Health Status

The survey asked parents to rate their children’s overall health status as excellent, very good, good, fair, or poor. While this indicator does not give a complete picture of a child’s health, it gives a general sense of the child’s health and well-being.

In all locations, over 80 percent of children were reported to be in excellent or very good health. This percentage did not vary significantly by location.

In all locations, younger children were more likely than adolescents to be in excellent or very good health. In both small and large rural areas, fewer than 80 percent of children aged 12-17 years were reported to be in excellent or very good health. The health status of children within each age group did not vary substantially by area of residence.

Children’s health status varied more widely across locations within specific racial and ethnic groups. For example, among Black children, 81.2 percent of those living in urban areas were reported to be in excellent or very good health, compared to 72.8 percent of those in small rural areas. This difference is also significant among White children: 91.9 percent of those in urban areas were reported to be in excellent or very good health, compared to 87.7 percent of those in small rural areas. The group with the poorest reported health status was Hispanic children who primarily speak Spanish, regardless of where they lived.
Oral Health Status

Parents of children at least one year old were also asked to describe the status of their children’s teeth as excellent, very good, good, fair, or poor. The percentage of children with excellent or very good oral health did not vary substantially across locations.

In all locations, the youngest children (aged 1-5 years) were the most likely to have excellent or very good oral health, with percentages ranging from 78.3 percent in urban areas to 69.7 percent in small rural areas. The oral health of children in the older age categories was similar across locations.

The oral health of children within each racial and ethnic group varied by location. Among White children, 81.8 percent of those in urban areas were reported to have excellent or very good oral health, compared to 77.3 percent of those in large rural areas and 74.9 percent of those in small rural areas. Among Black children, these percentages range from 63.4 percent of urban children to 55.0 percent of children in small rural areas. Hispanic children whose families primarily speak Spanish were the least likely to be in excellent or very good oral health, regardless of location.
Breastfeeding

Breast milk is widely recognized to be the ideal form of nutrition for infants. Breastfed infants were less susceptible to infectious diseases and children who were breastfed were less likely to suffer from diabetes; overweight and obesity; asthma; and lymphoma, leukemia, and Hodgkin’s disease compared to children who were not breastfed. In addition, rates of postneonatal mortality (death between the first month and the end of the first year of life) were lower among breastfed infants. Therefore, the American Academy of Pediatrics recommends that, with few exceptions, all infants be fed with breast milk exclusively for the first 6 months of life.

Overall, 75.5 percent of children aged 5 and younger were ever breastfed or fed breast milk. Urban children were considerably more likely than those in rural areas to have ever been fed breast milk: 77.0 percent were ever breastfed, compared to 67.6 percent of children in large rural areas and 69.8 percent of those in small rural communities.

In all locations, breastfeeding was more common in families with higher household incomes. Children in urban areas with household incomes of 400 percent of the Federal poverty level (FPL) or more were the most likely ever to be breastfed (83.9 percent), and in each location, breastfeeding rates were highest among children with the highest household incomes. Likewise, the lowest rates were found among children with incomes below the FPL, ranging from 68.7 percent of children in urban areas to 51.5 percent of those in large rural areas.

Breastfeeding also varied by location within certain racial and ethnic groups. Among both White and Black children, those in urban areas were more likely than those in either large or small rural areas ever to be breastfed. Overall, the highest rate of breastfeeding was found among Hispanic children whose families primarily spoke Spanish in urban areas (88.1 percent), and the lowest was among Black children in large rural areas (32.5 percent).
Overweight and Obesity

Parents' reports of their children's height and weight can be used to calculate children's Body Mass Index (BMI), a ratio of weight to height. Children whose BMI falls between the 85th and 95th percentiles for their age and sex were considered to be overweight, and those with a BMI at or above the 95th percentile for their sex and age were considered to be obese. Although the survey collects data on height and weight for children of all ages, BMI is only calculated for children aged 10 to 17 because parent-reported height and weight were more reliable for this age group than they were for younger children. Overall, 3.16 percent of children met the criteria for overweight or obesity based on their parent-reported weight and height.

Children living in small rural areas were more likely than urban children to be overweight or obese. More than one-third of children in both large and small rural areas had a BMI at or above the 85th percentile for their age and sex, compared to 30.9 percent of urban children.

In all locations, children with lower household incomes were more likely to be overweight or obese. The rate of overweight and obesity among children in poverty was approximately twice that of children with household incomes of 400 percent of the Federal poverty level (FPL) or more; for example, among children in large rural areas, 46.3 percent of those in poverty were overweight or obese, compared to 23.7 percent of those with household incomes of 400 percent of the FPL or more. Within each income group, however, rates of overweight and obesity did not vary substantially by location.

Black children and Spanish-speaking Hispanic children were the most likely to be overweight or obese, regardless of location. More than 40 percent of Black children and at least 45 percent of Spanish-speaking Hispanic children are reported to be overweight or obese.
Chronic Conditions

The survey asked parents if they had ever been told by a health care provider that their child had, and whether the child still had, one of a number of specific chronic conditions. These included 7 physical health conditions (asthma; diabetes; brain injury or concussion; bone, joint, or muscle problems; epilepsy or seizure disorder; hearing problems; or vision problems), 7 emotional, behavioral, or developmental (EBD) conditions (attention deficit disorder/attention deficit hyperactivity disorder [ADD/ADHD], anxiety, autism spectrum disorder, depression, developmental delay, oppositional defiant disorder [ODD] or conduct disorder, or Tourette Syndrome), speech problems, and learning disabilities. Overall, 22.3 percent of children were reported to have at least one of these 16 conditions. This proportion was slightly higher in large rural areas (24.9 percent) and lower in small rural areas (21.9 percent). This pattern was also evident for the 7 physical conditions and the 7 emotional, behavioral, or developmental conditions.

For all types of conditions and across locations, the proportion of children who had at least one condition was higher among older children. Among children aged 12-17 years, nearly one-third (31.2 percent) of children in small rural areas had at least one of the 16 conditions, and this proportion was similar for this age group in other locations. Within each age group, the proportion of children with at least one physical condition did not vary substantially by location, except that the percentage of children aged 0-5 with at least one physical condition was higher in large rural areas (15.2 percent) than in small rural and urban areas (approximately 10 percent).
Some children have trouble getting along with others. Parents of 6- to 17-year-olds were asked if their children had never, rarely, sometimes, usually, or always exhibited each of the following behaviors in the past month: arguing too much; bullying or being cruel or mean to others; being disobedient; and being stubborn, sullen, or irritable. Overall, 8.8 percent of children aged 6-17 years were reported to usually or always exhibit two or more of these problem behaviors.

The percentage of children exhibiting problem social behaviors was similar across locations, ranging from 8.6 percent of children in small rural areas to 10.0 percent of children in large rural areas.

In all locations, older children (aged 12-17) were more likely than younger children to display problem behaviors. The percentage of children aged 6-11 exhibiting problem behaviors ranged from 6.9 percent in small rural areas to 8.5 percent in urban areas. The percentage of adolescents displaying problem behaviors ranged from 9.0 percent in urban areas to 11.6 percent in large rural areas.

In both urban and small rural areas, girls were more likely than boys to display problem social behaviors; 9.3 percent of girls did so in both locations, compared to 8.2 percent of boys in urban areas and 8.0 percent of boys in small rural areas. In large rural areas, 10.5 percent of boys displayed problem behaviors, compared to 9.6 percent of girls.
Social Skills

Children begin developing positive social skills at an early age, a process that will influence their relationships with others throughout their lives. Parents of children aged 6-17 years were asked if their children had never, rarely, sometimes, usually, or always exhibited each of the following behaviors in the past month: showed respect for teachers and neighbors; got along well with other children; tried to understand other people’s feelings; and tried to resolve conflict with classmates, family, or friends. Overall, 93.7 percent of children aged 6-17 years were reported to usually or always exhibit two or more of these social skills. This percentage was similar across locations.

In all locations, younger children (aged 6-11) were more likely than older adolescents to display social skills. The percentage of children with social skills was similar across locations within each age group, ranging from 93.7 to 95.4 percent among children aged 6-11 and between 90.7 and 93.4 percent among adolescents aged 12-17.

In urban and large rural areas, the percentage with social skills was slightly higher among girls than boys, while in small rural areas, the percentage was the same for both sexes (92.1 percent).