What’s New and Changed in the
2019 National Survey of Children’s Health (NSCH)
as compared to the 2018 NSCH

Survey items listed herein from the 2019 NSCH can be found in the full survey instruments which are available at the HRSA’s MCHB website. Please reference the original question wording when reviewing.

New Items

**Topical Questionnaire**

**Demographics (child)**
- What month and year was this child born?

**Changed items**

**Topical Questionnaire**

**Health Care and Access**
- "During the past 12 months, did this child see a doctor, nurse, or other health care professional for sick-child care, well-child check-ups, physical exams, hospitalizations or any other kind of medical care)? (medical care example types changed)
- During the past 12 months, did anyone help you arrange or coordinate this child's care among the different doctors or services that this child uses? (added skip pattern if the response is “Did not see more than one health care provider”)

**School (0-5 survey instrument)**
- Are you concerned about how this child is learning to do things for him or herself? (response option order changed)

**Demographics (adult)**
- Added section headers to delineate Caregiver 1 (you/survey respondent) and 2 (additional caregiver, if there is one) in Child’s Caregiver section
- In the 2018 version of the survey the other adult living in the house was referred to as “another adult primary caregiver who may be in the household in addition to yourself”. All questions related to this adult (e.g. health status, employment status, etc.) in the 2019 survey refer to them as Caregiver 2, “another primary adult caregiver who lives in the household”

*Data not comparable with the 2018 NSCH.*
**Dropped items**

**Screener Questionnaire**
- What is this child’s race? (option to select “Some other race” was deleted)

**Topical Questionnaire**

The Child’s Health
- If the child was ever told that he or she has Down Syndrome, they are no longer asked:
  - If yes, does this child currently have the condition?
- Has a doctor or other health care provider ever told you that this child has any other mental health condition? If yes, specify.
  - If yes, does this child currently have the condition?
  - If yes, is it mild, moderate or severe?
- What is this child’s current height? (dropped from age 0-5 survey instrument)
- How much does this child currently weigh? (dropped from age 0-5 survey instrument)