West Virginia Healthy Kids and Families Coalition

REPORT

"WHAT TO DO WHEN YOUR CHILD GETS SICK"
a project in Fayette and Nicholas Counties, West Virginia

July, 2006

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ABSTRACT

The purpose of this project was to determine whether a simple, low-cost intervention such as the provision of a self-help, health how-to book and encouragement to use it could demonstrably increase parents' and other caregivers' confidence in taking care of some of their children's health care needs at home. It is anticipated that increased confidence will reduce the need for them to seek unnecessary access to high-cost health care services for their children. The project's results tended to answer the question in the affirmative but are inconclusive.

Low-income parents and other caregivers were recruited for participation in the project through local health-related or social service programs. Participants answered a 29-question pre-intervention questionnaire and then were given an easy-to-read, easy-to-use book entitled: *What To Do If Your Child Gets Sick*.[1] Over the course of approximately six months, project personnel encouraged participants monthly during routine, organizational or programmatic contact to keep the book handy and to use it. In some cases, chapters were reviewed and discussed with the participants to keep the book's existence, contents and location in the home fresh on their minds. The same questionnaire was administered post-intervention and analyzed to determine what changes occurred since the earlier administration of the questionnaire.

While some of the results were unexpected, inconsistent and inconclusive, in the aggregate families reported being more confident in their ability to take care of minor medical problems at home without a visit to a physician or hospital emergency room. In fact, after the project intervention, none of the participants reported they would go most often to a hospital emergency room for some conditions. Because of the intervention, utilization of the most expensive health care services appeared to be reduced.

[1] Mayer, Gloria and Kuklierus, Ann, *What To Do If Your Child Gets Sick* La Habra: Institute for Healthcare Advancement, 2005.

INTRODUCTION

The Institute of Medicine (IOM) of the National Academies reports that 90 million American adults have trouble understanding and using health information.[2] Consumer education and health literacy have increasingly become significant components in addressing quality of health care and health outcomes as well as providing an opportunity to save health care dollars. A study by the UCLA/Johnson & Johnson Health Care Institute suggested that Head Start families could reduce their use of emergency departments and clinic visits if provided with an easy-to-read medical reference manual and training in taking care of their children.[3]

The UCLA/Johnson & Johnson Health Care Institute launched the study in 2001 by distributing the book, *What To Do When Your Child Gets Sick*, to 1,600 families nationwide. The results among those receiving the book were dramatic: Emergency room trips were reduced by nearly half, and clinic visits dropped more than a third. That, in turn, led to a significant drop in the number of days parents missed work and students were kept out of school.

In 2005, the Parents as Teachers (PAT) Program of United Way of Central West Virginia, the West Virginia Healthy Kids and Families Coalition (WVHKFC), and the West Virginia Children's Health Insurance Program worked together to replicate the UCLA/ Johnson & Johnson Health Care Institute project among families served by the PAT program in four counties in south central West Virginia. The project[4] was preceded by in-depth interviews in 2004 of 101 Medicaid and WVCHIP families asking about their experiences in receiving health care. The interviews showed that while most (94%) families in the four county region had a regular source of care, they tended to use emergency departments for care after-hours and on weekends. The interviews also suggested that parents would be able to do more at home if they had a good source

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2 Guide to Health Literacy: A Prescription to End Confusion, April, 2004

3 Ariella D. Herman, Ph.D.; Gloria G. Mayer, R.N., Ed.D., FAAN, Reducing the Use of Emergency Medical Resources Among Head Start Families: A Pilot Study, Journal of Community Health, Vol., 29, No. 3, June 2004

4 Renate Pore, Ph.D. and Patricia Bowles, Ed.D., Report: *What to Do When Your Child Gets Sick, a Parent Education Pilot Study*, World Wide Web Site: http://www.wvhealthykids.org/downloads/report_taking_care.doc

of information. Families, furthermore, said they would welcome more information on taking care of their children.[5]

The 2005 West Virginia replication study found that, if given the availability and repeated encouragement to use an easy-to-read, easy-to-use health care reference book, participants would indeed make use of the resource and thereafter reduce their use of doctors, clinics, and hospital emergency departments.

The design of the current project was essentially the same as the foregoing replication study, with the notable exception that the intervention was carried out by personnel from various different programs. It was begun in the fall of 2005 in Fayette and Nicholas Counties in West Virginia. The project designers hoped that the intervention, both the provision of the book and the face-to-face encouragement to use it, would again be seen as reducing unnecessary visits to high-cost hospital emergency rooms and physician and clinic offices. It was hoped that participants would feel more confident in taking care of minor illnesses at home rather than using these higher cost resources.

[5] Experiences in Receiving Health Care by West Virginia CHIP and Medicaid Families, October 2004

METHODS

The project was conducted among families living in rural portions of Fayette and Nicholas Counties in West Virginia. Participants were recruited and treated somewhat differently in each of these project areas, hereinafter designated as Nicholas County and Fayette County respectively. Methods used in each county are described separately.

Fayette County

The portion of the project conducted in Fayette County, West Virginia was managed by Nonie Roberts, LSW who is headquartered at the New River Health Association's[6] New River Family Health Center in Scarbro, West Virginia. Ms. Roberts administers the Maternal Infant Health Outreach Worker ("MIHOW") program[7] also housed in the facility. Seven MIHOW home visitors administered the project's pre- and post-intervention questionnaires (see **Appendix I**), gave participants the book *What To Do When Your Child Gets Sick* and provided additional intervention.

MIHOW staff women usually make at least one home visit per month to families enrolled in the program. In particularly needy circumstances the visits may have been more frequent. Some MIHOW workers provide their home telephone numbers and may have contact with their caseloads of families by telephone one or more times per week (e.g., with families with ongoing substantial illness or other challenges.)

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6 http://www.medesign.org/newriverhealth

7 The Fayette County MIHOW program has been in operation for 23 years. Using local women as its primary staff, MIHOW is a partnership between the Vanderbilt University Center for Health Services and community-based organizations in six states: Arkansas, Kentucky, Louisiana, Mississippi, Tennessee, and West Virginia. These local women — mothers who are trusted locally for their energy, integrity, compassion, and commitment to their community — visit pregnant women and families with young children up to three years of age in their home to promote healthy living and self-sufficiency. Leading by example, they listen to parents' concerns, educate them about nutrition, health and children's development, model positive parenting practices, and provide links to medical and social services. Because these workers come from the same background as the families they serve, they are role models throughout the community for families held back by poverty, low self-esteem, and isolation. The workers are paid a nominal amount on a per home visit basis. MIHOW in Fayette County, West Virginia typically served between 60-70 families during the course of this project.

Training of MIHOW workers for this project

MIHOW workers were assembled and given copies of the book and pre-intervention questionnaires. Each pre-intervention questionnaire was coded by the worker in a way that would allow matching with post-intervention questionnaires at the conclusion of the project. Participants were given an opportunity to peruse the book, and a plan was developed to present a copy to each of the MIHOW program families. The primary caregiver of the children (usually the mother) would be instructed to keep the book in a readily accessible location where they would always know where it is. Together the worker and the mother agreed on a "permanent" location in the home where the book would be kept. A sticker showing the toll free number of the regional poison control office was applied to the book as well as the name and telephone number of the family's pediatrician. Knowing where the book was at all times was stressed as a part of the intervention strategy. The worker showed the mother how to use the book and demonstrated how the book could help her make decisions about needed care. During this first visit the worker presented the pre-intervention questionnaire and either waited while the mother filled out the questionnaire or wrote down the answers the mother supplied. In all cases, the worker was available to help answers questions respondents had about the questionnaire.

Intervention in Fayette County

At least once a month during the course of a home visit the MIHOW worker was instructed to "bring up the book." They asked whether any of the young children in the house had been sick or injured, whether the book was used and, if so, whether it was found to be helpful and how it was helpful. They were asked which pages/sections were used. They were asked whether they used the book for any other purpose during the month. If the family did not use the book, the MIHOW worker together with the mother would look together to see if the book had any information that would have been helpful had the book been used.

On every visit families were encouraged to keep the book in the designated location and use it whenever its contents were applicable to a situation at hand. On her own initiative, Ms. Roberts had the MIHOW workers record their visits on a form, a sample of which is attached as **Appendix II** to this report. Information collected on these forms was not made a formal part of the project, but a representative sample of quotes from these forms was accumulated and is attached as **Appendix III**.

Because of the close relationship that often developed between the MIHOW workers and families, mothers faced with a sick infant or child would occasionally call the MIHOW worker at home and ask for advice. When this occurred, the worker, who also had a copy of the book, would ask the mother to get the book and together they would find advice applicable to the situation.

A minority of the families participating in the project as it was conducted in Fayette County were not visited at home but were given the book in a small group setting (from 3-12 members in the group) and the monthly intervention/reminders/training was conducted in the group setting. Others received intervention both in the group setting and also were visited at home. Most were home visits only.

Nicholas County

The portion of the project conducted in Nicholas County was managed by Marla Short who is the Executive Director of the Nicholas County Starting Points Centers and President of the West Virginia Starting Points Association. Ms. Short, who is well-connected with service providers and agencies serving young children and families throughout rural Nicholas and Summers Counties, was uniquely qualified to identify and recruit families for participation in the project. The target number of participants was 300. Ms. Short found it difficult to recruit that many people, especially from one area. Through her wide-ranging efforts qualified project families were recruited from:

1. The Richwood, WV Tots to Teens and Starting Points Center
2. The Richwood, WV "Play Group" program.
3. The Craigsville, WV Tots to Teen Center.
4. The Webster Springs, WV pediatric office of Dr. Mark J. Hardway, MD
5. The Nicholas County Head Start program
6. The Summersville, WV office of the Department of Health and Human Services

Communities in Nicholas County, WV are, for the most part, rural, isolated, and struggling economically. Families living in those communities are often themselves geographically isolated and struggling financially. Many governmentally provided services are fragmented and geographically focused. The lack of transportation, public and private figures strongly in most decision-making. These characteristics of the population made it impossibly difficult to obtain a large homogenous sample of project participants who could all be treated the same for purposes of the project. While Ms. Short personally trained all project personnel, the circumstances of the project intervention were necessarily fractioned, and the project was conducted slightly differently in each of the foregoing six categories.

Ms. Short trained three teachers at each of the Richwood and Craigsville Tots to Teens centers. These six teachers then recruited parents with children who attended the daycare centers. In many cases, these teachers already had a personal relationship with the families recruited and may have socialized with them, gone to the same church, provided informal assistance to help solve problems, etc. In some instances, the project intervention itself provided a seed opportunity for bonding and relationship-building.

In any case, it is important to understand that the "relationship" between staff person and the project participants was close and personal. For purposes of the project intervention, the teachers and parents met monthly to go over a chapter of the book, determine whether and how the book was needed during the month and ensure that the parents kept it handy. Parents very consistently brought the book with them, as instructed, to these meetings.

Ms. Short trained one staff member in the Richwood Play Group. This community program provides an opportunity for parents to bring their young children (typically two or three years old) together to allow their children to socialize and play together in a semi-structured environment. The program necessarily also brings together the parents for the same socialization. These groups met weekly, and teachers were instructed to bring up the book and its contents at every meeting.

Dr. Mark J. Hardway is a young pediatrician in Webster Springs, WV whom Ms. Short recruited to conduct a portion of the project with his qualified patients and their families. He invited parents with young children to participate when they registered at his office for care. He presented the book to them. His wife, a registered nurse in his office, administered the pre- and post-intervention surveys, and Dr. Hardway himself reviewed and discussed the first chapter of the book with all participants, instructing them on the book's use. He put his name and office number in the books and encouraged patients to call him during the month if they had questions about applying information contained in the book. Patients' families were asked to have the book in hand if they called about any medical problems. He and his office staff were instructed to teach the families how to look first to the book for help so they could handle questions themselves. Participants in Dr. Hardway's group were seen only if they returned to the doctor's office for some reason (regular checkups, medical problems, immunizations, etc.). However, on each visit Dr. Hardway would routinely go through chapter in the book.

Three family service workers at the Head Start office recruited and took participants through the project in Summersville, WV.

Ms. Short and her assistant themselves recruited families who were making visits to the Department of Health and Human Services office in Summersville, WV. A flyer was posted and distributed to clients visiting the office that offered free refreshments and a $10 gasoline voucher to qualified families who agreed to participate in the project and who would fill out the pre-intervention survey. At that time the book was distributed, the first chapter reviewed and discussed, and the parent instructed how to use the book. The parents were asked to return during the course of their regular visit to the office at the conclusion of the project when they were again they provided refreshments and asked to complete the post-intervention survey.

RESULTS

In addition to the data reported below and incorporated charts, see **Appendix IV** for a tabular summary of data received from Fayette County, **Appendix V** for a summary of data received from Fayette County, and **Appendix VI** for a combined summary of data received from both counties.

About the Participants

Table 1 shows that one hundred and thirty-six families qualified as final participants in the project by reason of having completed a pre-intervention questionnaire, undergone the intervention, and having completed a post-intervention questionnaire. The drop-out rate in Fayette County was 23% and was 35% in Nicholas County.

Number of Participants			
County	**Pre-Intervention Questionnaires Received**	**Post-Intervention Questionnaires Received**	**Matched Pairs**
Fayette	63	49	49
Nicholas	134	96	87
Combined	197	145	136

Table 1

Almost all of the care-giving participants responding at the time of administration of the pre-intervention questionnaire reported being white females less than 35 years of age. More than half of them reported an annual income of less than $20,000 per year. More than a third reported an income of less than $10,000 per year. See Figure 1. Nearly half reported being Medicaid recipients. See Figure 2.

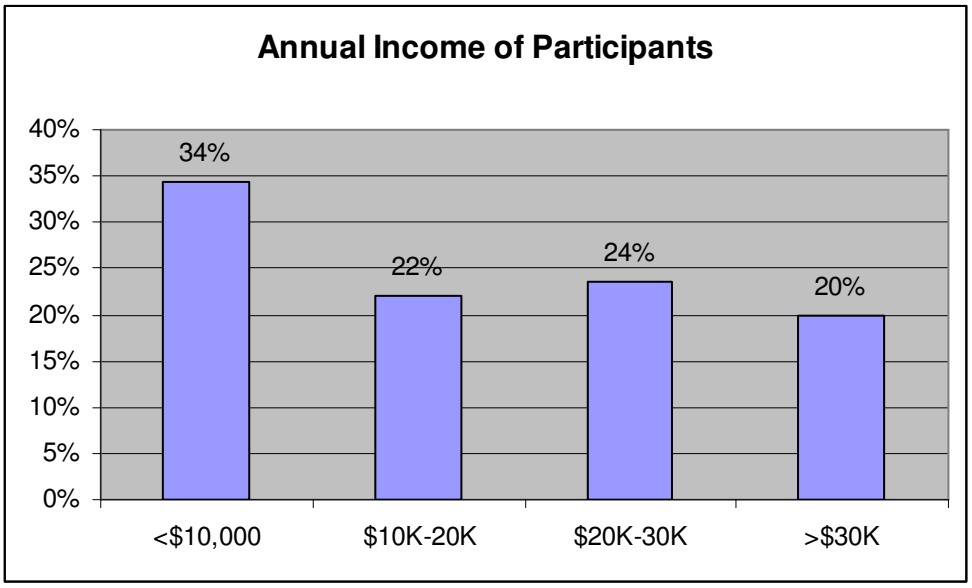


Figure 1

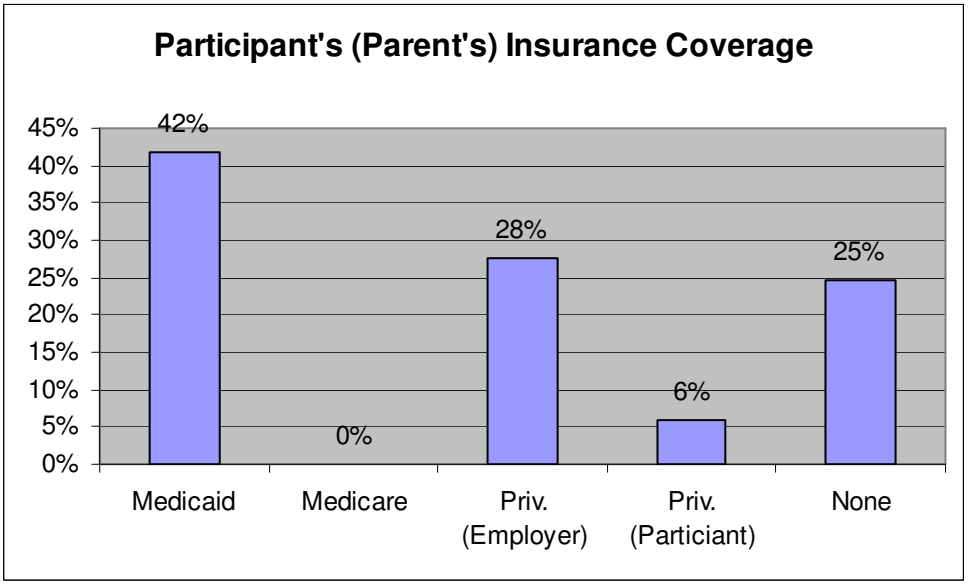


Figure 2

About the Children

Qualified participants reported caring for approximately 180 children under the age of six. While most (82%) of the children in the project were reported as being healthy on the pre-intervention questionnaire, a significant percentage were reported as having long-term medical problems such as asthma or diabetes. On the pre-intervention questionnaire, 18% of children were reported as having long-term medical

problems; on the post intervention questionnaire, 23% were reported as having long-term medical problems.

Almost all of the children (96%) were reported as having a regular doctor or clinic, and participating parents and caregivers consistently rated the care their children received as good or better. See Figure 3. The children mostly were reported to be covered by Medicaid and the West Virginia Children's Insurance Program. See Figure 4. Where children were found not to have any health insurance coverage efforts were made to enroll them in the West Virginia Children's Insurance Program or Medicaid before the project ended.

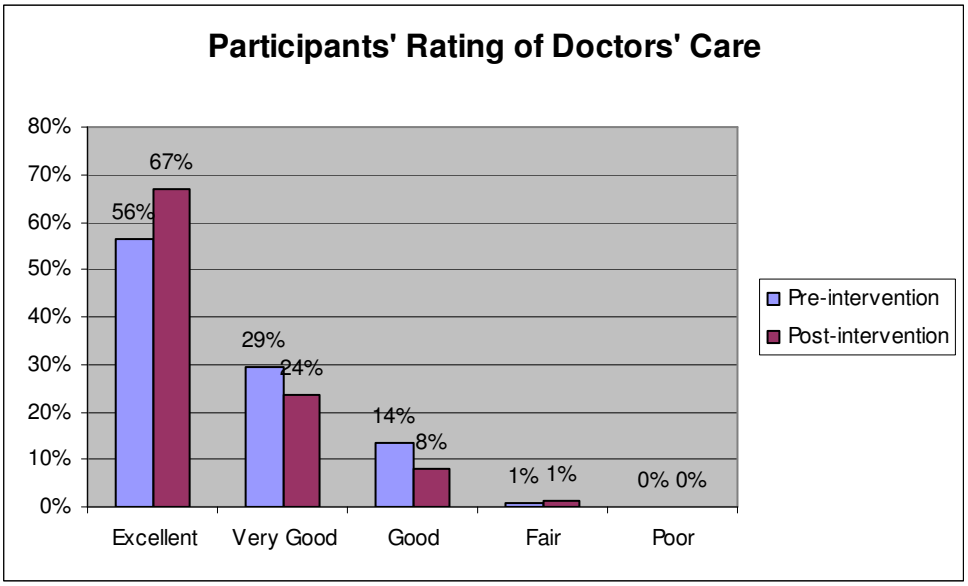


Figure 3

Of interest was the number of cases where children's health care coverage was reported to have changed between administration of the pre- and post-intervention questionnaires. For example, the number of participants reporting that their children were covered under the West Virginia Children's Health Insurance Program doubled from 11 to 22 (from 8% to 16%). The number of children reported to be covered by Medicaid dropped. PEIA coverage increased. The number of participants reporting private insurance coverage of their children dropped.

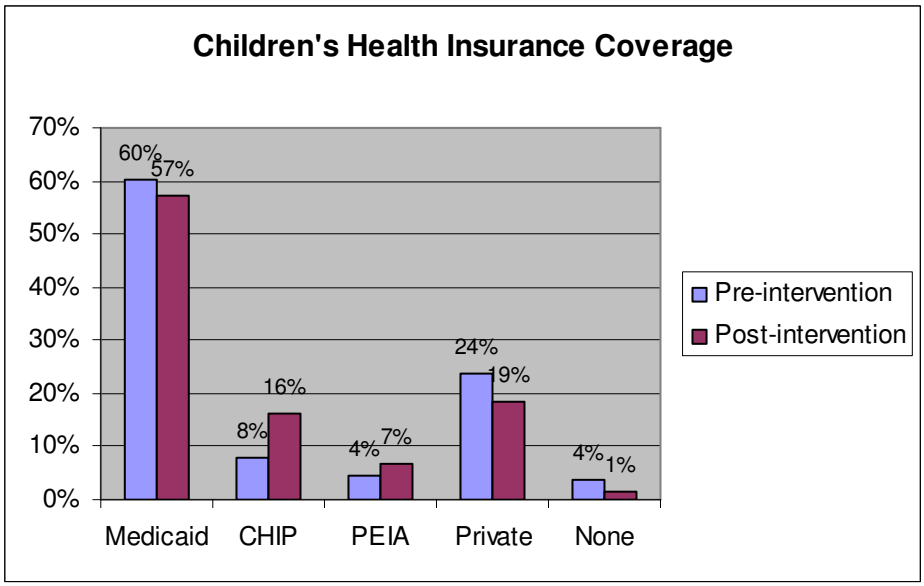


Figure 4

About the Book

What To Do When Your Child Gets Sick covers the management of more than 50 common childhood illnesses and health problems. It is written in an easy-to-read and easy-to-understand manner for parents and caregivers of children from birth to 8 years of age. The book features everyday language with numerous illustrations to describe each illness or health problem and to discuss what needs to be done for the child. The book's cover and table of contents is attached to this report as **Appendix VII**. For each condition, the following questions are asked and answered: What is it? What do I see? What can I do at home? When do I call the doctor or nurse? And what else should I know about it?

What To Do When Your Child Gets Sick was written by Gloria Gilbert Mayer, R.N., Ed.D. and Ann Kuklierus, R.N. Both have clinical experience in caring for children in hospitals and other health care settings and have worked with doctors, specialists, and health educators who care for children. They are principals for the Institute for Healthcare Advancement who, in addition to publishing this book, have published on topics in the healthcare field and consult on healthcare in private practice. The book is available from the Institute for Healthcare Advancement at www.iha4health.org.

Participant Receptiveness to a How-To Health Book

Because the intervention included presentation of the book *What To Do When Your Child Gets Sick*, participants were asked on both pre- and post-intervention questionnaires to rate from 1 to 5 (1 = very useful; 5 = not useful at all) how useful they would find a book that describes steps to take in dealing with a child who is sick. Nearly all (98% or more) said on both questionnaires that such a book would be useful, but participants' enthusiasm for the idea increased as measured on the post-intervention questionnaire. See Figure 5.

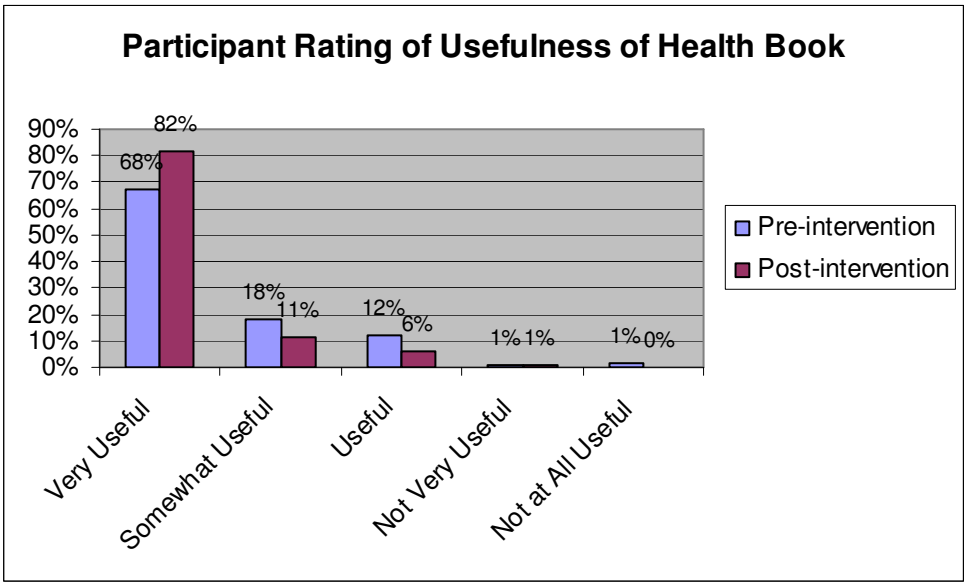


Figure 5

Where Parents Go for Advice on Medical Problems Such as Fever

Hospital Emergency Departments. After the intervention, parents reported they relied less on hospital emergency departments as a source of information about medical problems such as fever. Before the intervention, 17% of project participants in Nicholas County and 6% in Fayette County reported that they most often went to a hospital emergency room for information about their children´s fever. After the intervention, none of the participants in either county reported they would use this expensive source of information. See Figures 6 and 7.

Doctors/Clinics. After the intervention, parents in Nicholas County reported they relied more on doctors or clinics as a source of information about fever. Before the intervention 38% reported doctors/clinics as their source for information about fever and 42% reported that source post-intervention. The result was different in Fayette County where participants reported their reliance on doctors and clinics as a source of information about fever decreased post-intervention (from 33% pre to 17% post). See Figures 6 and 7.

Health Book. The participants reported an increased reliance on a "health book" for advice on fever in both counties post-intervention. Post-intervention reliance on this resource was significantly higher in Fayette County (2% before; 33% after) than in Nicholas County (2% before; 3% after). See Figures 6 and 7.

Family Members. In both counties, reliance on family members for advice on fever was significant and remained essentially unchanged post-intervention (32% before; 36% after). There was almost twice as high a pre-intervention reliance on family as a source of information about fever among Fayette County participants (45%) than Nicholas County participants (24%). See Figures 6 and 7.

Internet. The Internet was very rarely reported as being used as a source of advice on fever (1%). See Figures 6 and 7.

Pharmacists and Nurse Line. Pharmacists were not reported as being commonly relied on for information about fever. A few relied on insurer-supplied nurse lines, but nurse line use post-intervention was less. See Figures 6 and 7.

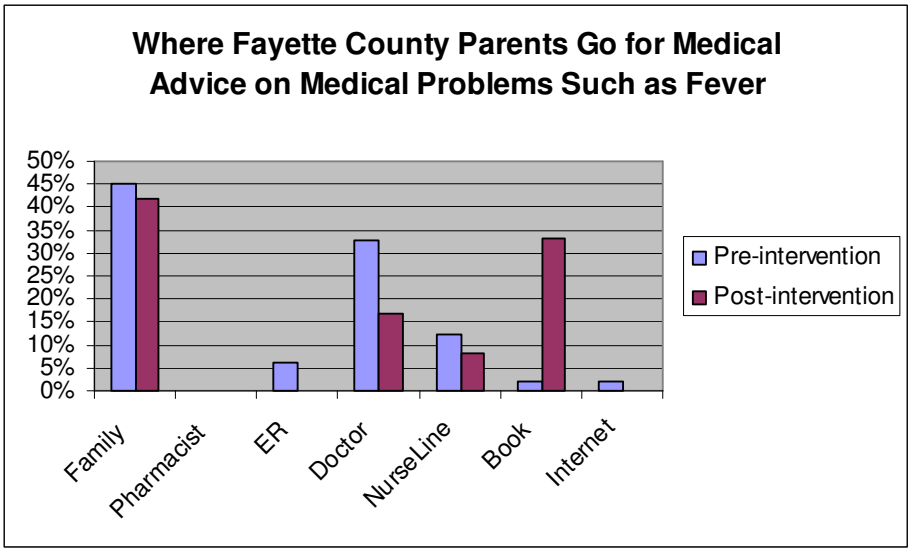


Figure 6

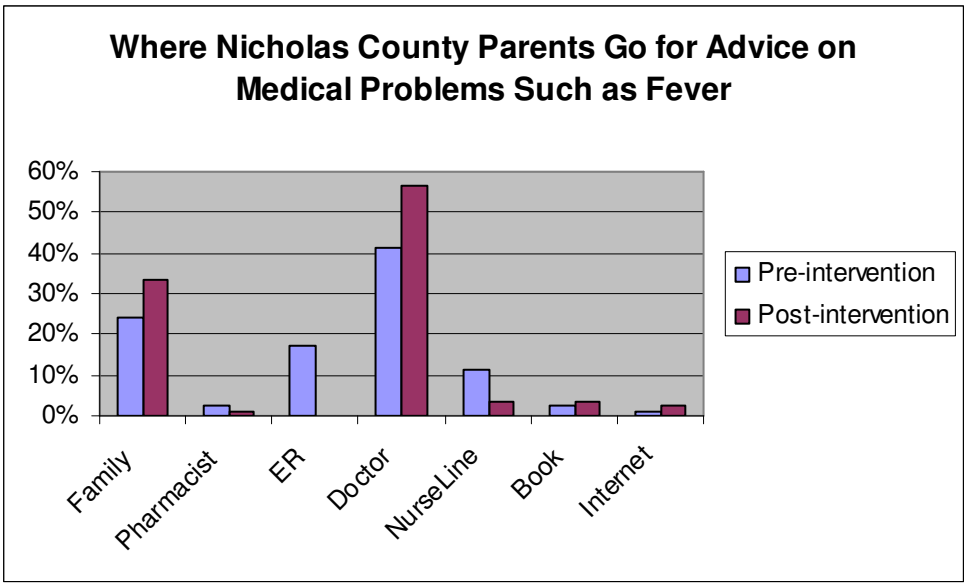


Figure 7

Where Parents Go for Advice on Rash

Hospital Emergency Departments. Both Fayette and Nicholas County participants reported less reliance on hospital emergency departments for medical problems such as rash, as opposed to fever, before the intervention (7% combined). But even that reliance was reduced post-intervention to only 1%. See Figures 8 and 9.

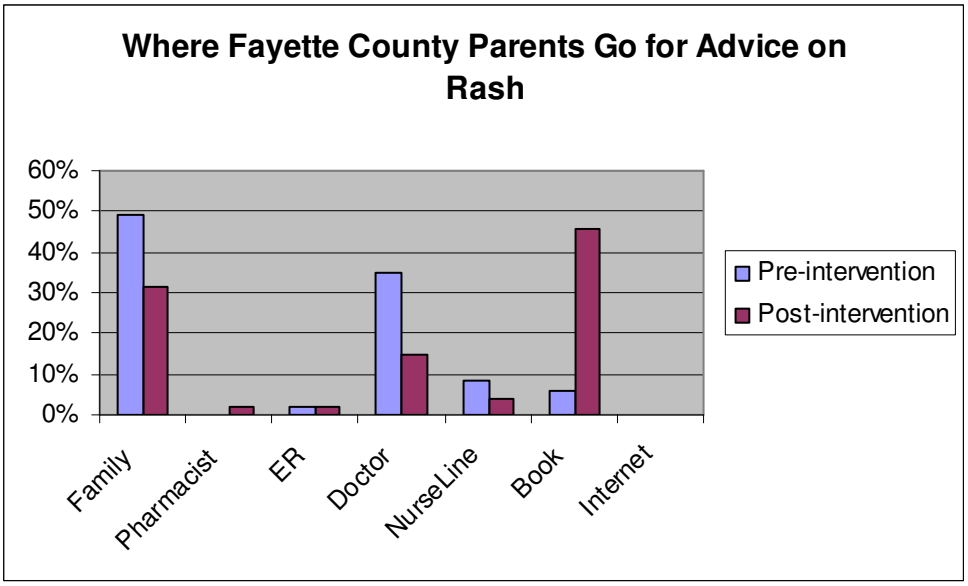
Doctors/Clinics. Participants in both counties relied heavily on doctors and medical clinics for information about rash problem before the intervention. After the intervention, Fayette County participants relied much less on doctors and clinics and more on a health book for information about rash. This was not the case in Nicholas County. After the intervention, participants reported they relied *more* on doctors and clinics for information about rash. See Figures 8 and 9.

Health Book. Nicholas County participants' use of a health book for information about rash increased very slightly from before and after the intervention (from 2% to 3%) while in Fayette County, the increased use of a health book for rash was dramatic (from 6% to 46%). See Figures 8 and 9.

Family Members. As they did with fever, participants reported a higher reliance on family as a source of medical information in Fayette County than in Nicholas County both pre- and post-intervention. See Figures 8 and 9.

Internet, Pharmacists and Nurse Line. Use of the Internet and pharmacists for information on rash was insignificant. Nurse Lines were reportedly used for

information by a few participants (11) pre-intervention but by fewer (3) post-intervention. See Figures 8 and 9.



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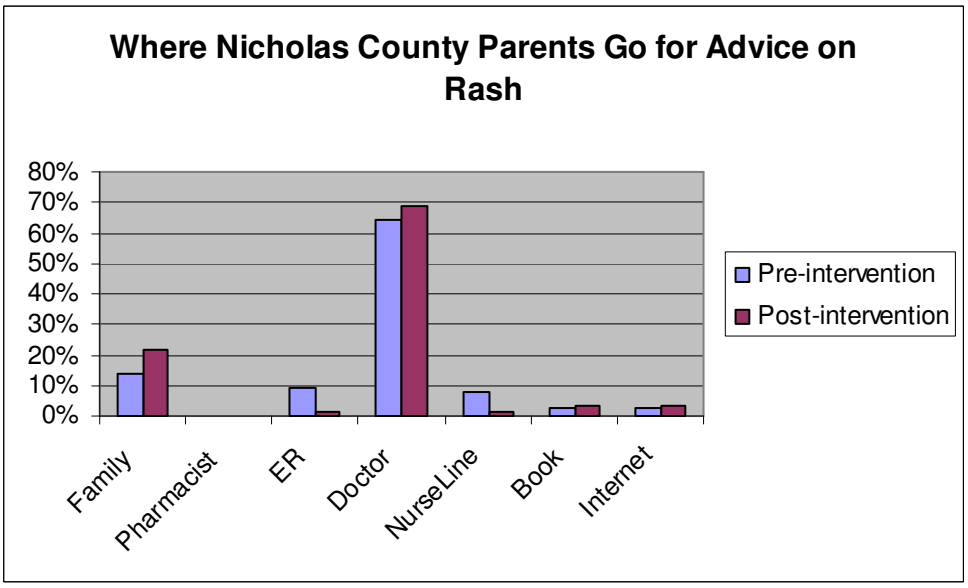


Figure 9

Where Parents Go for Information on Diarrhea and Vomiting

Emergency Departments. Participants' use of hospital emergency rooms as a main source for information about their children's diarrhea and vomiting was reported

as relatively low in both counties, although slightly higher in Nicholas County. After intervention, the use of emergency rooms for diarrhea and vomiting was the same or less. See Figures 10 and 11.

Doctors/Clinics. Reported reliance on doctors/clinics for information about diarrhea and vomiting decreased in Fayette County after the intervention from 51% to 23%. However in Nicholas County, such reliance increased from 57% to 63%. See Figures 10 and 11.

Health Book. The most substantial change after the intervention was the reported use of a health book in Fayette County as the main source for information about diarrhea and vomiting (from 2% pre-intervention to 35% after intervention.) In Nicholas County, the use of a health book as a main source of information was low both before and after the intervention. Only one individual reported a health book as the favored source before the intervention and two individuals reported a health book as the favored source after the intervention. See Figures 10 and 11.

Family Members. About one-third of participants in Fayette County reported relying on family members as their main source of information about diarrhea and vomiting before the intervention. About the same number reported this reliance after the intervention. In Nicholas County, however, reliance on family members for this information actually increased substantially, from 16% to 30%. See Figures 10 and 11.

Internet, Pharmacists and Nurse Line. Pre- and Post-intervention reliance on the Internet, pharmacists and nurse lines for medical information on conditions such as diarrhea and vomiting was low in both counties. See Figures 10 and 11.

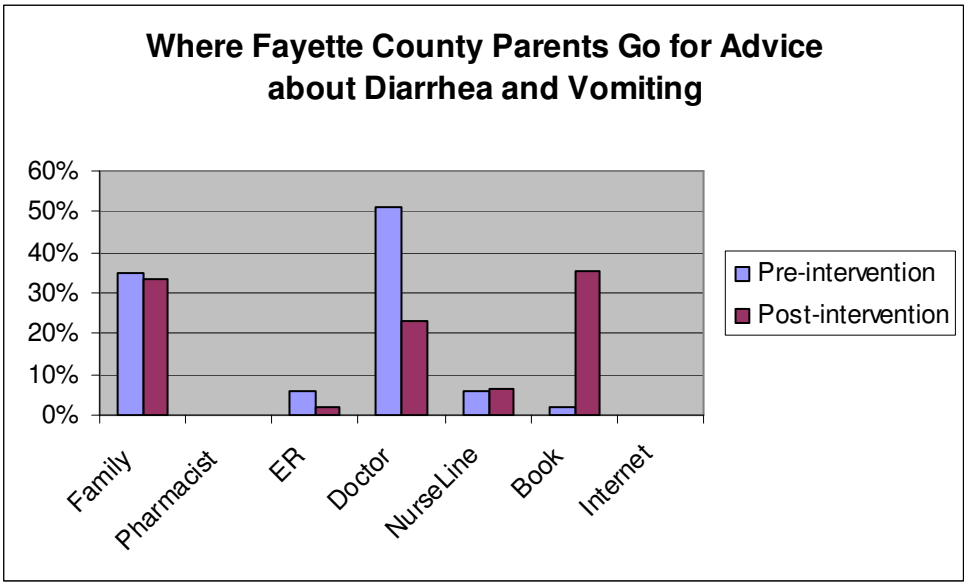


Figure 10

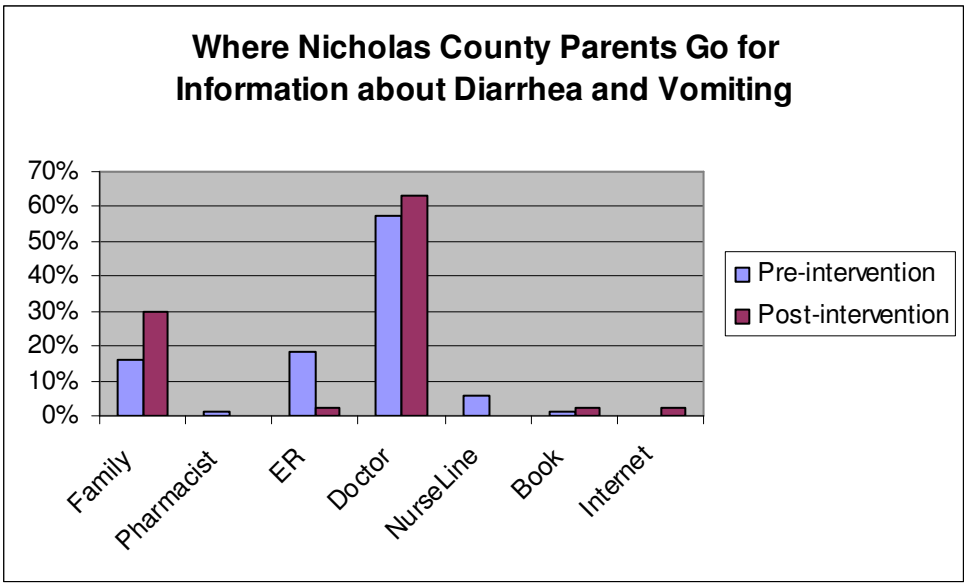


Figure 11

Confidence of Parents in Taking Care of Illness at Home

Project participants reported greater confidence in being able to take care of fever, rash, diarrhea and vomiting at home after the intervention:

Fever: Participants were asked to assess their confidence on taking care of their child's fever at home. Before the intervention, 64% of the participants in both counties ranked their confidence level at 8, 9, or 10 on a scale of 1 to 10. After the intervention the percentage increased to 85%.

Rash: Participants were asked to assess their confidence on taking care of their child's rash at home. Before the intervention, 34% of the participants in both counties ranked their confidence level at 8, 9, or 10 on a scale of 1 to 10. After the intervention the percentage increased to 69%.

Diarrhea and Vomiting: Participants were asked to assess their confidence on taking care of their child's diarrhea and vomiting at home. Before the intervention, 39% of the participants in both counties ranked their confidence level at 8, 9, or 10 on a scale of 1 to 10. After the intervention the percentage increased to 70%.

While the participants' confidence in being able to take care of the conditions mentioned increased in both counties studied, the increase in confidence rose more dramatically in Fayette County than in Nicholas County. See Table 2. In Fayette County, rated confidence level (combining the percentages at the 8,9 and 10 ranking) increased by 31 percentage points for fever, 49 percentage points for rash, and 36

percentage points for diarrhea/vomiting. In Nicholas County, rated confidence level (also combining the percentages at the 8, 9, and 10 ranking) increased by 22 percentage points (fever), 27 percentage points (rash), and 28 percentage points (diarrhea/vomiting).

Participant-Reported Increase in Confidence in Taking Care of Various Medical Problems at Home (in percentage points)

Problem	Nicholas County	Fayette County
Fever	22	31
Rash	27	49
Diarrhea/Vomiting	28	36

Table 2

Use of Health Care Services

Parents were asked several questions about their use of health care services, including the use of emergency department services, doctor or clinic services for sick care, doctor or clinic services for well care, and hospital stays.

Emergency Departments. In the aggregate, half of the participants reported taking children to a hospital emergency department in the six months prior to the intervention. Only 35% reported having done so on the post-intervention questionnaire. Most of the difference was attributable to a change in Nicholas County (from 36% to 13%) rather than in Fayette County (from 76% to 73%).

Doctors/Clinics for Sick Care. In the aggregate, visits to doctors or clinics for children's sick care reportedly declined by about 13%. However, the decline (26%) was seen only in Nicholas County. In Fayette County, visits to doctors and clinics for sick care *increased* by a similar percentage (27%)

Doctors/Clinics for Well Care. In the aggregate, visits to doctors or clinics for children's well care reportedly declined by about 49%. Again, the decline (74%!) was seen only in Nicholas County. In Fayette County, visits to doctors and clinics for well care *increased* by 1%.

Hospital Admissions. The number of reported admissions of participants' children to hospitals for one or more night stays decreased from 20 to 18 overall. Once again the overall decrease was attributable only to results obtained in Nicholas County where the decrease was from 17 to 5 admissions. In Fayette County, admissions reportedly *increased* from by 3 to 13.

Lost Time Due to Illness

Participants reported about 20% fewer missed school days and 37% fewer missed work days six months after the intervention began compared to six months immediately preceding the intervention. The number of missed work and school days stayed the same or declined in both counties.

DISCUSSION OF RESULTS

The results of this project in some respects mirrored the results of previous, similar studies. In other respects the results are inconsistent with prior results.

The results in Fayette County, for example, generally mirrored results obtained in the similar West Virginia study conducted in 2005 in that after the intervention, parents and caregivers relied less on family and health care professionals and more on a "health" book for medical information about problems such as fever, rash, diarrhea and vomiting. That result made intuitive sense: give the parents an easy-to-read, easy-to-use "how-to" book on health, encourage them to use it, and their reliance on it is likely to increase.

In contrast, however, Nicholas County participants' reported reliance on family members and doctors/clinics for medical advice did not decrease after the intervention but *increased*. Reliance on a "health book" increased slightly, the increase was not nearly as dramatic as in Fayette County. We do not know the reason for this disparity, especially in view of the fact that participants in Nicholas County ranked the usefulness of a health book higher after the intervention than before—just as in Fayette County.

Just as in previous studies, parents' and caregivers' confidence in being able to take care of certain medical conditions at home increased after the intervention. The fact that the confidence increase was so much higher in Fayette County may be related to the fact that reliance on the book was higher there.

We expected, as seen in previous studies, that hospital emergency department use would decrease post-intervention, and it did in both counties. However, we would have expected the decreased use of this expensive resource would have been greater in Fayette County where confidence in being able to take care of medical problems at home was reported to be higher and where there was reported a higher reliance on the book. Yet the marked difference between the two counties was in the other direction. Emergency department use decreased far more dramatically in Nicholas County. Perhaps the difference was due to chance (the number of participants being insufficient to average out chance). Perhaps some other factor was at work.

We were even more surprised, however, to find that in Fayette County, where reliance on the health book increased and where participants reported less reliance on doctors/and clinics that actual visits to doctors and clinics for sick care increased.

While we considered that the increased number of visits could have been attributable to seasonal changes (the post-intervention questionnaire was administered during or right after the cold and flu season), we would have expected that increase would have been seen in both counties. But the decrease in doctor/clinic visits for sick care in Nicholas County went *down* by an amount similar to the way they went *up* in Fayette County. It may also have been possible that the new, friendly contact with workers based at the health care clinic in Fayette County educated families about previous unknown service. We don't know. But despite the increased visits to doctors and clinics, the number of missed school and work days because of childhood illness reportedly declined in Fayette County.

Another unanticipated result duplicated the findings of the earlier 2005 study. In both studies, there was an increase in the reported number of children with long-term medical problems such as asthma or diabetes after the intervention. The increase was from 16% to 25% in the previous study and from 18% to 23% in this project.

In this day when health information abounds on the Internet, it was interesting to note that of all the participants, only two used the Internet as a primary source of medical information for fever, rash, diarrhea and vomiting. It would have been interesting to inquire to what extent Internet services, particularly broadband Internet services were available in the project area and to what extent participants had such service in their homes.

The project designers, managers, and workers all had the strong sense that positive results seen in this project would not have occurred without the strong existing relationship and personal support provided by most of the project workers. In efforts such as this, a personal, trusting relationship between the parent and a helping person committed to teaching the appropriate use of medical resources is likely critical to success. Mere delivery of the book, without more, would probably have not been helpful.

CONCLUSIONS AND RECOMMENDATIONS

As states continue to grapple with saving health care dollars in Medicaid and other programs, the experience of providing families with simple, easy-to-understand information about how to take care of minor needs at home and avoid expensive emergency room care or even clinic or doctor care deserves serious consideration.

The data and anecdotal evidence from this project suggest that parents are eager for information and receptive to the approach described in this project. It is important to note that most of the participants in this project, as parents and caregivers, received the book and training as part of an already existing relationship with home visitors and child care workers. They were advised, counseled, supported and even befriended over a period of six months about the use of the book.

Recommendations

- Continue to expand this project to document the impact of parent education and support using the book *What To Do If Your Child Gets Sick.* A greater number of project participants are desirable. Determine a minimum number without which the project will not take place.

- Allow for a control group whose members receive only the book and no monthly support as well as a control group who receive no intervention between the pre- and post- questionnaires.

- Test results from the self-reported data by analyzing actual claims data for families in the six months prior to intervention, and for six months after conclusion of the intervention.

- Improve project methods by these and other means:

    - Training of project workers should be carried out according to written procedures by one individual if possible in order to foster a uniform approach. Intervention should be scripted and documented.

    - Administration of project questionnaires needs to be more uniform with scripted instructions and carried out by means of interview if possible to avoid misunderstanding and mis-marking. If not carried out via interview, instructional emphasis should be put on the forced choice nature of the questionnaires.

- Questionnaire coding methods should be made uniform to protect confidentiality.

- Demographic information questions should be answered on both pre- and post-intervention questionnaires.

- Questions should be asked as to the ready availability of Internet service.

- Intervention efforts need to be more carefully scripted, made uniform, and documented.

- Consider broadening the types of health problems covered to include accidents and other illnesses beyond fever, rash, and diarrhea/vomiting

Appendix I

ID#_____

Taking Care of Your Sick Child Project

1. What type of insurance does your child or children have?

   - Medicaid
   - CHIP
   - PEIA
   - Private Insurance
   - No Insurance

2. If your child has Medicaid, what is the name of the health plan (HMO) to which your child or children belong?

   - Unicare
   - Carelink
   - The Health Plan
   - Medicaid only; no HMO

3. If your child is sick with a problem such as a fever and you do not know what to do, where would you go <u>most often</u> for information? (Check one box only).

   - Ask a family member
   - Ask a pharmacist
   - Go to the hospital emergency room
   - Go to a doctor or a clinic
   - Call the nurse advice line
   - Look in a health book
   - Go on the internet (the web)

4. If you call the nurse advice line, which line do you call?

   - CHIP

- o CAMC
- o Unicare
- o Carelink
- o Health Plan
- o Other

5. How confident are you that you could take care of your child's fever at home? (On a scale of 1 to 10 with 1 being not confident, and 10 being totally confident, circle the number that matches how confident your are.)

1	2	3	4	5	6	7	8	9	10
Not confident									Totally confident

6. If your child is sick with a problem such as a rash and you do not know what to do, where would you go most often for information? (check one box only).

- o Ask a family member
- o Ask a pharmacist
- o Go to the hospital emergency room
- o Go to a doctor or a clinic
- o Call the nurse advice line
- o Look in a health book
- o Go on the internet (the web)

7. How confident are you that you could take care of your child's rash at home? (On a scale of 1 to 10 with 1 being not confident, and 10 being totally confident, circle the number that matches how confident your are.)

1	2	3	4	5	6	7	8	9	10
Not confident									Totally confident

8. If your child is sick with a problem such as diarrhea and vomiting and you do not know what to do where would you go most often for information? (Check one box only.)

a. Ask a family member
b. Ask a pharmacist
c. Go to the hospital emergency room
d. Go to a doctor or a clinic

e. Call the nurse advice line
f. Look in a health book
g. Go on the internet (the web)

9. How confident are you that you could take care of your child's diarrhea and vomiting at home? (On a scale of 1 to 10 with 1 being not confident, and 10 being totally confident, circle the number that matches how confident your are.)

1	2	3	4	5	6	7	8	9	10
Not confident									Totally confident

10. How many children under six years of age are in your household?

0 1 2 3 4 more than 4

11. How would you rate the care that your child or children receive from your doctor?

a. Excellent
b. Very good
c. Good
d. Fair
e. Poor

12. Did you call the Nurse Advice Line with a concern or question about your child during the last six (6) months?

- Yes
- No
- I don't have a nurse advice line

13. Did you take your child or children to an emergency room during the last six (6) months?

- Yes
- No

14. How useful would you find a book that telld you the steps to take in dealing with a child who is sick (such as fever, rash or vomiting and diarrhea)? On a scale of 1 to 5 with 1 being very useful and 5 being not at all useful, circle the number that matches how useful a book would be to you.

1	2	3	4	5
Very useful	somewhat useful	useful	not very useful	not at all useful

15. Does your child or children have a regular doctor or clinic?

- o Yes
- o No

16. Does your child or children have a long-term medical problem (such as asthma or diabetes)?

- o Yes
- o No

17. In the last (6) six months, how many days has your child been in the hospital for one night or more? (Circle the number of days.)

0 1 2 3 4 5 6 or more

18. In the last six (6) six months how many times have you taken your child or children to the doctor for <u>sick care?</u> (Circle the number of times)

0 1 2 3 4 5 6 or more

19. In the last (6) six months how many times have you taken your child or children to the doctor for <u>well child care or check-up ?</u> (Circle the number of times)

0 1 2 3 4 5 6 or more

20. In the last six months, how many days of school (including Head Start or Pre-School) has your child or children missed because they were sick? Circle the number of days.

0 1 2 3 4 5 6 or more

21. If you work outside the home, how many days of work have you missed in the last six months because your child was sick? (Circle the number of days;

0 1 2 3 4 5 6 or more

The following questions are about you and your household.

22.How do you describe yourself – marital status

- Married
- Separated
- Divorced
- Widowed
- Single (never married)

23. How do you describe yourself - race

- Anglo (White)
- Latino
- African-American
- Asian
- Other

24.How many years of formal schooling have you completed?

- 0-8 years
- 9-12 years
- Graduated from high school
- Some college (but did not graduate)
- Graduated from college

25. Are you the parent, guardian or usual care giver for the child or children in the home?

- o Yes
- o No

26. What is your age? (circle the correct one)

18-22 23-28 29-33 34-38 39- 44 45-60 61 or older

27. What is your sex?

- o Male
- o Female

28. What is your household income?

- o Less than $10,000 per year
- o $10,000 to $20,000 per year
- o $20,000 to $30,000 per year
- o More than $30,000 per year

29. What kind of health insurance do you have?

- o Medicaid
- o Medicare (for people over age 65)
- o Private Insurance through my employer
- o Private Insurance that I purchase
- o I don't have health insurance

RETURN TO:

Revised on 1/9/05

Appendix II

New River MIHOW Program
"When Your Child is Sick"

1) Have any of your children been sick since the last visit or Parent/Child Group

2) If yes, did you use the book? Yes _____ No _____

3) Was the book helpful? Yes _____ No _____

4) How was the book helpful? _____
_____

5) What pages or section did you use? _____

6) If you did not use the book, why not? _____

7) If you did not use the book, could we look together to see if it has information that may have been helpful? _____
_____

8) If no one in your house was sick, did you use the book for any other reason?

_____
_____

Please share any comments: _____
_____
_____

Appendix III

The project staff affiliated with the New River MIHOW program, on their own initiative, created and filled out forms during home visits documenting the visit. A sample form is attached to this report as Appendix II. Because most of these forms were not coded or dated, they are not statistically useful. However, some of the participant comments on the form may be useful anecdotally:

"I use the book when there is someone sick. It was me [that was] sick."
"[The book was] very helpful. Recommend all families have one."
"reassured me that I needed to take my son to the ER"
"I keep the book handy. I am familiar with the contents."
"I lost the book. Ronda had one and we looked up fevers and poison centers."
"The book is easy to read and I hope to use it more in the future."
"My 7 month old had a fever and I used the book. I was glad I had this book this month."
"I have a newborn and 3 year old and it has been very helpful. I really like using this book. Very good information!"
"I use the book all the time. I love having this book."
"It answered all of my questions, like what to do and so on. [It] helps me more every day, just gives me more knowledge of what to do and then I don't panic because I've already know what to do because I have already read the whole book!"
"Helped me understand. I'm glad to have the book."
"[I did not need the book] but I know where it is when I do need it!"
"I just like to read it and look things up."
"Looked up about ringworm."
"I forgot I had it. I will put it where I can find it."
"I know where it is when I need it."
"When calling doctor know what to ask about a sore throat. Baby don't have a fever but don't want to eat like it was eating so she read on sore throat than call doctor. Didn't have to go to doctor's office."
"My six month old fell over and hit her head. I was very relieved to know what to look for and when to go see a doctor."
"Easy and clear instructions. I really like this book!"
"My baby had three earaches—one right after another, The book has helped me understand what to watch for. Her doctor says that if another earache comes again soon that she may need tubes placed in her ears."
"It's easy to understand and read."
"It's a nice book."
"I like the book and enjoy looking at it. I just have not needed it."
"Showed what I could do at home."
"Was reassuring to know the right time to go and see a doctor. This nook gives me the confidence to take care of my boys. It gives me clear instructions on things I can do at home and the knowledge to know when we need to see a doctor."
"The book was very clear about when I should call a doctor."
"I had a friend's baby that was sick and told her about some of the things [from the book] I had used."
"I looked up about my baby's rash. It was helpful."

"I looked up what it had to say about breathing and coughing. It's informative and helpful."
"I called Kathie instead [of using the book.] I would rather call my home visitor."
"If I don't ask my Mom what to do I look it up in the book."
"I like the book but I don't know where it is. I keep losing it!"
"My baby had a cold and the book was helpful."
"Book is 'somewhere' in the house. Don't know where."
"Even though [my baby] has an older brother and sister and I should know this stuff, I'm still learning/ Also, seeing information in book makes me feel kind of more at ease—like relaxed more just seeing it written down—like then I know I'm doing the right thing."
"The book kept me from taking her to the ER. I thought I might have to, but I waited because of no swelling. I like having this book."
"It helps because it tells you just what to do which I like because I hate having to wait at the doctor's office."
"Sometimes I look things up, just to learn or see what it has to say about it."
"Love the book, even if nothing happens. I read it so I will know if something happens suddenly I would know all the information. I love my book. I use it like a child care bible."
"Book has been very helpful. Simple to use."
"This book is wonderful. We keep it close to the phone book where it is handy and easy to locate.

Appendix IV

What To Do When Your Child Gets Sick Data Summary

Fayette County

		Fayette Pre (N)	Fayette Pre (%)	Fayette Post (N)	Fayette Post (%)
Qualified Respondents		49	100%	49	
QUESTION					
Kid's Insurance	Medicaid	25	51%	24	49%
	CHIP	5	10%	9	18%
	PEIA	2	4%	2	4%
	Private	16	33%	13	27%
	None	1	2%	1	2%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Health Plan	Unicare	14	48%	16	48%
	Carelink	5	17%	8	24%
	THP	4	14%	6	18%
	Medicaid	6	21%	3	9%
	Answer	29	59%	33	67%
	No Answer	20	41%	16	33%
For Fever	Family	22	45%	20	42%
	Pharmacist	0	0%	0	0%
	ER	3	6%	0	0%
	Doctor	16	33%	8	17%
	NurseLine	6	12%	4	8%
	Book	1	2%	16	33%
	Internet	1	2%	0	0%
	Answer	49	100%	48	98%
	No Answer	0	0%	1	2%
Which Nurse Line	CHIP	3	10%	0	0%
	CAC	1	3%	2	9%
	Unicare	6	20%	4	17%
	Carelink	2	7%	1	4%
	THP	18	60%	14	61%
	Other	0	0%	2	9%
	Answer	30	61%	23	47%
	No Answer	19	39%	26	53%

Fever Confidence	1	1	2%	1	2%
	2	0	0%	0	0%
	3	2	4%	0	0%
	4	1	2%	0	0%
	5	7	14%	1	2%
	6	4	8%	0	0%
	7	6	12%	2	4%
	8	11	22%	12	25%
	9	7	14%	15	31%
	10	10	20%	17	35%
	Answer	49	100%	48	98%
	No Answer	0	0%	1	2%
For Rash	Family	24	49%	15	31%
	Pharmacist	0	0%	1	2%
	ER	1	2%	1	2%
	Doctor	17	35%	7	15%
	NurseLine	4	8%	2	4%
	Book	3	6%	22	46%
	Internet	0	0%	0	0%
	Answer	49	100%	48	98%
	No Answer	0	0%	1	2%
Rash Confidence	1	2	4%	1	2%
	2	0	0%	0	0%
	3	3	6%	1	2%
	4	5	10%	0	0%
	5	9	18%	3	6%
	6	8	16%	2	4%
	7	7	14%	3	6%
	8	5	10%	13	27%
	9	3	6%	13	27%
	10	7	14%	12	25%
	Answer	49	100%	48	98%
	No Answer	0	0%	1	2%
For Diarrhea/Vom	Family	17	35%	16	33%
	Pharmacist	0	0%	0	0%
	ER	3	6%	1	2%
	Doctor	25	51%	11	23%
	NurseLine	3	6%	3	6%
	Book	1	2%	17	35%
	Internet	0	0%	0	0%
	Answer	49	100%	48	98%
	No Answer	0	0%	1	2%
Diarrhea/Vom Conf	1	1	2%	1	2%
	2	0	0%	0	0%
	3	4	8%	0	0%
	4	8	16%	0	0%
	5	6	12%	3	6%

	6	7	14%	3	6%
	7	4	8%	6	12%
	8	7	14%	9	18%
	9	4	8%	14	29%
	10	8	16%	13	27%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
No. Children <6	0	3	6%	0	0%
	1	30	61%	31	63%
	2	12	24%	15	31%
	3	4	8%	2	4%
	4	0	0%	1	2%
	>4	0	0%	0	0%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Doctor Rating	Excellent	21	45%	17	35%
	Very Good	15	32%	20	41%
	Good	11	23%	10	20%
	Fair	0	0%	2	4%
	Poor	0	0%	0	0%
	Answer	47	96%	49	100%
	No Answer	2	4%	0	0%
Call Nurse Line?	Yes	12	24%	36	77%
	No	21	43%	6	13%
	Don't have	16	33%	5	11%
	Answer	49	100%	47	96%
	No Answer	0	0%	2	4%
Go to ER?	Yes	37	76%	36	73%
	No	12	24%	13	27%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Book Useful?	Very Useful	35	71%	41	84%
	Somewhat Useful	10	20%	6	12%
	Useful	4	8%	2	4%
	Not Very Useful	0	0%	0	0%
	Not at All Useful	0	0%	0	0%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Have regular doctor?	Yes	47	96%	45	92%
	No	2	4%	4	8%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Long Term Med.	Yes	4	8%	10	20%

Prob?					
	No	45	92%	39	80%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Days in Hospital	0	47	96%	43	88%
	1	1	2%	4	8%
	2	1	2%	0	0%
	3	0	0%	0	0%
	4	0	0%	1	2%
	5	0	0%	1	2%
	6+	0	0%	0	0%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Go to doctor for sick	0	23	48%	17	35%
	1	10	21%	15	31%
	2	9	19%	8	16%
	3	2	4%	5	10%
	4	2	4%	2	4%
	5	2	4%	0	0%
	6+	0	0%	2	4%
	Answer	48	98%	49	100%
	No Answer	1	2%	0	0%
Go to doctor for well	0	9	18%	5	10%
	1	18	37%	25	51%
	2	11	22%	11	22%
	3	6	12%	0	0%
	4	1	2%	5	10%
	5	3	6%	1	2%
	6+	1	2%	2	4%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Days School Missed	0	30	70%	28	61%
	1	1	2%	10	22%
	2	6	14%	4	9%
	3	1	2%	2	4%
	4	0	0%	2	4%
	5	0	0%	0	0%
	6+	5	12%	0	0%
	Answer	43	88%	46	94%
	No Answer	6	12%	3	6%
Days Work Missed	0	32	74%	30	73%
	1	5	12%	4	10%
	2	4	9%	5	12%
	3	1	2%	1	2%
	4	0	0%	0	0%
	5	0	0%	1	2%

	6+	1	2%	0	0%
	Answer	43	88%	41	84%
	No Answer	6	12%	8	16%
Marital Status	Married	30	61%	32	65%
	Separated	0	0%	0	0%
	Divorced	1	2%	1	2%
	Widowed	0	0%	0	0%
	Single	18	37%	16	33%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Race	White	45	92%	45	92%
	Latino	0	0%	0	0%
	Black	4	8%	4	8%
	Asian	0	0%	0	0%
	Other	0	0%	0	0%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Years Schooling	0-8	2	4%	1	2%
	9 to 12	6	12%	10	20%
	HS Grad	24	49%	21	43%
	Some Col.	9	18%	9	18%
	Col. Grad	8	16%	8	16%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Are you care giver?	Yes	49	100%	49	100%
	No	0	0%	0	0%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Age	18-22	11	22%	14	29%
	23-28	19	39%	18	37%
	29-33	14	29%	15	31%
	34-38	2	4%	1	2%
	39-44	1	2%	1	2%
	45-60	2	4%	0	0%
	61+	0	0%	0	0%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Gender	Male	1	2%	0	0%
	Female	48	98%	49	100%
	Answer	49	100%	49	100%
	No Answer	0	0%	0	0%
Income	<$10,000	15	31%	17	35%
	$10K-20K	13	27%	15	31%
	$20K-30K	11	23%	8	16%

	>$30K	9	19%	9	18%
	Answer	48	98%	49	100%
	No Answer	1	2%	0	0%
YOUR Insurance	Medicaid	15	31%	15	31%
	Medicare	0	0%	0	0%
	Private (emp)	14	29%	16	33%
	Priv. (I buy)	7	15%	7	15%
	None	12	25%	10	21%
	Answer	48	98%	48	98%
	No Answer	1	2%	1	2%

Appendix V

What To Do When Your Child Gets Sick Data Summary

Nicholas County

		Nicholas Pre (N)	Nicholas Pre (%)	Nicholas Post (N)	Nicholas Post (%)
Number of Qualified Respondents		87		87	
QUESTION					
Kid's Insurance	Medicaid	57	66%	53	62%
	CHIP	6	7%	13	15%
	PEIA	4	5%	7	8%
	Private	16	18%	12	14%
	None	4	5%	1	1%
	Answer	87	100%	86	99%
	No Answer	0	0%	1	1%
Health Plan	Unicare	46	74%	0	0%
	Carelink	2	3%	0	0%
	THP	2	3%	0	0%
	Medicaid	12	19%	0	0%
	Answer	62	71%	0	0%
	No Answer	25	29%	87	100%
For Fever	Family	21	24%	29	33%
	Pharmacist	2	2%	1	1%
	ER	15	17%	0	0%
	Doctor	36	41%	49	56%
	NurseLine	10	11%	3	3%
	Book	2	2%	3	3%
	Internet	1	1%	2	2%
	Answer	87	100%	87	100%
	No Answer	0	0%	0	0%
Which Nurse Line	CHIP	5	9%	0	0%
	CAC	2	4%	0	0%
	Unicare	20	36%	4	36%
	Carelink	1	2%	1	9%
	THP	1	2%	4	36%
	Other	26	47%	2	18%
	Answer	55	63%	11	13%
	No Answer	32	37%	76	87%

Fever Confidence	1	1	1%	0	0%
	2	2	2%	0	0%
	3	1	1%	0	0%
	4	1	1%	0	0%
	5	6	7%	1	1%
	6	7	8%	4	5%
	7	9	10%	12	14%
	8	18	21%	24	28%
	9	17	20%	28	32%
	10	24	28%	18	21%
	Answer	86	99%	87	100%
	No Answer	1	1%	0	0%
For Rash	Family	12	14%	19	22%
	Pharmacist	0	0%	0	0%
	ER	8	9%	1	1%
	Doctor	56	64%	60	69%
	NurseLine	7	8%	1	1%
	Book	2	2%	3	3%
	Internet	2	2%	3	3%
	Answer	87	100%	87	100%
	No Answer	0	0%	0	0%
Rash Confidence	1	6	7%	1	1%
	2	0	0%	0	0%
	3	8	9%	0	0%
	4	7	8%	4	5%
	5	16	18%	3	3%
	6	8	9%	8	9%
	7	11	13%	16	18%
	8	18	21%	19	22%
	9	6	7%	22	25%
	10	7	8%	14	16%
	Answer	87	100%	87	100%
	No Answer	0	0%	0	0%
For Diarrhea/Vom	Family	14	16%	25	30%
	Pharmacist	1	1%	0	0%
	ER	16	18%	2	2%
	Doctor	50	57%	53	63%
	NurseLine	5	6%	0	0%
	Book	1	1%	2	2%
	Internet	0	0%	2	2%
	Answer	87	100%	84	97%
	No Answer	0	0%	3	3%
Diarrhea/Vom Conf	1	4	5%	0	0%
	2	0	0%	0	0%
	3	3	3%	2	2%
	4	8	9%	0	0%

	5	15	17%	7	8%		
	6	10	12%	4	5%		
	7	12	14%	15	17%		
	8	17	20%	17	20%		
	9	10	12%	27	31%		
	10	7	8%	15	17%		
	Answer	86	99%	87	100%		
	No Answer	1	1%	0	0%		
No. Children <6	0	13	15%	12	14%		
	1	41	47%	57	66%		
	2	28	32%	15	17%		
	3	4	5%	2	2%		
	4	0	0%	1	1%		
	>4	1	1%	0	0%		
	Answer	87	100%	87	100%		
	No Answer	0	0%	0	0%		
Doctor Rating	Excellent	54	63%	74	85%		
	Very Good	24	28%	12	14%		
	Good	7	8%	1	1%		
	Fair	1	1%	0	0%		
	Poor	0	0%	0	0%		
	Answer	86	99%	87	100%		
	No Answer	1	1%	0	0%		
Call Nurse Line?	Yes	12	14%	5	6%		
	No	58	67%	79	91%		
	Don't have	17	20%	3	3%		
	Answer	87	100%	87	100%		
	No Answer	0	0%	0	0%		
Go to ER?	Yes	31	36%	11	13%		
	No	56	64%	76	87%		
	Answer	87	100%	87	100%		
	No Answer	0	0%	0	0%		
Book Useful?	Very Useful	57	66%	68	81%		
	Somewhat Useful			15	17%	9	11%
	Useful	12	14%	6	7%		
	Not Very Useful			1	1%	1	1%
	Not at All Useful			2	2%	0	0%
	Answer	87	100%	84	97%		
	No Answer	0	0%	3	3%		
Have regular doctor?	Yes	84	97%	85	98%		
	No	3	3%	2	2%		
	Answer	87	100%	87	100%		
	No Answer	0	0%	0	0%		

Long Term Med. Prob?	Yes	20	23%	21	24%
	No	67	77%	66	76%
	Answer	87	100%	87	100%
	No Answer	0	0%	0	0%
Days in Hospital	0	80	92%	84	97%
	1	3	3%	1	1%
	2	2	2%	2	2%
	3	0	0%	0	0%
	4	1	1%	0	0%
	5	0	0%	0	0%
	6+	1	1%	0	0%
	Answer	87	100%	87	100%
	No Answer	0	0%	0	0%
Go to doctor for sick	0	17	20%	27	31%
	1	29	34%	33	38%
	2	14	16%	16	18%
	3	9	11%	1	1%
	4	8	9%	4	5%
	5	2	2%	0	0%
	6+	6	7%	6	7%
	Answer	85	98%	87	100%
	No Answer	2	2%	0	0%
Go to doctor for well	0	14	16%	55	63%
	1	29	34%	21	24%
	2	22	26%	9	10%
	3	6	7%	2	2%
	4	4	5%	0	0%
	5	2	2%	0	0%
	6+	9	10%	0	0%
	Answer	86	99%	87	100%
	No Answer	1	1%	0	0%
Days School Missed	0	43	51%	44	54%
	1	9	11%	18	22%
	2	14	16%	8	10%
	3	9	11%	1	1%
	4	4	5%	2	2%
	5	3	4%	3	4%
	6+	3	4%	6	7%
	Answer	85	98%	82	94%
	No Answer	2	2%	5	6%
Days Work Missed	0	58	72%	70	85%
	1	10	12%	7	9%
	2	6	7%	2	2%
	3	3	4%	1	1%
	4	1	1%	1	1%

	5	2	2%	0	0%
	6+	1	1%	1	1%
	Answer	81	93%	82	100%
	No Answer	6	7%	5	6%
Marital Status	Married	46	53%		
	Separated	4	5%		
	Divorced	11	13%		
	Widowed	1	1%		
	Single	25	29%		
	Answer	87	100%		
	No Answer	0	0%		
Race	White	84	97%		
	Latino	0	0%		
	Black	1	1%		
	Asian	0	0%		
	Other	2	2%		
	Answer	87	100%		
	No Answer	0	0%		
Years Schooling	0-8	2	2%		
	9 to 12	24	28%		
	HS Grad	26	30%		
	Some Col.	20	23%		
	Col. Grad	15	17%		
	Answer	87	100%		
	No Answer	0	0%		
Are you care giver?	Yes	83	97%		
	No	3	3%		
	Answer	86	99%		
	No Answer	1	1%		
Age	18-22	13	15%		
	23-28	31	36%		
	29-33	22	25%		
	34-38	10	11%		
	39-44	6	7%		
	45-60	4	5%		
	61+	1	1%		
	Answer	87	100%		
	No Answer	0	0%		
Gender	Male	79	91%		
	Female	8	9%		
	Answer	87	100%		
	No Answer	0	0%		
Income	<$10,000	30	36%		
	$10K-20K	16	19%		

	$20K-30K	20	24%
	>$30K	17	20%
	Answer	83	95%
	No Answer	4	5%
YOUR Insurance	Medicaid	41	48%
	Medicare	0	0%
	Priv. (emp)	23	27%
	Priv. (partic.)	1	1%
	None	21	24%
	Answer	86	99%
	No Answer	1	1%

Appendix VI

Taking Care of Your Sick Child Project Data Summary

Fayette and Nicholas Counites Combined

		Combined Pre (N)	Combined Pre (%)	Combined Post (N)	Combined Post (%)
Qualified Respondents		136		136	
QUESTION					
Kid's Insurance	Medicaid	82	60%	77	57%
	CHIP	11	8%	22	16%
	PEIA	6	4%	9	7%
	Private	32	24%	25	19%
	None	5	4%	2	1%
	Answer	136	100%	135	99%
	No Answer	0	0%	1	1%
Health Plan	Unicare	60	66%	16	48%
	Carelink	7	8%	8	24%
	THP	6	7%	6	18%
	Medicaid	18	20%	3	9%
	Answer	91	67%	33	24%
	No Answer	45	33%	103	76%
For Fever	Family	43	32%	49	36%
	Pharmacist	2	1%	1	1%
	ER	18	13%	0	0%
	Doctor	52	38%	57	42%
	NurseLine	16	12%	7	5%
	Book	3	2%	19	14%
	Internet	2	1%	2	1%
	Answer	136	100%	135	99%
	No Answer	0	0%	1	1%
Which Nurse Line	CHIP	8	9%	0	0%
	CAC	3	4%	2	6%
	Unicare	26	31%	8	24%
	Carelink	3	4%	2	6%
	THP	19	22%	18	53%
	Other	26	31%	4	12%
	Answer	85	63%	34	25%

	No Answer	51	38%	102	75%
Fever Confidence	1	2	1%	1	1%
	2	2	1%	0	0%
	3	3	2%	0	0%
	4	2	1%	0	0%
	5	13	10%	2	1%
	6	11	8%	4	3%
	7	15	11%	14	10%
	8	29	21%	36	27%
	9	24	18%	43	32%
	10	34	25%	35	26%
	Answer	135	99%	135	99%
	No Answer	1	1%	1	1%
For Rash	Family	36	26%	34	25%
	Pharmacist	0	0%	1	1%
	ER	9	7%	2	1%
	Doctor	73	54%	67	50%
	NurseLine	11	8%	3	2%
	Book	5	4%	25	19%
	Internet	2	1%	3	2%
	Answer	136	100%	135	99%
	No Answer	0	0%	1	1%
Rash Confidence	1	8	6%	2	1%
	2	0	0%	0	0%
	3	11	8%	1	1%
	4	12	9%	4	3%
	5	25	18%	6	4%
	6	16	12%	10	7%
	7	18	13%	19	14%
	8	23	17%	32	24%
	9	9	7%	35	26%
	10	14	10%	26	19%
	Answer	136	100%	135	99%
	No Answer	0	0%	1	1%
For Diarrhea/Vom	Family	31	23%	41	31%
	Pharmacist	1	1%	0	0%
	ER	19	14%	3	2%
	Doctor	75	55%	64	48%
	NurseLine	8	6%	3	2%
	Book	2	1%	19	14%
	Internet	0	0%	2	2%
	Answer	136	100%	132	97%
	No Answer	0	0%	4	3%
Diarrhea/Vom Conf	1	5	4%	1	1%
	2	0	0%	0	0%
	3	7	5%	2	1%

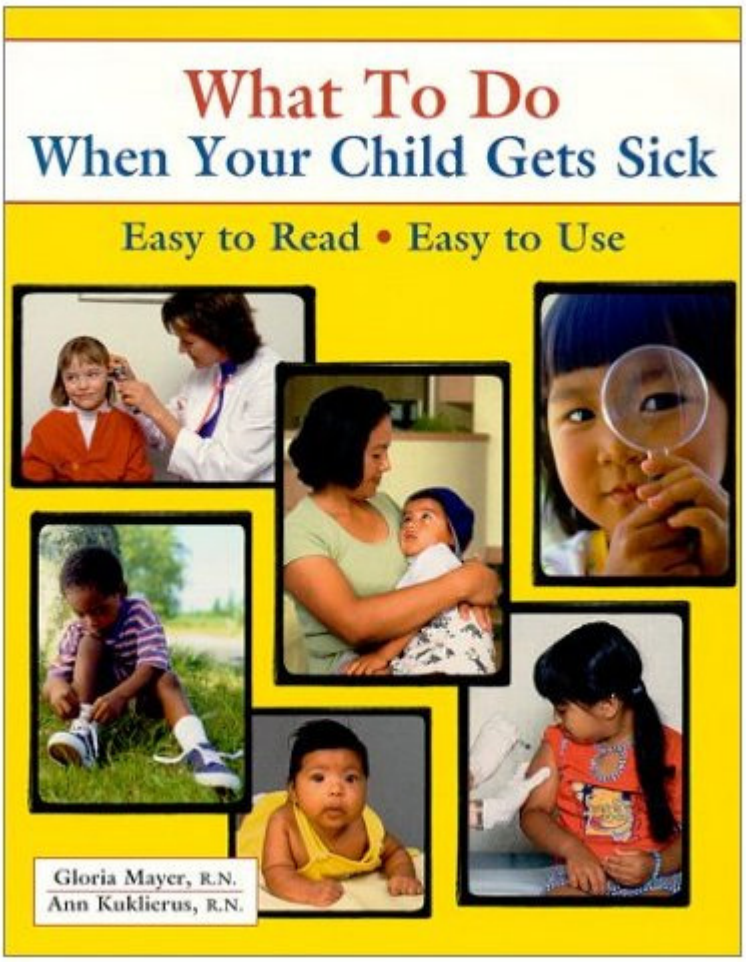
	4	16	12%	0	0%
	5	21	16%	10	7%
	6	17	13%	7	5%
	7	16	12%	21	15%
	8	24	18%	26	19%
	9	14	10%	41	30%
	10	15	11%	28	21%
	Answer	135	99%	136	100%
	No Answer	1	1%	0	0%
No. Children <6	0	16	12%	12	9%
	1	71	52%	88	65%
	2	40	29%	30	22%
	3	8	6%	4	3%
	4	0	0%	2	1%
	>4	1	1%	0	0%
	Answer	136	100%	136	100%
	No Answer	0	0%	0	0%
Doctor Rating	Excellent	75	56%	91	67%
	Very Good	39	29%	32	24%
	Good	18	14%	11	8%
	Fair	1	1%	2	1%
	Poor	0	0%	0	0%
	Answer	133	98%	136	100%
	No Answer	3	2%	0	0%
Call Nurse Line?	Yes	24	18%	41	31%
	No	79	58%	85	63%
	Don't have	33	24%	8	6%
	Answer	136	100%	134	99%
	No Answer	0	0%	2	1%
Go to ER?	Yes	68	50%	47	35%
	No	68	50%	89	65%
	Answer	136	100%	136	100%
	No Answer	0	0%	0	0%
Book Useful?	Very Useful	92	68%	109	82%
	Somewhat Useful	25	18%	15	11%
	Useful	16	12%	8	6%
	Not Very Useful	1	1%	1	1%
	Not at All Useful	2	1%	0	0%
	Answer	136	100%	133	98%
	No Answer	0	0%	3	2%
Have regular doctor?	Yes	131	96%	130	96%
	No	5	4%	6	4%
	Answer	136	100%	136	100%

	No Answer	0	0%	0	0%
Long Term Med. Prob?	Yes	24	18%	31	23%
	No	112	82%	105	77%
	Answer	136	100%	136	100%
	No Answer	0	0%	0	0%
		0		0	
Days in Hospital	0	127	93%	127	93%
	1	4	3%	5	4%
	2	3	2%	2	1%
	3	0	0%	0	0%
	4	1	1%	1	1%
	5	0	0%	1	1%
	6+	1	1%	0	0%
	Answer	136	100%	136	100%
	No Answer	0	0%	0	0%
Go to doctor for sick	0	40	30%	44	32%
	1	39	29%	48	35%
	2	23	17%	24	18%
	3	11	8%	6	4%
	4	10	8%	6	4%
	5	4	3%	0	0%
	6+	6	5%	8	6%
	Answer	133	98%	136	100%
	No Answer	3	2%	0	0%
Go to doctor for well	0	23	17%	60	44%
	1	47	35%	46	34%
	2	33	24%	20	15%
	3	12	9%	2	1%
	4	5	4%	5	4%
	5	5	4%	1	1%
	6+	10	7%	2	1%
	Answer	135	99%	136	100%
	No Answer	1	1%	0	0%
Days School Missed	0	73	57%	72	56%
	1	10	8%	28	22%
	2	20	16%	12	9%
	3	10	8%	3	2%
	4	4	3%	4	3%
	5	3	2%	3	2%
	6+	8	6%	6	5%
	Answer	128	94%	128	94%
	No Answer	8	6%	8	6%
Days Work Missed	0	90	73%	100	81%
	1	15	12%	11	9%
	2	10	8%	7	6%
	3	4	3%	2	2%

	4	1	1%	1	1%
	5	2	2%	1	1%
	6+	2	2%	1	1%
	Answer	124	91%	123	90%
	No Answer	12	9%	13	10%
Marital Status	Married	76	56%	32	65%
	Separated	4	3%	0	0%
	Divorced	12	9%	1	2%
	Widowed	1	1%	0	0%
	Single	43	32%	16	33%
	Answer	136	100%	49	36%
	No Answer	0	0%	0	0%
Race	White	129	95%	46	94%
	Latino	0	0%	0	0%
	Black	5	4%	3	6%
	Asian	0	0%	0	0%
	Other	2	1%	0	0%
	Answer	136	100%	49	36%
	No Answer	0	0%	0	0%
Years Schooling	0-8	4	3%	1	2%
	9 to 12	30	22%	10	20%
	HS Grad	50	37%	21	43%
	Some Col.	29	21%	9	18%
	Col. Grad	23	17%	8	16%
	Answer	136	100%	49	36%
	No Answer	0	0%	0	0%
Are you care giver?	Yes	132	98%	49	100%
	No	3	2%	0	0%
	Answer	135	99%	49	36%
	No Answer	1	1%	0	0%
Age	18-22	24	18%	14	29%
	23-28	50	37%	18	37%
	29-33	36	26%	15	31%
	34-38	12	9%	1	2%
	39-44	7	5%	1	2%
	45-60	6	4%	0	0%
	61+	1	1%	0	0%
	Answer	136	100%	49	36%
	No Answer	0	0%	0	0%
Gender	Male	80	59%	0	0%
	Female	56	41%	49	100%
	Answer	136	100%	49	36%
	No Answer	0	0%	0	0%
Income	<$10,000	45	34%	17	35%

	$10K-20K	29	22%	15	31%
	$20K-30K	31	24%	8	16%
	>$30K	26	20%	9	18%
	Answer	131	96%	49	36%
	No Answer	5	4%	0	0%
YOUR Insurance	Medicaid	56	42%	15	31%
	Medicare	0	0%	0	0%
	Priv. (Employer)	37	28%	16	33%
	Priv. (Particiant)	8	6%	7	15%
	None	33	25%	10	21%
	Answer	134	99%	48	35%
	No Answer	2	1%	1	1%

Appendix VII



What To Do When Your Child Gets Sick

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