Use of Mind Body Approaches among US Children Age 4-17 Years: Child Characteristics and Reported Reasons and Benefits for Use

Data source: 2007 and 2012 National Health Interview Survey (NHIS) and Child Complementary and Alternative Medicine Supplement

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Child and Adolescent Health Measurement Initiative
Johns Hopkins Bloomberg School of Public Health

Table 1: Prevalence of Use of Mind Body Approaches among US Children Age 4-17 years: by Child Characteristics and Reported Reasons and Benefits for Use: 2007 and 2012 National Health Interview Survey (NHIS) and Child Complementary and Alternative Medicine Supplement

<table>
<thead>
<tr>
<th>Characteristics (distribution of characteristic among all US children, 2012 and 2007 NHIS)</th>
<th>Used mind-body approaches¹</th>
<th>Used any complementary and alternative approach asked about in the survey²</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2012 NHIS</td>
<td>2007 NHIS</td>
</tr>
<tr>
<td>All children, 4-17 years Pop. Est. N=57,829,791</td>
<td>3.7% (Pop. Est: 2,100,132)</td>
<td>5.5% (Pop. Est: 3,129,529)</td>
</tr>
</tbody>
</table>

**DEMOGRAPHIC CHARACTERISTICS**

<table>
<thead>
<tr>
<th>Category</th>
<th>2012 NHIS</th>
<th>2007 NHIS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4-9 years (42.7%)</td>
<td>2.9%</td>
<td>3.9%</td>
</tr>
<tr>
<td>10-12 years (21.5%)</td>
<td>3.5%</td>
<td>4.2%</td>
</tr>
<tr>
<td>13-17 years (35.8%)</td>
<td>4.8%</td>
<td>8.2%</td>
</tr>
<tr>
<td><strong>Sex</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male (51.1%)</td>
<td>1.8%</td>
<td>4.9%</td>
</tr>
<tr>
<td>Female (48.9%)</td>
<td>5.7%</td>
<td>6.1%</td>
</tr>
<tr>
<td><strong>Race/ethnicity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic (24.0%)</td>
<td>2.0%</td>
<td>3.6%</td>
</tr>
<tr>
<td>White, non-Hispanic (53.0%)</td>
<td>4.7%</td>
<td>6.4%</td>
</tr>
<tr>
<td>African American, non-Hispanic (13.6%)</td>
<td>2.4%</td>
<td>4.1%</td>
</tr>
<tr>
<td>Multi/Other, non-Hispanic (9.4%)</td>
<td>4.3%</td>
<td>7.0%</td>
</tr>
<tr>
<td><strong>Family income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-99 FPL (22.3%)</td>
<td>2.1%</td>
<td>3.6%</td>
</tr>
<tr>
<td>100-199% FPL (23.6%)</td>
<td>3.7%</td>
<td>3.4%</td>
</tr>
<tr>
<td>200-399% FPL (28.6%)</td>
<td>3.1%</td>
<td>6.2%</td>
</tr>
<tr>
<td>400% FPL or above (25.4%)</td>
<td>5.7%</td>
<td>7.7%</td>
</tr>
<tr>
<td><strong>Geographic region</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Northeast (16.3%)</td>
<td>4.5%</td>
<td>6.7%</td>
</tr>
<tr>
<td>Midwest (22.8%)</td>
<td>4.2%</td>
<td>5.8%</td>
</tr>
<tr>
<td>West (24.0%)</td>
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<td>7.2%</td>
</tr>
<tr>
<td>South (37.0%)</td>
<td>2.4%</td>
<td>3.8%</td>
</tr>
</tbody>
</table>

**HEALTH STATUS**

<table>
<thead>
<tr>
<th>Category</th>
<th>2012 NHIS</th>
<th>2007 NHIS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Any chronic conditions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has 1 or more conditions (49.8%)</td>
<td>4.8%</td>
<td>8.8%</td>
</tr>
<tr>
<td>Does not have chronic condition (50.2%)</td>
<td>2.4%</td>
<td>2.4%</td>
</tr>
<tr>
<td><strong>Emotional, mental or behavioral conditions (EMB, 4-17 years)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has any EMB condition (19.0%)</td>
<td>6.2%</td>
<td>14.0%</td>
</tr>
<tr>
<td>Does not have EMB conditions (81.0%)</td>
<td>3.0%</td>
<td>3.6%</td>
</tr>
<tr>
<td><strong>Pain related conditions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has any pain-related condition (20.6%)</td>
<td>6.0%</td>
<td>10.7%</td>
</tr>
<tr>
<td>Does not have pain-related conditions (79.4%)</td>
<td>2.9%</td>
<td>4.6%</td>
</tr>
</tbody>
</table>

**HEALTH CARE USE AND ACCESS**

<table>
<thead>
<tr>
<th>Category</th>
<th>2012 NHIS</th>
<th>2007 NHIS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Type of health insurance</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public sector only (40.0%)</td>
<td>3.0%</td>
<td>4.5%</td>
</tr>
<tr>
<td>Any private sector (53.5%)</td>
<td>4.3%</td>
<td>6.2%</td>
</tr>
<tr>
<td>Uninsured (6.5%)</td>
<td>2.7%</td>
<td>4.1%</td>
</tr>
<tr>
<td><strong>Number of office visits</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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¹ 2012 NHIS did not include stress management classes and other types of modalities²

² 2012 NHIS did not include stress management classes and other types of modalities³

³ 2012 NHIS did not include stress management classes and other types of modalities⁴

⁴ 2012 NHIS did not include stress management classes and other types of modalities⁵

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The table below provides reasons and benefits of CAM use, among children who used mind-body approaches and/or any other type of CAM, age 4-17 years. The data is from the 2012 NHIS (does not include stress management classes).

<table>
<thead>
<tr>
<th>Reasons and Benefits of Use (2012 NHIS) (Prevalence Among All CAM users)</th>
<th>Among children who used mind-body approaches among children who used any other CAM asked about</th>
<th>Population estimate</th>
<th>Weighted %</th>
<th>Population estimate</th>
<th>Weighted %</th>
</tr>
</thead>
<tbody>
<tr>
<td>General wellness or disease prevention (66.4%)</td>
<td>1,222,879</td>
<td>67.7%</td>
<td>2,425,620</td>
<td>65.8%</td>
<td></td>
</tr>
<tr>
<td>To improve child's energy (27.3%)</td>
<td>819,389</td>
<td>45.4%</td>
<td>678,258</td>
<td>18.4%</td>
<td></td>
</tr>
<tr>
<td>To improve child's immune function (31.2%)</td>
<td>582,222</td>
<td>32.2%</td>
<td>1,128,986</td>
<td>30.6%</td>
<td></td>
</tr>
<tr>
<td>To improve child's athletic or sports performance (30.3%)</td>
<td>833,795</td>
<td>46.2%</td>
<td>831,360</td>
<td>22.6%</td>
<td></td>
</tr>
<tr>
<td>To improve child's memory and concentration (23.6%)</td>
<td>644,948</td>
<td>35.7%</td>
<td>652,637</td>
<td>17.7%</td>
<td></td>
</tr>
<tr>
<td>Motivate child to eat healthier (23.4%)</td>
<td>665,503</td>
<td>36.9%</td>
<td>617,779</td>
<td>16.8%</td>
<td></td>
</tr>
<tr>
<td>Motivate child to exercise more regularly (25.3%)</td>
<td>814,180</td>
<td>45.1%</td>
<td>575,342</td>
<td>15.6%</td>
<td></td>
</tr>
<tr>
<td>Gave child a sense of control over their own health (35.5%)</td>
<td>946,124</td>
<td>52.4%</td>
<td>1,006,196</td>
<td>27.3%</td>
<td></td>
</tr>
<tr>
<td>Reduced child's stress level or to relax (47.1%)</td>
<td>1,304,730</td>
<td>72.3%</td>
<td>1,282,455</td>
<td>34.8%</td>
<td></td>
</tr>
<tr>
<td>Led child to sleep better (43.6%)</td>
<td>991,668</td>
<td>54.9%</td>
<td>1,401,822</td>
<td>38.1%</td>
<td></td>
</tr>
<tr>
<td>Led child to feel better emotionally (39.2%)</td>
<td>1,153,982</td>
<td>64.5%</td>
<td>990,175</td>
<td>26.9%</td>
<td></td>
</tr>
<tr>
<td>Led child to cope with health problems better (27.2%)</td>
<td>558,277</td>
<td>30.9%</td>
<td>937,235</td>
<td>25.4%</td>
<td></td>
</tr>
<tr>
<td>Led child to improve overall health and feel better (66.0%)</td>
<td>1,331,847</td>
<td>73.8%</td>
<td>2,294,486</td>
<td>62.3%</td>
<td></td>
</tr>
<tr>
<td>Led child to improve relationships with others (22.7%)</td>
<td>763,017</td>
<td>42.3%</td>
<td>485,644</td>
<td>13.2%</td>
<td></td>
</tr>
<tr>
<td>Led child to improve school attendance (19.1%)</td>
<td>428,971</td>
<td>23.8%</td>
<td>619,880</td>
<td>16.8%</td>
<td></td>
</tr>
<tr>
<td>Used because it is a natural therapy (61.7%)</td>
<td>1,112,982</td>
<td>61.8%</td>
<td>2,260,233</td>
<td>61.6%</td>
<td></td>
</tr>
<tr>
<td>Used because it focuses on the whole person, mind, body, and spirit (44.1%)</td>
<td>1,113,181</td>
<td>61.9%</td>
<td>1,298,464</td>
<td>35.4%</td>
<td></td>
</tr>
<tr>
<td>Used because it treats the cause, not just the symptoms (53.7%)</td>
<td>833,277</td>
<td>46.3%</td>
<td>2,104,840</td>
<td>57.4%</td>
<td></td>
</tr>
<tr>
<td>Used because it was part of child’s upbringing (39.3%)</td>
<td>812,166</td>
<td>45.1%</td>
<td>1,335,609</td>
<td>36.4%</td>
<td></td>
</tr>
</tbody>
</table>

| Recommended by a medical doctor (22.0%) | 281,100 | 15.6% | 923,161 | 25.2% |
| Recommended by a family member (62.4%) | 1,019,205 | 56.6% | 2,392,212 | 65.2% |
| Recommended by a friend (23.3%) | 565,061 | 31.4% | 709,956 | 19.4% |
| Recommended by co-worker of the family member (4.8%) | 92,184 | 5.1% | 171,109 | 4.7% |

1 Mind-body therapies: 2007 NHIS includes: biofeedback, hypnosis, yoga, tai chi, qi gong, meditation, guided imagery, progressive relaxation, deep breathing exercises, support group meeting and stress management class.

2 Stress management classes and support group meetings were not asked in 2012. In 2012, there was no question specifically asking about use of deep breathing exercises. However, those who used hypnosis, biofeedback, meditation, guided imagery, progressive relaxation, yoga, tai chi or qi gong were asked whether they used deep breathing exercise as part of these modalities. In the 2012 NHIS, only certain types of meditation (Mantra, Mindfulness, and Spiritual) were asked about on use of meditation in the past 12 months.

3 CAM use includes CAM modalities asked about in the 2012 NHIS CAM Supplement: chiropractic or osteopathic manipulation, massage, energy healing therapy, acupuncture, naturopathy, Ayurveda, chelation, craniosacral therapy, hypnosis, biofeedback, homeopathy, traditional healers (Native American Healer/Medicine Man, Shaman, Curandero/Machi/Parchero, Yerbero/Hierbista, Sobador, and Huesero), specific vitamins and minerals (A,B,C,D,E,H,K, other or calcium, magnesium, iron, chromium, zinc, selenium, potassium, other), herbal supplements, meditation (Mantra, Mindfulness, Spiritual), guided imagery, progressive relaxation, yoga, tai chi, qi gong, special diets (vegetarian, macrobiotic, Atkins, Pritikin, Ornish) and movement or exercise techniques (Feldenkrais, Alexander Technique, Pilates, and Trager Psychophysical Integration). This CAM use definition does not include multi-vitamins and multi-minerals.

4 Pain-related conditions: arthritis, migraine headache, abdominal pain, back or neck pain, non-migraine headache, other chronic pain

5 Emotional, mental or behavioral conditions: anxiety or stress, depression, ADD/ADHD, phobia or fears, sleeping problems, bedwetting
Table 2: Characteristics of Children Who Used Mind Body Approaches and Reasons and Benefits of Use, Age 4-17
years, Data: 2007 and 2012 National Health Interview Survey (NHIS) and Child Complementary and Alternative Medicine Supplement (Source: Bethell, C., Gombojav, N. CAHMI/JHU*)

<table>
<thead>
<tr>
<th>Characteristics (distribution of characteristic among all US children, 2012 NHIS)</th>
<th>Used mind-body approaches¹</th>
<th>Used any complementary and alternative approach¹</th>
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<td>Weighted %</td>
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<tr>
<td>Pop Est:</td>
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**DEMOGRAPHIC CHARACTERISTICS**

<table>
<thead>
<tr>
<th>Age</th>
<th>4-9 years (42.7%)</th>
<th>33.7%</th>
<th>29.7%</th>
<th>34.9%</th>
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<tbody>
<tr>
<td>10-12 years (21.5%)</td>
<td>20.1%</td>
<td>15.9%</td>
<td>21.5%</td>
<td>18.2%</td>
<td></td>
</tr>
<tr>
<td>13-17 years (35.8%)</td>
<td>46.2%</td>
<td>54.4%</td>
<td>43.6%</td>
<td>49.6%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sex</th>
<th>Male (51.1%)</th>
<th>25.4%</th>
<th>45.8%</th>
<th>46.1%</th>
<th>48.4%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female (48.9%)</td>
<td>74.6%</td>
<td>54.2%</td>
<td>53.9%</td>
<td>51.6%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race/ethnicity</th>
<th>Hispanic (24.0%)</th>
<th>12.5%</th>
<th>12.8%</th>
<th>18.7%</th>
<th>13.6%</th>
</tr>
</thead>
<tbody>
<tr>
<td>White, non-Hispanic (53.0%)</td>
<td>68.3%</td>
<td>66.9%</td>
<td>61.7%</td>
<td>69.4%</td>
<td></td>
</tr>
<tr>
<td>African American, non-Hispanic (13.6%)</td>
<td>8.4%</td>
<td>11.0%</td>
<td>9.6%</td>
<td>8.4%</td>
<td></td>
</tr>
<tr>
<td>Multi/Other, non-Hispanic (9.4%)</td>
<td>10.8%</td>
<td>9.4%</td>
<td>9.9%</td>
<td>8.6%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Family income</th>
<th>0-99 FPL (22.3%)</th>
<th>11.6%</th>
<th>11.0%</th>
<th>13.8%</th>
<th>10.1%</th>
</tr>
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<tbody>
<tr>
<td>100-199% FPL (23.6%)</td>
<td>23.6%</td>
<td>14.4%</td>
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<td>400% FPL or above (25.4%)</td>
<td>40.5%</td>
<td>38.3%</td>
<td>35.8%</td>
<td>35.7%</td>
<td></td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Geographic region</th>
<th>Northeast (16.3%)</th>
<th>20.2%</th>
<th>20.6%</th>
<th>15.4%</th>
<th>17.4%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Midwest (22.8%)</td>
<td>25.7%</td>
<td>25.2%</td>
<td>24.8%</td>
<td>26.4%</td>
<td></td>
</tr>
<tr>
<td>West (24.0%)</td>
<td>30.5%</td>
<td>29.4%</td>
<td>31.3%</td>
<td>29.4%</td>
<td></td>
</tr>
<tr>
<td>South (37.0%)</td>
<td>23.6%</td>
<td>24.8%</td>
<td>28.5%</td>
<td>26.7%</td>
<td></td>
</tr>
</tbody>
</table>

| Any chronic conditions | Has 1 or more conditions (49.8%) | 69.7% | 77.8% | 64.4% | 67.4% |
| --- | Does not have chronic condition (50.2%) | 30.3% | 22.2% | 35.6% | 32.6% |

| Emotional, mental or behavioral conditions⁴ (EMB, 2-17 years) | Has any EMB condition (19.0%) | 36.3% | 47.3% | 29.9% | 31.1% |
| --- | Does not have EMB conditions (81.0%) | 63.7% | 52.7% | 70.1% | 68.9% |

| Pain related conditions⁵ | Has any pain-related condition (20.6%) | 42.8% | 29.1% | 37.9% | 26.6% |
| --- | Does not have pain-related conditions (79.4%) | 57.2% | 70.9% | 62.1% | 73.4% |

| Type of health insurance | Public only (40.0%) | 30.2% | 20.8% | 28.7% | 19.3% |
| --- | Any private (53.5%) | 64.7% | 72.1% | 64.4% | 72.9% |
| Uninsured (6.5%) | 5.2% | 7.1% | 6.9% | 7.8% |

<table>
<thead>
<tr>
<th>Number of office visits</th>
<th>0-1 visit (31.5%)</th>
<th>2-5 visits (52.7%)</th>
<th>6 or more visits (15.7%)</th>
<th>2-5 visits (52.7%)</th>
<th>6 or more visits (15.7%)</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>28.3%</td>
<td>21.7%</td>
<td>28.0%</td>
<td>52.1%</td>
<td>50.7%</td>
<td>52.1%</td>
<td>50.7%</td>
</tr>
<tr>
<td>Received specialist care</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes (14.4%)</td>
<td>23.8%</td>
<td>27.3%</td>
<td>20.7%</td>
<td>22.3%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No (85.6%)</td>
<td>76.2%</td>
<td>72.7%</td>
<td>79.3%</td>
<td>77.7%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Received mental health care</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes (8.2%)</td>
<td>17.7%</td>
<td>28.1%</td>
<td>12.6%</td>
<td>16.8%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No (91.8%)</td>
<td>82.3%</td>
<td>71.9%</td>
<td>87.4%</td>
<td>83.2%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency room (ER) visits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>One or more ER visits (17.8%)</td>
<td>13.7%</td>
<td>26.3%</td>
<td>17.9%</td>
<td>23.0%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No ER visits (82.2%)</td>
<td>86.3%</td>
<td>73.7%</td>
<td>82.1%</td>
<td>77.0%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child takes prescription medication for 3 months regularly</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes (13.2%)</td>
<td>21.5%</td>
<td>31.2%</td>
<td>19.5%</td>
<td>24.4%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No (86.8%)</td>
<td>78.5%</td>
<td>68.8%</td>
<td>80.5%</td>
<td>75.6%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Reasons and Benefits of CAM Use, Among Children Who Used Mind-Body Approaches and Any Other Types of CAM, 2012 NHIS**

<table>
<thead>
<tr>
<th>Reasons and Benefits of Use (All CAM users, 2012 NHIS)</th>
<th>Among children who used mind-body approaches</th>
<th>Among children who used any other CAM asked about</th>
</tr>
</thead>
<tbody>
<tr>
<td>General wellness or disease prevention (66.4%)</td>
<td>1,222,879</td>
<td>2,425,620</td>
</tr>
<tr>
<td>To improve child's energy (27.3%)</td>
<td>819,389</td>
<td>678,259</td>
</tr>
<tr>
<td>To improve child's immune function (31.2%)</td>
<td>582,222</td>
<td>1,128,986</td>
</tr>
<tr>
<td>To improve child's athletic or sports performance (30.3%)</td>
<td>833,795</td>
<td>831,360</td>
</tr>
<tr>
<td>To improve child's memory and concentration (23.6%)</td>
<td>644,948</td>
<td>652,637</td>
</tr>
<tr>
<td>Motivate child to eat healthier (23.4%)</td>
<td>665,503</td>
<td>617,779</td>
</tr>
<tr>
<td>Motivate child to exercise more regularly (25.3%)</td>
<td>814,180</td>
<td>575,342</td>
</tr>
<tr>
<td>Gave child a sense of control over child's health (35.5%)</td>
<td>946,124</td>
<td>1,006,196</td>
</tr>
<tr>
<td>Reduced child's stress level or to relax (47.1%)</td>
<td>1,304,730</td>
<td>1,282,455</td>
</tr>
<tr>
<td>Led child to sleep better (43.6%)</td>
<td>991,668</td>
<td>1,401,822</td>
</tr>
<tr>
<td>Led child feel better emotionally (39.2%)</td>
<td>1,163,982</td>
<td>990,175</td>
</tr>
<tr>
<td>Led to better coping w/health issue (27.2%)</td>
<td>558,277</td>
<td>937,235</td>
</tr>
<tr>
<td>Led child to improve overall health and feel better (66.0%)</td>
<td>1,331,847</td>
<td>2,294,486</td>
</tr>
<tr>
<td>Led child to improve relationships with others (22.7%)</td>
<td>763,017</td>
<td>485,644</td>
</tr>
<tr>
<td>Led to improved school attendance (19.1%)</td>
<td>428,971</td>
<td>619,880</td>
</tr>
<tr>
<td>Used because it is a natural therapy (61.7%)</td>
<td>1,112,982</td>
<td>2,260,233</td>
</tr>
<tr>
<td>Used because it focuses on the whole person, mind, body, and spirit (44.1%)</td>
<td>1,113,181</td>
<td>1,298,464</td>
</tr>
<tr>
<td>Used because it treats the cause, not just the symptoms (53.7%)</td>
<td>833,277</td>
<td>2,104,840</td>
</tr>
<tr>
<td>Used because it was part of child's upbringing (39.3%)</td>
<td>812,166</td>
<td>1,335,609</td>
</tr>
<tr>
<td>Recommended by a medical doctor (22.0%)</td>
<td>281,100</td>
<td>923,161</td>
</tr>
</tbody>
</table>

| Recommended by a family member (62.4%) | 1,019,205 | 56.6% | 2,392,212 | 65.2% |
| Recommended by a friend (23.3%) | 565,061 | 31.4% | 709,956 | 19.4% |
| Recommended by co-worker (4.8%) | 92,184 | 5.1% | 171,109 | 4.7% |

1Mind-body therapies: 2007 NHIS includes: biofeedback, hypnosis, yoga, tai chi, qi gong, meditation, guided imagery, progressive relaxation, deep breathing exercises, support group meeting and stress management class
2 Stress management classes and support group meetings were not asked in 2012. In 2012, there was no question specifically asking about use of deep breathing exercises. However, those who used hypnosis, biofeedback, meditation, guided imagery, progressive relaxation, yoga, tai chi or qi gong were asked whether they used deep breathing exercise as part of these modalities. In the 2012 NHIS, only certain types of meditation (Mantra, Mindfulness, and Spiritual) were asked about on use of meditation in the past 12 months.
3CAM use includes CAM modalities asked about in the 2012 NHIS CAM Supplement: chiropractic or osteopathic manipulation, massage, energy healing therapy, acupuncture, naturopathy, Ayurveda, chelation, craniosacral therapy, hypnosis, biofeedback, homeopathy, traditional healers (Native American Healer/Medicine Man, Shaman, Curadero/Machi/Parchero, Yerbero/Hierbista, Sobador, and Huesero), specific vitamins and minerals (A,B,C,D,E,H,K, other or calcium, magnesium, iron, chromium, zinc, selenium, potassium, other), herbal supplements, meditation (Mantra, Mindfulness, Spiritual), guided imagery, progressive relaxation, yoga, tai chi, qi gong, special diets (vegetarian, macrobiotic, Atkins, Pritikin, Ornish) and movement or exercise techniques (Feldenkrais, Alexander Technique, Pilates, and Trager Psychophysical Integration). This CAM use definition does not include multi-vitamins and multi-minerals.
4 Pain-related conditions: arthritis, migraine headache, abdominal pain, back or neck pain, non-migraine headache, other chronic pain
5Emotional, mental or behavioral conditions: anxiety or stress, depression, ADD/ADHD, phobia or fears, sleeping problems, and bedwetting
Figure 1: Prevalence of Use of Mind Body Approaches: by Child Characteristics 4-17 years, Data: 2012 National Health Interview Survey (NHIS)

<table>
<thead>
<tr>
<th>Demographics</th>
<th>All US children, 4-17 years</th>
<th>Estimated population: 2.1M</th>
</tr>
</thead>
<tbody>
<tr>
<td>13-17 years (35.8%)</td>
<td>3.7%</td>
<td>4.8%</td>
</tr>
<tr>
<td>10-12 years (21.5%)</td>
<td>3.5%</td>
<td>4.8%</td>
</tr>
<tr>
<td>4-9 years (42.7%)</td>
<td>2.9%</td>
<td>5.7%</td>
</tr>
<tr>
<td>Female (48.9%)</td>
<td>1.8%</td>
<td>5.7%</td>
</tr>
<tr>
<td>Male (51.1%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West (24.0%)</td>
<td></td>
<td>4.8%</td>
</tr>
<tr>
<td>Northeast (16.3%)</td>
<td></td>
<td>4.5%</td>
</tr>
<tr>
<td>Midwest (22.8%)</td>
<td></td>
<td>4.2%</td>
</tr>
<tr>
<td>South (37.0%)</td>
<td></td>
<td>2.4%</td>
</tr>
</tbody>
</table>

Health Status
- Has any chronic condition (49.8%)
- Has any emotional, mental or behavioral condition (19.0%)
- Has any pain-related condition (20.6%)

Medical Care Use
- Received specialist care (14.4%)
- Received mental health care (8.2%)

Mind-body therapies includes: biofeedback, hypnosis, yoga, tai chi, qi gong, meditation, guided imagery, progressive relaxation

Note: Stress management classes and support group meetings were not asked in the 2012 NHIS. In 2012, there was no question specifically asking about use of deep breathing exercises.

Pain-related conditions: arthritis, migraine headache, abdominal pain, back or neck pain, non-migraine headache, other chronic pain

Emotional, mental or behavioral conditions: anxiety or stress, depression, ADD/ADHD, phobia or fears, sleeping problems, bedwetting

Note: Percentage in parentheses is rate of characteristics for all US children.
Figure 2: Reasons and Benefits of CAM Use, Among Children Ages 4-17 Years Who Used Mind-Body Approaches, Data: 2012 National Health Interview Survey

- Led child to improve overall health and feel better (66.0%)
- Reduced child's stress level or to relax (47.1%)
- General wellness or disease prevention (66.4%)
- Led child to feel better emotionally (39.2%)
- It focuses on the whole person, mind, body, and spirit (44.1%)
- It is a natural therapy (61.7%)
- Recommended by a family member (62.4%)
- Led child to sleep better (43.6%)
- Gave child a sense of control over their own health (35.5%)
- It treats the cause, not just the symptoms (53.7%)
- To improve child's athletic or sports performance (30.3%)
- To improve child's energy (27.3%)
- It was part of child's upbringing (39.3%)
- Motivate child to exercise more regularly (25.3%)
- Led child to improve relationships with others (22.7%)
- Motivate child to eat healthier (23.4%)
- To improve child's memory and concentration (23.6%)
- To improve child's immune function (31.2%)
- Recommended by a friend (23.3%)
- Led child to cope with health problems better (27.2%)
- Led child to improve school attendance (19.1%)
- Recommended by a medical doctor (22.0%)
- Recommended by co-worker of the family member (4.8%)

Mind-body therapies include: biofeedback, hypnosis, yoga, tai chi, qigong, meditation, guided imagery, progressive relaxation.
Note: Stress management classes and support group meetings were not asked in the 2012 NHIS. In 2012, there was no question specifically asking about use of deep breathing exercises.
Note: Percentage in parentheses is rate of characteristics for all US children.