LUCILE PACKARD FOUNDATION FOR CHILDREN'S HEALTH

Kidsdata Survey

Prepared for

Kidsdata - Lucile Packard Foundation for Children's Health

Prepared by

Public Health Institute – Survey Research Group

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Executive Summary

Purpose

Public Health Institute (PHI) was hired as an external evaluator to gather feedback about the Kidsdata program of the Lucile Packard Foundation for Children's Health (LPFCH). The goal of this data collection effort was to help the Foundation better serve the field and to assess the impact of the Kidsdata website and other Kidsdata features on improving children's health and well-being in California.

Methods

Email invitations to complete a web-based survey about kidsdata.org use, impact, relevance, and importance were sent to the most current Kidsdata listery (n=5,468). Email reminders were sent to non-respondents and 198 respondents completed the survey, bringing the overall response rate to 4%. Open-ended responses were also reviewed and included in the results to provide further insight.

Results

Most respondents were non-profit program staff (37%), public agency staff (34%), a health care provider (13%), or an educator (12%). The majority of respondents (85%) reported that kidsdata.org was among the first online resources they checked in informational searches. Respondents reported that they most commonly used kidsdata.org for preparing presentations (62%), meeting community, programmatic or organizational goals (52%), or writing reports or grant proposals (51% and 45%, respectively).

Respondents described kidsdata.org as credible (78%), easy to use (72%), of high quality (57%), and comprehensive across topics (52%). Respondents reported that the most useful kidsdata.org resources included their website (98%), fact sheets, issue briefs, Data in Action tip sheets (97%), presentations and webinars (91%) and the twice-monthly Kidsdata News email (91%). Nearly two-thirds of respondents agreed that kidsdata.org had increased their understanding of factors affecting children's health and well-being (65%). Half of respondents agreed that Kidsdata had enabled their organization to improve services for children and families (50%).

Discussion

Kidsdata provides useful data to inform and improve programs and policies for organizations in California, including those focused on children with special health care needs. The results from this survey indicate Kidsdata is meeting Foundation goals to provide and leverage data to support programs and policies that impact children's health and well-being in California.

Recommendations for the Foundation include:

- Maintain and continue to update kidsdata.org.
- 2. Improve the precision of kidsdata.org estimates.
- 3. Assess whether additional communications tools could be added to kidsdata.org.

Conclusion

The results presented in this report will help inform and assess how the website and other Kidsdata features contribute to improving children's health and well-being in California. These insights and recommendations can help kidsdata.org better serve the field, assess the impact of the website, and strengthen its available data and website features for the future.

Purpose

The Lucile Packard Foundation for Children's Health's (LPFCH or Foundation) vision is that all children in the communities they serve will reach their maximum health potential. The Kidsdata program's goal is to focus public attention on key issues in child health in California and make it easy for stakeholders to use data to document those issues and promote action. Public Health Institute (PHI) was hired as an external evaluator to administer three surveys to assess the impact of LPFCH's work, specifically regarding their Kidsdata and grantmaking programs. The purpose of the Kidsdata program survey was to assess how the Kidsdata website and other Kidsdata features contribute to improving children's health and well-being. The intent was to gather feedback to help the Foundation better serve the field, as well as to assess kidsdata.org website use and program impact. A separate, companion report describes the results of additional surveys conducted to assess the impact of the LPFCH grantmaking program on the system of care for children with special health care needs (CSHCN).

Methods

Sample

Email contact information for the most current Kidsdata News subscribers was shared with PHI staff and used as the sample for this survey (n=5,468).

Survey Instrument

The survey included questions about website use, impact, relevance, and importance, as well as suggestions for the website's future (see Appendix III for survey instrument). The survey was programmed in Survey Monkey and responses were collected online using Survey Monkey software. The survey included closed- and open-ended questions. Respondents were allowed to skip any questions they did not wish to answer. On average, the survey took 6 minutes to complete. The email containing the survey link included a description of the purpose of the survey and a request for participation. The survey introduction specified that all answers would be kept anonymous to Kidsdata staff. For individuals who did not complete the survey after the first invitation, a reminder email invitation was sent. Data were collected over the course of 17 days from Wednesday, January 23rd, 2019 through Tuesday, February 12th, 2019.

Response Rate

Emails were sent to 5,468 Kidsdata News subscribers, inviting them to complete an online survey. Of these, 190 emails bounced, 18 respondents opted out of completing the survey, and 198 respondents completed the survey, bringing the overall response rate to 4%.

Analysis

Individual responses were exported into Excel Professional and further analyzed using SAS 9.4. The analytical data set was not linked to identifying information for the individual respondents. The number and percentage of respondents for each closed-ended response were tallied. When possible, "Other (please specify)" open-ended responses were recoded into the existing question response categories. Responses to open-ended questions were reviewed and included in the report to provide further

¹ Response rate excludes 190 bounced emails.

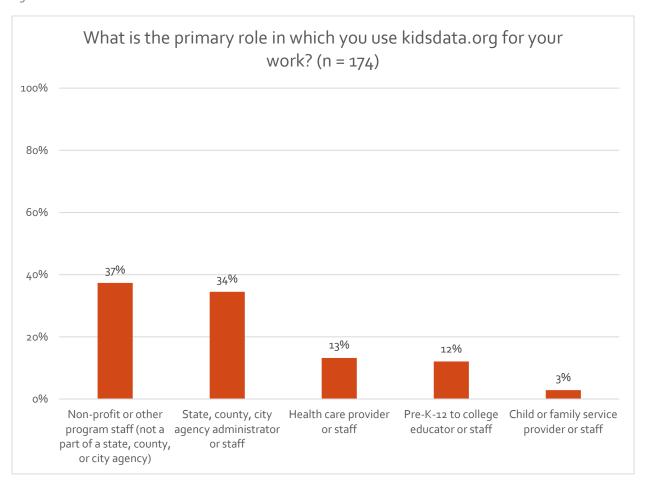
insight; they are presented throughout the report and in Tables 12 and 18 in Appendix II. For results presented in the report, answer options such as "Don't know" or "N/A" were dropped and percentages were calculated out of the remaining respondents, as shown in the table or figure. For results presented in Appendix II, percentages were calculated based on all responses to each question.

Results

Characteristics of Respondents' Organizations

Over two-thirds of respondents used kidsdata.org to support a non-profit organization (37%) or a public agency (34%) (Figure 1).

Figure 1

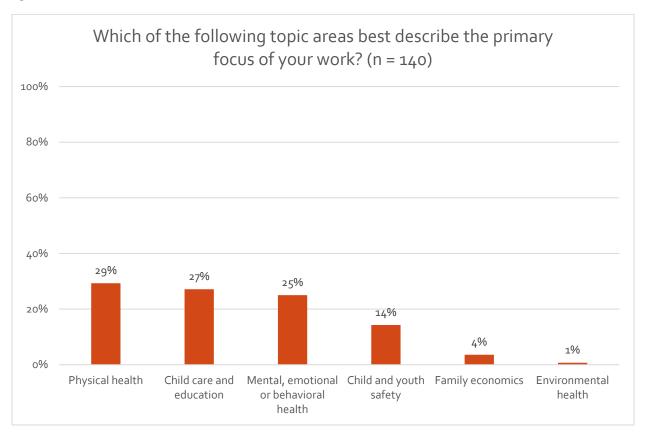


Kidsdata is a valuable resource to California and an important [California State Agency] partner.

- State Agency Administrator or Staff

Respondents' professional work most commonly focused on physical health (29%), child care and education (27%), or mental/emotional/behavioral health (25%) (Figure 2).

Figure 2

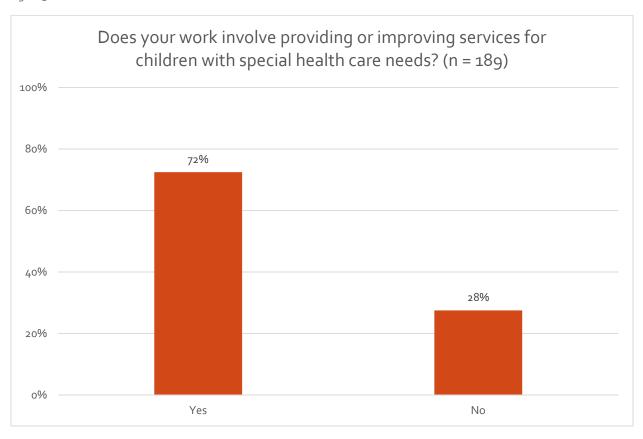


Continued expansion of maternal health and well-being measures is particularly relevant at a time when the policy environment in California increases focus on early childhood. Early childhood experiences are inextricably linked to maternal experiences.

- State Agency Administrator or Staff

Nearly three-quarters (72%) of respondents reported their work involved providing or improving services for children with special health care needs (Figure 3).

Figure 3



Your 2010 publication², Children with Special Health Care Needs, was a game changer for us.

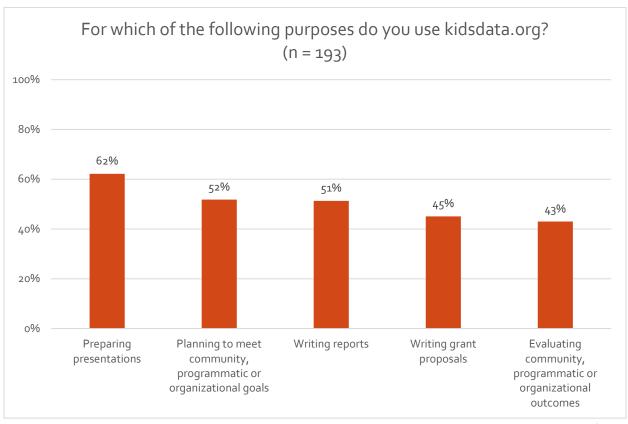
- Non-profit or Other Program Staff

² Lucile Packard Foundation for Children's Health. (2010). Children with special health care needs: A profile of key issues and a call to action. Retrieved from: https://www.lpfch.org/publication/children-special-health-care-needs-profile-key-issues-and-call-action.

Description of Kidsdata Site Usage

Respondents reported that they most commonly used kidsdata.org for preparing presentations (62%), meeting community, programmatic or organizational goals (52%), or writing reports or grant proposals (51% and 45%, respectively) (Figure 4).

Figure 4



Totals do not add up to 100% because respondents were permitted to choose more than one response. Top five responses displayed.

Kidsdata allows me to advocate for positions in an informed way.

- Educator

Respondents volunteered specific additional purposes for which they use the site including to support programmatic action and improve practitioner training (Table 1).

Table 1

Other purposes respondents shared for using kidsdata.org

Adding to community calendar

Assessing need

Be informed citizen

Constituent outreach material

Developing quality improvement projects & staff education

Educating child mental health professionals

Facilitating dissemination of data

I'm a marketing director for a children's hospital - so anything content related to turn into a news story or marketing strategy

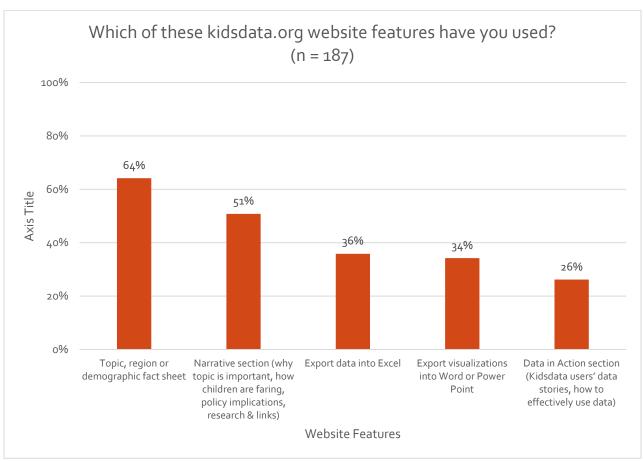
Keep informed on latest data

Public Health Surveillance

Raise awareness with [patients] and their parents on teen behavior

The most commonly used kidsdata.org website features used by respondents were fact sheets (64%) and narrative sections (51%) (Figure 5).

Figure 5



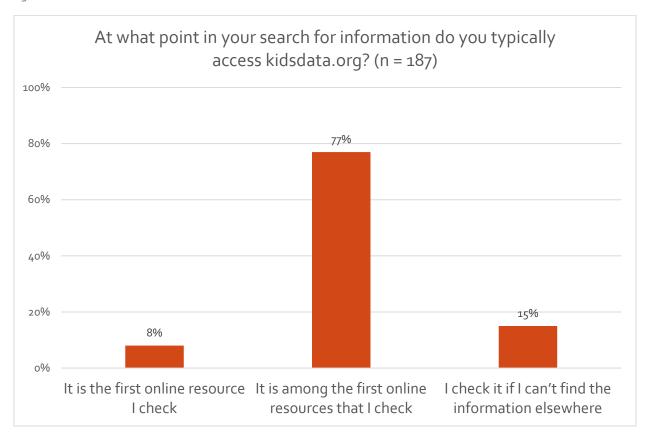
Totals do not add up to 100% because respondents were permitted to choose more than one response. Top five responses displayed.

Graphics are clear, summaries are excellent, links to further details always helpful.

- Educator

The majority of respondents (85%) reported that kidsdata.org was among the first online resources they checked in informational searches (Figure 6).

Figure 6

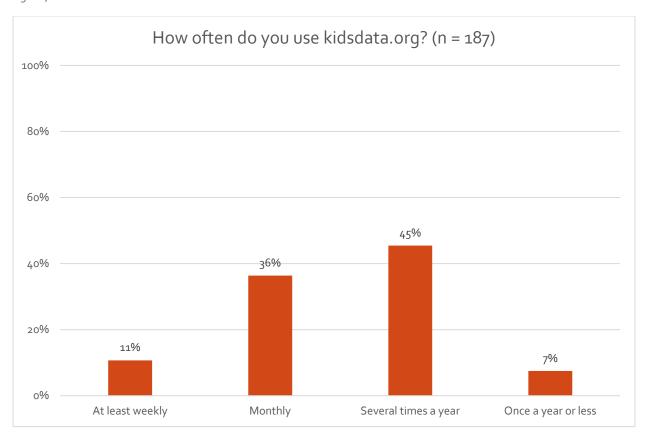


Can't imagine a scenario where we would not go to Kidsdata first and always.

- Non-profit or Other Program Staff

Almost half (47%) of respondents reported they used kidsdata.org at least monthly (Figure 7).

Figure 7

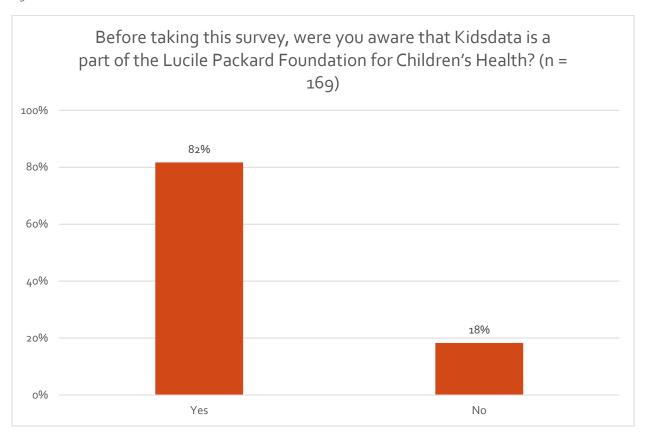


Kidsdata saves time, effort, and helps me think outside the box of my organization.

- County Agency Administrator or Staff

Most respondents (82%) were aware that kidsdata.org was a part of the Lucile Packard Foundation for Children's Health (Figure 8).

Figure 8



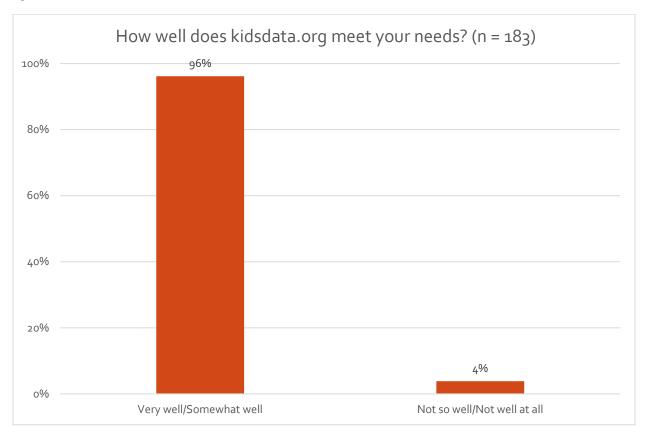
You are an invaluable part of the data community, which I fear gets less attention than needed or deserved. Facts matter, if people are paying attention...

- County Agency Administrator or Staff

Usefulness of Kidsdata

Nearly all respondents felt that kidsdata.org met their needs very well or somewhat well (96%) (Figure 9).

Figure 9

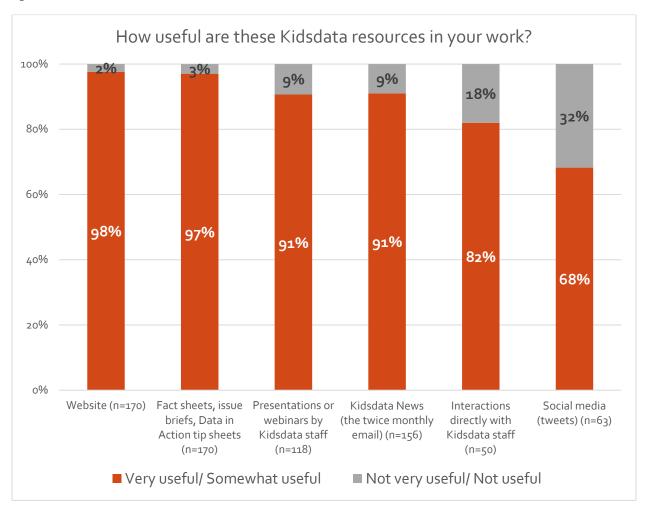


Kidsdata.org website is one of the finest and [most] well-developed websites out there. [The] ease of use and wealth of information on children's health issues are pluses.

- State Agency Administrator or Staff

Respondents reported that the most useful Kidsdata resources included their website (98%), fact sheets, issue briefs, Data in Action tip sheets (97%), presentations and webinars (91%) and the twice-monthly Kidsdata News email (91%) (Figure 10).

Figure 10

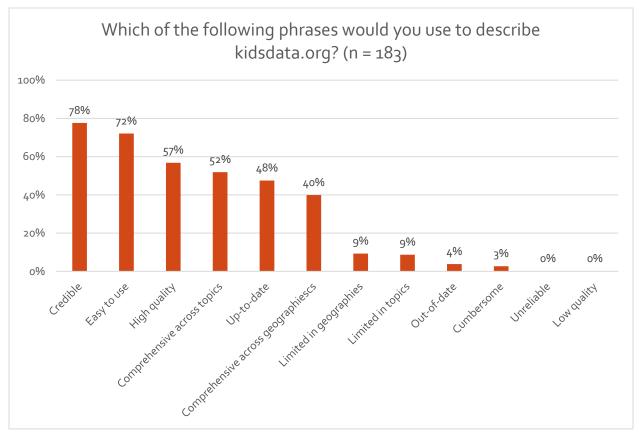


I think it's great, and an amazing resource to have all the indicators in one place!!! But the data is almost nonexistent for [County], and the regional data doesn't always help, although it's certainly better than NO data.

- County Agency Administrator or Staff

Respondents described kidsdata.org as credible (78%), easy to use (72%), of high quality (57%), and comprehensive across topics (52%) (Figure 11). Less than one out of ten respondents (9%) reported that kidsdata.org was limited in geographies. Four percent of respondents classified kidsdata.org as out-of-date. No respondents described kidsdata.org as unreliable or of low quality.

Figure 11



Totals do not add up to 100% because respondents were permitted to choose more than one response.

As an analyst for a child welfare agency, I prefer to use the charts and graphs available through Kidsdata rather than those available through public state sites. However, it would be great if Kidsdata could expand data points related to child welfare and foster care related to disparities.

- County Agency Administrator or Staff

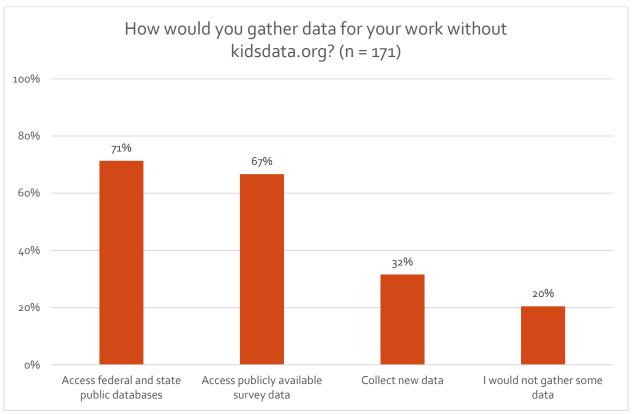
Respondents suggested ways in which Kidsdata could be improved. Suggestions ranged from expanding data on topics, geographic areas, and demographic groups to improving timeliness of data, and amplifying outreach and training (Table 2).

Table 2

Suggestions for improving kidsdata.org		
Theme	Sample Quotes	Count
Expanding data on	Would love more indicators related to resilience, positive	7
topics	relationships, and protective factors for child abuse and neglect.	
Expanding data on	Would like data for our small rural county.	5
geographic areas		
Expanding data on	We could really use help with more centralized data for children	3
demographic groups	with special needs in the school districts, broken down by type	
	of disability and sliced by income level.	
Improving timeliness	It would be more helpful if the data were more timely and there	4
	were more historical data points.	
Amplifying outreach	The website is flexible and cumbersome at the same time but it	4
and training	may be that I am not competent in using it. Maybe a tutorial	
	on how to use the reports, and modify them.	

One-fifth (20%) of respondents felt that they would not be able to get some of the data they needed without kidsdata.org (Figure 12). In addition, nearly one-third of respondents (32%) indicated they would need to collect new data without kidsdata.org.

Figure 12



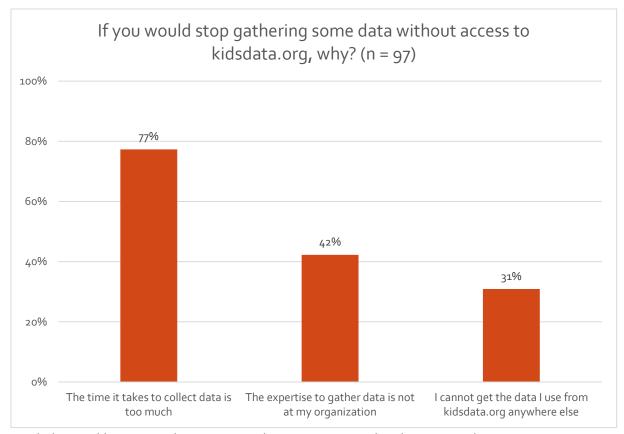
Totals do not add up to 100% because respondents were permitted to choose more than one response.

I'd have to look at many more websites/sources. Kidsdata consolidates wide-ranging data into one place, which is helpful and saves time.

- Social Sector Consultant

Among respondents who indicated they would stop gathering some data without access to kidsdata.org (n=97), more than three-quarters (77%) reported it would take too much time to collect data, and almost one-third (31%) reported that they would not be able to get the data they received from kidsdata.org anywhere else (Figure 13).

Figure 13



Totals do not add up to 100% because respondents were permitted to choose more than one response.

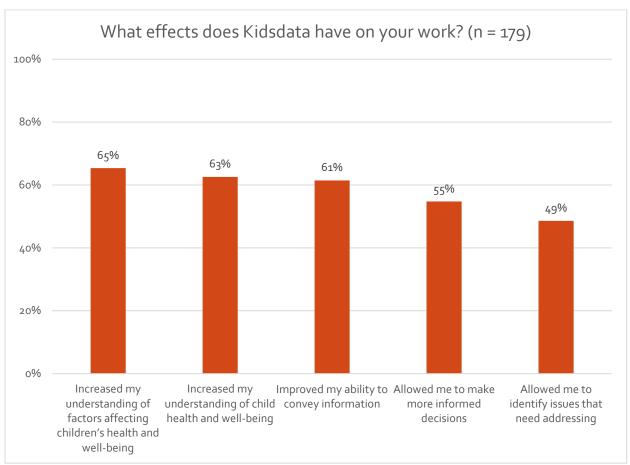
I rely on this resource and am so appreciative for this service.

- Non-profit or Other Program Staff

Effects and Impacts of kidsdata.org

Nearly two-thirds of respondents agreed that kidsdata.org had increased their understanding of factors affecting children's health and well-being (65%) and their understanding of children's health and well-being (63%) (Figure 14). Kidsdata also affected respondents' ability to convey information (61%) and make more informed decisions (55%).

Figure 14



Totals do not add up to 100% because respondents were permitted to choose more than one response. Only top five responses displayed.

The awareness of the numbers behind fiscal investment or lack of in Child Development and its consequences is the most powerful thing I have used with Kidsdata for policy makers in California.

- Health Care Provider or Staff

Respondents shared additional effects Kidsdata has had on their work, from incorporating data into disaster planning to comparing data by county (Table 3).

Table 3

Other effects respondents shared that Kidsdata has on their work:

Allowed me to show others how to find helpful data.

Being able to compare to other county data sets.

Credible source with easy navigation.

Help provide information for regional disaster planning.

Helps me describe issues to programs so they can decide how to address.

Provide impartial information to inform peers.

Provides relevancy.

Half of respondents agreed that Kidsdata had enabled their organization to improve services for children and families, and over one-third agreed that it helped increase collaboration (37%) and inform public policy development (37%) (Figure 15).

Figure 15



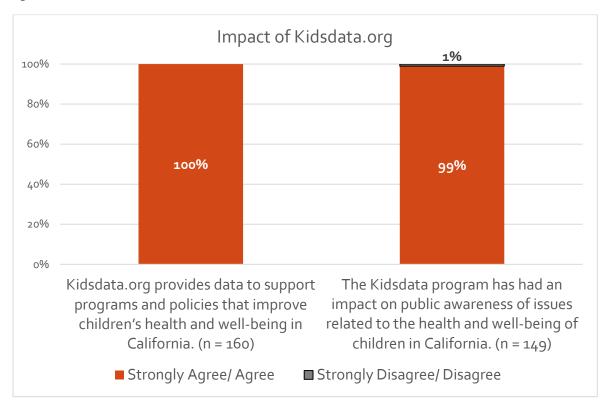
Totals do not add up to 100% because respondents were permitted to choose more than one response. Only top five responses displayed.

Kidsdata has been instrumental in encouraging my organization to use data specific to children by geography and demographics, versus using estimates based on federal data and/or adult data proxies.

- County Agency Administrator or Staff

Almost all respondents agreed or strongly agreed that Kidsdata supported programs and policies for, and had impacted public awareness of, issues related to health and well-being of children in California (Figure 16).

Figure 16



Thank you for your commitment to families and children.

- Non-profit or Other Program Staff

Discussion

Kidsdata provides useful data to inform and improve programs and policies for organizations in California, including those focused on children with special health care needs. Kidsdata was perceived by survey respondents as credible, easy to use, high quality, and comprehensive. Furthermore, all respondents agreed or strongly agreed that Kidsdata supported programs and policies for, and had impacted public awareness of, issues related to health and well-being of children in California, indicating that Kidsdata has been an important component of the Foundation's work to provide leadership and elevate the visibility of key issues to optimize children's health and well-being.

Kidsdata is a valuable resource for data on children's health. Most survey respondents checked kidsdata.org as one of the first online sources in information searches, suggesting that Kidsdata was a trusted and useful resource. In addition, survey respondents used Kidsdata frequently – nearly half used it monthly. This suggests kidsdata.org is an important and frequently used tool. Questions about the usefulness of Kidsdata found overwhelming agreement that kidsdata.org met the needs of survey respondents for data on children. The most commonly used website features were fact sheets and narratives, suggesting that kidsdata.org users were engaged and actively using a variety of the website benefits and features, in addition to the data available for download and export.

The results from this survey indicate Kidsdata is meeting Foundation goals to provide and leverage data to support programs and policies that impact children's health and well-being in California.

A limitation of the results of this survey is that respondents were identified and invited to participate using a convenience sample. Respondents who chose to complete the survey may not be representative of all kidsdata.org users.

Recommendations

- 1. **Maintain and continue to update kidsdata.org**: The website is a frequently used resource that is valued by those working in the fields of children's health and well-being.
- 2. **Improve the precision of kidsdata.org estimates**: Estimates could be provided for smaller geographies by obtaining additional data or by conducting modeling studies.
- 3. Assess whether additional communications tools could be added to kidsdata.org: Users reported frequently using the fact sheets and narratives, suggesting that other tools for communication could be helpful. The suite of communications tools could be expanded to include more fact sheets and narratives, or other tools that the Foundation's communications team deems helpful. Focus groups or key informant interviews of users could be conducted to determine what additional tools may be helpful.

Conclusion

Kidsdata users who responded to this survey were highly satisfied with kidsdata.org. The website has allowed them to use data to design, advocate for, and implement programs and policies that impact children's health and well-being in California. The Foundation may wish to consider expanding Kidsdata to meet the evolving needs of stakeholders to include more timely data and analyses for smaller geographies.

The results presented in this report will help inform and assess how the website and other Kidsdata features contribute to improving children's health and well-being in California. These insights and

recommendations can help kidsdata.org better serve the field, assess the impact of the website, and strengthen its available data and website features for the future.

Appendix I: Tables of Report Figures

Tables below reflect the information shared in report figures and are numbered to correspond to the figures in the report.

Table for Figure 1

What is the primary role in which you use kidsdata.org for your work? (n = 174)			
	n	%	
Non-profit or other program staff (not a part of a state, county, or city agency)	65	37%	
State, county, city agency administrator or staff	60	34%	
Health care provider or staff	23	13%	
Pre-K-12 to college educator or staff	21	12%	
Child or family service provider or staff	5	3%	

Table for Figure 2

Which of the following topic areas best describe the primary focus of your work? (n = 140)			
	n	%	
Physical health	41	29%	
Child care and education	38	27%	
Mental, emotional or behavioral health	35	25%	
Child and youth safety	20	14%	
Family economics	5	4%	
Environmental health	1	1%	

Table for Figure 3

Does your work involve providing or improving services for children with special health care needs? (n = 189)		
	n	%
Yes	137	72%
No	52	28%

Table for Figure 4

For which of the following purposes do you use kidsdata.org? (n = 193)			
	n	%	
Preparing presentations	120	62%	
Planning to meet community, programmatic or organizational goals	100	52%	
Writing reports	99	51%	
Writing grant proposals	87	45%	
Evaluating community, programmatic or organizational outcomes	83	43%	

Totals do not add up to 100% because respondents were permitted to choose more than one response. Only top five responses displayed.

Table for Table 1

Other purposes respondents shared for using kidsdata.org

Adding to community calendar

Assessing need

Be informed citizen

Constituent outreach material

Developing quality improvement projects & staff education

Educating child mental health professionals

Facilitating dissemination of data

I'm a marketing director for a children's hospital - so anything content related to turn into a news story or marketing strategy

Keep informed on latest data

Public Health Surveillance

Raise awareness with [patients] and their parents on teen behavior

Table for Figure 5

Which of these kidsdata.org website features have you used? (n = 187)			
	n	%	
Topic, region or demographic fact sheet	120	64%	
Narrative section (why topic is important, how children are faring, policy implications, research & links)	95	51%	
Export data into Excel	67	36%	
Export visualizations into Word or Power Point	64	34%	
Data in Action section (Kidsdata users' data stories, how to effectively use data)	49	26%	

Totals do not add up to 100% because respondents were permitted to choose more than one response. Only top five responses displayed.

Table for Figure 6

At what point in your search for information do you typically access kidsdata.org? (n = 187)				
n %				
It is the first online resource I check	15	8%		
It is among the first online resources that I check	144	77%		
I check it if I can't find the information elsewhere	28	15%		

Table for Figure 7

How often do you use kidsdata.org? (n = 187)		
	n	%
At least weekly	20	11%
Monthly	68	36%
Several times a year	85	45%
Once a year or less	14	7%

Table for Figure 8

Before taking this survey, were you aware that Kidsdata is a part of the Lucile Packard Foundation for Children's Health? (n = 169)		
	n	%
Yes	138	82%
No	31	18%

Table for Figure 9

How well does kidsdata.org meet your needs? (n = 183)		
	n	%
Very well/Somewhat well	176	96%
Not so well/Not well at all	7	4%

Table for Figure 10

How useful are these Kidsdata resources in your work?					
		Very useful/ Not very useful/ Res			
	n	%	n	%	n
Website	166	98%	4	2%	170
Fact sheets, issue briefs, Data in Action tip sheets	165	97%	5	3%	170
Presentations or webinars by Kidsdata staff	107	91%	11	9%	118
Kidsdata News (the twice monthly email)	142	91%	14	9%	156
Interactions directly with Kidsdata staff	41	82%	9	18%	50
Social media (tweets)	43	68%	20	32%	63

Table for Figure 11

	n	%
Credible	142	77.6
Easy to use	132	72.1
High quality	104	56.8
Comprehensive across topics	95	51.9
Up-to-date	87	47.5
Comprehensive across geographies	73	39.9
Limited in geographies	17	9.3
Limited in topics	16	8.7
Out-of-date	7	3.8
Cumbersome	5	2.7
Unreliable	0	0
Low quality	0	0

Totals do not add up to 100% because respondents were permitted to choose more than one response.

Table for Table 2

Suggestions for impro	oving kidsdata.org	
Theme	Quotes	Count
Expanding data on topics	Would love more indicators related to resilience, positive relationships, and protective factors for child abuse and neglect.	7
Expanding data on geographic areas	Would like data for our small rural county.	5
Expanding data on demographic groups	We could really use help with more centralized data for children with special needs in the school districts, broken down by type of disability and sliced by income level.	3
Improving timeliness	It would be more helpful if the data were more timely and there were more historical data points.	4
Amplifying outreach and training	The website is flexible and cumbersome at the same time but it may be that I am not competent in using it. Maybe a tutorial on how to use the reports, and modify them.	4

Table for Figure 12

How would you gather data for your work without kidsdata.org? (n = 171)		
	n	%
Access federal and state public databases	122	71%
Access publicly available survey data	114	67%
Collect new data	54	32%
I would not gather some data	35	20%

Totals do not add up to 100% because respondents were permitted to choose more than one response.

Table for Figure 13

If you would stop gathering some data without access to kidsdata.org, why? (n = 97)			
	n	%	
The time it takes to collect data is too much	75	77%	
The expertise to gather data is not at my organization	41	42%	
I cannot get the data I use from kidsdata.org anywhere else	30	31%	

Totals do not add up to 100% because respondents were permitted to choose more than one response.

Table 4 Table for Figure 14

What effects does Kidsdata have on your work? (n = 179)			
	n	%	
Increased my understanding of factors affecting children's health and well-being	117	65%	
Increased my understanding of child health and well-being	112	63%	
Improved my ability to convey information	110	61%	
Allowed me to make more informed decisions	98	55%	
Allowed me to identify issues that need addressing	87	49%	

Totals do not add up to 100% because respondents were permitted to choose more than one response. Only top five responses displayed.

Table 5 Table for Figure 15

What outcomes has your organization achieved, in part because of Kidsdata? (n = 172)			
	n	%	
Improved services for children and families	86	50%	
Increased collaboration among agencies	64	37%	
Better informed public policy development	63	37%	
New programs developed	36	21%	
New policies developed	26	15%	

Totals do not add up to 100% because respondents were permitted to choose more than one response.

Table 6 Table for Figure 16

Impact of kidsdata.org				
How much do you agree with the following statements?	Strongly Agree/ Agree			
	n	%	n	%
Kidsdata.org provides data to support programs and policies that improve children's health and well-being in California. (n=160)	160	100%	0	0%
The Kidsdata program has had an impact on public awareness of issues related to the health and well-being of children in California. (n=149)	148	99%	1	1%

Appendix II: Tables of All Findings

Tables below are numbered to correspond to the question numbering in the original survey instruments (see: Appendix III: Survey Instruments). In parenthesis, the corresponding report figure number is given.

Q1 What is the primary role in which you use kidsdata.org for your work? (n = 197) (Figure 1)	n	%
Non-profit or other program staff (not a part of a state, county, or city agency)	65	33%
County agency administrator or staff	50	25%
Health care provider or staff	23	12%
Pre-K-12 educator or staff	17	9%
State agency administrator or staff	8	4%
Child or family service provider or staff	5	3%
College educator or staff	4	2%
Journalist or other communications professional	4	2%
Legislator or legislative staff	3	2%
City agency administrator or staff	2	1%
Other (please specify)	16	8%

"Other" Responses

- American Indian Program
- Black African American Grandmother/Child Advocate
- CA citizen
- Child Advocacy Center
- Consultant
- Consulting planner and evaluator with county and state
- Developing grants
- Former Juvenile Dependency Attorney
- Freelance grant writer
- Grant Writing
- Medi-Cal Managed Health Plan
- Nutrition Educator
- Parents
- Planning consultant for independent recreation and park agency
- Researcher
- Social sector consultant

Q2 Which of the following topic areas best describe the primary focus of your work? (n = 198) (Figure 2)	n	%
Physical health	41	20.7
Mental, emotional or behavioral health	35	17.7
Child care and education	38	19.2
Child and youth safety	20	10.1

Q2 Which of the following topic areas best describe the primary focus of your work? (n = 198) (Figure 2)	n	%
Family economics	5	2.5
Environmental health	1	0.5
Other (please specify)	58	29.3
All or almost all of the above	10	
Administrative assistant	1	
Child demographics	2	
Child maltreatment or welfare	2	
Children with special needs or developmental disabilities	5	
Children's health broadly defined (physical, mental, developmental)	2	
Child recreation		
Disaster preparedness	2	
Early childhood	2	
 External affairs and special projects for CA Health and Human Services Agency 		
• Family support	2	
 Healthcare (Federally-Qualified Health Center and outreach) 	1	
• Food and nutrition	1	
Health disparities	1	
Health science	1	
ICWA strengthens families	1	
Inland Empire meetings	1	
Legal services	1	
Maternal, infant, child, and adolescent health	3	
Oral Health	3	
Perinatal care, child health, youth services, and teen parenting	1	
Policy or advocacy	2	
Physical, behavioral, and community health	1	
Physical and behavioral health, family support services, after-school programming, workforce development, truancy intervention	1	
Preventative care	1	
Social services	1	
Special needs connections in the community	1	
Tobacco use prevention education	1	
Youth development	2	
Youth substance abuse prevention	1	

Q3 Does your work involve providing or improving services for children with special health care needs? (n = 197) (Figure 3)	n	%
Yes	137	69.5
No	52	26.4
Don't Know/Not Sure	8	4.1

Q4 For which of the following purposes do you use kidsdata.org? (n = 193) (Figure 4)	n	%*
Writing reports	99	51.3
Writing news or feature articles	25	13.0
Writing newsletters, brochures, or other informational material	44	22.8
Writing grant proposals	87	45.1
Preparing presentations	120	62.2
Posting to social media (e.g., Facebook, twitter)	29	15.0
Planning to meet community, programmatic or organizational goals	100	51.8
Evaluating community, programmatic or organizational outcomes	83	43.0
Conducting policy work	53	27.5
Personal interest	71	36.8
Other (please specify)	14	7.3

"Other" Responses

- Assessing need
- Clinical services and teaching
- Community needs assessment
- Constituent outreach materials
- Educating child mental health professionals
- Facilitating dissemination of data
- Fiscal impact of having or not having services
- Identifying the scope of the need in our community
- Improving programming
- Informing quality improvement projects
- Legislative advocacy
- Sharing with peers
- Part of pediatric trainings
- Public Health Surveillance
- Writing strategic plans

^{*}Percent will not add to 100% as this was a select all that apply question.

Q5 What is the <i>primary purpose</i> for which you use kidsdata.org? (n = 193) (Not referenced in body of report)	n	%
Writing reports	13	6.7
Writing news or feature articles	3	1.6
Writing newsletters, brochures, or other informational material	6	3.1
Writing grant proposals	33	17.1
Preparing presentations	23	11.9
Posting to social media (e.g., Facebook, twitter)	0	0
Planning to meet community, programmatic or organizational goals	36	18.7
Evaluating community, programmatic or organizational outcomes	25	13.0
Conducting policy work	19	9.8
Personal interest	23	11.9
Other (please specify)	12	6.2

"Other" Responses

- Adding to community calendar
- Assessing need
- Be informed citizen
- Constituent outreach material
- Developing quality improvement projects & staff education
- Educating child mental health professionals
- Facilitating dissemination of data
- I'm a marketing director for a children's hospital, so anything content related to turn into a news story or marketing strategy
- Keep informed on latest data
- Not sure
- Public Health Surveillance
- Raise awareness with patients and their parents on teen behavior

Q6 How often do you use kidsdata.org? (n = 187) (Figure 7)	n	%
Daily	1	0.5
Weekly	19	10.2
Monthly	68	36.4
Several times a year	85	45.5
Once a year or less	14	7.5

Q7 At what point in your search for information do you typically access kidsdata.org? (n = 187) (Figure 6)	n	%
It is the first online resource I check	15	8.0
It is among the first online resources that I check	144	77.0
I check it if I can't find the information elsewhere	28	15.0

Q8 Which of these kidsdata.org website features have you used? (n = 187) (Figure 5)	n	%*
Export visualizations into Word or Power Point	64	34.2
Export data into Excel	67	35.8
Embed visualization onto my website	11	5.9
Topic, region or demographic fact sheet	120	64.2
Social media sharing	15	8.0
Narrative section (why topic is important, how children are faring, policy implications, research & links)	95	50.8
Data in Action section (Kidsdata users' data stories, how to effectively use data)	49	26.2
None of the above	17	9.1

^{*}Percent will not add to 100% as this was a select all that apply question.

Q9 How well does kidsdata.org meet your needs? (n = 183)	n	%
(Figure 9)		
Very well	88	48.1
Somewhat well	88	48.1
Not so well	5	2.7
Not well at all	2	1.1

Q10 Which of the following phrases would you use to describe kidsdata.org? (n = 183) (Figure 11)	n	%*
Comprehensive across topics	95	51.9
Comprehensive across geographies	73	39.9
Easy to use	132	72.1
Up-to-date	87	47.5
Credible	142	77.6
High quality	104	56.8
Limited in geographies	17	9.3
Limited in topics	16	8.7
Cumbersome	5	2.7
Out-of-date	7	3.8
Unreliable	0	0
Low quality	0	0

^{*}Percent will not add to 100% as this was a select all that apply question.

Q11 How useful are these Kidsdata resources in your work? (n = 180) (Figure 10)	n	%
Website		
Very useful	104	57.8
Somewhat useful	62	34.4
Not very useful	4	2.2
Not Useful	0	0
Not applicable	10	5.6
Fact sheets, issue briefs, Data in Action tip sheets		
Very useful	101	56.1
Somewhat useful	64	35.6
Not very useful	3	1.7
Not useful	2	1.1
Not applicable	10	5.6
Presentations or webinars by Kidsdata staff		
Very useful	47	26.1
Somewhat useful	60	33.3
Not very useful	7	3.9
Not useful	4	2.2
Not applicable	62	34.4
Kidsdata News (the twice monthly email)		
Very useful	59	32.8
Somewhat useful	83	46.1
Not very useful	12	6.7
Not useful	2	1.1
Not applicable	24	13.3
Social media (tweets)		
Very useful	12	6.7
Somewhat useful	31	17.2
Not very useful	10	5.6
Not useful	10	5.6
Not applicable	117	65.0
Interactions directly with Kidsdata staff		
Very useful	20	11.1
Somewhat useful	21	11.7
Not very useful	9	5.0
Not Useful	0	0
Not applicable	130	72.2

Q12 What effects does Kidsdata have on your work? (n = 179)	n	%*
(Figure 14)		
Increased my understanding of child health and well-being	112	62.6
Increased my understanding of factors affecting children's health and well-being	117	65.4
Improved my ability to convey information	110	61.5
Increased my visibility and influence	22	12.3
Increased my organization's visibility and influence	25	14.0
Allowed me to identify issues that need addressing	87	48.6
Allowed me to make more informed decisions	98	54.7
Other (please specify)	11	6.1

"Other" Responses

- Allowed me to show others how to find helpful data.
- Being able to compare to other county data sets
- Credible Source with easy navigation
- Demographics
- Help provide information for regional disaster planning
- Helps me describe issues to programs so they can decide how to address
- Not much, as there is usually little data for my small county.
- Not sure
- Provide impartial information to inform peers
- Provides relevancy

^{*}Percent will not add to 100 as this was a select all that apply question.

Q13 What is the primary effect of Kidsdata on your work? (n = 176) (Not referenced in body of report)	n	%
Increased my understanding of child health and well-being	34	19.1
Increased my understanding of factors affecting children's health and well-being	35	19.7
Improved my ability to convey information	50	28.1
Increased my organization's visibility and influence	3	1.7
Allowed me to identify issues that need addressing	29	16.3
Allowed me to make more informed decisions	24	13.5
Other (please specify)	1	0.6

"Other" Response

• Not much, as I really wish there were data for our county, even though our numbers are so small.

Q14 What outcomes has your organization achieved, in part because of Kidsdata? (n = 172) (Figure 15)	n	%*
Increased collaboration among agencies	64	37.2
New programs developed	36	20.9
New policies developed	26	15.1
Better informed public policy development	63	36.6
Improved services for children and families	86	50.0
Measurable improvements in child health	27	15.7
Other (please specify)	33	19.2
Conveying information	10	
• None	5	
Improved reporting or products	5	
Obtained funding	4	
Not applicable	3	
Unsure	2	
Grant writing	1	

^{*}Percent will not add to 100% as this was a select all that apply question.

Q15 What primary outcome has your organization achieved, in part because of Kidsdata? (n = 162) (Not referenced in body of report)	n	%
Increased collaboration among agencies	36	22.4
New programs developed	14	8.6
New policies developed	5	3.1
Better informed public policy development	29	17.9
Improved services for children and families	45	27.8
Measurable improvements in child health	8	4.9
Other (please specify)	28	17.3
Conveying information	10	
• None	6	
Obtained funding	5	
Improved reporting or products	4	
Unsure	3	

Q16 How would you gather data for your work without kidsdata.org? (n = 171) (Figure 12)	n	%*
Access federal and state public databases	122	71.3
Access publicly available survey data	114	66.7
Collect new data	54	31.6
I would not gather some data	35	20.5
Other (please specify)	13	7.6

"Other" Responses

- Access PH specific data
- Attempt to make correlations from local, state and federal data
- Go directly to the people that lead our county departments and ask them to provide me with data.
- Healthy Places Index, kidscount, etc.
- I'd have to look at many more websites/sources. Kidsdata consolidates wide-ranging data into one place, which is helpful and saves time.
- Kidsdata is easier to use and find relevant data for our needs than any other source.
- Limited ability to get data because we are a very rural county
- No impact
- Not sure
- Other website
- Rely on internal patient-care database
- Yours is the best data source for CA school children

^{*}Percent will not add to 100% as this was a select all that apply question.

Q17 If you would stop gathering some data without access to kidsdata.org, why? (n = 170) (Figure 13)	n	%*
I cannot get the data I use from kidsdata.org anywhere else	30	17.6
The time it takes to collect data is too much	75	44.1
The expertise to gather data is not at my organization	41	24.1
Not applicable	66	38.8
Other (please specify)	10	5.9

"Other" Responses

- As long as Kidsdata is a resource I would use it as a go-to source
- Can't imagine a scenario where we would not go to Kidsdata first and always.
- For some data, it would be time-consuming or too difficult to get without Kidsdata.
- Grant specific requirements direct us to the source for baseline comparison
- It is hard to find certain subsets or break outs of data
- It's difficult to gather local data.
- Kidsdata saves time, effort, and helps me think outside the box of my organization
- Need info at zip code or census level
- No impact
- Since our county is very rural and small, there is not always data available

^{*}Percent will not add to 100% as this was a select all that apply question.

Q18 Kidsdata.org provides data to support programs and policies n		%
that improve children's health and well-being in California. (n =		
169) (Figure 16)		
Strongly Agree	108	63.9
Agree	52	30.8
Disagree	0	0
Strongly Disagree	0	0
Don't know	9	5.3

Q19 The Kidsdata program has had an impact on public awareness of issues related to the health and well-being of children in California. (n = 169) (Figure 16)	n	%
Strongly Agree	88	52.1
Agree	60	35.5
Disagree	1	0.6
Strongly Disagree	0	0
Don't know	20	11.8

Q20 Before taking this survey, were you aware that Kidsdata is a part of the Lucile Packard Foundation for Children's Health? (n = 169) (Figure 8)	n	%
Yes	138	81.7
No	31	18.3

Suggestions	n=21
Topic	 Would love more indicators related to resilience, positive relationships, and protective factors for child abuse and neglect. Please include more information on oral health. I don't use the data very often because it tends to be too basic for application on specific policy topics. For example, the Jan 8 slide on Troubling data on LGBT youth shows that alcohol, e-cigs, and pot use is 2+ times the gentle pop. OK. But without something more, that's not very actionable info. Need more specific data about transiency and child homelessness in larger school districts. As an analyst for a child welfare agency, I prefer to use the charts and graphs available through Kidsdata rather than those available through public state sites. However, it would be great if Kidsdata could expand data points related to child welfare and foster care related to disparities. Kidsdata is a valuable resource to California and an important [California State Agency] partner. Continued expansion of maternal health and well-being measures is particularly relevant at a time when the policy environment in California increases focus on early childhood. Early childhood experiences are inextricably linked to maternal experiences. I would like to recommend Kidsdata.org track pediatric hospital bed capacity, PICU beds, NICU beds, OB beds and numbers of children using emergency departments by age
Geographies	 Would like data for our small rural county. It is incredibly valuable tool and is becoming much easier to navigate through Please keep targeted focus on collecting county specific data from rural in more areas. We can be of great help in this process. Is it possible to obtain data at the zip code level in a specific county? It would be nice if data could be even more specific to cities/communities. I seemed to use it more when Kidsdata first came out It would be nice if Kidsdata could drill down on some of the indicators for smaller counties that have fewer than 65,000 residents
Demographic	 We could really use help with more centralized data for children with special needs in the school districts, broken down by type of disability and sliced by income level. Include more information regarding California Indian tribes. It would be useful to provide more data for the prenatal through age 5 population specifically.

Q21 Is there anything else you would like to share about kidsdata.org? (Table 2)	
Suggestions	n=21
Timeliness	 This is a great resource. It would be more helpful if the data were more timely and there were more historical data points. I feel that some of your data, particularly school-related data, is more outdated than it needs to be. Why is that? In addition, the information available through Kidsdata on child welfare/safety is generally 2-3 years behind compared to available state data which generally reports within 1 year, depending on data point. Sometimes the data is not as up to date as what else I can find.
Outreach	 The website is flexible and cumbersome at the same time but it may be that I am not competent in using it. Maybe a tutorial on how to use the reports, and modify them. Thanks. Talk more about root causes; more advocacy Define developmental phases and dedicate one topic on children's health per month. For example, January is dental health month. So come up with a sentence for school age, pre-teen, and teens about oral health. This would be an idea in addition to your already great newsletter email. Thank you! Great resource. But after taking the survey, would appreciate a TA chat to learn how to better incorporate into our work.

Q21 Is there anything else you would like to share about kidsdata.org? (Not referenced in body of report; quotes included throughout report)

Accolades n=17

- Kidsdata.org website is one of the finest and well-developed websites out there. Ease of use and wealth of information on children health issues are pluses.
- You are an invaluable part of the data community, which I fear gets less attention than needed or deserved. Facts matter, if people are paying attention...
- I think it's great, and an amazing resource to have all the indicators in one place!!! But the data is almost nonexistent for [County], and the regional data doesn't always help, although it's certainly better than NO data.
- Your 2010 publication, Children with Special Health Care Needs, was a game changer for us. The information it contained allowed us to be more successful in finding funding for our programs.
- I find the data very interesting and informative. I share with others who may not know about it and/or with people who are interested in certain topics and in decision making positions. though I am not a decision maker in my org, Kidsdata allows me to advocate for positions in an informed way. Find it very easy to use...graphics are clear, summaries are excellent, links to further details always helpful.
- Kidsdata has been instrumental in encouraging my organization to use data specific to children by geography and demographics, versus using estimates based on federal data and/or adult data proxies
- I rely on this resource and am so appreciative for this service.
- Thank you for your commitment to families and children.
- Great data source = obviously I under-utilize it
- Keep up the good work. Thank you
- Keep up with this great resource.
- Keep up the great work
- Keep up the great work!
- Thank you for your work!
- Keep doing a great work
- Thank you for what you do
 - Thank you!

Other Comments n=q

- The awareness of the numbers behind fiscal investment or lack of in Child Development and its consequences is the most powerful thing I have used with Kidsdata for policy makers in California.
- We don't have much interaction in this community with Kidsdata.org. Lucile Packard Foundation doesn't support my area with the type of work we do.
- Would love to see more funding opportunities for community behavioral health for early childhood mental health, transition age youth
- I knew it was foundation funded but I get mixed up. The other day I told someone it was Annie E. Casey Foundation. Sorry!
- We get most of our data from the Family Health Outcomes Project through UCSF instead of Kidsdata
- I have not used the site extensively, but am exploring it more with this survey
- I'm not active in the field at this time, but still interested in the information.
- The average person living in the Bay Area is not aware that Kidsdata exists.
- Your website was better in aggregating data before it merged beyond [County]

Appendix III: Survey Instrument



Thank you for sharing your thoughts about Kidsdata. Your responses will help us refine kidsdata.org.

This survey covers the following content:

- How do you use kidsdata.org?
- What is your role in children's health and well-being?
- Does Kidsdata meet your expectations as an information resource?

Your responses are confidential. We estimate that this survey will take about 10 minutes to complete. The survey will close on Monday, January 28.



[*] 1. What is the primary role in which you use kidsdata.org for your work? Please select one.
Legislator or legislative staff
State agency administrator or staff
County agency administrator or staff
City agency administrator or staff
Non-profit or other program staff (not a part of a state, county, or city agency)
Health care provider or staff
Child or family service provider or staff
Pre-K-12 educator or staff
College educator or staff
Journalist or other communications professional
Other (please specify)

* 2. V	Which of the following topic areas best describe the primary focus of your work? Please
sel	ect one.
	Physical health
	Mental, emotional or behavioral health
	Child care and education
	Child and youth safety
\bigcirc	Family economics
\bigcirc	Environmental health
	Other (please specify)



* 3. Does your work involve providing or improving services for children with special health care needs?
Yes
○ No
Not Sure/Don't Know



* 4. For which of the following purposes do you use kidsdata.org? Select all that apply.
Writing reports
Writing news or feature articles
Writing newsletters, brochures, or other informational material
Writing grant proposals
Preparing presentations
Posting to social media (e.g., Facebook, twitter)
Planning to meet community, programmatic or organizational goals
Evaluating community, programmatic or organizational outcomes
Conducting policy work
Personal interest
Other (please specify)

* 5. V	What is the <u>primary</u> purpose for which you use kidsdata.org? Please select one.	
	Writing reports	
	Writing news or feature articles	
	Writing newsletters, brochures, or other informational material	
	Writing grant proposals	
	Preparing presentations	
	Posting to social media (e.g., Facebook, twitter)	
	Planning to meet community, programmatic or organizational goals	
	Evaluating community, programmatic or organizational outcomes	
	Conducting policy work	
	Personal interest	
	Other (please specify)	



* 6. How often do you use kidsdata.org?
Daily
Weekly
Several times a year
Once a year or less
* 7. At what point in your search for information do you typically access kidsdata.org?
It is the first online resource I check
It is among the first online resources that I check
I check it if I can't find the information elsewhere
* 8. Which of these kidsdata.org website features have you used? Select all that apply.
Export visualizations into Word or Power Point
Export data into Excel
Embed visualization onto my website
Topic, region or demographic fact sheet
Social media sharing
Narrative section (why topic is important, how children are faring, policy implications, research & links)
Data in Action section (Kidsdata users' data stories, how to effectively use data)
None of the above



Kidsdata Survey * 9. How well does kidsdata.org meet your needs? Very well Somewhat well Not so well Not well at all * 10. Which of the following phrases would you use to describe kidsdata.org? Select all that apply. Comprehensive across topics Comprehensive across geographies Easy to use Up-to-date Credible High quality Limited in geographies Limited in topics Cumbersome Out-of-date Unreliable Low quality



For the following questions, please think about the website, kidsdata.org, as well as other features of the Kidsdata program.

* 11. How useful are these Kidsdata resources in your work?

	Very Useful	Somewhat Useful	Not Very Useful	Not Useful	Not Applicable
Website					
Fact sheets, issue briefs, Data in Action tip sheets					
Presentations or webinars by Kidsdata staff					
Kidsdata News (the twice monthly email)					
Social media (tweets)					
Interactions directly with Kidsdata staff	\bigcirc		\bigcirc		



* 12. What effects does Kidsdata have on your work? Select all that apply.	
Increased my understanding of child health and well-being	
Increased my understanding of factors affecting children's health and well-being	
Improved my ability to convey information	
Increased my visibility and influence	
Increased my organization's visibility and influence	
Allowed me to identify issues that need addressing	
Allowed me to make more informed decisions	
Other (please specify)	
* 13. What is the <u>primary effect</u> of Kidsdata on your work? Select one.	
Increased my understanding of child health and well-being	
Increased my understanding of factors affecting children's health and well-being	
Improved my ability to convey information	
Increased my visibility and influence	
Increased my organization's visibility and influence	
Allowed me to identify issues that need addressing	
Allowed me to make more informed decisions	
Other (please specify)	



Improved services for children and families

Measurable improvements in child health

Other (please specify)

Kidsdata Survey * 14. What outcomes has your organization achieved, in part because of Kidsdata? Select all that apply. Increased collaboration among agencies New programs developed New policies developed Better informed public policy development Improved services for children and families Measurable improvements in child health Other (please specify) * 15. What primary outcome has your organization achieved, in part because of Kidsdata? Select one. Increased collaboration among agencies New programs developed New policies developed Better informed public policy development



Kidsdata Surv	<u>- </u>		
* 16. How wo	uld you gather data for yo	our work without kidsd	ata.org? Select all that apply.
	eral and state public databases		
Access pu	olicly available survey data		
Collect nev			
	gather some data		
	se specify)		



* 17. If you would stop gathering some data without access to kidsdata.org, why? Select all
that apply.
I cannot get the data I use from kidsdata.org anywhere else
The time it takes to collect data is too much
The expertise to gather data is not at my organization
Not applicable
Other (please specify)



Please state your level of agreement with the following statements:
* 18. Kidsdata.org provides data to support programs and policies that improve children's health and well-being in California.
Strongly Agree
Agree
Disagree
Strongly Disagree
Opn't Know
* 19. The Kidsdata program has had an impact on public awareness of issues related to the health and well-being of children in California.
Strongly Agree
Agree
Disagree
Strongly Disagree
On't Know



Klusuala Survey
* 20. Before taking this survey, were you aware that Kidsdata is a part of the Lucile Packard Foundation for Children's Health? Yes No
21. Is there anything else you would like to share about kidsdata.org?



Kidsdata Survey			
Thank you for taking our survey!			