



## The National Survey of Children's Health and Behavioral Health Measures

The National Academies June 11, 2015

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### Overview

National Survey of Children's Health (NSCH)

National Survey of Children with Special Health Care Needs (NS-CSHCN)

## History & Purpose of the NSCH/NS-CSHCN



NSCH: Purpose: to produce national and State-based estimates on the health and well-being of children, their families, and their communities.

NS-CSHCN: Purpose: to assess the prevalence and impact of special health care needs among children in the U.S., and to evaluate change over time.

Fielded: 2003, 2007, 2011-12

Fielded: 2001, 2005-06, 2009-10

#### **Common Elements:**

- Historically directed and funded by HRSA MCHB and fielded by the CDC as a module of SLAITS as a RDD telephone survey (landline + cell-phone samples);
- Produces both national and state-level estimates;
- All data are parent/care-giver reported.

## Uses of the NSCH/NS-CSHCN



- Healthy People 2010/2020 Objectives
- Federal policy and program development
- Title V needs assessments and funding
- State-level planning and program development
- Scientific research





#### Selected publications:

- Bitsko RH, Holbrook JR, Visser SN, Mink JW, Zinner SH, Ghandour RM, Blumberg SJ. A national profile of tourette syndrome, 2011-2012. J Dev Behav Pediatr. 2014 Jun;35(5):317-22.
- Bramlett MD, Radel LF. Adverse family experiences among children in nonparental care,
   2011-2012. Natl Health Stat Report. 2014 May; (74):1-9.
- Visser SN, Danielson ML, Bitsko RH, Holbrook JR, Kogan MD, Ghandour RM, Perou R, Blumberg SJ. Trends in the parent-report of health care provider-diagnosed and medicated attention-deficit/hyperactivity disorder: United States, 2003-2011. J Am Acad Child Adolesc Psychiatry. 2014 Jan;53(1):34-46.e2.
- Singh GK, Kenney MK, Ghandour RM, Kogan MD, Lu MC. Mental health outcomes in US children and adolescents born prematurely or with low birthweight. *Depress Res Treat*. 2013;2013:570743.
- Perou R, Bitsko RH, Blumberg SJ, Pastor P, Ghandour RM, Gfroerer JC, Hedden SL, Crosby AE, Visser SN, Schieve LA, Parks SE, Hall JE, Brody D, Simile CM, Thompson WW, Baio J, Avenevoli S, Kogan MD, Huang LN; Centers for Disease Control and Prevention (CDC).
   Mental health surveillance among children--United States, 2005-2011. MMWR Surveill Summ. 2013 May 17;62 Suppl 2:1-35.







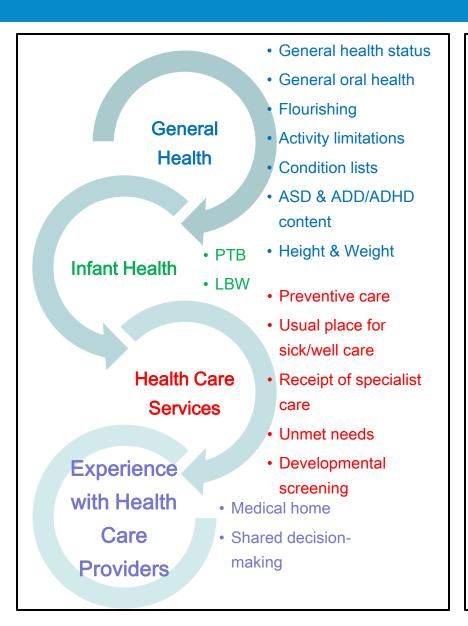




## Emotional and Behavioral Health Content and Related Items











#### **General Health Section:**

Lifetime and current diagnosis of 12 EBDs:

Has a doctor or other health care provider EVER told you that this child has...)

- 1. Anxiety Problems
- 2. Depression
- 3. Behavioral or Conduct Problems\*
- 4. Substance Abuse Disorder\*\*
- 5. Developmental Delay\*
- 6. Intellectual Disability\*
- 7. Speech or other language disorder\*
- 8. Learning Disability\*
- 9. ADD/ADHD
- 10. Autism / Autism Spectrum Disorder
- 11. Tourette Syndrome
- 12. Any Other Mental Health Condition (fill in blank)
- Severity of current diagnoses: Mild, Moderate or Severe

<sup>\*</sup>Can be identified by educator.

<sup>\*\*</sup> Only asked of parents whose children are aged 6 – 17 years.





#### **Treatment:**

- Medication and behavioral treatment (separate) for ADD/ADHD;
- Medication and behavioral treatment (separate) for Autism;
- Receipt of any treatment or counseling from a mental health professional (past 12 months);
- Problems receiving needed mental health treatment or counseling;
- Use of medication because of difficulties with emotions, concentration, or behavior (past 12 months);
- Forgone care... for mental health services (past 12 months);
- Number of ER visits (past 12 months);
- Receipt of special education or an early intervention plan (age at receipt; current use);
- Receipt of special services to meet developmental needs such as speech, occupational, or behavioral therapy (age at receipt; current use).





#### **Other Items:**

- Frequency and degree of [activity] limitations;
- Parental concern about development or behavior;
- Developmental Screening (9-71 months), includes question on problems with behavior and getting along with others;
- Degree to which insurance adequately covers mental and/or behavioral health needs and services;
- Missed school days;
- Parental "aggravation";
- Family burden associated with child health needs (cost, care coordination, reduced employment);
- Healthy and ready to learn ("school readiness");
- Adverse Childhood Experiences (ACEs).
- + Child and family socio-demographic characteristics.





	Parent-Reported Diagnosis		
Survey	Anxiety Problems (ever/current)	Depression (ever/current)	Behavioral or Conduct Problems (ever/current)
2011-12 NSCH	5.0%; 3.3%	3.8%; 2.2%	4.1%; 3.2%
	Moderate/Severe Anxiety Problems**	Moderate/Severe Depression**	Moderate/Severe Behavioral or Conduct Problems*
2011-12 NSCH	1.7%	1.0%	2.2%
2009-10 NS-CSHCN	21.3%; 17.1%	14.9%; 10.3%	16.0%; 13.5%
	Moderate/Severe Anxiety Problems**	Moderate/Severe Depression**	Moderate/Severe Behavioral or Conduct Problems*
2009-10 NS-CSHCN	9.7%	5.6%	9.7%

<sup>\*</sup> Among children aged 2-17 years.

<sup>\*\*</sup> Among children aged 2-17 with current diagnosis.



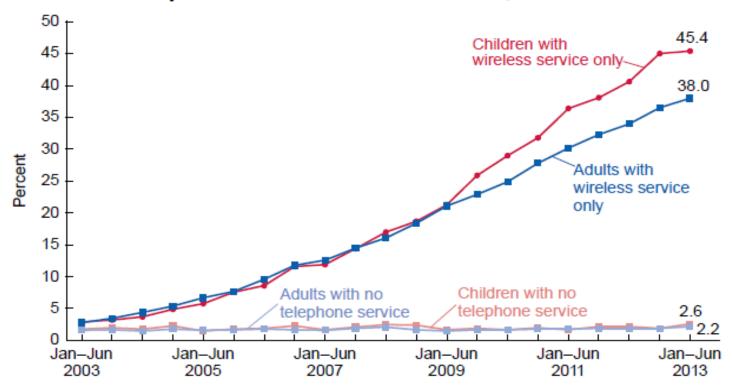


# New Directions: Redesign of the National Survey of Children's Health









NOTE: Adults are aged 18 and over; children are under age 18. SOURCE: CDC/NCHS, National Health Interview Survey.





#### The purpose of the redesign is threefold:

- 1. To shift the survey's sampling frame from landline and cell phone numbers to household addresses.
- 2. To combine the NSCH and NS-CSHCN into a single instrument.
- 3. To provide more timely data.





#### **Timeline of Activities**

- Cognitive interviews: September-October 2014
- Instrument revisions: December 2014-February 2015
- Mode effects experiments: December 2014-March 2015
- Survey pretest: Summer 2015-Spring 2016
- Full survey fielded: Summer-Fall 2016
- Public data release: (late) Spring 2017





#### **Contact Information**

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