Second Harvest Food Bank of Northeast Tennessee – Kingsport	90,690	20,420
Second Harvest Food Bank of East Tennessee – Maryville	1,358,344	278,941
Chattanooga Area Food Bank – Chattanooga*	107,270	27,630
Second Harvest Food Bank of Middle Tennessee – Nashville*	Over 450,000	

*County level food insecurity for service population provided and available upon request.

Food Insecurity & Tennessee Food Banks

Health

Year-Over-Year Change from 2024 to 2025⁷

Second Harvest Food Bank of Northeast Tennessee – Kingsport
October 2025 compared to October 2024

29% increase in meals distributed.

Second Harvest Food Bank of East Tennessee – Maryville

Purchased **175,000+ lbs** of food earlier than normal due to need, equivalent to **\$160,000** in additional cost

Chattanooga Area Food Bank – Chattanooga

October 2025 compared to October 2024

0.9% increase in households served

0.2% increase in children served

November 2025 compared to November 2024

12.7% increase in households served

15.4% increase in children served

Second Harvest Food Bank of Middle Tennessee – Nashville

October 2025 compared to October 2024

46% increase in individuals served

November 2025 compared to November 2024

60% increase in individuals served

Food Insecurity & Tennessee Food Banks

Health



Additional impact of SNAP freeze or actions taken to mitigate the impact⁷

Second Harvest Food Bank of Northeast Tennessee – Kingsport

Actions Taken:

- Purchased shelf-stable foods & protein
- Expanded mobile markets/pantries; expanded home delivery
- Provided IQ Pay; increased partner capacity
- Built/distributed disaster boxes
- Conducted 13 SNAP mass distributions (180,000+ lbs; 6,000+ families)
- Authorized \$200,000 in partner agency credits
- Sourced multiple truckloads of disaster, produce, protein, and dairy boxes

Second Harvest Food Bank of East Tennessee – Maryville

69% more households served

88% more pounds of food distributed

39% increase in agency pickups

47% increase in rural routes

Nearly 110% increase in Emergency Food Box Recipients

Actions Taken:

- Purchased proteins and shelf-stable items
- Increased mobile distribution
- Expanded partner equipment capacity
- Built disaster boxes

Food Insecurity & Tennessee Food Banks

Health



Additional impact of SNAP freeze or actions taken to mitigate the impact⁷

Chattanooga Area Food Bank – Chattanooga

60% increase in households served in the first week of November 2025 compared to the first week of November 2024

70% increase in Tennessee children served during the same period

Second Harvest Food Bank of Middle Tennessee – Nashville

9% more meals distributed in October and November of 2025 than September 2025.

Actions Taken:

- Purchased truckloads of proteins & shelf-stable foods for distribution to their Partner Agencies at zero cost
- Purchased over \$70,000 in hard-to-find baby formula for distribution to their Partner Agencies at zero cost
- Added approximately 1,000 volunteer slots to help sort and pack much needed food
- Increased mobile markets/pantries – urban and rural
- Expanded home delivery frequency and delivery to rural counties
- Provided IQ Pay
- Enhanced partner capacity (coolers/freezers/produce & protein storage)
- Built disaster boxes
- Expanded Strategic Partner distribution model
- Redeployed staff and added temporary staff to assist with increased need

Health Insurance

Health



In 2024, Medicaid covered the delivery of 46 percent of Tennessee live births.¹⁰

In 2024, 6.5 percent of Tennessee children were uninsured.¹²

In 2023, two-thirds of children who were uninsured in Tennessee were financially eligible for coverage through TennCare or CoverKids.¹³

Health Insurance

Health

Private Coverage

In 2024, half of Tennessee children had **employer-based health coverage** alone or in combination with other coverage.¹⁴

9.1 percent of children had direct-purchase insurance through the Health Insurance Marketplace or from an insurer.¹⁴

Characteristics of uninsured Tennesseans:^{12,15}

- 62 percent over 16 are employed.
- 41 percent of these worked full-time year-round over the last 12 months.
- The most common industries for workers were construction (18 percent) and arts, entertainment/recreation, accommodation, and food services (17.6 percent)
- 42 percent had a household income between \$25,000 and \$75,000.



Infant & Maternal Care

Health

In 2024, 8.6 percent of Tennessee live births resulted in NICU admission. Nationally, 9.9 percent were admitted to the NICU.¹⁶

In 2024, 8.8 percent of Tennessee babies and 8.5 percent of all babies were born at a low birth weight.¹⁷

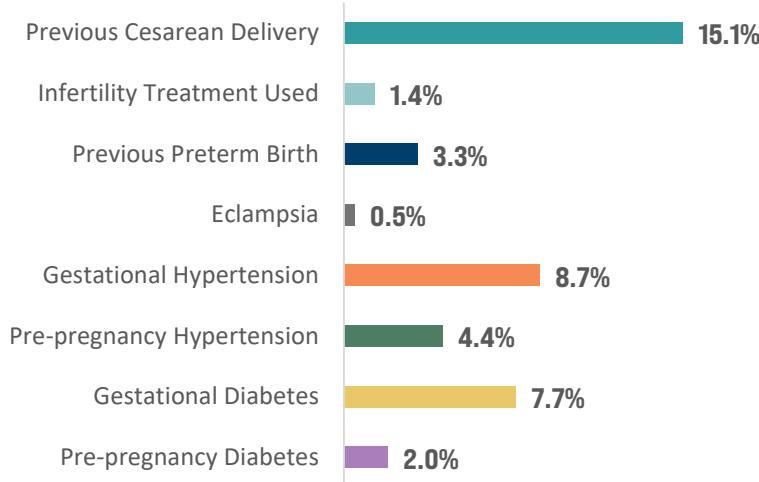
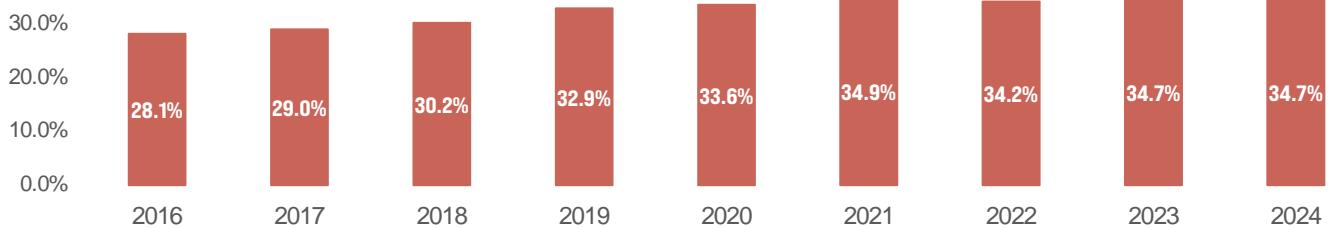
In 2024, 10.9 percent of Tennessee babies were born preterm. Nationally, 10.4 percent of live births were preterm¹⁸

In 2023, Tennessee had the 6th highest teen birth rate in the country, 20.4 per 1,000 females age (15-19). Nationally it was 13.0 per 1,000.¹⁹

Between 2016 to 2024, the number of births to children under age 15 in Tennessee has ranged from a high in 2021 of 72 births to a low of 51 births in 2020. In 2024, it was 71.²⁰



40.0% In 2024, more than **one out of every three births in Tennessee had a risk factor during pregnancy.**²¹

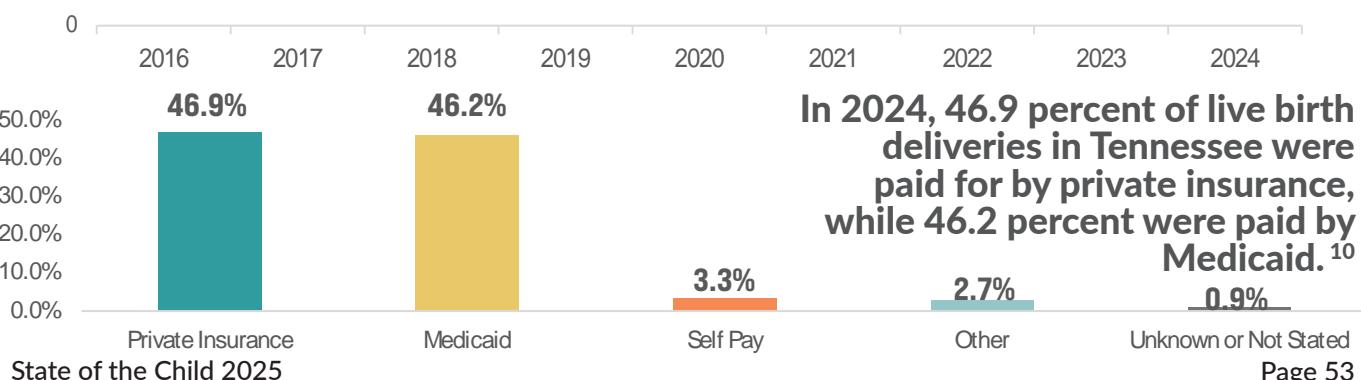
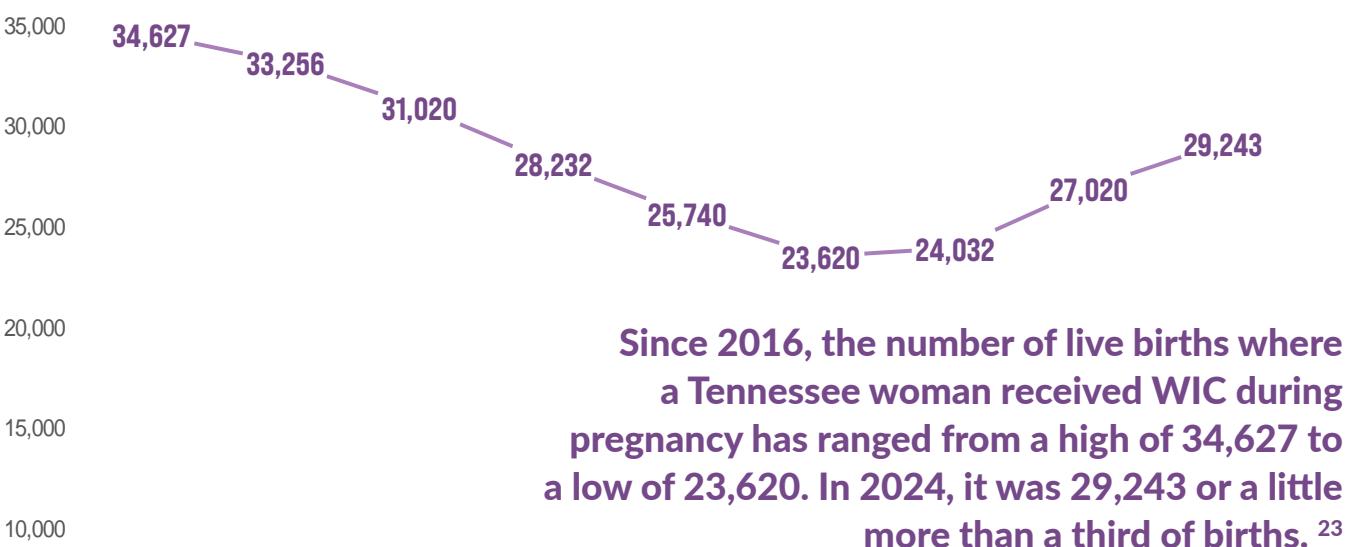
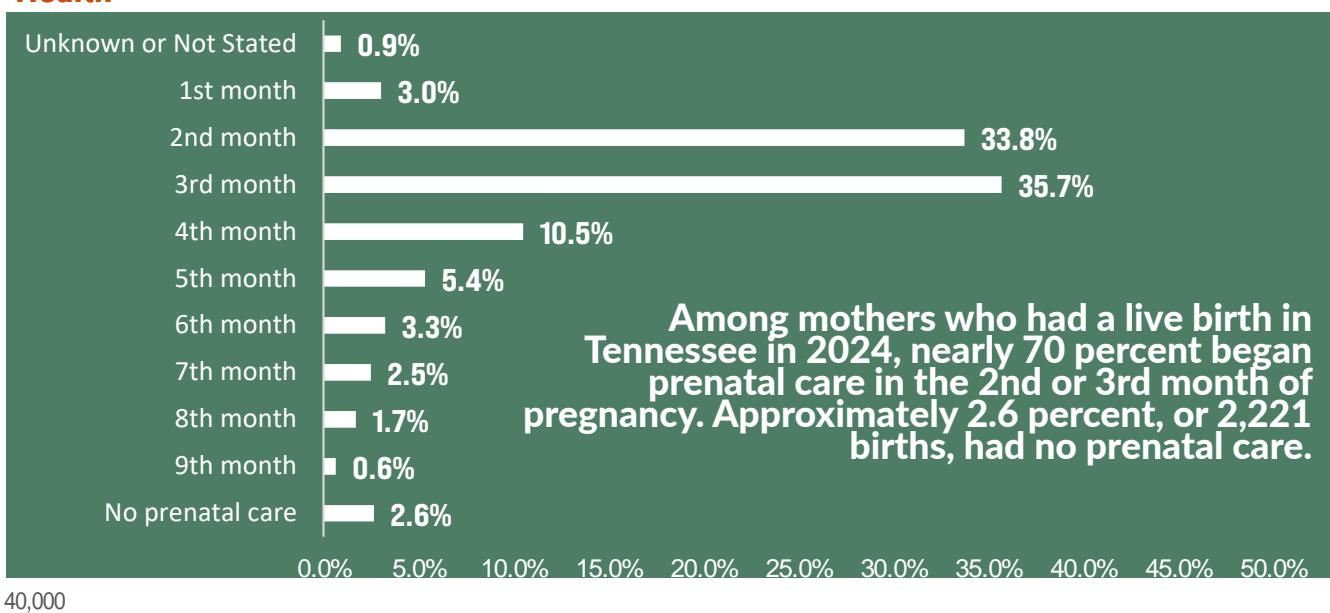


*Risk factors are not mutually exclusive

In Tennessee, individual pregnancy risk factors for live births in 2024 ranged from 15.1 percent of births where there had been a previous Cesarean delivery to 0.5 percent of births with Eclampsia.²¹

Infant & Maternal Care

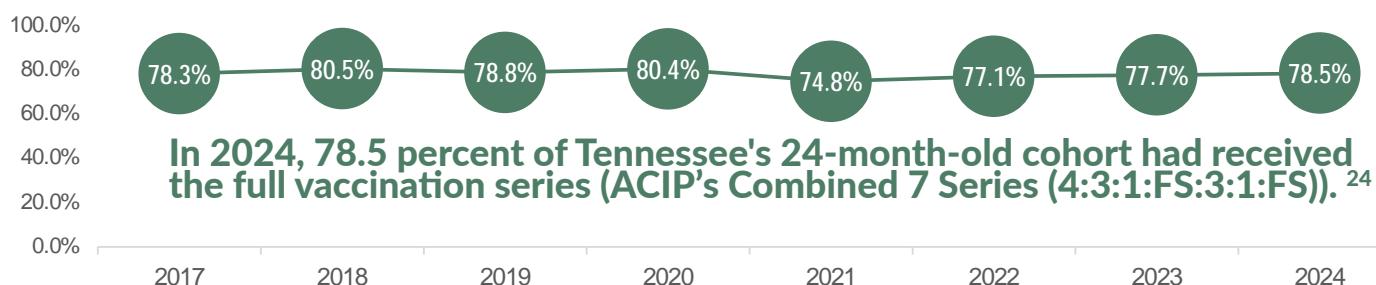
Health



Immunizations and Vaccinations

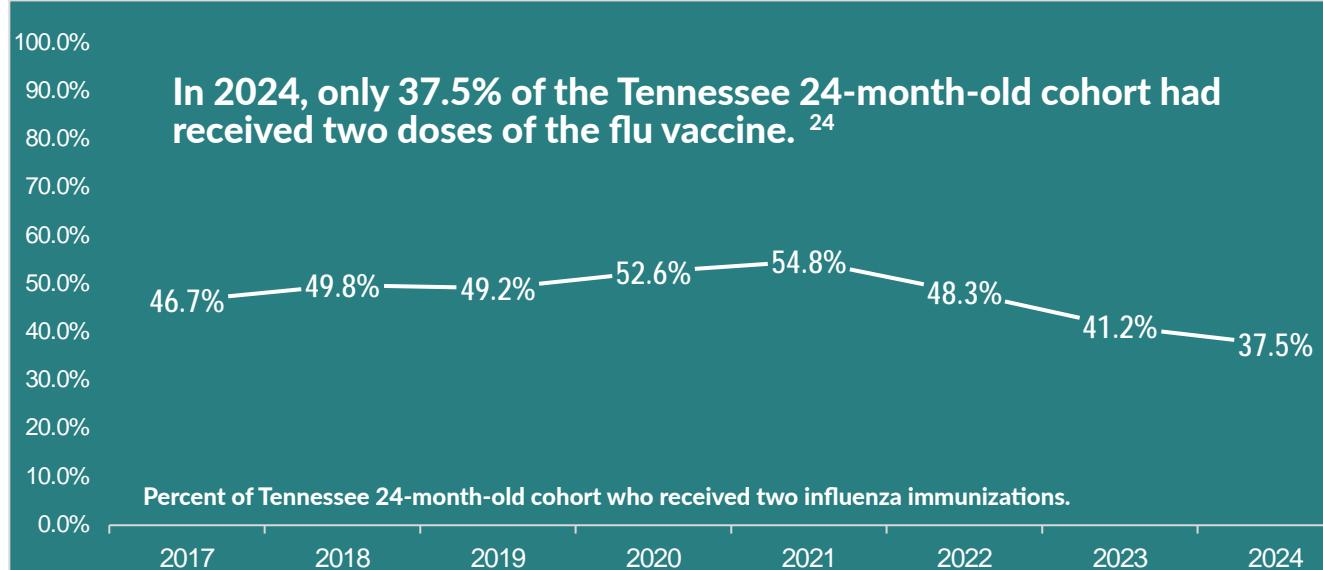
Health

According to Tennessee Department of Health's Results of the 2024 Immunization Status Survey of 24-Month-Old Children in Tennessee:



In 2024, 78.5 percent of Tennessee's 24-month-old cohort had received the full vaccination series (ACIP's Combined 7 Series (4:3:1:FS:3:1:FS)).²⁴

Tennessee ranked in the bottom third of states for the completion of the Full Series (4:3:1:FS:3:1:FS) in 2024, ranking 35th in the nation, an improvement from 41st the prior year.²⁴



"While Tennessee consistently met the Healthy People 2030 (HP2030) objective of 90.8% completion for the MMR vaccine in previous years, it fell short in 2021, 2023, and again in 2024. In 2024, Tennessee did not meet the three HP2030 vaccination objectives. Specifically, the state did not reach the target of limiting the percentage of children receiving zero doses of recommended vaccines by age two to 1.3%, recording a rate of 3.0% instead. This marks the second time Tennessee has failed to meet any Healthy People objectives since it began using these benchmarks for comparison." - Results of the 2024 Immunization Status Survey of 24-Month-Old Children in Tennessee²⁴

Dental Care

Health



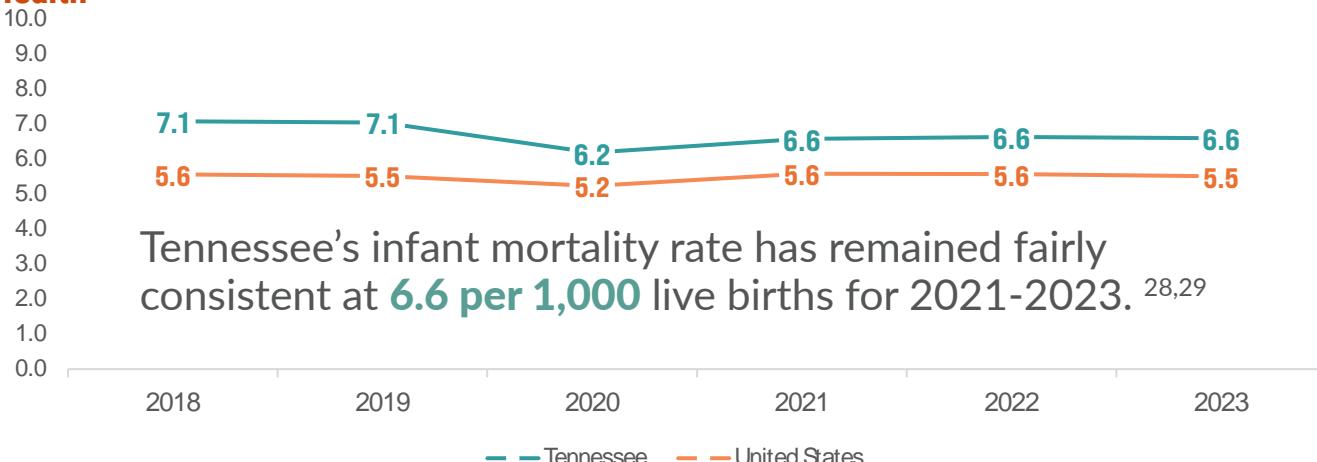
In 2024, 60 percent of public water systems which served 88 percent of Tennesseans had fluoridated water.³⁸ Community Water Fluoridation is a safe, equitable, and cost-effective way to support oral health across a community; the CDC has named it one of the 10 great public health achievements of the 20th century.²⁵

In 2023-24, 78 percent of Tennessee children had a preventative dental visit in the last year.²⁶

In Tennessee, 1 in 10 children had cavities or decayed teeth in the last year.²⁷

Infant Mortality

Health



Leading Causes of Infant Deaths 2023:

Tennessee³⁰

257.4 per 100,000

Non-Injury: Certain conditions originating in the perinatal period

133 per 100,000

Non-Injury: Congenital malformations, deformations and chromosomal abnormalities

112.3 per 100,000

Non-Injury: Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified

69.5 per 100,000

Suffocation

United States³¹

271.1 per 100,000

Non-Injury: Certain conditions originating in the perinatal period

109.8 per 100,000

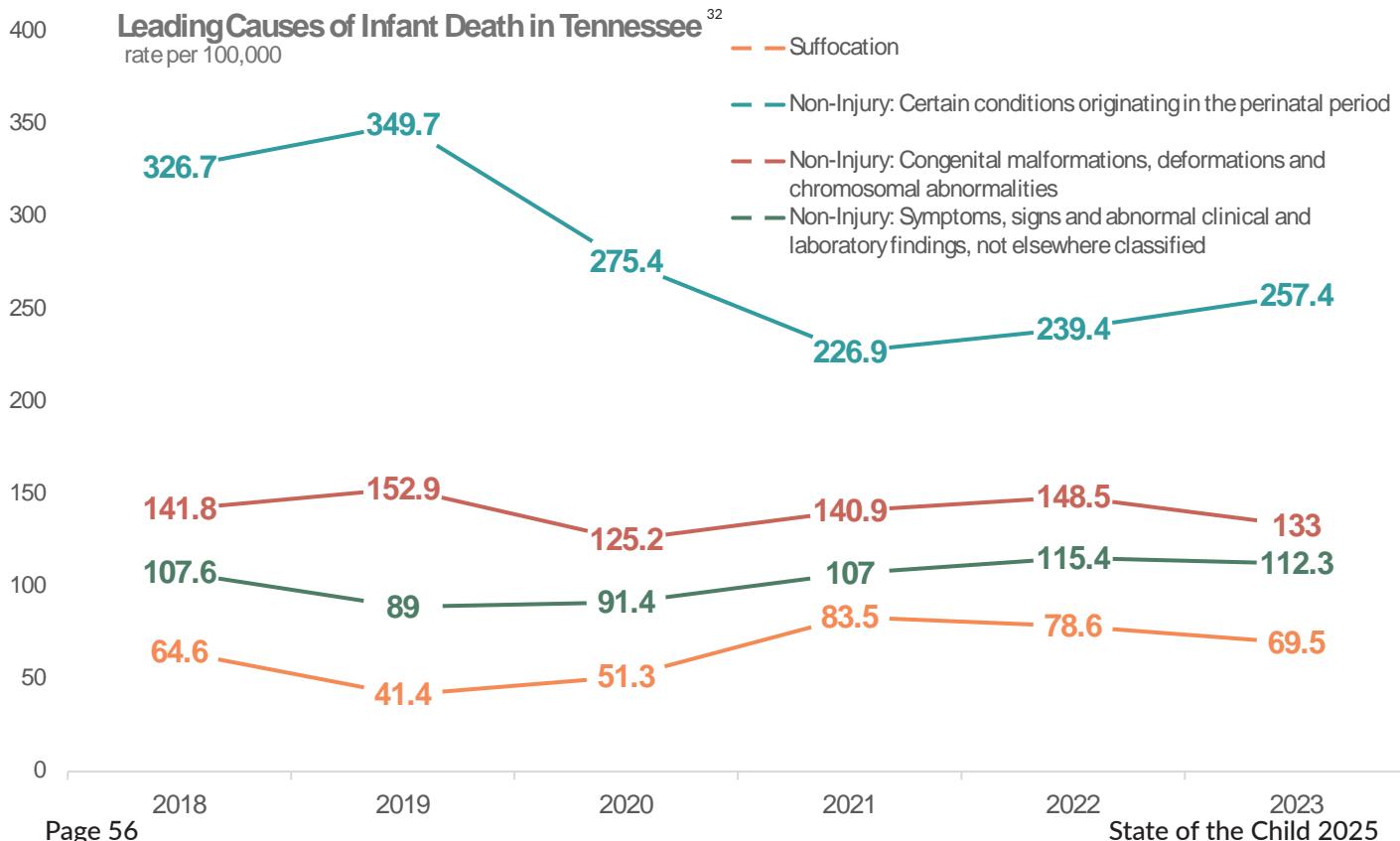
Non-Injury: Congenital malformations, deformations and chromosomal abnormalities

71 per 100,000

Non-Injury: Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified

31.4 per 100,000

Suffocation



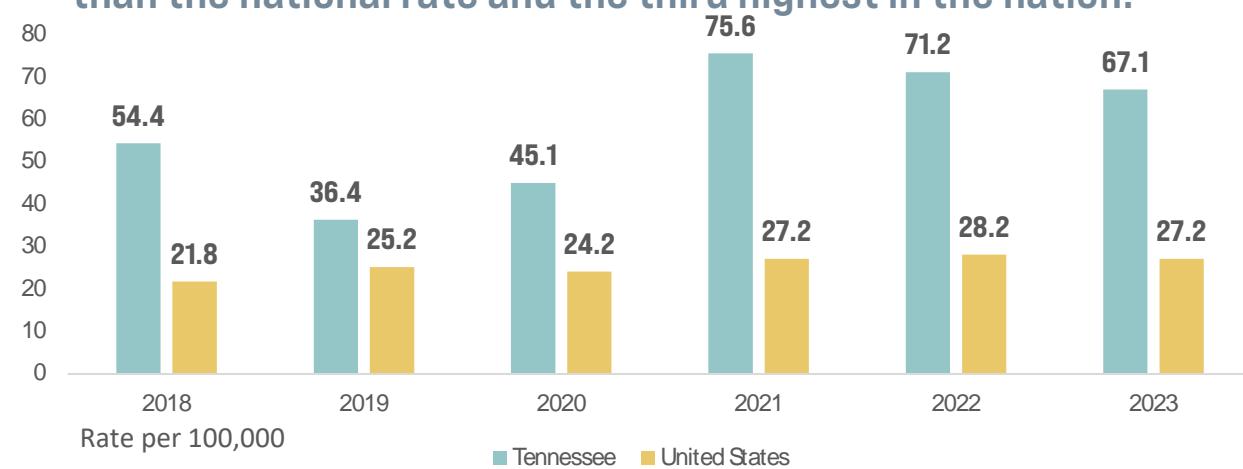
Infant Mortality

Health



Infant Deaths due to Accidental Suffocation/Strangulation in Bed

In Tennessee, the rate of infant deaths due to accidental suffocation/strangulation in bed was **nearly 2.5 times higher than the national rate and the third highest in the nation.**^{33,34}

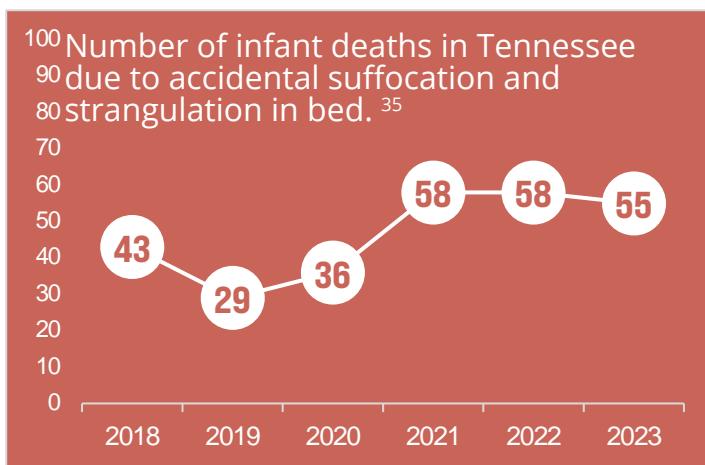


Though there was a decline in the number of deaths between 2022 and 2023, **accidental suffocation and strangulation in bed still comprised 55 of the 61 accidental infant deaths that occurred in 2023.**³⁵

Infant Mortality

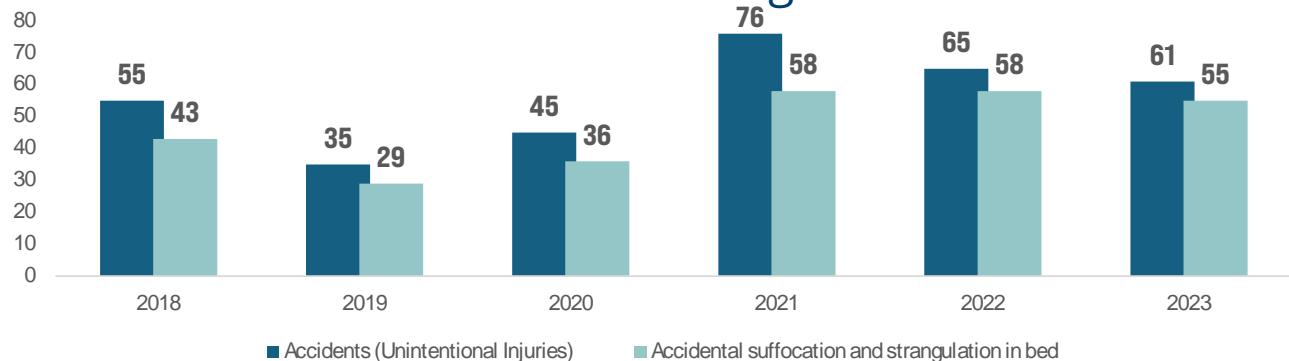
Health

Infant Deaths due to Accidental Suffocation/Strangulation in Bed



ABCs of Safe Sleep
**BABIES SHOULD
SLEEP ALONE
ON THEIR BACK
IN A CRIB**

Every year, the majority of accidental infant deaths are due to accidental suffocation and strangulation in bed.³⁵



Homicide

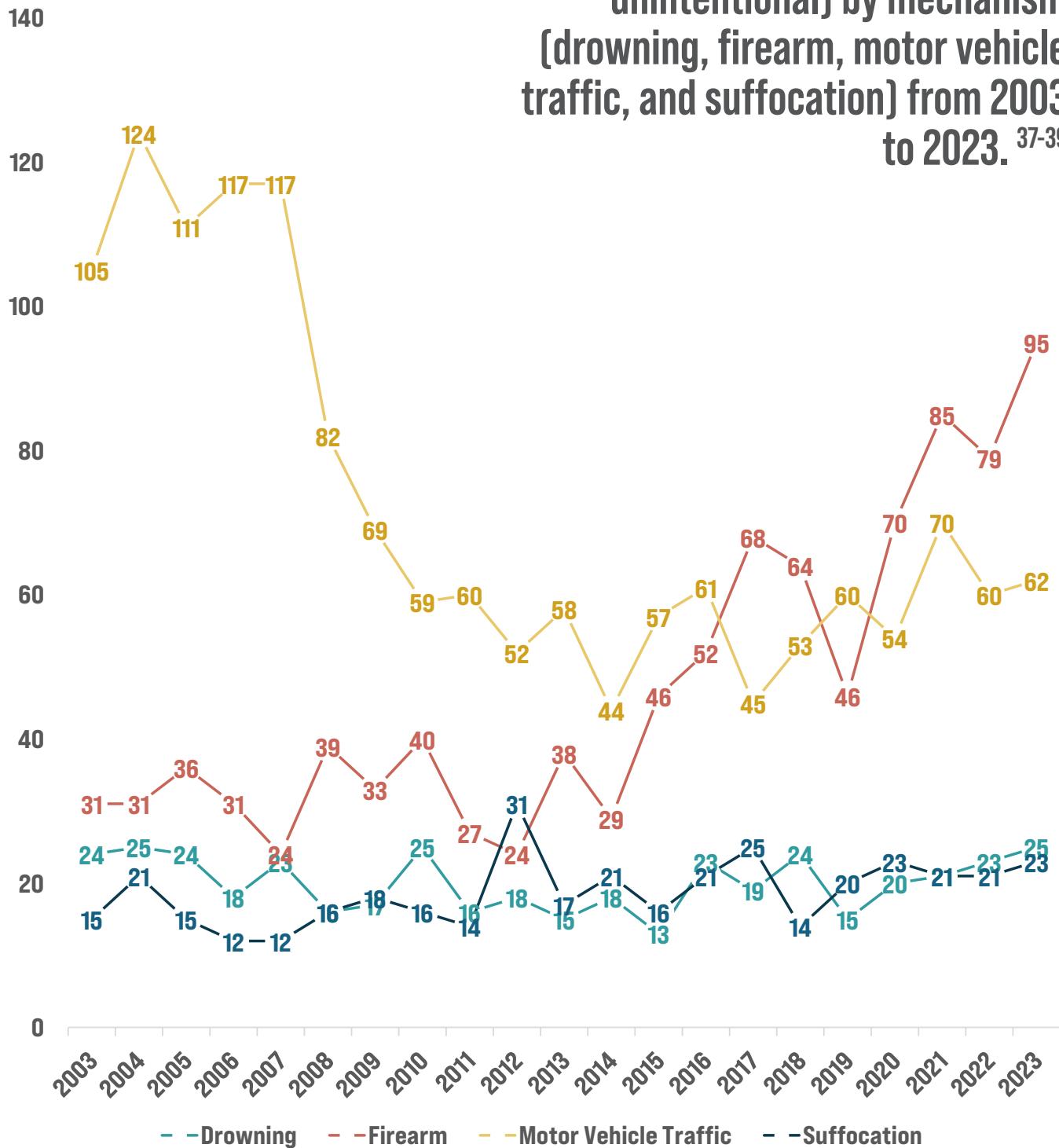
Between 2020 to 2023 there were 25 infant deaths due to homicide, a rate of 7.8 per 100,000.³⁶

Tennessee had the 14th highest infant homicide rate between 2020 to 2023 and was slightly above the national average of 6.9 per 100,000.³⁶

Child & Teen Deaths

Health

Total number of injury deaths (including homicide, suicide, and unintentional) by mechanism (drowning, firearm, motor vehicle traffic, and suffocation) from 2003 to 2023.³⁷⁻³⁹



Child & Teen Deaths

Health

Rate of child & teen deaths per 100,000 ⁴⁰⁻⁴³



Tennessee

Top 5 Leading Causes of Death in 2023 (1-17)³⁷

Firearm

Deaths: 95

Rate Per 100,000: 6.4

Motor Vehicle Traffic

Deaths: 62

Rate Per 100,000: 4.2

Non-Injury: All other diseases (Residual)

Deaths: 46

Rate Per 100,000: 3.1

Non-Injury: Malignant neoplasms (Cancers)

Deaths: 32

Rate Per 100,000: 2.1

Poisoning

Deaths: 31

Rate Per 100,000: 2.1

United States

Top 5 Leading Causes of Death in 2023 (1-17)³⁸

Firearm

Deaths: 2,566

Rate Per 100,000: 3.7

Motor Vehicle Traffic

Deaths: 2,266

Rate Per 100,000: 3.3

Non-Injury: All other diseases (Residual)

Deaths: 1,682

Rate Per 100,000: 2.4

Non-Injury: Malignant neoplasms (Cancers)

Deaths: 1,523

Rate Per 100,000: 2.2

Poisoning

Deaths: 990

Rate Per 100,000: 1.4

In 2023, 1 in 5 deaths among those ages 1-17 in Tennessee were due to a firearm, 1 in 8 were due to Motor Vehicle Traffic, 1 in 15 were due to cancer, and 1 in 16 were due to poisoning.³⁷

Death by intent

Unintentional

FROM 2020 - 2023

There were 547 unintentional deaths among children 1-17.⁴⁴

45 percent were from Motor Vehicle Traffic
Representing 246 deaths

16 percent were from Drowning
Representing 87 deaths

12 percent were from Poisoning
Representing 64 deaths

6 percent were from Fire/Flame
Representing 32 deaths

4 percent were from Suffocation
Representing 20 deaths

In 2023, Tennessee had the 13th highest rate of unintentional deaths in the United States.⁴⁵

3 percent were from a Firearm
Representing 18 deaths

3 percent were from Other Land Transport
Representing 17 deaths

3 percent were from Natural/Environmental
Representing 15 deaths

2 percent were from Other Pedestrian
Representing 13 deaths

Death by intent Homicide

FROM 2020 - 2023

There were 256 homicide deaths among children ages 1 - 17.⁴⁶

84 percent were from firearms

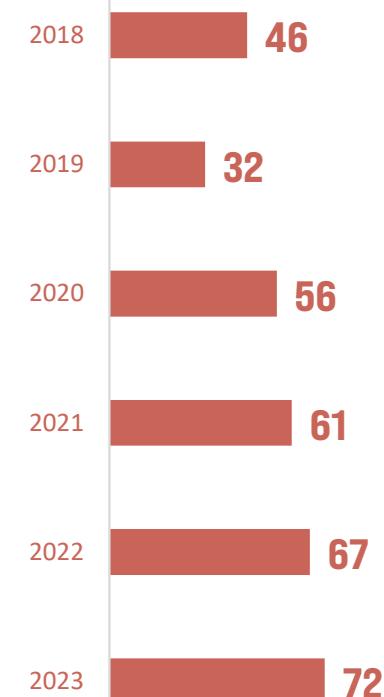
Representing 214 deaths

7 percent were from an
unspecified injury

Representing 19 deaths

The cause of death for the remaining 23 deaths are not listed due to data suppression standards

Number of homicide deaths
among Tennessee children ages
1 - 17 by year.⁴⁸



2023

In 2022, Tennessee had 72 homicide victims
ages 1 to 17, representing a rate of 4.8 per
100,000.⁴⁷

60 were due to a firearm.⁴⁷

2023

Ages 1 - 17 Homicide Rates⁴⁹

10 Highest Rates		10 Lowest Available Rates	
16.8	District of Columbia	1.5	New Jersey
8.8	Louisiana	1.6	California
8.1	Mississippi	1.7	Washington
5.6	New Mexico	1.7	New York
5.1	Arkansas	2.1	Virginia
4.9	Illinois	2.6	Florida
4.8	Tennessee	2.6	Wisconsin
4.5	South Carolina	2.7	Michigan
4.4	Missouri	2.9	Texas
4.1	Georgia	2.9	Arizona

Rate per 100,000

2020-23

Ages 1 - 17 Homicide by Firearm Rates⁵⁰

10 Highest Rates		10 Lowest Available Rates	
10.4	District of Columbia	0.6	Massachusetts
7.0	Louisiana	0.8	New Jersey
6.5	Mississippi	0.9	Oregon
4.1	South Carolina	0.9	New York
3.9	Arkansas	1.0	Utah
3.8	Alabama	1.1	Iowa
3.7	Tennessee	1.1	Washington
3.6	Illinois	1.1	Connecticut
3.6	Missouri	1.1	Minnesota
3.4	Georgia	1.2	California

Rate per 100,000

Death by intent Suicide

FROM 2020 - 2023

There were 161 suicide deaths among children ages 9 -17.⁵¹

53 percent were from Firearms

Representing 86 deaths

37 percent were from Suffocation

Representing 60 deaths

7 percent were from Poisoning

Representing 12 deaths

The majority of people with a Medically Serious Suicide Attempt (MSSA) do not later die by suicide.

In a long-term study of individuals with a MSSA, 6.7 percent had died by suicide or suspected suicide within 5 years. Three out of four were still alive 20 years later.⁵²

TENNESSEE RATES

Suicide rates among age 9 to 17 by year:⁵³

2020: 4.7 per 100,000
2021: 4.9 per 100,000
2022: 4.9 per 100,000
2023: 5.8 per 100,000
2020-2023 suicide rate: 5.1 per 100,000

Suicide rate between 2020-2023 among age 9 to 17 by mechanism:⁵⁴

Firearm: 2.7 per 100,000
Suffocation: 1.9 per 100,000

NATIONAL RATES

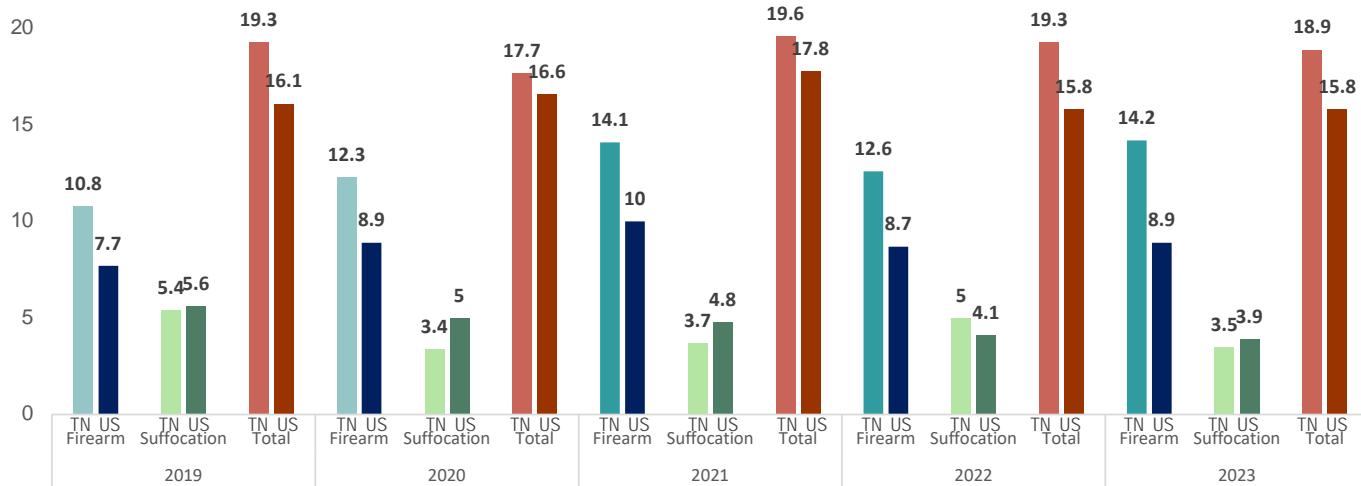
Suicide rates among age 9 to 17 by year:⁵⁵

2020: 4.5 per 100,000
2021: 4.6 per 100,000
2022: 4.2 per 100,000
2023: 4.2 per 100,000
2020-2023 suicide rate: 4.4 per 100,000

Suicide rate between 2020-2023 among age 9 to 17 by mechanism:⁵⁶

Firearm: 2.0 per 100,000
Suffocation: 1.8 per 100,000
Poisoning: 0.3 per 100,000

²⁵ Young adult (18 to 24) suicides by mechanism rate per 1,000 in Tennessee and United States^{57,58}



MENTAL HEALTH

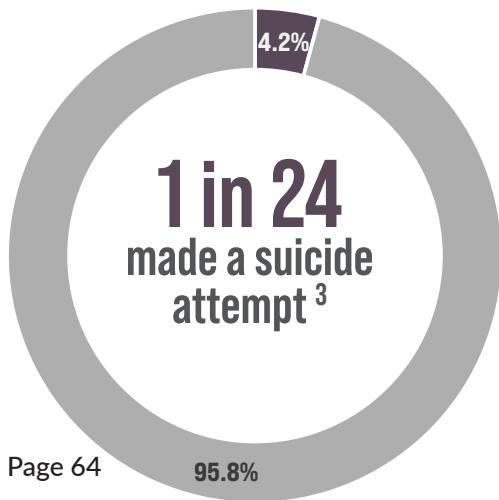
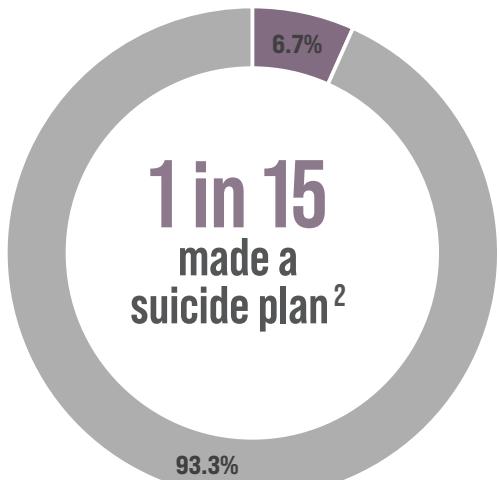
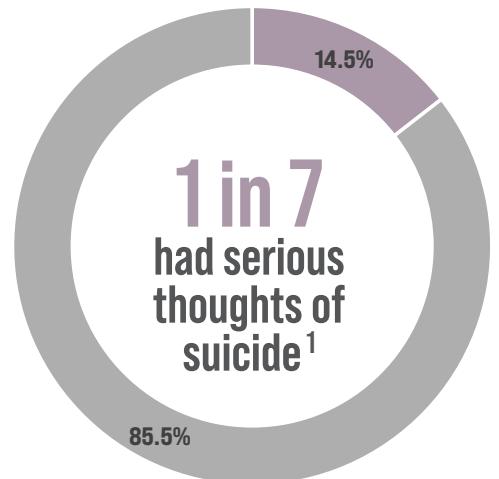


Mental Health

Note: In previous editions of The State of the Child, the majority of the mental health and substance use data came from the Youth Risk Behavior Survey (YRBS). This year, the YRBS was administered on a later schedule and is not yet available. As a result, the mental health section in this report primarily uses data from the National Survey on Drug Use and Health (NSDUH). While both surveys include similar questions, their methodologies, administration processes, and sample populations differ. Therefore, comparisons to previous editions cannot be made.

Suicide

Among those ages 12 to 17 in Tennessee in 2022-23, within the last year:



Treatment

Mental Health

Across all youth in Tennessee ages 12 to 17:

5.6 percent received substance use treatment in the last year.⁴

31 percent received mental health treatment in the last year.⁵

In 2022-23, **63.7 percent of Tennessee youth ages 12 to 17 with a past year Major Depressive Episode**

did not receive treatment, ranking the state 49th in the nation.⁶ Nationally, in 2024 the main reasons young people provided for not receiving treatment included: being worried about what people would think or say if they got treatment (70.5 percent), being worried that information they shared would not be kept private (64.9 percent), not thinking treatment would help them (58.7 percent), and thinking no one would care if they got better (56.9 percent).⁷



In 2022-2023, **one in eight Tennessee teens age 12 to 17 were classified as needing substance use treatment** within the last year.^{8,9}

Among that those needing care, 55 percent did not receive care. Though still higher than ideal, Tennessee does rank among the five top states with a national average of 61 percent not receiving treatment.³²

Depression & Anxiety

In 2022-2023, 19.9 percent of Tennessee youth ages 12 to 17 had experienced a Major Depressive Episode, though this represents a slight decline from 20.5 in 2021-22, it is still nearly one in five.^{11,12}

In a 2023-2024 completed by caregivers regarding their Tennessee teens ages 12 to 17, it was reported that 17.2 percent currently had depression or anxiety.¹³

Substance Use

Mental Health



Percent of those ages 12 to 17 reporting substance use within the last year by substance, location, and year:

	Tennessee 2021-2022	Tennessee 2022-2023	United States 2021-2022	United States 2022-2023
Cocaine ^{14,15}	0.13%	0.16%	0.14%	0.20%
Hallucinogen ^{16,17}	1.60%	1.68%	1.42%	1.44%
Methamphetamine ^{18,19}	0.10%	0.11%	0.10%	0.11%
Opioid Misuse ^{20,21}	1.71%	2.03%	1.85%	1.90%

In 2022-2023, one in 15 Tennesseans age 12 to 17 reported any illicit drug use within the last month.²² When Marijuana was excluded, it decreased to one in 60.²³

Substance Use

Mental Health



Prescription pain medication

The percentage of Tennessee teens ages 12 to 17 reporting pain reliever misuse within the last year increased between 2021-2022 and 2022-23, shifting from 1.7 percent to 2.0 percent or one in 50.^{32,33}

Among that same age group, 1.5 percent met the criteria for Pain Reliever Use Disorder.³⁴ The same percentage was reported for Opioid Use Disorder.³⁵ Tennessee reported the 4th highest percent in both measures.

Marijuana

Approximately one in nine Tennesseans age 12 to 17 reported Marijuana use within the past year in 2022-2023.³⁶ Roughly one in 18 reported use within the last month.³⁷

Among those age 12 to 17, 4.9 percent reported their first use of Marijuana was within the last year.³⁸

State of the Child 2025

Tobacco & Nicotine

Tennesseans ages 12 to 17

In 2022-23, 2.3 percent reported using tobacco within the last month.²⁴ Even fewer, 1.3 percent, reported cigarette use within the last month.²⁵ In both of these measures, the state experienced a slight decrease from 2021-22.^{26,27}

More than half, 54.9 percent, reported they perceived there to be great risk from smoking one or more packs a day.²⁸ The percentage perceiving great risk decreased by nearly 6 percent from 2021-22.²⁹ Tennessee ranked 48th in this measure, having one of the largest decreases in perceived risk. Nationally, perception of risk changed by 1.9 percent, going from 62.1 to 61.0 percent.

More than one in 12 reported Nicotine vaping in the past month in 2022-2023.³⁰

Tennesseans ages 12 to 20

When expanding to age 20, the percent reporting tobacco use in 2022-23 increased to 5.4 percent. The use of cigarettes within the last month also increased to 3.3 percent.³¹

Alcohol

Tennesseans ages 12 to 17

In 2022-2023, 5.7 percent reported alcohol use within the last month, a decrease from 6.6 percent the prior year.^{39,40} The percentage reporting binge drinking in the last month also slightly decreased from 3.3 percent to 3.1 percent.^{41,42}

Between 2021-2022 and 2022-2023, the percentage of Tennessee of survey respondents age 12 to 17 that met the criteria for alcohol use disorder in the past year decreased by 33 percent, going from 3.3 percent to 2.2 percent.^{43,44} This was the third largest decline in the United States.

Tennesseans ages 12 to 20

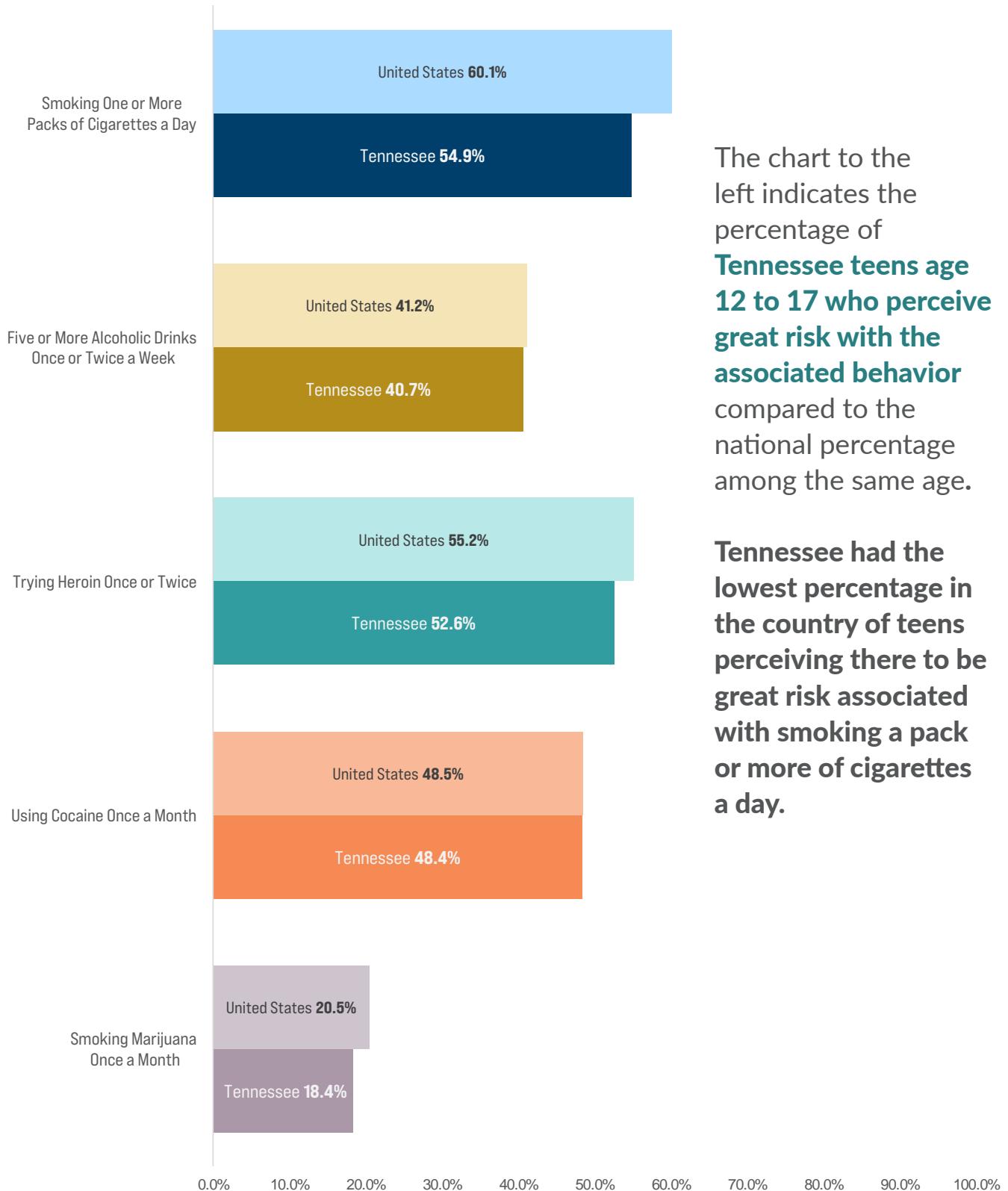
In 2022-2023, 13.3 percent of Tennesseans age 12 to 20 reported alcohol use within the last month.⁴⁵ Among that same age group, 7.4 percent reported binge drinking within the last month.⁴⁵

In 2022-2023, 4.9 percent met the criteria for alcohol use disorder within the last year.⁴⁶

Mental Health

Substance Use

Perception of Risk Among Teens: Tennessee Compared to United States ⁴⁷



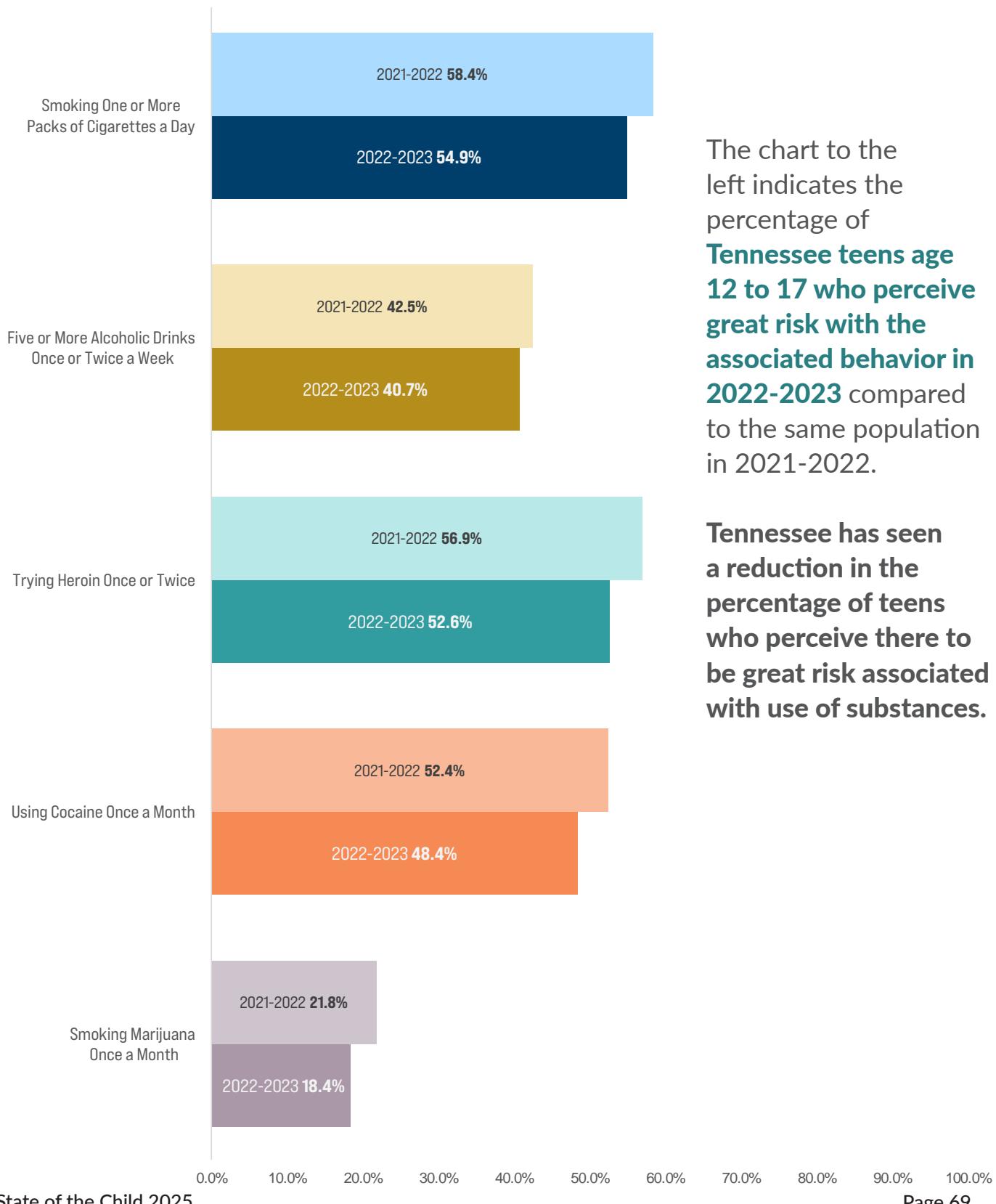
The chart to the left indicates the percentage of **Tennessee teens age 12 to 17 who perceive great risk with the associated behavior** compared to the national percentage among the same age.

Tennessee had the lowest percentage in the country of teens perceiving there to be great risk associated with smoking a pack or more of cigarettes a day.

Mental Health

Substance Use

Perception of Risk Among Teens: Tennessee Changes from 2021-2022 to 2022-2023 ^{47,48}



The chart to the left indicates the percentage of Tennessee teens age 12 to 17 who perceive great risk with the associated behavior in 2022-2023 compared to the same population in 2021-2022.

Tennessee has seen a reduction in the percentage of teens who perceive there to be great risk associated with use of substances.

ADVERSITY & RESILIENCE

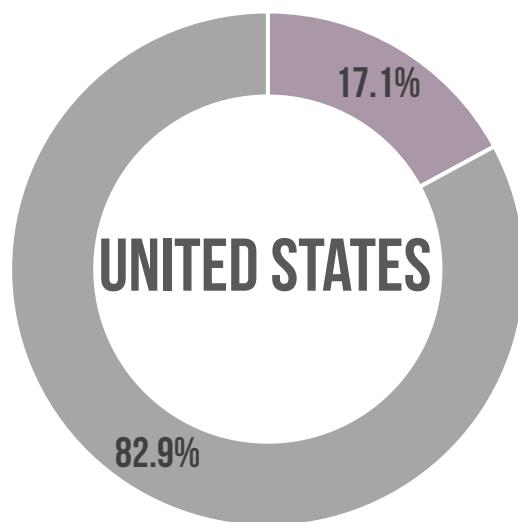
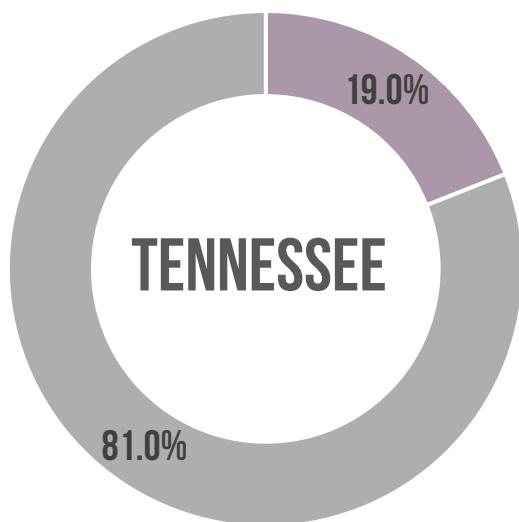


Adverse Experiences

Adversity & Resilience



Nearly one in five Tennessee children are reported to have experienced two or more adverse childhood experiences.¹



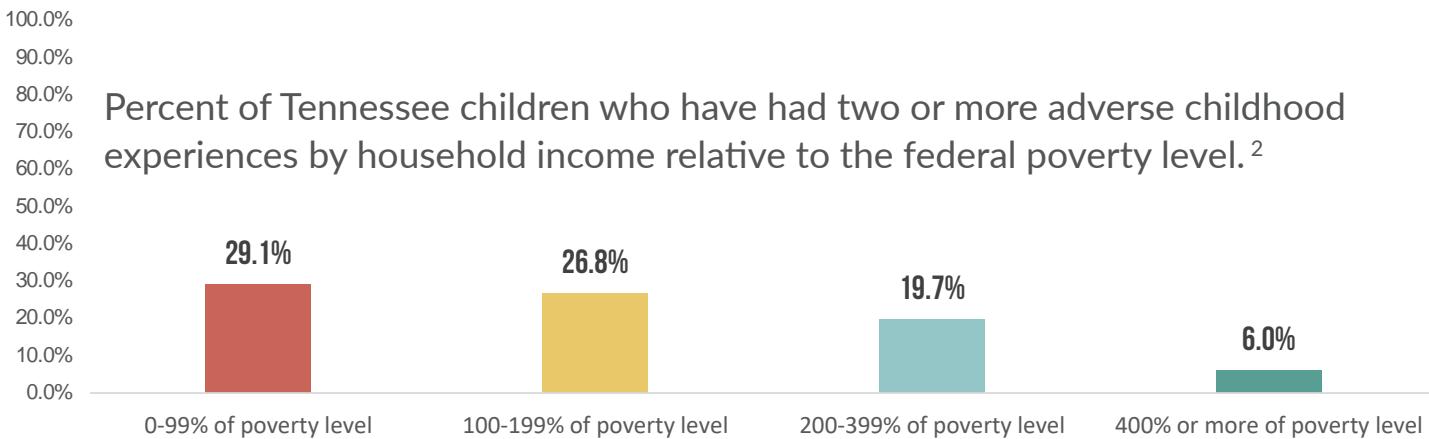
■ Experienced 2 or more adverse childhood experiences ■ Experienced 0-1 adverse childhood experiences

In this survey, which was filled out by the child's caregivers, adverse childhood experiences included:

1. Hard to cover basics on family's income
2. Parent or guardian divorced or separated
3. Parent or guardian died
4. Parent or guardian served time in jail
5. Saw or heard parents or adults slap, hit, kick, punch one another in the home
6. Was a victim of violence or witnessed violence in their neighborhood
7. Lived with anyone who was mentally ill, suicidal, or severely depressed
8. Lived with anyone who had a problem with alcohol or drugs
9. Treated or judged unfairly due to race/ethnicity
10. Treated unfairly because of a health condition or disability

Adverse Experiences

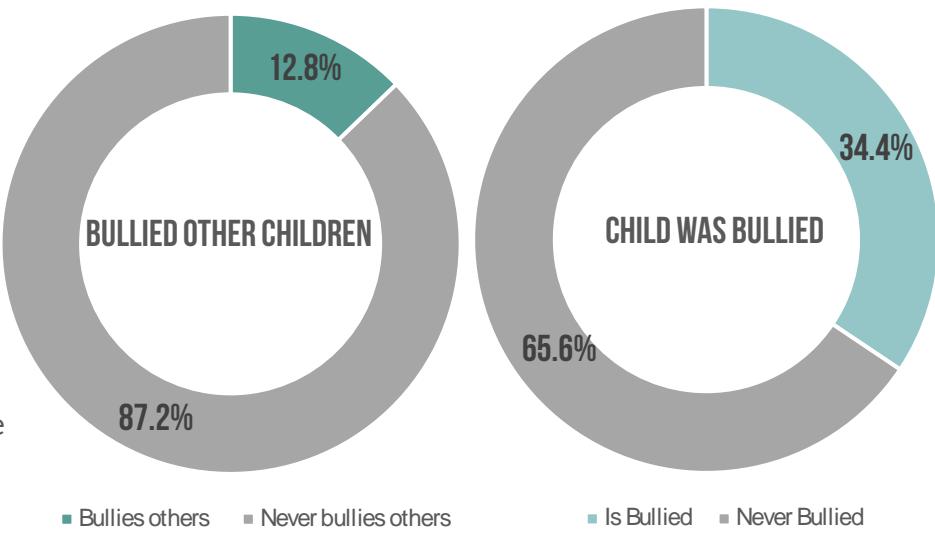
Adversity & Resilience



Bullying

In a survey filled out by caregivers, they were asked: **“During the past 12 months, how often was this child bullied, picked on, or excluded by other children?”** and **“During the past 12 months, how often did this child bully others, pick on them, or exclude them?”**

The graphs to the right indicate results for Tennessee children ages 12 to 17.^{3,4}





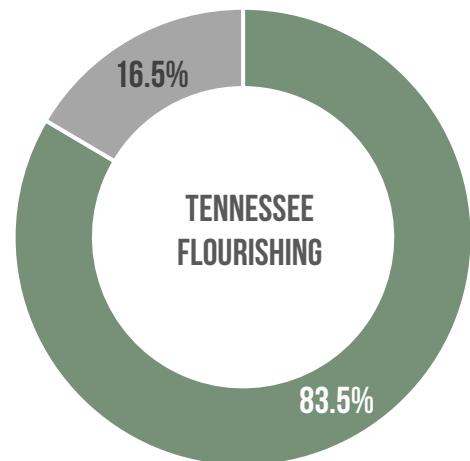
Flourishing

Adversity & Resilience

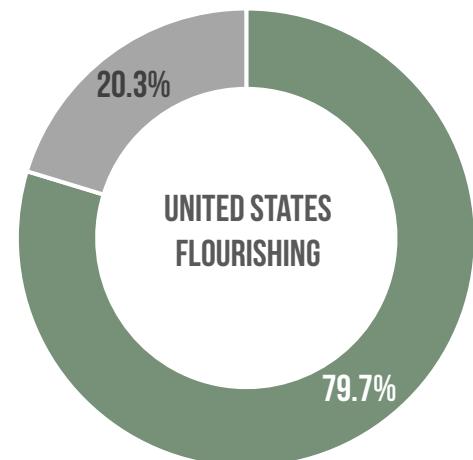
Children who are flourishing:
6 months to 5 years⁵

- 1) Is this child affectionate and tender?
- 2) Does this child bounce back quickly when things do not go their way?
- 3) Does this child show interest and curiosity in learning new thing?
- 4) Does this child smile and laugh?

To qualify as flourishing on any individual item, a response of "Usually" or "Always" was required.



■ Met flourishing criteria ■ Did not meet flourishing criteria



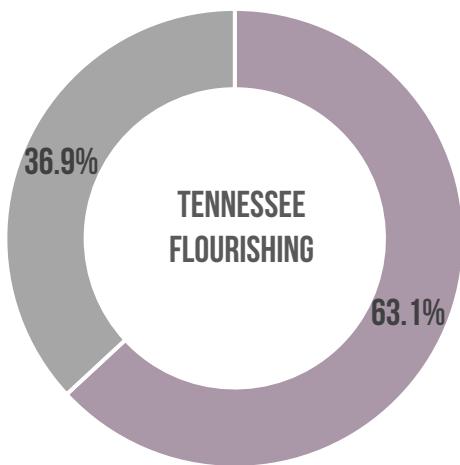
■ Met flourishing criteria ■ Did not meet flourishing criteria

Children who are flourishing:
6 to 17 years⁶

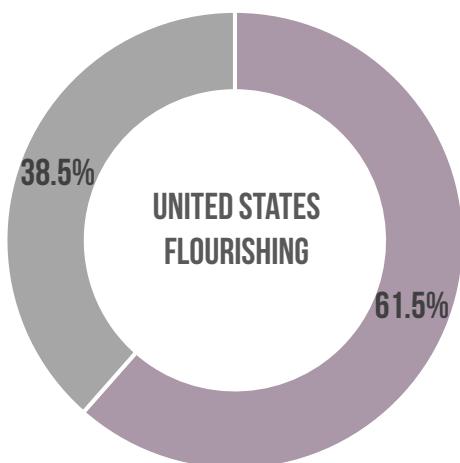
How often does this child:

- 1) Show interest and curiosity in learning new things?
- 2) Work to finish tasks they start?
- 3) Stay calm and in control when faced with a challenge?

To qualify as flourishing on any individual item, a response of "Usually" or "Always" was required.



■ Met flourishing criteria ■ Did not meet flourishing criteria



■ Met flourishing criteria ■ Did not meet flourishing criteria



CHILD WELFARE



Child Maltreatment

Child Welfare

In FY2025, there were 15,901 victims of abuse or neglect in Tennessee with either a substantiation or a case disposition of services needed/services court ordered.¹

States voluntarily submit data to the National Child Abuse and Neglect Data System (NCANDS). The data below regarding child maltreatment is from NCANDS and represents Tennessee in federal fiscal year 2023. For NCANDS, child victims are those who the state determined at least one maltreatment was substantiated.

In Tennessee, there were 7,638 child victims, representing a rate of 4.9 per 1,000.²

Of those 7,638, a little over half were first-time victims.³

One in four victims were under one year old.⁴

Number of victims by maltreatment type (includes duplicate victims):⁵

Medical Neglect only: 16

Neglect only: 817

Physical Abuse only: 3,314

Psychological Maltreatment only: 57

Sexual Abuse only: 2,215

Sex Trafficking only: 178

Multiple Maltreatments: 1,171

The most common perpetrator was a parent, representing 57 percent of perpetrators.⁶

Of victims, 17.1 percent had received family preservation services within the last five years and less than four percent had been reunited with their families within the last five years.^{7,8}

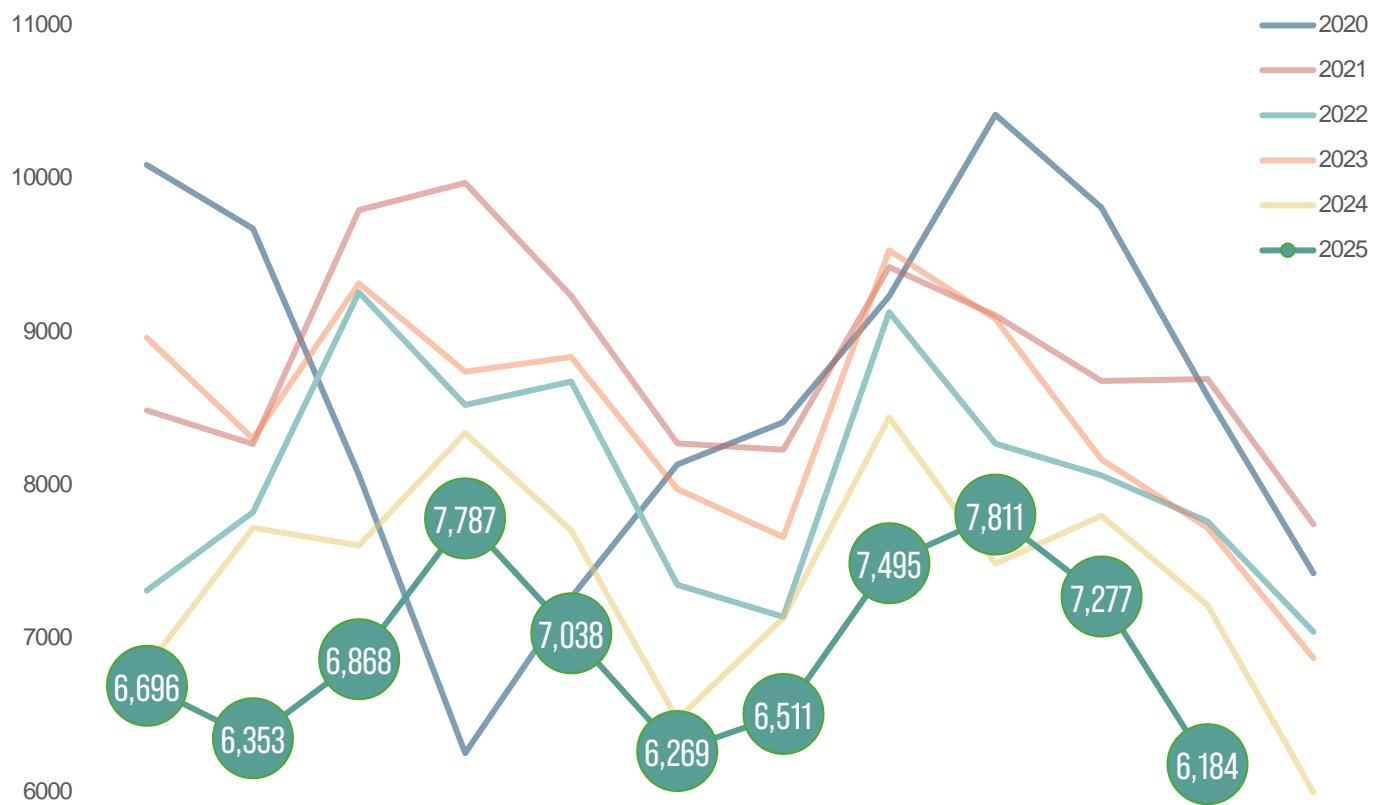


Hotline Referrals

Child Welfare

The number of hotline referrals received by DCS in 2025 has trended below the amount typically received in the last five years.⁹

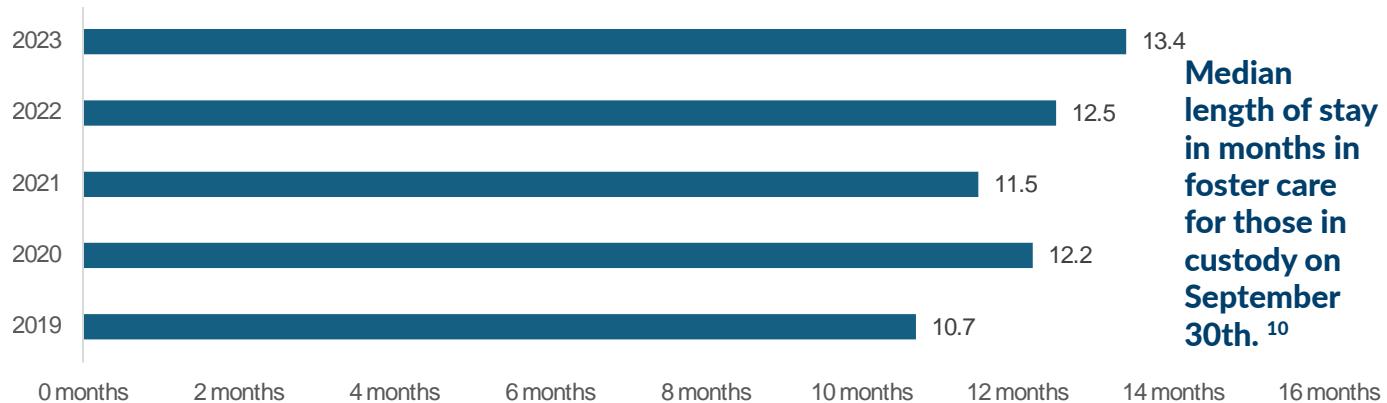
The chart below shows the monthly number of referrals to the child abuse hotline received by DCS in 2025, along with trend lines for previous years. The accompanying table provides referral counts for all months across all years.



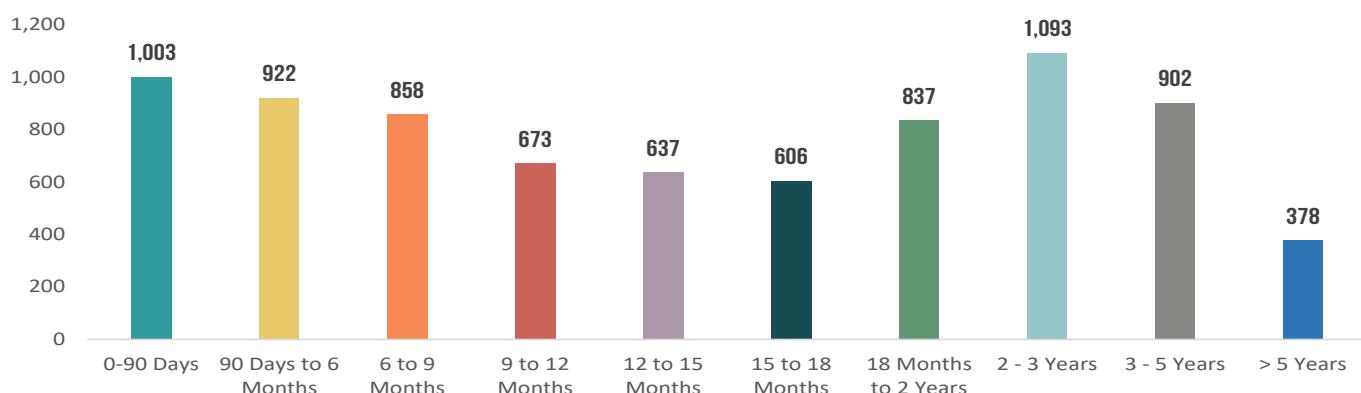
	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
2020	10,090	9,675	8,070	6,256	7,271	8,139	8,414	9,236	10,419	9,814	8,584	7,429
2021	8,491	8,271	9,796	9,973	9,238	8,275	8,234	9,425	9,110	8,682	8,694	7,748
2022	7,317	7,828	9,261	8,526	8,679	7,354	7,144	9,130	8,274	8,066	7,766	7,046
2023	8,964	8,307	9,319	8,742	8,838	7,978	7,665	9,533	9,087	8,172	7,725	6,876
2024	6,820	7,725	7,610	8,344	7,709	6,477	7,137	8,445	7,492	7,804	7,220	6,000
2025	6,696	6,353	6,868	7,787	7,038	6,269	6,511	7,495	7,811	7,277	6,184	6,000

Time in Care

Child Welfare



Length of time in care for Foster Care Children in DCS Custody on December 15th, 2025⁹

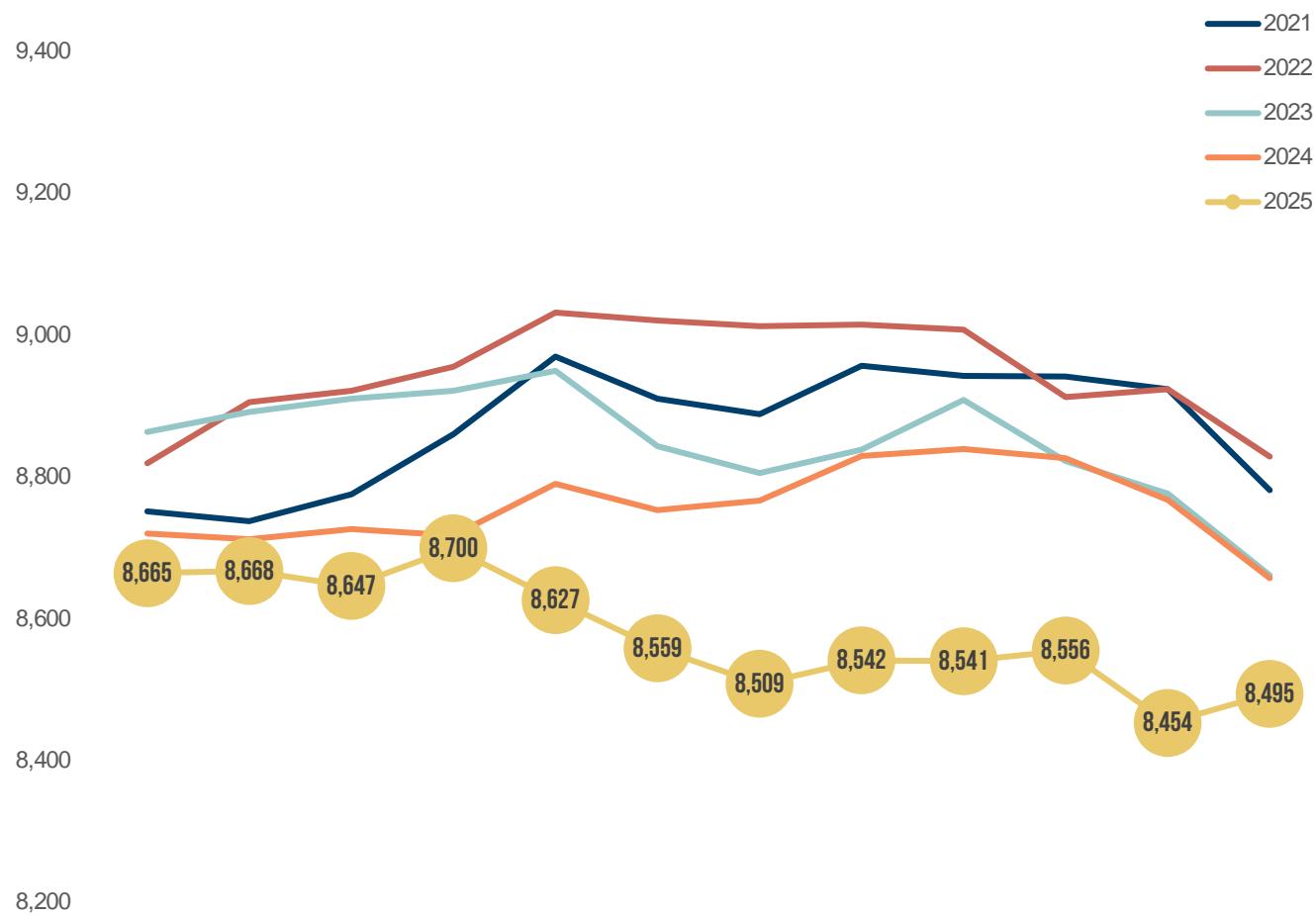


Custodial Demographics

Child Welfare

Count of Children in DCS Custody by Month and Year⁹

The chart below shows the monthly number children in DCS custody in 2025, along with trend lines for previous years. The accompanying table provides custody counts for all months across all years.



	January	February	March	April	May	June	July	August	September	October	November	December
2021	8,752	8,738	8,776	8,861	8,970	8,911	8,889	8,957	8,943	8,942	8,924	8,782
2022	8,820	8,906	8,922	8,956	9,032	9,021	9,013	9,015	9,008	8,913	8,924	8,829
2023	8,864	8,892	8,911	8,922	8,950	8,844	8,806	8,839	8,909	8,823	8,777	8,662
2024	8,721	8,713	8,727	8,718	8,791	8,754	8,767	8,830	8,840	8,827	8,768	8,658
2025	8,665	8,668	8,647	8,700	8,627	8,559	8,509	8,542	8,541	8,556	8,454	8,495

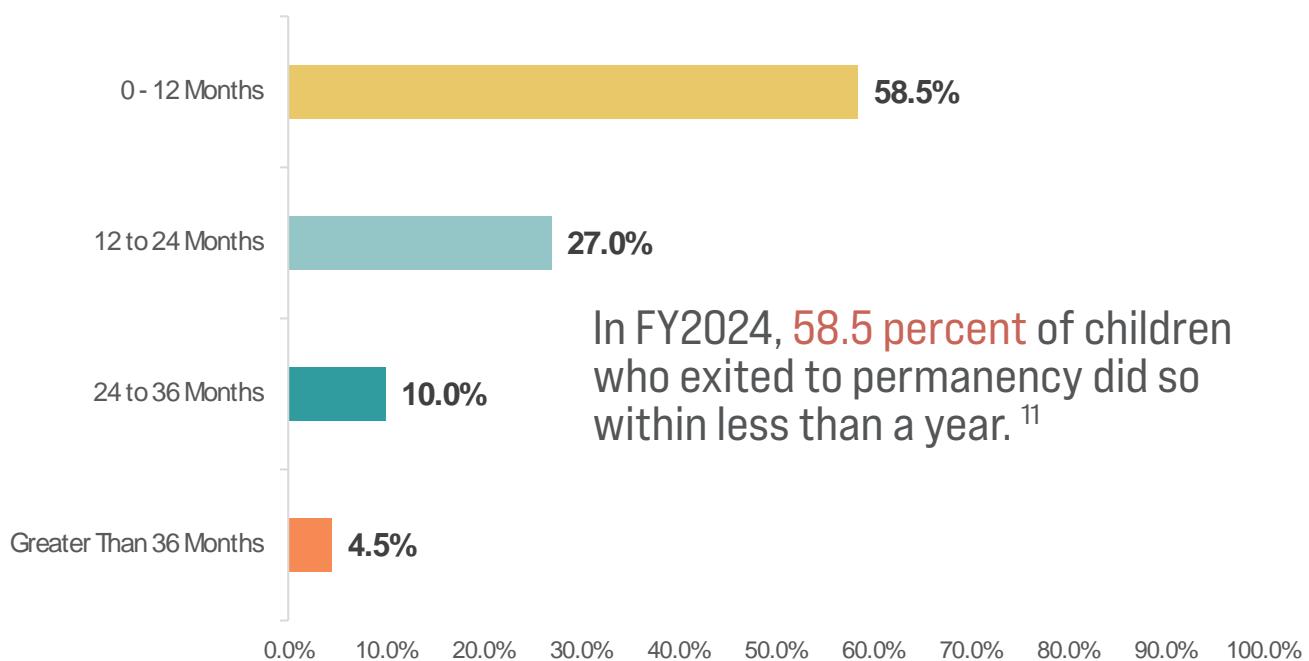
December 2025 - As of 12/15/2025

State of the Child 2025

Page 79

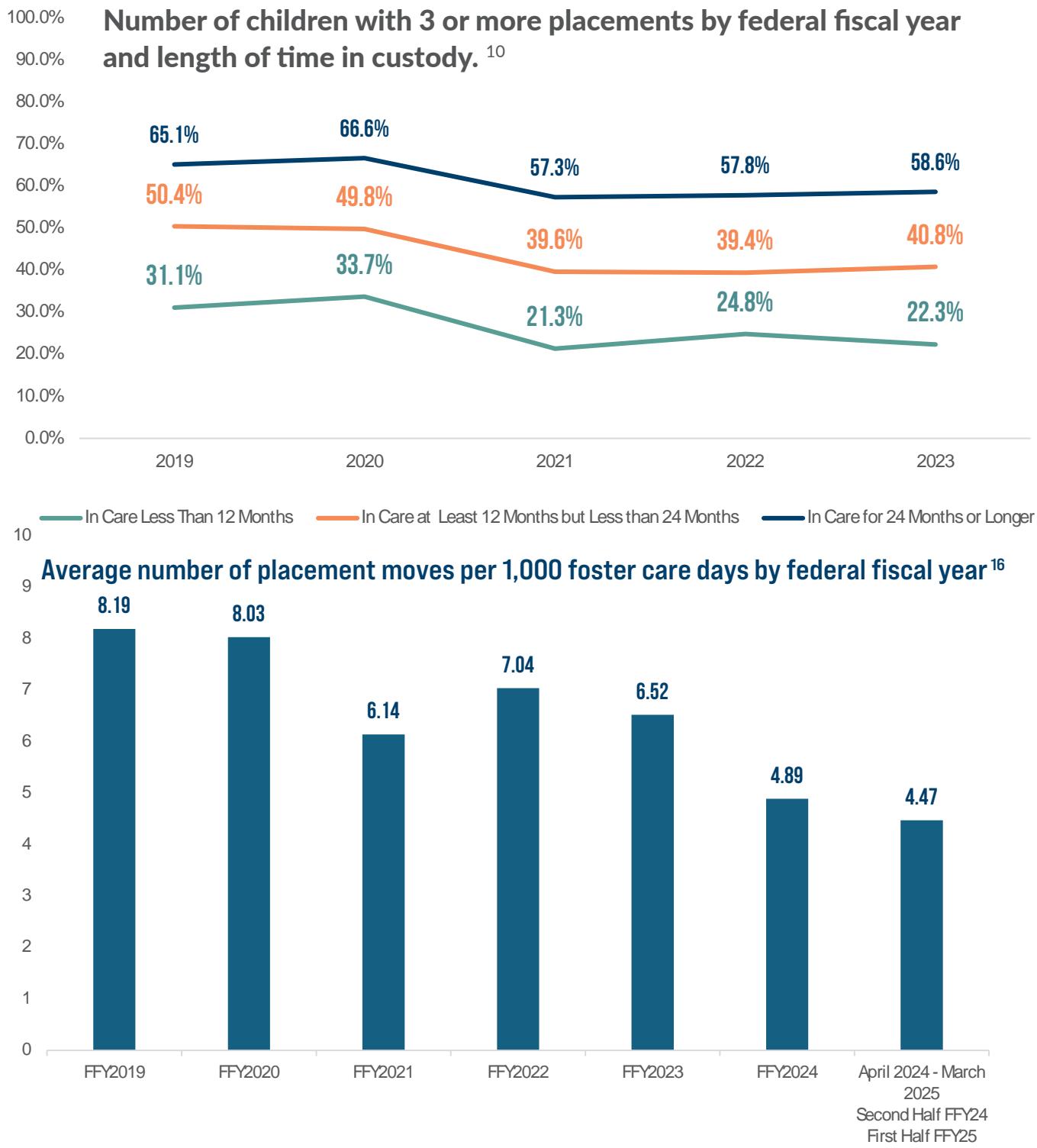
Exits from care

Child Welfare



Placement

Child Welfare

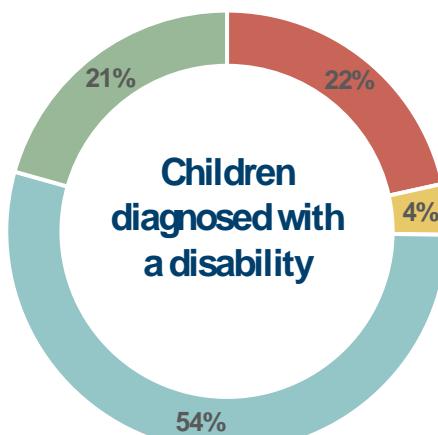


It is not clear how time spent in DCS offices or transitional homes is factored into placement moves.

Exits from care

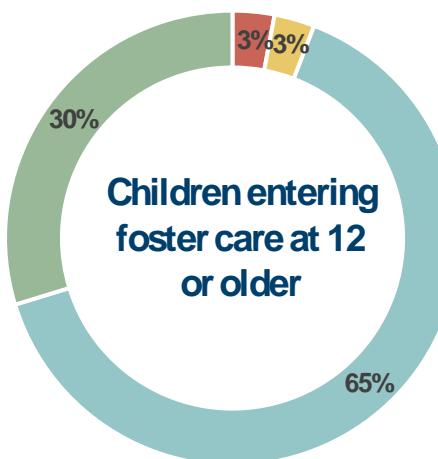
Child Welfare

More than half of exits from foster care care in 2023 were to reunification¹⁰

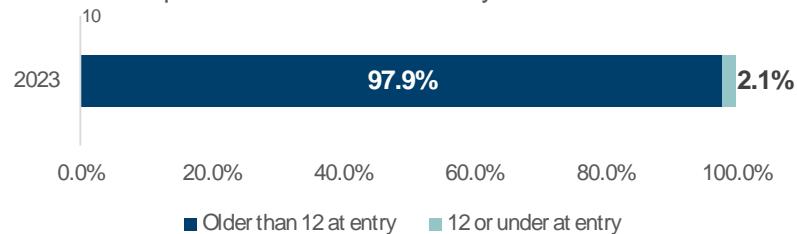


Exits from care by age and disability status¹⁰

- Adoption
- Guardianship
- Reunification
- Other



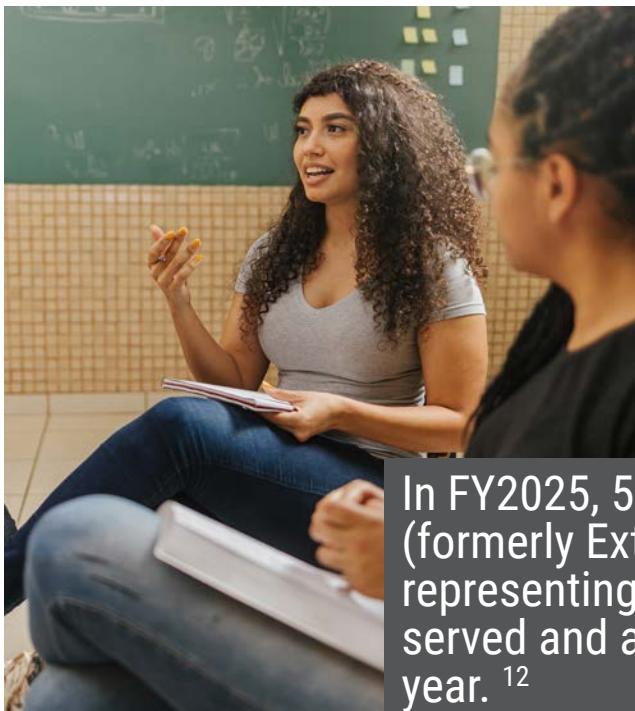
In 2023, only 2 percent of children exiting foster care to emancipation entered care when they were 12 or under.



Transition Age Youth

Child Welfare

Many former foster youths face significant challenges in the transition to adulthood, placing them at greater risk of victimization or negative social outcomes. Bright Futures (formerly Extension of Foster Care Services) provides these youth with additional support as they phase into adulthood. Supports include the opportunity to complete or continue their education with access to health care, housing assistance, and other supports to help them succeed in life. This program plays an important role in achieving the goals Tennessee has set for improving graduation rates, increasing educational attainment, building stronger families, and creating safer communities.



In FY2025, 949 youth aged out of foster care.¹²

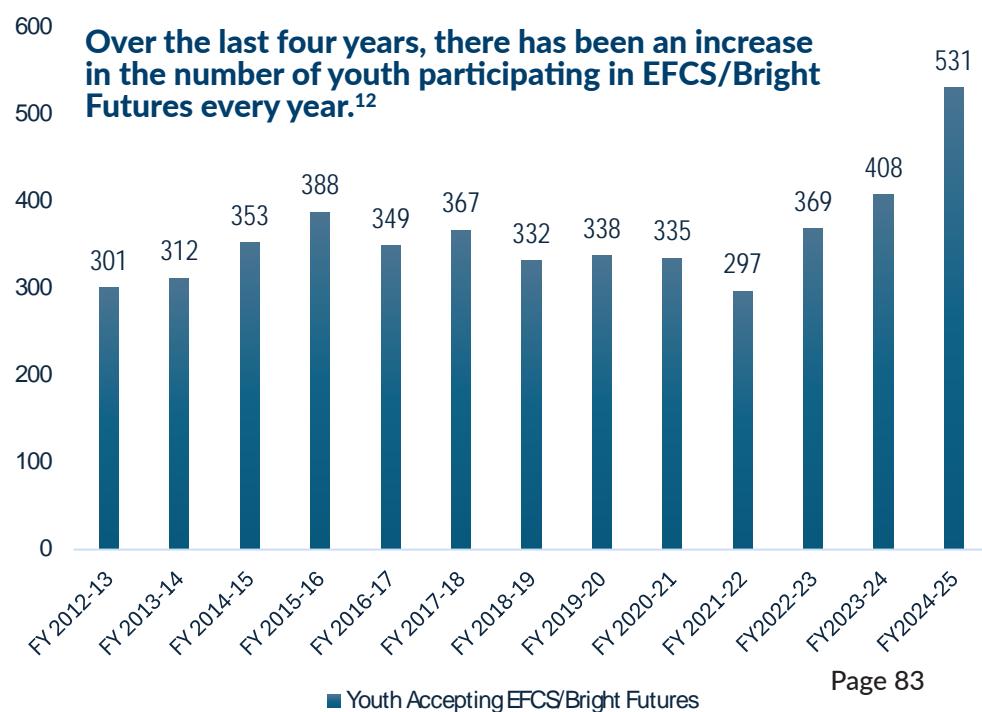
Of those aging out, 87 percent were eligible for Bright Futures.¹²

Among those who were eligible, 67 percent accepted Bright Futures. FY2025 had the highest acceptance rate since the state began offering the program.¹²

In FY2025, 531 youth accepted Bright Futures (formerly Extension of Foster Care Services) representing the largest number of youth ever served and an increase of 123 from the previous year.¹²

There was an increase in the average length participants stayed in Bright Futures. The average length of stay was 352 days, nearly two and a half months longer than in FY204 previous year.¹²

The largest reason for loss of services in FY2025 was due to turning age 21 (representing 78 youth). Due to recently passed legislation that went into effect on July 1, 2025, the age of participation has been extended through the individual's 23rd birthday.¹²



Relative Caregivers

Child Welfare



In 2024, 2,825 children were served by the Relative Caregiver Program, representing a 91.8 percent increase from 2023.¹¹



The Relative Caregiver Program is offered in all 95 Tennessee counties.¹³

The Relative Caregiver Program provides services and support to relatives providing care for non-custodial children. These services and supports help children remain with their families and reduce the number of children entering foster care.

In 2024, \$18.6 million in direct assistance was provided through the Relative Caregiver Program.¹³

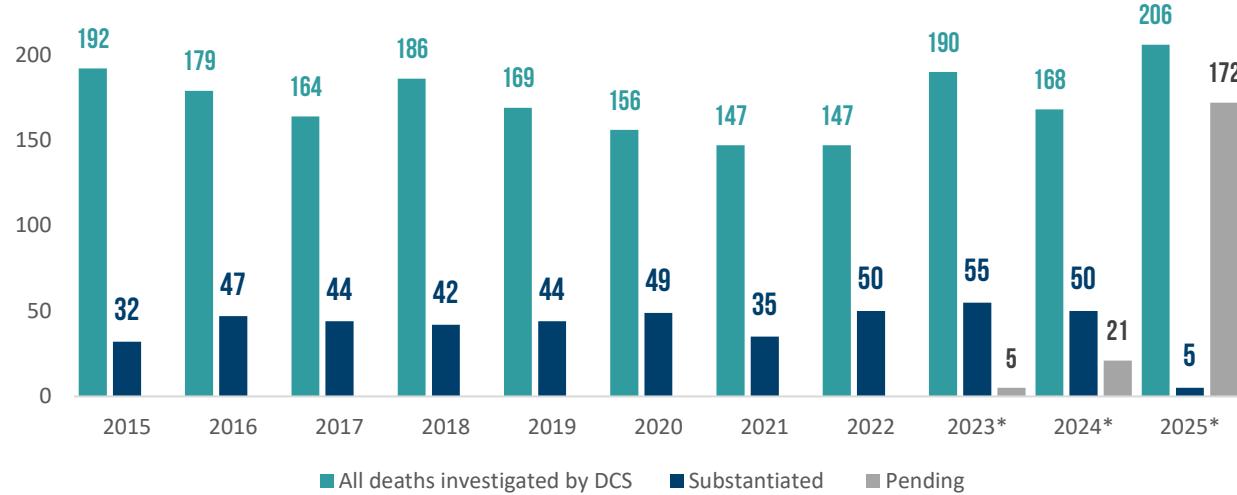
Of the **2,825 children** who had been in the custody of a Relative Caregiver receiving direct assistance in 2024:

- **2,776, or 98 percent, remained in the custody of the Relative Caregiver and did not enter into state custody.**

Abuse Deaths

Child Welfare

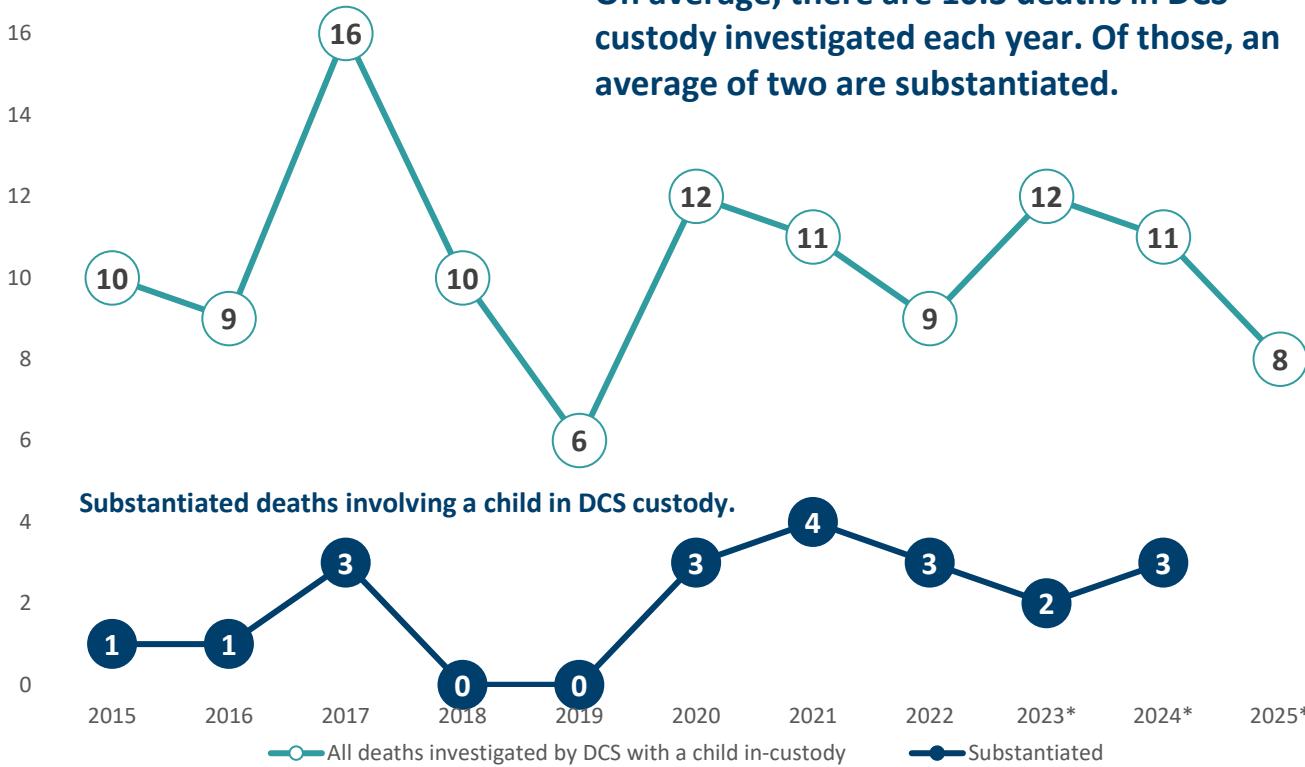
In 2025, DCS investigated the largest number of deaths in 10 years. ¹⁴



Of the 50 substantiated abuse deaths in 2024, 68 percent of the victims had contact with Department of Children's Services within the three years prior to their death. Of the 21 still pending deaths, 15 had prior contact with the Department. ¹⁴

All deaths investigated by DCS (Substantiated, Unsubstantiated, Unable to Complete & Pending) involving a child in DCS custody. ¹⁴

On average, there are 10.3 deaths in DCS custody investigated each year. Of those, an average of two are substantiated.

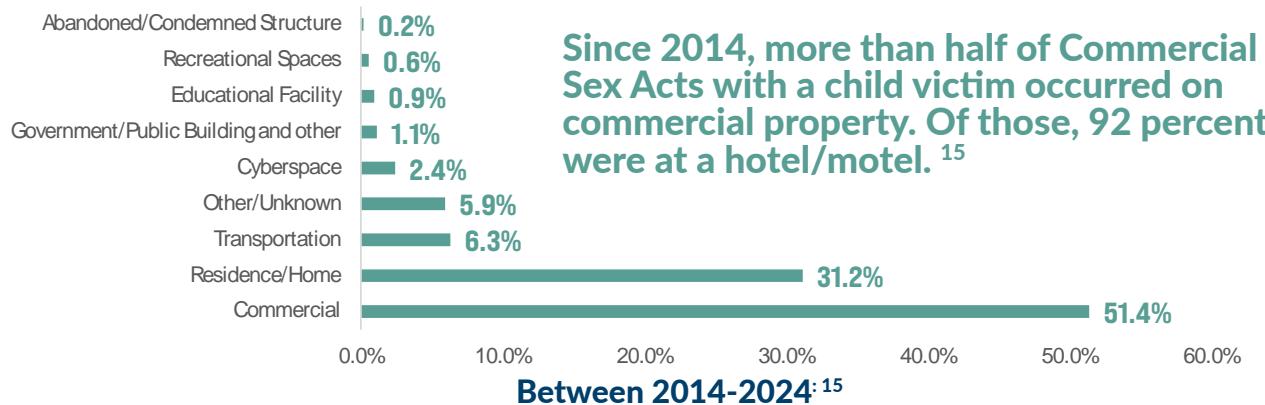
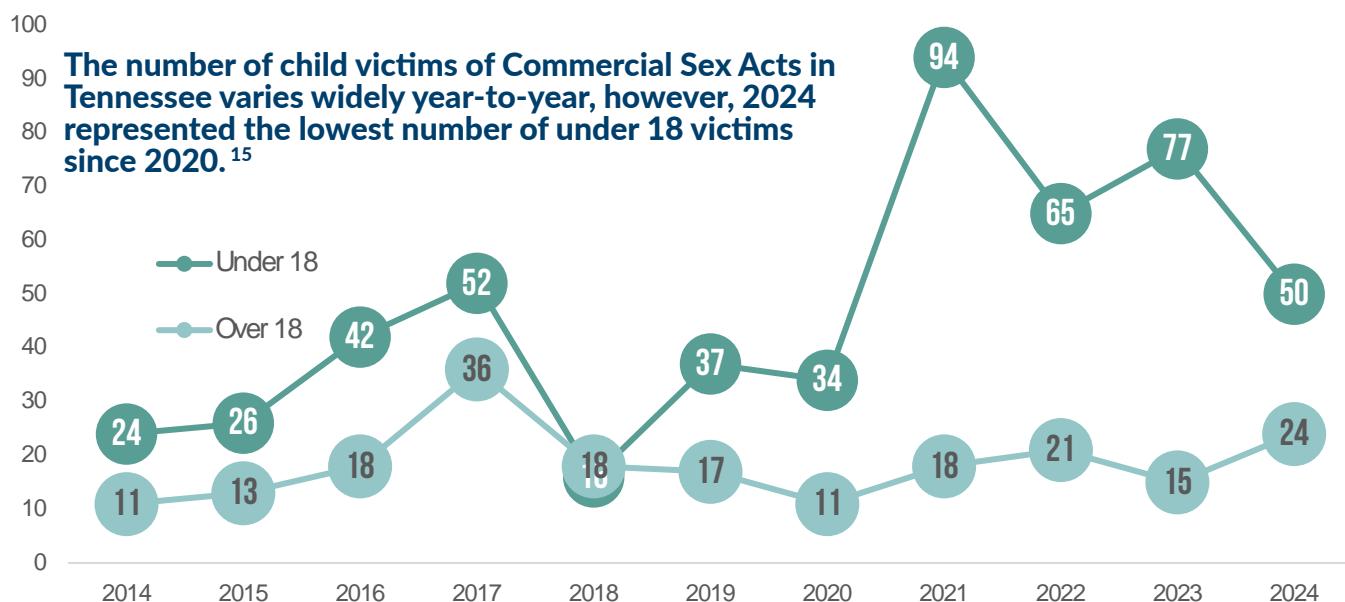


*Indicates a portion of death investigations still pending. 3% of 2023 abuse death investigations |13% of 2024 abuse death investigations |87% of 2025 abuse death investigations | 2025 death numbers not final. Represents count as of 12/15/2025.

Human Trafficking

Child Welfare

2014-2024



There have been 533 reported child victims of Involuntary Servitude or Commercial Sex Acts in Tennessee and 228 adult victims.

There have been 517 child victims of Commercial Sex Acts since 2014 years.

Among cases of Commercial Sex Acts and Involuntary Servitude of children:

The victim was under 10 years old in 4.3 percent of cases.

Black children were disproportionately affected as victims, comprising 36 percent of victims.

93 percent of victims were girls.

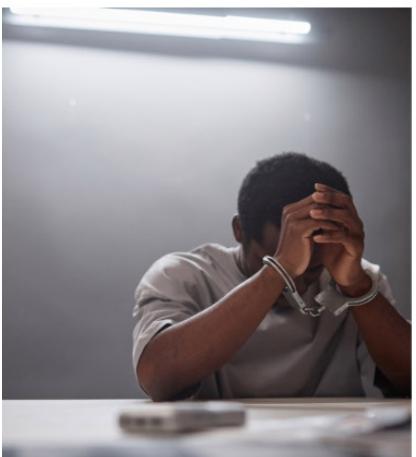
84 percent of known offenders were men.

In 2024, half of the victims of Commercial Sex Acts in Tennessee were under 16 years old.

Commercial Sex Acts - Inducing a person by force, fraud or coercion to participate in commercial sex acts, or in which the person induced to perform such act(s) has not yet attained 18 years of age.

Involuntary Servitude - The obtaining of a person(s) through recruitment, harboring, transportation, or provision, and subjecting such person(s) by force, fraud or coercion into involuntary servitude, peonage, debt bondage, or slavery (not to include commercial sex acts)

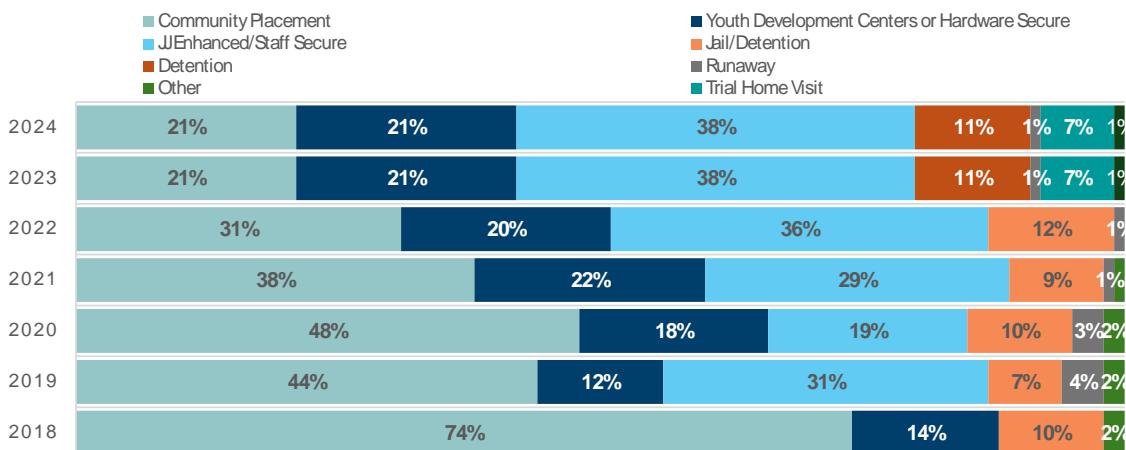
YOUTH JUSTICE



Placements

Youth Justice

Youth justice placements by Point-in-Time count on April 1st of each year ¹



Note: In 2023, placement in jails, transition homes, and hospitals began being classified under "Community Placement". Additionally, trial home visits are no longer represented in Community Placement and have their own section.

Annual cost per child based on placement

Hardware Secure ^{1,2}

FY2026 Wilder - \$542,689

FY 2024 Mountain View -Hardware Secure, Standing

Tall Music City, Hollis Residential Treatment Center, CSI

Rockdale Academy (Texas) - \$214,167

There continues to be a smaller share of youth in DCS juvenile justice custody that are in community-based placements than five years prior. ¹

Community Based Placement ¹

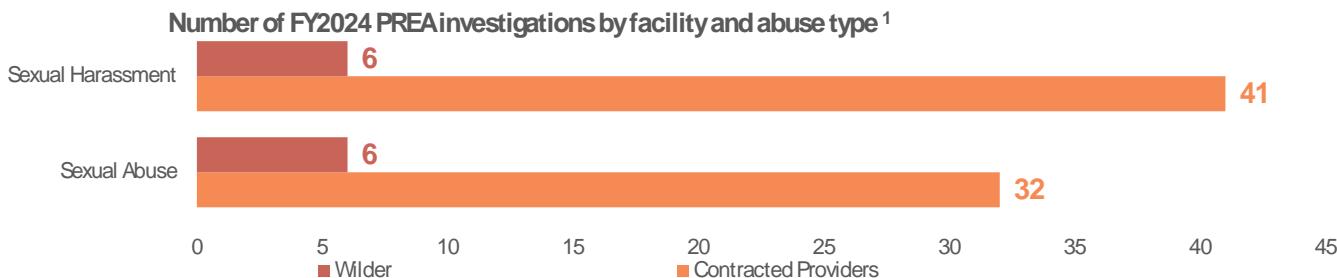
FY 2024 Level 4- \$130,305

FY 2024 Level 3 - \$104,817

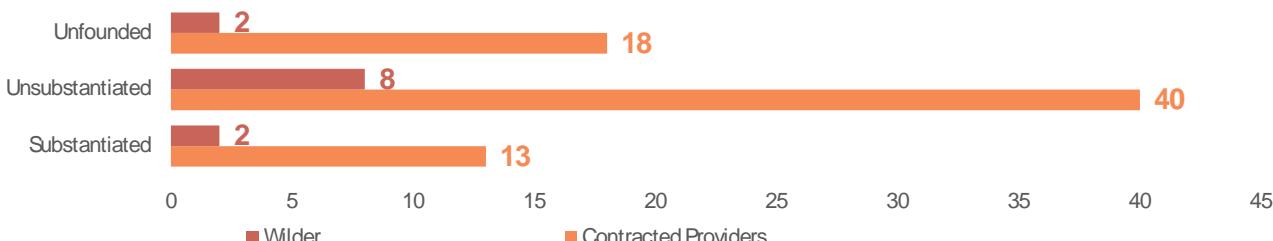
FY 2024 Level 2 - \$52,414

Prison Rape Elimination Act (PREA) Investigations -

The Prison Rape Elimination Act (PREA) is a federal law enacted in 2003 to address and eliminate sexual abuse and sexual harassment in all correctional settings across the United States, including juvenile justice facilities. It was the first federal legislation specifically aimed at preventing sexual misconduct in confinement environments.

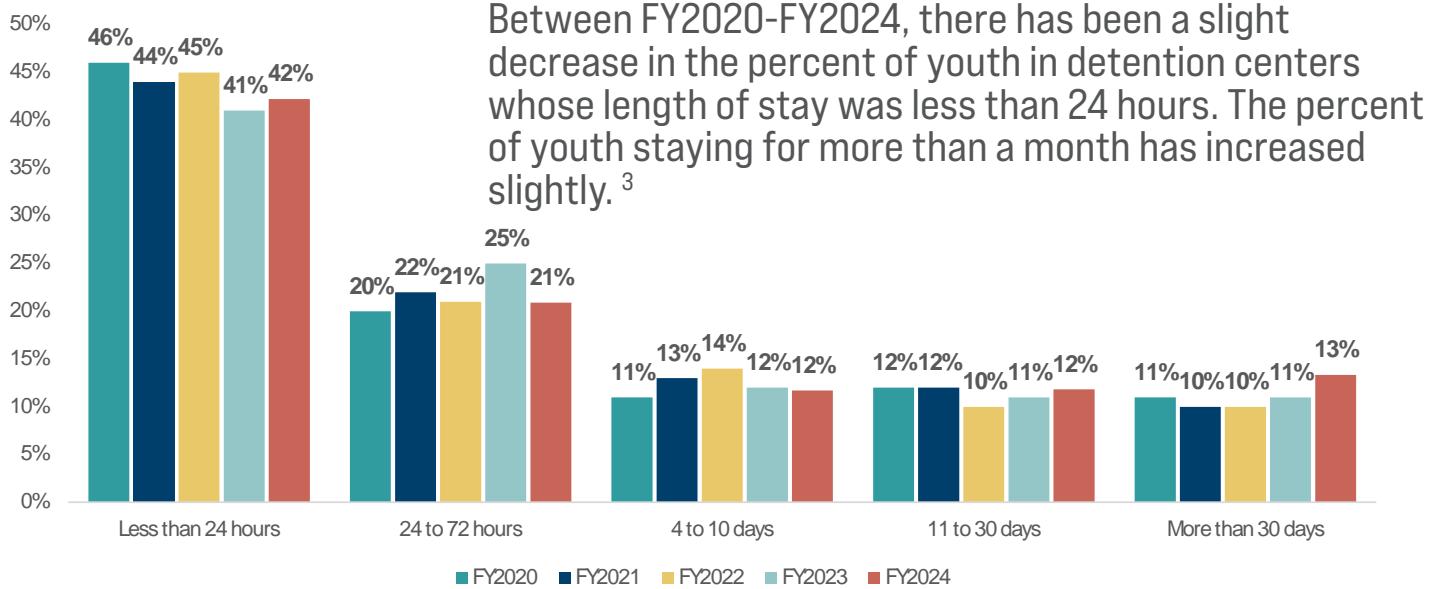


Number of FY2024 PREA investigations by disposition ¹



Placements

Youth Justice



Between FY2020-FY2024, there has been a slight decrease in the percent of youth in detention centers whose length of stay was less than 24 hours. The percent of youth staying for more than a month has increased slightly.³

In FY2024, there were 1,073 youth placed in a Juvenile Detention Center for more than 30 days. This represents a 23 percent increase from 870 in FY2023.³

Juvenile Detention Centers are designed to be short-term placements and often do not have the capacity to provide youth with the educational, health, mental health, and rehabilitative services they need.

In FY2024, 402 youth were in a Youth Development Center or Hardware Secure facility, an increase from 368 in FY2023.³

In FY2024, 633 youth were served by Aftercare. This number has been declining over the past two years. In FY2021, 845 youth were served on Aftercare representing a 14 percent decrease.³

In FY2024, there were 2,451 youth served through state probation, a slight increase from 2,448 the previous year.³

Placements

Youth Justice

On December 11th, 2025:⁴

Non-Custodial Juvenile Justice

There were **1,338** Non-Custodial Juvenile Justice Youth

Of those:

118 were on Aftercare

453 were on Judicial Diversion

771 were on Probation

Age Ranges of Non-Custodial Youth:

6 to 10 years: 1

11 to 15 years: 485

16 to 17 years: 685

18+ years: 167

Length of Episode:

3 Months or Less: 561

3 to 6 Months: 381

6 to 9 Months: 186

9 to 12 Months: 76

12 to 15 Months: 50

15 to 18 Months: 20

18 Months-2 Years: 32

2 - 3 Years: 23

3 - 5 Years: 10

> 5 Years: 1

Custodial Juvenile Justice

There were **605** Custodial Juvenile Justice Youth

Days in Custody

0 to 90 days: 130

90 days to 6 months: 152

6 - 9 months: 127

9 to 12 months: 54

12 to 15 months: 36

15 to 18 months: 23

18 months to 2 years: 29

2 to 3 years: 32

3 to 5 years: 14

> 5 Years: 8

Youth on Probation

There were **1,221** youth on Probation

Days on Probation

0 to 90 days: 481

90 days to 6 months: 352

6 - 9 months: 179

9 to 12 months: 77

12 to 15 months: 48

15 to 18 months: 20

18 months to 2 years: 32

2 to 3 years: 22

3 to 5 years: 10

> 5 Years: 1

Prevention & Intervention

Youth Justice

The Office of Juvenile Justice (OJJ) within the Department of Children's Services provides funding to prevent youth from entering state custody. These funds are awarded to juvenile courts and community agencies that serve youth at risk of entering state custody for delinquency, truancy, and other status offenses.

The grant program descriptions and outcome measures included below are from the Department of Children's Services' Office of Juvenile Justice FY2024 Annual Report:

Custody Prevention Grants | 98.8% diversion rate | \$3.20 per day | 830 youth served¹

Grantees under this classification offer program services for status and delinquent youth that include; case management, counseling, supervision, parenting classes, assessment, substance abuse groups and other family services as deemed necessary.

Child & Family Intervention Grants | 99% diversion rate | \$1.28 per day | 1,367 youth¹ served

In recognition of the importance of the intake process in diverting youth from the juvenile justice system, OJJ provides prevention and/or intervention grants to three (3) juvenile courts to enhance the intake process. OJJ funds are used to completely or partially fund additional juvenile court personnel to conduct risk/needs assessments, mental health screenings and make referrals to community-based interventions.

These programs also serve youth who are at imminent risk of entering state custody. These services include county probation, counseling, case management and/or direct delivery of services, transportation, and liaison for educational issues

Truancy Prevention Grants | 100% diversion rate | \$1.89 per day | 867 youth served¹

These programs focus on decreasing truancy and improving academic performance by attendance monitoring, GED classes, and counseling. These programs utilize funds to employ a Truancy Specialist to keep abreast of youth experiencing truancy issues. Diverting juvenile offenders to truancy prevention programs can keep truant youth and less serious offenders from moving deeper into the juvenile justice system and allow the courts to save the most severe and costly sanctions for the most serious offenders.

Day Treatment/Education Grants | 99.5% diversion rate | \$18.48 per day | 220 youth served¹

Carroll Academy and two programs run by Genesis Learning Centers (Montgomery County Teen Learning Center, and Rutherford County Teen Learning Center), provide educational and therapeutic day treatment services for delinquent youth who have been referred by the local courts. All these youth are at high-risk of state custody and these programs allow the youth to be educated and treated in their communities. In addition to providing Department of Education (DOE) approved education services, these programs provide a therapeutic component utilizing cognitive behavioral intervention, with focus on life skills development, drug and alcohol education/counseling, and anger management. Referrals to these programs are under the supervision of the juvenile court as well as local schools.

Aftercare Grants| 93.7% diversion rate | \$12.82 per day | 95 youth served¹

OJJ strives to prevent re-entry into state custody by providing funding to community-based aftercare programs that help youth and their families adjust to re-unification following a custody stay. These programs offer intensive wrap around case management, treatment services and are designed to manage cases involving to mental health issues and/or drug and alcohol abuse. Both grants provide case management services before a youth is released from custody which continues when youth return home. In East TN (Knox County/East TN regional area) OJJ contracts with Helen Ross McNabb to administer the EXIT program. In West TN the Reunion program is administered by Quinco Mental Health Center.

Community Intervention Services Grants | 94.4% diversion rate | \$7.70 per day | 340 youth served¹

DCS provides grants to six service providers that deliver intensive probation services, case management, and counseling for delinquent youth who have violated county and/or state probation. The goal of CIS grantees is to reduce the number of commitments to DCS by keeping these delinquent youth in their home and community by providing a blend of intensive supervision and treatment.

Prevention & Intervention

Youth Justice

Multi-Systemic Therapy (MST)¹

Multi-Systemic Therapy (MST) serves youth ages 12–18 who are at risk of court involvement for delinquent behavior, at risk of out-of-home placement, or returning home from state custody, with the goal of preventing recommitment.

Each youth and family receive services from a therapist who works directly with the youth and family in the family home, and is available 24 hours a day. Therapists work with the families on current behaviors and provide goal directed services including increasing family affection, decreasing association with deviant peers, increasing pro-social peers, engaging youth/family in positive recreational activities, improving school attendance, and performance and aiding the family in meeting concrete needs such as housing, medical care, and other resources.

As of FY2024, **1,821 youth** had been served through the MST program. Of those, one year post-discharge:¹

89%
were living with family/independently.

95%
were in school, graduated, or employed.

87%
had no trouble with the law.

95% of families reported they were satisfied with MST services upon completion of the program.



UNDERSTANDING TRENDS IN YOUTH CRIME

The Tennessee Bureau of Investigation publishes annual crime data through their Tennessee Incident Based Reporting System (TIBRS) that provides insight into trends in youth crime.⁴

With the exception of population numbers for ages 10 to 17 from Tennessee Department of Health used to calculate rate, all of the data contained in this section is from TIBRS and can be accessed at crimeinsight.tbi.tn.gov⁴ Due to the fact the TIBRS is a live and changing portal, the tables used for this section have been added to TCCY's website and can be downloaded in the references section.

Throughout this section, unless otherwise noted, the measure used is "Number of Crimes", the broadest available measure, meaning an arrest is not necessary and there is always the chance that the alleged perpetrator is mistakenly attributed as being under 18.

The numbers for crimes by county is based upon TIBRS classifications in their Jurisdiction by Geography section.

Crimes Against Persons - Murder and Non-negligent Manslaughter, Negligent Manslaughter, Justifiable Homicide, Kidnapping/Abduction, Rape, Sodomy, Sexual Assault with an Object, Fondling, Incest, Statutory Rape, Aggravated Assault, Simple Assault, Intimidation, Human Trafficking - Commercial Sex Acts, Human Trafficking - Involuntary Servitude

Crimes Against Property - Arson, Bribery, Burglary/Breaking & Entering, Counterfeiting/Forgery, Destruction, Damage, Vandalism of Property, Embezzlement, Extortion/Blackmail, False Pretenses /Swindle/Confidence Game, Credit Card/Automatic Teller Machine Fraud, Impersonation, Welfare Fraud, Wire Fraud, Identity Theft, Hacking/Computer Invasion, Robbery, Pocket-picking, Purse-snatching, Shoplifting, Theft from a Building, Theft from Coin-Operated Machine or Device, Theft from a Motor Vehicle, Theft of Motor Vehicle Parts or Accessories, All Other Larceny, Motor Vehicle Theft, and Stolen Property Offenses.

Crimes Against Society - Animal Cruelty, Drug/Narcotic Violations, Drug/Narcotic Equipment Violations, Gambling, Pornography, Prostitution, Promoting/Assisting or Purchasing Prostitution, and Weapons Law Violations.

Crime Rate Over the Decade

Youth Justice

Overall, the crime rate, including youth crime, has steadily trended down over the decade. In youth crime, there was a larger than usual drop in 2020 and subsequent increase back to previous levels during 2021-2024.

OVERALL CRIME RATE

(PER 1,000)



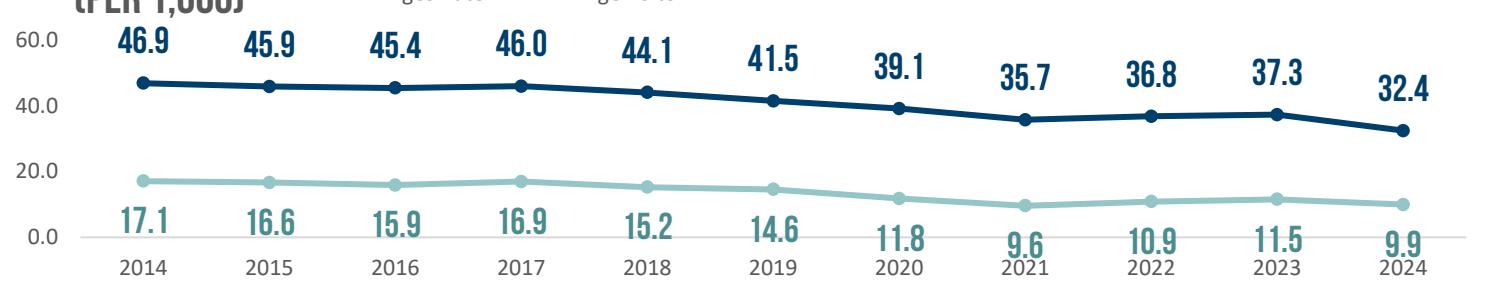
CRIMES AGAINST PERSONS RATE

(PER 1,000)



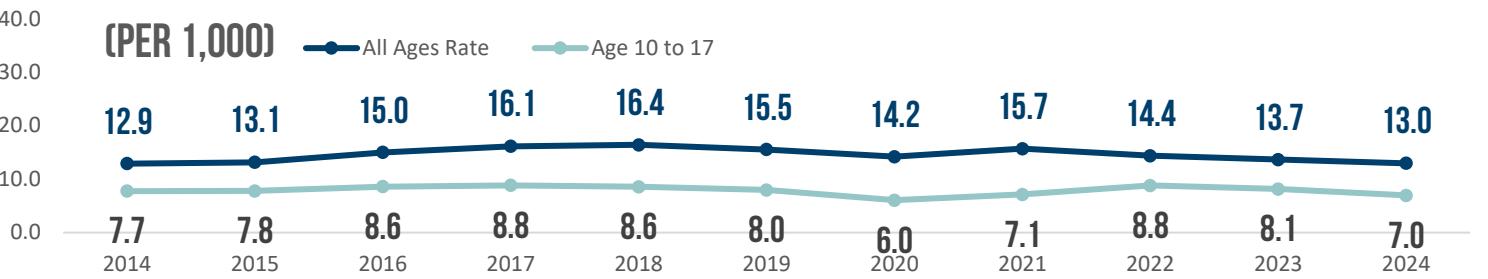
CRIMES AGAINST PROPERTY RATE

(PER 1,000)



CRIMES AGAINST SOCIETY RATE

(PER 1,000)



Crime Rate by County

Youth Justice

In 2014, Tennessee had 33,420 crimes committed by youth aged 10 to 17, representing a crime rate of **49.4 per 1,000**.

In 2024, Tennessee had 29,996 crimes committed by youth aged 10 to 17, representing a crime rate of **41.7 per 1,000**.

AGE 10 TO 17 CRIME RATES BY COUNTY 2014 AND 2024

Counties shaded in blue represent the 10 areas with the lowest crime rates in 2024, while counties shaded in orange represent the 10 areas with the highest crime rates

County	2014 Crimes	2014 Population	2014 Rate	2024 Crimes	2024 Population	2024 Rate	County	2014 Crimes	2014 Population	2014 Rate	2024 Crimes	2024 Population	2024 Rate
Anderson	186	7,428	25.0	251	7,797	32.2	Lauderdale	63	2,962	21.3	86	2,328	36.9
Bedford	143	5,431	26.3	297	6,075	48.9	Lawrence	186	4,832	38.5	66	5,223	12.6
Benton	12	1,483	8.1	13	1,480	8.8	Lewis	39	1,264	30.9	21	1,318	15.9
Bledsoe	15	1,232	12.2	2	1,022	2.0	Lincoln	122	3,462	35.2	151	3,682	41.0
Blount	295	12,885	22.9	545	12,990	42.0	Loudon	118	4,662	25.3	171	5,342	32.0
Bradley	416	10,803	38.5	453	11,344	39.9	Macon	24	2,539	9.5	40	2,964	13.5
Campbell	47	3,943	11.9	36	3,552	10.1	Madison	759	9,981	76.0	485	10,560	45.9
Cannon	18	1,349	13.3	8	1,431	5.6	Marion	19	2,879	6.6	14	2,647	5.3
Carroll	48	2,806	17.1	23	3,221	7.1	Marshall	94	3,619	26.0	124	3,905	31.8
Carter	130	5,146	25.3	84	4,768	17.6	Maury	613	8,641	70.9	742	11,000	67.5
Cheatham	200	4,524	44.2	217	3,993	54.3	McMinn	143	5,491	26.0	82	5,476	15.0
Chester	39	1,864	20.9	58	1,915	30.3	McNairy	50	2,881	17.4	54	2,567	21.0
Claiborne	20	3,003	6.7	31	2,934	10.6	Meigs	9	1,227	7.3	4	1,293	3.1
Clay	12	667	18.0	0	718	0.0	Monroe	59	4,640	12.7	136	4,457	30.5
Cocke	110	3,453	31.9	88	3,474	25.3	Montgomery	1,246	20,119	61.9	1,692	27,271	62.0
Coffee	223	5,846	38.1	303	6,554	46.2	Moore	12	682	17.6	12	598	20.1
Crockett	41	1,673	24.5	11	1,480	7.4	Morgan	6	2,143	2.8	26	1,956	13.3
Cumberland	89	4,843	18.4	153	5,063	30.2	Obion	106	3,274	32.4	115	2,924	39.3
Davidson	6,521	56,587	115.2	3,987	62,106	64.2	Overton	21	2,344	9.0	21	2,234	9.4
Decatur	23	1,140	20.2	15	1,118	13.4	Perry	13	802	16.2	4	867	4.6
DeKalb	26	1,954	13.3	51	2,051	24.9	Pickett	0	501	0.0	0	380	0.0
Dickson	199	5547	35.9	206	5,658	36.4	Polk	27	1,727	15.6	18	1,539	11.7
Dyer	295	4,211	70.1	249	3,893	64.0	Putnam	189	7,118	26.6	172	8,903	19.3
Fayette	85	3,799	22.4	102	3,457	29.5	Rhea	57	3,530	16.1	55	3,429	16.0
Fentress	9	1,942	4.6	33	1,826	18.1	Roane	77	5,224	14.7	89	4,959	17.9
Franklin	99	4,330	22.9	78	4,242	18.4	Robertson	258	7,781	33.2	176	8,299	21.2
Gibson	197	5,623	35.0	135	5,823	23.2	Rutherford	1,317	32,703	40.3	1,643	42,470	38.7
Giles	79	2,815	28.1	80	2,894	27.6	Scott	28	2,578	10.9	14	2,306	6.1
Grainger	10	2,336	4.3	13	2,136	6.1	Sequatchie	33	1,557	21.2	27	1,513	17.8
Greene	142	6,674	21.3	300	6,664	45.0	Sevier	301	9,329	32.3	335	9,421	35.6
Grundy	9	1,435	6.3	12	1,304	9.2	Shelby	9,822	105,673	92.9	6,877	102,378	67.2
Hamblen	241	6,705	35.9	571	7,262	78.6	Smith	24	2,157	11.1	29	2,103	13.8
Hamilton	1,376	32,455	42.4	1,627	36,076	45.1	Stewart	17	1,388	12.2	15	1,385	10.8
Hancock	1	662	1.5	6	661	9.1	Sullivan	753	14,690	51.3	676	14,214	47.6
Hardeman	95	2,444	38.9	111	2,254	49.2	Sumner	789	19,845	39.8	694	21,848	31.8
Hardin	62	2,551	24.3	105	2,524	41.6	Tipton	444	7,712	57.6	284	6,686	42.5
Hawkins	83	5,791	14.3	52	5,157	10.1	Trousdale	33	845	39.1	21	1,166	18.0
Haywood	141	2,013	70.0	61	1,724	35.4	Unicoi	32	1,718	18.6	26	1,440	18.1
Henderson	99	2,998	33.0	122	2,869	42.5	Union	43	2,031	21.2	38	1,971	19.3
Henry	60	3,148	19.1	54	3,069	17.6	Van Buren	2	509	3.9	2	592	3.4
Hickman	60	2,511	23.9	42	2,379	17.7	Warren	113	4,438	25.5	152	4,455	34.1
Houston	12	918	13.1	7	831	8.4	Washington	438	11,341	38.6	442	12,723	34.7
Humphreys	32	1,881	17.0	43	1,837	23.4	Wayne	9	1,501	6.0	12	1,226	9.8
Jackson	9	1,040	8.7	16	1,019	15.7	Weakley	50	3,113	16.1	56	3,336	16.8
Jefferson	124	5,194	23.9	139	5,455	25.5	White	66	2,675	24.7	21	2,795	7.5
Johnson	25	1,509	16.6	25	1,411	17.7	Williamson	469	29,033	16.2	1,050	34,091	30.8
Knox	1,650	43,204	38.2	1,685	49,794	33.8	Wilson	508	14,420	35.2	512	17,803	28.8
Lake	11	536	20.5	14	413	33.9							

Crime Rate by County

Youth Justice

Between 2014-2024, Shelby, Davidson, and Knox Counties all experienced a decline in the age 10 to 17 crime rate.

INCREASE IN UNDER 18 CRIME RATE
PER 1,000 OVER THE DECADE

DECREASE IN UNDER 18 CRIME RATE
PER 1,000 OVER THE DECADE

0.0% CHANGE IN UNDER 18 CRIME PER
1,000 RATE OVER THE DECADE



County	Change in Crime Rate from 2014 - 2024	County	Change in Crime Rate from 2014 - 2024	County	Change in Crime Rate from 2014 - 2024
Anderson	7.2	Hamilton	2.7	Morgan	10.5
Bedford	22.6	Hancock	7.6	Obion	7.0
Benton	0.7	Hardeman	10.4	Overton	0.4
Bledsoe	-10.2	Hardin	17.3	Perry	-11.6
Blount	19.1	Hawkins	-4.2	Pickett	0.0
Bradley	1.4	Haywood	-34.7	Polk	-3.9
Campbell	-1.8	Henderson	9.5	Putnam	-7.2
Cannon	-7.8	Henry	-1.5	Rhea	-0.1
Carroll	-10.0	Hickman	-6.2	Roane	3.2
Carter	-7.6	Houston	-4.6	Robertson	-12.0
Cheatham	10.1	Humphreys	6.4	Rutherford	-1.6
Chester	9.4	Jackson	7.0	Scott	-4.8
Claiborne	3.9	Jefferson	1.6	Sequatchie	-3.3
Clay	-18.0	Johnson	1.2	Sevier	3.3
Cocke	-6.5	Knox	-4.4	Shelby	-25.8
Coffee	8.1	Lake	13.4	Smith	2.7
Crockett	-17.1	Lauderdale	15.7	Stewart	-1.4
Cumberland	11.8	Lawrence	-25.9	Sullivan	-3.7
Davidson	-51.0	Lewis	-14.9	Sumner	-8.0
Decatur	-6.8	Lincoln	5.8	Tipton	-15.1
DeKalb	11.6	Loudon	6.7	Trousdale	-21.0
Dickson	0.5	Macon	4.0	Unicoi	-0.6
Dyer	-6.1	Madison	-30.1	Union	-1.9
Fayette	7.1	Marion	-1.3	Van Buren	-0.6
Fentress	13.4	Marshall	5.8	Warren	8.7
Franklin	-4.5	Maury	-3.5	Washington	-3.9
Gibson	-11.9	McMinn	-11.1	Wayne	3.8
Giles	-0.4	McNairy	3.7	Weakley	0.7
Grainger	1.8	Meigs	-4.2	White	-17.2
Greene	23.7	Monroe	17.8	Williamson	14.6
Grundy	2.9	Montgomery	0.1	Wilson	-6.5
Hamblen	42.7	Moore	2.5		

Crime rate per 1,000

Crime Rate by County

Youth Justice

 INCREASE IN AGE 10 TO 17 CRIME RATE PER 1,000 OVER THE DECADE (2014-2024)

 DECREASE IN AGE 10 TO 17 CRIME RATE PER 1,000 OVER THE DECADE (2014-2024)

 NO CHANGE IN AGE 10 TO 17 CRIME RATE PER 1,000 OVER THE DECADE (2014-2024)

CRIMES AGAINST PERSONS

Over the last decade Davidson, Haywood, and Madison counties have seen the largest decline in the rate of age 10 to 17 Crimes Against Persons while Hamblen, Cheatham, and Bedford counties have seen the largest increase.



CRIMES AGAINST PROPERTY

Over the last decade Davidson, Madison, and Haywood counties have seen the largest decline in the rate of age 10 to 17 Crimes Against Property while Monroe, Hancock, and Hamblen counties have seen the largest increase.



CRIMES AGAINST SOCIETY

Over the last decade Davidson, Bledsoe, and Polk counties have seen the largest decline in the rate of age 10 to 17 Crimes Against Society while Hamblen, Lake, and Hardeman counties have seen the largest increase.

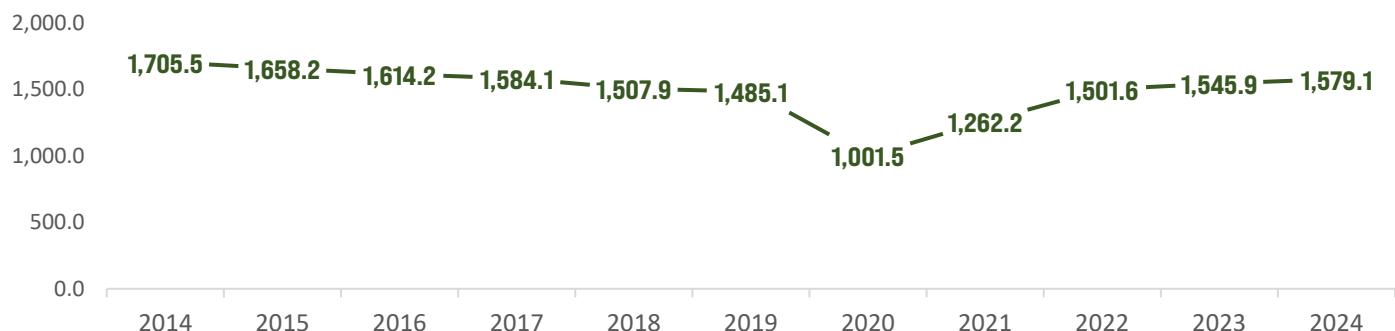


Crime Rate by Offense

Youth Justice

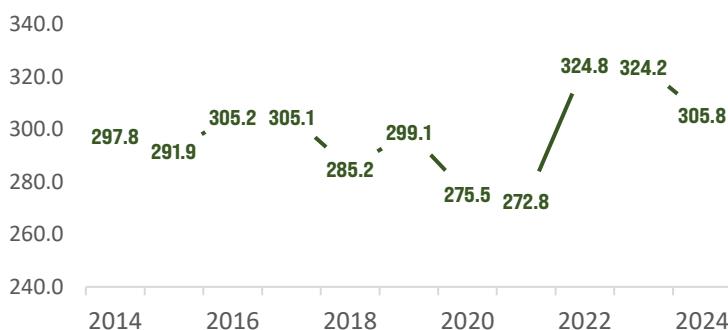
SIMPLE ASSAULT

Rate per 100,000



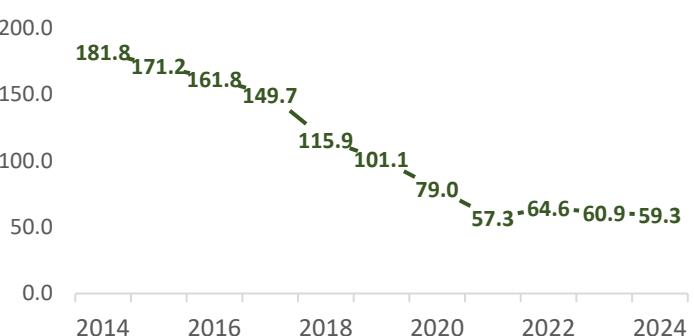
AGG. ASSAULT

Rate per 100,000



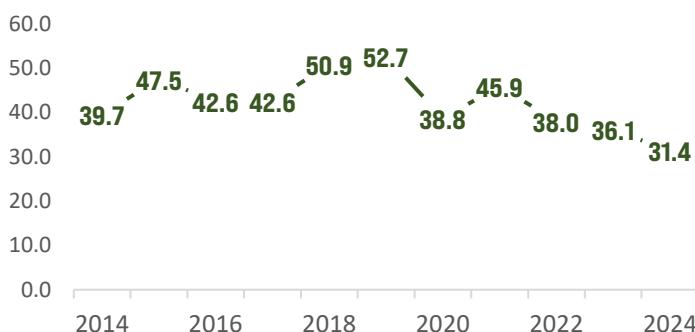
BURGLARY

Rate per 100,000



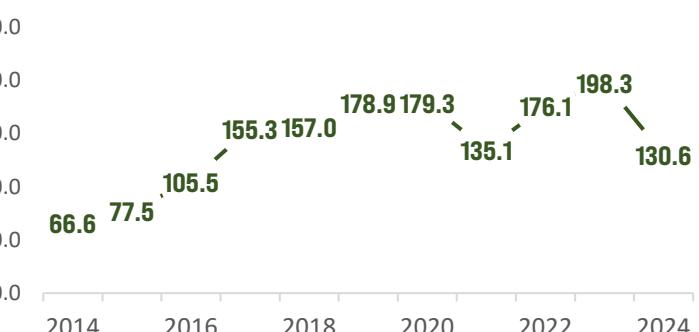
FORCIBLE RAPE

Rate per 100,000



MOTOR VEHICLE THEFT

Rate per 100,000

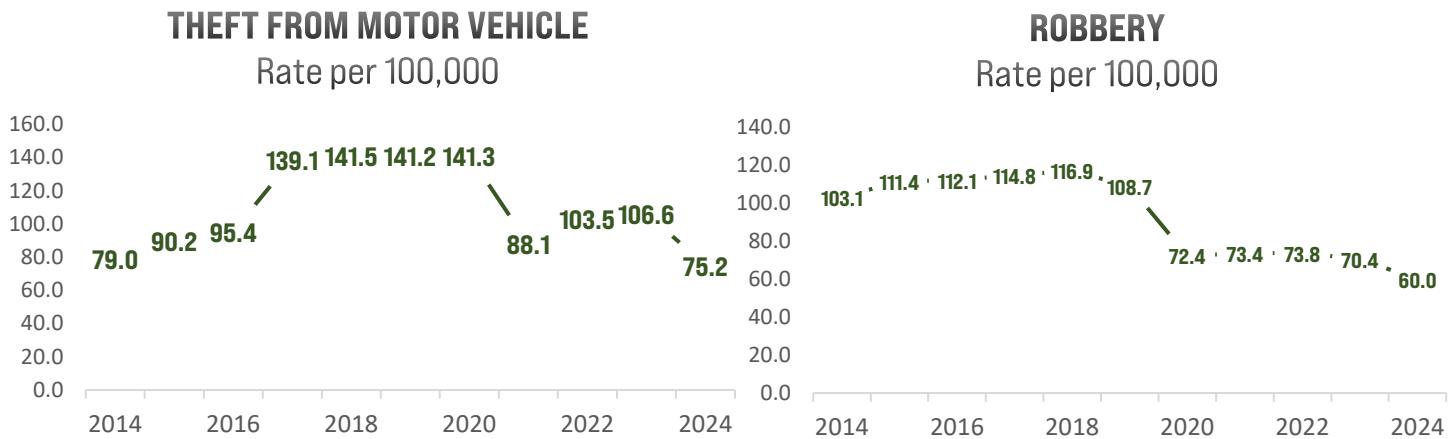


Crime Rate by Offense

Youth Justice



Although there has been a decline in the overall crime rate for those age 10 to 17, there has been an increase in the rate among the most serious offenses, pointing to a need for more effective evidence-based early intervention services.



Youth and Firearm Crimes

Youth Justice

Percent change over the decade (2014- 2024) in the type of weapon used **against** an under 18 victim with any age offender:

Firearm: **↑109.4**

Poison/Drugs: **↑21.5%**

Knife/Cutting Instrument: **↓-14.7%**

Fire/Explosives: **↑33.3%**

Blunt Object: **↓-24.9%**

Other: **↓-6.6%**

Motor Vehicle: **↑16.1%**

Unknown: **↑7.2%**

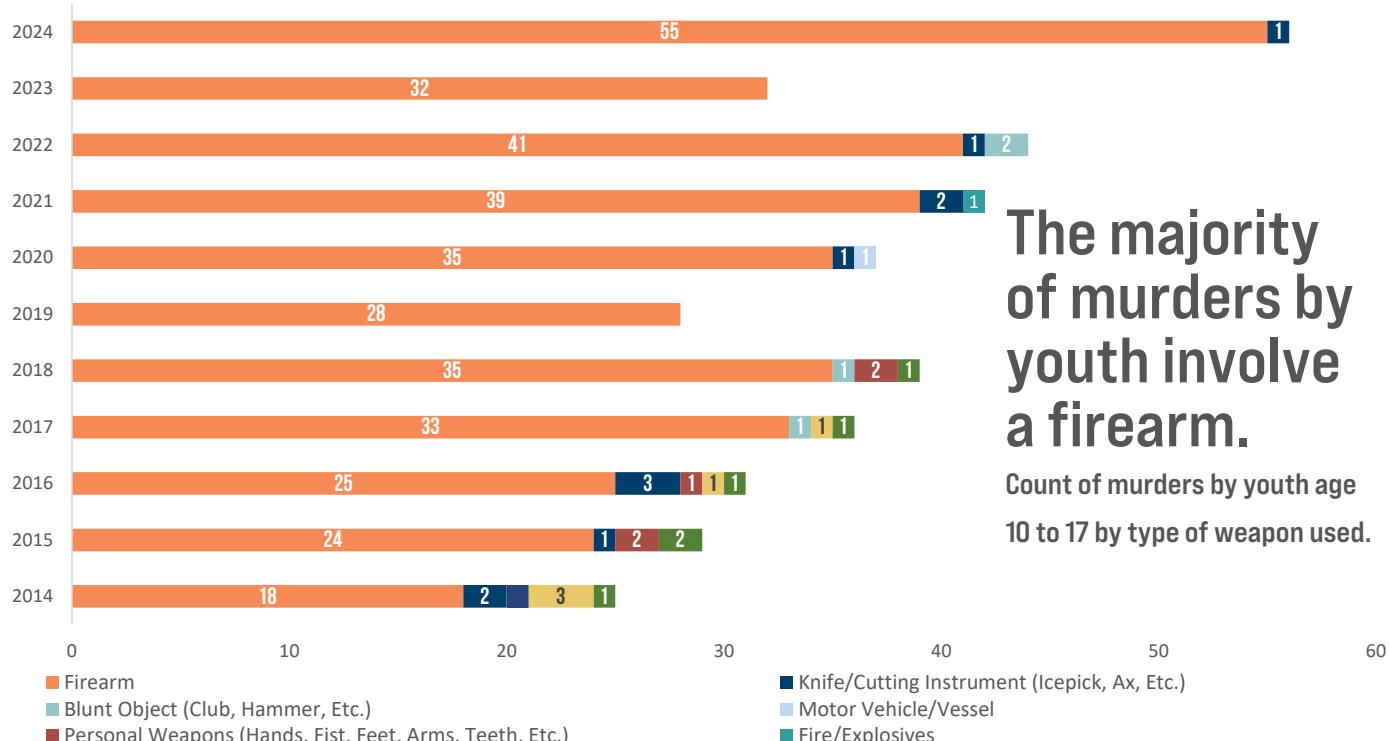
Personal Weapons: **↓-18.2%**

None: **↑66.9%**

Asphyxiation: **↑186.1%**

In 2024 crimes where a youth used a firearm:

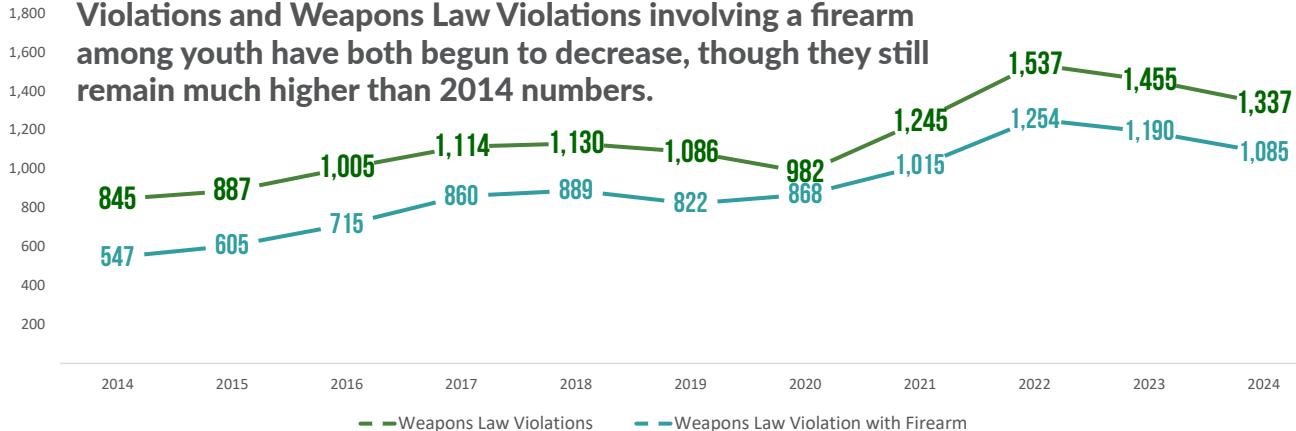
- 63.4 percent involved a Handgun
- 28.1 percent involved Firearm (Type Not Stated)
- 6.8 percent involved a Rifle
- 2.7 percent involved an Other Firearm
- 1.9 percent involved an Handgun-Automatic
- 0.7 percent involved a Shotgun
- 0.1 percent involved a Firearm-Automatic (Type Not Stated) or Other Firearm-Automatic



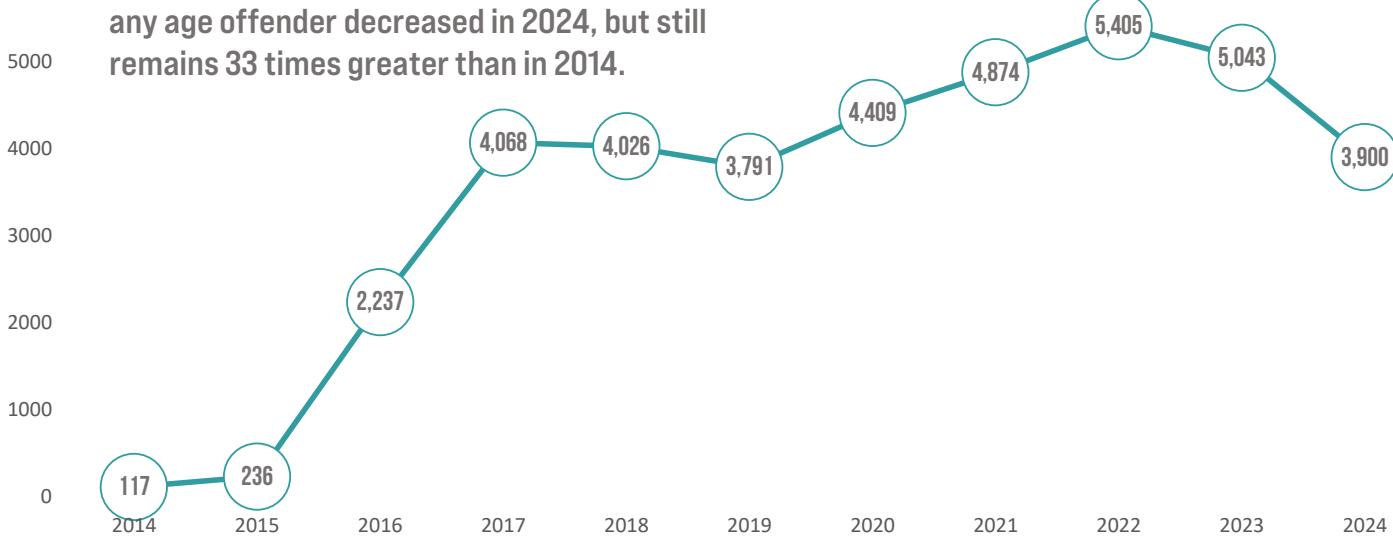
Youth and Firearm Crimes

Youth Justice

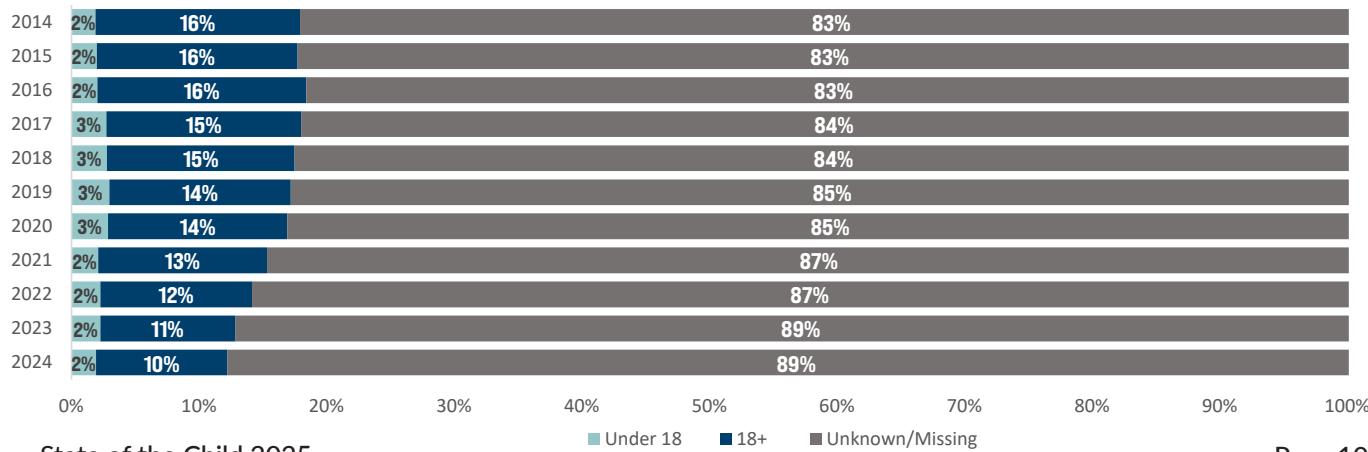
After a steady increase, the number of Weapons Law Violations and Weapons Law Violations involving a firearm among youth have both begun to decrease, though they still remain much higher than 2014 numbers.



The number of firearms stolen from vehicles by any age offender decreased in 2024, but still remains 33 times greater than in 2014.



In the majority of Thefts from Motor Vehicles the age of the offender is unknown.



Youth and Firearm Crimes

Youth Justice

Youth are much more likely to be the victim of a firearm crime than to perpetrate one.

In 2024, there were 1,478 victims of crimes involving a firearm where the offender was under 18. During that same time period, there were 4,218 under-age -18 victims of crimes involving a firearm.

Overall victims of crimes involving a firearm have increased by **52 percent** between 2014-2024

Victims of firearm crimes with a youth offender (ages 10 to 17) have increased **35 percent**.

Youth victims (ages 10 to 17) of firearm crimes have increased by **87 percent**.

IN 2014,
4.5% of crimes
committed by
youth 10 to 17
involved a firearm,
representing 1,504
crimes

3.6% involved a
knife or blunt object
representing 1,192
crimes

IN 2024,
8.2% of crimes
committed by
youth 10 to 17
involved a firearm
representing 2,443
crimes

3.4% involved a
knife or blunt object
representing 1,009
crimes

Though still only
11.5 percent of all
crimes committed by
youth under 18, this
represents a
80 percent increase
in firearm use over
the decade and a
5.6 percent
decrease in the use
of knives or blunt
objects.

Page intentionally left blank

References

Demographics

1. U.S. Census Bureau. (2025). "Children Characteristics." American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S0901.
2. U.S. Census Bureau. (2015). "Children Characteristics." American Community Survey, ACS 2014 1-Year Estimates Subject Tables, Table S0901.
3. U.S. Census Bureau. (2025). ACS Demographic and Housing Estimates. American Community Survey, ACS 2024 1-Year Estimates Data Profiles, Table DP05.
4. U.S. Census Bureau. (2015). "Age And Sex." American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S0101.
5. U.S. Census Bureau. (2025). "Age And Sex." American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S0101.
6. U.S. Census Bureau. (2025). "Age by Language Spoken at Home for the Population 5 Years and Over." American Community Survey, ACS 2024 1-Year Estimates Detailed Tables, Table C16007.
7. U.S. Census Bureau; American Community Survey, 2024 1-Year Estimates. Custom table generated through Microdata Access Tool (MDAT). Retrieved December 4, 2025 from [https://data.census.gov/app/mdat/ACSPUMS1Y2024/table?cv=NOP&rv=ucgid,CIT&vv=AGEP\(00,1:1:17\)&wt=PWGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdat/ACSPUMS1Y2024/table?cv=NOP&rv=ucgid,CIT&vv=AGEP(00,1:1:17)&wt=PWGTP&g=AwFm-BVBIEHYg)
8. U.S. Census Bureau; American Community Survey, 2024 1-Year Estimates. Custom table generated through Microdata Access Tool (MDAT). Retrieved December 4, 2025 from [https://data.census.gov/mdat/?#/search?ds=ACSPUMS1Y2024&vv=AGEP\(1:18\)&cv=WAOB&rv=NATIVITY\(2\),ucgid&wt=PWGTP&g=0400000US47](https://data.census.gov/mdat/?#/search?ds=ACSPUMS1Y2024&vv=AGEP(1:18)&cv=WAOB&rv=NATIVITY(2),ucgid&wt=PWGTP&g=0400000US47)
9. U.S. Census Bureau. (2025). Characteristics of Teenagers 15 to 19 Years Old. American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S0902.
10. U.S. Census Bureau. (n.d.). Relationship to Householder for Children Under 18 Years in Households. American Community Survey, ACS 1-Year Estimates Detailed Tables, Table B09018. Retrieved December 17, 2025, from <https://data.census.gov/table/ACSDT1Y2024.B09018?q=relationship+to+householder&g=040XX00US47>.

Economics

1. U.S. Census Bureau. (2025). Income and Poverty in the United States: 2024 (Current Population Reports, P60-287). U.S. Census Bureau, Washington, DC. <https://www.census.gov/library/publications/2025/demo/p60-287.html>
2. U.S. Census Bureau. (2021). How the Census Bureau measures poverty. U.S. Department of Commerce. https://www.census.gov/library/visualizations/2021/demo/poverty_measure-how.html
3. Bridges, B., & Gesumaria, R. V. (2015). The Supplemental Poverty Measure (SPM) and children: How and why the SPM and official poverty estimates differ. Social Security Bulletin, 75(3), 55–70. U.S. Social Security Administration. <https://www.ssa.gov/policy/docs/ssb/v75n3/v75n3p55.html>
4. U.S. Census Bureau, U.S. Department of Commerce. (2025). "Poverty status in the past 12 months" American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S1701.

5. U.S. Census Bureau, U.S. Department of Commerce. (2025). "Ratio of Income to Poverty Level of Families in the Past 12 Months" American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table B17026.
6. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. (2024). Detailed guidelines for calculating the 2024 poverty guidelines.
7. Emily A. Shrider, U.S. Census Bureau. (2025). Current Population Reports, Poverty in the United States: 2024. Table B-2. Number and Percentage of People in Poverty Using the Supplemental Poverty Measure by Age, Race, and Hispanic Origin: 2009 to 2023. Notes: 2020* Implementation of 2020 Census-based population controls. 2019* Estimates reflect the implementation of revised Supplemental Poverty Measure (SPM) methodology. 2017* Estimates reflect the implementation of an updated processing system and should be used to make comparisons to 2018 and subsequent years.
8. Emily A. Shrider, U.S. Census Bureau. (2025). Current Population Reports, Poverty in the United States: 2024. Number and Percentage of People in Poverty by Age, State, and Different Poverty Measures Using 3-Year Average: 2022, 2023, and 2024.
9. Emily A. Shrider, U.S. Census Bureau. (2025). Current Population Reports, Poverty in the United States: 2024. Table B-7. Effect of Individual Elements on the Number of Individuals in Poverty Using the Supplemental Poverty Measure: 2023 and 2024.
10. U.S. Bureau of Labor Statistics. (2025, September 16). County employment and wages in Tennessee — First quarter 2025. U.S. Department of Labor.
11. U.S. Bureau of Labor Statistics. (2023, September 19). County employment and wages in Tennessee — First quarter 2023. U.S. Department of Labor.
12. Internal Revenue Service. SOI Tax Stats – County Data 2022
13. RAPID Survey Project. (2025, October 16). Essentials are getting increasingly difficult to access for families with young children. <https://rapidsurveyproject.com/article/essentials-are-getting-increasingly-difficult-to-access-for-families-with-young-children/>
14. U.S. Census Bureau, U.S. Department of Commerce. (2025). Financial Characteristics. American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S2503.
15. U.S. Census Bureau. (2025). ACS 1-Year Estimates Public Use Microdata Sample (2024) Retrieved December 5, 2025 from
[https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=BLD,R18\(1\)&rv=ucgid&wt=WGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=BLD,R18(1)&rv=ucgid&wt=WGTP&g=AwFm-BVBIEHYg)
16. U.S. Census Bureau. (2025). ACS 1-Year Estimates Public Use Microdata Sample (2024) Retrieved December 5, 2025 from
[https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=R18\(1\),YRBLT&rv=ucgid&wt=WGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=R18(1),YRBLT&rv=ucgid&wt=WGTP&g=AwFm-BVBIEHYg)
17. U.S. Census Bureau. (2025). ACS 1-Year Estimates Public Use Microdata Sample (2024) Retrieved December 5, 2025 from
[https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=NR&rv=ucgid&vv=AGEP\(0,1:1:17\)&wt=WGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=NR&rv=ucgid&vv=AGEP(0,1:1:17)&wt=WGTP&g=AwFm-BVBIEHYg)
18. U.S. Census Bureau. (2025). ACS 1-Year Estimates Public Use Microdata Sample (2024) Retrieved December 5, 2025
[https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=HUGCL&rv=ucgid&vv=AGEP\(0,1:1:17\)&wt=WGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=HUGCL&rv=ucgid&vv=AGEP(0,1:1:17)&wt=WGTP&g=AwFm-BVBIEHYg)
State of the Child 2025

19. U.S. Census Bureau. (2025). ACS 1-Year Estimates Public Use Microdata Sample (2024) Retrieved December 5, 2025 from [https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=MV&rv=ucgid&vv=AGEP\(0,1:1:17\)&wt=WGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=MV&rv=ucgid&vv=AGEP(0,1:1:17)&wt=WGTP&g=AwFm-BVBIEHYg)
20. National Low-Income Housing Coalition. Housing Needs by State: Tennessee. Retrieved December 5, 2025 from <https://nlihc.org/housing-needs-by-state/tennessee>
21. U.S. Department of Housing and Urban Development. (2024). 2024 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations.

Child Care

1. Rate based on 2024 county population 0-12. Tennessee Department of Human Services. (2025). Provider Report 10-15-2025.
2. University of Tennessee Boyd Center for Business & Economic Research. (2025). Determining Child Care Market Rates in the State of Tennessee: FY2025.
3. University of Tennessee Boyd Center for Business & Economic Research. (2019). Determining Child Care Market Rates in the State of Tennessee: FY2019.
4. College Tuition Compare. (2025). 2025 Tuition Comparison Between Tennessee Public 4-Year Colleges. Retrieved November 5, 2025 from https://www.collegetuitioncompare.com/compare/tables/?state=TN°ree=Undergraduate&type=Public&evel=4-year-or-high#google_vignette
5. Based on an average of the average fee for providers in the county to include Child Care Centers, Group Homes and Family Homes when available. University of Tennessee Boyd Center for Business & Economic Research. (2025). Determining Child Care Market Rates in the State of Tennessee: FY2025
6. Tennessee Department of Human Services & University of Tennessee, Social Work Office of Research and Public Service. (2025, March). 2024 cost of quality care study. <https://www.tn.gov/content/dam/tn/human-services/documents/2024%20Cost%20of%20Quality%20Care%20Study.pdf>
7. U.S. Census Bureau, U.S. Department of Commerce. (2025). Age of Own Children Under 18 Years in Families and Subfamilies by Living Arrangements by Employment Status of Parents. American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table B23008

Education

1. Tennessee Department of Education. 2025 Statewide Assessment Dashboard. <https://tdepublicschools.ondemand.sas.com/state/assessment>
2. <https://www.nationsreportcard.gov/ndecore/landing>
3. Tennessee Department of Education. (2025). Corporal Punishment Report 2023-24.
4. Tennessee Department of Education. (2022). Coordinated School Health. Annual Report 2021-22.
5. Tennessee Department of Education. (2023). Coordinated School Health. Annual Report 2022-23.
6. Tennessee Department of Education. (2024). Coordinated School Health. Annual Report 2023-24.
7. Tennessee Department of Education. (2025). Coordinated School Health. Annual Report 2024-25.
8. Tennessee Department of Education. (2025). Annual Statistical Report 2023-24. Table 11.

9. Tennessee Department of Education. (2017). Annual Statistical Report 2016-17 Table 11.
10. Tennessee Department of Education. (2018). Annual Statistical Report 2017-18 Table 11.
11. Tennessee Department of Education. (2019). Annual Statistical Report 2018-19 Table 11.
12. Tennessee Department of Education. (2021). Annual Statistical Report 2020-21 Table 11.
13. Tennessee Department of Education. (2022). Annual Statistical Report 2021-22 Table 11.
14. Tennessee Department of Education. (2023). Annual Statistical Report 2022-23 Table 11.
15. Tennessee Advisory Commission on Intergovernmental Relations. Building Tennessee's Tomorrow. Infrastructure Needs Inventory July 2023 through June 2028.
16. Tennessee Advisory Commission on Intergovernmental Relations. Building Tennessee's Tomorrow. Infrastructure Needs Inventory July 2023 through June 2028. Table E-5.
17. Tennessee Advisory Commission on Intergovernmental Relations. Building Tennessee's Tomorrow. Infrastructure Needs Inventory July 2023 through June 2028. Table E-9.
18. Tennessee Advisory Commission on Intergovernmental Relations. Building Tennessee's Tomorrow. Infrastructure Needs Inventory July 2023 through June 2028. Table E-6.

Health

1. Tennessee Department of Education. (2025). Annual School Health Services Annual Report 2024-25 School Year.
2. Tennessee Department of Education. (2025). Coordinated School Health. Annual Report 2024-25.
3. Tennessee Department of Education. (2024). Tennessee Public Schools: A Summary of Student Body Mass Index Data 2023-24
4. Child and Adolescent Health Measurement Initiative. (2025). 2023-2024 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12149&r=44>
5. Child and Adolescent Health Measurement Initiative. (2025). 2023-2024 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12149&r=44&r2=1&g=1260>
6. Tennessee Department of Education. (2025). Physical Activity and Physical Education. Annual Report 2024-25.
7. Data received by request directly from food banks.
8. Tennessee Department of Finance and Administration, Division of TennCare. (2025). 2025 Enrollment Data.
9. Tennessee Department of Health. (2025). 2024 population data by single age.
10. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D149/D461F004>

References

Demographics

1. U.S. Census Bureau. (2025). "Children Characteristics." American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S0901.
2. U.S. Census Bureau. (2015). "Children Characteristics." American Community Survey, ACS 2014 1-Year Estimates Subject Tables, Table S0901.
3. U.S. Census Bureau. (2025). ACS Demographic and Housing Estimates. American Community Survey, ACS 2024 1-Year Estimates Data Profiles, Table DP05.
4. U.S. Census Bureau. (2015). "Age And Sex." American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S0101.
5. U.S. Census Bureau. (2025). "Age And Sex." American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S0101.
6. U.S. Census Bureau. (2025). "Age by Language Spoken at Home for the Population 5 Years and Over." American Community Survey, ACS 2024 1-Year Estimates Detailed Tables, Table C16007.
7. U.S. Census Bureau; American Community Survey, 2024 1-Year Estimates. Custom table generated through Microdata Access Tool (MDAT). Retrieved December 4, 2025 from [https://data.census.gov/app/mdat/ACSPUMS1Y2024/table?cv=NOP&rv=ucgid,CIT&vv=AGEP\(00,1:1:17\)&wt=PWGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdat/ACSPUMS1Y2024/table?cv=NOP&rv=ucgid,CIT&vv=AGEP(00,1:1:17)&wt=PWGTP&g=AwFm-BVBIEHYg)
8. U.S. Census Bureau; American Community Survey, 2024 1-Year Estimates. Custom table generated through Microdata Access Tool (MDAT). Retrieved December 4, 2025 from [https://data.census.gov/mdat/?#/search?ds=ACSPUMS1Y2024&vv=AGEP\(1:18\)&cv=WAOB&rv=NATIVITY\(2\),ucgid&wt=PWGTP&g=0400000US47](https://data.census.gov/mdat/?#/search?ds=ACSPUMS1Y2024&vv=AGEP(1:18)&cv=WAOB&rv=NATIVITY(2),ucgid&wt=PWGTP&g=0400000US47)
9. U.S. Census Bureau. (2025). Characteristics of Teenagers 15 to 19 Years Old. American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S0902.
10. U.S. Census Bureau. (n.d.). Relationship to Householder for Children Under 18 Years in Households. American Community Survey, ACS 1-Year Estimates Detailed Tables, Table B09018. Retrieved December 17, 2025, from <https://data.census.gov/table/ACSDT1Y2024.B09018?q=relationship+to+householder&g=040XX00US47>.

Economics

1. U.S. Census Bureau. (2025). Income and Poverty in the United States: 2024 (Current Population Reports, P60-287). U.S. Census Bureau, Washington, DC. <https://www.census.gov/library/publications/2025/demo/p60-287.html>
2. U.S. Census Bureau. (2021). How the Census Bureau measures poverty. U.S. Department of Commerce. https://www.census.gov/library/visualizations/2021/demo/poverty_measure-how.html
3. Bridges, B., & Gesumaria, R. V. (2015). The Supplemental Poverty Measure (SPM) and children: How and why the SPM and official poverty estimates differ. Social Security Bulletin, 75(3), 55–70. U.S. Social Security Administration. <https://www.ssa.gov/policy/docs/ssb/v75n3/v75n3p55.html>
4. U.S. Census Bureau, U.S. Department of Commerce. (2025). "Poverty status in the past 12 months" American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S1701.

5. U.S. Census Bureau, U.S. Department of Commerce. (2025). "Ratio of Income to Poverty Level of Families in the Past 12 Months" American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table B17026.
6. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. (2024). Detailed guidelines for calculating the 2024 poverty guidelines.
7. Emily A. Shrider, U.S. Census Bureau. (2025). Current Population Reports, Poverty in the United States: 2024. Table B-2. Number and Percentage of People in Poverty Using the Supplemental Poverty Measure by Age, Race, and Hispanic Origin: 2009 to 2023. Notes: 2020* Implementation of 2020 Census-based population controls. 2019* Estimates reflect the implementation of revised Supplemental Poverty Measure (SPM) methodology. 2017* Estimates reflect the implementation of an updated processing system and should be used to make comparisons to 2018 and subsequent years.
8. Emily A. Shrider, U.S. Census Bureau. (2025). Current Population Reports, Poverty in the United States: 2024. Number and Percentage of People in Poverty by Age, State, and Different Poverty Measures Using 3-Year Average: 2022, 2023, and 2024.
9. Emily A. Shrider, U.S. Census Bureau. (2025). Current Population Reports, Poverty in the United States: 2024. Table B-7. Effect of Individual Elements on the Number of Individuals in Poverty Using the Supplemental Poverty Measure: 2023 and 2024.
10. U.S. Bureau of Labor Statistics. (2025, September 16). County employment and wages in Tennessee — First quarter 2025. U.S. Department of Labor.
11. U.S. Bureau of Labor Statistics. (2023, September 19). County employment and wages in Tennessee — First quarter 2023. U.S. Department of Labor.
12. Internal Revenue Service. SOI Tax Stats – County Data 2022
13. RAPID Survey Project. (2025, October 16). Essentials are getting increasingly difficult to access for families with young children. <https://rapidsurveyproject.com/article/essentials-are-getting-increasingly-difficult-to-access-for-families-with-young-children/>
14. U.S. Census Bureau, U.S. Department of Commerce. (2025). Financial Characteristics. American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table S2503.
15. U.S. Census Bureau. (2025). ACS 1-Year Estimates Public Use Microdata Sample (2024) Retrieved December 5, 2025 from
[https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=BLD,R18\(1\)&rv=ucgid&wt=WGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=BLD,R18(1)&rv=ucgid&wt=WGTP&g=AwFm-BVBIEHYg)
16. U.S. Census Bureau. (2025). ACS 1-Year Estimates Public Use Microdata Sample (2024) Retrieved December 5, 2025 from
[https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=R18\(1\),YRBLT&rv=ucgid&wt=WGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=R18(1),YRBLT&rv=ucgid&wt=WGTP&g=AwFm-BVBIEHYg)
17. U.S. Census Bureau. (2025). ACS 1-Year Estimates Public Use Microdata Sample (2024) Retrieved December 5, 2025 from
[https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=NR&rv=ucgid&vv=AGEP\(0,1:1:17\)&wt=WGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=NR&rv=ucgid&vv=AGEP(0,1:1:17)&wt=WGTP&g=AwFm-BVBIEHYg)
18. U.S. Census Bureau. (2025). ACS 1-Year Estimates Public Use Microdata Sample (2024) Retrieved December 5, 2025
[https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=HUGCL&rv=ucgid&vv=AGEP\(0,1:1:17\)&wt=WGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=HUGCL&rv=ucgid&vv=AGEP(0,1:1:17)&wt=WGTP&g=AwFm-BVBIEHYg)

19. U.S. Census Bureau. (2025). ACS 1-Year Estimates Public Use Microdata Sample (2024) Retrieved December 5, 2025 from
[https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=MV&rv=ucgid&vv=AGEP\(0,1:1:17\)&wt=WGTP&g=AwFm-BVBIEHYg](https://data.census.gov/app/mdata/ACSPUMS1Y2024/table?cv=MV&rv=ucgid&vv=AGEP(0,1:1:17)&wt=WGTP&g=AwFm-BVBIEHYg)
20. National Low-Income Housing Coalition. Housing Needs by State: Tennessee. Retrieved December 5, 2025 from <https://nlihc.org/housing-needs-by-state/tennessee>
21. U.S. Department of Housing and Urban Development. (2024). 2024 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations.

Child Care

1. Rate based on 2024 county population 0-12. Tennessee Department of Human Services. (2025). Provider Report 10-15-2025.
2. University of Tennessee Boyd Center for Business & Economic Research. (2025). Determining Child Care Market Rates in the State of Tennessee: FY2025.
3. University of Tennessee Boyd Center for Business & Economic Research. (2019). Determining Child Care Market Rates in the State of Tennessee: FY2019.
4. College Tuition Compare. (2025). 2025 Tuition Comparison Between Tennessee Public 4-Year Colleges. Retrieved November 5, 2025 from
https://www.collegetuitioncompare.com/compare/tables/?state=TN°ree=Undergraduate&type=Public&level=4-year-or-high#google_vignette
5. Based on an average of the average fee for providers in the county to include Child Care Centers, Group Homes and Family Homes when available. University of Tennessee Boyd Center for Business & Economic Research. (2025). Determining Child Care Market Rates in the State of Tennessee: FY2025
6. Tennessee Department of Human Services & University of Tennessee, Social Work Office of Research and Public Service. (2025, March). 2024 cost of quality care study. <https://www.tn.gov/content/dam/tn/human-services/documents/2024%20Cost%20of%20Quality%20Care%20Study.pdf>
7. U.S. Census Bureau, U.S. Department of Commerce. (2025). Age of Own Children Under 18 Years in Families and Subfamilies by Living Arrangements by Employment Status of Parents. American Community Survey, ACS 2024 1-Year Estimates Subject Tables, Table B23008

Education

1. Tennessee Department of Education. 2025 Statewide Assessment Dashboard.
<https://tdepublicschools.ondemand.sas.com/state/assessment>
2. <https://www.nationsreportcard.gov/ndecore/landing>
3. Tennessee Department of Education. (2025). Corporal Punishment Report 2023-24.
4. Tennessee Department of Education. (2022). Coordinated School Health. Annual Report 2021-22.
5. Tennessee Department of Education. (2023). Coordinated School Health. Annual Report 2022-23.
6. Tennessee Department of Education. (2024). Coordinated School Health. Annual Report 2023-24.
7. Tennessee Department of Education. (2025). Coordinated School Health. Annual Report 2024-25.
8. Tennessee Department of Education. (2025). Annual Statistical Report 2023-24. Table 11.

9. Tennessee Department of Education. (2017). Annual Statistical Report 2016-17 Table 11.
10. Tennessee Department of Education. (2018). Annual Statistical Report 2017-18 Table 11.
11. Tennessee Department of Education. (2019). Annual Statistical Report 2018-19 Table 11.
12. Tennessee Department of Education. (2021). Annual Statistical Report 2020-21 Table 11.
13. Tennessee Department of Education. (2022). Annual Statistical Report 2021-22 Table 11.
14. Tennessee Department of Education. (2023). Annual Statistical Report 2022-23 Table 11.
15. Tennessee Advisory Commission on Intergovernmental Relations. Building Tennessee's Tomorrow. Infrastructure Needs Inventory July 2023 through June 2028.
16. Tennessee Advisory Commission on Intergovernmental Relations. Building Tennessee's Tomorrow. Infrastructure Needs Inventory July 2023 through June 2028. Table E-5.
17. Tennessee Advisory Commission on Intergovernmental Relations. Building Tennessee's Tomorrow. Infrastructure Needs Inventory July 2023 through June 2028. Table E-9.
18. Tennessee Advisory Commission on Intergovernmental Relations. Building Tennessee's Tomorrow. Infrastructure Needs Inventory July 2023 through June 2028. Table E-6.

Health

1. Tennessee Department of Education. (2025). Annual School Health Services Annual Report 2024-25 School Year.
2. Tennessee Department of Education. (2025). Coordinated School Health. Annual Report 2024-25.
3. Tennessee Department of Education. (2024). Tennessee Public Schools: A Summary of Student Body Mass Index Data 2023-24
4. Child and Adolescent Health Measurement Initiative. (2025). 2023–2024 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12149&r=44>
5. Child and Adolescent Health Measurement Initiative. (2025). 2023–2024 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12149&r=44&r2=1&g=1260>
6. Tennessee Department of Education. (2025). Physical Activity and Physical Education. Annual Report 2024-25.
7. Data received by request directly from food banks.
8. Tennessee Department of Finance and Administration, Division of TennCare. (2025). 2025 Enrollment Data.
9. Tennessee Department of Health. (2025). 2024 population data by single age.
10. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D149/D461F004>

compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: prenatal care link

23. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D149/D454F59>
24. Tennessee Department of Health. (2025). Results of the 2024 Immunization Status Survey of 24-Month-Old Children in Tennessee.
25. Centers for Disease Control and Prevention. (2025). Flouridation Status Report Tennessee 2024.
26. Child and Adolescent Health Measurement Initiative. (2025). 2023-2024 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12148&r=44>
27. Child and Adolescent Health Measurement Initiative. (2025). 2023-2024 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12175&r=44>
28. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F607>
29. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F60>
30. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F612>
31. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F613>
32. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F627>
33. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F624>

34. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F625>
35. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F701>
36. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F703>
37. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D448F460>
38. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F718>
39. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D76/D454F726>
40. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D76/D415F628>
41. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D448F443>
42. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D76/D415F672>
43. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D448F442>
44. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F729>

45. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D461F018>
46. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F743>
47. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F742>
48. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F745>
49. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F751>
50. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F752>
51. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F754>
52. Beautrais, A. L., Larkin, G. L., Fergusson, D. M., Horwood, L. J., & Mulder, R. T. (2012). Mortality and non-fatal suicidal behaviour in the 20 years after a medically serious suicide attempt. *Injury Prevention*, 18(Suppl 1), A33-A33.
53. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F753>
54. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F991>
55. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/datarequest/D158;jsessionid=7A9CDDEE4DFD1D7A07DE2B31F096>

56. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F755>
57. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F991>
58. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved from: <https://wonder.cdc.gov/controller/saved/D158/D454F992>

Mental Health

1. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 39.
2. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 40.
3. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 41.
4. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 30.
5. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 37.
6. Reinert, M, Nguyen, T & Fritze, D. (October 2025). "The State of Mental Health in America 2025." Page 29. Mental Health America, Alexandria VA.
7. Substance Abuse and Mental Health Services Administration. (2025). Key substance use and mental health indicators in the United States: Results from the 2024 National Survey on Drug Use and Health (HHS Publication No. PEP25-07-007, NSDUH Series H-60). Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration
8. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 31.
9. Substance Abuse and Mental Health Services Administration. (2023). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 31.
10. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 32.
11. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 38.
12. Substance Abuse and Mental Health Services Administration. (2023). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 38.
13. Child and Adolescent Health Measurement Initiative. (2025). 2023-2024 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. State of the Child 2025

Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12152&r=44>

14. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 7.
15. Substance Abuse and Mental Health Services Administration. (2024). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 7.
16. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 11.
17. Substance Abuse and Mental Health Services Administration. (2024). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 11.
18. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 12.
19. Substance Abuse and Mental Health Services Administration. (2024). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 12.
20. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 14.
21. Substance Abuse and Mental Health Services Administration. (2024). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 14.
22. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 1.
23. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 1.
24. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 19.
25. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 20.
26. Substance Abuse and Mental Health Services Administration. (2023). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 19.
27. Substance Abuse and Mental Health Services Administration. (2023). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 20.
28. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 22.
29. Substance Abuse and Mental Health Services Administration. (2023). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 22.
30. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 21.
31. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 23.

32. Substance Abuse and Mental Health Services Administration. (2023). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 13.
33. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 13.
34. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 28.
35. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 29.
36. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 2.
37. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 3.
38. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 5.
39. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 15.
40. Substance Abuse and Mental Health Services Administration. (2023). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 15.
41. Substance Abuse and Mental Health Services Administration. (2023). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 16.
42. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 16.
43. Substance Abuse and Mental Health Services Administration. (2023). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 25.
44. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 25.
45. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 18.
46. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 26.
47. Substance Abuse and Mental Health Services Administration. (2024). 2022-2023 National Survey on Drug Use and Health State Data Tables and Reports. Table 8, Table 10, Table 17, Table 22, Table 4.
48. Substance Abuse and Mental Health Services Administration. (2023). 2021-2022 National Survey on Drug Use and Health State Data Tables and Reports. Table 8, Table 10, Table 17, Table 22, Table 4.

Adversity & Resilience

1. Child and Adolescent Health Measurement Initiative. (2025). 2023-2024 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal

and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12184&r=44&r2=1>

2. Child and Adolescent Health Measurement Initiative. (2025). 2023–2024 National Survey of Children’s Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12184&r=44&g=1260>
3. Child and Adolescent Health Measurement Initiative. (2025). 2023–2024 National Survey of Children’s Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12172&r=44>
4. Child and Adolescent Health Measurement Initiative. (2025). 2023–2024 National Survey of Children’s Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12172&r=44>
5. Child and Adolescent Health Measurement Initiative. (2025). 2023–2024 National Survey of Children’s Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12181&r=44&r2=1>
6. Child and Adolescent Health Measurement Initiative. (2025). 2023–2024 National Survey of Children’s Health (NSCH) data query. Data Resource Center for Child and Adolescent Health, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from:
<https://www.childhealthdata.org/browse/survey/results?q=12182&r=44&r2=1>

Child Welfare

1. Tennessee Department of Children’s Services. FY2024 -25 Individual Allegations By County of Individual Victims (Duplicates Removed) with a Substantiated Case of Severe Abuse or Services Court Ordered and Services Needed for Non-Severe.
2. U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau. (2025). Child Maltreatment 2023. Table 3-3 Child Victims.
3. U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau. (2025). Child Maltreatment 2023. Table 3-4 First-time Victims
4. U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau. (2025). Child Maltreatment 2023. Table 3-5 Victims by Age
5. U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau. (2025). Child Maltreatment 2023. Table 3-8 Duplicate Victims by Maltreatment Type.
6. U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau. (2025). Child Maltreatment 2023. Table 5-5 Perpetrators by Relationship to Their Victims.
7. U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau. (2025). Child Maltreatment 2023. Table 6-6 Victims Who Received Family Preservation Services within the Previous 5 Years,
8. U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau. (2025). Child Maltreatment 2023. Table 6-6 Victims Who Were Reunited with their Families within the Previous 5 Years,
9. Tennessee Department of Children’s Services. Commissioner’s Dashboard.

10. U.S. Department of Health and Human Services, Administration of Children and Families. Child Welfare Outcomes Tennessee. <https://cwoutcomes.acf.hhs.gov/cwodatasite/pdf/tennessee.html>.
11. Tennessee Department of Children's Services. (2025). Annual Report FY2024.
12. Tennessee Commission on Children and Youth. (2025). Youth Transitions Advisory Council Annual Report 2025.
13. Tennessee Department of Children's Services. (2025). Annual Report Relative Caregiver Stipend Program: 2024.
14. Tennessee Department of Children's Services. Child Death & Near Death Public Notifications. Retrieved December 15, 2025.
15. Tennessee Bureau of Investigation. (2024). TIBRS, Victim Data. Accessed November 26, 2025.
16. Department of Children's Services, (2025, October 28). Presentation to House Finance, Ways and Means Committee.

Youth Justice

1. Tennessee Department of Children's Services. (2025). Annual Report Office of Juvenile Justice FY2024.
2. State of Tennessee. The Budget Fiscal Year 2025-206. Statistical Data Youth Development Centers Page B-198
3. Tennessee Department of Children's Services. (2025). Annual Report FY2024. 4. Tennessee Bureau of Investigation. (2024). Tennessee Incident Based Reporting System (TIBRS). Accessed at <https://crimeinsight.tbi.tn.gov/> Tables used can be downloaded at <http://tn.gov/content/dam/tn/tccy/documents/stateofthechild/2025%20SOC%20Crime%20Tables.xlsx>
4. Tennessee Department of Children's Services.. (2025). Commissioner's Dashboard. Accessed December 11, 2025.

