

Putting Data Into Action The Data Resource Center for Child & Adolescent Health www.childhealthdata.org

February 24, 2014

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The Data Resource Center is supported by the federal Maternal and Child Health Bureau





Presentation Goals

- 1. **Inspire you** to access and integrate data from standardized national and state level family reported survey data advance child well-being
- 2. **Empower you** to operate the "Child Health Data" interactive query to access data points, graphs, tables and comparisons
- 3. **Discover** at least one new idea for using available data in existing partnerships in your state and community
- 4. Learn from you so that we can further optimize national, state and local data and resources to address your vision and priorities for ensuring and promoting maternal and child health





Why We Need Data!

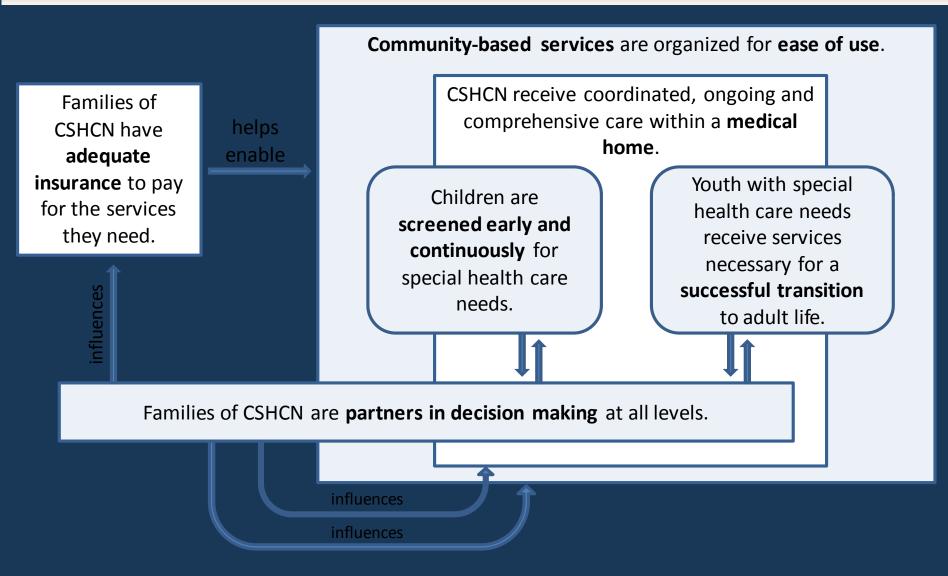
- * Lay the groundwork for effective action
 - Establish common definitions and meanings
 - Check assumptions underlying improvement and needs assessment efforts
- Solution State And System Performance
- Inform and activate partnerships & make creating impactful "1 pagers" quick and easy
- Educate program leaders and policymakers
- ***** Use to write grants and conduct research



- 1) Provide <u>centralized</u>, <u>user-friendly</u>, <u>interactive</u> access to standardized national, regional and state-level findings from national surveys on child and adolescent health and well-being.
- Build shared <u>knowledge, capacity, and inspiration</u> for using data to stimulate and inform system change locally and nationally—especially among state health agency leaders and staff, family advocates and policy leaders.



Systems of Services for CSHCN Model A Key Focus for Data and Resources Available





Welcome to the Data Resource Center for Child & Adolescent Health!

Welcome to the newly redesigned DRC website. Take a tour of the site and give us your feedback.

The mission of the Data Resource Center (DRC) is to take the voices of parents, gathered through the National Survey of Children's Health (NSCH) and the National Survey of Children with Special Health Care Needs (NS-CSHCN), and share the results through this online resource so they can be used by researchers, policymakers, family advocates and consumers to promote a higher quality health careeeee system for children, youth and families. PLearn more about the DRC

DRC Highlights

- > Child Obesity State Report Cards
- New NS-CSHCN Data Trends
- New chartbook comparing CSHCN with children who do not have special health care needs

Most Popular Topics

What you can do on the DRC website?

- Learn about the National Survey of Children's Health and the National Survey of Children with Special Health Care Needs
- Browse national and state findings on hundreds of child health indicators
- Search data based on numerous important topics and subgroups of children
- Download and print snapshot profiles on key



6 days ago reply retweet favorite



Data Available on the DRC Website

- Interactive Data Snapshots
 - View Topic Specific Snapshots that Profile Numerous Indicators
- Interactive State Ranking Tables
 - View and compare all states at the same time
 - Get maps comparing each state to the nation
- Interactive Query for Individual Outcomes, Indicators and Single Items
 - Search by state, region, and nationwide
 - Stratify by numerous population subgroups
 - Compare all states on individual items, indicators or outcomes
 - Trend across survey years where possible



Data Sets Available on the DRC Website

- National Survey of Children's Health (NSCH)
- National Survey of Children with Special Health Care Needs (NS-CSHCN)
- National Health Interview Survey: Complementary Alternative Medicine Supplement (NHIS-CAM)
- Coming Soon: State level NHIS data; NS-CSHCN Autism "follow back" survey Pathways Data



DRC Website Features Available

✤ Learn about the surveys

- Search and compare national, regional and state level survey results for child subgroups (e.g. age, race/ethnicity, sex, household income, health insurance, special health care needs status, etc.)
- ✤ Access topically focused data snapshots and profiles
- Get expert help by e-mailing us your questions or viewing our tutorials



Other DRC Features Available

- <u>Download</u> cleaned, labeled survey data sets with preconstructed indicators and additional variables (in SAS and/or SPSS)
- ✤ Learn about effective ways you can use the data
- Discover how the data have been used
- ✤ <u>Sign up</u> for e-updates



- New NS-CSHCN Data Trends
- > New chartbook comparing CSHCN with children who do not have special health care needs

Most Popular Topics

- Special Health Care Needs
- · Browse national and state findings on hundreds of child health indicators

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students meets the medical

6 days ago reply retweet favorite

at http://t.co/a3ox4H2

childhealthdata 1 in 5 high school

criteria for addiction, according to

a Columbia study. Read an article

TROPIC

- Search data based on numerous important topics and subgroups of children
- Download and print snapshot profiles on key

View an array of measures and select any to explore interactively

Browse by Survey & Topic	National Survey of Children's Health, 2011/2012			Return to Snapshot Selection	
Get State Snapshots	2011/2012 NSCH Nationa	ide	2003 Profile 2007 Profile		
Browse Data Trends	Click on any row of data in the t and other subgroups.	able below to view detailed results by age, race/ethnicity, household inc	ome	2007110/16	
Get US Data Maps			%	%	
Browse Healthy People 2020 Topics	Indicator HEALTH STATUS	Explanation	District of Colur▼	Nationwide 🔻	
	Child Health Status	percent of children in excellent or very good health	81.4	84.2	
Medical Home Data Portal	Oral Health Status	percent of children with excellent or very good real health	72.6	71.3	
Quality Measurement Portal	Premature Birth	percent of children who were born premature, that is three or more weeks early	10.4	11.6	
Browse Title V Topics	Breastfeeding	percent of children age 0-5 who were ever breastfed	80.1	79.2	
Data Tools	Risk of Developmental or Behavioral Problems	percent of children age 4 months to 5 years determined to be at moderate or high risk based on parents' specific concerns	29.4	26.2	
Get Print Version	Child Weight Status	percent of children age 10-17 years who are overweight or obese (BMI-for-age at or above 85th percentile)	35.0	31.3	
🟂 Download PDF	Missed School Days	percent of children age 6-17 who missed 11 or more days of school in the past year	5.4	6.2	
📀 Email Page	HEALTH CARE				
Chara Daga	Current Health Insurance	percent of children currently insured	98.7	94.5	
Share Page Tweet Page	Insurance Coverage Consistency	percent of children lacking consistent insurance coverage in the past year	5.8	11.3	
L IWeel Faye	Preventive Health Care	percent of children with a preventive medical visit in the past year	89.8	84.4	
	Preventive Dental Care	percent of children with a preventive dental visit in the past year	82.3	77.2	
	Developmental Screening	percent of children age 10 months to 5 years who received a standardized screening for developmental or behavioral problems	21.4	30.8	
	Mental Health Care	percent of children age 2-17 with problems requiring counseling who received mental health care	58.9	61.0	
	Medical Home	percent of children who receive care within a medical home	50.3	54.4	
	SCHOOL AND ACTIVITI	ES			

	OPTION 2: The DRC "Full Search"							
It is the second se	Step 1: Clic	k on "Brow	vse by S	urvey & ⁻	Горіс"			
🗋 Web Slice Gallery	🗀 Imported From IE (🕄							
	Data Reso	ta Your Story U rCe Center for Chi d and Adolescent Health Measuren	d & Adolescer		us a question Request a dataset • Sign In to Access Your Briefcase			
		About urveys Browse the Data	Put Data into Action	Get Help	yword Search			
	Browse the Data	Home > Browse the Data > Browse by	/ Survey					
	Browse by Survey & Topic	Browse by Survey & Topic						
	Get State Snapshots To begin your interactive data search: 1) Select a Survey, Survey Year, and State or Region. 2) Select your desired Topic/Starting Point. 3) Select your indicator or measure.							
	Browse Data Trends	This will direct you to a results page where you can compare across states, regions and by numerous subgroups.						
	Get US Data Maps	1. Select a Survey, Year, and Geographic Area						
Browse Healthy People 2020 Topics Medical Home Data Portal Quality Measurement Portal		Select a Survey Select a Year	Select a Survey		v			
			Nationwide		•			
	Browse Title V Topics							
	Data Tools							
	Get Print Version							
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Step 4: From here, you can once again select subgroups, look at your state or compare Data Resource Center for Child your state to others.

Keyword Search About the Data Learn About Put Data Browse the Data Get Help Resource Center the Surveys into Action Home > Browse the Data > Browse by Survey > Survey Results Browse the Data Current Search Criteria Browse by Survey & Topic Edit Search Criteria Survey: 2011/12 National Survey of Children's Health Compare States: Get State Snapshots Starting Point: State Profile Select a State or Region ¥ Browse Data Trends State/Region: Nationwide Compare Subgroups: Topic: Health Status Get US Data Maps Select a Subgroup ¥ Question: Missed School Days Browse Healthy People 2020 Change question, topic or survey Topics. Medical Home Data Portal During the past 12 months, about how many days did [child name] miss school because of illness or injury? (details) Quality Measurement Portal O days 1-5 days 6-10 days 11 or more Total % Browse Title V Topics days. % 22.9 58.7 12.2 6.2 100.0 (22.2 - 23.7)(57.8 - 59.5)(11.7 - 12.8)(5.7 - 6.6)C.L

39,516

28,736,781

n = Cell size. Use caution in interpreting Cell sizes less than 50.

C.I. = 95% Confidence Interval. Percentages are weighted to population characteristics.

8,612

5,987,872

4,004

3,021,781

12,947

11,232,116

n

Pop. Est.

Data Tools

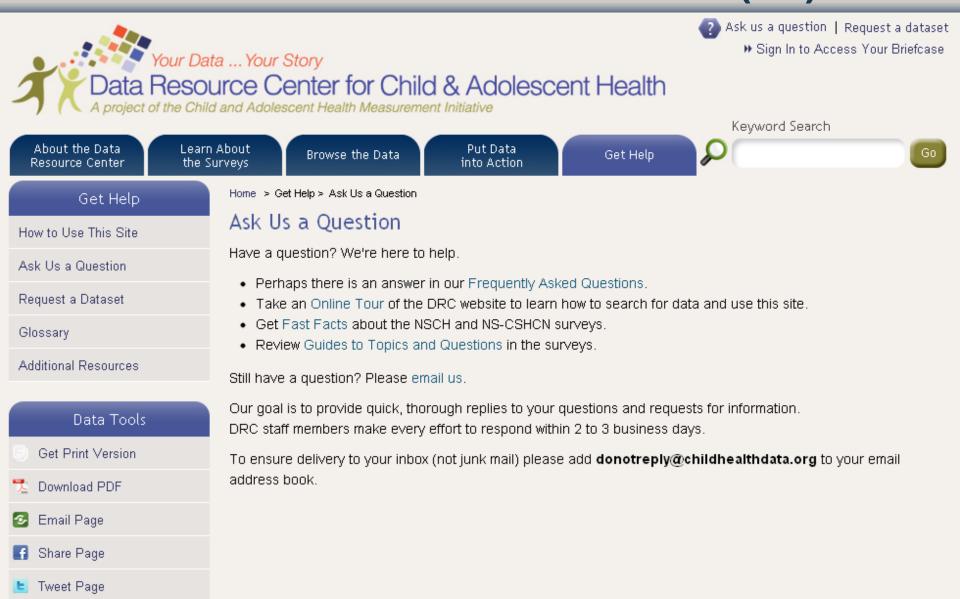
Your Data ... Your Story

A project of the Child and Adolescent Health Measure

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Need Help? DRC Technical Assistance (TA)





What we do More than a website!

- Design: Collaborate in the design and development of national and state data
- Advise and Assist: Conduct real time and in depth technical and strategic assistance to promote the expedited and effective use of data to promote effective partnerships to improve MCH
- Ready to Ride Data Resources: Create and provide data and resources research like "ready to drive" data sets; codebooks and training materials.
- Training: Teach and train on 'data in action' and 'data literacy' in advocacy, partnership and improvement efforts.
- Fast Track Data Access and Use: Offer an interactive query tool to obtain micro-data findings with easy to use graphs, tables and profiles.



Some current focus areas

- The redesign of the National Survey of Children's Health
- Supporting optimization of emerging MCH 3.0 model
- New measure development, testing and national endorsement (e.g. NQF, ACA)
- Adding new datasets to the DRC (NHIS, CAM, Pathways data, etc.) and topic portals (Autism, CSHCN, Quality)
- Local area data estimation project (Country, City, Congressional Districts, Rural/Urban areas, etc.
- Partnering with state agencies and family organizations around use of data (e.g. ACES), ACA and Needs Assessments, Family Leadership
- **Direct to consumer** projects (the Well Visit Planner)



Additional DRC Resources to Maximize Data Use

About the Data Resource Center Learn About the Surveys

Browse the Data

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Put Data into Action

Get Help

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Put Data Into Action

How to Use Data Effectively

Examples of Data Use

Data Briefs

Articles

Presentations

Chartbooks

Family to Family Profiles

Child Health Data Resources

Data Tools

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Home > Put Data Into Action > How to Use Data Effectively

How to Use Data Effectively

When used effectively, data on children's health can be a powerful tool to educate stakeholders, inform decision makers, and motivate and track improvement of children's health care delivery. Accomplishing these goals requires strategic communication of data results. The information and examples below will help users identify successful strategies for sharing findings and using data effectively from the NSCH and NS-CSHCN. Please also see our Examples of Data Use.

Communication of Data Results

Making National Survey Data Come Alive. Communication of data is essential to engaging all audiences. For many stakeholders, data can be overwhelming and can lead to a lack of engagement or tuning out. To make data come alive, communicate data to your audience by grounding data in real life, easy to understand examples and scenarios.

Using Data to Increase the Impact of Communications. A communications expert shares five rules for selecting and using data facts to develop a powerful message for your targeted audience.

How to Translate Percentages into Numbers of Children. Reporting the estimated number of children with a specific characteristic is often an effective communication tool. This worksheet guides data users through the process of converting percentages into the numbers of children that are represented.

Putting Your Data Findings into Words. How does caring for a child with special health needs affect the work life of family members? A "Telling the Story" example from a family leadership conference in Washington State.

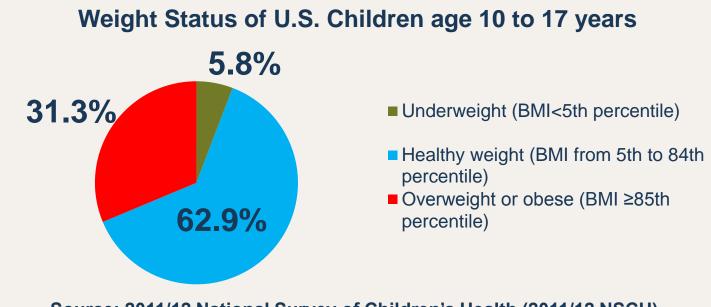
Understanding Research: Top Ten Tips for Advocates and Policymakers. How can you tell if a research study is one you can trust? This checklist helps family and state leaders to critically evaluate research – and use it effectively to inform policy decisions.

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Our Mantra for Turning Data Into Currency Search Until You Find the Story! (and always check your conclusions!)

How many U.S. children are overweight or obese nationwide?



Source: 2011/12 National Survey of Children's Health (2011/12 NSCH)

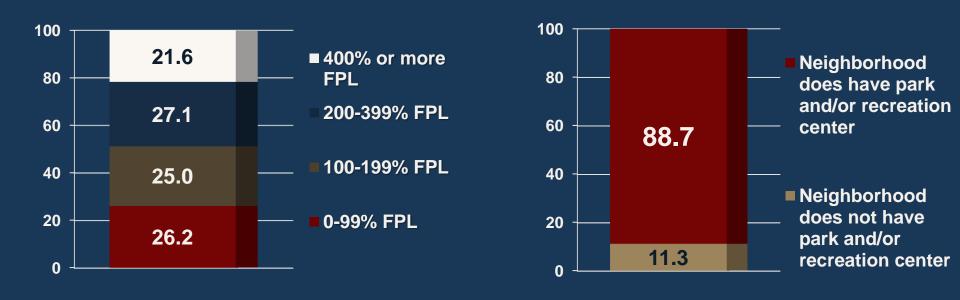
Now, what about in your state?

Wide variation exists across states ranging from a **low of 22.1%** to a **high of 39.8%**. *And also*, between child subgroups by age, race/ethnicity, etc.



Myth Busting Is Essential to Engage All Sectors in Partnership Myth: Most At Risk Children Are Poor!!

An assumption we hear: "Most overweight or obese children are poor and lack neighborhood amenities"



Distribution among children who are overweight or obese (2011/12 NSCH)



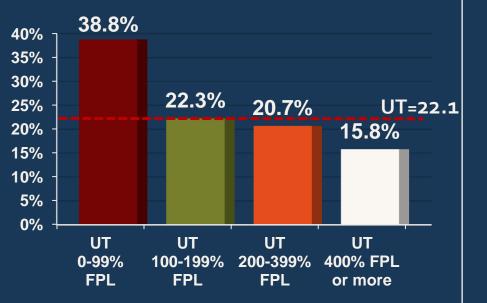
Example: Using the DRC to explore disparities?

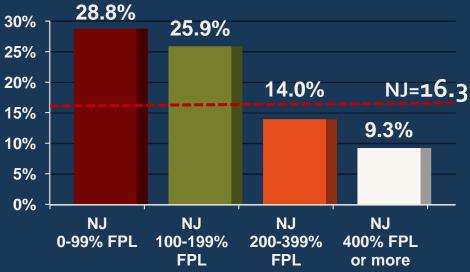
Childhood Overweight & Obesity Within State Disparities

Utah, the state with the lowest rate of childhood overweight/obesity, had the greatest variation by household income level.

Adverse Childhood Experiences Within State Disparities

New Jersey, the state with the lowest rate of Adverse Child/Family Experiences (2+), had the greatest variation by household income level.







Example: ACEs and Resilience

Adverse Child or Family Experiences	National Prevalence	State Range
Child had \geq 1 Adverse Child/Family Experiences	47.9%	40.6% (CT) – 57.5% (AZ)
Child had \geq 2 Adverse Child/Family Experiences	22.6%	16.3% (NJ) – 32.9% (OK)
Socioeconomic hardship	25.7%	20.1% (MD) – 34.3 % (AZ)
Divorce/parental separation	20.1%	15.2% (DC) – 29.5% (OK)
Lived with someone who had an alcohol or drug problem	10.7%	6.4% (NY) – 18.5% (MT)
Victim or witness of neighborhood violence	8.6%	5.2% (NJ) – 16.6% (DC)
Lived with someone who was mentally ill or suicidal	8.6%	5.4% (CA) – 14.1% (MT)
Domestic violence witness	7.3%	5.0% (CT) – 11.1% (OK)
Parent served time in jail	6.9%	3.2% (NJ) – 13.2% (KY)
Treated or judged unfairly due to race/ethnicity	4.1%	1.8% (VT) – 6.5% (AZ)
Death of parent	3.1%	1.4% (CT) – 7.1% (DC)





The NSCH and NS-CSHCN are unprecedented resources made possible by MCHB!

Standardized data provides a powerful basis for across-state learning and building shared understanding of priorities and impact.



Contact Us

Visit us at www.childhealthdata.org

E-mail us at cahmi@ohsu.edu

Connect with the DRC to Join the Conversation!

Like us on Facebook: <u>Facebook.com/childhealthdata</u>

Follow us on Twitter: @childhealthdata



Thank You!

