The National Survey of Children's Health: Tracking Children's Health and Healthcare Needs

NASEM Committee on Pediatric Subspecialty Access and Workforce Issues

July 18, 2022

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Vision: Healthy Communities, Healthy People

National Survey of Children's Health

AGENDA

1. Overview of the National Survey of Children's Health (NSCH)

2. Selected Indicators of Child Health

3. Selected Measures of Access to Health Care Professionals

4. Accessing and Using the NSCH Data

HRSA
Maternal & Child Health

NSCH Overview:
Design, Content, and Uses
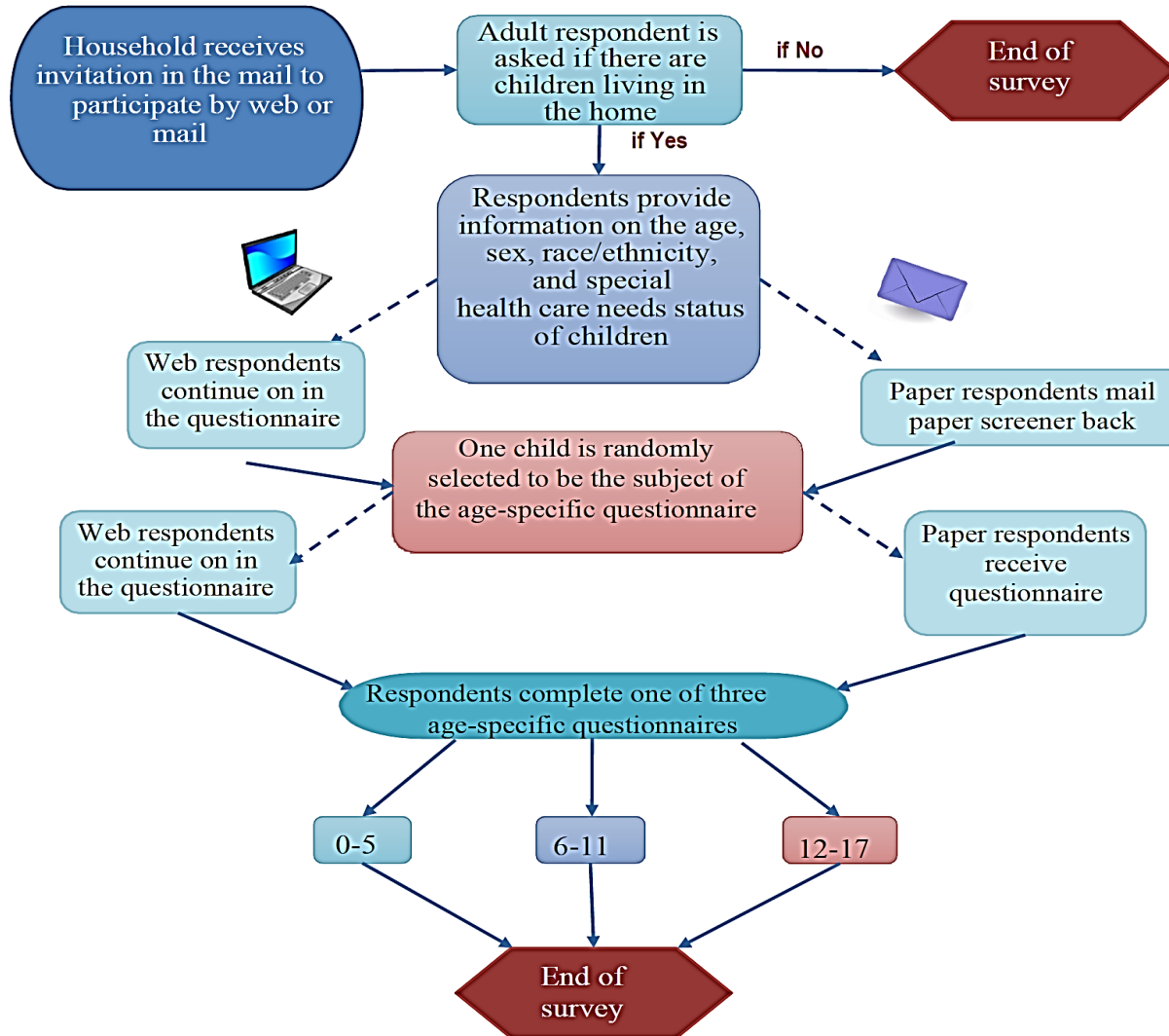
National Survey of Children's Health
Overview

- Sponsored by the **Health Resources and Services Administration's Maternal and Child Health Bureau**; conducted by the U.S. Census Bureau. Co-sponsorship by CDC and USDA.

- **Annual**, cross-sectional, address-based survey that collects information via the web and paper/pencil questionnaires.

- Designed to collect information on the health and well-being of **children ages 0-17**, and related health care, family, and community-level factors that can influence health.

- Provides both **national** and **state-level** estimates for all non-institutionalized children in the U.S.

- Data are released annually on **Child Health Day** (first week in October) for the previous year.

Design

- **Multi-mode design:**
  - 70% of hou
    them to pa
    questionna
  - 30% receiv
    screener

- **Two-stage que**
  - Household
    demograph
    health care
  - Detailed ag
    randomly s

- **Respondent Ex**
  - **Web**: Seam
    age-specifi
    randomly s
  - **Paper**: Res
    Census →
    child → ag specific questionnaire sent back to
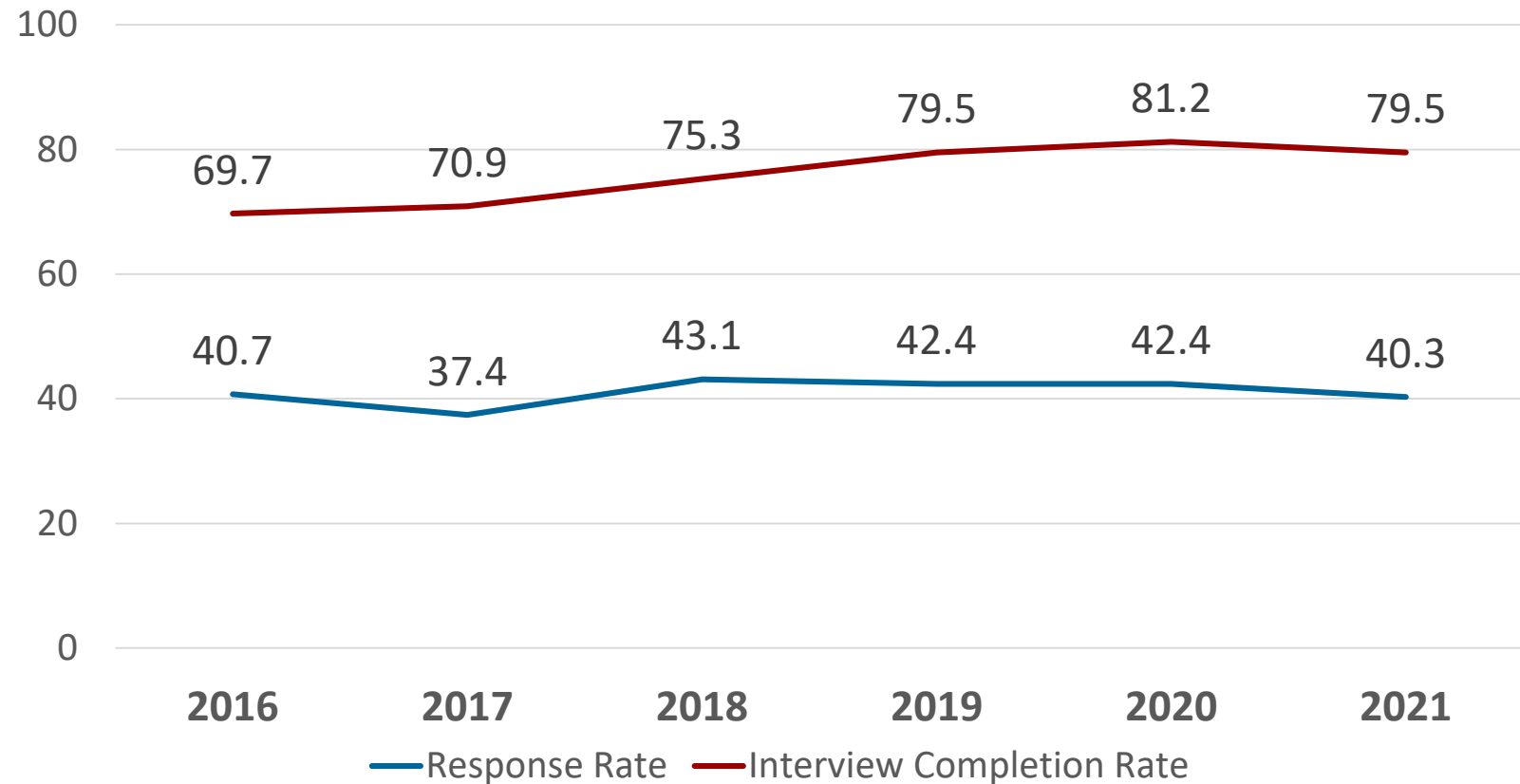   respondent for completion.

National Survey of Children's Health
Sample Size and Response Rates: 2016-2021

Completed Interviews Per Year

- **2016 = 50,212**
  - 638+ per State & DC
- **2017 = 21,599**
  - 343+ per State & DC
- **2018 = 30,530**
  - 520+ per State & DC
- **2019 = 29,433**
  - 482+ per State & DC
- **2020 = 42,777**
  - 644+ per State & DC
- **2021 ≈ 50,900**
  - 790+ per State & DC

Annual Response and Completion Rates

	2016	2017	2018	2019	2020	2021
Interview Completion Rate	69.7	70.9	75.3	79.5	81.2	79.5
Response Rate	40.7	37.4	43.1	42.4	42.4	40.3

Response Rate — Interview Completion Rate

National Survey of Children's Health
Performance & Outcome Measurement, Policies, and Programs

20 Title V MCH Services Block Grant
National Performance and Outcome Measures:

1. NPM 6: Developmental Screening
2. NPM 8.1: Physical Activity (6-11 years)
3. NPM 8.2: Physical Activity (12-17 years)
4. NPM 9: Bullying
5. NPM 10: Adolescent Well-Visit
6. NPM 11: Medical Home
7. NPM 12: Transition
8. NPM 13.2: Preventive Dental Visit
9. NPM 14.2: Smoking (household)
10. NPM 15: Adequate Insurance
11. NOM 13: School Readiness
12. NOM 14: Tooth Decay/Cavities
13. NOM 17.1: CSHCN
14. NOM 17.2: CSHCN Systems of Care
15. NOM 17.3: Autism
16. NOM 17.4: ADD/ADHD
17. NOM 18: Mental Health Treatment
18. NOM 19: Overall Health Status
19. NOM 20: Obesity
20. NOM 25: Forgone Health Care

Federal policy and program development:

- ✓ 15 Healthy People 2010/2020/2030 Objectives;

- ✓ CDC investments in ADHD, ASD, and Developmental Conditions;

- ✓ MCHB investments in early childhood (Home Visiting and Healthy Start);

- ✓ Children with Special Health Care Needs.

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Harris and Yellen urge Congress to back affordable child care proposal. NBC News.
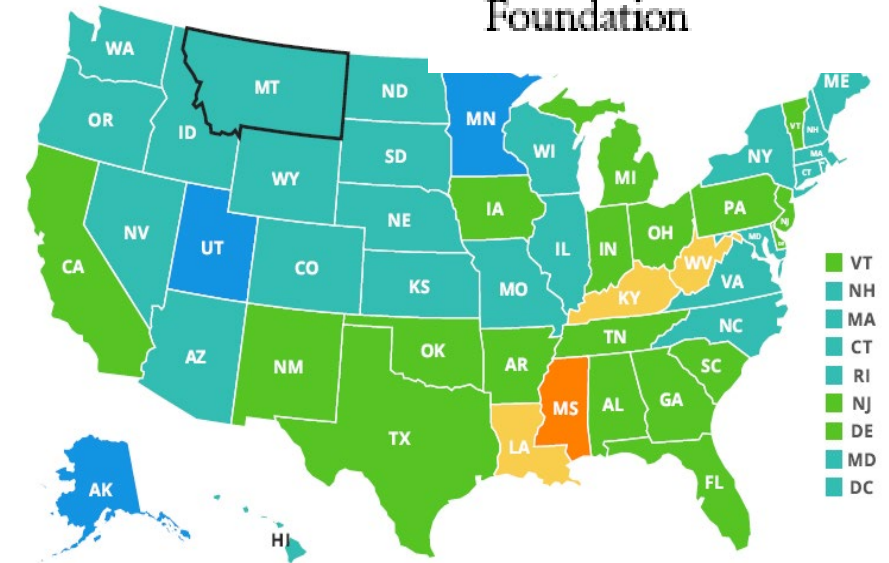
Parents of 2 million children under the age of five had to quit their jobs, decline jobs, or change jobs because of child care problems, according to the 2018-2019 National Survey of Children's Health.

Starbucks announces new backup childcare benefits, by Danielle Wiener-Bronner, CNN Business. **New York**

Starbucks is sweetening the pot for employees with a new family care benefit. The company announced on Tuesday that it will provide workers with ten subsidized backup care days for children or adults. The new care policy "is the final piece of the puzzle," said Ron Crawford, vice president of benefits at Starbucks. Starbucks noted that 2 million working parents quit their jobs in 2016 because of child care, according to the National Survey of Children's Health.
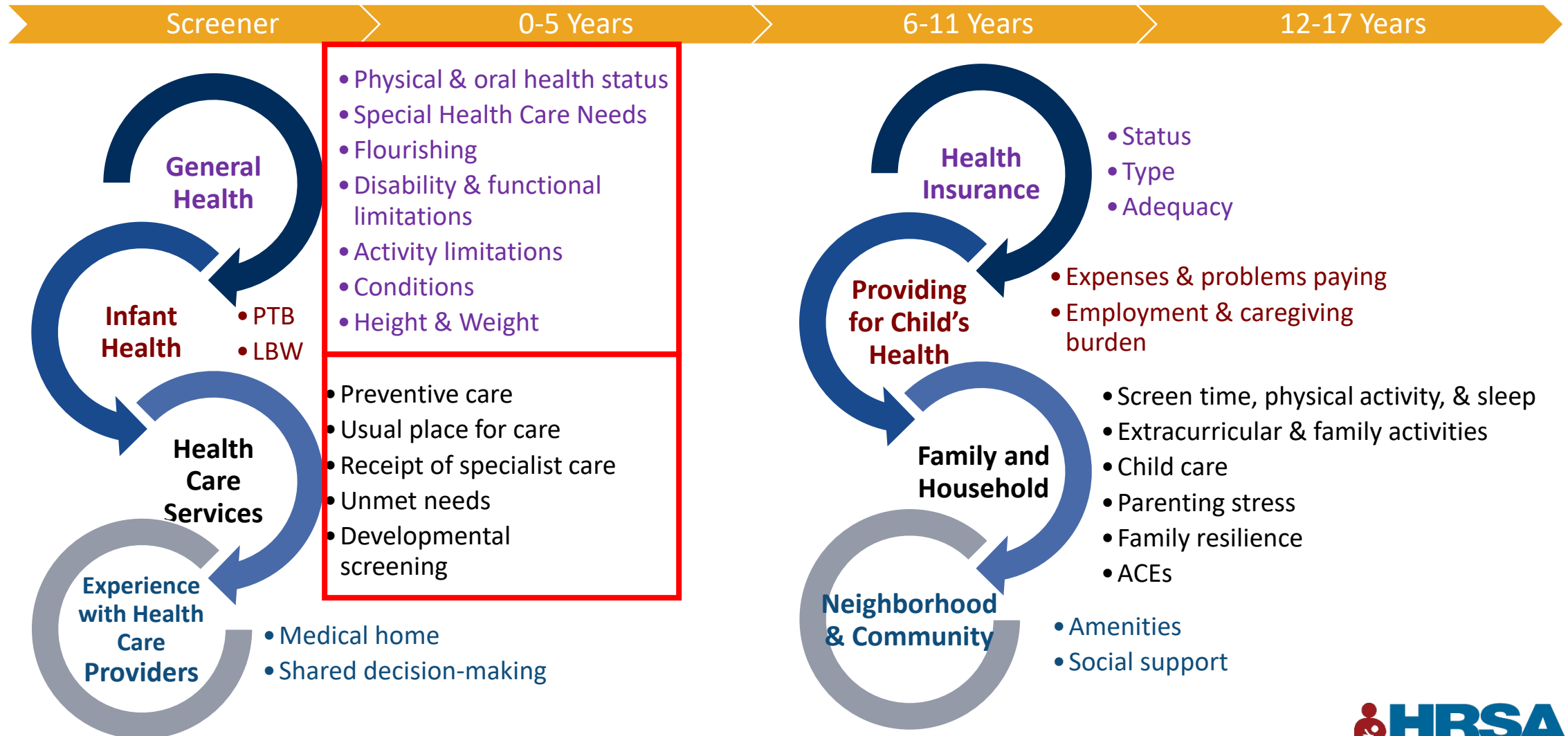

STATE of CHILDHOOD OBESITY
Helping All Children Grow Up Healthy

Robert Wood Johnson Foundation

NSCH Content
Core Content Areas

General Health

Infant Health
- PTB
- LBW

Health Care Services

Experience with Health Care Providers
- Medical home
- Shared decision-making

- Physical & oral health status
- Special Health Care Needs
- Flourishing
- Disability & functional limitations
- Activity limitations
- Conditions
- Height & Weight

- Preventive care
- Usual place for care
- Receipt of specialist care
- Unmet needs
- Developmental screening

Health Insurance
- Status
- Type
- Adequacy

Providing for Child's Health
- Expenses & problems paying
- Employment & caregiving burden

Family and Household
- Screen time, physical activity, & sleep
- Extracurricular & family activities
- Child care
- Parenting stress
- Family resilience
- ACEs

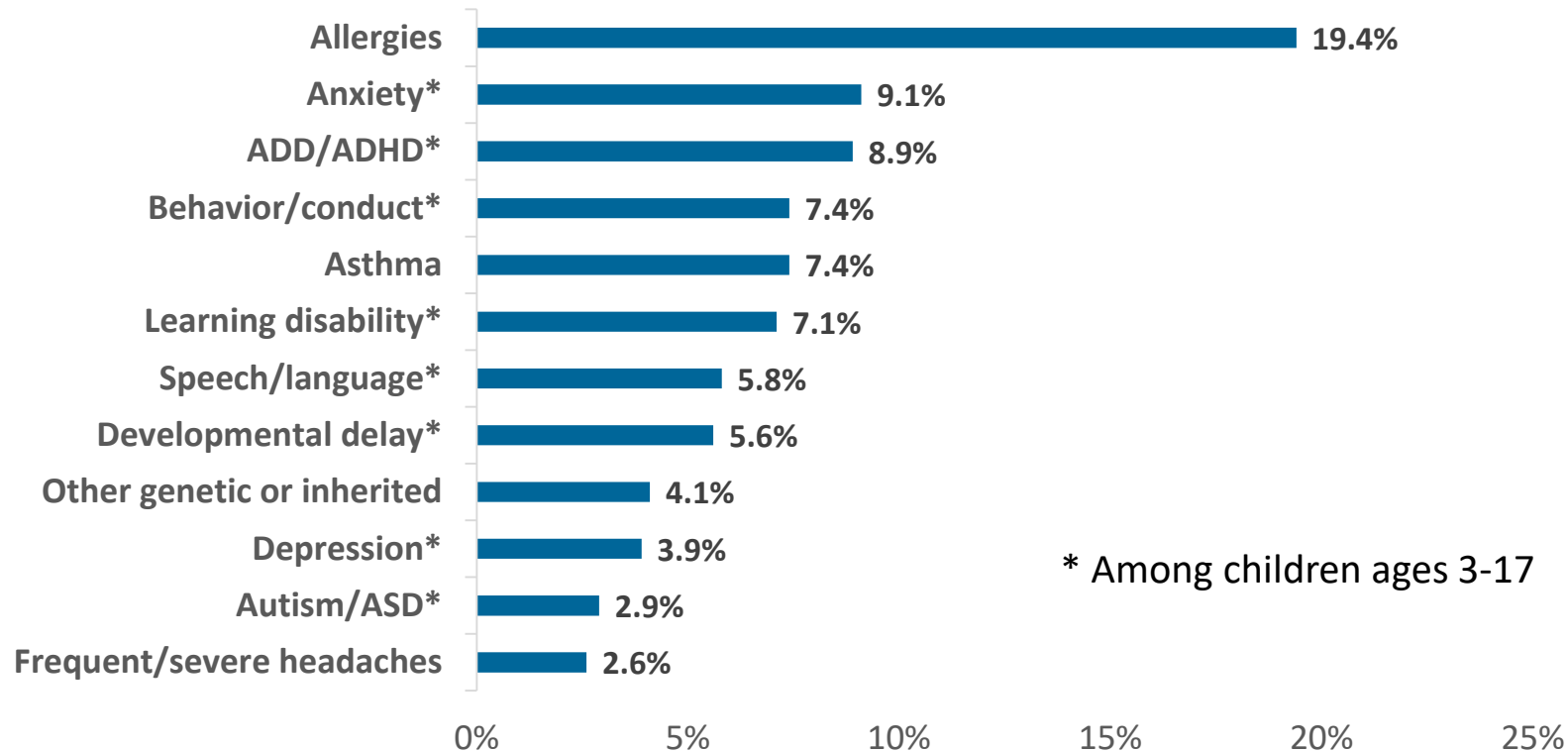**Neighborhood & Community**
- Amenities
- Social support

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National Survey of Children's Health:
2019-2020 and Five-Year Trend Estimates

Health Conditions

Prevalence of Current or Lifelong Health Conditions among Children Ages 0-17

Condition	Prevalence
Allergies	19.4%
Anxiety*	9.1%
ADD/ADHD*	8.9%
Behavior/conduct*	7.4%
Asthma	7.4%
Learning disability*	7.1%
Speech/language*	5.8%
Developmental delay*	5.6%
Other genetic or inherited	4.1%
Depression*	3.9%
Autism/ASD*	2.9%
Frequent/severe headaches	2.6%

* Among children ages 3-17

- In 2019-2020 ... the ... repo... amo... follo... and

- Eigh... freq... cond... were... deve...

Note: Conditions with prevalence rates near or below 1% are not presented here.

HRSA Maternal & Child Health
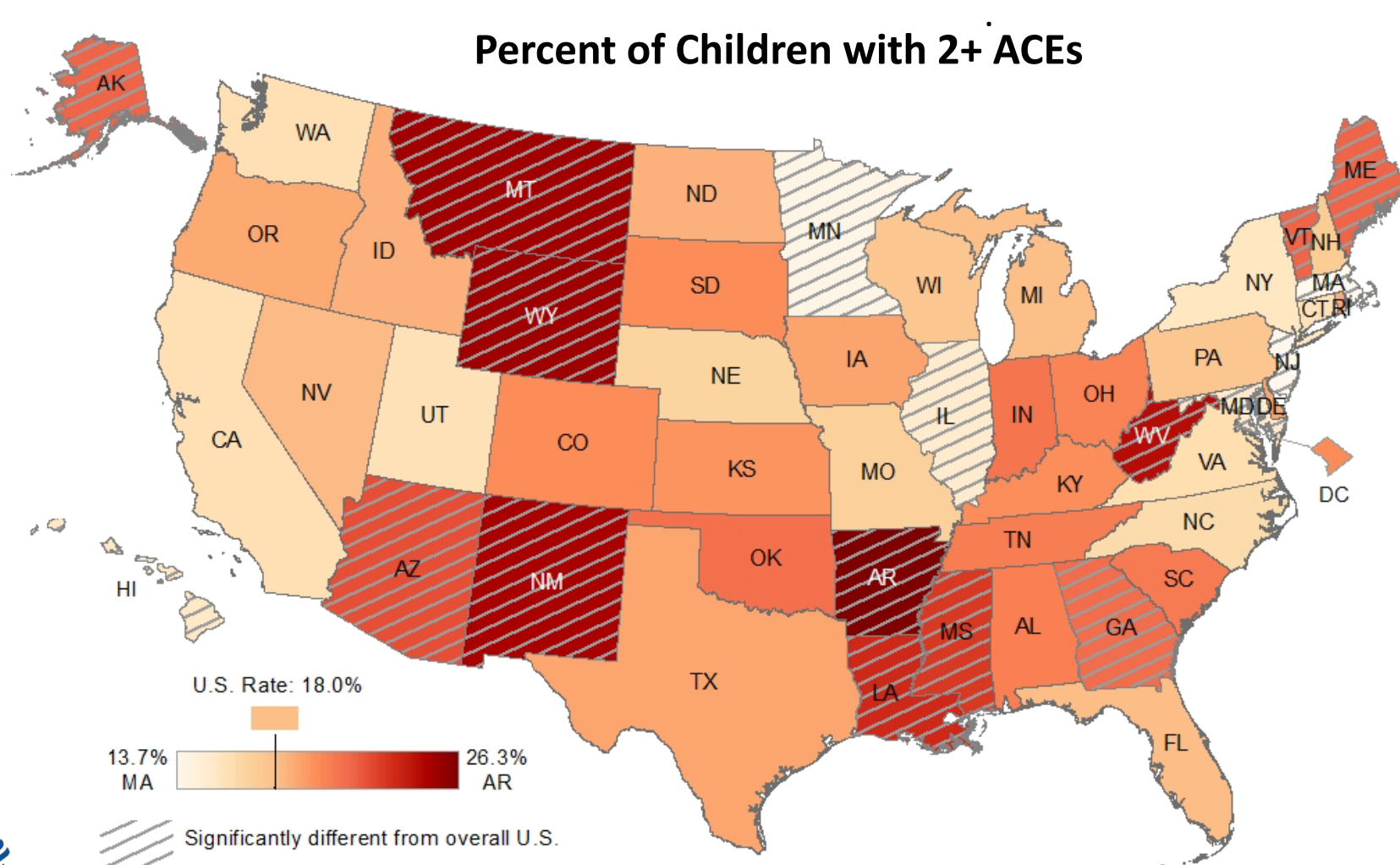
Key Estimates 2019-2020
Treatment for ADHD and Autism

Percent of children ages 3-17 years with ADD/ADHD or Autism who are receiving behavioral treatment or taking medication

Legend:
- ■ Currently receiving behavioral treatment for the condition
- ■ Currently taking medication for the condition

Current ADD/ADHD
- 49.8%
- 59.2%

Current Autism
- 61.1%
- 26.8%

X-axis: 0%, 20%, 40%, 60%, 80%, 100%

Percent of Children Receiving Treatment

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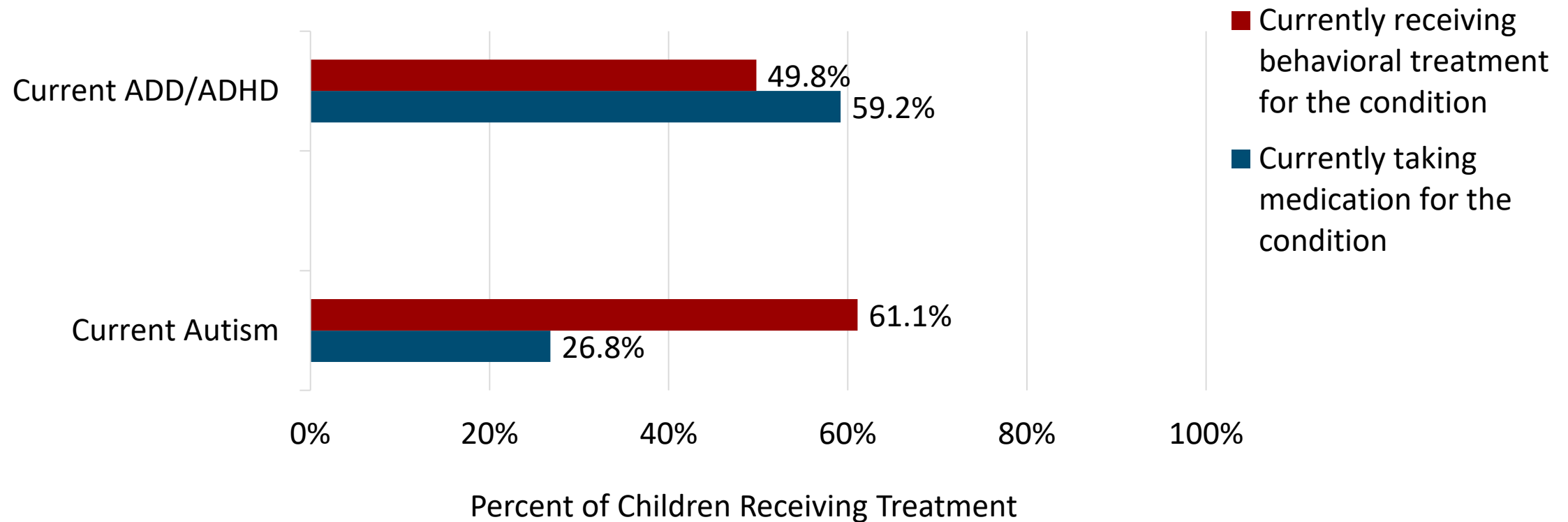
Key Estimates 2019-2020
Adverse Childhood Experiences

Percent of Children with 2+ ACEs

U.S. Rate: 18.0%

13.7%
MA

26.3%
AR

Significantly different from overall U.S.

Five-Year Trend Estimates
Preventive Health Care

Preventive health care services in past 12 months among U.S. children

Legend:
- Preventive Medical Visit (0-17 years)
- Preventive Dental Visit (1-17 years)

Data points:
- Preventive Medical Visit: 2016: 78.7, 2017: 78.3, 2018: 79.1, 2019: 81.0, 2020: 74.1
- Preventive Dental Visit: 2016: 78.9, 2017: 80.2, 2018: 79.1, 2019: 80.1, 2020: 74.9
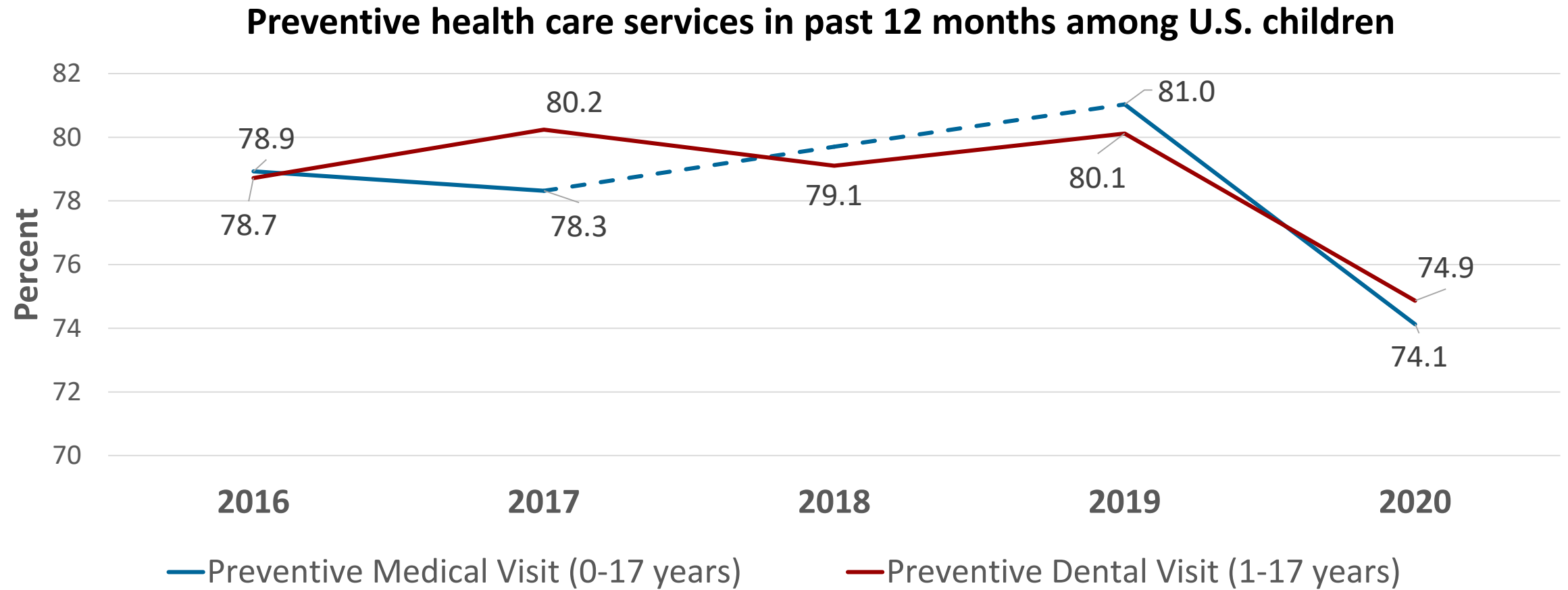
Five-Year Trend Estimates
Children's Mental Health

Mental health conditions among U.S. children (3-17 years)
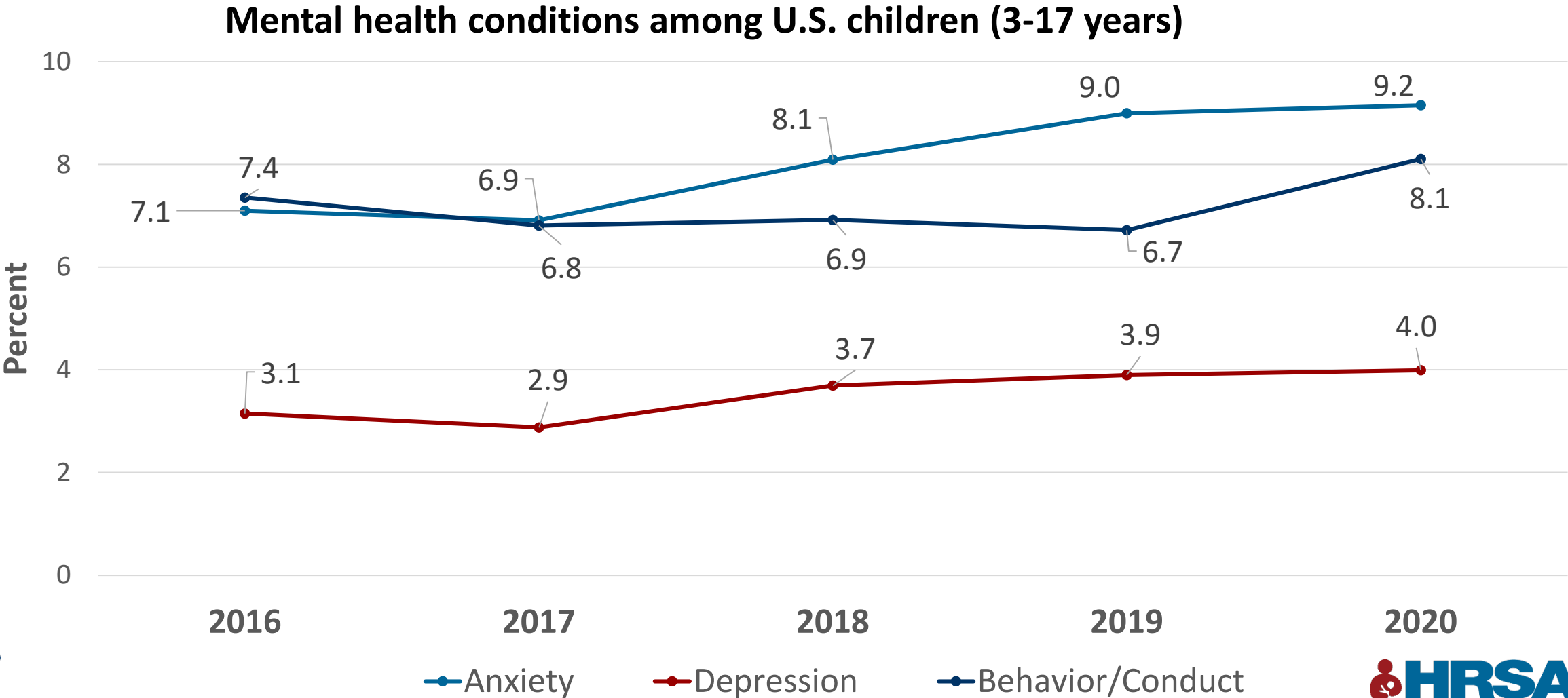
National Survey of Children's Health:
Access to Health Care Professionals

Specialty Care and the NSCH...

Strengths:

- Annual data collection with timely release;
- Large, national- and state-representative samples;
- Access to more granular data through RDCs (CBSA stats; MSA status; Census tract)
- Broad range of content related to children's health and well-being as well as family and community factors.

Limitations:

- Population focus;
- Parent report;
- Limited real estate for all content areas.

NSCH Content
"Specialty" Care Measures

Mental Health

- Receipt of mental health treatment/counseling, past 12m
- Difficulty getting MH treatment/counseling
- Medication for emotional, concentration, behavior problems, past 12m
- Insurance coverage for mental/behavioral health needs

Specialist Visit

- Specialist visit, past 12m
- Difficulty getting specialty care

Medical Home:

- Difficulty getting referrals, past 12m
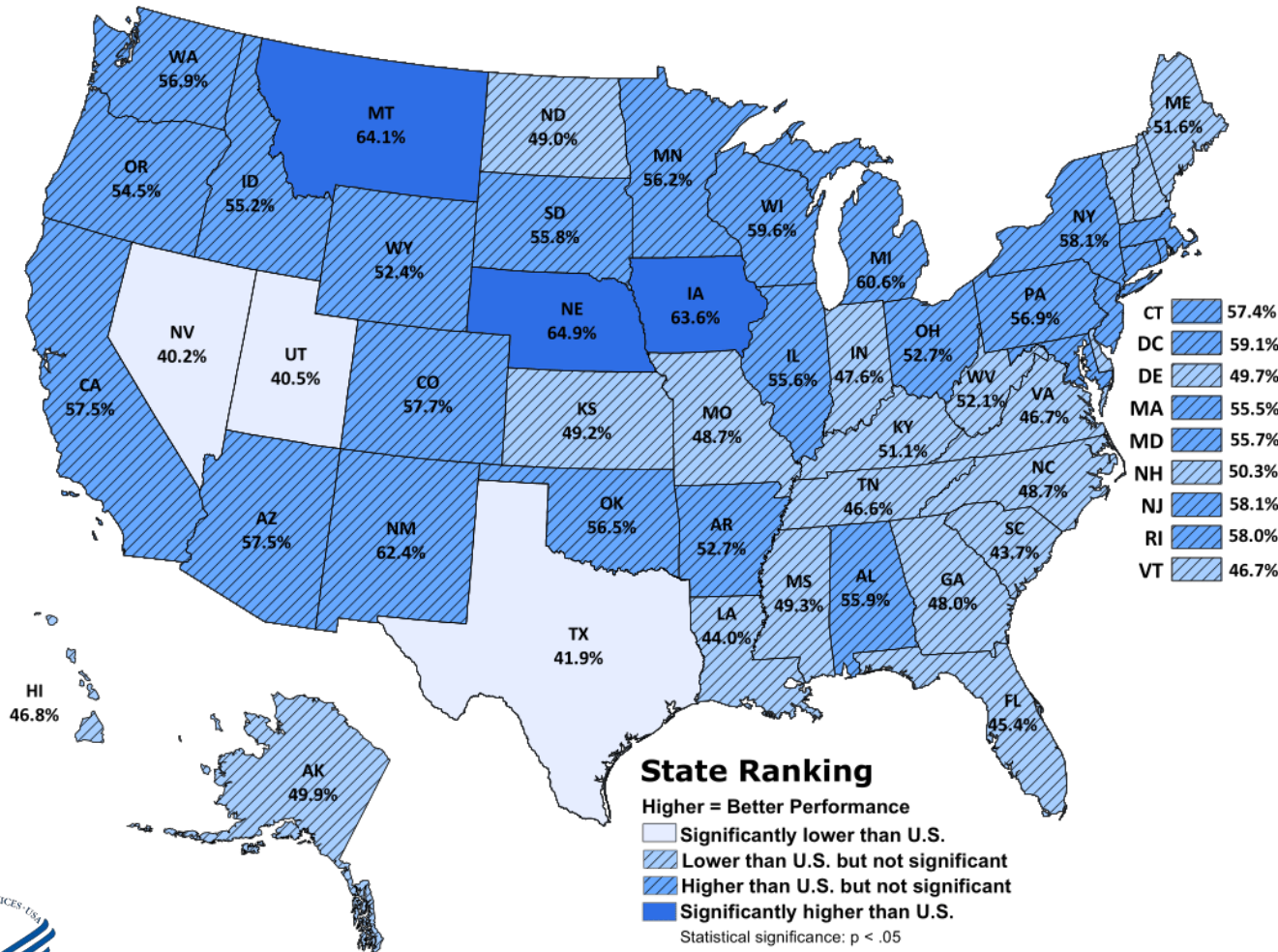
Forgone Care:

- Forgone care, past 12m
- Type of forgone care (esp. option f "others, specify")
- Reasons for forgone care (esp. option b "services not available in your area")

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2019-2020 Results: Mental health treatment or counseling

"Title V National Outcome Measure #18":
Percent of children, ages 3 through 17, with a mental/behavioral condition who receive treatment or counseling
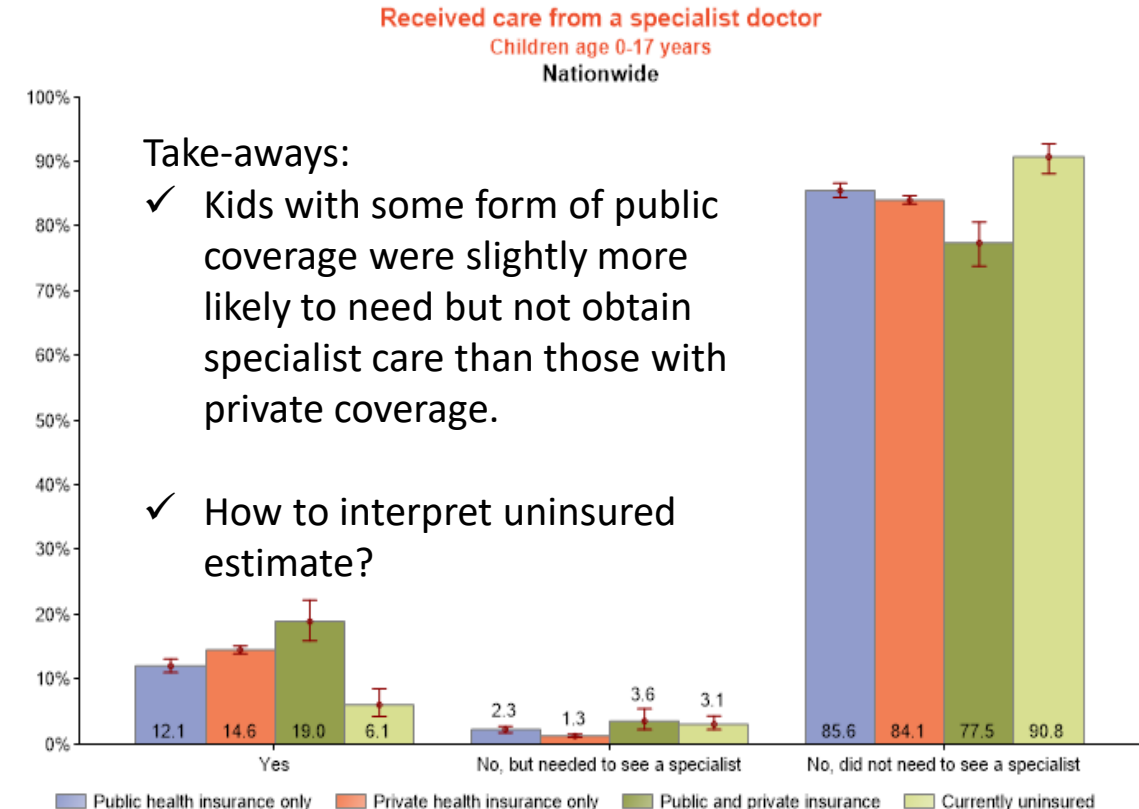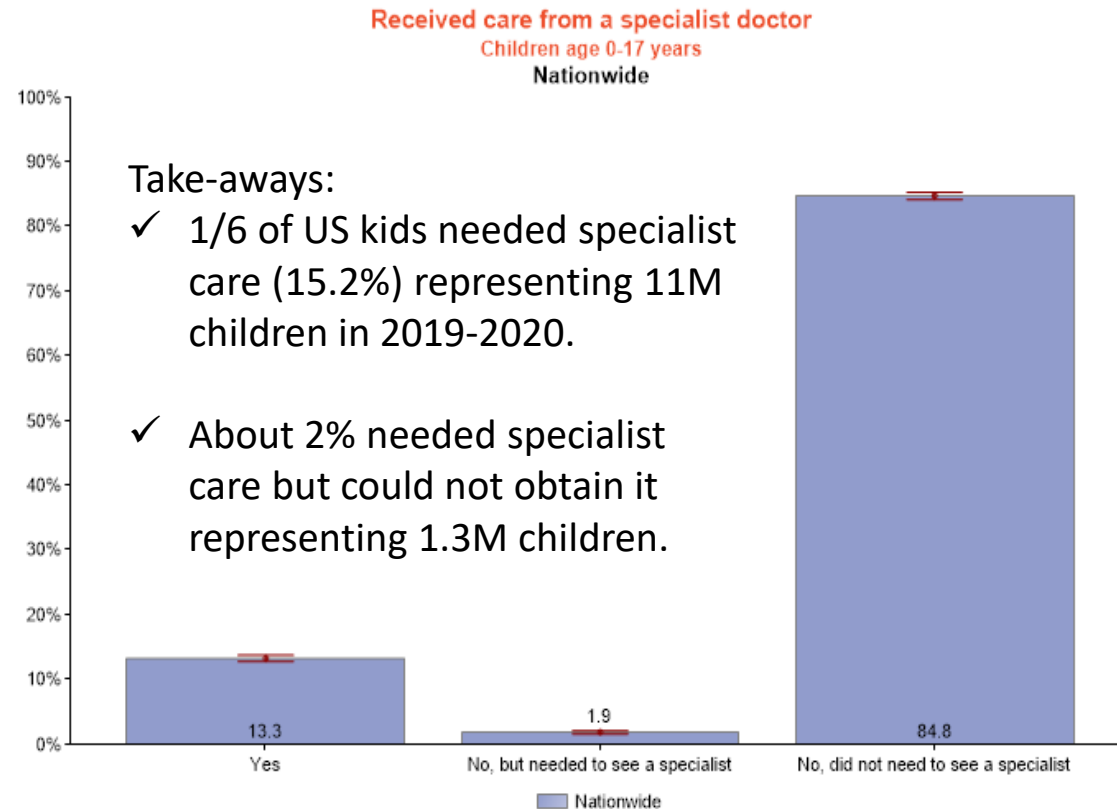
- **Nationwide:** 52.3% of children met indicator

- **Range Across States:** 40.2% to 64.9%

State map values:

State	%
WA	56.9%
MT	64.1%
ND	49.0%
ME	51.6%
OR	54.5%
ID	55.2%
MN	56.2%
WI	59.6%
NY	58.1%
WY	52.4%
SD	55.8%
MI	60.6%
PA	56.9%
NV	40.2%
UT	40.5%
NE	64.9%
IA	63.6%
OH	52.7%
CA	57.5%
CO	57.7%
IL	55.6%
IN	47.6%
WV	52.1%
VA	46.7%
KS	49.2%
MO	48.7%
KY	51.1%
NC	48.7%
AZ	57.5%
NM	62.4%
OK	56.5%
AR	52.7%
TN	46.6%
SC	43.7%
MS	49.3%
AL	55.9%
GA	48.0%
LA	44.0%
TX	41.9%
FL	45.4%
HI	46.8%
AK	49.9%

	%
CT	57.4%
DC	59.1%
DE	49.7%
MA	55.5%
MD	55.7%
NH	50.3%
NJ	58.1%
RI	58.0%
VT	46.7%

State Ranking

Higher = Better Performance
- Significantly lower than U.S.
- Lower than U.S. but not significant
- Higher than U.S. but not significant
- Significantly higher than U.S.

Statistical significance: p < .05

HRSA Maternal & Child Health

2019-2020 Results: Specialist care received, past 12 months

During the past 12 months, did this child see a specialist other than a mental health professional?


Received care from a specialist doctor
Children age 0-17 years
Nationwide

Take-aways:
- ✓ 1/6 of US kids needed specialist care (15.2%) representing 11M children in 2019-2020.

- ✓ About 2% needed specialist care but could not obtain it representing 1.3M children.

Received care from a specialist doctor
Children age 0-17 years
Nationwide

Take-aways:
- ✓ Kids with some form of public coverage were slightly more likely to need but not obtain specialist care than those with private coverage.

- ✓ How to interpret uninsured estimate?

2019-2020 Results: Difficulty obtaining specialist care

How difficult was it to get the specialist care that this child needed?

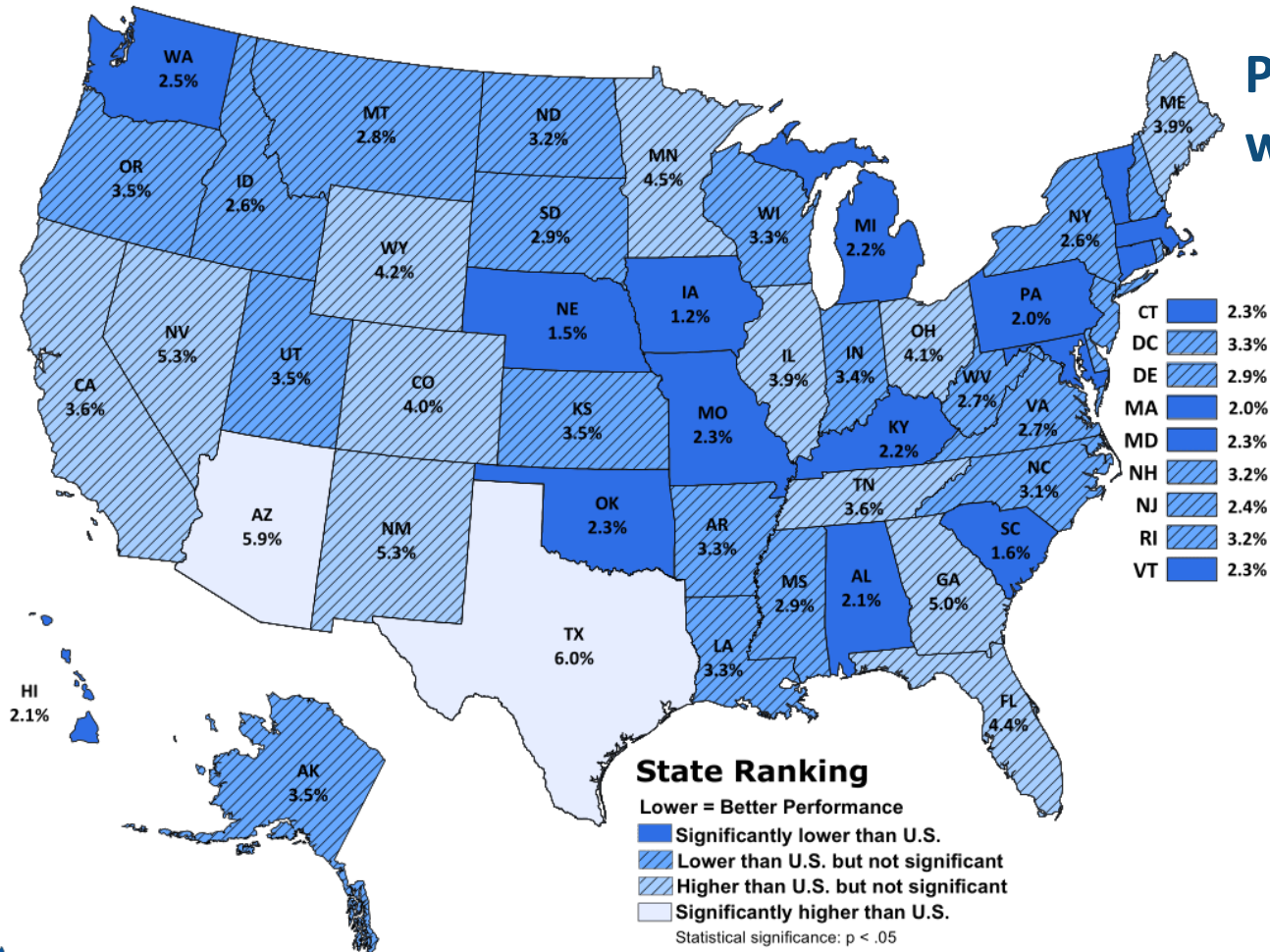HRSA Regional Offices and Headquarters
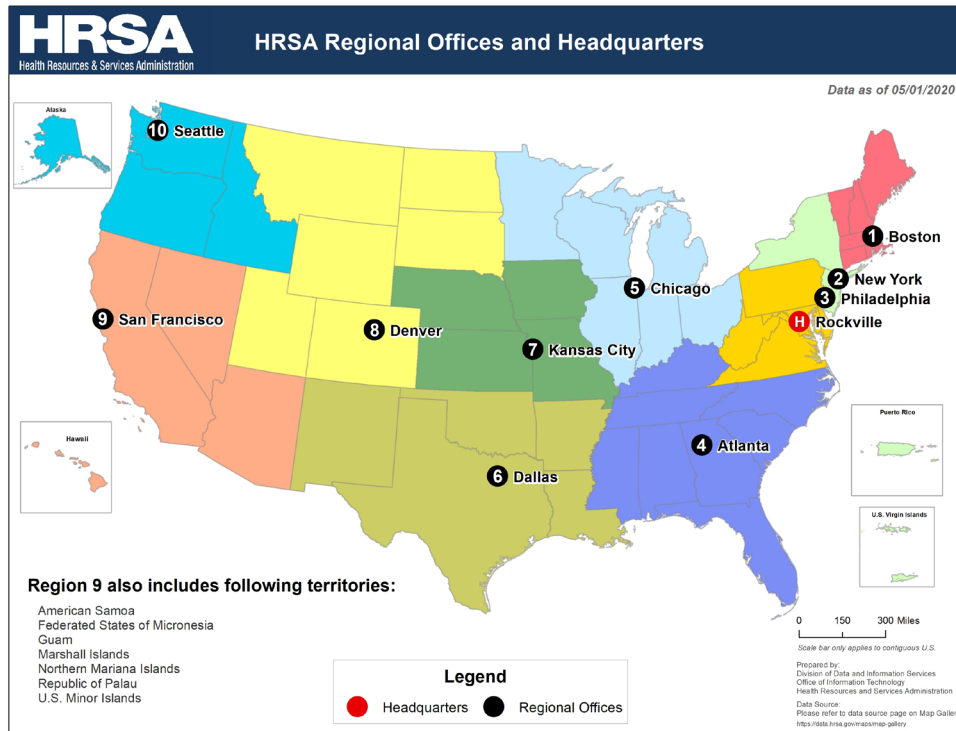
Region	Did not have difficulty %	Somewhat difficult %	Very difficult %	It was not possible to obtain care %
Nation	75.9	16.5	5.8	1.8
HRSA Region I	78.1	15.0	5.3	1.7
HRSA Region II	82.0	14.2	2.5	1.3
HRSA Region III	75.9	16.7	6.2	1.2
HRSA Region IV	76.5	16.3	5.2	2.0
HRSA Region V	76.4	16.5	4.4	2.7
HRSA Region VI	73.3	14.8	10.2	1.7
HRSA Region VII	79.8	16.4	2.2	1.6
HRSA Region VIII	74.1	21.9	3.0	1.0
HRSA Region IX	72.5	17.7	8.2	1.6
HRSA Region X	69.1	22.3	6.6	2.0

Please interpret with caution: estimate has a 95% confidence interval width exceeding 20 percentage points or 1.2 times the estimate and may not be reliable.

2019-2020 Results: Forgone care

"Title V National Outcome Measure #25": Percent of children, ages 0 through 17, who were not able to obtain needed health care in the last year
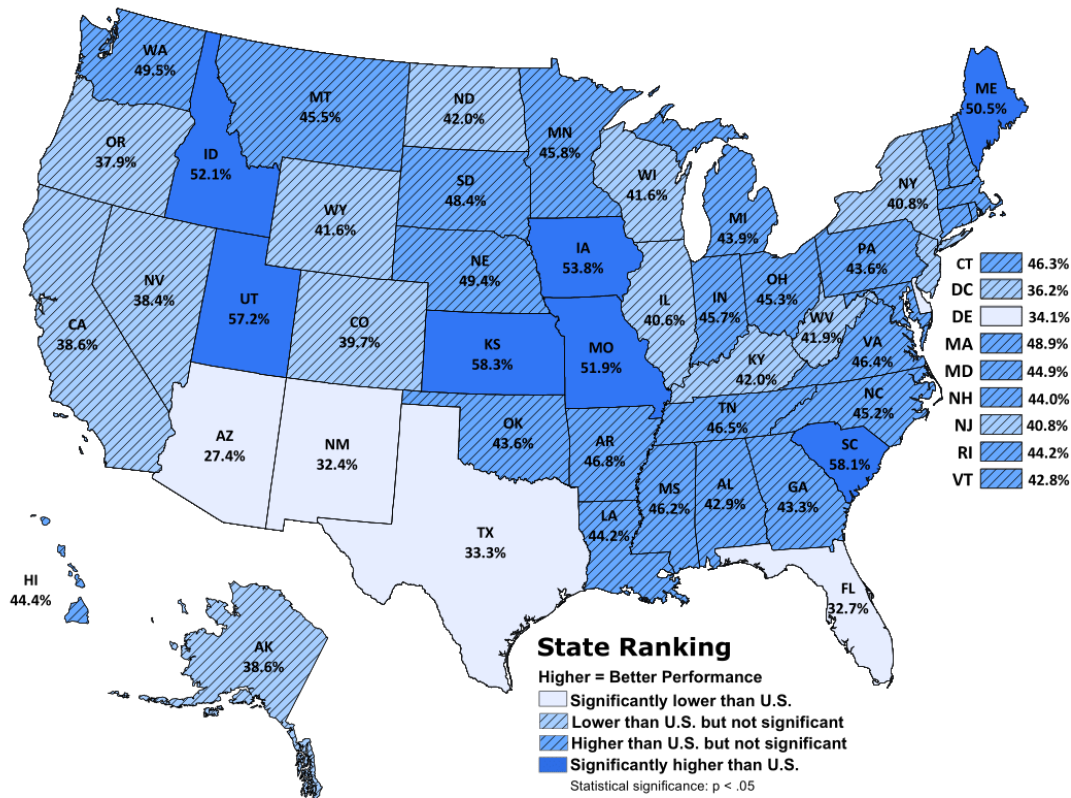
- **Nationwide:** 3.5% of children met indicator

- **Range Across States:** 1.2% to 6.0%

CT	2.3%
DC	3.3%
DE	2.9%
MA	2.0%
MD	2.3%
NH	3.2%
NJ	2.4%
RI	3.2%
VT	2.3%

State Ranking

Lower = Better Performance

- Significantly lower than U.S.
- Lower than U.S. but not significant
- Higher than U.S. but not significant
- Significantly higher than U.S.

Statistical significance: p < .05

2019-2020 Results: Medical Home for CYSHCN

State Ranking map with the following state values:

WA 49.5%, OR 37.9%, MT 45.5%, ID 52.1%, ND 42.0%, MN 45.8%, WY 41.6%, SD 48.4%, WI 41.6%, ME 50.5%, NV 38.4%, UT 57.2%, CO 39.7%, NE 49.4%, IA 53.8%, MI 43.9%, NY 40.8%, CA 38.6%, KS 58.3%, MO 51.9%, IL 40.6%, IN 45.7%, OH 45.3%, PA 43.6%, WV 41.9%, KY 42.0%, VA 46.4%, NC 45.2%, AZ 27.4%, NM 32.4%, OK 43.6%, AR 46.8%, TN 46.5%, SC 58.1%, TX 33.3%, LA 44.2%, MS 46.2%, AL 42.9%, GA 43.3%, FL 32.7%, HI 44.4%, AK 38.6%

CT 46.3%, DC 36.2%, DE 34.1%, MA 48.9%, MD 44.9%, NH 44.0%, NJ 40.8%, RI 44.2%, VT 42.8%

State Ranking
Higher = Better Performance
- Significantly lower than U.S.
- Lower than U.S. but not significant
- Higher than U.S. but not significant
- Significantly higher than U.S.
Statistical significance: p < .05

"Title V National Outcome Measure #11": Percent of children with special health care needs, ages 0 through 17, who have a medical home

- **Nationwide:** 42.2% of CYSHCN met indicator
- **Range Across States:** 27.4% to 58.3%

- **Nationwide:** 1/3 of CYSHCN needed referrals (36.7%) in past 12 months:
  - 79.3% no problems getting;
  - 15.6% somewhat difficult to get;
  - 4.1% very difficult to get;
  - 1.0% not possible to get referral*

Source: 2019-2020 National Survey of Children's Health. Retrieved from:
https://www.childhealthdata.org/browse/rankings/maps?s=262

Using the NSCH:
Data Access & Availability

National Survey of Childrens' Health

Accessing the Data

MCHB Website
- https://mchb.hrsa.gov/data/national-surveys

Census Bureau Website
- https://www.census.gov/programs-surveys/nsch.html

Data Resource Center
- www.childhealthdata.org

2021 NSCH
Data Collection and Availability

- Fielded June 2021 – January 2022

- ≈50,900 completed child-level interviews

- Data will be available October 3, 2022

- Includes **new** items related to:
  - ✓ **COVID-19 pandemic**
  - ✓ **Early childhood nutrition**
  - ✓ **Outdoor play**

2022 NSCH
Data Collection and Availability

- Data collection began July 8th

- Expecting ~60,000 completed child-level interviews

- Data will be available October 2, 2023

- Includes **new** items related to:
  - ✓ **Housing instability**
  - ✓ **Eating and weight related behaviors and concerns**
  - ✓ **FASD diagnosis and evaluations**
  - ✓ **Receipt of Supplemental Security Income (SSI) by child**

Thank you!

Questions?

Contact Information

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