

DEFINITIONS AND SOURCES

GENERAL CHILD HEALTH

General Health Status of Illinois Children

Data are from the National Survey of Children's Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed, and results are weighted to represent the child population in each state. Data were retrieved from the National Survey of Children's Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org).

School Days Missed Due to Illness or Injury by Illinois Children Ages 6 to 17

Data are from the National Survey of Children's Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed, and results are weighted to represent the child population in each state. Data were retrieved from the National Survey of Children's Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org).

Illinois Children in Poverty

The poverty threshold is determined by the U.S. Office of Management and Budget and varies by family size. A family of four was considered to be in poverty if they earned less than \$18,810 in 2003. Data are from the U.S. Census Bureau's Small Area Income and Poverty Estimates program (www.census.gov/hhes/www/saippe.html), except for 2000 data which are from the decennial census (<http://factfinder.census.gov>).

Illinois Children with HIV and AIDS

Data are reported cumulatively for 2000 through 2006 to provide large enough sample sizes to preserve confidentiality. Twenty-four counties reported cases: Adams, Champaign, Christian, Coles, Cook, DuPage, Grundy, Iroquois, Johnson, Kane, Kankakee, Kendall, Lake, Livingston, Macon, Madison, McLean, Peoria, Rock Island, St. Clair, Saline, Stephenson, Vermilion and Will. The other 78 counties report no cases. Cases are reported through July 31, 2006. Data are from the Illinois Department of Public Health HIV/AIDS Section Surveillance Program.

Oral Health Status of Illinois Third Graders

Tooth decay (also called dental caries) means children with any experience of treated or untreated tooth decay, including cavities. Significant tooth decay is also called a cavitated lesion. Data were collected from screenings of 6,630 children in 26 counties from December 2003 through June 2004. The 99 schools that participated in the survey were randomly selected with implicit stratification on region, urban / rural status and free / reduced lunch eligibility so that data can be generalized to all Illinois third graders. Data are from the Illinois Department of Public Health Division of Oral Health's "Healthy Smiles, Healthy Growth" survey. The goal is from Healthy People 2010 (www.healthypeople.gov), an initiative of the U.S. Department of Health and Human Services that sets health objectives for the nation to achieve. These objectives were developed through a broad consultation process and are based on scientific knowledge.

Illinois Third Graders with Dental Sealants

Dental sealants are thin, plastic coatings on the chewing surface of permanent molars to prevent decay. Data indicate the third graders with sealants on at least one permanent molar. Data were collected from screenings of 6,630 children in 26 counties from December 2003 through June 2004. The 99 schools that participated in the survey were randomly selected with implicit stratification on region, urban / rural status and free / reduced lunch eligibility so that data can be generalized to all Illinois third graders. Data are from the Illinois Department of Public Health Division of Oral Health's "Healthy Smiles, Healthy Growth" survey. The goal is from Healthy People 2010 (www.healthypeople.gov), an initiative of the U.S. Department of Health and Human Services that sets health objectives for the nation to achieve. These objectives were developed through a broad consultation process and are based on scientific knowledge.



Vision Screenings of Illinois Children (PreK through 12th Grade)

Children are referred for further testing if they fail the initial screening and the re-screening. Parents are responsible for following up with a medical provider. Children who have glasses reflects the number of children who already have or are supposed to have glasses; the glasses are examined to see if they are in working condition, but their prescription is not tested. Data are from the Illinois Department of Public Health.

Hearing Screenings of Illinois Children (PreK through 12th Grade)

Children are referred for further testing if they fail the initial screening and the re-screening. Parents are responsible for following up with a medical provider. Children who are known to have hearing loss are tested every year to see if there are changes in the child's hearing ability. Data are from the Illinois Department of Public Health.

EARLY CHILDHOOD HEALTH

Illinois Women Receiving Prenatal Care in First Trimester

Data are from the Illinois Department of Public Health's vital records yearly birth file for all live births to Illinois residents each year. The goal is from Healthy People 2010 (www.healthypeople.gov), an initiative of the U.S. Department of Health and Human Services that sets health objectives for the nation to achieve. These objectives were developed through a broad consultation process and are based on scientific knowledge.

Illinois Babies Born at a Low Birth Weight

Babies who weigh less than 5.5 pounds at birth are considered to be of low birth weight. These babies are at greater risk of experiencing developmental delays, having health problems throughout life and dying before their first birthday. Data are from the Illinois Department of Public Health. The goal is from Healthy People 2010 (www.healthypeople.gov), an initiative of the U.S. Department of Health and Human

Services that sets health objectives for the nation to achieve. These objectives were developed through a broad consultation process and are based on scientific knowledge.

Illinois Newborns with Metabolic, Endocrine and Blood Disorders

Illinois screens for 36 disorders in newborns. Data are confirmed cases of 737,189 newborns screened from July 2002 through June 2006. *Congenital hypothyroidism* is decreased thyroid hormone production, which untreated can lead to severe mental retardation and growth retardation. *Congenital adrenal hyperplasia (CAH)* is an inherited disorder that results in inadequate production of a hormone that regulates sugar metabolism and in some cases a hormone that regulates the body's salt and fluid balance. The production of male sex hormone is a by-product that causes symptoms of untreated CAH. *Biotinidase deficiency* is lack of an enzyme that if untreated can lead to seizures, developmental delay, eczema and hearing loss. *Hemoglobin disorders*, including sickle cell disease, are inherited defects that cause production of abnormal

forms of hemoglobin – the part of red blood cells that carry oxygen. The severity of sickle cell disease varies, but this abnormal hemoglobin can result in anemia, blockage of blood vessels, susceptibility to infections and damage to organs. *Galactosemia* is an inherited defect in production of the enzyme that breaks down galactose, resulting in the failure to thrive and if untreated, damage to the liver, central nervous system and possibly death. Cases can be *classic* (the most severe) or *duarte* (a milder form); a galactosemia *carrier* will exhibit no symptoms but may pass along the gene. *PKU* and *HPA* are inherited defects in production of enzymes that breakdown a specific protein. If untreated, the buildup of the protein can cause mental retardation. *Other amino acid disorders* are each caused by an inherited defect in production of enzymes necessary to break down amino acids. If untreated, the disorders cause toxic buildup can cause damage to the brain, other organs and in some cases, death. *Organic acid disorders* are inherited defects in production of enzymes needed to breakdown and eliminate

by-products of protein metabolism by the body. If untreated, can cause damage to the brain, other organs and may result in a coma or death. *Fatty acid oxidation disorders* are defects of enzymes that convert fat into energy which can affect the brain and other organs. If untreated, can cause a coma or death.

Illinois Toddlers Who Are Fully Immunized

Fully-immunized is defined as children ages 19 to 35 months who have received four or more doses of diphtheria/tetanus/pertussis (DTP) vaccinations, three or more polio vaccinations, one or more doses of any measles-containing vaccinations, three or more doses of the flu vaccine (Hib), and three or more doses of hepatitis B vaccinations. Varicella is the chicken pox vaccination; it is not included in the rates of fully immunized children because it became a required vaccine in Illinois in 2002. Data are from the Centers for Disease Control and Prevention National Immunization Survey. The goal is from Healthy People 2010 (www.healthypeople.gov), an initiative of the U.S. Department of

Health and Human Services that sets health objectives for the nation to achieve. These objectives were developed through a broad consultation process and are based on scientific knowledge.

Illinois Toddlers Who Have Received the Chickenpox Vaccine

Data are for children ages 19 to 35 months receiving one or more doses of the varicella vaccine, which became required in Illinois in 2002. Data are from the Centers for Disease Control and Prevention National Immunization Survey.

Illinois Breastfeeding Rates for Children Age 5 and Younger

Data are from the National Survey of Children's Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed, and results are weighted to represent the child population in each state. Data collected from the National Survey of Children's Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org).

Illinois Breastfeeding Rates

Data reflect the percentage of children who were breastfed and are from the Centers for Disease Control and Prevention's National Immunization Survey (www.cdc.gov/breastfeeding/data/index.htm), which began collecting breastfeeding data in 2003. The annual phone survey is of 35,600 households with children aged 19 to 35 months from all 50 states and the District of Columbia. Interviews are conducted with the person who is most knowledgeable about the child's immunization status. The goal is from Healthy People 2010 (www.healthypeople.gov), an initiative of the U.S. Department of Health and Human Services that sets health objectives for the nation to achieve. These objectives were developed through a broad consultation process and are based on scientific knowledge.

Hearing Screenings of Illinois Newborns

Babies found to have hearing problems through newborn screenings are referred for further evaluation. Permanent, congenital hearing loss is present from birth and may or may

not be inherited. Children who have hearing loss in one ear do not automatically qualify for therapy through the state's Early Intervention system. Data are from the Illinois Department of Public Health.

DEVELOPMENTAL AND MENTAL HEALTH

Illinois Children Ages Birth to 3 Enrolled in Early Intervention

Early Intervention (EI) is an entitlement program that provides therapy for disabled children and support for their families. Illinois' program serves children ages birth to 3 who have a developmental disability or delay of 30 percent or greater and children at risk for such delays (for example, a 6-month-old who cannot hold up his head or a 29-month-old who cannot speak). This indicator shows the number of children with active Individual Family Service Plans. Data are for June 30 of each year. Children are counted in the county in which they live, even if they receive services in another county. Chicago figures may not correspond to totals for Chicago service areas due to a lack of congruent boundaries. The



participation rate is the percentage of all children ages birth to 3 who are enrolled in EI; the national average participation rate is 2.2 percent. Data are from the Illinois Department of Human Services.

Illinois Children Identified With Autism

Data reflects the number of cases of autism for school years 1992 through 2003. Data from Fighting Autism (www.fightingautism.org) were collected from Individuals with Disabilities Education Act Data (www.ideadata.org) and the Centers for Disease Control and Prevention (www.cdc.gov/nchs/).

Illinois Children Receiving Special Education by Type of Disability

Data are for children ages 3 to 18 served under the Individuals with Disabilities Education Act Part B and correspond to the academic year (2000 data is the 2000-01 academic year, 2005 data is the 2005-06 academic year, etc.). “Specific learning disability” includes perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and

developmental aphasia and does not include learning problems that are primarily the result of visual, hearing or motor disabilities, mental impairment, emotional disturbance, or environmental, cultural or economic disadvantage. “Emotional disturbance” indicates a child with one or more of these characteristics over an extended period of time and to a marked degree: 1) an inability to learn that cannot be explained by intellectual, sensory or health factors; 2) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; 3) inappropriate types of behavior or feelings under normal circumstances; 4) a general pervasive mood of anxiety, unhappiness or depression; or 5) a tendency to develop physical symptoms or fears associated with personal or school problems. “Developmental delay” is children ages 3 through 5 who are experiencing delay in physical development, cognitive development, communication development, social or emotional development, or adaptive development. “Other” includes the following diagnoses: orthopedic

impairment, visual impairment, hearing impairment, deafness, deaf-blindness, other health impairment, multiple disabilities and traumatic brain injury. State totals include children in the Department of Corrections. Data are from the Illinois State Board of Education.

Illinois Children Hospitalized for Psychoses

“Psychoses” includes the following hospital discharge categories: affective disorders; anxiety, somatoform, dissociative and personality disorders; personal history of mental disorder, mental and behavioral problems, observation and screening for mental condition; pre-adult disorders; schizophrenia and related disorders; senility and organic mental disorders; alcohol-related mental disorders; substance-related mental disorders; other mental conditions; and other psychoses. Children are ages birth to 17. Cells marked with an * indicate one to nine cases, which are masked for confidentiality. Data are from the Illinois Department of Public Health.

Illinois Children Who Commit Suicide

Children are defined as age 18 and younger. Suicides occurring in “other” counties are not reported by county name because of confidentiality. The number of counties other than Cook reporting child suicides each year are: 2000, 21 counties; 2001, 16 counties; 2002, 23 counties; 2003, 18 counties; and 2004, 19 counties. Data are from the Illinois Department of Public Health.

Illinois Children Ages 3 to 17 With Social / Emotional Difficulties

Indicates percentage of children ages 3 to 17 who have difficulties in the areas of emotions, concentration, behavior or being able to get along with other people, as described by parents. The federal poverty level is set by the U.S. Office of Management and Budget and was \$18,810 for a family of four in 2003. Data are from the National Survey of Children’s Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed,

and results are weighted to represent the child population in each state. Data collected from the National Survey of Children's Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org).

WEIGHT AND PHYSICAL ACTIVITY

Weight Status of Illinois 2- to 5-year-olds in the Women, Infants and Children Program

The Women, Infants and Children Program provides nutritious food, education and referrals to health and other social services to low-income pregnant, postpartum and breastfeeding women, and children up to age 5 who are at risk of poor nutrition. Family income must fall below 185 percent of the poverty level (currently \$33,485 for a family of four). Data are from the Centers for Disease Control and Prevention's Pediatric Nutrition Surveillance System, which collected body mass index data for 70,617 Illinois 2-to-5-year-olds in 2003 and 88,898 Illinois 2- to-5-year-olds in 2004.

Weight Status of Illinois Third Graders

Weight status was determined by calculating body mass index (using height, weight, gender and age variables) and plotting the ratio between height and weight on gender-specific growth charts. Data were collected from screenings of 6,630 children in 26 counties from December 2003 through June 2004. The 99 schools that participated in the survey were randomly selected with implicit stratification on region, urban / rural status and free / reduced lunch eligibility so that data can be generalized to all Illinois third graders. Data are from the Illinois Department of Public Health Division of Oral Health's "Healthy Smiles, Healthy Growth" survey.

Weight Status of Illinois 10- to 17-year-olds

Data are from the National Survey of Children's Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed, and results are weighted to represent the child population in each state.

Data were retrieved from the National Survey of Children's Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org). The goal is from Healthy People 2010 (www.healthypeople.gov), an initiative of the U.S. Department of Health and Human Services that sets health objectives for the nation to achieve. These objectives were developed through a broad consultation process and are based on scientific knowledge.

Time Illinois 6- to 17-year-olds Spend on Average School Day Watching TV or Playing Video Games

Data are from the National Survey of Children's Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed, and results are weighted to represent the child population in each state. Data were retrieved from the National Survey of Children's Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org). The goal is from Healthy People 2010 (www.healthypeople.gov), an initiative

of the U.S. Department of Health and Human Services that sets health objectives for the nation to achieve. These objectives were developed through a broad consultation process and are based on scientific knowledge.

Frequency of Rigorous Physical Activity in Past Week for Illinois 10- to 17-year-olds

Data are from the National Survey of Children's Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed, and results are weighted to represent the child population in each state. Data were retrieved from the National Survey of Children's Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org). The goal is from Healthy People 2010 (www.healthypeople.gov), an initiative of the U.S. Department of Health and Human Services that sets health objectives for the nation to achieve. These objectives were developed through a broad consultation process and are based on scientific knowledge.



SEXUAL HEALTH

Illinois Teens (15 to 19) Who Give Birth

Data are from the Illinois Department of Public Health.

Illinois Children With Sexually Transmitted Infections

Data includes children ages birth to 17 who are diagnosed with chlamydia or gonorrhea. Counties reporting less than five cases are not reported for confidentiality reasons. Data are from the Illinois Department of Public Health.

DEATHS AND INJURIES

Illinois Infant Mortality Rate

The infant mortality rate reflects the number of children who die before their first birthday. The infant mortality rate is calculated by dividing the number of infant deaths for a five-year period by the number of live births during those years and multiplying by 1,000. Rates are only calculated when there are 10 or more cases in a five-year period. Data is

grouped into five-year periods in order to collect a large enough sample to do county-level comparisons. Data are from the Illinois Department of Public Health. The goal is from Healthy People 2010 (www.healthypeople.gov), an initiative of the U.S. Department of Health and Human Services that sets health objectives for the nation to achieve. These objectives were developed through a broad consultation process and are based on scientific knowledge.

Illinois Child Deaths

Data are for all children age 18 and younger, including infant deaths. Rates are calculated by dividing the number of child deaths by the 2000 child population multiplying the result by 10,000. Data are from the Illinois Department of Public Health.

Accidental Deaths to Illinois Children 15 and Younger

Accidental deaths are reported for children under age 16. Types of accidental deaths include transport accidents, falls, accidental discharge of firearms, accidental drowning and

submersion, accidental exposure to smoke, fire and flames, accidental poisoning, other accidental threats to breathing and other and unspecified non-transport accidents. Data are from the Illinois Department of Public Health.

Illinois Child Abuse and Neglect Rate

Data include all indicated cases, those that the Illinois Department of Children and Family Services found evidence that abuse or neglect occurred. This number is smaller than reported cases, some of which eventually prove unfounded. Cases with incomplete addresses are not included, and data are for unduplicated counts. Rates are calculated by dividing the number of children in foster care each year by the child population and multiplying the result by 1,000. Data are from the Children and Family Research Center at the University of Illinois at Urbana-Champaign.

ENVIRONMENTAL AND COMMUNITY HEALTH

Illinois Children with Lead Poisoning

Elevated blood lead levels are those reading 10 mcg/dL or greater and are reported for children age 15 and younger. Almost all tests (94 percent) are on children age 6 and younger. Testing data include children tested for the first time and children who were retested. Data are from the Illinois Department of Public Health's Childhood Lead Poisoning Surveillance Program (www.idph.state.il.us/health/statshome.htm#childlead).

Risk of Lead Hazards in Homes

This indicator is calculated by dividing the number of housing units with high risk of lead hazards (determined by the number of housing units built before 1950 that are occupied by a low-income family) by the total number of occupied housing units. Data were retrieved from Scorecard, a pollution information website (www.scorecard.org).

Illinois Children Affected by Asthma in the Past Year

Data are from the National Survey of Children’s Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed, and results are weighted to represent the child population in each state. Data were retrieved from the National Survey of Children’s Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org).

Illinois Children Living in Households with Smokers

Data are from the National Survey of Children’s Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed, and results are weighted to represent the child population in each state. Data were retrieved from the National Survey of Children’s Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org).

Environmental Toxic Chemical Releases

Counties are ranked in percentiles by this definition: highest releases are counties in the 80th to 90th percentile; high releases are in the 60th to 70th percentile; moderate releases are in the 40th to 50th percentile; low releases are in the 20th to 30th percentile; and lowest releases are in the 0 to 10th percentile. “NA” indicates data is not available. Data were retrieved from Scorecard, a pollution information website (www.scorecard.org).

Crimes Against Illinois Children

Simple assault / battery are assaults and attempted assaults that do not result in serious injury such as stalking or hazing, while aggravated assault / battery is the intentional causing of serious bodily harm. Offenses involving children means non-violent acts by a family member that threaten the physical, mental, or economic well-being or morals of a child. Sex offenses

are offenses and attempted offenses such as indecent exposure, incest and statutory rape, while criminal sexual assault is forcible rape. “Other” crimes include arson, murder, intimidation, deadly weapon, violation of orders of protection, disorderly conduct and other offenses. Data are from the Illinois State Police Uniform Crime Report (www.isp.state.il.us/crime/cii2005.cfm).

HEALTH COVERAGE AND ACCESS

Uninsured Illinois Children

Data are from the Current Population Survey Annual Social and Economic Supplement, an annual survey of approximately 78,000 households nationwide (www.census.gov/hhes/www/cpstc/cps_table_creator.html). Income levels are defined as household income.

Illinois Children Enrolled in Medicaid, KidCare and All Kids

Illinois provides low-income children with health insurance through the joint federal/state programs Medicaid, KidCare and the new All Kids program (which absorbed KidCare when it debuted in July 2006). For the first time, state officials are not releasing county-level enrollment data, citing federal privacy laws. Statewide enrollment data is as of Oct. 1, 2006. Data provided by the Illinois Department of Healthcare and Family Services.

Insured Illinois Children by Type of Insurance

Data are from the Current Population Survey Annual Social and Economic Supplement, an annual survey of approximately 78,000 households nationwide (www.census.gov/hhes/www/cpstc/cps_table_creator.html).



Health Professional Shortage Areas

The U.S. Department of Health and Human Services designates Health Professional Shortage Areas (HPSAs) to determine priority for funding. There are several types of HPSAs. A whole county can be designated an HPSA. Specific geographic areas within a county, such as townships or census tracts, can be designated. A population group, typically low income, can be designated an HPSA. And several medical facilities can be designated, such as rural health clinics, comprehensive health centers, state mental hospitals and correctional facilities. Data are from the U.S. Department of Health and Human Services Bureau of Health Professions (<http://bhpr.hrsa.gov/shortage/>).

Illinois Children With a Medical Home

A “medical home” is defined as children who have a primary care provider from whom they receive

accessible, comprehensive, coordinated health care. The federal poverty level is set by the U.S. Office of Management and Budget and was \$18,810 for a family of four in 2003. Data are from the National Survey of Children’s Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed, and results are weighted to represent the child population in each state. Data were retrieved from the National Survey of Children’s Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org).

Mental Health Care Professionals in Illinois

The number of psychiatrists includes active, licensed psychiatrists with the “psychiatry” and “child psychiatry” specialties as of Aug. 14, 2006 provided by the American Medical Association. The number of

psychologists reflects active clinical psychologists and was provided by the Illinois Department of Financial and Professional Regulation. Data on psychiatrists and psychologists participating in Medicaid were provided by the Illinois Department of Healthcare and Family Services.

Illinois Physicians and Pediatricians Participating in Medicaid

Doctors are defined as participating in Medicaid if they have been reimbursed for services in the past 18 months. Data provided by the Illinois Department of Healthcare and Family Services.

Illinois Dentists

Data on the number of dentists is for active dentists, defined as those who indicate a private full- or part-time practice or a hospital practice, and those who have a part-time private practice as a secondary occupation but who are not included in the

previous group. It excludes dentists who are retired or older than 75. Dentists participating in Medicaid includes all dentists (not just active dentists). Data are from the American Dental Association and the Illinois Department of Healthcare and Family Services.

Length of Time Since Last Visit to Dentist for Illinois Children

Children are defined as ages 1 to 17. Data are from the National Survey of Children’s Health conducted by the Centers for Disease Control and Prevention in 2003 and 2004. A total of 102,353 surveys were completed, and results are weighted to represent the child population in each state. Data were retrieved from the National Survey of Children’s Health Data Resource Center, a project of the Child and Adolescent Health Measurement Initiative (www.nschdata.org).