



**Fulfilling a Promise,  
Making it Possible.**

**2011 MERCER COUNTY  
CHILD HEALTH SURVEY**

**FINAL REPORT**

**CHILDREN'S FUTURES  
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### Executive Summary

This report highlights key findings from an analysis of the 2011 Mercer County Child Health Survey data. Through a partnership between Public Health Management Corporation (PHMC) and Children's Futures, this survey was designed to provide valuable community-based data about children residing in Mercer County, New Jersey (NJ). The 2011 Mercer County Child Health Survey represents an important milestone, as this survey is the largest health and well-being population-based survey conducted specifically about children in Mercer County, NJ.

Key findings highlighted in the report include:

- One in five children (18.5%) has a chronic health condition, representing about 16,000 children in the county. Additionally, 18.5% of children have ever had asthma.
- The majority of children have health insurance (98.1%), and a regular source of care (93.4%).
- About three in ten children (27.2%) visited the emergency room at least once in the past year.
- Almost 8% of children 6-11 years were left unsupervised within the past week.
- More than three-quarters of children 6-17 years (77%) participated in after-school activities such as sports, lessons, or after-school clubs, and 17% of children 12-17 years earned money from work outside the home.
- The majority of children 0-17 years (86.8%) live in a neighborhood with a playground, and 62.5% of children live in a neighborhood with a recreation center or a community center.
- A majority of children 0-17 years (87.8%) live in communities where neighbors look out for each other's children, and 89.4% of children live in communities where adults trust one another to help their children.

- Approximately one-half of children 0-17 years (49.2%) are perceived to be always safe in their community, and the majority of children are perceived to be always safe (70.8%) at school.
- Nearly 18% of children have someone living in their household who smokes cigarettes, cigars, or pipe tobacco, but the overwhelming majority of children do not have anyone in their household who smokes inside the home (96.7%).

The report includes further examinations of these data by demographic, socio-economic, and geographic characteristics. Due to the regionally-specific data collected from the Mercer County Child Health Survey, these findings can be used in a variety of ways such as identifying children's health and well-being needs; developing tailored programs and services to meet the needs of children and the community; and providing baseline information to monitor future progress towards goals.

### Introduction

This report highlights key findings from an analysis of the 2011 Mercer County Child Health Survey data. Through a partnership between Public Health Management Corporation and Children's Futures, this survey was designed to provide valuable community-based data about children residing in Mercer County, New Jersey (NJ). The following child health and well-being indicators are presented in this report, with demographic,<sup>1</sup> socio-economic, and geographic comparisons,<sup>2</sup> when appropriate:

- Health status and conditions;
- Usual source of care and utilization of care;
- Health insurance;
- Child care;
- After-school activities, volunteering, and employment;
- Positive social skills;
- Neighborhood amenities and social capital;
- Community safety and school safety; and
- Tobacco exposure in the home

In December 2010, Children's Futures contracted with Public Health Management Corporation (PHMC) to conduct a telephone survey about the health and well-being of children in Mercer County, NJ. PHMC is a nonprofit public health institute that builds healthier communities through partnerships with government, foundations, businesses, and community-based organizations. PHMC has served the region since 1972 as a facilitator, developer, intermediary, manager, advocate, and innovator in the field of public health.

The 2011 Mercer County Child Health Survey represents an important milestone, as this survey is the largest health and well-being population-based survey conducted specifically about children in Mercer County, NJ. This survey also represents an extension of the decades of health survey research conducted by staff at PHMC.<sup>3</sup>

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<sup>1</sup> Due to some instances of a small sample size, percentages for Asian children are not always reported.

<sup>2</sup> The geographic comparisons include the Trenton service area and non-Trenton service area of Mercer County. The Trenton service area zip codes include: 08608, 08609, 08610, 08611, 08618, 08629, and 08638.

<sup>3</sup> Since 1983, PHMC staff have conducted twelve community-based surveys through the Community Health Data Base's (CHDB) Southeastern Pennsylvania Household Health Survey. The CHDB collects and disseminates data on local residents and serves as a key planning resource for area foundations, healthcare systems, insurance and social service providers, universities, and community-based organizations. The biennial Household Health Survey collects information on more than 13,000 adults, children, and seniors living in the five-county Southeastern Pennsylvania

### Methodology

The 2011 Mercer County Child Health Survey is a representative, community-based Random Digit Dial telephone survey of 1,001 households with children 0-17 years of age living in Mercer County, NJ. Survey information was obtained from a child proxy about a randomly selected child in the household. The child proxy was the adult most knowledgeable about the child's health and well-being. In most cases (67.4%), the child proxy was the child's mother. Telephone interviews were administered by Schulman, Ronca, and Bucuvalas, Inc. (SRBI), a research firm in New York City, between May and June 2011. The interviews averaged approximately 12 minutes to complete and were conducted in English or Spanish.

Due to some over- and under-representation of particular demographic sectors, which is typical in random telephone-based survey samples, the data are slightly adjusted with a projection weight to match the proportion of 2011 child age, sex, race, and poverty distributions within and outside of the Trenton area and to project to census population totals.

### Health Status and Health Conditions

Part of the information collected in the Mercer County Child Health Survey focused on the health status and conditions of children 0-17 years. In particular, health status, chronic health conditions, and asthma history were asked about the selected child. According to the most recent estimates from the National Survey of Children's Health (NSCH), 3.5% of U.S. children 0-17 years and 3.3% of New Jersey's children are in fair or poor health (NSCH, 2007).

- In Mercer County, approximately 5% of children 0-17 years are in fair or poor health, representing about 3,900 children in the county, while 95% of children are in excellent, very good, or good health.
  - Over 6% of children 13-17 years are in fair or poor health, compared with 5.8% of children 6-12 years, and 1.7% of children 0-5 years.

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region of Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties. The survey is one of the longest running community health surveys in the U.S., as well as one of the largest regional surveys of its kind.

- One in ten Latino children (10.7%) are in fair or poor health, while 5.1% of Black children and 3.0% of White children are in fair or poor health (Figure 1).
- When examining health by poverty status, 12.0% of children living below 150% of the Federal Poverty Line and 2.7% of children living at or above the poverty line are in fair or poor health.
- Children living in the Trenton service area are more likely to be in fair or poor health compared with children outside the Trenton service area — 6.9% compared with 3.0%, respectively.
- One in five children (18.5%) has a chronic health condition requiring medical treatment, prescription drugs, or hospitalization on a regular basis, representing about 16,000 children in the county.
  - Having a chronic condition increases with age—11.5% of children 0-5 years, 18.9% of children 6-12 years, and 25.3% of children 13-17 years have a chronic health condition.
  - One in five White and Black children (20.6% and 21.3%, respectively) have a chronic condition compared with 13.0% of Latino children, and 11.4% of Asian children (Figure 1).
- Approximately 16,000 children (18.5%) have ever had asthma.
  - Older children are more likely than younger children to have ever had asthma—23.0% of children 13-17 years, 18.2% of children 6-12 years, and 14.6% of children 0-5 years.
  - Black children (26.3%) are more likely to have ever had asthma compared with 20.0% of Latino children, 16.8% of Asian children, and 14.6% of White children (Figure 1).
  - About one in four children living below 150% of the Federal Poverty Line (23.9%, representing about 4,200 children) have ever had asthma compared with 17.1% of children living at or above the poverty line.

- Children living in the Trenton service area (23.4%) are more likely to have ever had asthma compared with children outside the Trenton service area (15.2%).

### Access to Care

In addition to health status, the survey also examined different indicators of access to care for children 0-17 years. Specifically, questions were asked about whether the child has a regular source of care; and if so, what is the setting of the source of care.

Additionally, questions were asked about the number of visits to the emergency room within the past year and the primary reason for seeking care at the emergency room.

- In Mercer County, approximately 1,600 children (1.9%) do not have any private or public health insurance.
- The majority of children in Mercer County have a regular source of care (93.4%). The most common setting for care is a private doctor's office (91.3%), while 4.8% of children go to a community health center or public clinic.
- About three in ten children (27.2%) visited the emergency room at least once in the past year, representing approximately 23,100 children in the county.
  - Girls are more likely to have visited the emergency room at least once in the past year compared with boys—31.0% and 23.3%, respectively (Figure 2).
  - More than two in five Black children (42.0%) and one in three Latino children (32.2%) have visited the emergency room at least once in the past year, compared with White children (19.6%) and Asian children (14.5%).
  - When examining by poverty status, 43.7% of children living below 150% of the Federal Poverty Line visited the emergency room at least once in the past year compared with 22.7% of children living at or above the poverty line.
  - Children living in the Trenton service area (38.5%) are nearly twice as likely as children living outside the Trenton service area (19.3%) to have visited the emergency room within the past year.

- Of those children who went to the emergency room at least once in the past year, the main reason for visiting the emergency room was due to a closed doctor's office or clinic, weekend, or holiday (40.0%). The second most common reason for an emergency room visit was the problem was too serious for a doctor's office or clinic (19.6%).

### Type of Childcare, Location, and Satisfaction

The survey included a series of childcare-based questions about children 0-5 years. Specifically, questions were asked as to whether the child receives childcare from a family member, whether the child receives childcare from a non-family member, the location of the childcare, and for those children receiving non-family childcare, and the caregiver's level of satisfaction with the quality of care.

- In Mercer County, more than three in four children 0-5 years (76.8%) receive childcare provided by a family member, representing approximately 20,700 children in the county.
  - When examining by age group, children 0-1 years (82.7%) and children 2-3 years (80.8%) are more likely than children 4-5 years (67.6%) to receive family-based childcare (Figure 3).
  - More specifically, of those children receiving family-based childcare, 78.9% receive care in their own home, 8.2% of children receive care in someone else's home, and 13.0% of children receive care in a combination of both their own home and someone else's home.
- One-half of children 0-5 years (50.3%) receive childcare provided by a non-family member, representing approximately 13,700 children in the county.
  - When examining non-family childcare by age group, children 4-5 years (67.4%) are more likely to receive non-family childcare compared with children 2-3 years (51.0%), and children 0-1 years (30.0%) (Figure 3).
  - Of those children receiving non-family childcare, 44.0% of children receive care at a daycare center, 34.0% of children receive care at a preschool, 12.1% of children receive care in someone else's home, and 10.6% of children receive care in their own home.

- Additionally, the quality of non-family childcare children receive was rated by the caregiver on a scale of very satisfied, satisfied, somewhat satisfied, and not satisfied; the overwhelming majority of children receive childcare whose quality is rated as very satisfied.
  - More specifically, 88.2% of children with preschool-based childcare are receiving care with which the caregiver is very satisfied; 85.0% of children with childcare taking place in someone else's home are receiving care with which the caregiver is very satisfied; 81.2% of children with home-based childcare are receiving care with which the caregiver is very satisfied; and 72.4% of children with center-based childcare are receiving care with which the caregiver is very satisfied.

### After-School Activities

The Mercer County Child Health Survey also included several questions regarding after-school activities. For children 6-11 years, the survey asked if the child was ever left unsupervised in the past week; for children 6-17 years, the survey asked if the child participated in sports, lessons, or after-school clubs in the past year; and for children 12-17 years, the survey asked if the child earned money outside of the home.

It is estimated that three million U.S. children under 12 years are left to care for themselves for at least a few hours a week on a regular basis (Vandivere, Tout, Capizzano, Zaslow, 2003). Findings from the Child Health Survey show that in Mercer County, almost 8% of children 6-11 years were left unsupervised at some point during the week prior to the survey; this percentage represents 2,200 children who are left alone.

- Girls are almost three times more likely to be left unsupervised at some point compared with boys (11.9% and 3.8%, respectively) (Figure 4).
- White children (10.5%) are more likely to be left unsupervised followed by Black children (7.5%), and Latino children (5.6%) (Figure 4).
- Children living below 150% of the Federal Poverty Line (11.6%) are more likely to be left unsupervised compared with children at or above the poverty line (7.0%) (Figure 4).

After-school activities provide a safe place and structured activities during non-school hours for children who might otherwise be left unsupervised. The survey data show slightly more than three-quarters of children 6-17 years in Mercer County (77%) participated in after-school activities such as sports, lessons, or after-school clubs in the past year.

- Boys (79%) and younger children 6-12 years (78.4%) are more likely than girls (75.1%) and teenagers 13-17 years (75.2%) to participate in after-school activities (Figure 5).
- White children (85.5%) are more likely to participate in after-school activities followed by Asian children (84.5%), and Black children (65.4%). Latino children are the least likely racial/ethnic population group to participate in after-school activities (59.1%) (Figure 2).

- Children living at or above 150% of the Federal Poverty Line are more likely to participate in after-school activities compared with children living below the poverty line (83.2% and 50.4%, respectively).
- Children living outside the Trenton service area (85.1%) are more likely to participate in after-school activities compared with children residing in the Trenton service area (64.5%).

In addition to after-school activities, some children earn money from work outside of the home including working at regular jobs, babysitting, cutting grass, or other occasional work. U.S. child labor laws set the minimum age requirements to work and help ensure children and youth have the necessary time to pursue their education and be employed in a safe workplace. In Mercer County, 17% of children earned money from work outside of the home; this percentage represents 5,300 children 12-17 years in the county.

- Girls are slightly more likely to earn money from work than boys (18.0% and 16.4%, respectively).
- Teenagers 15-17 years (20.3%) are more likely to work than younger teenagers 12-14 years (13.4%) (Figure 6).
- More than one in five White children (21.8%) work, followed by Black children (17.1%), and Latino children (8.0%) (Figure 6).
- Children living at or above 150% of the Federal Poverty Line (18.0%) and children living outside the Trenton service area (18.3%) are more likely to work than children living below the poverty line (12.9%) and children living in the Trenton service area (14.9%).

### Positive Social Skills

In the Mercer County Child Health Survey, caregivers were asked about their perceptions of the child's behavior and relationships with others. Specifically, questions centered on whether the child shows respect for teachers and neighbors; gets along well with other children; tries to understand other people's feelings; and tries to resolve

conflicts. These questions were based on a scale of always, usually, sometimes, rarely, or never.

- In Mercer County, 79.3% of children (6-17) always show respect for teachers and neighbors, while one in five children (19.5%) does so usually or sometimes.
  - Boys and girls are about equally likely to always show respect for teachers and neighbors, and no difference is seen between teenagers 13-17 years and younger children 6-12 years.
  - Children living at or above 150% of the Federal Poverty Line are more likely to always show respect than children living below the poverty line (81.5% and 70.0%, respectively).
  - Children outside the Trenton service area are more likely to always show respect to teachers and neighbors (83.0%) than children within the Trenton service area (73.6%).
- About two-thirds of children 6-17 years (68.7%) always get along well with other children. Another 30.5% of children get along well with other children usually or sometimes.
  - Younger children 6-12 years and teenagers 13-17 years are equally likely to get along well with other children.
  - Children living outside the Trenton service area are slightly more likely to always get along well with other children than children living within the Trenton service area (70.7% and 65.6%, respectively).
- More than one-half of children 6-17 years in Mercer County (56.9%) always try to understand other people's feelings, while another 39.7% usually or sometimes do so.
  - Girls are slightly more likely to always try to understand other people's feelings than boys (58.5% and 55.3%, respectively).
  - Teenagers 13-17 years are more likely than younger children 6-12 years to always try to understand other people's feelings (60.2% and 54.3%, respectively).

- Children inside and outside the Trenton service area are about equally likely to always or usually/sometimes try to understand other people's feelings.
- More than one-half of children in Mercer County (51.3%) always try to resolve conflicts with others, and another 44.3% usually or sometimes do so.
  - Boys and girls are about equally likely to always or usually/sometimes try to resolve conflicts with others. No difference is seen between teenagers and younger children, inside and outside the Trenton service area, or those at/above and below 150% of the Federal Poverty Line.

### Neighborhood Amenities and Social Capital

One's neighborhood provides both a physical and social context for child and adolescent development. Children who live in supportive neighborhoods have stronger connections with family and peers and participate in after-school activities and volunteer (Child Trends Data Bank, 2011). In the Mercer County Child Health Survey, caregivers were asked a series of questions about the neighborhood in which the child lives, centering on both access to recreational facilities and neighborhood social capital.

#### Neighborhood Amenities

- In Mercer County, 86.8% of children 0-17 years live in a neighborhood with a playground.
  - Younger children, both those 0-5 years (87.7%) and those 6-12 years (90.2%), are more likely to live in neighborhoods with playgrounds than teenagers 13-17 years (81.4%) (Figure 7).
  - Children living below 150% of the Federal Poverty Line are as likely as children living at or above the poverty line to have a playground in their neighborhood, and in general there is little variation of neighborhood playgrounds by race/ethnicity.

- Children living outside the Trenton service area are slightly more likely than children living in the Trenton service area to have a playground in their neighborhood (89.5% and 82.7%, respectively).
- In Mercer County, about two-thirds of children 0-17 years (62.5%) live in a neighborhood with a recreation center or community center.
  - Black children are more likely to live in neighborhoods with recreation centers or community centers than children of other racial/ethnic backgrounds. More specifically, about three-quarters of Black children (74.3%) live in a neighborhood with a recreation or community center, as compared with 59.6% of White children, 59.1% of Latino children, and 56.7% of Asian children.
  - Children living below 150% of the Federal Poverty Line are as likely as children living at or above the poverty line to have a recreation center or community center in their neighborhood.
  - Children living in the Trenton service area are more likely than children living outside the Trenton service area to have a recreation center or community center in their neighborhood (67.3% and 59.5%, respectively).

### Social Capital

The Mercer County Child Health Survey also included questions about social capital. Specifically, caregivers were asked whether the child lives in a community where neighbors watch out for each other's children and whether the child lives in a community with trusted adults nearby that could help the child, if needed. Caregivers were asked whether they definitely agree, somewhat agree, somewhat disagree, or definitely disagree with these two statements about the neighborhoods in which children live.

- In Mercer County, 87.8% of children live in places where neighbors look out for each other's children.
  - White children are more likely than children of other racial/ethnic population groups to live in neighborhoods where people look out for one another's children; more specifically, 92.9% of White children live in

such neighborhoods, followed by 86.8% of Asian children, 81.7% of Black children, and 80.5% of Latino children (Figure 8).

- Children living at or above 150% of the Federal Poverty Line are more likely to live in neighborhoods where people watch out for each other's children than children living below the poverty line (89.2% and 81.9%, respectively).
- Children outside the Trenton service area are more likely to live in places where neighbors look out for each other's children than are those living within the Trenton service area (91.6% and 81.9%, respectively).
- In Mercer County, 89.4% of children live in places where adults trust each other to help their children.
  - Children outside the Trenton service area are more likely to live in places where adults trust each other to help their children than those living within the Trenton service area (94.7% and 81.6%, respectively).
  - Children living at or above 150% of the Federal Poverty Line are more likely to live in neighborhoods where adults trust each other to help their children than children living below the poverty line (91.3% and 81.9%, respectively).
  - White children are more likely than children of other racial/ethnic backgrounds to live in neighborhoods where adults trust one another to help their children; more specifically, 94.5% of White children live in such neighborhoods, followed by 93.3% of Asian children, 85.4% of Black children, and 78.4% of Latino children.

### Perceptions of Community and School Safety

In national estimates, more than one-half of children (53.4%) live in communities that are perceived to be always safe (Child Trends, 2011). Caregivers reporting their child lives in an unsafe community may limit the child's outside play; additionally, children of parents who believe their neighborhood is unsafe may be also less likely to engage in physical activity (Child Trends Data Bank, 2011).

The Mercer County Child Health Survey included questions on perceptions of safety, specifically children's safety in the community and at school. Caregivers were asked to rate their safety perceptions on a scale of always, usually, sometimes, rarely, or never. This section also looks at children's missed school days and the reasons for these missed days. All school-related questions were asked about children 6-17 years.

- Approximately one-half of children 0-17 years (49.2%) are perceived to be always safe in their community, while 45.2% are perceived to be usually or sometimes safe, and 5.5% are perceived to be either rarely or never safe.
  - When examining by race/ethnicity, Black and Latino children are more likely to be perceived as rarely or never safe in the community (12.1% and 10.9%, respectively) in comparison to White children (1.8%).
  - Approximately 13% of children living below 150% of the Federal Poverty Line are perceived as rarely or never safe in their community compared with 3.5% of children living at or above the poverty line (Figure 9).
  - Children living in the Trenton service area are more likely to be perceived as rarely or never safe in the community (12.3%) when compared with children living outside the Trenton service area (1.0%) (Figure 9).
- When looking at perceptions of safety at school, the majority of children are perceived to be either always (70.8%) or usually/sometimes (28.1%) safe at school.
  - Children 6-12 years are more likely to be perceived as always safe at school (77.5%) in comparison with children 13-17 years (62.0%).
  - Nearly two-thirds of children living below 150% of the Federal Poverty Line (63.3%) are perceived as always safe at school while nearly three-quarters of children living at or above the poverty line (72.5%) are perceived to be always safe.
  - Similar to the perception of children's safety in the community, children living outside the Trenton service area are more likely to be always safe at school (74.8%) when compared with children living in the Trenton service area (64.4%).

- Approximately 96% of children did not miss any school days due to safety concerns; this percentage represents some 55,600 children in the county.
  - Children living at or above 150% of the Federal Poverty Line are more likely to not miss any school days due to safety concerns (98.1%) compared with children living below the poverty line (88.5%).
- Nearly one-half of children missed three or more days of school because of illness or injury (47.3%), almost one-third of children missed one or two days (31.6%), and 21% of children missed no school days.
  - One-half of children 6-12 years missed three or more days of school due to illness or injury (50.2%) and 43.6% of children 13-17 years missed three or more days of school for this reason.
  - When looking at race/ethnicity, White children are the most likely racial/ethnic population group to miss three or more days of school due to illness or injury (55.1%) in comparison with Latino children (41.5%), Asian children (35.3%), and Black children (34.1%) (Figure 10).

### Tobacco Smoke Exposure

The home is becoming the predominant site of involuntary exposure to secondhand smoke for children (U.S. Surgeon General, 2006). Children are more vulnerable to the harmful effects of secondhand smoke exposure because they are still physically developing and have higher breathing rates than adults (U.S. Environmental Protection Agency, 2010). For these reasons, the Mercer County Child Health Survey included questions about children's exposure to tobacco smoke at home.

- In Mercer County, nearly 18% of children have someone living in their household who smokes cigarettes, cigars, or pipe tobacco, which represents approximately 15,300 children in the county.
  - Black children are the most likely racial/ethnic population group to have someone living in their household who uses these tobacco products (23.9%) in comparison with 17.8% of White children, 15.0% of Latino children, and 5.6% of Asian children.

- Children living below 150% of the Federal Poverty Line are nearly twice as likely to have a household member who uses cigarettes, cigars, or pipe tobacco (27.2%) than children living at or above the poverty line (15.4%).
- Approximately one-quarter of children in the Trenton service area (25.8%) have someone living in their household who uses cigarettes, cigars, or pipe tobacco compared with 12.5% of children outside the Trenton service area.
- The overwhelming majority of children in Mercer County do not have anyone in their household who smokes inside the home (96.7%).

### Conclusion

Findings from the Mercer County Child Health Survey suggest both positive trends as well as challenges for area providers in understanding children's needs. The overwhelming majority of children living in Mercer County are in excellent, very good, or good health, have health insurance, have a regular source of care, participate in after-school activities, demonstrate positive social skills, and do not have anyone in their household who smokes inside the home.

However, findings from the survey also reveal nearly one in five children has a chronic health condition and one in five has a history of asthma. Additionally, survey findings reveal disparities for certain segments of the population for these health conditions. Specifically, children living below 150% of the Federal Poverty Line, children living in the Trenton service area, and Black and Latino children are disproportionately affected by having a chronic condition or asthma than their counterparts. More than one-quarter of children have visited the emergency room at least once within the past year, representing approximately 23,100 children in the county, with the two most common reasons being the doctor's office or clinic was not open or it was a weekend or holiday; or the problem was too serious for a doctor's office or clinic. Also, less than two-thirds of children live in a community with a recreation center or community center available, which is less common in the Trenton service area of Mercer County.

Due to the regionally-specific data collected from the Mercer County Child Health Survey, these findings can be used in a variety of ways such as identifying children's health and well-being needs; developing tailored programs and services to meet the needs of children and the community; and providing baseline information to monitor future progress towards goals.

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