



General Health Status, 2000-2011

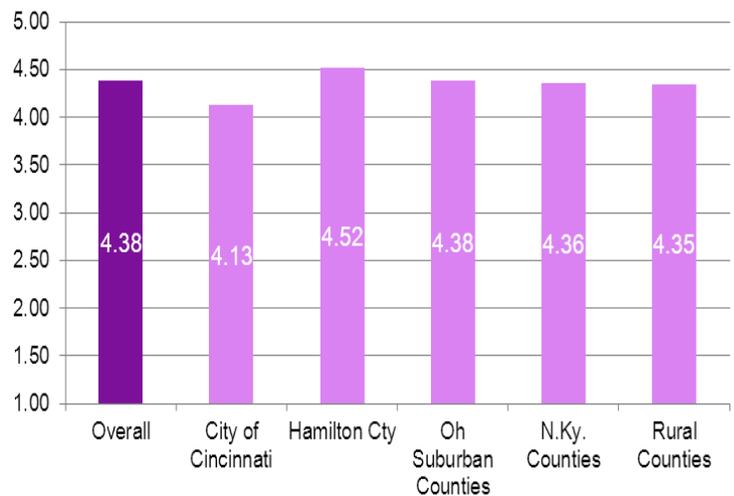
2011 Greater Cincinnati/Northern Kentucky Child Well-Being Survey

Most parents report that their child’s health is “excellent” or “very good,” but how parents describe their child’s health varies by location, race/ethnicity, and household income

The Child Well-Being Survey (CWBS) asks parents to rate their child’s overall health status as excellent, very good, good, fair, or poor. This question has been included each time the CWBS has been conducted. This question is often used on national and state-level surveys of health and is considered to be a good overall measure of health and well-being of children. **Most parents report that their child’s health is “excellent” or “very good” (84.0%)** and this percentage has changed little since 2000. In 2000, 85.8% of parents described their child’s health as excellent or very good; in 2005, 86.8% described their child’s health as excellent or very good.

The percentage of parents in the Greater Cincinnati/Northern Kentucky region who describe their child’s health as excellent or very good is very similar to the national estimate of 84% and estimates for Ohio (86%) and Kentucky (86%). The differences within our region emerge when looking at estimates across demographic subgroups and by geographic sub-region, where we find that children living in the **City of Cincinnati**, children who are **Black, non-Hispanic**, and children living in **low-income households** are less likely to have their health described as excellent or very good. The data also show **significant declines over time** for these specific groups.

Mean general health status by geographic location, 2011

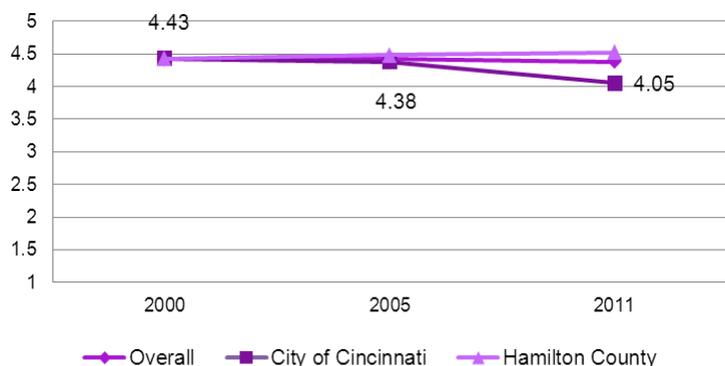


Surveys using this measure typically report the percentage of parents reporting their child’s health to be “excellent” or “very good.” However, looking at the mean general health status score across sub-regions is more revealing of differences in health status by location. To calculate the mean, we let the responses have values from 1 (poor) to 5 (excellent). Use of the mean captures not only differences between percentages of “excellent” and “very good,” but also differences in the percent responding “good,” “fair,” or “poor.”

How we compare: The 2007 National Survey of Children’s Health found that **84%** of parents **Nationally** and **86%** of parents in **Ohio and Kentucky**, reported that their child was in “excellent” or “very good” health.



Mean General Health Status Scores, By Geographic Location, 2000-2011



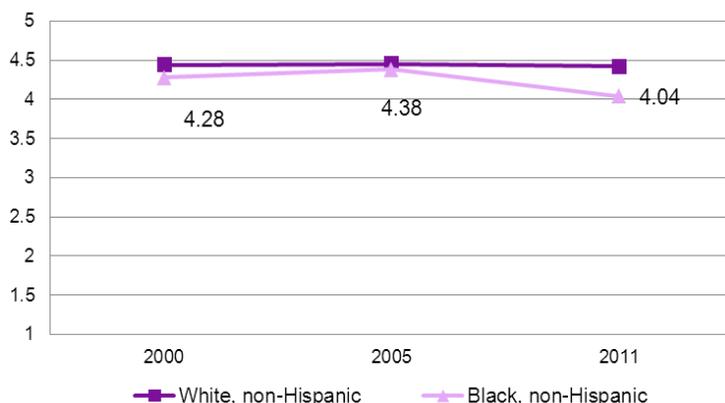
The mean general health status of children in the City of Cincinnati decreased between 2000 and 2011 (from 4.38 in 2005 to 4.05 in 2011). Most of this decline occurred between 2005 and 2011, coinciding with the recent economic recession.

The suburban counties of Ohio included in the sample also saw a small but noticeable decline as did the Northern Kentucky suburban counties between 2000 and 2011 (not shown on graph). General health status across the rural counties included in the sample remained relatively stable across all three points in time.

The mean general health status of children in the City of Cincinnati decreased from about 4.4 in 2005 to about 4.0 in 2011, on a scale of 1 to 5.

General health status also varies by race....

Mean General Health Status by Race, 2000-2011



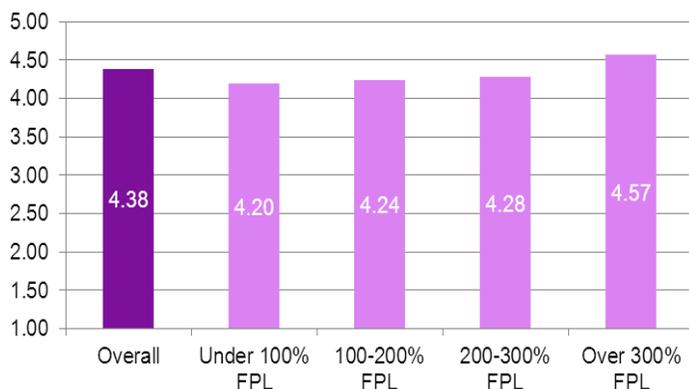
The mean general health status of Black, non-Hispanic children has declined (from 4.38 to 4.04) since 2005 after seeing a slight increase between 2000 and 2005.

Contributing to their lower mean health score, only 29% of parents of Black, non-Hispanic children rated their child's health as "excellent," compared with 60% of parents of White, non-Hispanic children (data not shown on graph). Parents of Black, non-Hispanic children were also more likely to describe their child's health as poor (4%) compared to only 0.3% of parents of White, non-Hispanic children.

...and by household income

We used household income and size to categorize families according to the 2011 Federal Poverty Guidelines, which allows us to better account for a household's resources when looking at differences in measures of child health than household income alone. These specific categories were chosen because of their loose correspondence to the income cut-offs for many forms of public assistance.

Mean General Health Status Score by Household Percentage of Federal Poverty Level, 2011



The graph above shows that as household income increases (or the household's percentage of the poverty line), mean general health status increases. The mean general health status for children living in households under 100% of the FPL is 4.2, compared to 4.58 for children living in households above 300% of the FPL. The federal poverty level for a family of four in 2011 was \$22,350.

The **Child Well-Being Survey (CWBS)** is a random-digit-dial (RDD) telephone survey of primary caregivers in the Greater Cincinnati/Northern Kentucky region. Primary caregivers, usually parents, are asked questions about one randomly selected child in their household. The CWBS was previously conducted in 2000 and 2005. The 2011 sample includes 2,083 completed surveys and covers several health topics, including: general health status, chronic conditions, usual source of care, oral health and preventive dental care, screen time and physical activity, food security, and neighborhood resources. The sampling error for the 2011 CWBS is $\pm 2.1\%$; the margin of error for any sub-group of the sample will be higher.

The 2011 CWBS was supported by the United Way of Greater Cincinnati, the Health Foundation of Greater Cincinnati, the Center for Clinical and Translational Science and Training at the University of Cincinnati, and Vision 2015 of Northern Kentucky. For more findings from the 2011 Child Well-Being survey and past surveys visit www.cchmc.org/service/j/anderson-center/health-policy/well-being/ or www.HealthFoundation.org For more information, please contact Rachel Sebastian, MA at (513) 803-2396 or rachel.sebastian@cchmc.org.