

AMCHP Annual Conference, 2010

Moving Ahead Together:

Celebrating the Legacy, Shaping the Future of Maternal and Child Health

The Changing Face of Children's Health:

Results from the National Survey of Children's Health

March 6-10, 2010

MICHAEL KOGAN: The first time I've ever been a moderator when the conference wrote out my whole script for me. Let me see if I can follow this. Introduce yourself as the moderator. I'm Michael Kogan and I'm the Director of the Office of Data and Program Development at the Maternal Child Health Bureau and this presentation is entitled, "The Changing Face of Children's Health: Results from the National Survey of Children's Health. It's session ID, D9, which is a workshop session. This session is eligible for continuing education and I've also been told that the continuing education is online now for CDC. So, there's a link to the CDC Training and Continuing Education online system and their website. So, in order to receive continuing education you must complete the online CDC CE form by April 12th. Be sure to keep track of the sessions you attend throughout the conference as you will be asked to enter this in the online system. Further CE information can be found on page 10 of your program. Also, I'm going to distribute individual session evaluations at the end of this session, so don't run out the doors as fast as you can by the end. Please return the completed evaluation to the AMCHP staff person this session or to the registration desk. In addition, a full

conference evaluation will be posted online. A link to the survey will be emailed to all attendees after the conference. AMCHP will use these evaluations to help plan future conferences. Your input is greatly appreciated with an exclamation point there. Finally, please turn all cell phones to silent mode. So before I begin I want to make a few remarks. All the speakers today are from the Maternal Child Health Bureau from our office. I'm delighted we have three wonderful speakers and what I'm going to be talking about first is the 2007 National Survey of Children's Health. As many of you know, this is the second National Survey of Children's Health. We did one 2003, so in some of these presentations you may see comparisons to what went on in 2003 to 2007 to see if there are any changes. I know many of you are from states. How many of you live in a state? Okay, the majority of you. States like to compare themselves to each other, also known as Pennsylvania envy.

So, the first speaker after me will be Dr. Singh. He's an epidemiologist with the Maternal Child Health Bureau. His research interests include social inequalities in health, mortality, child health disparities by ethnicity and socioeconomic deprivation, obesity and physical activity, immigrant health and spatial and time trends in cancer and incidence of mortality. He's held research appointments at the National Cancer Institute, the Cancer Health Institute and the National Center for Health Statistics. He's taught at the University of Kansas Medical Center and Ohio State University. He has served as a statistical consultant at USAID and the government of Egypt. He's published extensively in the field of health and inequalities, immigrant health, obesity and physical activity, minority health cancer, epidemiology and maternal/child health. He holds a doctorate

from Ohio State University, a masters from the University of Michigan, a post masters from the International Institute of Population Sciences in Bombay and a masters degree in statistics from India. So, I've worked with Gopal in this office for five years and he's going to talk about childhood obesity. Some of you may be aware that "*Health Affairs*" released a special issue on childhood obesity this last week. There was a big "to do" at the National Press Club and Gopal was one of the speakers and because of that I actually saw him in a tie for the second time in five years and this is the second time in his life that he's worn a tie twice in one week. The other time was when he got both bar mitzvah'd and married in the same week.

Our second speaker is Dr. Reem Ghandour. She's a public health analyst with MCHB and she conducts research on issues related to maternal and child health using these surveys. Her areas of interest include children's mental health, intimate partner and family violence, health disparities among women and children. She also serves as the project manager for development of Women's Health USA and Child Health USA, as well as MCHB's representative for Healthy People 2020. She began work as a presidential management intern following her master's degree from Syracuse University. She received her doctorate from Johns Hopkins in 2009, where she was the recipient of the Interdisciplinary Research Training Grant on Violence Support for the National Institute of Mental Health and the John & Alice Chenoweth Fellowship in Maternal Child Health. Reem is going to talk about children's emotional and mental health in the U.S.

Our last speaker is Jessica Jones. She holds an MPH in maternal and child health EPI from Tulane and a bachelor's in international affairs from George Washington. She's also a public health analyst in our office and she's responsible for assisting in the analysis of the surveys and before joining us she worked for a local non-profit organization where she conducted analysis on several evaluation projects. During her time at Tulane she assisted on several studies on the affect of maternal exposure to Hurricane Katrina and post-partum depression pregnancy outcomes. She has conducted state level research on the affect of perinatal HIV exposure and adverse birth outcomes and won an award for her work at the MCH EPI conference. She's going to talk about state variation in breastfeeding.

So, I'm going to take a few minutes and rather than have each speaker tell you about the survey and the methods, I'm just going to take a few minutes to talk about it. Now, the purpose of the national survey of children's health is to produce national and state based estimates on the health and well-being of their children, their families and their communities. What makes this survey unique, unlike almost any other federal survey is you can get state based estimates from this. How many of you here have seen the chart books that come out from the survey. You know that we not only produce national data but in the overall chart books we have a page for each state too. The surveys were originally designed to help states with Title V needs assessment to work on planning and program development at the state level and for this survey to compare changes from 2003, as you'll see in many of the presentations today, and lastly you're probably aware there have been many, many papers that have come out from these surveys

including special issues in “Pediatrics”, “Maternal and Child Health Journal”. This survey was conducted by phone through independent random digit dialing for all 50 states plus the District of Columbia. We screened households for children under 18 years of age. If there is more than one child we took one child as a sample child and held them for ransom until they actually responded to the survey. The respondent was the parent or guardian most knowledgeable about the health of the child and in three-quarters of the cases the respondent was the mother and for the majority of the rest it was the father and in 4% of the cases it was the grandparent and 1% it was some other caregiver. Most interviews were conducted in English, around 95% but we also had interviewers who were trained and ready to conduct the interviews in Spanish and four Asian languages as 5% were conducted in Spanish as well. The sampling weights are adjusted for potential non-response biases. They are adjusted to account for non-coverage of non-telephone households. As you know, there are more and more households in the United States that are cell phone only and that’s one of the challenges facing us when we continue to do these surveys in the future. We are now looking at the option of doing some samplings for cell phones too. In this survey the sample size was almost 92,000 or about 1,800 per state.

I’m just going to breeze through this very quickly and all I’m doing here is to give you an idea of the breadth and depth of this survey. As you can see, we cover a lot of sections in the survey. We have eight specific sections for example, kids here six months to five years, which is where Jessica is providing the information on breastfeeding. We have information here for children six to seventeen years on school engagement, their

activities, their use of springtime, their parental involvement. What's unique about this survey is what we're trying to do is not just look at the healthy child because the healthy child doesn't exist in a vacuum. It exists within a family and it exists within a community. We're also trying to look at the positive features of what goes on in the child's life. For example in terms of neighborhood, Dr. Singh's paper that he presented at the National Press Club on Tuesday involved looking at childhood obesity and the built-in environment of looking at neighborhood conditions. So this part of the day has been used extensively to give you an idea of the variation across states. The variable with the biggest range across states whether the child attends religious services once a week or more from 25% in Vermont to 75% in Utah. The indicator with the smallest range between states was that the child missed 11 or more days of school during the passed 12 months, a range of only 6%, which tells you that no matter what state you live in parents are pretty smart and can tell when a kid is faking it. Now, one of the things I'd really like you to write down and pay attention to is this website, www.childhealthdata.org. If you go to this website, you don't have to have a background in epidemiology or statistics. You can just go there and query the dataset and get instant information about your state. You can get instant information about your region. If you want to look at a particular variable you can look at it in relation to demographics. You can even do more complicated analysis without having a background in analysis. So, if you work in a state and your director comes to you and says, "You know what? Can you get me some information on such and such really fast?" Yes, you can. Just go to this website. It will also provide technical assistance so if you're stumped they are more than happy to help you. So with that I'm going to turn the next presentation over to Dr. Singh.