



HEALTH STATUS - CHILDREN



VACCINE-PREVENTABLE DISEASES

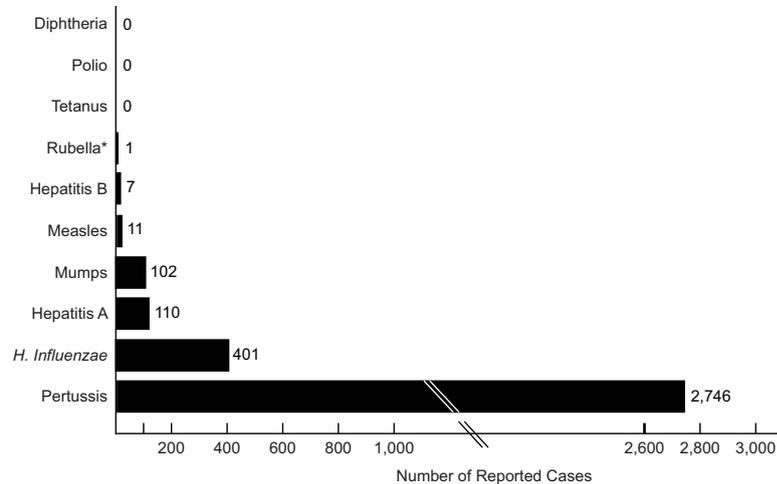
The number of reported cases of vaccine-preventable diseases has generally decreased over the past several decades. In 2007, there were no reported cases of diphtheria or polio in the United States, and no cases of tetanus among children under 5 years of age. Among children in this age group, there were no reported cases of acquired rubella and only one case of congenital rubella.

From 2006 to 2007, the number of reported cases of hepatitis A, pertussis, and mumps decreased among children under 5 years of age. The overall incidence of hepatitis A began dropping dramatically once routine vaccination for children living in high-risk areas was recommended beginning in 1996, and in 2005, the Centers for Disease Control and Prevention (CDC) instituted the recommendation that all children be immunized for hepatitis A starting at 1 year of age. The latter recommendation was made because two-thirds of cases were occurring in States where the vaccine was not currently recommended. With regard to pertussis, the number of cases among young children decreased nearly 50 percent from 2005 to 2006, with a smaller increase of 18 percent from 2006 to 2007. According to the CDC, pertussis occurs cyclically and decreases in the incidence of the disease may not be due to increases in

immunization rates. The highest reported rate occurred among infants under 6 months of age, a population that is too young to be fully vaccinated. Following a 2006 outbreak in Midwestern states — the largest in more than 20 years — reported cases of mumps decreased 72 percent. In response to the outbreak, the CDC updated criteria for mumps immunity and vaccination recommendations. Reported cases of hepatitis B and *H. Influenzae* remained relatively unchanged from 2006 to 2007.

Reported Cases of Selected Vaccine-Preventable Diseases Among Children Aged 0–4 Years, 2007

Source (II.4): Centers for Disease Control and Prevention, National Notifiable Diseases Surveillance System



PEDIATRIC HIV AND AIDS

Human immunodeficiency virus (HIV) is a disease that destroys cells that are critical to a healthy immune system. Acquired immunodeficiency syndrome (AIDS) is diagnosed when HIV has weakened the immune system enough that the body has difficulty fighting disease and infections. In 2008, an estimated 182 children younger than 13 years of age were diagnosed with HIV¹, and 41 were reported to have AIDS.

Racial and ethnic minorities are disproportionately affected by HIV. In 2008, four times as many HIV cases were reported among non-

Hispanic Black children as among non-Hispanic White Children (121 and 32 cases, respectively). Non-Hispanic Black children accounted for over 65 percent of cases, but represent only about 15 percent of the total U.S. population in this age group.

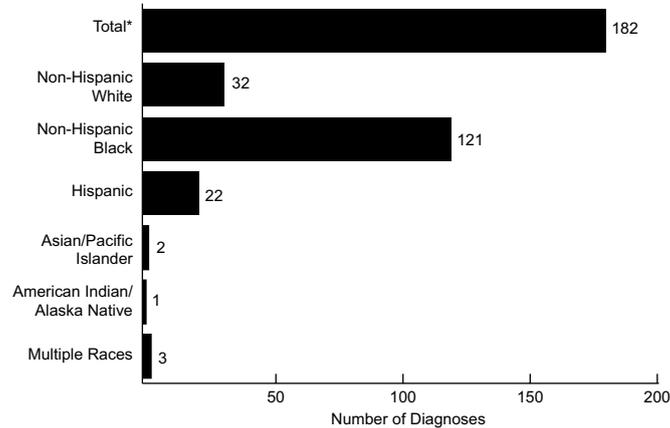
The number of new pediatric AIDS cases has declined substantially since 1992, when an estimated 894 new cases were reported. A major factor in this decline is the increasing use of antiretroviral therapy before, during, and after pregnancy to reduce perinatal transmission of HIV. In addition, the Centers for Disease Con-

trol and Prevention released new educational materials and other resources in 2004 to promote universal prenatal HIV testing. Through 2008, an estimated 9,349 AIDS cases have occurred in children younger than 13 years of age in the United States. Pediatric AIDS cases represent less than one percent of the more than one million U.S. cases ever reported.

1 Includes persons with a diagnosis of HIV infection regardless of stage of disease at diagnosis; therefore, this includes persons who are first diagnosed with HIV at the same time they are diagnosed with AIDS.

Estimated Number of Diagnoses of HIV Among Children Under Age 13, by Race/Ethnicity, 2008

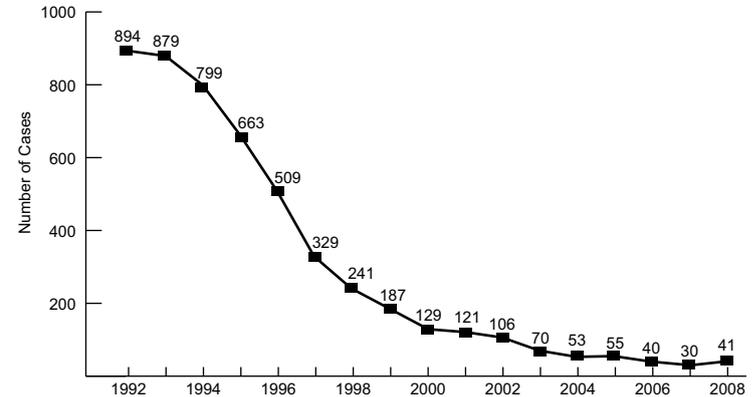
Source (II.5): Centers for Disease Control and Prevention, HIV/AIDS Surveillance System



*The total was estimated independently of the values for each subpopulation; therefore, the sum of all races/ethnicities does not equal the overall total.

Estimated Number of AIDS Cases in Children Under Age 13, by Year of Diagnosis, 1992–2008

Source (II.5): Centers for Disease Control and Prevention, HIV/AIDS Surveillance System



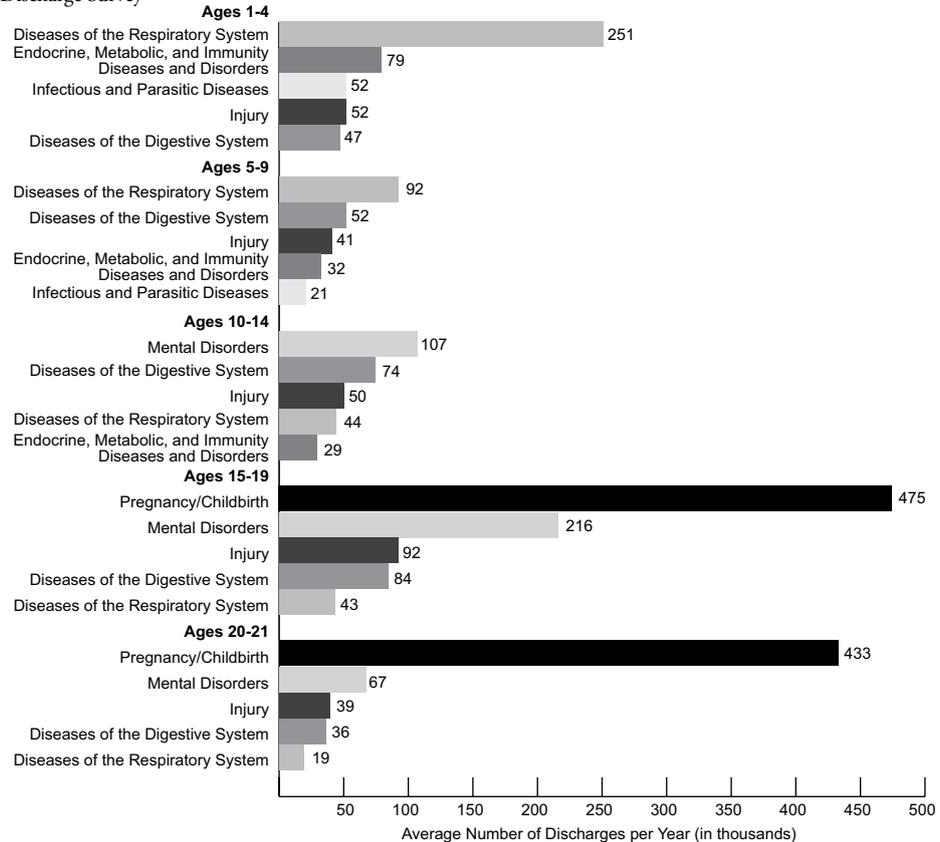
HOSPITALIZATION

In 2006, there were nearly 3.5 million hospital discharges among people aged 1–21 years, equaling 4.0 hospital discharges per 100 children. While injuries are the leading cause of death among this age group, they were not the most common cause of hospitalization. In 2005–2006, diseases of the respiratory system were the most common cause of hospitalization among children aged 1–4 and 5–9 years, accounting for 39 and 24 percent of discharges, respectively. Mental disorders were the most common cause of hospitalization among children aged 10–14 years (24 percent of discharges), and pregnancy and childbirth was the most common cause of hospitalization for adolescents aged 15–19 years and young adults aged 20–21 years (42 and 64 percent of discharges, respectively).

Between 1990 and 2006, hospital discharge rates for children aged 1–14 years declined by almost 14 percent, which reflects decreases in several of the most common causes of hospitalization. Discharge rates for diseases of the respiratory system declined 26.4 percent, discharges due to injury declined 34.2 percent, and discharges for diseases of the digestive system declined 19.0 percent. The rate of discharges due to endocrine, metabolic, and immunity diseases and disorders, however, increased 36.8 percent. This category of diseases and conditions includes thyroid gland disorders, diabetes, nutritional deficiencies, and overweight and obesity (data not shown).

Major Causes of Hospitalization, by Age, 2005-2006

Source (II.6): Centers for Disease Control and Prevention, National Center for Health Statistics, National Hospital Discharge Survey



AUTISM SPECTRUM DISORDER

In 2007, the parents of 1.0 percent of children reported that their child had been diagnosed with an autism spectrum disorder (ASD) and that they currently had the disorder. ASD includes a range of diagnoses, including Asperger's Syndrome, autism, and Pervasive Developmental Disorder (PDD). Children with autism have delays in language, communication, and social skills, while children with Asperger's disorder have impaired social skills but do not have speech or language delays. They often have an intense interest in a single subject or topic as well. Children with PDD have severe and per-

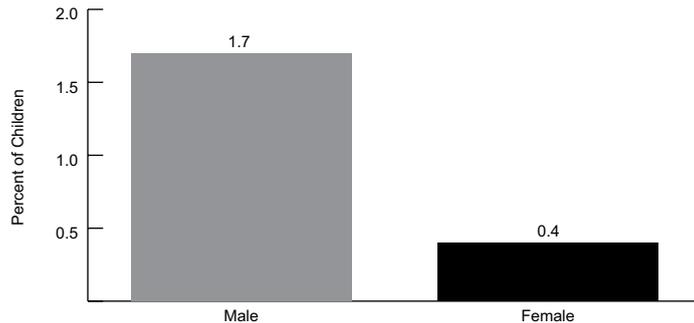
sistent delays in language, communication, and social skills.

Autism spectrum disorders are four times more common among males than females. In 2007, 1.7 percent of male children were reported by parents to have an ASD, compared to 0.4 percent of female children. There is also a racial/ethnic disparity in the prevalence of ASD. The parents of 1.2 percent of non-Hispanic White children reported that their child had an ASD in 2007, compared to 1.0 percent of Hispanic children, and 0.6 percent of non-Hispanic Black children.

In 2007, the parents of 0.6 percent of children reported that their child had been diagnosed with an ASD in the past but that the child did not currently have the condition. This varied by race/ethnicity, with 0.3 percent of Hispanic children, 0.6 percent of non-Hispanic White children, and 1.2 percent of non-Hispanic Black children having a previous, but not current, ASD diagnosis (data not shown).

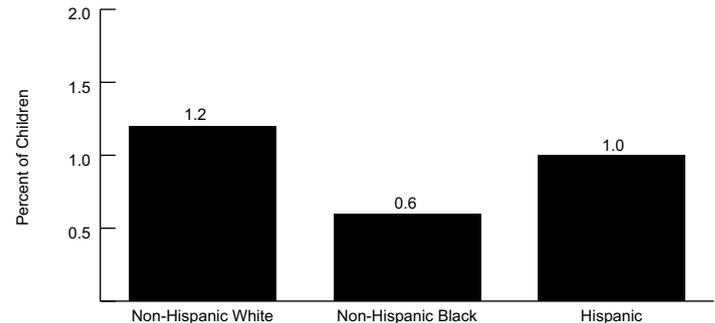
Prevalence of Autism Spectrum Disorders Among Children Aged 2-17 Years, by Sex, 2007

Source (I.7): Health Resources and Services Administration, Maternal and Child Health Bureau and Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health



Prevalence of Autism Spectrum Disorders Among Children Aged 2-17 Years, by Race/Ethnicity, 2007

Source (I.7): Health Resources and Services Administration, Maternal and Child Health Bureau and Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health



ABUSE AND NEGLECT

State child protective services (CPS) agencies received approximately 3.2 million referrals, involving an estimated 5.8 million children, alleging abuse or neglect in 2007. More than half of these reports were made by community professionals, such as teachers and other educational personnel, police officers, medical personnel, and childcare providers.

Investigations determined that an estimated 794,000 children were victims of abuse or neglect in 2007, equaling a victimization rate of 10.6 per 1,000 children in the population. Neglect was the most common type of maltreat-

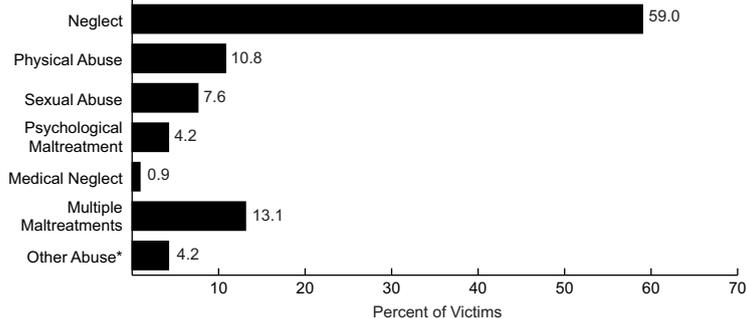
ment (experienced by 59.0 percent of victims), followed by physical abuse (10.8 percent), and sexual abuse (7.6 percent). Less common types of documented abuse included psychological maltreatment, medical neglect, and categories of abuse defined by specific State laws and policies. Multiple types of maltreatment were suffered by 13.1 percent of victims.

Victimization rates were highest among young children. In 2007, the rate of victimization among children under 1 year of age was 22.2 per 1,000 among boys and 21.5 per 1,000 among girls; the rate declined steadily with increasing age (data not shown). Younger chil-

dren were more likely than older children to be victims of neglect, while older children were more likely to be physically or sexually abused. Overall, 80 percent of perpetrators of abuse or neglect were parents of the victim (either alone or in conjunction with another person). Additional categories of perpetrators included other relatives (4.8 percent), unmarried partners of parents (2.6 percent), and professionals such as childcare workers and residential facility staff (0.8 percent). Other types of perpetrators included foster parents, friends and neighbors, and legal guardians.

Abuse and Neglect Among Children Under Age 18, by Type of Maltreatment, 2007

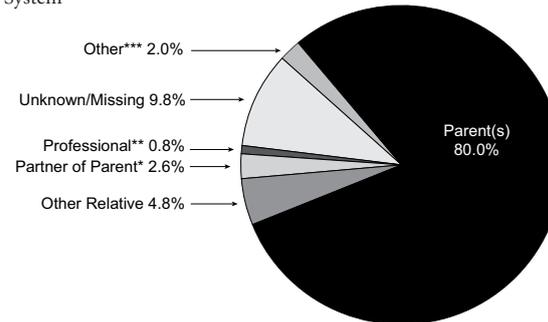
Source (II.7): Administration for Children and Families, National Child Abuse and Neglect Data System



*Any maltreatment type that does not fall into one of the first five categories; can include abandonment, threats of harm, and congenital drug addiction.

Perpetrators of Child Abuse and Neglect, by Relationship to Victim, 2007

Source (II.7): Administration for Children and Families, National Child Abuse and Neglect Data System



*Defined as someone who has a relationship with the parent and lives in the household with the parent and maltreated child. **Includes residential facility staff, child daycare providers, and other professionals. ***Includes foster parents, friends or neighbors, legal guardians, and multiple nonparental perpetrators.

CHILD MORTALITY

In 2007, 10,850 children aged 1 to 14 years died of various causes, which was an increase of 70 cases over the previous year. The overall mortality rate among children aged 1 to 4 years was 28.6 per 100,000 children in that age group, and the rate among children aged 5 to 14 years was 15.3 per 100,000 (data not shown).

Unintentional injury continued to be the leading cause of death among children in both age groups, accounting for 34 percent of all deaths among 1- to 4-year-olds and 36 percent of deaths among 5- to 14-year-olds. Among 1- to 4-year-olds, drowning was the leading cause of unintentional injury death (accounting for 29 percent), followed by motor vehicle traffic (27 percent), fires or burns (13 percent), suffocation (9 percent), and pedestrian injuries (8 percent; data not shown). Among 5- to 14-year-olds, motor vehicle traffic was the leading cause of unintentional injury death (53 percent), followed by drowning (10 percent), fires or burns (10 percent), land transport crashes (such as off-road vehicles, 6 percent), and suffocation (5 percent; data not shown). Congenital anomalies (birth defects), homicide, malignant neoplasms (cancer), and heart disease rounded out the top five leading causes of death for each age group, though in a different order for each.

Mortality rates were higher among males than females in each age group. There are also

racial/ethnic disparities in child mortality, with non-Hispanic Black children experiencing higher mortality rates than children of other racial/ethnic groups. Among children aged 1 to 4 years, the rate was 43.7 per 100,000 for non-Hispanic Blacks, compared to rates of 26.0 and 25.5 per 100,000 for Hispanics and non-

Hispanic Whites, respectively. Among children aged 5 to 9 years, rates were 18.6 per 100,000 for non-Hispanic Blacks, 13.4 per 100,000 for Hispanics, and 12.7 for non-Hispanic Whites. Among children aged 10 to 14 years, rates were 24.6, 14.9, and 15.7 per 100,000, respectively (data not shown).

Leading Causes of Death Among Children Aged 1–14, 2007

Source (II.8): Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System

