## Ν S G

## Child Health and Well-Being Differ for **Metro and Nonmetro** Low-Income Households

According to U.S. Census Bureau data, the Nation's poverty rate increased from 12.3 percent in 2006 to 12.5 percent in 2007. As has historically been the case, children made up a disproportionate share of that increase as well as of the total number of poor people across the U.S. The poverty rate is greater for children in families living in nonmetro households (15.1 percent) than for those in metro households (11.4 percent).

ERS research, drawing from the 2003 National Survey of Children's Health, shows that on average, low-income households-those with incomes at or below 133 percent of the poverty threshold-

scored consistently worse than other households on indicators of their children's health and well-being. In most instances, members of poor households (incomes below the official poverty level) were more likely to give negative survey responses than members of near-poor households (incomes between 100 and 133 percent of the poverty level). For example, survey results reveal that children

The risk of poor physical and emotional health is often greater for nonmetro children

	Metro	Non- metro
Physical & emotional health	Percent	
Child's general health is fair or poor	8.8	6.8
Child has asthma	13.7	15.3
Child has allergies	20.2	23.9
Child has socio-emotional difficulties	24.1	27.7
Child sustained an injury in last 12 months	6.4	10.4
Home, community, & social environment		
Child is unsafe in neighborhood	8.6	3.0
Child is unsafe in school	4.0	1.9
Neighbors would not help child if hurt	10.5	6.6
Regularly spends time caring for self	13.7	17.3
Someone in household regularly uses tobacco	35.2	47.7

Source: USDA Economic Research Service estimates based on 2003 National Survey of Children's Health, U.S. Centers for Disease Control and Prevention.



in poor metro households are 1.7 times more likely to miss school due to injury or illness than children in near-poor metro households.

The risks to the health and well-being of nonmetro children associated with low levels of household income, however, appear to differ from those facing low-income children in metro areas. For example, poor nonmetro parents were more likely than poor metro parents to report their children's general health as being excellent or very good (72 percent versus 65 percent). They were also more likely to score their children worse on individual indicators of health. This included, but was not limited to, the share of children in need of prescription drugs or medical care due to chronic illness, having vision and speech problems, prone to asthma and allergies, diagnosed with attention deficit disorder and socio-emotional difficulty, and in need of therapy or counseling. Alternatively, poor metro parents were more likely to score their children low on environmental indicators of well-being, such as perceived safety in their school, neighborhood, or home. W

## Tracey Farrigan, tfarrigan@ers.usda.gov

## This finding is drawn from ...

Rural America at a Glance, 2008 Edition, by Lorin Kusmin, EIB-40, USDA, Economic Research Service, October 2008, available at: www.ers.usda.gov/publications/eib40