Pediatric Integrative Medicine: Current Review of Emerging Trends

IRCIMH 2014 Congress
May 14, 2014
Miami, Florida
Lay the groundwork for effective common definitions and meanings

Check assumptions underlying improvement and needs assessment efforts

Document needs 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

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Presentation Goals

1. **Inspire you** to access and integrate data from the NHIS Child CAM Supplement to 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 the NHIS CAM Supplement in existing partnerships in your professional area

4. **Learn from you** so that we can further optimize national data and resources to address your priorities
National Health Interview Survey, Child Complementary and Alternative Supplement

- conducted in 2007 and 2012
- collects information about non-conventional health services, products, and practices commonly used in the United States.
- 10,218 sample children aged 4-17 years (in 2012)
National Health Interview Survey (NHIS)

- An annual national survey conducted by the Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS).
  - Has been conducted continuously since 1957
  - Provides a broad range of information about the health status of the US civilian non-institutionalized household population.
  - Consists of three Core Modules (Family, Sample Child and Sample Adult) and Supplements (e.g. Complementary and Alternative Medicine) that vary from year to year.
One child age 17 years or younger (if any) was randomly selected in each household as the sample child in the Sample Child Core and Child CAM Supplement

- 0-17 years for 2007
- 4-17 years for 2012
Medical Expenditures Panel Survey (MEPS) which uses half of the NHIS sampling frame. Since it is linked to the NHIS, MEPS allows assessment of utilization, access to and quality of care, and expenditures for conventional medical care.
Data Issues: CAM Use Definition

- There is no single agreed upon definition of CAM
- Key variations in using NHIS data is how to treat vitamins/minerals
- Current design underestimates the use of CAM in children due to missing modalities and other survey design features
Prevalence of CAM Use

- CAM use including vitamins/minerals: 54.70%
- CAM use excluding multi-vitamins/minerals: 20.60%
- CAM use excluding all vitamins/minerals: 11.80%
CAM Use for Conditions

Topic: How to treat data on “conditions” asked in the NHIS Sample Child Core and separately in the Child CAM Supplement

Questions:
- Validity, utility and efficiency of asking about conditions the child experiences for which the child uses CAM-unprecedented compared to other surveys.
- What does it mean when over 50% of parents report “no reason” for CAM use when over 90% have health problems and conditions?
1) Provide **centralized, user-friendly, interactive** access to standardized national, regional and state-level findings from national surveys on child and adolescent health and well-being.

2) Build shared **knowledge, capacity, and inspiration** 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.
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 care system for children, youth and families. Learn 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

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 child health indicators

Data at a Glance
At your fingertips—easy-to-read data snapshots for each state

State/Region: Nationwide
Browse Data Snapshots

Connect with the DRC
Sign up for email updates

childhealthdata National study finds that providing insurance to the poor helps them maintain both health and financial stability: http://t.co/y0X0aH1b
4 days ago • reply • retweet • favorite

childhealthdata 1 in 5 high school students meets the medical criteria for addiction, according to a Columbia study. Read an article at http://t.co/a3ox4H2
6 days ago • reply • retweet • favorite
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
The National Health Interview Survey (NHIS)
Child Complementary and Alternative Medicine (CAM) Supplement

The Child CAM Supplement is one of the NHIS Supplements and collects information about non-conventional health services, products, and practices commonly used in the United States. NHIS is the principal source of information on the health of the civilian non-institutionalized household population of the United States. One child age 0-17 years from each family was randomly selected for the Sample Child Core questionnaire. Additional information about this "sample child" and other family members is collected with the Family Core questionnaire.

The Data Resource Center takes the results from the NHIS Child CAM Supplement, Sample Child and Family Cores and makes them easily accessible to parents, researchers, community health providers and anyone interested in child health and child CAM use data. Estimates on this site are nationally representative. National data can be further refined to assess differences by the US region, race/ethnicity, income, child's health and condition status and a variety of other important demographic and health status characteristics.  Read more about the NHIS and Child CAM Supplement

Learn about the NHIS Child CAM Supplement
- interested in an overview of the NHIS Child CAM Supplement?  Fast Facts
- Learn more about the topics and questions asked in this survey  Guide to Survey Topics and Questions
- Read our frequently asked questions  Survey

NHIS CAM Highlights
- Survey development
- Search 2012 NHIS CAM data
- Request a data set from 2012 NHIS Child CAM
- Survey FAQs
- National Profiles
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
Interactive Query for Individual Outcomes, Indicators and Single Items

- Search by state, region, and nationwide
- Stratify by numerous population subgroups
- Compare all states or regions on individual items, indicators or outcomes
- Trend across survey years where possible

Note: National and Census Region level data is available for CAM survey

Interactive Data Snapshots

- View Topic Specific Snapshots that Profile Numerous Indicators (snapshots for CAM survey will be available in June)

Interactive State Ranking Tables

- View and compare all states or regions (CAM) at the same time
- Get maps comparing each state or regions (CAM) to the nation
Take the DRC “360 Tour”

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NHIS CAM Highlights
- Search 2012 NHIS CAM data
- Request a data set from 2012 NHIS Child CAM
- Survey FAQs
- National Profiles

Learn about the NHIS Child CAM Supplement
- Interested in an overview of the NHIS Child CAM Supplement? Fast Facts
- Learn more about the topics and questions asked in this survey Guide to Survey Topics and Questions
- Read our frequently asked questions Survey
OPTION 1: The DRC “Full Search”
Step 1: Click on “Browse by Survey & Topic”
Step 2: Select a survey, a survey year and geographic area.

1. Select a Survey, Year, and Geographic Area
   - Select a Survey: NHIS - Complementary and Alternative Medicine
   - Select a Year: 2012
   - Select a State/Region: Nationwide

2. Select a Starting Point/Topic
   - Prevalence of Complementary and Alternative Medicine (CAM) Use (Content Map)
   - CAM Use and Children's Health Status (Content Map)
   - Health Insurance Coverage and Out-Of-Pocket Costs for CAM (Content Map)
   - CAM Use and Conventional Health Care Use and Telling Doctors About CAM Use (Content Map)
   - Reasons for and Perceived Benefits of CAM Use (Content Map)
Step 3: Pick a topic and measure.
Step 4: From here, you can select subgroups, look at your region or compare your region to others.
Select a child subgroup to view measures by.
This takes you to your region’s findings by child’s condition status.
Step 5: See where your region ranks across all regions by selecting “All states” as the comparison group.
Step 6: Click on your region to get back to querying the same measure by other subgroups.
Children who used one or more CAM modalities, excluding all vitamins/minerals
Children age 4-17 years
Northeast

<table>
<thead>
<tr>
<th>Used two or more CAM modalities in the past 12 months</th>
<th>Used only one CAM modality in the past 12 months</th>
<th>Ever used CAM, but not in the past 12 months</th>
<th>Never used</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.9%</td>
<td>2.0%</td>
<td>5.7%</td>
<td>89.0%</td>
</tr>
<tr>
<td>(0.3-3.5)</td>
<td>(2.7-8.7)</td>
<td>(1.9-5.0)</td>
<td>(85.3-92.7)</td>
</tr>
<tr>
<td>n</td>
<td>C.I.</td>
<td>C.I.</td>
<td>C.I.</td>
</tr>
<tr>
<td>10</td>
<td>37</td>
<td>32</td>
<td>545</td>
</tr>
<tr>
<td>Pop. Est.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>84,812</td>
<td>254,651</td>
<td>163,024</td>
<td>3,683,442</td>
</tr>
</tbody>
</table>

Children who used one or more CAM modalities from the list of 33 CAM modalities, excluding all vitamins/minerals?

<table>
<thead>
<tr>
<th>Chronic conditions</th>
<th>Used two or more CAM modalities in the past 12 months</th>
<th>Used only one CAM modality in the past 12 months</th>
<th>Ever used CAM, but not in the past 12 months</th>
<th>Never used CAM</th>
<th>Total %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic conditions</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td></td>
<td>100.0</td>
</tr>
<tr>
<td>C.I.</td>
<td></td>
<td>C.I.</td>
<td>C.I.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>n</td>
<td></td>
<td>C.I.</td>
<td>C.I.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pop. Est.</td>
<td></td>
<td>C.I.</td>
<td>C.I.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.4%</td>
<td>(1.9-10.3)</td>
<td>(6.7-14.0)</td>
<td>(3.9-8.0)</td>
<td>76.6%</td>
<td>100.0</td>
</tr>
<tr>
<td>34</td>
<td>(34)</td>
<td>(33)</td>
<td>(388)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>193,367</td>
<td>263,241</td>
<td>163,279</td>
<td>2,066,040</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

% Confidence Interval. Percentages are weighted to population characteristics. Use caution in interpreting cell sizes less than 60. Estimates based on sample sizes may be too small to meet standards for reliability or precision. The relative standard error is greater than 30%.
Now, you can continue searching subgroups on this measure or change question, topic or survey.
Option 2: Take the DRC “360 Tour”
Step 1: Select your state.
Step 2: Choose a profile of interest.

1. Click on your state, HRSA Region, or Nationwide to view your snapshot.

2. Select a Snapshot from the Categories below. Customizable profiles, where you can choose your own indicators, are marked with an asterisk*. 

District of Columbia

- Overall Health and Health Care Topics
  - Key indicators of child health status, insurance and health care access, and family/social content
  - 2011/12 NSCH National and State Profile Pages
  - 2009/10 NS-CShCN National and State Profile Pages
  - 2005/06-2009/10 NS-CShCN Comparison National and State Profile Pages
  - 2007 NSCH National and State Chartbook Pages
View an array of measures and select any to explore interactively.

# National Survey of Children's Health, 2011/2012

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2011/2012 NSCH National Chartbook Profile for District of Columbia vs. Nationwide

Click on any row of data in the table below to view detailed results by age, race/ethnicity, household income, and other subgroups.

## Indicator | Explanation
--- | ---
**HEALTH STATUS**
Child Health Status | percent of children in excellent or very good health
Oral Health Status | percent of children with excellent or very good oral health
Premature Birth | percent of children who were born premature, that is three or more weeks early
Breastfeeding | percent of children age 0-5 who were ever breastfed
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
Child Weight Status | percent of children age 10-17 years who are overweight or obese (BMI-for-age at or above 85th percentile)
Missed School Days | percent of children age 6-17 who missed 11 or more days of school in the past year

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**HEALTH CARE**
Current Health Insurance | percent of children currently insured
Insurance Coverage Consistency | percent of children lacking consistent insurance coverage in the past year
Preventive Health Care | percent of children with a preventive medical visit in the past year
Preventive Dental Care | percent of children with a preventive dental visit in the past year
Developmental Screening | percent of children age 10 months to 5 years who received a standardized screening for developmental or behavioral problems
Mental Health Care | percent of children age 2-17 with problems requiring counseling who received mental health care
Medical Home | percent of children who receive care within a medical home

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SCHOOL AND ACTIVITIES
Ask Us a Question

Have a question? We're here to help.

- Perhaps there is an answer in our Frequently Asked Questions.
- Take an Online Tour of the DRC website to learn how to search for data and use this site.
- Get Fast Facts about the NSCH and NS-CSHCN surveys.
- Review Guides to Topics and Questions in the surveys.

Still have a question? Please email us.

Our goal is to provide quick, thorough replies to your questions and requests for information. DRC staff members make every effort to respond within 2 to 3 business days.

To ensure delivery to your inbox (not junk mail) please add donotreply@childhealthdata.org to your email address book.
Click on the survey name to learn about the survey.
Click on the survey name to learn about the survey.
Click on the survey name to learn about the survey.

National Survey of Children's Health
2011/12 NSCH Guide to Topics and Questions
- PDF version
- Interactive guide

2007 NSCH Guide to Topics and Questions
- Interactive guide
- PDF version

2003 NSCH Guide to Topics and Questions
- Interactive guide
- PDF version

National Survey of Children with Special Health Care Needs
2009/10 NS-CSHCN Guide to Topics and Questions
- Interactive guide
- PDF version

2006/06 NS-CSHCN Guide to Topics and Questions
- Interactive guide
- PDF version

2001 NS-CSHCN Guide to Topics and Questions
- Interactive guide
- PDF version

National Health Interview Survey
For the complete full-length instrument or survey sampling and administration of NHIS, visit the Survey Methods and Documentation page.

2012 NHIS Child CAM Supplement Guide to Topics and Questions
- Interactive guide (Coming Soon)
- PDF version
Child Complementary and Alternative Medicine (CAM) Supplement
2012 National Health Interview Survey (NHIS)

Guide to Topics & Questions Asked

The NHIS is a computer assisted personal household interview of all child and adult family members in selected households. Using a multi-stage area probability sampling design, the NHIS is conducted continuously through each year (since 1957). The 2012 NHIS consists of both a Core questionnaire and Supplements, including the Child CAM Supplement, which was also conducted in the 2007 NHIS. One child from each family is randomly selected to be the Sample Child (S.C.), and an adult knowledgeable about the child’s health is administered the full Sample Child Core and Child CAM Supplement.

This guide describes the topics and questions asked in the 2012 NHIS Child CAM Supplement. Note that all questions are asked only of children age 4-17. Since the NHIS Child CAM Supplement can be linked to all other NHIS data files and to future year versions of the Medical Expenditures Panel Survey (MEPS), many other variables are possible to include in analyses of the Child CAM Supplement. Further information regarding this will be provided elsewhere on the Data Resource Center for Child and Adolescent Health website (www.childhealthdata.org).

*Denotes that survey item is new to the 2011/12 NHIS Child CAM Supplement compared to the 2007.

### COMPLEMENTARY AND ALTERNATIVE MEDICINE (CAM) USE

**NOTE:** Question IDs (green) consist of two codes separated with ".". For instance, for **CCO_USE**, "CCO" refers to the CAM modality code (brown) of chiropractic or osteopathic manipulation and "USE" represents the question code asking "Has a child EVER used chiropractic or osteopathic manipulation". To complete the question ID, replace "XXX" with the CAM modality code (e.g. **CCO** for chiropractic or osteopathic manipulation or **NAH** for Native American Healer or Medicine Man).

**Abbreviation:** S.C. – Sample child

#### Practitioner-Based Therapies

- □ Has [S.C. name] EVER used any of these therapies for [his/her] health? (XXX_USE)*
  - 1. Chiropractor or osteopathic manipulation (CCO)
  - 2. Massage (CMS)
  - 3. Acupuncture (CAC)
  - 4. Energy Healing Therapy (CEH)
  - 5. Naturopathy (CNT)
  - 6. Hypnosis (CHY)
  - 7. Biofeedback (CBI)
  - 8. Ayurveda (CAY)
  - 9. Chelation (CCH)
  - 10. Craniosacral therapy (CCS)
    - *Note: If S.C. is A.D., exclude questions of 2007 and 2011 NHIS CAM Supplement
Other DRC Features Available

- **Download** cleaned, labeled survey data sets with pre-constructed 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**

- **Sign up** for e-updates
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.
Standardized data provides a powerful basis for across-state learning and building shared understanding of priorities and impact.
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: Facebook.com/childhealthdata

Follow us on Twitter: @childhealthdata
Thank You!