# Children with Disabilities: State-Level Data From the American Community Survey 

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## Overview

Children with physical or mental disabilities are a very diverse group, and many face challenges. This research brief presents data for the U.S. and all states on the number and percentage of children (ages birth through 17) who were identified as having at least one disability by the responsible adult in the household responding to the American Community Survey.

Children with physical or mental disabilities are a very diverse group, and many face challenges.

Families that include a child with a significant disability often need to advocate for their child across multiple domains, from managing the child's medical care, to ensuring an appropriate and individualized educational plan is in place, to meeting significant expenses that may arise due to the disability.

It is important to monitor the prevalence and characteristics of children with disabilities, in order to plan services and allocate resources for this population. Although children with disabilities make up a small percentage of the overall child population, they account for a higher share of health-related costs. In addition, the prevalence of disabilities is particularly high in certain groups of children requiring additional support, such as those within the foster care ${ }^{1}$ and juvenile justice systems. ${ }^{2}$

[^0]Having adequate health insurance is vital for families that have children with disabilities. Research finds that children with disabilities who are insured get more timely and comprehensive care, and that their parents are more satisfied with their child's health care than are parents of children with disabilities who lack insurance. Many children with disabilities may be eligible for publicly-funded health insurance (typically Medicaid); however, states vary greatly in their policies regarding which children have access to these programs. ${ }^{3}$

During 2008-2010, there were 2.9 million U.S. children with one or more disabilities (see Table). These comprised four percent (one in every 25) of all non-institutionalized children, ages birth to 17. Nearly one in three disabled children ( 31 percent) were living in poverty (compared with 20 percent of all children). Most children with disabilities ( 94 percent) were covered by health insurance; more than half ( 58 percent) were covered by public insurance programs.

[^1]
## Variation by state

By state, the proportion of children with a disability varies from as high as six percent (in Arkansas, Maine, and Vermont), to as low as three percent (in Colorado, Hawaii, Illinois, Nevada, North Dakota, South Dakota, and Utah).

Rates of poverty among this population of vulnerable children vary from as high as 42 percent (in Alabama and Kentucky), to as low as 15 percent (in Alaska). The percentage who are covered by health insurance is as high as 99 percent (in Massachusetts) and as low as 88 percent (Alaska). Coverage under public insurance programs ranges from 41 percent (Nevada, Utah) to 76 percent (Vermont).

## ABOUT THE DATA USED IN THIS BRIEF

The American Community Survey (ACS) is the U.S. Census Bureau's continuous sampling instrument for collecting much of the data that previously appeared on the "long form" of the decennial census. However, the ACS also includes questions in the areas of housing, family structure, income, transportation, and more, which expand what was previously available. Equally important, the ACS methodology allows for yearly estimates at both national and state levels, and for most large cities, and for multi-year-interval estimates for smaller geographic areas.

In this Fact Sheet, we examine ACS data collected between 2008 and 2010. Single-year data are also available for these years, but, particularly for smaller states, margins of error for these estimates are considerably larger when using data for single years.

There is little consensus around defining disability, with some researchers focusing on specific conditions or diagnoses, and others taking a more functional perspective (whether a condition limits one's activity or participation). In addition, while some studies include temporary disabilities, others focus on chronic conditions. The ACS adopts a functional approach to disability, defining it as having "serious difficulty" with vision or hearing, or "because of a serious physical, mental, or emotional condition," with cognition, ambulation, or self-care. For children younger than five, only vision and hearing categories are assessed. The data do not include children in institutions such as residential schools.

[^2]We gratefully acknowledge the support of the Annie E. Casey Foundation

[^3]
## Child Trends

|  | Number of Children with a Disability | Of All Children, Percent with a Disability | Of All Children with a Disability, Percent living in Poverty | Of All Children with a Disability, Percent w/ Any Health Insurance | Of All Children with a Disability, Percent w/ Public Health Insurance |
| :---: | :---: | :---: | :---: | :---: | :---: |
| United States | 2,948,000 | 4.0 | 30.9 | 94.1 | 58.4 |
| Alabama | 57,000 | 5.1 | 41.6 | 95.5 | 64.0 |
| Alaska | 7,000 | 3.7 | 14.7 | 88.3 | 54.2 |
| Arizona | 59,000 | 3.6 | 25.7 | 91.9 | 54.0 |
| Arkansas | 40,000 | 5.6 | 36.6 | 96.7 | 74.1 |
| California | 278,000 | 3.0 | 26.4 | 93.0 | 55.3 |
| Colorado | 37,000 | 3.0 | 21.6 | 90.9 | 45.2 |
| Connecticut | 30,000 | 3.7 | 22.8 | 97.3 | 47.6 |
| Delaware | 9,000 | 4.6 | 25.6 | 98.2 | 58.7 |
| Florida | 155,000 | 3.9 | 29.7 | 90.6 | 56.2 |
| Georgia | 99,000 | 4.0 | 30.4 | 91.9 | 58.8 |
| Hawaii | 9,000 | 2.9 | 22.0 | 97.9 | 51.1 |
| Idaho | 17,000 | 3.9 | 24.4 | 93.4 | 61.8 |
| Illinois | 104,000 | 3.3 | 29.7 | 96.5 | 57.1 |
| Indiana | 72,000 | 4.5 | 32.6 | 94.0 | 58.3 |
| Iowa | 29,000 | 4.0 | 27.5 | 96.6 | 64.2 |
| Kansas | 30,000 | 4.2 | 28.9 | 94.0 | 51.0 |
| Kentucky | 57,000 | 5.6 | 42.3 | 96.6 | 67.3 |
| Louisiana | 57,000 | 5.1 | 33.9 | 96.4 | 68.1 |
| Maine | 17,000 | 6.2 | 31.9 | 97.1 | 70.1 |
| Maryland | 50,000 | 3.7 | 21.9 | 96.8 | 49.0 |
| Massachusetts | 64,000 | 4.5 | 27.7 | 99.1 | 58.2 |
| Michigan | 115,000 | 4.8 | 35.3 | 97.0 | 64.1 |
| Minnesota | 46,000 | 3.6 | 26.9 | 94.7 | 52.9 |
| Mississippi | 37,000 | 4.9 | 40.2 | 92.3 | 70.2 |
| Missouri | 66,000 | 4.7 | 30.7 | 94.4 | 55.0 |
| Montana | 9,000 | 4.0 | 35.9 | 89.2 | 51.1 |
| Nebraska | 16,000 | 3.5 | 25.4 | 94.3 | 53.6 |
| Nevada | 21,000 | 3.1 | 25.6 | 87.2 | 40.5 |
| New Hampshire | 13,000 | 4.6 | 17.1 | 94.4 | 50.8 |
| New Jersey | 72,000 | 3.5 | 21.3 | 94.4 | 42.7 |
| New Mexico | 18,000 | 3.5 | 33.5 | 92.1 | 67.2 |
| New York | 160,000 | 3.7 | 32.6 | 96.6 | 59.8 |
| North Carolina | 98,000 | 4.3 | 35.0 | 95.0 | 64.9 |
| North Dakota | 4,000 | 2.7 | 22.8 | 93.9 | 47.1 |
| Ohio | 132,000 | 4.8 | 35.0 | 95.5 | 59.2 |
| Oklahoma | 45,000 | 4.9 | 33.3 | 92.7 | 62.5 |
| Oregon | 40,000 | 4.6 | 29.0 | 91.7 | 52.0 |
| Pennsylvania | 137,000 | 4.9 | 32.7 | 96.5 | 69.6 |
| Rhode Island | 12,000 | 5.4 | 30.9 | 96.0 | 68.6 |
| South Carolina | 39,000 | 3.7 | 35.9 | 93.6 | 63.5 |
| South Dakota | 6,000 | 3.1 | 36.7 | 95.0 | 64.3 |
| Tennessee | 69,000 | 4.6 | 37.8 | 96.4 | 65.2 |
| Texas | 275,000 | 4.1 | 34.2 | 89.0 | 55.9 |
| Utah | 25,000 | 3.0 | 19.8 | 92.3 | 40.6 |
| Vermont | 8,000 | 5.8 | 26.4 | 97.3 | 75.6 |
| Virginia | 66,000 | 3.6 | 24.8 | 95.5 | 47.5 |
| Washington | 60,000 | 3.8 | 25.6 | 95.4 | 55.7 |
| West Virginia | 19,000 | 4.9 | 36.7 | 96.8 | 68.5 |
| Wisconsin | 53,000 | 4.0 | 30.9 | 96.5 | 61.0 |
| Wyoming | 5,000 | 4.1 | 22.1 | 90.1 | 54.9 |

[^4]
[^0]:    1 McCarthy, J. (2002). Meeting the health care needs of children in the foster care system: Summary of state and community efforts. Key findings. Georgetown University Child Development Center. Retrieved from http://gucchd. georgetown.edu/products/FCSummary.pdf
    2 American Academy of Pediatrics, Committee on Adolescence. (2011). Health care for youth in the juvenile justice system. Policy statement. Pediatrics, 128(6), 1219-1235.

[^1]:    3 Szilagyi, P. G. (2012). Health insurance and children with disabilities. The Future of Children, 22(1), 123-148.

[^2]:    © 2012 Child Trends. May be reprinted with citation.

[^3]:    Child Trends is a nonprofit, nonpartisan research center that studies children at every stage of development. Our mission is to improve outcomes for children by providing research, data, and analysis to the people and institutions whose decisions and actions affect children. For additional information on Child Trends, including a complete set of available Research Briefs, visit our Web site at www.childtrends.org. For the latest information on more than 100 key indicators of child and youth well-being, visit the Child Trends DataBank at www.childtrendsdatabank.org. For summaries of more than 600 experimental evaluations of social interventions for children, visit www.childtrends.org/LINKS.

[^4]:    Note: Count estimates are rounded to the nearest thousand. Children include ages birth through 17. Source: U.S. Census Bureau, American Community Survey.

