



2024 Community Health Needs Assessment (CHNA) Regional Child Health Summit

Session 1

May 6, 2025

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Agenda

- Cook Children's commitment
- 2024 Community Health Needs Assessment (CHNA) overview
- 2024 CHNA methodology
- Overview of selected results:
 - **Overall health and well-being**
 - **Asthma**
 - **Healthy lifestyles**
- Call to action
- Data dashboard
- Next Steps

Our speakers



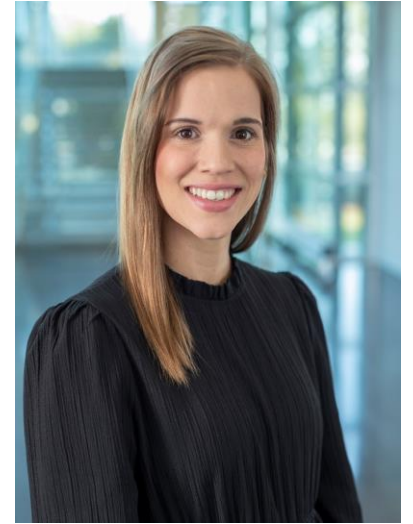
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Communities in Schools of North Texas

Knowing ***every*** child's life is sacred, we promise to improve the well-being of every child in our care and our **communities**.



Our community served



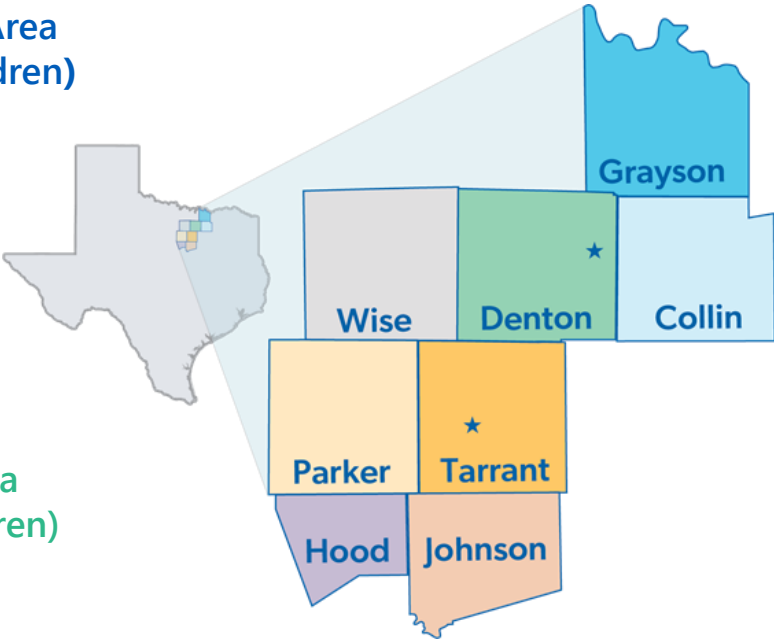
Eight-County Service Area: 1,181,591 children (ages 0-17)

Fort Worth Service Area (FWSA: 877,448 children)

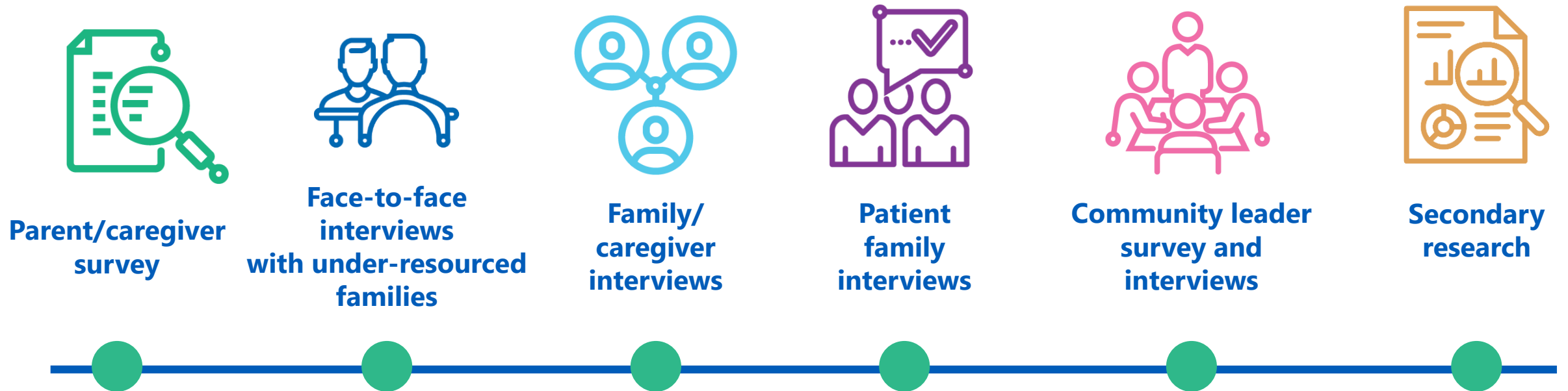
- Denton: 218,680
- Hood: 12,922
- Johnson: 46,951
- Parker: 37,266
- Tarrant: 544,440
- Wise: 17,189

Prosper Service Area (PSA: 522,823 children)

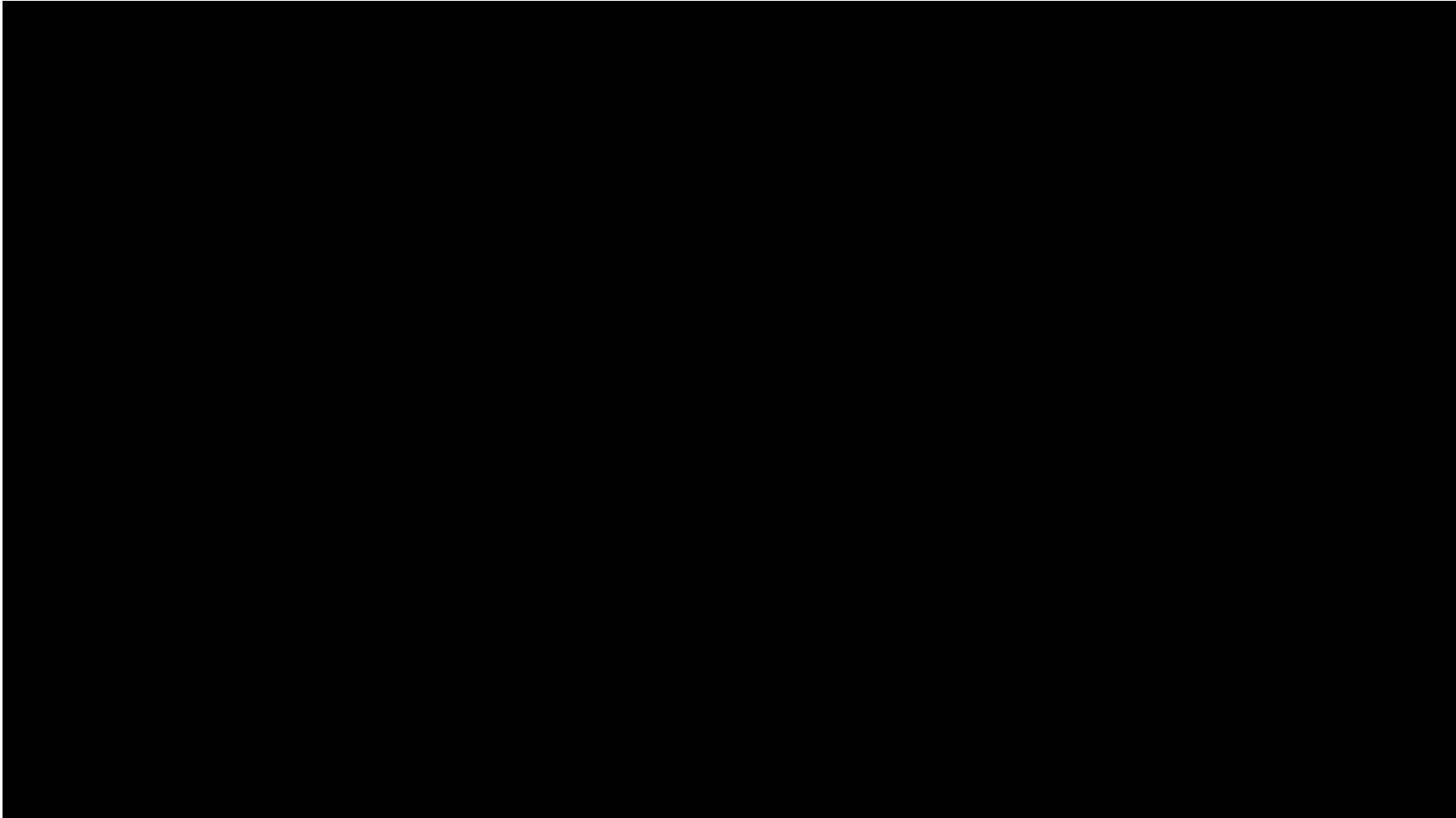
- Collin: 271,621
- Denton: 218,680
- Grayson: 32,522



2024 CHNA methodology



2024 CHNA methodology



[CHNA Part 1 | Child Health Data | Cook Children's](#)



2024 Parent and Leader Survey Methodology

Presented By



Two surveys conducted

Parent/caregiver survey



Community leader survey



Parent/caregiver survey



The purpose of the survey was to gather statistically valid information from parents of children ages 0-17 years living in Cook Children's eight-county service region.

The data collected from the survey will help Cook Children's and the community better understand the current state of children's health and better focus on improving the health and wellbeing of children in the region.

The Parent Survey is a rolling survey that involves the completion of more than 2,000 surveys per year. A total of 6,877 parents completed the survey in 2022, 2023, and 2024.

The data were weighted annually to ensure the final results reflect the most recent Census estimates with regard to age, race, Hispanic/Latino ancestry, gender, and household income.

Parent/caregiver survey sampling



Sample was stratified to ensure the goals for each of 14 sampling areas were achieved.

Sample was selected at random within each sampling area from households that were likely to have children under age 18.

Sample was address-based.

The number of households selected for the survey was initially seven times the goal for each area.

Parent/caregiver survey administration



ETC Institute mailed the survey and a cover letter to each of the households selected for the survey.

\$15 Incentive



Residents who received the survey initially had the option of completing it in one of the following three ways:

1. Mail
2. Online
3. Phone

Distribution of respondents to the parent/caregiver survey

County	Goal for completed surveys	Completed
Collin	450	505
Denton	1,290	1,510
Grayson	310	361
Hood	210	223
Johnson	460	504
Parker	440	474
Tarrant	2,590	2,985
Wise	250	315
6,000		6,877

Representation of parent survey results

County	Sample	Child population estimate
Collin	505	271,674
Denton	1,510	218,579
Grayson	361	32,521
Hood	223	12,939
Johnson	504	46,950
Parker	474	37,269
Tarrant	2,985	544,470
Wise	315	17,189
6,877		1,181,591

Child demographics

8-county parent/caregiver survey



Gender

Male	49.8%
Female	49.8%
other/not provided – 0.4%	

Age

0-5 years	30.1%
6-11 years	32.8%
12-17 years	37.0%
not provided – 0.1%	

Hispanic Origin & Race

Hispanic	23.3%
White, Non-Hispanic	52.9%
Black, Non-Hispanic	11.0%
Asian, Non-Hispanic	5.5%
Other & Multi-race, Non-Hispanic	5.6%
not provided – 1.7%	

Core areas assessed on the parent/caregiver survey

Access to Healthcare

Health Insurance

Overall Health of the Child

Oral Health

Emotional and Mental Health

Lifestyle/Wellness (Eating, Exercise, Sleeping)

Home Safety and Neighborhood Surroundings

Family and Caregiver Relationships

Community leader survey



The purpose of the community survey was to gather information from leaders in Cook Children's eight-county service region about children's health issues.

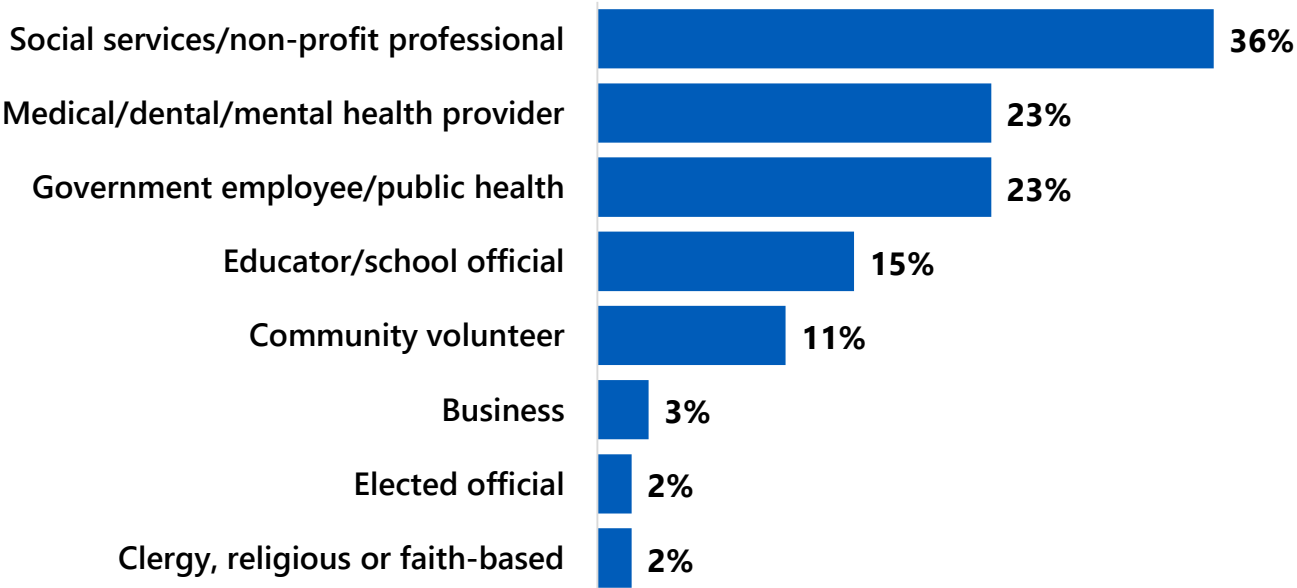
Community leaders included individuals from city and county governments, public agencies, not-for-profit organizations, independent school districts, faith based/clergy, elected officials, and health care.

The survey was administered via email by Cook Children's Center for Community Health. A total of 239 leaders completed the survey. This survey is not representative of the eight-county service area, but we did intentionally strive to collect a good response rate from each county and role within the community.

Community leader survey respondents

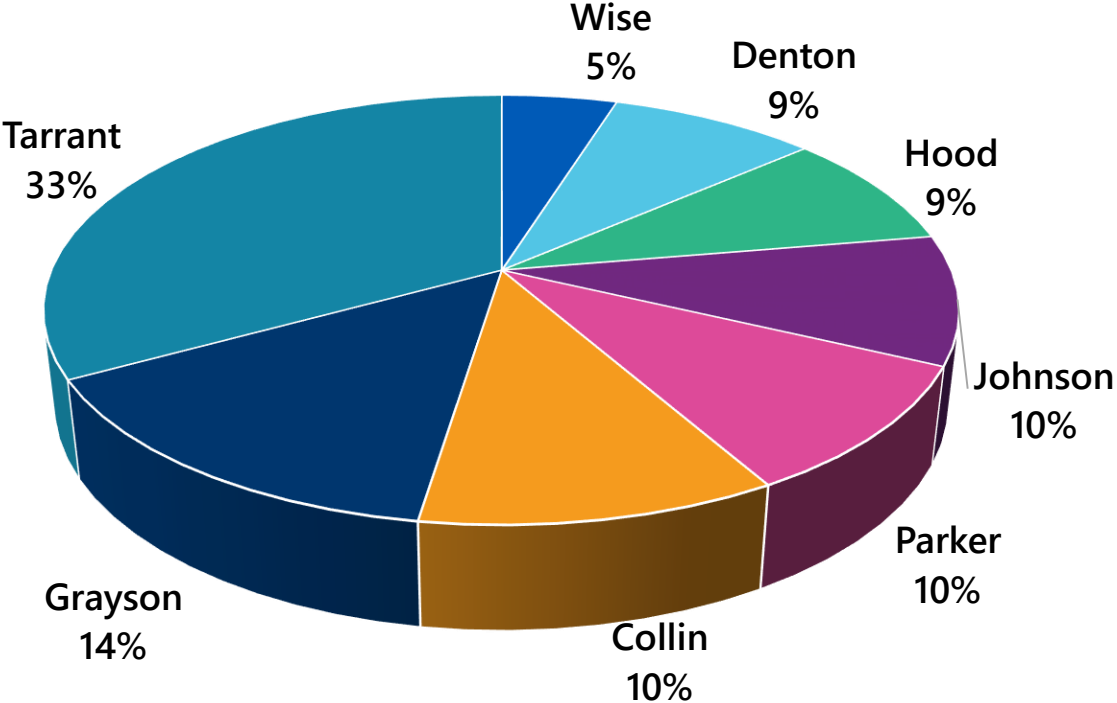
Respondent's role in the community

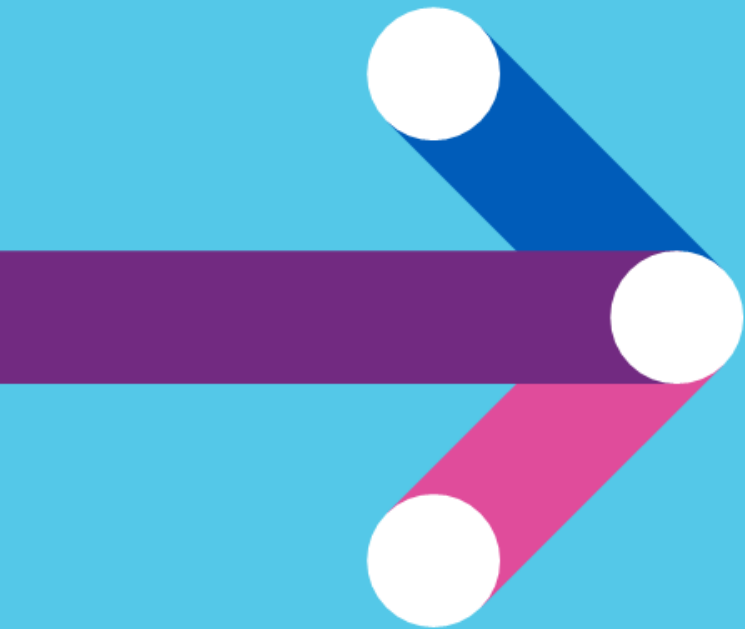
by percentage of leaders surveyed (multiple sections could be made)



Location of respondents by county

by percentage of leaders surveyed





Cook Children's 2024 Community Health Needs Assessment results

Community concerns

Inflation

45% of community leaders felt poverty was a serious problem in their community.



Community Leader: "We run out of food at our monthly food distributions and have to regularly refer families for other resources for food. We also operate a care closet to help families with clothes. It is not just unemployed. We have working poor. In fact, we have a teacher who has five kids, and she is getting evicted. So, we are having to help her with a lot. **Teachers experience poverty as well.**"

Caregiver: "I worry a lot about paying the co-pay for our family medical visits. I can pay the smaller medication co-pays, but if I start getting bills for the co-pay for doctor visits, **there is just no way I can pay.** I worry that that is going to be a problem, **but what can I do?** We are on government assistance. We use food stamps to pay for groceries and there are 6 of us to feed, clothe, and to provide housing for. I have to pay car insurance for the two vehicles that we have."

Housing Affordability

44% of community leaders felt quality, affordable housing was a very serious problem.



Community Leader: "Families **can't afford** the housing that is available, so pressures finding affordable housing **impacts** mental health and causes families to spend too much on housing. It becomes a vicious cycle."

Caregiver: "The kids do have insurance, but it doesn't cover everything. Yes, it is a very big challenge, Sometimes we get bills from [specified hospital]. there are **lots of bills** that we have. We have to pay rent and utilities, and **we can't pay them.** Right now I am not working. Today I had to take one of the kids to the doctor, so my husband had to stay home with the other child. Yes, it is very challenging."

Community concerns

Food Insecurity

55% of community leaders felt access to affordable, healthy food was a serious/very serious problem



Community Leader: "The food pantries have seen reductions in **food availability and selection**, and with increased demand as families lose SNAP benefits (due to rollback of pandemic expansion), there is more pressure on them. We have several events each year where families can receive assistance with SNAP enrollments."

Caregiver: "Just this last month **they cut off our SNAP and Medicaid**, I had to take time off from work to go to the office to renew the benefits. I **had to go the food pantry three to four times** and sometimes I reach out to the school and send the kids home with a bag of food, snack packs on Friday for the weekend."

Childcare Costs

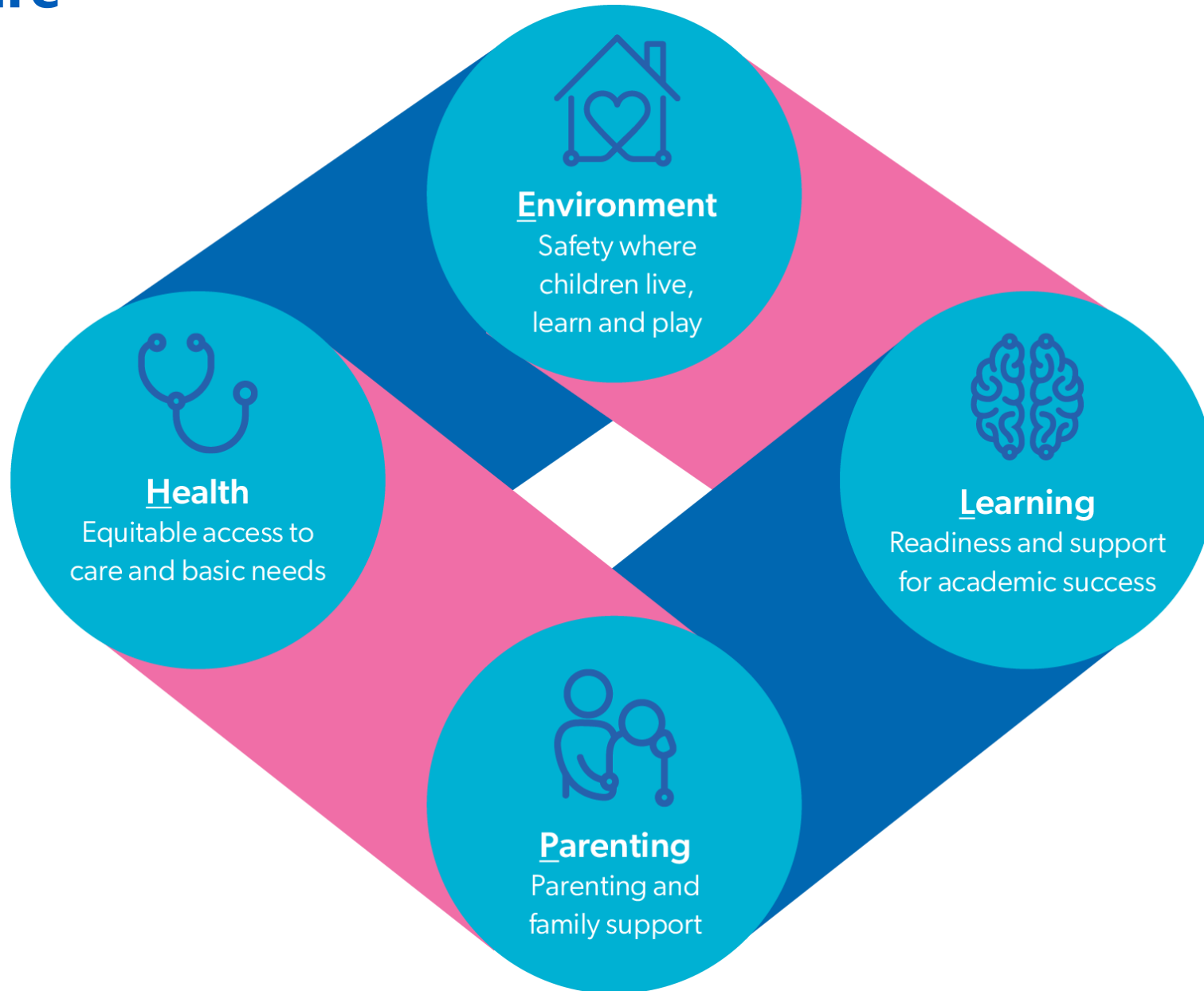
Childcare cost rose by 48% in North Texas from 2020-2023^a



Caregiver: "Having other children **without childcare makes it hard to keep appointments**. Family appointments or childcare accommodations at the Doctor's office [would make care easier for my child]."

Caregiver: "Right now I am not working but when I go back to work there will be a problem because **I don't have day care**; the other two kids stay on a program at the school."

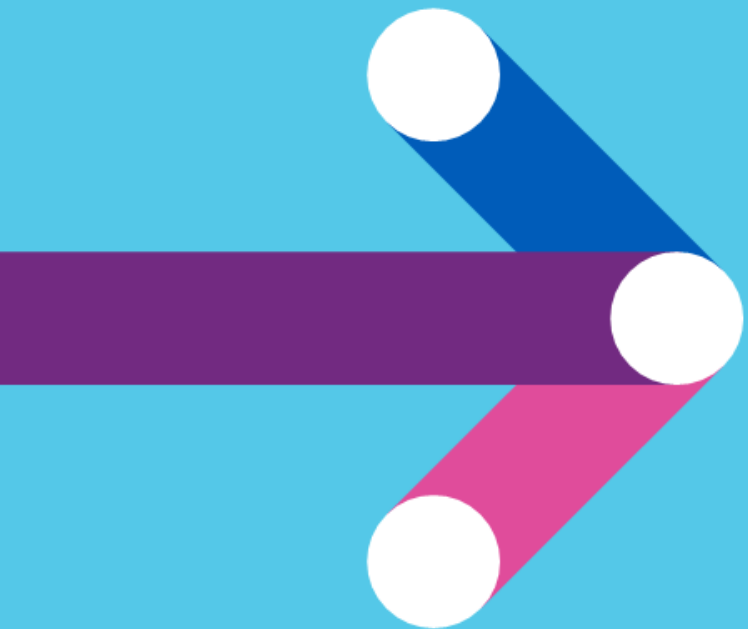
Access to care



Selected results discussed today:

- Overall health and well-being**
- Asthma**
- Healthy lifestyles**





Overall health and well-being



Overall health and well-being

8 in 10 children in our eight-county service area have excellent or very good health.

Children with health described as
‘excellent or very good’

U.S. (NSCH 2022)	90%
Texas (NSCH 2022)	87%
8-county service area	84%
Under-resourced	83%

About **191,500 (16%)** children have ‘good’, ‘fair’, or ‘poor’ health.

Overall health and well-being

Access to care	NSCH U.S. (2022)	NSCH Texas (2022)	8-county service area	Under- resourced
Have a personal doctor or nurse	72%	65%	81%	43%
Received preventive care	78%	74%	89%	72%
Received <u>all</u> needed healthcare	97%	98%	76%	45%
Child up-to-date on vaccinations for age	---	---	89%	93%



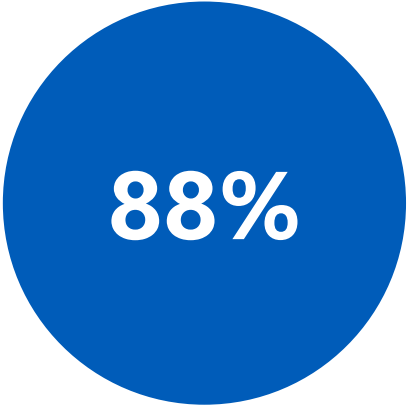
Community Leader: "The challenge is with **scheduling** appointments, arranging to take time off of work to **transport** the child back and forth, and **insurance coverage**. These are some of the **layers of complexity** that impact utilization of preventive health care."

Overall health and well-being

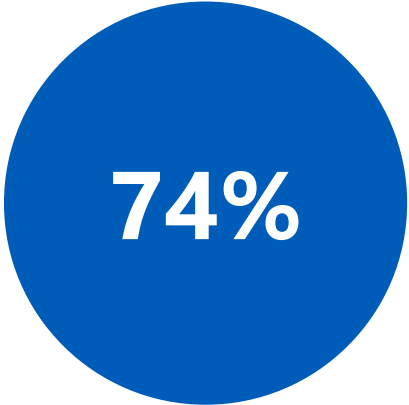
Family-centered care experience	NSCH U.S. (2022)	NSCH Texas (2022)	8-county service area	Under- resourced
Spends enough time with child	60%	52%	63%	57%
Listens carefully to caregiver	70%	64%	67%	67%
Shows sensitivity to family's values and customs	72%	65%	65%	64%
Provides specific information needed for child	72%	68%	67%	68%
Helps caregiver feel like a partner in child's care	73%	68%	65%	71%
'Always' experiences all 5 metrics	53%	47%	47%	45%

Overall health and well-being

Children with continuous insurance coverage for the past 12 month:



8-county service area
(est. 1,029,023)



Under-resourced

About **136,100 (12%)** children in the eight-county service region did not have continuous insurance coverage.

Top three reasons for lack of coverage:

- Coverage was unaffordable (35%)
- Problems with renewal process (31%)
- Change in caregiver employer or unemployment (29%)



Patient Family: *"I did not know how to get insurance. So we usually just pay out of pocket at the doctor. A Vietnamese friend told me about Texas Benefits, but I still had to try to fill out the forms that were all in English and it was very difficult. I have no idea how to keep his insurance from lapsing."*

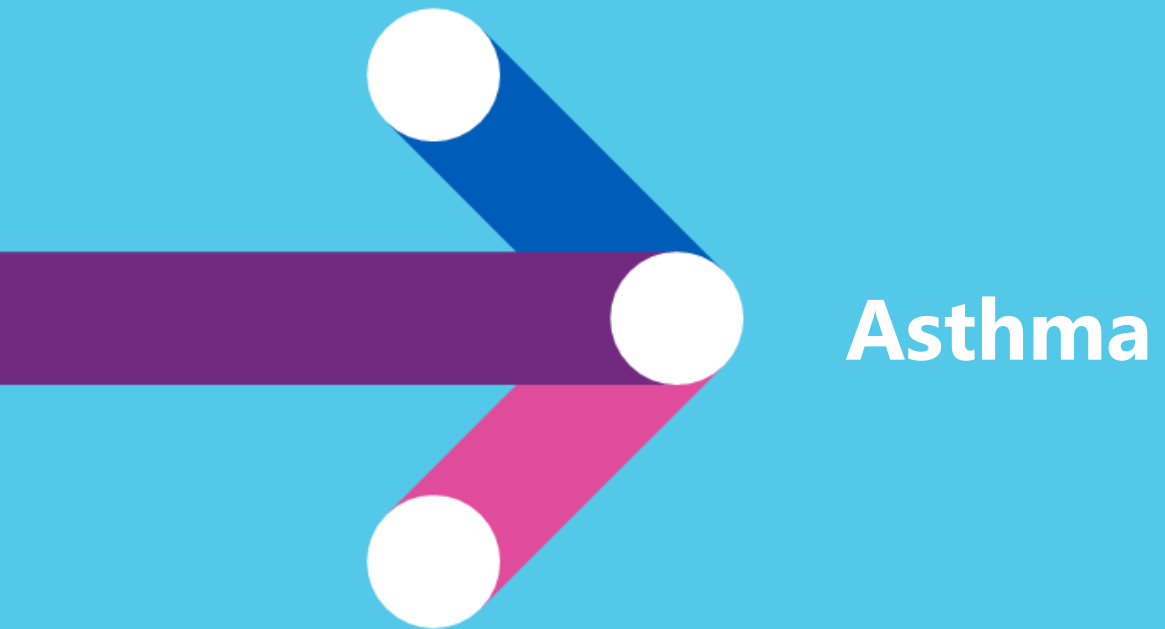
Overall health and well-being

Readiness and Support for Academic Success

8-County Service Area Under-resourced

Caregiver asked if they concerns about child's learning, development, or behavior (3-17 years)	39%	31%
Caregiver is completely confident child is ready to start school (3-5 years)	60%	76%
Missed at least one day of school due to physical illness (6-17 years)	73%	53%





Asthma



Asthma

Nearly **1 in 10** children in our eight-county service area currently has asthma.

Percentage of children **with asthma**

U.S. (NSCH 2022)	7%
Texas (NSCH 2022)	6%
8-county service area	9%
Under-resourced	10%

About **104,500 (9%)** children in the eight-county service region have asthma.

Asthma

Children who <u>currently</u> have asthma	8-County Service Area	Under-resourced
Had an episode or asthma attack	57%	41%
Been to the ER for asthma symptoms	25%	23%
Forgone prescribed asthma medications	8%	10%



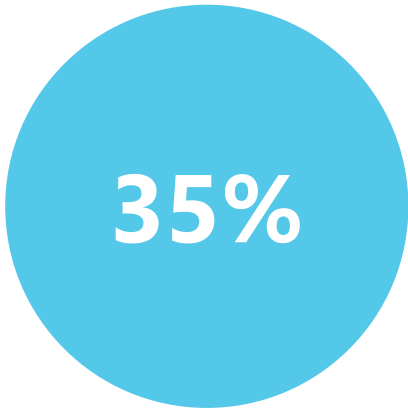
Caregiver: "For the most part my kids are healthy but my youngest one has asthma and *sometimes the way he breaths scares me and I stay up at night to watch him.*"

Asthma

Children with asthma that do not have an individualized asthma action plan:



8-county service area
(est. 19,700)



Under-resourced

24% (est. 174,300) of children with asthma have lived with someone who uses cigarettes, cigars, or pipe tobacco.

Asthma

Children with asthma that missed at least one day of school due to asthma symptoms (6-17 years)

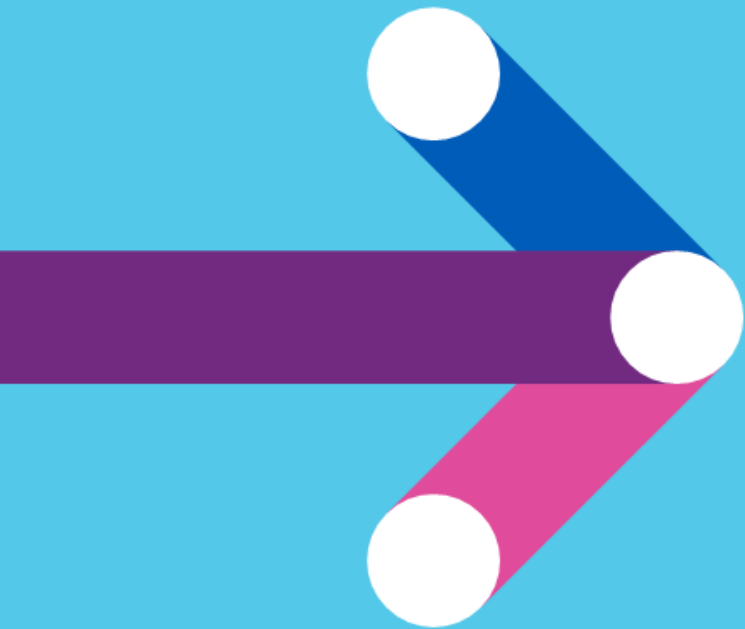
50%

8-county service area
(est. 50,100)

43%

Under-resourced





Healthy Lifestyles



Healthy lifestyles

Nearly **2 in 5** children ages 10 to 17 in our eight-county service area have an **unhealthy** body weight.

Percentage of children ages 10 to 17 without normal BMI for age

U.S. (NSCH 2022)	39%
Texas (NSCH 2022)	50%
8-county service area	38%
Under-resourced	61%

About **207,600 (38%)** children in the eight-county service region do not have a healthy body weight.

Healthy lifestyles

Healthy Lifestyle Behaviors

(Children ages 6-17)

	8-County Service Area	Under- resourced
Eats fresh fruits and/or vegetables daily	35%	47%
Child has less than 2 hours of entertainment screen time most days	6%	12%
Child has at least 1 hour of physical activity every day	19%	30%
Child sleeps more than 8 hours every night	46%	71%



Kid Power Focus Group: “It’s important that we not only provide children in our own communities with the right **tools** they need to practice healthy habits today, but **teach** and **empower** them at a young age so they can grow up to become great leaders who strive for positive change globally and **locally**.”

Healthy lifestyles

13% (est. 84,700)
of children do not
have access to
physical activity
assets in their
community.



13% (est. 144,300)
of children do not
have access to
healthy food assets in
their community.

25% of community leaders rate access to wellness opportunities as difficult to access for children in their community.

Healthy lifestyles

Child lives in household that cannot always afford nutritious meals (0-17 years)

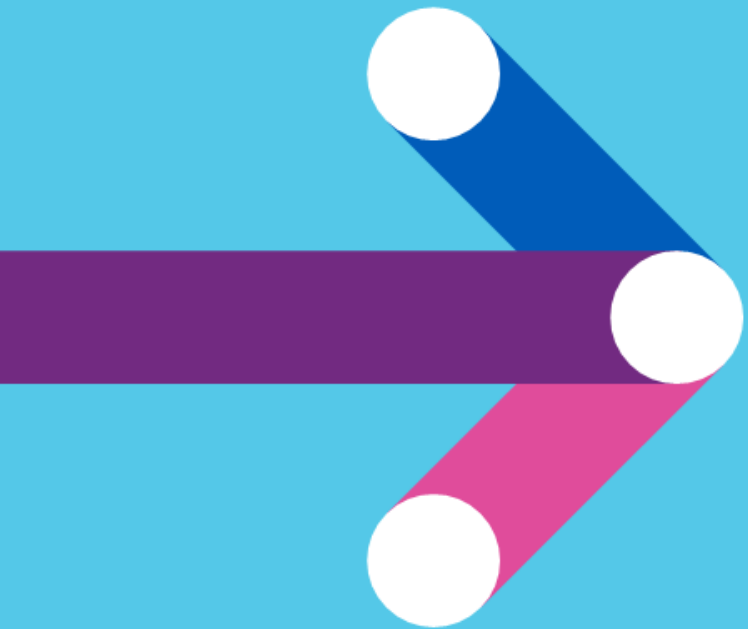
U.S. (NSCH 2022)	33%
Texas (NSCH 2022)	40%
8-county service area	34%
Under-resourced	51%

About **390,100 (34%)** children live in a household that cannot always afford nutritious food.

About **236,400 (21%)** children live in a household that reported receiving SNAP benefits in the past year.



Caregiver: "We struggle sometimes and have to use food banks. We also have to **budget** daily meals. I was denied for food stamps at this time due to increase in income for household."



Call to Action & Next Steps

Call to Action

Overall health and well-being

- **Expand health access and support:** strengthen partnerships for access to health care, housing, and education.
- **Address health needs:** provide targeted support programs for health needs in the community.
- **Boost advocacy:** promote access to child health needs, education, and strong public health policies to protect children.

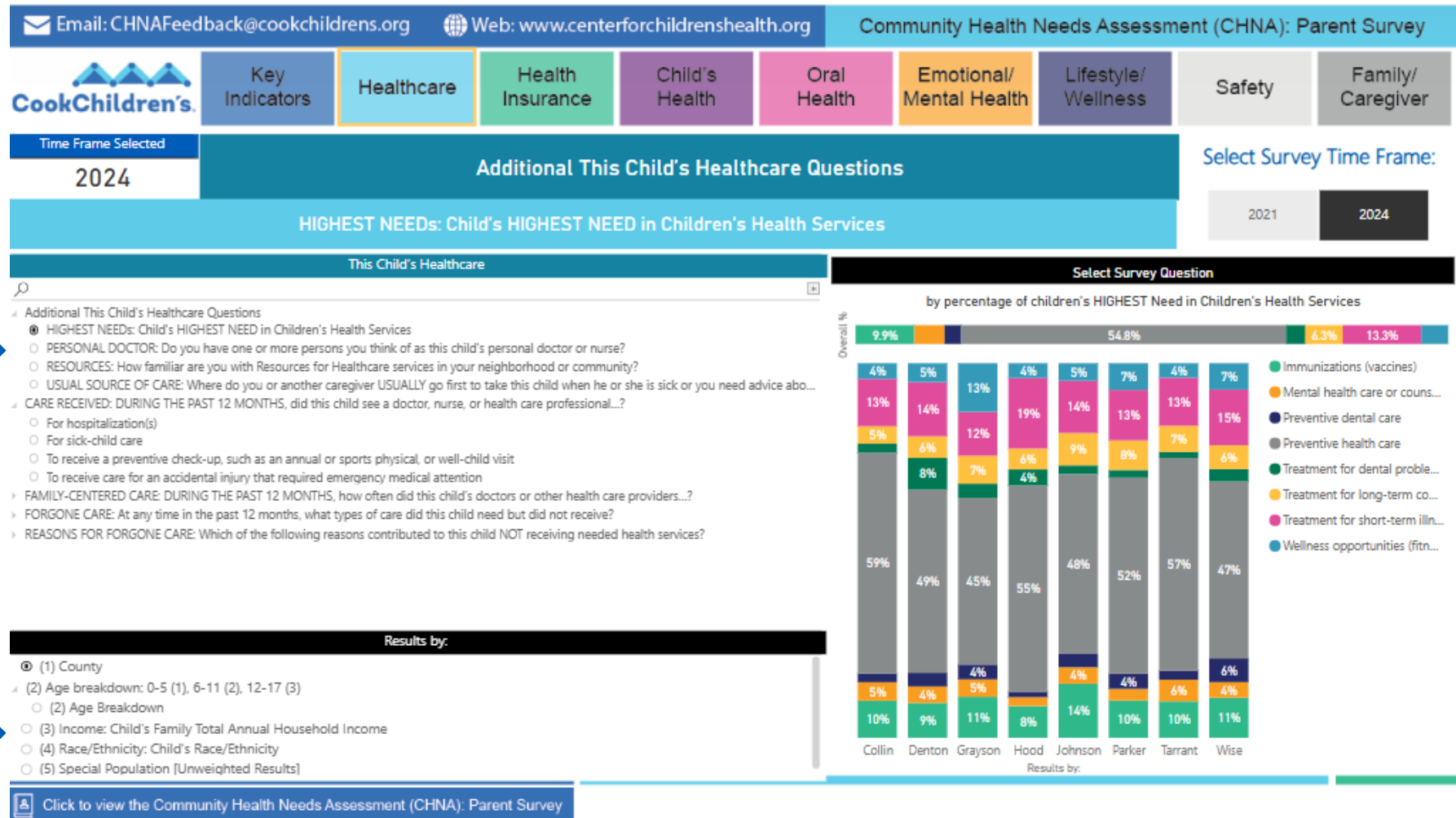
Asthma

- **Personalized care and education:** collaboration among families and providers for asthma action plans, provide education, and connection to community resources.
- **Safe environments:** educate caregivers and communities on asthma triggers through evidence-based programs.
- **Boost advocacy:** support policies for better health care services, lower costs for asthma medications, and safe environments to reduce asthma triggers.

Healthy Lifestyles

- **Promoting wellness and healthy behaviors:** strengthen partnerships and encourage collaboration to promote healthy behaviors for children and families.
- **Food and resource access:** strengthen partnerships to address food insecurity, expand physical activity and food assets, and connect families to needed services.
- **Boost advocacy:** support health providers in community education, combat weight-based stigma, and improve access to health insurance for children.

CHNA parent/caregiver survey data dashboard



Health topic pages

Filter by data collection year

Survey questions

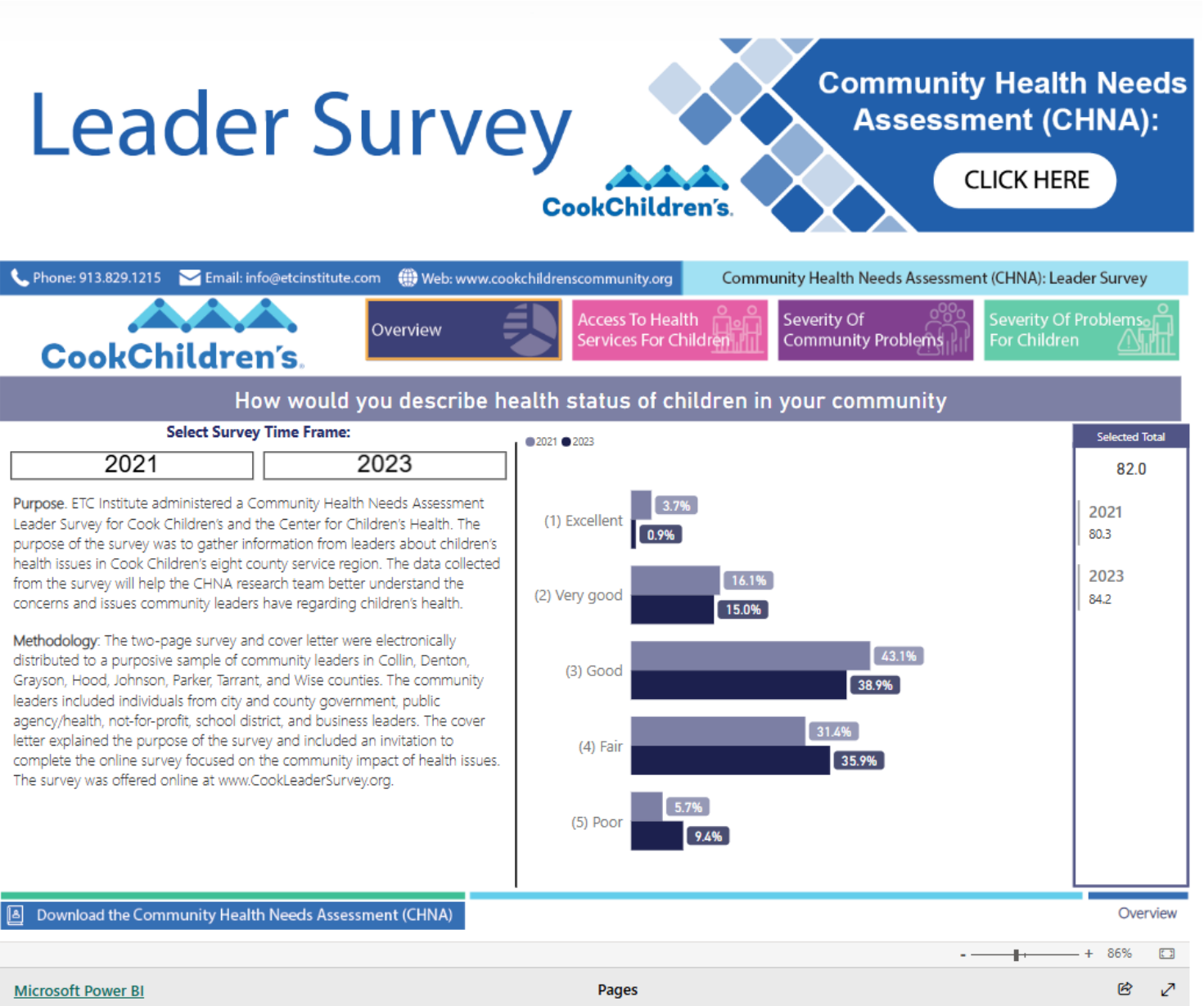
Data filter



<https://www.cookchildrenscommunity.org/data/chna/>



CHNA community leader survey data dashboard



Question topics

Survey years





Scan the QR codes below:

Register for Session 2

June 3, 2025 from 9-10:30am

Focus Areas: Caregiver support, Injury prevention, Mental health, and Oral health



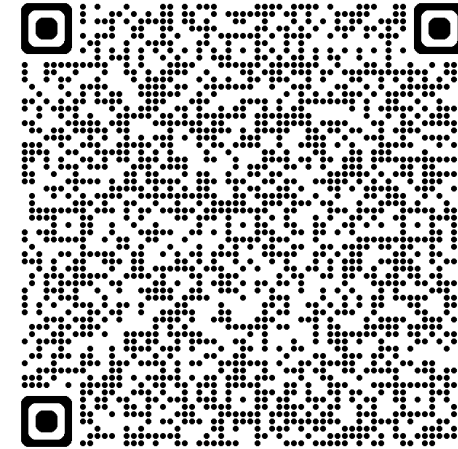
Summit feedback survey:





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Questions or feedback?

Please email: CHNAfeedback@cookchildrens.org