## Henry County

**Demographic summary**

<table>
<thead>
<tr>
<th>Category</th>
<th>2017 Population</th>
<th>Under 18</th>
<th>22.3%</th>
<th>Under 6</th>
<th>6.8%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child population (under 18)</td>
<td>19,865</td>
<td>4,425</td>
<td>64.3%</td>
<td>1,345</td>
<td>6.8%</td>
</tr>
</tbody>
</table>

**Child population (under 18) by race/ethnicity**

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>52</td>
<td>1.2%</td>
</tr>
<tr>
<td>Asian</td>
<td>127</td>
<td>2.9%</td>
</tr>
<tr>
<td>Native American</td>
<td>14</td>
<td>0.3%</td>
</tr>
<tr>
<td>White, non-Hispanic</td>
<td>3,677</td>
<td>83.1%</td>
</tr>
<tr>
<td>Other</td>
<td>62</td>
<td>1.4%</td>
</tr>
<tr>
<td>Multiple</td>
<td>262</td>
<td>5.9%</td>
</tr>
<tr>
<td>Hispanic (any race)</td>
<td>330</td>
<td>7.5%</td>
</tr>
</tbody>
</table>

### FAMILY & COMMUNITY ECONOMIC WELL-BEING

<table>
<thead>
<tr>
<th>Category</th>
<th>2017 Number</th>
<th>2017 Rate/Percentage</th>
<th>Chg from 2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children living under the poverty level</td>
<td>628</td>
<td>14.8%</td>
<td>+46.6%</td>
</tr>
<tr>
<td>Unemployed individuals age 16 and over</td>
<td>289</td>
<td>3.0%</td>
<td>+12.3%</td>
</tr>
</tbody>
</table>

### SCHOOL READINESS & SUCCESS

<table>
<thead>
<tr>
<th>Category</th>
<th>2017 Number</th>
<th>2017 Rate/Percentage</th>
<th>Chg from 2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>3- and 4-year-olds participating in preschool (^2013-17 average)</td>
<td>227</td>
<td>51.1%</td>
<td>+12.9%</td>
</tr>
<tr>
<td>Fourth graders proficient in reading (^2003)</td>
<td>173</td>
<td>77.6%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Eighth graders proficient in mathematics (^2003)</td>
<td>163</td>
<td>69.7%</td>
<td>-5.2%</td>
</tr>
<tr>
<td>High school graduation (students graduating with class in 4 years)</td>
<td>242</td>
<td>88.6%</td>
<td>-5.6%</td>
</tr>
</tbody>
</table>

### STABLE, SECURE FAMILIES

<table>
<thead>
<tr>
<th>Category</th>
<th>2017 Number</th>
<th>2017 Rate/Percentage</th>
<th>Chg from 2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cases of child abuse/neglect (per 1,000)</td>
<td>75</td>
<td>17.3%</td>
<td>+62.4%</td>
</tr>
<tr>
<td>Single-parent families (^2013-17 average)</td>
<td>968</td>
<td>38.7%</td>
<td>+59.8%</td>
</tr>
<tr>
<td>Teen births (number/pct of females 15-19 giving birth)</td>
<td>18</td>
<td>2.9%</td>
<td>-30.3%</td>
</tr>
<tr>
<td>Live births that are to unmarried teens</td>
<td>18</td>
<td>8.0%</td>
<td>-8.2%</td>
</tr>
</tbody>
</table>

### HEALTHY CHILDREN

<table>
<thead>
<tr>
<th>Category</th>
<th>2017 Number</th>
<th>2017 Rate/Percentage</th>
<th>Chg from 2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Live births where prenatal care began during first trimester (^2007)</td>
<td>174</td>
<td>79.1%</td>
<td>+11.5%</td>
</tr>
<tr>
<td>Infant Mortality (per 1,000)</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Child deaths (per 100,000)</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Low birthweight (live births less than 5.5 pounds)</td>
<td>16</td>
<td>7.1%</td>
<td>+34.1</td>
</tr>
<tr>
<td>Children 0-18 uninsured during the year (^2013-17 average)</td>
<td>70</td>
<td>1.5%</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### USE OF PUBLIC SUPPORTS

<table>
<thead>
<tr>
<th>Category</th>
<th>2017 Number</th>
<th>2017 Rate/Percentage</th>
<th>Chg from 2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children 0-4 receiving WIC (^2003)</td>
<td>274</td>
<td>24.3%</td>
<td>+1.6%</td>
</tr>
<tr>
<td>Students eligible for free or reduced-price lunches</td>
<td>1,484</td>
<td>44.1%</td>
<td>+80.5%</td>
</tr>
<tr>
<td>Individual filers who receive the EITC (^2016)</td>
<td>1,460</td>
<td>16.5%</td>
<td>+48.8%</td>
</tr>
<tr>
<td>Individuals receiving Food Assistance</td>
<td>2,453</td>
<td>12.3%</td>
<td>+217.5%</td>
</tr>
<tr>
<td>Individuals participating in Family Investment Program</td>
<td>150</td>
<td>0.8%</td>
<td>-29.9%</td>
</tr>
</tbody>
</table>

* Incidences of five or less have been suppressed to protect confidentiality

To download data or view data snapshots for other Iowa counties, visit www.ccfpciowa.org and click on “Kids Count Data.”
About the Kids Count indicators

FAMILY/COMM ECON WELL-BEING

Child poverty
Children 0-17 who lived below poverty during the year
— U.S. Census Bureau
Children growing up in poverty (defined here as $23,850 for a family of four) are much more likely than peers to experience stress and deprivation that hinders development and readiness for school and life.

Unemployment
Individuals 16 and over in the labor force but unemployed
— Iowa Workforce Development
High levels of unemployment in a community make it difficult for families to move up the economic ladder. It also contributes to family stress when a parent struggles to find work.

SCHOOL READINESS & SUCCESS

Preschool participation
Children ages 3-4 enrolled in preschool
— U.S. Census Bureau
Children who participate in a high-quality preschool program are more likely to be socially and cognitively ready for kindergarten. The benefits are strongest for low-income children and children facing other risk factors.

4th grade reading
Students proficient on the Iowa Assessments and Iowa Alternate Assessment
— Iowa Department of Education
Reading proficiently by mid-elementary school is an important predictor of future academic success, including high school graduation, and of economic stability in adulthood.

STABLE, SECURE FAMILIES

Teen unmarried births
Live births that are to unmarried teens
— Iowa Department of Public Health
Unmarried teen mothers are less likely to ever marry and often face the primary responsibility of parenthood, often without the full physical, emotional and financial resources needed for child rearing.

HEALTHY CHILDREN

Infant mortality
Deaths of infants before age 1 per 1,000 children
— Iowa Department of Public Health
In addition to being a child outcome, data on infant mortality is used as a proxy for population health. The many factors that shape population health also shape infant mortality rates.

Child deaths
Deaths of children ages 1-14 per 100,000 children
— Iowa Department of Public Health
Child death rates can point to underlying problems and inequities within a community, such as the safety of neighborhoods, access to health care or exposure to environmental toxins.

Uninsured children
Children 0-18 who are uninsured during the year
— U.S. Census Bureau
Health coverage is the key that opens the door to the health-care system. Insured children are more likely to get timely medical care, including well-child visits, that contributes to overall health.

ACCESS TO PUBLIC SUPPORTS

Free or Reduced-Price Lunch
Students eligible for free or low-cost meals while at school
— Iowa Department of Education
This federally funded program provides meals to students. Available to families with incomes up to 185 percent of the federal poverty level, it is a commonly used proxy for poverty.

Food Assistance
Monthly average of individuals receiving Food Assistance
— Iowa Dept. of Human Services
The Food Assistance Program (known nationally as SNAP) provides financial assistance that low-income Iowans, including many children and working adults, can use to buy groceries.

Family Investment Program
Monthly average of individuals participating in FIP
— Iowa Dept. of Human Services
Iowa’s version of the federal TANF program provides cash assistance to eligible low-income families for up to 60 months. It serves a small and shrinking share of the population.

WIC Program
Children 0-4 participating in the Women, Infants, & Children program
— Iowa Department of Public Health
WIC offers supplemental foods, referrals and nutrition education for low-income pregnant and postpartum women and children through age 4.

EITC
Individual tax filers who receive the Earned Income Tax Credit
— Internal Revenue Service
The EITC is recognized across the political spectrum as a successful antipoverty program that ensures that people who work are able to provide for their families.

SCHOOL READINESS & SUCCESS

8th grade math
Students proficient on the Iowa Assessments and Iowa Alternate Assessment
— Iowa Department of Education
Proficiency in math by the end of middle school prepares students for higher-order math classes they will need to succeed in high school as well as the basic skills needed for adult life.

High school graduation
Public school students entering 9th grade who graduate with their class 4 years later
— Iowa Department of Education
A high school diploma is the baseline credential needed for higher education, most kinds of job training and many careers.

STABLE, SECURE FAMILIES

Single-parent families
Families with children that are headed by a single parent
— U.S. Census Bureau
Children in single-parent families typically do not have the same economic or human resources available in two-parent families. They are more likely to drop out of school and experience divorce in adulthood.

Child abuse & neglect
Confirmed cases of child abuse or neglect among children 0-17
— Iowa Dept. of Human Services
Experiencing abuse or neglect is one of the adverse childhood experiences that hinders healthy development — physical, mental and cognitive — and can affect well-being far into adulthood.

Heads of household program that ensures that people living in poverty during the year
— Iowa's version of the federal TANF program — increases the chances of a healthy pregnancy and birth.

Teen births
Females ages 15-19 giving birth
— Iowa Department of Public Health
Children born to teen mothers are more likely to be born prematurely or low birthweight and to die as infants. Teen mothers are less likely to finish high school or go on to college and more likely to rely on public supports.

Low birthweight
Live births weighing less than 5.5 pounds
— Iowa Department of Public Health
Infants born at low birth weight are at higher risk for physical and developmental delays that hinder growth, school readiness and adult health.

HEALTHY CHILDREN

Prenatal care
Live births where prenatal care began in first trimester
— Iowa Department of Public Health
Early and regular prenatal care — when a health care provider can treat and prevent health problems early — increases the chances of a healthy pregnancy and birth.

Insured children are more likely to get timely medical care, including well-child visits, that contributes to overall health.

WIC Program
Children 0-4 participating in the Women, Infants, & Children program
— Iowa Department of Public Health
WIC offers supplemental foods, referrals and nutrition education for low-income pregnant and postpartum women and children through age 4.