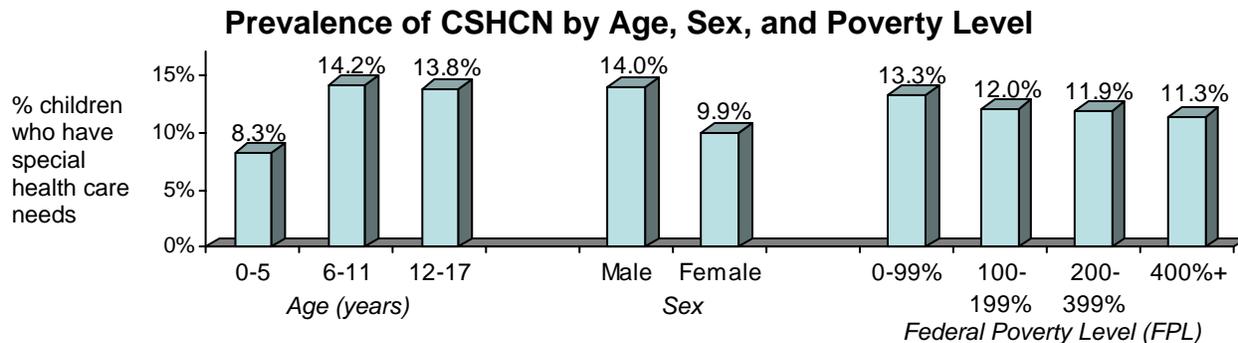


# Children with Special Health Care Needs (CSHCN) in Hawai'i

Hawai'i data from the National Survey of CSHCN, 2005-2006

**Prevalence (% of children with special health care needs): 12.0%**

**Estimated number of CSHCN: 36,066**



## Prevalence of CSHCN by Race and Hispanic Origin

	% Children
Non-Hispanic	11.4%
White	13.1%
Black	9.6%
Asian	8.7%
Native Hawaiian/Pacific Islander	12.0%
Multiple Races	12.9%
Hispanic	15.5%

## CSHCN Indicators

	% CSHCN
<b>Child Health</b>	
CSHCN whose conditions affect their activities usually, always, or a great deal	23.5%
CSHCN with 11 or more days of school absences due to illness	12.8%
<b>Health Insurance Coverage</b>	
CSHCN without insurance at some point in past year	3.3%
CSHCN without insurance at time of survey	0.9%
Currently insured CSHCN whose insurance is inadequate	24.3%
<b>Access to Care</b>	
CSHCN with any unmet need for specific health care services	13.3%
CSHCN with any unmet need for family support services	5.6%
CSHCN needing a referral who have difficulty getting it	21.4%
CSHCN without a usual source of care when sick (or who rely on emergency room)	6.8%
CSHCN without any personal doctor or nurse	6.0%
<b>Family Centered Care</b>	
CSHCN without family-centered care	36.1%
<b>Impact on Family</b>	
CSHCN whose families pay \$1,000+ out-of-pocket in medical expenses per year for child	11.1%
CSHCN whose condition caused financial problems for the family	11.0%
CSHCN whose families spend 11+ hours per week providing/coordinating child's health care	11.3%
CSHCN whose conditions cause family members to cut back or stop working	22.1%

## Core Outcomes for CSHCN in Hawai'i

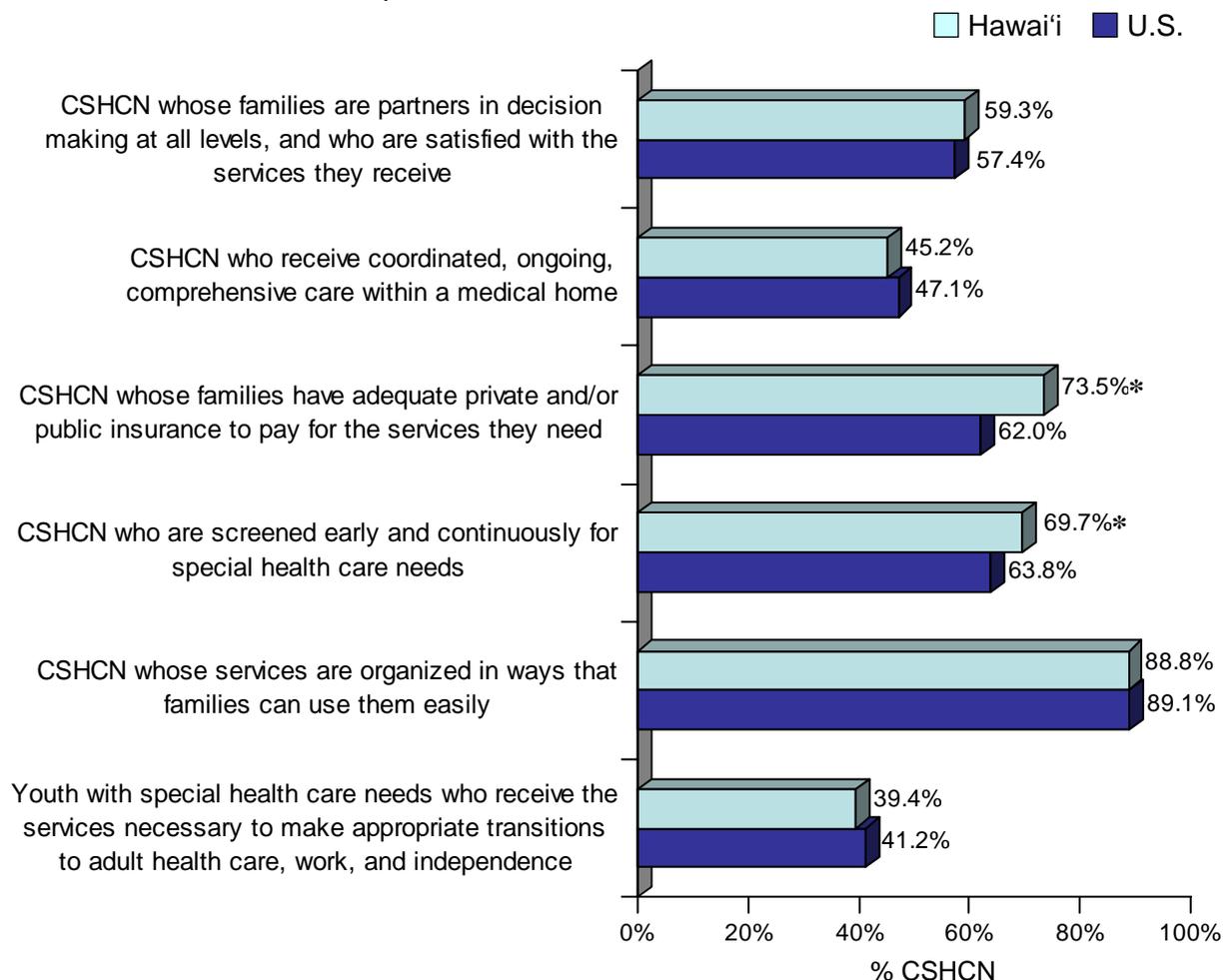
*with indicator(s) used to derive outcome*

% CSHCN

<b>Families partner in decision-making at all levels and are satisfied with the services they receive</b>	<b>59.3%</b>
Doctors usually or always made the family feel like a partner	87.9%
Family is very satisfied with services received	62.2%
<b>CSHCN receive coordinated, ongoing, comprehensive care within a medical home</b>	<b>45.2%</b>
<b>Child has a usual source of care</b>	<b>91.9%</b>
Child has a usual source for sick care	93.2%
Child has a usual source for preventive care	97.7%
<b>Child has a personal doctor or nurse</b>	<b>94.0%</b>
<b>Child has no problems obtaining referrals when needed</b>	<b>78.6%</b>
<b>Child receives effective care coordination</b>	<b>60.9%</b>
Family is very satisfied with doctors' communication with each other	61.5%
Family is very satisfied with doctors' communication with other programs	51.4%
Family usually or always gets sufficient help coordinating care, if needed	76.0%
<b>Child receives family-centered care</b>	<b>64.4%</b>
Doctors usually or always spend enough time	77.5%
Doctors usually or always listen carefully	88.9%
Doctors are usually or always sensitive to values and customs	90.8%
Doctors usually or always provide needed information	82.4%
Doctors usually or always make the family feel like a partner	87.9%
An interpreter is usually or always available when needed	-
<b>Families of CSHCN have adequate private and/or public insurance to pay for the services they need</b>	<b>73.5%</b>
Child has public or private insurance at time of interview	99.1%
Child has no gaps in coverage during year before the interview	96.7%
Insurance usually or always meets the child's needs	91.0%
Costs not covered by insurance are usually or always reasonable	79.8%
Insurance usually or always permits child to see needed providers	94.4%
<b>Children are screened early and continuously for special health care needs</b>	<b>69.7%</b>
Child has received routine preventive medical care in the past year	79.5%
Child has received routine preventive dental care in the past year	86.6%
<b>Community-based service systems are organized so families can use them easily</b>	<b>88.8%</b>
Child's family has experienced no difficulties using services	88.8%
<b>Youth with special health care needs receive the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence</b>	<b>39.4%</b>
<b>Child receives anticipatory guidance in the transition to adulthood</b>	<b>36.9%</b>
Doctors have discussed shift to adult provider, if necessary	36.1%
Doctors have discussed future health care needs, if necessary	62.4%
Doctors have discussed future insurance needs, if necessary	46.9%
<b>Child has usually or always been encouraged to take responsibility for his or her health care needs</b>	<b>79.6%</b>

## Core Outcomes for CSHCN

### Comparison of Hawai'i and U.S. Rates



\* Statistically significant difference between Hawai'i and U.S. rates at the 95% confidence interval

**Notes:**

The National Survey of CSHCN was sponsored by the Maternal and Child Health Bureau of the U.S. Department of Health and Human Services. Sampling and telephone interviews were directed by the National Center for Health Statistics of the Centers for Disease Control and Prevention. For this survey, CSHCN are defined as "those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally".

**Data sources:**

- Centers for Disease Control and Prevention, National Center for Health Statistics. *Progress Toward Implementing Community-Based Systems of Services for CSHCN: Summary Tables from the National Survey of CSHCN, 2005-2006.*  
[www.cdc.gov/nchs/data/slats/Summary\\_tables\\_NSCSHCN\\_0506.pdf](http://www.cdc.gov/nchs/data/slats/Summary_tables_NSCSHCN_0506.pdf)
- Child and Adolescent Health Measurement Initiative. *2005/2006 National Survey of Children with Special Health Care Needs*, Data Resource Center for Child and Adolescent Health website. Retrieved 1/6/08 from [www.cshcndata.org](http://www.cshcndata.org).

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