



7 Children with Special Health Care Needs and Access to Speech Therapy Services: A Fact Sheet on Findings

Issues Addressed

There is national concern about whether children with special health care needs (CSHCN) experience access problems with rehabilitative/habilitative services such as speech therapy. Many CSHCNs have an ongoing and developmental need for speech therapy. The extent of access problems encountered by families of CSHCN who require speech therapy services is thus of great importance for parents, providers, school systems, regulators and administrators of health plans, as well as for health policy analysts. This fact sheet addresses three questions:

- ♦ Amongst a diverse sample of CSHCN, what percentage of children needed speech therapy services in the preceding year?
- ♦ To what extent did parents of CSHCN report problems obtaining speech therapy services when their children need this care?
- ♦ Were particular characteristics of these parents or children associated with lower or higher rates of access problems?

Study Methods

The information presented here is based on data from a survey

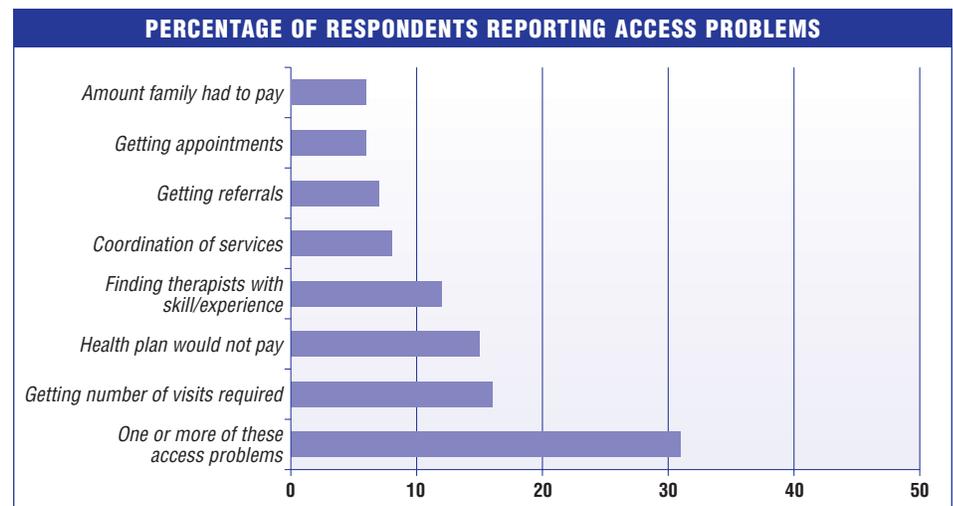
conducted in 1998-1999 of 2,220 parents of CSHCN in 20 states. Brandeis University and Family Voices partnered to design and conduct the survey project. In this fact sheet, we focus on problems reported by parents of CSHCN in obtaining needed care from speech therapists. For those parents whose children needed or used speech therapy, the percentage experiencing particular problems was calculated. In addition, analyses were conducted to examine whether specific characteristics of these families and children were associated with speech therapy access problems.

Findings

- ♦ **Half of the respondents in the survey (52%) reported that their child needed speech therapy in the preceding year.**

- ♦ **Almost a third (31%)** of the respondents whose child needed speech therapy reported at least one of the access problems inquired about in the survey. The rates of particular problems are shown in the graph.

- ♦ **Three characteristics** were associated with an **increased** chance of reporting at least one of these access problems (after also accounting for the respondent's marital status and employment status, family income, the child's race/ethnicity, age and severity of medical conditions):
 - ♦ **Unstable health care needs.** Respondents who indicated that their child's health care needs were unstable were almost twice as likely to report one or



more access problems compared to respondents whose children had more stable health care needs.

◆ ***Behavior, mental health problems, or autism.***

Respondents who indicated their child had behavior problems, mental health problems and/or autism were about one and a half times as likely to report any access problems when compared to respondents whose children did not have these conditions.

◆ ***More than one child with special health care needs.***

Respondents who had more than one CSHCN in the family were over one and a half times more likely to report any of these access problems compared to families with only one CSHCN.

◆ **Four characteristics** were associated with a **decreased** chance of reporting any of these access problems:

◆ ***Very good or excellent parental health.***

Respondents who reported themselves to be in very good or excellent health were about two times less likely to report any of the access problems when obtaining speech therapy services for their child compared to respondents in good, fair or poor health.

◆ ***Low parental education.***

Respondents with a high school degree or less were about two times less likely to report any of the access problems relative to respondents with at least some college education.

◆ ***Primary Medicaid coverage.***

Respondents who told us their

state Medicaid program paid for their child's primary health plan were almost two times less likely to report access problems with speech therapy services when compared to respondents whose children were not covered by Medicaid.

◆ ***Public secondary health care coverage.***

Respondents who reported their child had a public, secondary plan (such as Medicaid) were about one and a half times less likely to report access problems when compared to respondents whose children did not have this coverage.

Summary

◆ Just over half of the parents in this study reported that their child needed speech therapy in the past year. Almost a third (31%) of these parents reported one or more access problems when obtaining care their children needed from speech therapists.

◆ Parents in the study who reported their children to have unstable health care needs and/or a behavioral health condition were at a higher risk of reporting access problems when seeking care from speech therapists for their children. In addition, parents who told us they had more than one CSHCN were more likely to report access problems than parents with only one such child.

◆ Parents in the study who reported themselves to be in very good or excellent health were less likely to report access problems than their counterparts. In addition, respondents with low education were less likely to report access problems.

◆ Parents with primary Medicaid coverage for their child or with public secondary coverage for their child (such as provided by Medicaid in many states) were each less likely to report an access problem than parents without such public coverage.

This is the first in a series of fact sheets describing CSHCN and access to health and rehabilitative services. More detailed fact sheets are available for each of the service areas described in this document and can be obtained directly from the Consortium for Children and Youth with Disabilities and Special Health Care Needs.

The Consortium is funded by the National Institute on Disability and Rehabilitation Research of the U.S. Department of Education. For their support of the survey upon which these findings are based, we also gratefully acknowledge the David and Lucile Packard Foundation, the Jack E. and Zella B. Butler Foundation, and the federal Bureau of Maternal and Child Health, Division of Services for Children with Special Health Care Needs.

For further information on these analyses, please contact the authors of this fact sheet: Marty Wyngaarden Krauss, Ph.D. (krauss@brandeis.edu) or Stephen Gulley, MSW (gulley@brandeis.edu) at the Heller School for Social Policy and Management, Brandeis University.



For further information on the Consortium for Children and Youth with Disabilities and Special Health Care Needs, its partners or projects, please go to the consortium website, at: www.consortiumnrrtc.org



This project is supported by Grant H133B001200 from the National Institute on Disability Research and Rehabilitation, U.S. Department of Education.

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