An Overview of Child and Adolescent Health

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Why is Child and Adolescent Health Important?
- Unique needs and health problems distinct from adults
- Health care system is distinct (providers, technology)
- Demographic composition

Why is Child and Adolescent Health Important?
- Foundation for life-long health status
  - Health behaviors
  - Brain development
- Determines future social and economic health of society

On an Average Day in Virginia:
- 40 women did not receive prenatal care
- 22 weigh < 5.5 lbs.
- 7 born to teens 15-17 years of age
- 84 babies born to single women
- 1:3 receive free or reduced school lunch
- 2 die before their first birthday
- > 18 found to be abused/neglected
- 1 child dies (ages 12-14)
- 3 youths arrested for violent crimes (to age 18 years)
- 27 teens 9-12th grade drop out of school

Challenges for Parents/Families
- 31% percent of births in VA are to single mothers
- 17 of 1000 births are to a 15-17 year old mother
- Approximately 13% of children in VA live in poverty
- 62% of children under age 6 live in a home where all parents are working
- About 330,000 in this age group have all parents in the workforce
- In Virginia, 68% of women (253,000) and 85% of men (241,000) with children under age 6 are employed

Virginia Annual Per Child Investment
- Children less than 5 years comprise 9.3% of total state population
- 0.2% of total general fund expenditures are allocated for early learning
  - Annual per child state & federal investment B-5 years= $1,068
  - Annual per child state & federal investment school age = $7,654
- Annual state and federal investment for college youth= $4,483
Long Term Indicators—Where Is Virginia in 2009

The following long-term trends are noted on Virginia measures:

Four measures showed improvement:
- child death rate
- teen death rate
- teen birth rate
- high school dropout rate

Two measures did not change:
- percent of teens not in school and not working (“idle teens”)
- child poverty rate

Four measures worsened:
- percentage of low-birth weight babies
- infant mortality rate
- percentage of children living in families where no parent has full-time year-round employment
- percentage of children in single parent families

Child and Adolescent Health

- Objectives:
- Overview of Child and Adolescent Health State Data
- Comparison of Public Health, Private Provider’s, and Health Plan’s Roles
- Developmental Stages
- Public Health Concerns
- Approaches to the Issues

Public Health’s Role

Comparison of Public Health, Private Provider’s, and Health Plan’s Roles

Major Developmental Stages

- Infancy
- Early Childhood
- Middle Childhood
- Adolescence

Infancy

- Rapid growth & development, including most of brain growth
- Bond & trust with parents
## Infancy
### Major Public Health Concerns
- **Healthy Family**
  - Parental relationships
  - 27% of children live w/ 1 parent
- **Parental Support**
- **Personal Emotional Health**
  - Maternal depression: UVA study found that boys and girls from poor families with depressed mothers had delays in cognitive and motor development.
- **Healthy Behaviors**

### Newborn screening
- **Social-Emotional Competence**
  - Struggling with the effects of violence and showing the impacts of maternal depression
  - Described as “mad, bad and sad”
- **Immunization**
  - 23.9% of day care participants and 28.2% of Head Start participants were not up-to-date by 24 months of age for the 4-3-1 immunization series—DTAP, polio, MMR (VA Immunization Survey)
- **Regular Health Care**
  - 15% all children have no insurance

### Prevention of SIDS
- 38% drop in SIDS death; 66% rise in infants placed on their backs following P.H. campaign
- Direct link to second hand smoke

### Prevention of Child Abuse/Neglect
- The number of child maltreatment deaths in 2000 was 33 (16 in the <1 year age group), decreasing to 31 (15 in the <1 year age group)

### Oral Health
- 20% of indigent 3 year-olds have tooth decay
- Dental disease is directly related to income

## Early Childhood
### Major Public Health Concerns
- **Children w/ Special Needs**
  - Learning Disabilities
  - Behavioral Problems
  - Physical Conditions
  - 15% are CSHCN
- **Dental Visits**
  - 20% all children no dental visit/40% <2 visits
  - 25% of ALL children entering kindergarten have visible untreated tooth decay
Early Childhood
Major Public Health Concerns

- Child Care
  - Over 75% of working women have a child in child care
  - Approximately 63% of children are in some form of care: various forms of child care, Head Start, VPI, Title 1 Preschool.
  - Young children are being kicked out of child care programs because of their behaviors, including infants and toddlers

- Injury Prevention
  - Motor vehicles
    - Car seat safety
  - Drowning

Middle Childhood (6 - 11)

- Growing sense of physical competence - sports participation
- Cognitive development
- Sense of self and “fit”

Middle Childhood

- Moral/spiritual development
- Responsibility for health behaviors

Middle Childhood
Major Public Health Concerns

- Healthy Behaviors
  - nutrition/physical exercise
    - 1/2 of 4th graders are overweight
  - injury prevention
  - sports
  - bicycles
    - leading cause of death 5-14 year olds
  - dental hygiene
  - impulse/anger control
  - alcohol/tobacco/other drugs

Middle Childhood
Major Public Health Concerns

- Healthy Relationships
  - with parents and other adults
  - peers
- After-school supervision - school connectedness
- Mental Health
  - most common reason for hospitalization 10-14 year olds

Adolescence (11 - 21)

- Dramatic physical, cognitive, social and emotional changes - opportunities & challenges
- Somatic & sexual growth & development
- Relationships
  - Peer, Family, School
Adolescence (11 - 21)

- Experimentation with new behaviors
- More unsupervised time/less parental involvement
- Meaningful work & community service opportunities

Adolescence Major Public Health Concerns

- Motor Vehicle Deaths and Injuries
  - No. 1 cause of death and hospitalization 15-19 year olds

- Alcohol/Drug Use
  - 20% of H.S. students used alcohol, 7% marijuana in last 30 days

- Tobacco or Tobacco Product
  - 27% of H.S. students; 10% of Middle Schoolers

- Firearms/Violence
  - Homicide - 2nd; Suicide - 3rd causes of death 15-19 year olds
  - 17% carried weapons; 7% to school in last 30 days

Adolescence

- Expression of Sexuality
  - Childbirth - leading cause of hospitalization 15-19 year olds
  - > 50% of all H.S. students have had sexual intercourse
  - STDs - Chlamydia (1,301/100,000 15-19 year olds), Gonorrhea (561/100,000 15-19 year olds)

- Physical Activity/Nutrition
  - 30% overweight

- Annual health supervision/access to care
- After-school activities/community service

Approaches to the Issues

1. Build a system of support at both state and local levels (use strategic fiscal planning; focus on reducing risks and early intervention; integrated service delivery)

2. Use programmatic strategies to reduce risks (i.e. - address family economic security as a health promoting strategy)

Cross-system Fiscal & Infrastructure Strategies

- Maximize the impact of Title V in system-building to promote social, emotional and behavioral health
- Engage in cross-system fiscal planning and change strategies
- Develop shared definitions of at-risk

Cross-system Fiscal & Infrastructure Strategies

- Gap-filling, direct services
- Support two-generational services (e.g. maternal depression-curriculum; co-location of social workers or child development staff in pediatric offices
- Hire families as parent coordinators; work with family organizations
- Enabling Services (respite care, family support services)
- Population-based services (outreach to pediatricians to help with voluntary screening moms and babies for social and emotional risks)
- Infrastructure-promoting integrated service delivery (Cross-system training)
Programmatic Strategies

- Expand Consultation Models
  - Build on Healthy Child Care America & other state and community initiatives
- Link CSHCN and MCH more closely
  - Make sure definition of CSHCN includes attention to social, emotional and behavioral issues
- Expand core partnerships
  - Child welfare, Part C, etc.
- Support shared community-level cross-training
  - Benefits information at all access points
  - Family Advocacy Program

Want to Know More?

National and federal web sites

- www.vdh.state.va.us
- www.vahealth.org
- http://www.vahealth.org/childadolescenthealth/EarlyChildhoodHealth/
- http://www.vakids.org/work/kcdata.htm