

## INTRODUCTION

The health of the child population is reflective of the overall health of a Nation, and has many implications for the Nation's future as these children grow into adults. Physical, mental, and emotional health affect virtually every facet of life, such as learning, participation in leisure activities, and employment. Health habits established in childhood often continue throughout the lifespan, and many health problems in childhood, such as obesity and poor oral health, influence health into adulthood. Effective policies and programs are important to the establishment of healthy habits and the mitigation of risk factors for disease. However, the health and health care needs of children change over time, and current data on these issues is critically important as policy makers and program planners seek to maximize the health of children, now and into the future.

In 2010, nearly 25 percent of the U.S. population was under 18 years of age. The racial and ethnic composition of the child population is shifting, with a growing population of Hispanics and a decline in the representation of non-Hispanic Whites. In addition to race and ethnicity, the demographic composition of a population can also be characterized by factors such as nativity, poverty, and geographic location. In 2009, 21.9 percent of children in the United States had at least one foreign-born

parent. Of all children, 18.9 percent were U.S.-born with a foreign-born parent or parents, and 3.0 percent were themselves foreign-born. In the same year, over 15 million children under 18 years of age lived in households with incomes below 100 percent of the U.S. Census Bureau's poverty threshold (\$21,954 for a family of four in 2009), representing 20.7 percent of all children in the United States. Differences in health risks have also been observed for children by geographic location. In 2007, about 82 percent of children lived in urban areas while 18 percent lived in either large or small/isolated rural areas. Children in rural areas—particularly those in small or isolated rural communities—were more likely to be overweight or obese than children living in urban areas.

Good health begins before birth. Timely prenatal care is an important preventive strategy that can help protect the health of both mother and child. In 2008, 71.0 percent of women began prenatal care during the first trimester (according to data from areas using the “revised” birth certificate (For more information, please see page 67). A small proportion of women (7.0 percent) did not receive prenatal care until the third trimester, or did not receive any at all.

Following birth, there are a variety of preventive or protective factors that can affect a child's health. Vaccination is a preventive health measure that begins immediately after birth and

protects into adulthood. Vaccines are available for a number of public health threats, including measles, mumps, rubella (German measles), polio, diphtheria, tetanus, pertussis (whooping cough), hepatitis B, and varicella (chicken pox). In 2009, 70.5 percent of children 19–35 months of age received this recommended series of vaccines. This estimate excludes receipt of the *Haemophilus influenzae* type b vaccine (Hib) which has been presented in previous editions of *Child Health USA*. For more information, please see page 57.

Breastfeeding is also an important protective factor, and rates have increased steadily since the beginning of the last decade. In 2007, 75.5 percent of children through age 5 had been breastfed for some period of time. Although recommended by the American Academy of Pediatrics, only 12.4 percent of children were breastfed exclusively (without supplemental food or liquids) for the first 6 months of life. Exclusive breastfeeding through the first 6 months of life was more common among older mothers and mothers with more than a high school level education.

Family and neighborhood characteristics can also play a role in the health and well-being of children. In 2009, 71.4 percent of women with children under 18 years of age were in the labor force (either employed or looking for work). Mothers with children under 6 years of age were