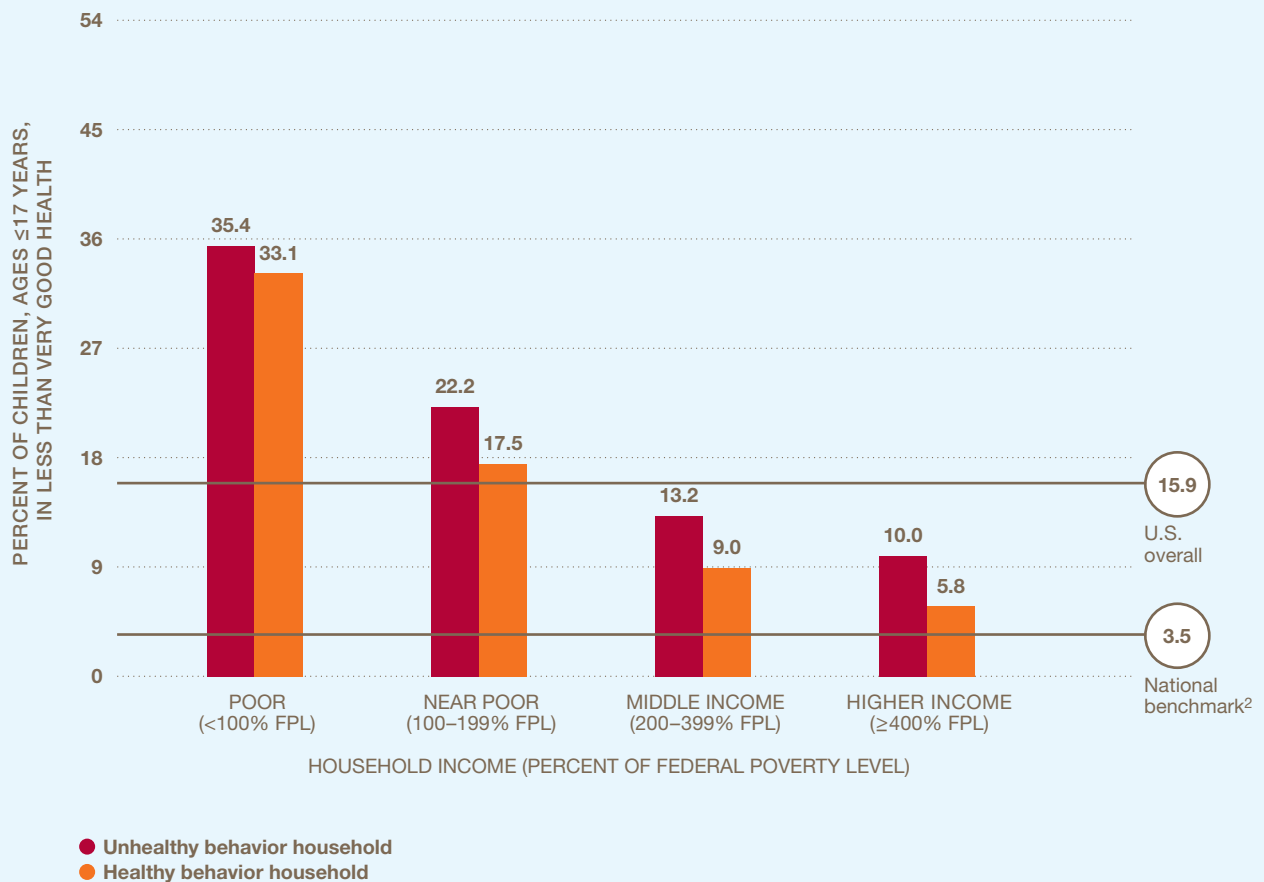


Health-Related Behaviors and Income Matter for Children's Health

Differences in children's general health status¹ occur not only across social groups but also depending on health-related behaviors in families. At every income level, children living in families where no one exercises regularly or someone smokes are more likely to be in less than optimal health than children in families with healthier behaviors.

The national benchmark for children's general health status reflects the best (in this case, lowest) statistically-reliable rate of less than optimal health observed in any state among children whose families were both higher income and practiced healthy behaviors. This benchmark—3.5 percent of children with less than optimal health, seen in Colorado—reflects a level of good health that should be attainable for all children nationally and in every state.



Prepared for the RWJF Commission to Build a Healthier America by the Center on Social Disparities in Health at the University of California, San Francisco.
Source: 2003 National Survey of Children's Health.

1 Based on parental assessment and measured as poor, fair, good, very good or excellent. Health reported as less than very good was considered to be less than optimal.
2 The national benchmark for children's general health status represents the level of health that should be attainable for all children in every state. The benchmark used here—3.5 percent of children with health that was less than optimal, seen in Colorado—is the lowest statistically-reliable rate observed in any state among children whose families were not only higher income but also practiced healthy behaviors (i.e., non-smokers and at least one person who exercised regularly). Rates with relative standard errors of 30 percent or less were considered to be statistically reliable.