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In the Literature

THE NATIONAL SURVEY OF EARLY CHILDHOOD HEALTH

While pediatric care providers are well positioned to provide developmental guidance to parents of young children, they may not know what kind of resources, information, and skills parents need. To help fill this gap, the American Academy of Pediatrics (AAP) and the UCLA Center for Healthier Children, Families, and Communities developed the National Survey of Early Childhood Health (NSECH) to examine families' experiences, both with pediatric care and with supporting their children's health at home.

Stephen J. Blumberg, Ph.D., of the Centers for Disease Control and Prevention, and colleagues detail the objectives and design of the NSECH in "<u>The National Survey of</u> <u>Early Childhood Health</u>" (*Pediatrics*, June 2004). Research was funded by the Gerber Foundation, the AAP Friends of Children Fund, the Maternal and Child Health Bureau, and The Commonwealth Fund.

Goals of the NSECH

The survey set out to answer the following questions regarding child care and development:

- What are the primary health care issues facing parents today?
- What concerns do parents have about raising their children?
- Which developmental and parenting issues do parents want to learn more about?
- Which issues are already being addressed by medical care providers?

The selection of specific survey topics was guided by previous studies of parents' expectations and goals regarding heath care visits. In choosing categories, researchers considered, among other criteria, if the topic was important enough for pediatricians to address, or if it was an area in which pediatricians could effect change in parents' behaviors. In the end, the questionnaire included sections on language development, growth and nutrition, discipline, injury prevention, sleep patterns, family substance abuse, and family stress.

Survey Design

The survey was first conducted by phone between February and July 2000, using a sampling frame adopted by the National Immunization Survey (NIS). The age eligibility range for the NSECH (4–35 months) substantially overlapped with that of NIS (19–35 months), and families who were eligible for both surveys were given the NIS interview followed by the NSECH. The NSECH interviewed 2,068 households; 1,208 in a national sample and 860 as part of an oversample of black and Hispanic children to permit more precise estimates for those groups.

Conclusion

The NSECH provides a unique set of data that sheds light on the health and health care utilization of young children, as well as the content and quality of health services they receive. In addition, it contains important information about families and patterns of health-promoting behaviors that will be of value to pediatricians, as well as other providers, health plan administrators, purchasers, and child advocates. NSECH results, say the authors, can also help national policymakers understand the health needs of families with young children and how well the health system is meeting those needs.