

**The Mental
and Emotional
Well-Being of
Children:**

A Portrait of States
and the Nation
2007



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Note: These data are based entirely on parental reports and have not been independently verified. In addition, they only include children whose parents reported that they have been told that they have one of these conditions by a doctor or other health care provider.

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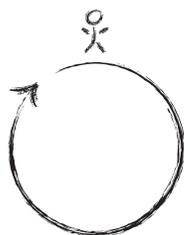


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Introduction

Children, like adults, may have mental health problems, including depression and anxiety. They may also have behavioral conditions, such as conduct disorders; cognitive disorders, such as autism spectrum disorder; or neurological conditions, such as Tourette Syndrome. Children may also be affected by delays in their physical, cognitive, or emotional development.

The 2007 National Survey of Children's Health asked parents whether their children had ever been diagnosed with, and currently had, any of these seven conditions. (The exact wording of the questions asked in the survey is presented in Appendix B.) This chartbook addresses the health and well-being of the population of children whose parents reported that their children had at least one of these conditions. Note, however, that these data are based entirely on parental reports and have not been independently verified; in addition, they only include children whose parents reported that they have been told that they have one of these conditions by a doctor or other health care provider.

The seven conditions included here—depression, anxiety, Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder (ADD/ADHD), conduct disorders, autism spectrum disorders, developmental delay, and Tourette Syndrome—may be grouped together as emotional, behavioral, or developmental conditions. Overall, these conditions affect 11.3 percent of children in the United States, or nearly 7.4 million children. Of these

children, nearly two-thirds (65.7 percent) are boys, more than half (51.1 percent) are between the ages of 12 and 17 years, and nearly one-quarter (24.8 percent) have family incomes below the Federal poverty level. Boys, adolescents, and children from low-income families are all disproportionately represented among children with reported emotional, behavioral, or developmental conditions compared to the population of children in general.

Many children have more than one of these seven diagnoses: 40.3 percent of children with at least one emotional, behavioral, or developmental condition have more than one of the seven conditions. These conditions also frequently overlap with learning disabilities. Of children at least 3 years of age with at least one emotional, behavioral, or developmental condition, 45.8 percent also had learning disabilities, compared to 2.7 percent of children without these conditions. In addition, one-third of children with emotional, behavioral, or developmental conditions also had at least one of seven physical health conditions addressed in the survey (asthma; diabetes; bone, joint, or muscle problems; hearing problems; vision problems; epilepsy or seizure disorder; and brain injury or concussion).

Children with emotional, behavioral, or developmental conditions are no more likely than other children to be uninsured or to have gaps in their health coverage. However, they are more likely to be insured through public programs: 43.7 percent of

children with these conditions have public insurance, compared to 26.2 percent of children without these conditions. They are also more likely to have insurance that does not adequately meet their needs. Parents of insured children were asked whether their out-of-pocket costs were reasonable, whether the plan offered benefits or covered services that met their child's needs, and whether their child was allowed to see the providers he or she needed. Of children with emotional, behavioral, or developmental conditions with insurance, 29.4 percent were reported to have insurance that did not usually or always meet all of these criteria, compared to 23.8 percent of children without these conditions.

A "medical home," or a consistent source of medical care that meets criteria of accessibility, continuity, comprehensiveness, coordination, compassion, and cultural sensitivity, is particularly critical for any child with a chronic condition, including emotional, behavioral, or developmental conditions. Unfortunately, only 40.2 percent of children with these conditions were reported to get their care through a medical home, compared to 58.5 percent of other children.

Children with emotional, behavioral, or developmental conditions can benefit from a variety of services and therapies, including counseling and medications. However, not all children with these conditions are reported to receive these services. Overall, 45.6 percent of children with at least one of the seven conditions



received needed mental health services, according to their parents, and just half (50.1 percent) took medications for their conditions in the past year. This finding implies that mental health services for children remains an area of great unmet need.

Having an emotional, behavioral or developmental condition may affect a variety of important developmental and social processes during childhood and adolescence. Children with at least one of the seven conditions are more likely than other children to repeat a grade in school, and are less likely to be engaged in school, according to their parents. They are less likely to consistently exhibit positive social skills, and more likely to show problematic behaviors such as bullying or arguing. However, it should be noted that these differences are not necessarily attributable to the children's conditions; other factors, such as the family's situation and the child's neighborhood environment, may be involved as well.

The health of a child and the health of the entire family are interdependent. The parents of children with emotional, behavioral, or developmental conditions are more likely than the parents of children without these conditions to report that they usually or always feel at least one form of parenting stress (30.9 and 8.2 percent, respectively.) Parents' physical and mental health is also closely related to that of their children, and both mothers and fathers of children with emotional, behavioral, or developmental conditions are less likely to report that they are

in excellent or very good physical and mental health than parents of children without these conditions.

Finally, child care can present substantial challenges in any family with young children, and these challenges only increase when children have emotional, behavioral, or developmental conditions. Of children aged 2 to 5 years with at least one of these conditions, 62.5 percent received some form of nonparental child care. The parents of 46.2 percent reported having at least one problem with child care, including having to make different child care arrangements in the past month due to circumstances outside their control, or having to quit a job, not take a job, or greatly change their job in the past year because of child care problems.

This chartbook presents a range of indicators on the health and well-being of children who have been diagnosed with emotional, behavioral, or developmental conditions on the national level. For each state, we show the prevalence of the seven conditions (grouped together) and the major demographic characteristics of children who have at least one of the conditions. Together, these data paint a picture of a large and diverse population of children with multiple, complex needs. These children and their families may need services—including mental and physical health care, special education, and social services and support—from a variety of systems and providers. These analyses provide a useful first step in delineating the relationships among these conditions, children's socioeco-

omic characteristics, and access to health care. However, much more research is needed to fully understand these complex relationships.

The NSCH is sponsored by the Health Resources and Services Administration's Maternal and Child Health Bureau. The Technical Appendices at the end of this book presents information about the survey methodology and sample and the specific questions that were asked about emotional, behavioral, and developmental conditions. For more in-depth information about the survey and its findings, other resources are available. For more detailed analyses of the survey's findings, the Data Resource Center on Child and Adolescent Health web site provides online access to the survey data. The interactive data query feature allows users to create their own tables and to compare survey results at the national and state levels and by relevant subgroups such as age, race/ethnicity, and household income. The Child & Adolescent Health Measurement Initiative (CAHMI) leads the Data Resource Center (DRC) in partnership with state and family leaders, including Title V leaders, Family Voices, other family organizations and public and private sector child health data experts. The web site for the DRC is: <http://www.nschdata.org>. More complex analyses can be conducted using the public use data set available from the National Center for Health Statistics at: <http://www.cdc.gov/nchs/about/major/slait/nsch.htm>.