

2007 & 2011 National Survey of Children's Health and 2009/10 National Survey of Children with Special Health Care Needs: Measures Pertaining to Healthy People 2020 Objectives

Over the past three decades, the United States Department of Health & Human Services has set forth 10-year national objectives for improving the health of all Americans. On December 2, 2010 the most recent agenda for improving the nation's health was launched: Healthy People 2020. Healthy People 2020 goals were developed over multiple years and reflect input from a broad range of individuals and organizations. They establish benchmarks and help monitor progress to encourage between-sector collaboration, help individuals make informed health decisions and measure the impact of prevention activities. Many items from the National Survey of Children's Health and the National Survey of Children with Special Health Care Needs relate to Healthy People objectives and can be used to help establish a baseline and monitor progress towards improving the health and well-being of children and adolescents in the United States. Learn more about Healthy People at www.healthypeople.gov. Blue shaded measures have the NSCH or the NS-CSHCN as their official data source.

Healthy People 2020 Objective	NSCH/NS-CSHCN Measure(s)	2007 NSCH	2009/10 NS-CSHCN	2011 NSCH	
Healthy People Focus Area: Access to Health Services					
AHS-1: Increase the proportion of persons with health insurance.	Health insurance status at the time of the survey.	✓ (Indicator 3.1)	✓ (Indicator 4)	✓ (Indicator 3.1)	
AHS-2: Increase the proportion of persons with coverage for clinical preventive services.	Health insurance offers benefits that meet child's needs.	√ (K3Q20)	✓ (C8Q01_A)	√ (K3Q20)	
AHS-3: Increase the proportion of persons with a usual primary care provider.	Children with a personal doctor or nurse.	✓ (Indicator 4.9)	✓ (Indicator 10)	✓ (Indicator 4.9)	
AHS-5.2: Increase the proportion of persons who have a specific source of ongoing care (children and youth aged 17 and under).	Children with a usual source of sick and well care.	✓ (Indicator 4.9a)	✓ (C4Q0A\D)	✓ (Indicator 4.9a)	
AHS-6: Reduce the proportion of individuals who are unable to obtain or delay in obtaining medical, dental care or prescriptions	Children with one or more unmet needs for medical, dental, mental health or other types of care.	√ (Indicator 4.6a)		✓ (Indicator 4.6a)	
medicines.	CSHCN with any unmet need for 14 specific health care services or equipment.		✓ (Indicator 6)		
	Healthy People Focus Area: Adolescent Health				
AH-1: Increase the proportion of adolescents who have had a wellness checkup in the past 12 months.	Children with one or more preventive medical care visits in the past 12 months.	✓ (Indicator 4.1)	✓ (K4Q20)	✓ (Indicator 4.1)	
AH-2: Increase the proportion of adolescents who participate in extracurricular and out-of-school activities.	Children age 6-17 years who participate in organized activities outside of school.	✓ (Indicator 5.3)		✓ (Indicator 5.3)	
AH-3: Increase the percentage of adolescents who are connected to a parent or other positive adult caregiver. AH-3.1: Increase the proportion of adolescents who have an adult in their lives with whom they can talk about serious problems.	Parent and child share ideas or talk about things that really matter.	√ (K8Q21)		✓ (K8Q21)	
AH–3.2: Increase the proportion of parents who attend events and activities in which their adolescents participate.	Parent attendance at child's events or activities.	√ (K7Q33)		√ (K7Q33)	

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Healthy People Focus Area: Adolescent Health					
AH-5.5: Increase the proportion of adolescents who consider their school work to be meaningful and important.	Cares about doing well in school	√ (K7Q82)		√ (K7Q82)	
AH-5.6: Decrease school absenteeism among adolescents due to illness or injury.	Number of missed school days due to illness or injury for children age 6-17 years.	✓ (Indicator 1.6)	✓ (Indicator 2)	✓ (Indicator 1.6)	
AH-8: Increase the proportion of adolescents whose parents consider them to be safe at school.	How often child age 6-17 years old is perceived to be safe at school.	✓ (Indicator 7.3)		✓ (Indicator 7.3)	
	Healthy People Focus Area: Disability and Health				
<u>DH-1:</u> Include in the core of Healthy People 2020 population data systems a standardized set of questions that identify "people with disabilities."	CSHCN Screener	✓	√	✓	
<u>DH-4:</u> Reduce the proportion of people with disabilities who report delays in receiving primary and periodic preventive care due to specific barriers.	Reasons for difficulties or delays in getting services.		√ (C4Q03_A- C4Q03_F)		
<u>DH-5:</u> Increase the proportion of youth with special health care needs whose health care provider has discussed transition planning form pediatric to adult health care.	Youth with special health care needs who receive the services necessary for transition for adulthood.		✓ (Outcome 6)		
<u>DH-9:</u> Reduce the proportion of people with disability who encounter barriers to participating in home, school, work or community activities.	Children whose health conditions or problems interfere with school, activity or social participation.	✓ (indicator 1.13)	✓ (C3Q40- C3Q43)	✓ (indicator 1.13	
<u>DH–10:</u> Reduce the proportion of people with disabilities who report barriers to obtaining the assistive devices, service animals, technology services, and accessible technologies that they need.	Unmet needs for each of 14 specific health care services and equipment (including mobility aids or devices, communication aids or devices and durable medical equipment)		√ (Indicator 6)		
	Participation in organized activities outside of school (can be stratified by CSHCN status)	✓ (Indicator 5.3)		✓ (Indicator 5.3)	
<u>DH–13</u> : Increase the proportion of people with disabilities who participate in social, spiritual, recreational, community, and civic	Frequency of participation in volunteer work or community service, age 12-17 (can be stratified by CSHCN status)	✓ (Indicator 5.4)		✓ (Indicator 5.4)	
activities to the degree that they wish.	CSHCN whose health conditions consistently and often greatly affect their daily activities.		✓ (Indicator 1)		
DH-18: Reduce the proportion of people with disability who report serious psychological distress.	Parent report of current depression; parent report of current anxiety.	√ (K2Q32/33A-B)	√ (K2Q32/33A- B)	√ (K2Q32/33A-B	
<u>DH–19</u> : (Developmental) Reduce the proportion of people with disabilities who experience nonfatal unintentional injuries that require medical care.	Injuries requiring medical care (can be stratified by CSHCN status)	✓ (Indicator 1.7)			

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	Healthy People Focus Area: Disability and Health				
<u>DH-20</u> : Increase the proportion of children with disabilities, birth through age 2 years, who receive early intervention services in	Child has an early intervention plan (IFSP/IEP)	√ (Indicator 5.1a)		√ (Indicator 5.1a)	
home or community-based settings.	Child receives Early Intervention Services		✓ (C3Q12)		
	Ithy People Focus Area: Early and Middle Childhood				
<u>EMC-1</u> : (Developmental) Increase the proportion of children who are ready for school in all five domains of healthy development: physical development, social-emotional development, approaches to learning, language, and cognitive development.	Parent's evaluation of developmental status (PEDS) screener.	✓ (K6Q01-09)		√ (K6Q01-09)	
EMC–2.1 : Increase the proportion of parents who report a close relationship with their child.	Parent and child share ideas and talk about things that really matter.			√ (K8Q21)	
EMC–2.2 : Increase the proportion of parents who use positive communication with their child	Parent and child share ideas and talk about things that really matter.			√ (K8Q21)	
EMC-2.3: Increase the proportion of parents who read to their young child.	How often family members read stories to children age 0-5 years.	✓ (indicator 6.7)		✓ (indicator 6.7)	
<u>EMC-2.4:</u> Increase the proportion of parents who receive information from their doctors or other health care professionals when they have a concern about their children's learning, development, or behavior.	How often parents got the specific information needed from child's doctors or health care providers by PEDS.	√ (C5Q43 & K6Q01-09)		✓ (C5Q43 & K6Q01-09)	
EMC-3: Decrease the percentage of children who have poor quality sleep.	How many days per week children get enough sleep for their age.	✓ (Indicator 6.9)		✓ (Indicator 6.9)	
Healthy People Focus Area: Health Communication at Health Information Technology					
<u>HC/HIT-1.1:</u> Increase the proportion of persons who report their health care provider always gave them easy-to-understand instructions about what to do to take care of their illness or health condition.	How often parents got the specific information needed from child's doctors or health care providers.	✓ (C5Q43)	✓ (C6Q05)	✓ (C5Q43)	
HC/HIT-2.3: Increase the proportion of persons who report that their health care provider always showed respect for what they had to say.	How often doctors or HCPs consider and respect parents' health care and treatment choices.		✓ (C6Q24)		
	How often doctors or HCPs are sensitive to family customs and values.	√ (K5Q42)	✓ (C6Q04)	√ (K5Q42)	
HC/HIT-2.4: Increase the proportion of persons who report that their health care provider always spent enough time with them.	How often child's doctors or HCPs spend enough time with child.	√ (K5Q40)	✓ (C6Q02)	√ (K5Q40)	
HC/HIT-3: Increase the proportion of persons who report that their health care providers always involved them in decisions	Shared decision making.		✓ (Outcome #1)		
about their health care as much as they wanted.	How often doctors or HCPs make parent feel like a partner in the child's care.	√ (K5Q44)	√ (C6Q06)	√ (K5Q44)	
Healthy People Fo	cus Area: Hearing and Other Sensory of Communication Disorders				



ENT-VSL-2: Decrease otitis media in children and adolescents.	Parent report of hearing problems or difficulties.	√ (K2Q43A&B)	√ (C3Q22)	✓ (K2Q43A&B)
Healthy People 2020 Objective	NSCH/NS-CSHCN Measure(s)	2007 NSCH	2009/10 NS-CSHCN	2011 NSCH
Healthy F	People Focus Area: Immunization and Infectious Diseases			
<u>IID-11.1:</u> 1 dose of tetanus-diphtheria-acellular pertussis booster vaccine by 13 to 15 years.	Children age 12-17 who have received a tetanus booster or Td or Tdap shot since they turned 11 years old.	√ (K2Q81)		
<u>IID-11.3:</u> 1 dose of Meningococcal vaccine (MCV) by age 13 to 15 years.	Children age 12-17 who have received a meningitis shot.	√ (K2Q82)		
IID-11.4: 3 doses of human papillomavirus vaccine (HPV) for	Females age 12-17 years who have ever received any human papillomavirus shots.	√ (K2Q83)		
females by age 13 to 15 years.	Number of human papillomavirus shots received by females age 12-17 years.	√ (K2Q84)		
Healt	hy People Focus Area: Injury and Violence Prevention			
IVP-2: Reduce fatal and nonfatal traumatic brain injuries.	Parent report of ever and current brain injury or concussion and severity.	√ (K2Q46A-C)	✓ (K2Q44A-C)	√ (K2Q46A-C)
IVP-35: Reduce bullying among adolescents.	Children who bullied or were cruel to others in the past 12 months.	√ (K7Q71)		√ (K7Q71)
Health	y People Focus Area: Maternal, Infant and Child Health			
MICH-8: Reduce low birth weight (LBW) and very low birth weight (VLBW).	Child's birth weight.			√ (K2Q04)
MICH-9: Reduce preterm births.	If child was born premature (3 weeks before his or her due date)			√ (K2Q05)
MICH-21: Increase the proportion of infants who are breastfed	Children age 0-5 years who were ever breastfed.	√ (Indicator 1.3)		✓ (Indicator 1.3)
(21.1-ever; 21.2-at 6 months; 21.3-at 1 year; 21.4-exclusively through 3 months; 21.5-exclusively through 6 months).	Children age 0-5 years who were exclusively breastfed for the first 6 months.	✓ (Indicator 1.3a)		✓ (Indicator 1.3a
MICH-29: Increase the proportion of young children with ASD and other developmental delays who are screened, evaluated and enrolled in early intervention services in a timely manner.	Children who received standardized developmental screening during a health care visit.	✓ (Indicator 4.16)		✓ (Indicator 4.16)
	Children with an early intervention plan.	√ (Indicator 5.1a)		✓ (Indicator 5.1a)
	CSHCN who are screened early and continuously.		√ (Outcome 4)	
MICH-29.4: Increase the proportion of children with a developmental delay with a first evaluation by 36 months of age.	If child received standardized developmental and behavioral screening by age.	√ (Indicator 4.16)		√ (Indicator 4.16)
MICH-29.5: Increase the proportion of children with a developmental delay enrolled in special services by 48 months of	CSHCN age 1-5 with an IFSP or and IEP	√ (Indicator 5.1a)		√ (Indicator 5.1a)
age.	CSHCN age 3-17 receiving Special Education Services.		✓ (C3Q13)	



	Age at which CSHCN start receiving Special Education Services , if CSHCN had an IFSP before age 3.		√ (C3Q13A&B)	
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Health	y People Focus Area: Maternal, Infant and Child Health			
MICH-30/30.1/30.2: Increase the proportion of children, including CSHCN, who have access to a medical home.	Children/CSHCN who receive health care that meets the AAP definition of medical home.	✓ (Indicator 4.8)	✓ (Outcome 2)	✓ (Indicator 4.8)
MICH-31: Increase the proportion of children with special health care needs who receive their care in family-centered,	CSHCN who receive family-centered care.	√ (Indicator 4.9b)	✓ (Indicator 11)	√ (Indicator 4.9b)
comprehensive, coordinated systems. (MICH-31.1 age 0-11 years, MICH 31.2 age 12-17 years)	CSHCN who receive effective care coordination.	✓ (Indicator 4.9d)	✓	√ (Indicator 4.9d)
Healthy	People Focus Area: Mental Health and Mental Disorders			
<u>MHMD-6:</u> Increase the proportion of children with mental health problems who receive treatment.	Children age 2-17 years who receive needed mental health care or counseling.	✓ (Indicator 4.5)	✓ (C4Q05X06-6a)	√ (Indicator 4.5)
Hea	thy People Focus Area: Nutrition and Weight Status			
NWS-10: Reduce the proportion of children and adolescents who are considered obese.	Weight status based on BMI for age among children age 10- 17 years.	✓ (Indicator 1.4)		✓ (Indicator 1.4)
<u>NWS-11:</u> Prevent inappropriate weight gain in youth and adults.	Weight status based on BMI for age among children age 10- 17 years; physical activity	√ (Indicator 1.4 & 1.5)		√ (Indicator 1.4 & 1.5)
	Healthy People Focus Area: Oral Health			
OH-1: Reduce the proportion of children and adolescents with dental caries experience in their primary or permanent teeth.	Children age 1-17 years with decay or cavities in the past 6 months (2007); Children with a toothache, decayed teeth or unfilled cavities in the past 12 months (2011).	√ (K2Q53)		√ (K4Q39)
<u>OH–2:</u> Reduce the proportion of children and adolescents with untreated dental decay.	Unmet needs for dental care.	√ (Indicator 4.6a)	✓ (K4Q21- C4Q05_31A)	√ (K4Q27-8)
OH-7: Increase the proportion of children and adults who use the oral health care system each year. OH-8: Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year.	Children who had one or more preventive dental care visits in the past year.	✓ (Indicator 4.2)	√ (C4Q05_X031 - C4Q05_X032)	✓ (Indicator 4.2)
	Healthy People Focus Area: Physical Activity			
PA-3: Increase the proportion of adolescents who meet current federal physical activity guidelines for aerobic physical activity.	How many days per week children age 6-17 years participate in vigorous physical activity for at least 20 mins.	(Indicator 1.5)		√ (Indicator 1.5)
<u>PA-8:</u> Increase the proportion of adolescents who do not exceed recommended limits for screen time.	Average time children age 6-17 years spend watching TV, videos or playing video games on an average weekday.	√ (Indicator 6.10)		✓ (Indicator 6.10)
<u>PA-8.1:</u> Increase the proportion of children aged 0 to 2 years who view no television or videos on an average weekday.	Average time spent watching TV or videos on an average weekday, age 1-5 years	✓ (Indicator 6.10a)		✓ (Indicator 6.10a)



PA-8.2.1: Increase the proportion of children age 2 to 5 years who view television, videos, or play video games for no more than 2 hours a day.	Average time spent watching TV or videos on an average weekday, age 1-5 years	√ (Indicator 6.10a)		✓ (Indicator 6.10a)
Healthy People 2020 Objective	NSCH/NS-CSHCN Measure(s)	2007 NSCH	2009/10 NS-CSHCN	2011 NSCH
	Healthy People Focus Area: Physical Activity			
<u>PA-8.2.2:</u> Increase the proportion of children and adolescents age 6 to 14 years who view television, videos, or play video games for no more than 2 hours a day.	Average time children age 6-17 years spend watching TV, videos or playing video games on an average weekday.	√ (Indicator 6.10)		✓ (Indicator 6.10)
<u>PA-8.2.2:</u> Increase the proportion of adolescents grades 9 through 12 who view television, videos, or play video games for no more than 2 hours a day.	Average time children age 6-17 years spend watching TV, videos or playing video games on an average weekday.	√ (Indicator 6.10)		✓ (Indicator 6.10)
<u>PA-8.3.2:</u> Increase the proportion of children and adolescents aged 6 to 14 year who use a computer or play computer games outside of school (for nonschool work) for no more than 2 hours a day.	Average time children age 6-17 years spend watching TV, videos or playing video games on an average weekday.	√ (K7Q51)		✓ (K7Q60B)
PA-8.3.3: Increase the proportion of children and adolescents grades 9 through 12 who use a computer or play computer games outside of school (for nonschool work) for no more than 2 hours a day.	Average time spent on computer (2011 only: cell phone, handheld video games and other electronic devices) for non-schoolwork purposes on an average weekday.	√ (K7Q51)		✓ (K7Q60B)
l day.				
	Healthy People Focus Area: Respiratory Diseases			
	Healthy People Focus Area: Respiratory Diseases Health conditions affect ability to do things by presence of current asthma.	√ (Indicator 1.13, K2Q40A-B)	✓ (C3Q40-43, K2Q40A-B)	√ (Indicator 1.13, K2Q40A-B)
RD-4: Reduce activity limitations among persons with current	Health conditions affect ability to do things by presence of	(Indicator 1.13,	(C3Q40-43,	(Indicator 1.13,
RD-4: Reduce activity limitations among persons with current asthma. RD-5.1: Reduce the proportion of children aged 5 to 17 years with asthma who miss school days.	Health conditions affect ability to do things by presence of current asthma. Missed school by presence of current asthma. Healthy People Focus Area: Sleep Health	(Indicator 1.13, K2Q40A-B) ✓ (Indicator 1.6, K2Q40A-B)	(C3Q40-43, K2Q40A-B) ✓ (Indicator 2,	(Indicator 1.13, K2Q40A-B) ✓ (Indicator 1.6, K2Q40A-B)
RD-4: Reduce activity limitations among persons with current asthma. RD-5.1: Reduce the proportion of children aged 5 to 17 years	Health conditions affect ability to do things by presence of current asthma. Missed school by presence of current asthma. Healthy People Focus Area: Sleep Health Nights per week child gets enough sleep for his or her age, age 6-17 years.	(Indicator 1.13, K2Q40A-B) ✓ (Indicator 1.6,	(C3Q40-43, K2Q40A-B) ✓ (Indicator 2,	(Indicator 1.13, K2Q40A-B) ✓ (Indicator 1.6,
RD-4: Reduce activity limitations among persons with current asthma. RD-5.1: Reduce the proportion of children aged 5 to 17 years with asthma who miss school days. SH-3: Increase the proportion of students in grades 9 through 12	Health conditions affect ability to do things by presence of current asthma. Missed school by presence of current asthma. Healthy People Focus Area: Sleep Health Nights per week child gets enough sleep for his or her age, age 6-17 years. Healthy People Focus Area: Substance Abuse Need and receipt of substance abuse treatment and counseling, CSHCN age 8-17 years.	(Indicator 1.13, K2Q40A-B) ✓ (Indicator 1.6, K2Q40A-B)	(C3Q40-43, K2Q40A-B) ✓ (Indicator 2,	(Indicator 1.13, K2Q40A-B) ✓ (Indicator 1.6, K2Q40A-B)
RD-4: Reduce activity limitations among persons with current asthma. RD-5.1: Reduce the proportion of children aged 5 to 17 years with asthma who miss school days. SH-3: Increase the proportion of students in grades 9 through 12 who get sufficient sleep. SA-8: Increase the proportion of persons who need alcohol and/or illicit drug treatment and received specialty treatment for abuse or dependence in the past year.	Health conditions affect ability to do things by presence of current asthma. Missed school by presence of current asthma. Healthy People Focus Area: Sleep Health Nights per week child gets enough sleep for his or her age, age 6-17 years. Healthy People Focus Area: Substance Abuse Need and receipt of substance abuse treatment and counseling, CSHCN age 8-17 years. Healthy People Focus Area: Tobacco Use	(Indicator 1.13, K2Q40A-B) ✓ (Indicator 1.6, K2Q40A-B)	(C3Q40-43, K2Q40A-B) (Indicator 2, K2Q40A-B)	(Indicator 1.13, K2Q40A-B) ✓ (Indicator 1.6, K2Q40A-B)
RD-4: Reduce activity limitations among persons with current asthma. RD-5.1: Reduce the proportion of children aged 5 to 17 years with asthma who miss school days. SH-3: Increase the proportion of students in grades 9 through 12 who get sufficient sleep. SA-8: Increase the proportion of persons who need alcohol and/or illicit drug treatment and received specialty treatment for abuse or dependence in the past year. TU-11: Reduce the proportion of nonsmokers exposed to secondhand smoke.	Health conditions affect ability to do things by presence of current asthma. Missed school by presence of current asthma. Healthy People Focus Area: Sleep Health Nights per week child gets enough sleep for his or her age, age 6-17 years. Healthy People Focus Area: Substance Abuse Need and receipt of substance abuse treatment and counseling, CSHCN age 8-17 years. Healthy People Focus Area: Tobacco Use Children living in households where someone living there smokes tobacco products; children living in households	(Indicator 1.13, K2Q40A-B) (Indicator 1.6, K2Q40A-B) (K7Q40)	(C3Q40-43, K2Q40A-B) (Indicator 2, K2Q40A-B)	(Indicator 1.13, K2Q40A-B) (Indicator 1.6, K2Q40A-B) (K7Q40)
RD-4: Reduce activity limitations among persons with current asthma. RD-5.1: Reduce the proportion of children aged 5 to 17 years with asthma who miss school days. SH-3: Increase the proportion of students in grades 9 through 12 who get sufficient sleep. SA-8: Increase the proportion of persons who need alcohol and/or illicit drug treatment and received specialty treatment for abuse or dependence in the past year. TU-11: Reduce the proportion of nonsmokers exposed to	Health conditions affect ability to do things by presence of current asthma. Missed school by presence of current asthma. Healthy People Focus Area: Sleep Health Nights per week child gets enough sleep for his or her age, age 6-17 years. Healthy People Focus Area: Substance Abuse Need and receipt of substance abuse treatment and counseling, CSHCN age 8-17 years. Healthy People Focus Area: Tobacco Use Children living in households where someone living there	(Indicator 1.13, K2Q40A-B) ✓ (Indicator 1.6, K2Q40A-B) ✓ (K7Q40)	(C3Q40-43, K2Q40A-B) (Indicator 2, K2Q40A-B)	(Indicator 1.13, K2Q40A-B) (Indicator 1.6, K2Q40A-B) (K7Q40)





adolescents aged 17 years and under.	CSHCN who have difficulty seeing even when wearing	✓	
	glasses or contact lenses.	(C3Q21)	