

DEVELOPMENTAL SCREENING

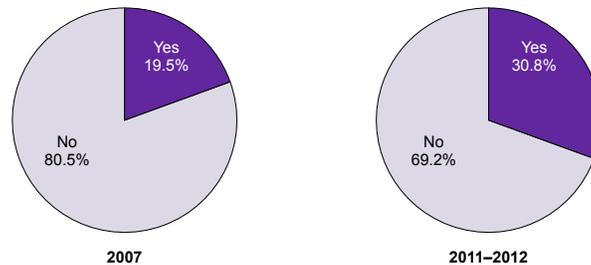
Since 2006, the American Academy of Pediatrics (AAP) has recommended that assessment for developmental problems among young children be incorporated into every preventive health visit and that formal screening occur at regular intervals, including the 9-, 18-, and either 24- or 30-month well-child visits.¹ Developmental screening is critical to the early identification of developmental delays and the provision of early intervention services and treatments that have the capacity to change both short- and long-term developmental trajectories of children who may be experiencing such delays or have a developmental disability. The importance of timely developmental screening is underscored by its inclusion as a national objective for Maternal, Infant, and Child Health in *Healthy People 2020*.²

In 2007, 1 year after the AAP recommendation, approximately one-fifth (19.5 percent) of U.S. children aged 10–71 months were reported to have received a standardized developmental screening.³ Data from the latest National Survey of Children's Health, however, show that this proportion has risen dramatically since then: In 2011–2012, nearly one-third (30.8 percent) of children aged 10–71 months had received such a screening in the previous 12 months (figure 1).

In 2011–2012, few significant differences were observed among children with respect to receipt of developmental screening and their demographic or household characteristics. Children living in households with two biological or adoptive parents were more likely than those in "other" family structures (i.e., those not living with two parents or a single mother) to have received a standardized developmental screening (31.2 versus 24.9 percent, respectively).

No differences, however, were observed with respect to the child's race and ethnicity, poverty, or health insurance status or type, as was observed in 2007. At that time, non-Hispanic Black children (24.4 percent) were more likely than non-Hispanic White and Hispanic children (18.6 and 19.1 percent, respectively) to have been assessed for developmental delay through a parent-reported standardized screening tool. Also in 2007, parents of poor children, or those living in households with incomes of less than 100 percent of poverty, were more likely to report having completed this kind of evaluation compared to those living in households with incomes of 400 percent or more of poverty (21.5 versus 17.2 percent, respectively). Finally, children with public health insurance coverage were significantly more likely to

Figure 1. Receipt of Developmental Screening* in the Past 12 Months Among Children Aged 10–71 Months, 2007 and 2011–2012



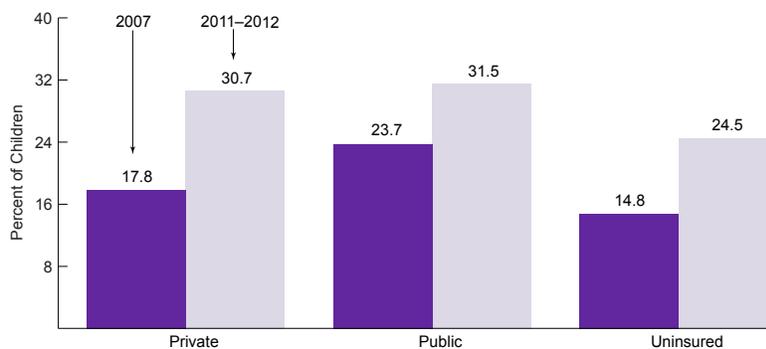
*Among children who had a preventive health visit in the past 12 months. Parents reported whether they completed a questionnaire about their child's development, communication, or social behaviors during the previous 12 months and, if so, whether the questionnaire included age-appropriate follow-up items on language or social development.

have been screened for developmental delay in 2007 (23.7 percent) than either those with private coverage (17.8 percent) or no coverage (14.8 percent); no significant difference in the rate of screening was observed at that time between those with private coverage and those without any coverage at the time of the survey (figure 2).

The overall increase in the rate of developmental screening and the reduction in some disparities in the receipt of this type of evaluation suggests that efforts such as those by the AAP and Healthy People may be raising awareness of the importance of developmental

screening. Additional analyses of data from the 2007 National Survey of Children's Health indicates that health care providers may also be using informal means to inquire about parents' and caregivers' concerns regarding their children's development. Such approaches, while potentially important to parent-provider relationships, should not be viewed as a substitute for screening using a standardized tool.⁴ Much work remains to be done, with less than one-third of children receiving this important preventive service in 2011–2012.

Figure 2. Receipt of Developmental Screening* in the Past 12 Months Among Children Aged 10–71 Months, by Health Insurance, 2007 and 2011–12



*Among children who had a preventive health visit in the past 12 months. Parents reported whether they completed a questionnaire about their child's development, communication, or social behaviors during the previous 12 months and, if so, whether the questionnaire included age-appropriate follow-up items on language or social development.

Data Sources

Figure 1 and 2. U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau; and U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health. Analyzed by the Health Resources and Services Administration's Maternal and Child Health Bureau.

Endnotes

1. American Academy of Pediatrics, Council on Children With Disabilities, Section on Developmental and Behavioral Pediatrics, Bright Futures Steering Committee and Medical Home Initiatives for Children With Special Needs. Identifying infants and young children with developmental disorders in the medical home: an algorithm for developmental surveillance and screening. *Pediatrics*. 2006;118(1):405–420. Correction in *Pediatrics*. 2006;118(4):1808–1809.
2. U.S. Department of Health and Human Services. Health People 2020 Maternal, Infant, and Child Health Objective 20.1: Increase the proportion of children (aged 10–35 months) who have been screened for an Autism Spectrum Disorder (ASD) and other developmental delays. Available at: <http://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health/objectives?topicid=26>. Accessed September 12, 2014.
3. Bethell C, Reuland C, Schor E, Abrahms M, Halfon N. Rates of parent-centered developmental screening: disparities and links to services access. *Pediatrics*. July 2011;128(1):146–155.
4. Rice CE, Naarden Braun KV, Kogan MD, et al. Screening for developmental delays among young children—National Survey of Children's Health, United States, 2007. *MMWR Surveillance Summaries: Morbidity and Mortality Weekly Report*. September 12, 2014;63:27–35.

Suggested Citation

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