

Child and Family Health Measures – Survey Items Displayed in the Data Query

2022 National Survey of Children's Health

This Content Map presents the list of survey items displayed in the 2022 NSCH Interactive Data Query. The Indicator level Content Maps for the "Child and Family Health Measures" and the "National Performance and Outcome Measures" are available on the <u>DRC website</u>.

Vandalism such as broken windows or graffiti

n statu nge-related behaviors, 6-17 years g g g od er eating s, or diuretics (water pills) to lose or c a doctor's orders f vomiting or choking statu e Drop provi Not c or e Drop provi Not c or e Proble Typ • Drop provi • Not c or e Proble •	insurance coverage because it was unaffordable insurance coverage because benefits were insurance coverage because choice of health care adequate insurance due to problems with application or s application or renewal process ealth Care Access and Quality	Individual components of transition to adult health care, age 12-17 years • Transition Part A: Time alone with health care provider • Transition Part B: Actively worked with the child to manage care transition • Doctor worked with the child to gain skills to manage their health and health care • Doctor worked with child to understand health care changes • Transition Part C: Discussed shift to providers who treat adults	Individual items for family resilience Talk together about what to do Work together to solve the problem Know we have strength to draw on Stay hopeful even in difficult times Adverse childhood experience Hard to get cover basics like food and housing on family's income Parent or guardian divorced or separated Parent or guardian died Parent or guardian served time in jail or prison
 Not C statu Drop provi Not C statu Problematic statu 	health insurance because of cancellation due to insurance coverage because it was unaffordable insurance coverage because benefits were insurance coverage because choice of health care adequate insurance due to problems with application or s application or renewal process ealth Care Access and Quality	 Transition Part A: Time alone with health care provider Transition Part B: Actively worked with the child to manage care transition Doctor worked with the child to gain skills to manage their health and health care Doctor worked with child to understand health care changes Transition Part C: Discussed shift to providers who treat adults 	 Work together to solve the problem Know we have strength to draw on Stay hopeful even in difficult times Adverse childhood experience Hard to get cover basics like food and housing on family's income Parent or guardian divorced or separated Parent or guardian died Parent or guardian served time in jail or prison
 Drop provi Not c renew Probl c a doctor's orders f vomiting or choking Drop provi Not c renew Probl Typ Dent 	adequate insurance due to problems with application or s application or renewal process ealth Care Access and Quality	care changes Transition Part C: Discussed shift to providers who treat adults Additional items related to youth transition to adult	family's income Parent or guardian divorced or separated Parent or guardian died Parent or guardian served time in jail or prison
f vomiting or choking			Witnessed domestic violenceVictim or witness of neighborhood violence
most weekdays		 Doctor worked with the child to make positive choices about their health Youth received a summary of their medical history Youth currently has a plan of care to meet their health goals and needs Youth has access to the plan of care 	 Lived with anyone who was mentally ill, suicidal, or severely depressed Lived with anyone who had a problem with alcohol/drugs Treated or judged unfairly because of their race or ethnic group Treated or judged unfairly because of a health condition or disability
Screener functional limitations criteria	es of care received from an eye doctor examination cription for eyeglasses or contact lenses	 The plan of care addresses transition to adult health care provider Discussed child's health insurance coverage into adulthood Forgone health care services Medical Care 	Individual items for parental aggravation Parent felt child is difficult to care for Parent felt child does things that bother them Parent felt angry with child
Screener specialized therapy criteria Screener ongoing emotional, development riteria lopmental, or behavioral needs and other er criteria CSHCN met are needs	Ignosis of a vision disorder other than nearsighted, astigmatism Recommendation for a vision test If for an eye examination or additional vision services dual components of family-centered care	 Dental care, 1-17 years Vision care Hearing care Mental health care, 3-17 years Reasons for forgone health care Due to eligibility 	Persons from whom received emotional support Spouse or domestic partner Other family member or close friend Health care provider A place of worship or religious leader Advocacy or support group A peer support group
I and Mental Health • Doctor	,	Due to availabilityDue to problems getting an appointment	 A counselor/other mental health professional
		 Due to problems getting transportation or childcare Because office was not open Due to cost 	Individual items for food and cash assistance WIC benefits Cash assistance from government
Control of the second sec	parents to feel like partners in care idual components of care coordination	Due to problems getting transportation or childcareBecause office was not open	Individual items for food and cash assistance • WIC benefits
Doct	parents to feel like partners in care ridual components of care coordination p with coordinating child's health care among those	 Due to problems getting transportation or childcare Because office was not open Due to cost 	Individual items for food and cash assistance WIC benefits Cash assistance from government Food Stamps Free or reduced cost meals School meal debit/Electronic Benefits Transfer cards
Boothers Strengthers Stre	parents to feel like partners in care ridual components of care coordination p with coordinating child's health care among those help to coordinate health care tra help with care coordination h communication among child's doctor and other health	 Due to problems getting transportation or childcare Because office was not open Due to cost Community and School Activities Individual items for school engagement, age 6-17 years Children who care about doing well in school Children who do all required homework Individual items for after school activities,	Individual items for food and cash assistance WIC benefits Cash assistance from government Food Stamps Free or reduced cost meals
Doct Comparison of the second secon	parents to feel like partners in care ridual components of care coordination p with coordinating child's health care among those help to coordinate health care tra help with care coordination	 Due to problems getting transportation or childcare Because office was not open Due to cost Community and School Activities Individual items for school engagement, age 6-17 years Children who care about doing well in school Children who do all required homework 	Individual items for food and cash assistance WIC benefits Cash assistance from government Food Stamps Free or reduced cost meals School meal debit/Electronic Benefits Transfer cards Individual items for housing instability Not able to pay mortgage or rent Child ever experienced homelessness
6 vit ty	Doctors helped Doctors helped Indiv Doctors helped Indiv Family gets help who needed Needed extra he Got needed extra he	index index <td< td=""><td> and Mental Health Doctors showed sensitivity to family values and customs Doctors provided information specific to parents' concerns Doctors helped parents to feel like partners in care Due to problems getting transportation or childcare Because office was not open Due to cost Due to cost Because office was not open Due to cost Because office was not open Due to cost </td></td<>	 and Mental Health Doctors showed sensitivity to family values and customs Doctors provided information specific to parents' concerns Doctors helped parents to feel like partners in care Due to problems getting transportation or childcare Because office was not open Due to cost Due to cost Because office was not open Due to cost Because office was not open Due to cost

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Humans Services (HHS) under grant number U59MC27866, National Maternal and Child Health Data Resource Initiative, \$4.5M. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS, or the U.S. Government.

Citation: Child and Adolescent Health Measurement Initiative (2024). "Child and Family Health Measures Content Map - Survey Items Displayed in the Data Query, 2022 National Survey of Children's Health". Data Resource Center for Child and Adolescent Health supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved [mm/dd/yy] from [www.childhealthdata.org].