What's New and Changed in the
2018 National Survey of Children's Health (NSCH)
as compared to the 2017 NSCH

Survey items listed herein from the 2018 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

**Screener Questionnaire**
- Is this house, apartment, or mobile home…
  - Owned by you or someone in this household with a mortgage or loan, Owned by you or someone in this household free and clear (without a mortgage or loan), Rented, Occupied without payment of rent

**Topical Questionnaire**

**Child's Health**
- If a doctor or other health care provider has ever told that the child has 1) blood disorders; 2) cystic fibrosis; or 3) other genetic or inherited condition, then new items are asked for each:
  - Was this condition identified through a blood test done shortly after birth? (These tests are sometimes called newborn screening)
  - If the child's blood disorder was identified through a blood test after birth:
    - If yes, was this child diagnosed with: Sickle Cell Disease, Thalassemia, Hemophilia, or Other Blood Disorders?

- Has a doctor or other health care provider ever told you that this child is overweight?

**Health Care and Access**
- During the past 12 months, was this child admitted to the hospital to stay for at least one night?
- Did you and this child receive a summary of your child's medical history (for example, medical conditions, allergies, medications, immunizations)?
- If this child has a plan of care:
  - Does this plan of care address transition to doctors and other health care providers who treat adults?

**Healthy and Ready to Learn**
(Answer the following questions only if this child is at least 1 year old.) Is this child able to do the following…
- Say at least one word, such as “hi” or “dog”?
- Use 2 words together, such as “car go”?
- Use 3 words together in a sentence, such as, "Mommy come now."
- Ask questions like "who," "what," "when," "where"?
- Ask questions like "why" and "how"?
- Tell a story with a beginning, middle, and end?
- Understand the meaning of the word "no"?
- Follow a verbal direction without hand gestures, such as "Wash your hands."
- Point to things in a book when asked?
- Follow 2-step directions, such as "Get your shoes and put them in the basket."
- Understand words such as "in," "on," and under?
**Changed items**

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### Child’s Health

*Question time frame and stem question changed, and response options were revised to include frequency of occurrence: Never (in the past 12 months), 1-2 times (in the past 12 months), 1-2 times per month, 1-2 times per week, Almost every day.*

- During the past 12 months, how often was this child bullied, picked on, or excluded by other children?
- During the past 12 months, how often did this child bully others, pick on them, or exclude them?

*Question changed “How true…” to “How often…” with a corresponding change in the response options to: Always, Usually, Sometimes, Never.*

- How often is this child affectionate and tender with you?
- How often does this child bounce back quickly when things do not go his or her way?
- How often does this child show interest and curiosity in learning new things?
- How often does this child smile and laugh?
- How often does this child work to finish tasks he or she starts?
- How often does this child stay calm and in control when faced with a challenge?
- How often does this child argue too much?

### Health Care and Access

*If child had a medical visit during the past 12 months:*

- If yes, at his or her last medical care visit, did this child have a chance to speak with a doctor or other health care provider privately, without you or another caregiver in the room? *(preventive check-up changed to medical care visit).*
- During the past 12 months, has this child had his or her vision tested, such as with pictures, shapes, or letters? *(reference period changed from “ever” for 0-5 years and “2 years” for 6-17 years)*
- Have this child’s doctors or other health care providers worked with you and this child to create a plan of care to meet his or her health goals and needs? *(changed from “written plan”)*
- If this child has a plan of care:
  - If yes, do you and this child have access to this plan of care? *(changed from “receive a written copy of”)*

*Question changed “How much of a problem…” to “How difficult…” with a corresponding change in the response options to: Not difficult, Somewhat difficult, Very difficult, It was not possible to obtain care/get a referral.*

- How difficult was it to get the mental health treatment or counseling that this child needed?
- How difficult was it to get the specialist care that this child needed?
- If yes [needed referral], how difficult was it to get referrals?

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*Note: Items with minor wording changes are not included here.*
Changed items (Continued)

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About the Child and Family

- On most weekdays, about how much time does this child usually spend in front of a TV, computer, cellphone or other electronic device watching programs, playing games, accessing the internet or using social media? (Do not include time spent doing schoolwork.) (2 questions were combined and response option “None” was removed to have 5 response options: Less than 1 hour, 1 hour, 2 hours, 3 hours, 4 or more hours)
- Left a job or taken a leave of absence because of this child’s health or health conditions? (changed to be more inclusive rather than “stopped working” only)
- During the past 12 months, was there someone that you could turn to for day-to-day emotional support with parenting or raising children? If yes, did you receive emotional support from: spouse or domestic partner? (changed to be more inclusive adding “domestic partner”)

School

Question changed “How true…” to “How often…” with a corresponding change in the response options to: Always, Usually. Sometimes, Never.
- How often does this child care about doing well in school?
- How often does this child do all required homework?

Demographics (adults)

- How is this adult primary caregiver in the household related to this child? (changed from “Adult 2”)

Dropped Items

The Child’s Health

- If the child was ever told that he or she has blood disorders, Cystic Fibrosis, or other genetic or inherited condition, they are no longer asked:
  If yes, does this child currently have the condition?

Health Care and Access

- Has this child’s doctor or other health care provider actively worked with this child to:
  Think about and plan for his or her future. (For example, by taking time to discuss future plans about education, work, relationships, and development of independent living skills?)
- If a shared written plan of care has been created with the child’s doctors or other health care providers, they are no longer asked:
  o If yes, does this plan identify specific health goals for this child and any health needs or problems this child may have and how to get these needs met?
  o Is this plan currently up-to-date for this child?


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.