



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

Christina Bethell, PhD, MBA, MPH
Narangerel Gombojav, MD, PhD

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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

Characteristics (distribution of characteristic among all US children, 2012 and 2007 NHIS) See www.nhiscam.org for more data findings.	Used mind-body approaches ¹ Note: 2012 NHIS did not include stress management classes and other types of modalities ²		Used any complementary and alternative approach asked about in the survey ³	
	2012 NHIS	2007 NHIS	2012 NHIS	2007 NHIS
	Weighted %	Weighted %	Weighted %	Weighted %
All children, 4-17 years Pop. Est. N=57,829,791	3.7% Pop. Est: 2,100,132	5.5% Pop. Est: 3,129,529	20.6%, Pop. Est: 11,655,823	15.1% Pop. Est: 8,588,011
DEMOGRAPHIC CHARACTERISTICS				
Age				
4-9 years (42.7%)	2.9%	3.9%	16.7%	11.5%
10-12 years (21.5%)	3.5%	4.2%	20.5%	13.0%
13-17 years (35.8%)	4.8%	8.2%	25.3%	20.5%
Sex				
Male (51.1%)	1.8%	4.9%	18.5%	14.4%
Female (48.9%)	5.7%	6.1%	22.7%	16.0%
Race/ethnicity				
Hispanic (24.0%)	2.0%	3.6%	16.3%	10.4%
White, non-Hispanic (53.0%)	4.7%	6.4%	23.7%	18.1%
African American, non-Hispanic (13.6%)	2.4%	4.1%	14.9%	8.6%
Multi/Other, non-Hispanic (9.4%)	4.3%	7.0%	21.7%	17.6%
Family income				
0-99 FPL (22.3%)	2.1%	3.6%	13.6%	9.1%
100-199% FPL (23.6%)	3.7%	3.4%	17.7%	13.0%
200-399% FPL (28.6%)	3.1%	6.2%	21.2%	15.9%
400% FPL or above (25.4%)	5.7%	7.7%	28.1%	19.8%
Geographic region				
Northeast (16.3%)	4.5%	6.7%	19.0%	15.5%
Midwest (22.8%)	4.2%	5.8%	22.5%	16.6%
West (24.0%)	4.8%	7.2%	27.1%	19.7%
South (37.0%)	2.4%	3.8%	15.9%	11.2%
HEALTH STATUS				
Any chronic conditions				
Has 1 or more conditions (49.8%)	4.8%	8.8%	24.5%	21.0%
Does not have chronic condition (50.2%)	2.4%	2.4%	15.9%	9.6%
Emotional, mental or behavioral conditions⁴ (EMB, 4-17 years)				
Has any EMB condition (19.0%)	6.2%	14.0%	28.5%	25.3%
Does not have EMB conditions (81.0%)	3.0%	3.6%	18.4%	12.8%
Pain related conditions⁵				
Has any pain-related condition (20.6%)	6.0%	10.7%	29.7%	27.0%
Does not have pain-related conditions (79.4%)	2.9%	4.6%	17.3%	13.1%
HEALTH CARE USE AND ACCESS				
Type of health insurance				
Public sector only (40.0%)	3.0%	4.5%	15.6%	11.4%
Any private sector (53.5%)	4.3%	6.2%	23.9%	17.0%
Uninsured (6.5%)	2.7%	4.1%	20.4%	12.4%
Number of office visits				

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0-1 visit (31.5%)	3.0%	3.1%	16.3%	10.5%
2-5 visits (52.7%)	3.6%	5.6%	20.9%	15.5%
6 or more visits (15.7%)	6.5%	12.5%	31.6%	28.1%
Received specialist care				
Yes (14.4%)	6.2%	11.3%	29.6%	25.3%
No (85.6%)	3.3%	4.6%	19.1%	13.6%
Received mental health care				
Yes (8.2%)	7.4%	20.4%	29.0%	33.6%
No (91.8%)	3.4%	4.3%	19.7%	13.7%
Emergency room (ER) visits				
One or more ER visits (17.8%)	3.3%	7.9%	23.5%	18.8%
No ER visits (82.2%)	3.8%	5.0%	20.0%	14.4%
Child regularly took prescription medications for at least 3 months past year				
Yes (13.2%)	5.3%	12.4%	26.6%	26.5%
No (86.8%)	3.4%	4.4%	19.5%	13.3%
REASONS AND BENEFITS OF CAM USE, AMONG CHILDREN WHO USED MIND-BODY APPROACHES AND/OR ANY OTHER TYPE OF CAM, 4-17 years				
Data: 2012 NHIS (does not include stress management classes²)				
Reasons and Benefits of Use (2012 NHIS) (Prevalence Among All CAM users)	Among children who used mind-body approaches ²		Among children who used any other CAM asked about	
	Population estimate	Weighted %	Population estimate	Weighted %
General wellness or disease prevention (66.4%)	1,222,879	67.7%	2,425,620	65.8%
To improve child's energy (27.3%)	819,389	45.4%	678,258	18.4%
To improve child's immune function (31.2%)	582,222	32.2%	1,128,986	30.6%
To improve child's athletic or sports performance (30.3%)	833,795	46.2%	831,360	22.6%
To improve child's memory and concentration (23.6%)	644,948	35.7%	652,637	17.7%
Motivate child to eat healthier (23.4%)	665,503	36.9%	617,779	16.8%
Motivate child to exercise more regularly (25.3%)	814,180	45.1%	575,342	15.6%
Gave child a sense of control over their own health (35.5%)	946,124	52.4%	1,006,196	27.3%
Reduced child's stress level or to relax (47.1%)	1,304,730	72.3%	1,282,455	34.8%
Led child to sleep better (43.6%)	991,668	54.9%	1,401,822	38.1%
Led child to feel better emotionally (39.2%)	1,163,982	64.5%	990,175	26.9%
Led child to cope with health problems better (27.2%)	558,277	30.9%	937,235	25.4%
Led child to improve overall health and feel better (66.0%)	1,331,847	73.8%	2,294,486	62.3%
Led child to improve relationships with others (22.7%)	763,017	42.3%	485,644	13.2%
Led child to improve school attendance (19.1%)	428,971	23.8%	619,880	16.8%
Used because it is a natural therapy (61.7%)	1,112,982	61.8%	2,260,233	61.6%
Used because it focuses on the whole person, mind, body, and spirit (44.1%)	1,113,181	61.9%	1,298,464	35.4%
Used because it treats the cause, not just the symptoms (53.7%)	833,277	46.3%	2,104,840	57.4%
Used because it was part of child's upbringing (39.3%)	812,166	45.1%	1,335,609	36.4%

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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*)

Characteristics (distribution of characteristic among all US children, 2012 NHIS)	Used mind-body approaches ¹ Note: 2012 NHIS does not include stress management class and other types of modalities ²		Used any complementary and alternative approach ³	
	2012 NHIS	2007 NHIS	2012 NHIS	2007 NHIS
	Weighted %	Weighted %	Weighted %	Weighted %
All children, 4-17 years Pop. Est. N=57,829,791	3.7% Pop. Est: 2,100,132	5.5% Pop. Est: 3,129,529	20.6%, Pop. Est: 11,655,823	15.1% Pop. Est: 8,588,011
DEMOGRAPHIC CHARACTERISTICS				
Age				
4-9 years (42.7%)	33.7%	29.7%	34.9%	32.2%
10-12 years (21.5%)	20.1%	15.9%	21.5%	18.2%
13-17 years (35.8%)	46.2%	54.4%	43.6%	49.6%
Sex				
Male (51.1%)	25.4%	45.8%	46.1%	48.4%
Female (48.9%)	74.6%	54.2%	53.9%	51.6%
Race/ethnicity				
Hispanic (24.0%)	12.5%	12.8%	18.7%	13.6%
White, non-Hispanic (53.0%)	68.3%	66.9%	61.7%	69.4%
African American, non-Hispanic (13.6%)	8.4%	11.0%	9.6%	8.4%
Multi/Other, non-Hispanic (9.4%)	10.8%	9.4%	9.9%	8.6%
Family income				
0-99 FPL (22.3%)	11.6%	11.0%	13.8%	10.1%
100-199% FPL (23.6%)	23.6%	14.4%	20.5%	20.1%
200-399% FPL (28.6%)	24.3%	36.3%	29.8%	34.1%
400% FPL or above (25.4%)	40.5%	38.3%	35.8%	35.7%
Geographic region				
Northeast (16.3%)	20.2%	20.6%	15.4%	17.4%
Midwest (22.8%)	25.7%	25.2%	24.8%	26.4%
West (24.0%)	30.5%	29.4%	31.3%	29.4%
South (37.0%)	23.6%	24.8%	28.5%	26.7%
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%

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Number of office visits				
0-1 visit (31.5%)	28.3%	21.7%	28.0%	26.6%
2-5 visits (52.7%)	49.3%	50.3%	52.1%	50.7%
6 or more visits (15.7%)	22.5%	28.0%	19.9%	22.7%
Received specialist care				
Yes (14.4%)	23.8%	27.3%	20.7%	22.3%
No (85.6%)	76.2%	72.7%	79.3%	77.7%
Received mental health care				
Yes (8.2%)	17.7%	28.1%	12.6%	16.8%
No (91.8%)	82.3%	71.9%	87.4%	83.2%
Emergency room (ER) visits				
One or more ER visits (17.8%)	13.7%	26.3%	17.9%	23.0%
No ER visits (82.2%)	86.3%	73.7%	82.1%	77.0%
Child takes prescription medication for 3 months regularly				
Yes (13.2%)	21.5%	31.2%	19.5%	24.4%
No (86.8%)	78.5%	68.8%	80.5%	75.6%
REASONS AND BENEFITS OF CAM USE, AMONG CHILDREN WHO USED MIND-BODY APPROACHES AND ANY OTHER TYPES OF CAM, 2012 NHIS				
Reasons and Benefits of Use (All CAM users, 2012 NHIS)	Among children who used mind-body approaches ²		Among children who used any other CAM asked about	
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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

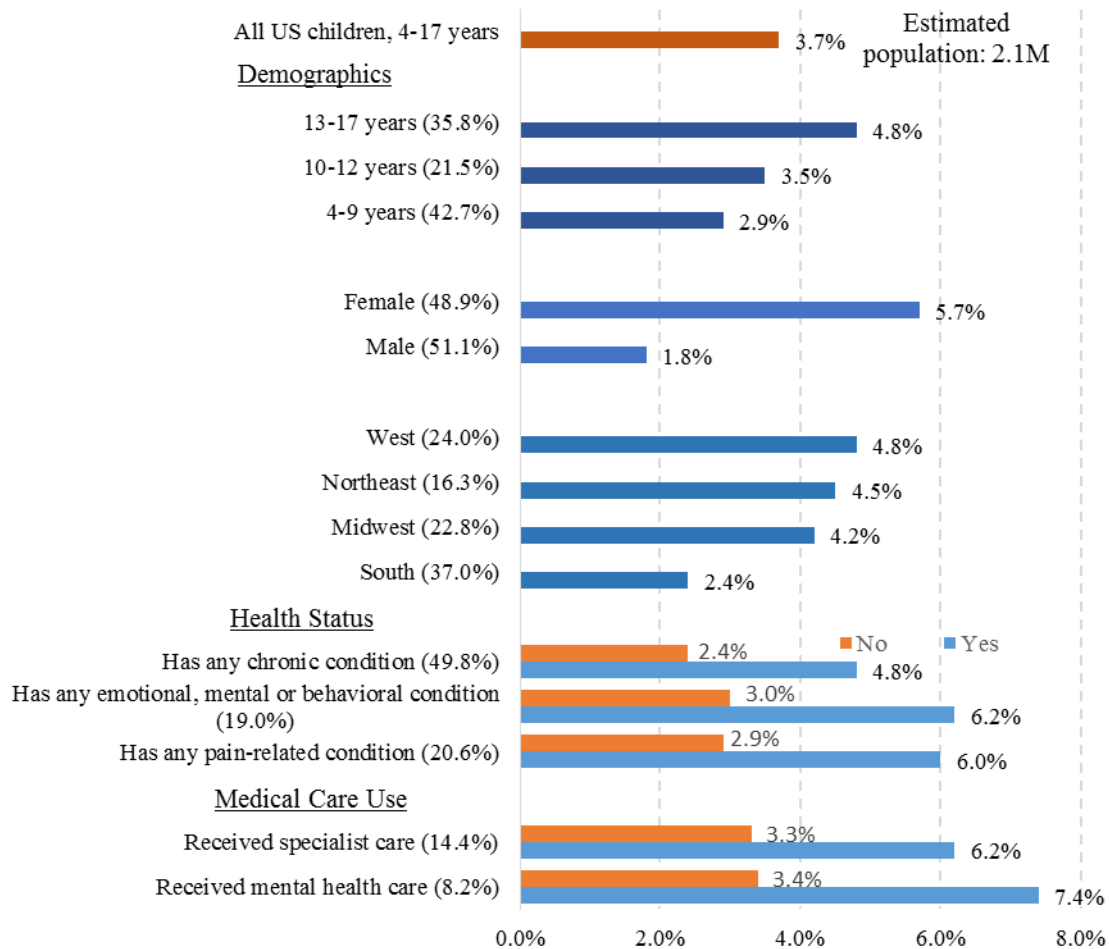
²Stress management classes and support group meetings were not asked in 2012. In 2012, there was no question specifically asking about use of deep breathing exercises. However, those who used hypnosis, biofeedback, meditation, guided imagery, progressive relaxation, yoga, tai chi or qi gong were asked 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.

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⁴Pain-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)



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

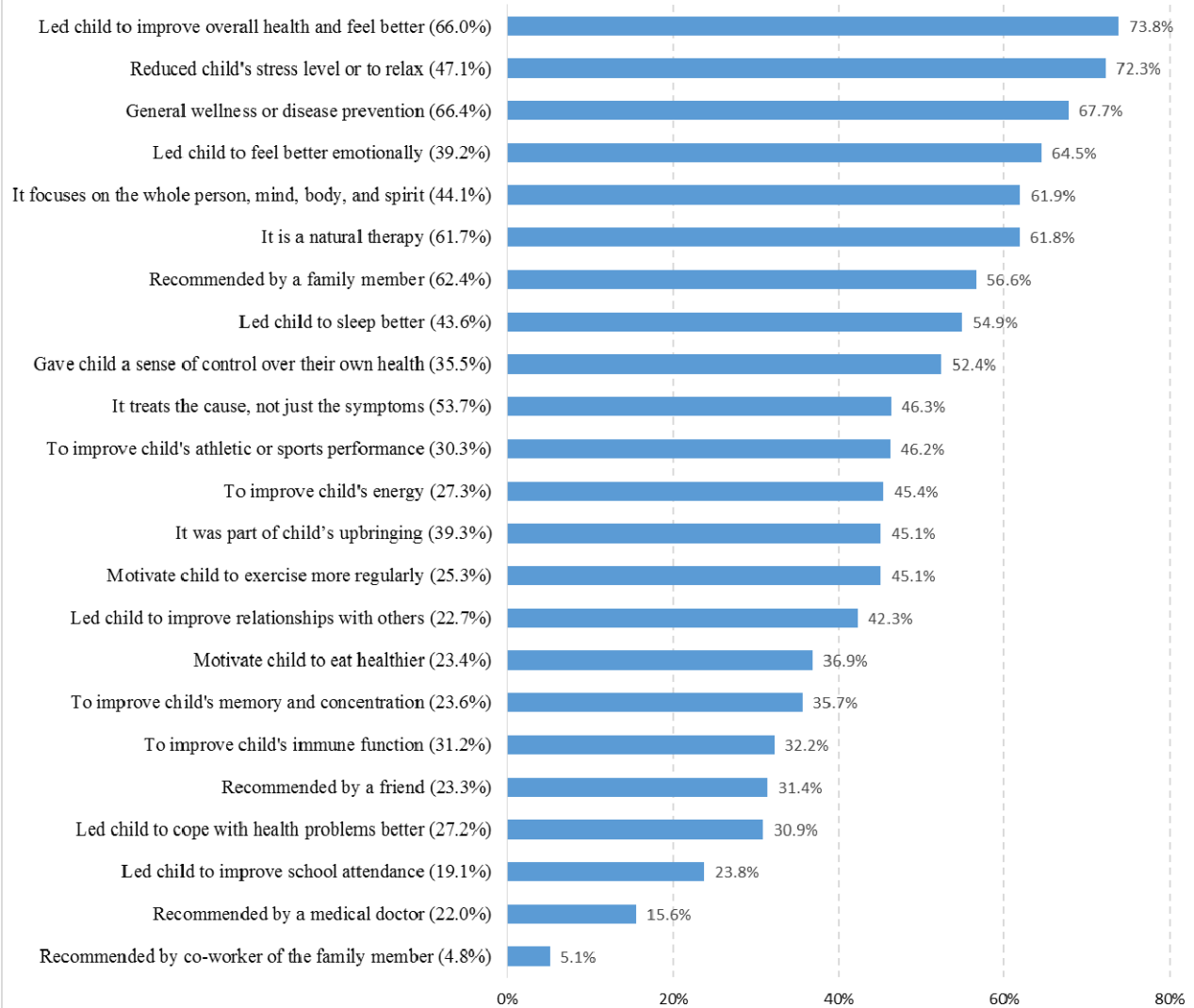
Note: Stress management classes and support group meetings were not asked in the 2012 NHIS. In 2012, there was no question specifically asking about use of deep breathing exercises.

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



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.

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