CHILD ABUSE AND NEGLECT

- In 2017, South Dakota had 15,937 total referrals for child abuse and neglect. Of those, 2,492 reports were referred for investigation.

- In 2017, there were 1,339 victims of abuse or neglect in South Dakota, a rate of 6.2 per 1,000 children, an increase of 36.1% from 2013. Of these children, 89.8% were neglected, 11.8% were physically abused, and 4.4% were sexually abused.

- The number of child victims has increased 36.1% in comparison to the number of victims in 2013.
In 2017, there were 5 child deaths resulting from abuse or neglect reported in South Dakota.\textsuperscript{11}

**CHILD CARE AND HEAD START**

- In 2017, South Dakota had a monthly average of 3,600 children served by subsidized child care. An average of 3,700 children received subsidized child care per month in 2016 and 4,100 were recipients in 2015.\textsuperscript{28}
- In 2017, to be eligible for subsidized child care in South Dakota, a family of three could make no more than $36,750 at application, which is equivalent to 57% of the state’s median income.\textsuperscript{29}
- As of early 2017, South Dakota had no children on its waiting list for child care assistance.\textsuperscript{30}
- In 2017, Head Start served 2,764 children in South Dakota, an increase of 5.1% from 2015.\textsuperscript{31}
- Through federal grants from the Home Visiting Program, in fiscal year 2017, home visitors in South Dakota made 1,698 home visits to 289 participants in 157 households.\textsuperscript{65}

- 1,603 children in South Dakota lived apart from their families in out-of-home care in 2017, compared with 1,416 children in 2016. Of the children living apart from their families in 2016, there were 640 aged 5 or younger, and 124 were 16 or older.\textsuperscript{12}
- The number of children living apart from their families in out-of-home care has increased 11.7% in comparison to the number of children in out-of-home care in 2016.\textsuperscript{13}

**CHILD POVERTY AND INCOME SUPPORT**

Children in Out-of-Home Care 2016

- The monthly average number of individuals receiving Temporary Assistance for Needy Families (TANF) in South Dakota increased from 6,047 in 2017 to 6,083 in 2018, a 0.6% change. There was 3,007 monthly average of families receiving TANF, an increase of 0.8% from 2017.
In South Dakota in 2017, 75,000 children lived below 200% of poverty.\textsuperscript{21}

$21,207,402 was spent in 2017 on TANF assistance in South Dakota, including 48.8% on basic assistance, 2.8% on child care, 0.3% on transportation, and 0.0% on non-assistance.\textsuperscript{22}

$8,666,378 was spent in 2018 on WIC (the Special Supplement Nutrition Program for Women, Infants, and Children) in South Dakota, serving 17,667 participants.\textsuperscript{23}

In 2017, South Dakota distributed $92,283,995 in child support funds, an increase of 3.7% from 2013.\textsuperscript{24}

44,000 children in South Dakota lived in households with a high housing burden in 2016, where more than 20% of monthly income is spent on housing costs.\textsuperscript{25}

In December of 2018, the unemployment rate in South Dakota was 2.9.\textsuperscript{26}

11.7% of households in South Dakota were food insecure on average in 2016, meaning that the family experienced difficulty providing enough food due to lack of resources at some point during the year.\textsuperscript{27}

**HEALTH AND SUBSTANCE ABUSE**

79,891 children in South Dakota were enrolled in Medicaid in 2017, an increase of 0.1% from 2016.\textsuperscript{32}

In 2017, South Dakota had 20,308 children enrolled in its State Children’s Health Insurance Program, an increase of 8.9% from 2016, when 18,507 children were enrolled.\textsuperscript{33}

In 2017, South Dakota had 13,362 uninsured children.\textsuperscript{34}

830 babies were born weighing less than 2,500 grams in South Dakota in 2016.\textsuperscript{35}

59 infants under age 1 died in South Dakota in 2016.\textsuperscript{36}
In 2017, the birth rate for teens ages 15 to 17 in South Dakota was 22.6 births per 1,000 girls. The rate was 42 for teens ages 18 to 19. This reflects a total rate of 25 births for girls ages 15 to 19.\textsuperscript{37}

Cumulative through 2017, there were 415 adults and adolescents and 7 children younger than 13 reported as having HIV/AIDS in South Dakota.\textsuperscript{38}

In 2017, an estimated 2,000 children ages 12 to 17 were alcohol dependent in the past year and 51,000 adults age 18 and older were dependent on alcohol or used heroin in the past year in South Dakota.\textsuperscript{39}

In 2017, approximately 2,000 children ages 12 to 17 needed but had not received treatment for alcohol use in the past year.\textsuperscript{40}

In 2017, approximately 2,000 children ages 12 to 17 needed but had not received treatment for illicit drug use in the past year.\textsuperscript{41}

In 2015, health care costs related to opioid abuse in South Dakota reached $27,820,116.\textsuperscript{64}

**VULNERABLE YOUTH**

63 children in South Dakota aged out of out-of-home care—exited foster care to emancipation—in 2016.\textsuperscript{42}

83.9% of high school students in South Dakota graduated on time at the end of the 2014-15 year.\textsuperscript{43}

3,000 teens ages 16 to 19 in South Dakota were not enrolled in school and not working in 2016.\textsuperscript{44}

9,000 young adults ages 18 to 24 were not enrolled in school, were not working, and had no degree beyond high school in 2016.\textsuperscript{45}

31.6% of young adults in South Dakota ages 25 to 34 had a bachelor’s degree or higher from 2015 to 2017.\textsuperscript{46}
In 2017, there were no reports of children in South Dakota aged 10 to 14 committing suicide, and 13 reports of suicide among children aged 15 to 19.\textsuperscript{47}

**JUVENILE JUSTICE AND DELINQUENCY PREVENTION**

- 11 children under age 19 were killed by a firearm in South Dakota in 2017, compared to less than 12 in 2016.\textsuperscript{48}

- 6,656 children younger than 18 were arrested in South Dakota in 2017. Violent crimes were the reason for 131 of the arrests in 2017.\textsuperscript{49}

- 228 children lived in juvenile correction facilities in South Dakota in 2015.\textsuperscript{50}

**CHILD WELFARE WORKFORCE**

*The federal Child and Family Service Reviews have clearly demonstrated that the more time a caseworker spends with a child and family, the better the outcomes for those children and families.*\textsuperscript{52}

- According to a 2003 GAO report, the average caseload for child welfare/foster care caseworkers is 24–31 children; these high caseloads contribute to high worker turnover and insufficient services being provided to children and families. CWLA recommends that foster care caseworkers have caseloads of 12–15 children.\textsuperscript{53}

- Average turnover rates for child welfare agencies range from 20% to 40%.\textsuperscript{54} Turnover rates at around 10% are considered to be optimal in any agency.\textsuperscript{55}

*Caseworker turnover has negative outcomes for children in the child welfare system, including placement disruptions and increased time in out-of-home care.*\textsuperscript{56}

- According to the National Survey of Child and Adolescent Well-Being II baseline report, 75% of caseworkers earned a salary between $30,000 and $49,999.\textsuperscript{57}
The majority of caseworkers hold a bachelor’s degree (52.3%) or a bachelor of social work degree (21.9%). Only 25% of caseworkers hold a master’s degree.\textsuperscript{58}

**SOCIAL SERVICES BLOCK GRANT**

In 2016, South Dakota’s sum of expenditures for services totaled $3,637,219. The most utilized service in South Dakota was Home-Based Services totaling $2,511,761.\textsuperscript{60}

**FUNDING CHILD WELFARE SERVICES FOR SOUTH DAKOTA’S CHILDREN**

In 2016, South Dakota spent $59,187,063 for child welfare services. Child welfare services are all direct and administrative services the state agency provides to children and families. Of this amount, $25,212,518 was from federal funds and $33,974,545 was from state and local funds.\textsuperscript{61}

In 2016, of the $25,212,518 in federal funds received for child welfare, 42% was from Title IV-E Foster Care and Adoption Assistance, 4.7% came from Title IV-B Child Welfare Services and Promoting Safe and Stable Families, 25.6% was from Medicaid, 9.9% came from Social Services Block Grant, 13.2% was from TANF, and 4.6% came from other federal sources.\textsuperscript{62}

South Dakota received $10,599,002 in federal funds for IV-E foster care expenditures in 2016, including $2,727,388 for maintenance payments and $3,284,089 for administration, child placement, the statewide automated child welfare information system, and training.\textsuperscript{63}
1 "At A Glance" statistics are from 2018.


3 Ibid.

4 Ibid.

5 Ibid


7 Ibid.


Note: The percentage difference is a CWLA calculation. Overlap in the percentages of types of abuse is possible as a child may have experienced more than one type of abuse.


Note: The five and younger number is a CWLA calculation.


Note: The percent difference is a CWLA calculation.


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Note: Some states allow families, once they begin receiving assistance, to continue receiving assistance up to a higher income level than the initial limit.
Note: A family that is eligible for child care assistance may not necessarily receive it. States may place families on waiting lists, or freeze intake (turning away eligible families without adding them to a waiting list).


Note: The percent difference is a CWLA calculation.


Note: The percent difference is a CWLA calculation. Children who switched between CHIP and Medicaid are represented in both data sets.


39 Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (2018). Estimated Totals by State of Substance Use & Mental Health from the 2016-2017 National Surveys on Drug Use and Health: Model-Based Estimated Totals (in Thousands) (50 States and the District of Columbia): Table 23: Substance Use Disorder in the Past Year, by Age Group and State: Estimated
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Note: The dearth in current state-by-state workforce data makes clear the need for critical data on compensation, working conditions including safety issues, academic degrees held, education and training received, and factors contributing to turnover. To address this, CWLA is calling for Congress to authorize the National Academy of Sciences (NAS) to conduct an updated study on the child welfare workforce. It would make recommendations regarding caseloads and workloads, education levels, and training requirements. In addition, the study would examine data reporting and collection and make recommendations on how states might improve these efforts.


Ibid.


Ibid.


Note: Examples of direct services include child abuse/neglect investigations, foster care, community-based programs, case management, and all such services required for the safety, permanency, and well-being of children. Examples of administrative services include management information systems, training programs, eligibility determination processes, and all services that provide the infrastructure supports for the public agency. The component funding streams may not equal the total, depending on additional child support and demonstration funds for this state.

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62 Ibid.

63 Ibid.
