Using Kidsdata for Action
October 24, 2018

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Overview of Kidsdata
Use Data to Inform Action
How to Access Data
Kidsdata

When you need data to support improvements in the health and well-being of California children, kidsdata makes it easy to find.

Visit kidsdata.org ➤
High-quality, wide-ranging, local data

56 Topics
By Regions

5 CSHCN Topics
By Demographics

Context & Recommendations
CHARACTERISTICS
ACCESS TO SERVICES
INSURANCE COVERAGE
IMPACT ON CHILDREN AND FAMILIES
QUALITY OF CARE
Active California Children's Services (CCS) Enrollees, by Age Group: 2009 to 2014

Definition: Number of enrollees in the California Children's Services (CCS) program with a paid claim, by age group.

Data Source: As cited on kidsdata.org, Stanford Center for Policy, Outcomes, and Prevention, analysis of CCS claims data (Jun. 2017).
Unmet Needs for Health Services Among Children with Special Health Care Needs: 2009-2010

California

- Early Intervention
- Mental Health Services
- Referrals to Specialty Care
- Transitional Services
- Unmet Needs

Definition: Percentage of children with special health care needs (CSHCN) ages 0-17 with and without any unmet needs for 14 specific health care services or equipment in the past 12 months.


### Data Source:

### Definition:
Percentage of children with and without special health care needs ages 0-17 whose health insurance is adequate. “Adequate” means the coverage is consistent and meets the child’s health needs.

### United States

<table>
<thead>
<tr>
<th>Special Needs Status</th>
<th>Adequate Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children with Special Health Care Needs</td>
<td>70.8%</td>
</tr>
<tr>
<td>Children without Special Health Care Needs</td>
<td>77.9%</td>
</tr>
</tbody>
</table>

### California

<table>
<thead>
<tr>
<th>Special Needs Status</th>
<th>Adequate Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children with Special Health Care Needs</td>
<td>67.7%</td>
</tr>
<tr>
<td>Children without Special Health Care Needs</td>
<td>75.7%</td>
</tr>
</tbody>
</table>
Impact of Special Needs on Children and Families

- Daily Activities
- Education
- Emotional Stress
- Financial Problems
- Parental Employment

Definition: Percentage of children ages 0-17 with special health care needs whose parents feel stress due to parenting.

Receipt of Family-Centered Health Care for Children with Special Health Care Needs: 2009-2010

Definition: Percentage of children ages 0-17 with special health care needs receiving all components of family-centered care, by race/ethnicity. Family-centered care is a fundamental part of quality care that involves a minimum level of effective communication and interaction with families.

Use Data to Inform Action

**How can data support your message?**

**If data are not available, what can you do?**

**How can you make your message stronger?**
Access—who has access to services, programs, etc.? Who doesn’t?
Equity—are resources equitable across groups or regions?
Quality—what is the quality of environment, services, programs?
Rights—what are the rights of community members?
Cost—what is the cost to taxpayers, business, individuals?

Access & Equity

Difficulty Accessing Community-Based Services for Children with Special Health Care Needs, by Complexity of Need: 2009-2010

- Access
- Equity
- Quality
- Rights
- Cost
**Proxy**—data that can substitute for the information you need because they are closely related to your issue.

**School Days Missed Among Children with Special Health Care Needs: 2009-2010**

- Use proxies
- Advocate for more data
How can you make your message stronger?

• Combine data with a descriptive narrative or anecdote
How to Access Data

Find data about the health and well-being of children in communities across California:

Enter a location and/or a topic, e.g. "Los Angeles foster care".

Youth in Schools Data

The educational environment is one of the core foundations that shape children and is crucial to ensuring optimal health and well-being. Access over 270 indicators across more than a dozen topics from the viewpoint of California's students and school staff.
Where should I target outreach to promote adoption of the medical home model?

Primary care that is accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective