



INTRODUCTION

The effectiveness of a health care system is measured not only in how it treats sickness or disease, but in how it utilizes prevention to maintain a population's health. Through services such as prenatal care and immunization, as well as promotion of healthy choices in life, prevention is critical in assuring that children are born healthy and that they maintain good health as they grow older. These choices affect both children and their families, beginning early in pregnancy and continuing throughout childhood, adolescence, and young adulthood, and require the continuing effort of individuals, communities, and health care providers.

As of July 2003, there were 81.2 million children ages 19 and under in the United States, and another 20.7 million young adults ages 20 to 24. The indicators in this book demonstrate that we have thus far achieved mixed success in promoting the health of these children and their families. For instance, although rates of maternal and infant mortality have dropped dramatically in the past century, the United States still has one of the highest rates of infant death in the industrialized world. In 2002, of every 1,000 live births, 7 babies died in their first year of life, and in some communities the rate of infant mortality is much higher. In 2000 the U.S. infant mortality rate

was 27th among industrialized nations.

One important means of preventing infant mortality is improving the health of infants at birth. The rate of low birth weight (LBW) — a weight of less than 2500 grams (5.8 pounds) at birth — has been steadily increasing since 1985, when LBW babies represented 6.8 percent of live births; in 2002, 7.8 percent of all live births were of low weight. Very low birth weight (VLBW) babies — those weighing less than 1500 grams — represented 1.5 percent of births. VLBW babies are particularly likely to have long-term health and developmental problems.

Good health care during pregnancy is a preventive strategy that assures the health of both mother and child. Overall, early entry into prenatal care (in the first 3 months of pregnancy) has been improving, reaching 83.7 percent of pregnant women in 2002. Unfortunately, this rate is lower for younger women as well as Black and Hispanic women. Some pregnant women (3.6 percent in 2002) go without prenatal care entirely or forgo these services until the third trimester of their pregnancy.

Good breastfeeding habits are another important step that parents can take to assure the health of their babies. Breast milk has a number of preventive health benefits for both mother and child. The benefits of breastfeeding include prevention of diarrhea and infections in

infants, as well as long-term preventive effects for the mother, including earlier return to pre-pregnancy weight and reduced risk of premenopausal breast cancer and osteoporosis. In 2002, 70.1 percent of mothers breastfed in the hospital, the highest rate yet recorded. However, rates of breastfeeding decline dramatically after the initial months of life, and only 33.2 percent of mothers report that they are still breastfeeding their infants at 6 months of age. These rates are lowest among Black mothers, with 53.9 percent reporting breastfeeding in the hospital, and only 19.2 breastfeeding at 6 months.

As children grow older, prevention efforts are aimed at avoiding injuries and adopting healthy habits for adulthood. Unintentional injuries — most of which are preventable — are the leading cause of death for children aged 1-14, causing the deaths of 4,359 children in 2002. The leading causes of death due to all injuries for this age group were motor vehicle crashes, drowning, firearms, and fires. This varies by age group, as fire is a major cause of injury death among young children, while firearms more often affect older children.

Prevention efforts appear to be succeeding in reducing rates of pediatric Acquired Immune Deficiency Syndrome (AIDS). Only 158 new cases of AIDS in children under age 13 were reported in 2002, which represents a drastic

reduction over the past decade. Much of this reduction is due to prevention efforts, including an increase in treatment for pregnant women before, during, and after birth to reduce perinatal HIV transmission. A 1994 recommendation by the U.S. Public Health Service that all pregnant women receive such treatments, and a 1995 recommendation for HIV counseling and voluntary testing among all pregnant women, have helped to reduce transmission rates.

Immunization is probably the preventive health service that is most recognized among the public. Vaccines are available for such public health threats as measles, mumps, rubella (German measles), polio, diphtheria, tetanus, pertussis (whooping cough), and *H. Influenzae* type b (the bacterium that causes meningitis). A 2002-2003 survey released by the Centers for Disease Control and Prevention shows that 77.9 percent of children aged 19-35 months have been immunized with the recommended series of vaccines. Although this is a huge public health success, significant progress is still needed to reach the 2010 goal of immunizing at least 90 percent of children by 35 months of age.

Dental care is another important preventive service, one that too few children receive regularly. Overall, 70.6 percent of children visited a dentist within the past year, but among children from low-income families, this

proportion was only 61.7 percent. According to the U.S. Surgeon General, dental caries is the single most common chronic disease among children, and it can be prevented with regular dental care.

Adolescence is a time of risk-taking, but it is also the time when life-long health habits are formed. The indicators in this book show improvement in some areas of adolescent health, but teens are still exposed to a number of risks that threaten both their health and their potential for independence and success in life, such as unplanned childbearing. Childbearing among adolescents has been declining in recent years, and in 2002 rates reached an historic low of 43 births per 1,000 teens ages 15 to 19. This represents a 30 percent decrease in adolescent childbearing since 1991. The greatest decrease in adolescent childbearing has been among Black youth, with a 42 percent decline from 1991 to 2002. Although there has been a decline among all racial and ethnic groups, Hispanic youth have experienced the least dramatic decline; the rate among Hispanics has dropped only 20 percent, leaving them with the highest rate — 83.4 births per 1,000 teens in 2002.

Although smoking remains a major threat to the health of adolescents, prevention efforts have resulted in a large decline in cigarette use among teens. Among 8th graders, reports of

cigarette use over a 30-day period declined 51.4 percent between 1996-97 and 2003. There were smaller, although still significant, drops in cigarette smoking among 10th and 12th graders, as well (45 percent and 33 percent, respectively).

Regular, vigorous exercise is another health habit with benefits that can last a lifetime. Overall, almost two-thirds of high school students regularly participated in sufficient vigorous physical activity in 2003, and nearly one-quarter participated in sufficient moderate activity. These proportions have declined slightly since 2001, but more students report playing on one or more sports teams and being enrolled in physical education classes.

Treatment for mental, emotional, and behavioral problems can be a critical component of adolescent health care. Nationally, nearly 20 percent of teens received mental health treatment or counseling in 2002, primarily for feelings of depression, breaking rules or acting out, suicidal thoughts or attempts, and feeling very afraid or tense. The most common sources of this treatment were private therapists, followed by school counselors or psychologists.

As many of the statistics here reveal, mental health and well-being is a critical component of children's overall health. Mental disorders are the leading cause of hospitalizations for children aged 10 to 14 and the second leading cause of

hospitalizations for adolescents. Suicide is the third leading cause of death for adolescents and is the fifth leading cause of death for 5- to 14-year-olds. Certain high-risk factors, such as poverty and maternal depression, also affect a child's well-being and overall health. Screening for mental health and substance abuse problems, as appropriate, intervening early, and providing access and linkages to services and supports can help to prevent the tragic consequences of mental health and/or substance abuse problems and mental and/or addictive disorders for children and their families.

Health insurance is critical in assuring that children receive both the preventive and treatment services they need. In 2002, 12 percent (8.5 million) children under 18 were without health coverage. Over one-fourth (26.8 percent) were covered under public insurance. The State Children's Health Insurance Program (SCHIP), created under the Balanced Budget Act of 1997, allows States to extend comprehensive insurance to children in low-income families who are not eligible for the Medicaid program. As of the end of Federal Fiscal Year 2003, 5.8 million children had been enrolled in SCHIP since its inception. As of 2002, children in families at 200% of the Federal poverty level were eligible for insurance through Medicaid or SCHIP in 26 states. In another 12 states, the eligibility

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level exceeded 235% of the poverty level.

The statistics presented in *Child Health USA 2004* are essential for both appreciating America's numerous public health achievements and recognizing the challenges that we still face. Prevention and health promotion include a range of public health strategies including providing access to knowledge, skills, and tools; providing drug-free activities for youth; identifying risk factors and linking people to services and supports; building community processes, such as coalitions; and environmental approaches that promote policy changes. These prevention efforts are vital if we are to continue the improvements that we are making in the health and well-being of America's children and families.

