

# Children with Special Needs in California

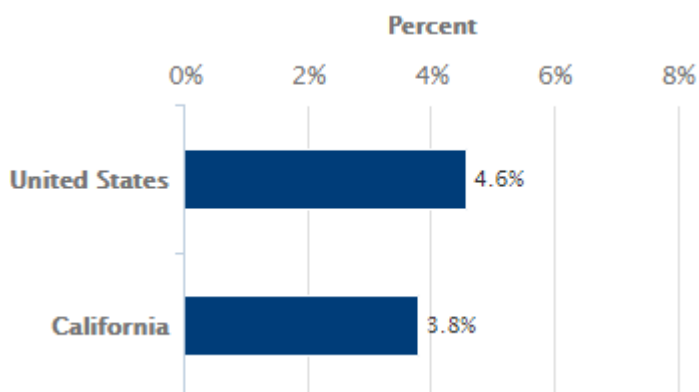
## Children Ages 0-17 with Special Health Care Needs: 2022

Locations	Percent
United States	20.8%
California	15.8%
Alameda and Santa Clara Counties	14.1%[!]
Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Inyo, Lake, Lassen, Mariposa, Mendocino, Modoc, Mono, Nevada, Placer, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tuolumne, Yolo, and Yuba Counties	18.1%
Contra Costa, San Mateo, and Solano Counties	20.3%[!]
Fresno County	12.7%[!]
Imperial and Riverside Counties	15.4%[!]
Kern, Kings, Madera, Merced, Stanislaus, and Tulare Counties	13.4%
Los Angeles County	16.7%
Marin, Napa, and Sonoma Counties	12.5%
Monterey, San Benito, and Santa Cruz Counties	17.0%[!]
Orange County	17.1%[!]
Sacramento County	12.6%[!]
San Bernardino County	18.0%[!]
San Diego County	19.1%[!]
San Francisco County	10.3%
San Joaquin County	15.4%[!]
San Luis Obispo and Santa Barbara Counties	17.0%[!]
Ventura County	10.0%[!]

**Definition:** Estimated percentage of children ages 0-17 with special health care needs (e.g., in 2022, 15.8% of California children had special health care needs).

**Data Source:** U.S. Dept. of Health and Human Services, National Survey of Children's Health (Jan. 2024).

## Children with Major Disabilities: 2021



## What It Is

On kidsdata.org, indicators related to children with special health care needs (CSHCN) include data on demographics and other characteristics, the impacts of special health care needs on children and their families, health insurance coverage, and access to and quality of health care and other services. See kidsdata.org's [CSHCN category](#) for a full list of indicators.

## Why This Topic Is Important

Nearly 1.4 million California children, and more than 15 million children nationwide, have or are at increased risk for a chronic health condition and require care and related services of a type or amount beyond that required by children generally. As advances in technology and medicine continue to improve and extend the lives of children with special health care needs (CSHCN), these numbers are expected to grow. Over the next decade, for instance, it is estimated that the number of children with medically complex conditions will double.

When compared with children who do not have ongoing physical, developmental, behavioral, or mental health problems, CSHCN are more likely to be limited in their ability to function and participate in daily activities. They also are more likely to experience social problems, academic challenges, and other types of adversity that can complicate their medical care. As a result, CSHCN often rely on a range of services from multiple sectors, and their parents and family members often face higher caregiving burdens and experience more stress and difficulties with employment and finances when compared with other families.

Obtaining timely, appropriate, and affordable care is a major problem for many CSHCN families. Beyond service system barriers, social factors and practices—such as poverty and discrimination (e.g., on the basis of race/ethnicity or ability)—influence access to care, and, as a result, health outcomes. For example, CSHCN of color and those in low-income families are more likely to have unmet health needs and limited access to high-quality care when compared with their more affluent and white peers. They also are less likely to access other important resources such as quality education and stable housing.

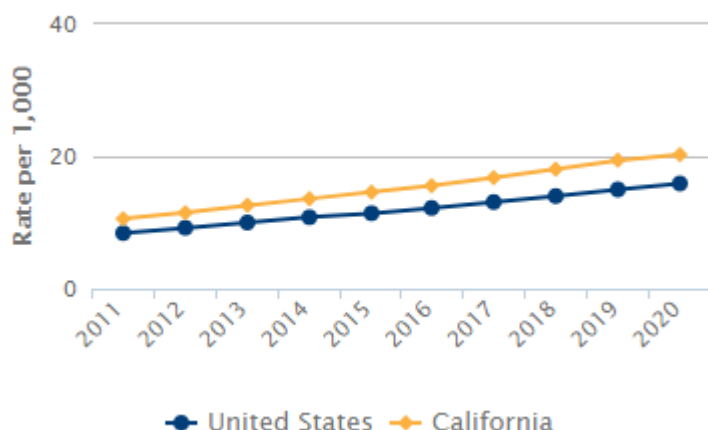
## How Children Are Faring

In 2022, an estimated 21% of U.S. children and 16% of California children ages 0-17 had special health care needs—meaning they had or were at increased risk for a chronic physical, developmental, behavioral, or emotional

**Definition:** Estimated percentage of children ages 0-17 with one or more serious difficulties in hearing, vision, cognitive ability, ambulatory ability, self-care, or independent living (e.g., in 2021, 3.8% of California children had major disabilities).

**Data Source:** Population Reference Bureau, analysis of U.S. Census Bureau [American Community Survey](#) summary files and public use microdata (Jan. 2024).

## Students Receiving Special Education Services for Autism



**Definition:** Number of public school students receiving special education services per 1,000 students, by primary disability type (e.g., in 2020, 20.3 per 1,000 California students were enrolled in special education for autism).

**Data Source:** California Dept. of Education, [DataQuest & Special Education Division](#) custom tabulation; National Center for Education Statistics, [Digest of Education Statistics](#) (Jun. 2021).

## Children Ages 0-11 Who Have Received a Developmental Screening: 2021-2022

Locations	Percent
California	48.1%
Alameda County	56.0%
Contra Costa County	32.3%
Fresno County	45.8%
Kern County	44.6%
Los Angeles County	42.8%
Orange County	45.6%
Riverside County	50.2%
Sacramento County	53.9%
San Bernardino County	40.3%
San Diego County	52.7%
Santa Clara County	54.7%

**Definition:** Estimated percentage of children ages 1-11 who have been administered a standardized development and behavioral screening (e.g., among California

condition and required health and related services of a type or amount beyond that required by children generally. Across California counties and county groups, the share of children with special health care needs (CSHCN) ranged from 10% to 20%. An estimated 65% of CSHCN statewide had more than one chronic condition, and 27% had more than three. Children with more complex health care needs (those whose conditions are not managed primarily through prescription medication and who require additional care, services, or therapies) made up more than three-quarters (77%) of the state's CSHCN.

California CSHCN had higher rates of health insurance coverage than their peers without special health care needs in 2022. They also had higher rates of overweight or obesity, behavioral or mental health conditions, and adverse childhood experiences, and lower rates of resilience (usually or always staying calm and in control when faced with a challenge).

Nearly 40% of California CSHCN lived on household income lower than 200% of the poverty threshold (\$59,356 annually for a family of two adults and two children). Among families of Hispanic/Latino CSHCN, the share was more than 50%, compared with fewer than 20% for families of white CSHCN.

Children with major disabilities represent 3.8% of California's child population, according to 2021 estimates. This amounts to more than 330,000 children ages 0-17 with one or more or more serious impairments in hearing, vision, cognition, walking, or self-care. Across counties with data, the percentage of children with major disabilities ranged from less than 2% to more than 7% in 2016-2020.

More than one in eight California public school students ages 0-22 received special education services for a disability in 2020. Statewide and nationally, learning disabilities, speech/language impairments, and autism are the most prevalent primary disabilities in the student body. The rate of autism among California students nearly doubled between 2011 and 2020, from 10.6 students per 1,000 to 20.3 per 1,000, mirroring national trends. At the local level, rates of autism ranged from fewer than 10 students per 1,000 to more than 25 per 1,000 across counties with data in 2020.

In 2021-2022, an estimated 48% of children ages 1-11 statewide had received a standardized developmental screening. Across counties with data, the share of children



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children in 2021-2022, 48.1% had received a developmental screening).

**Data Source:** UCLA Center for Health Policy Research, [California Health Interview Survey](#) (Jan. 2024).

receiving developmental screenings ranged from less than 30% to more than 70%.

*View references for this text and additional research on this topic:*

<https://kidsdata.org/topic/14/characteristics-of-children-with-special-needs/summary>



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