

2024 Vanderbilt Child Health Poll – Release 1

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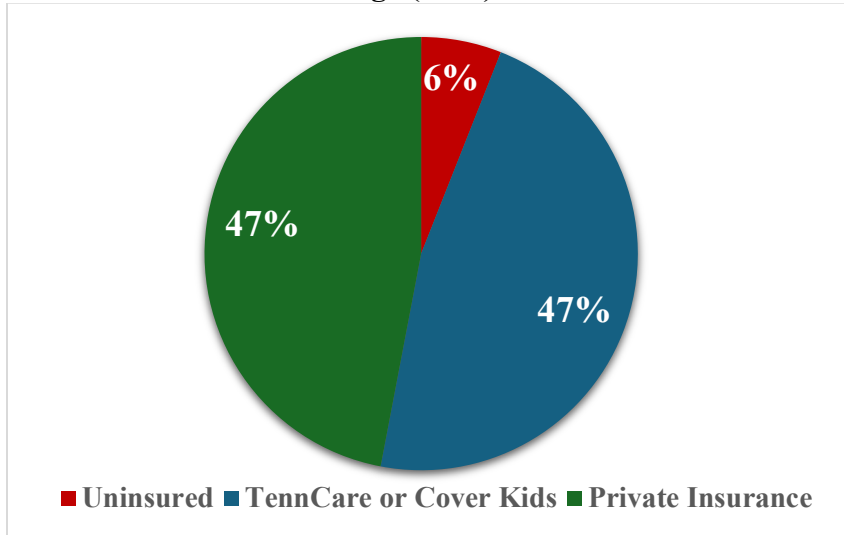
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SECTION 1. INSURANCE COVERAGE

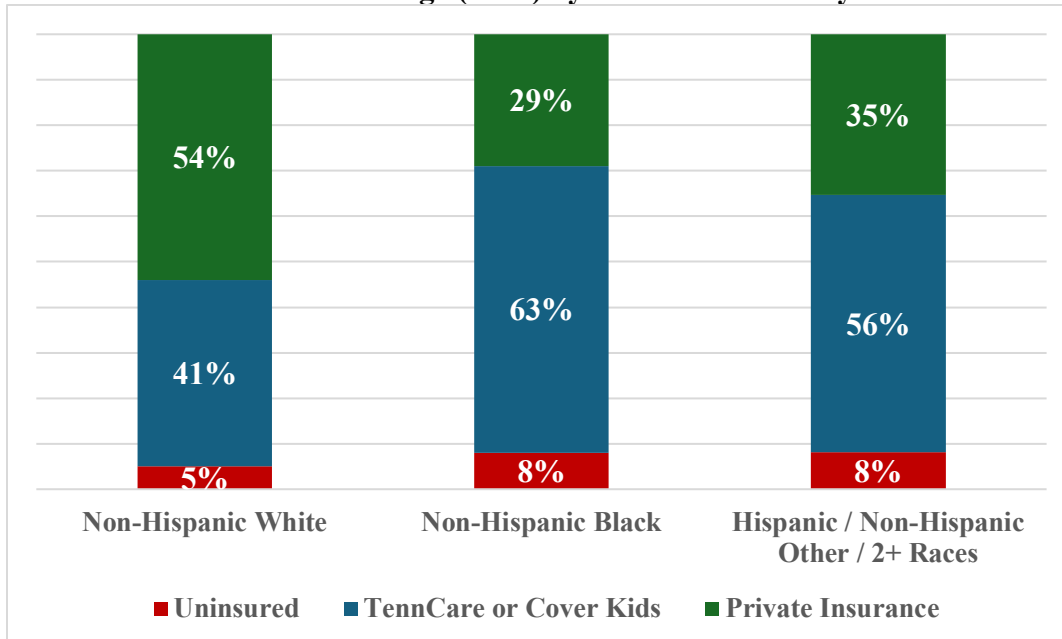
1.1 Current Insurance Coverage (2024)

TennCare or Cover Kids	47%
Private Insurance	47%
Uninsured	6%

Current Insurance Coverage (2024)



1.2 Current Insurance Coverage (2024) by Race and Ethnicity



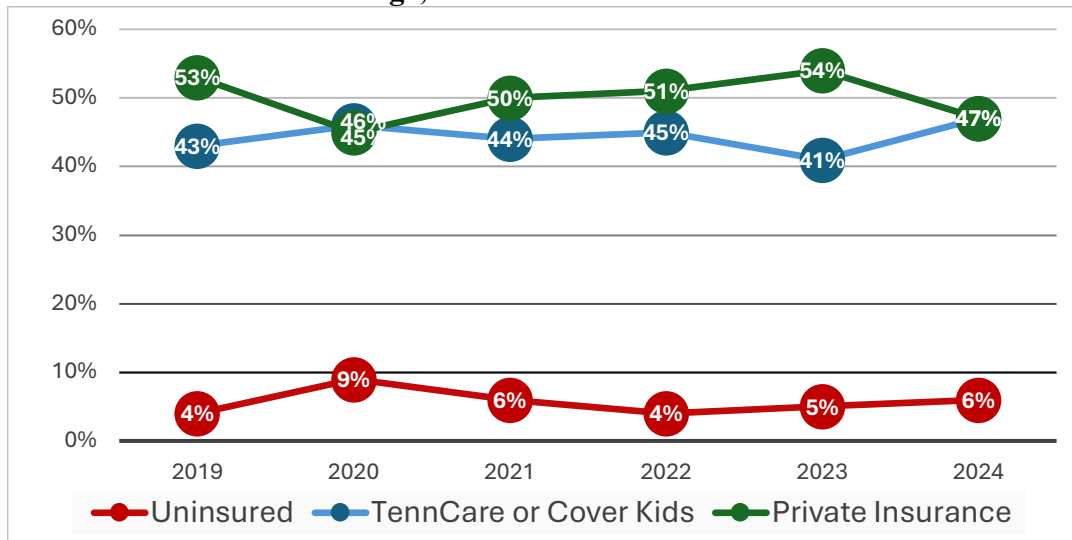
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1.3 Trends in Insurance Coverage, 2019-24

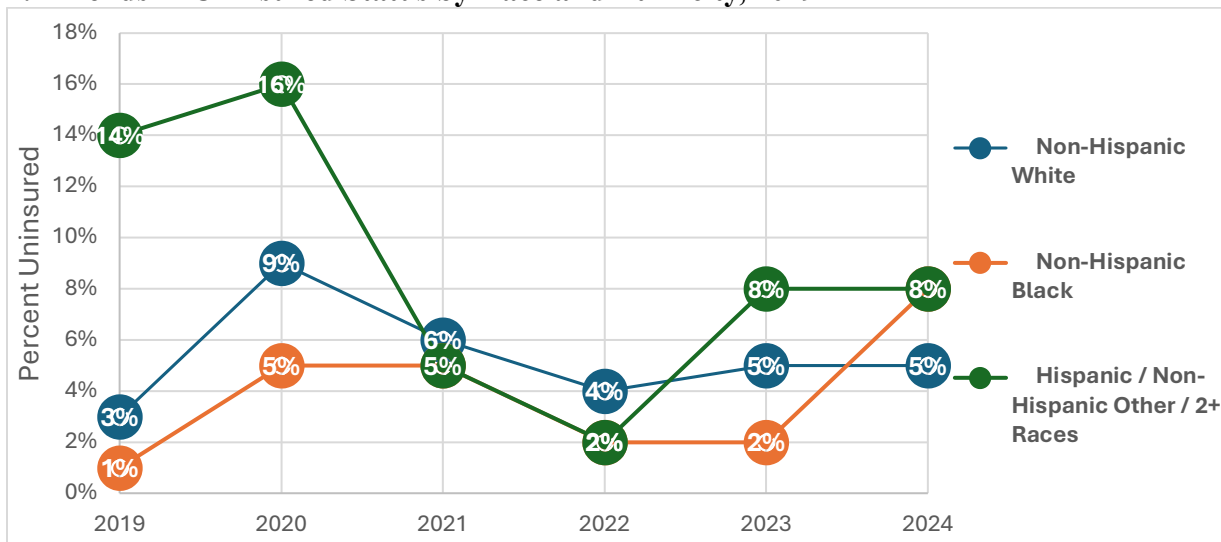
Year	TennCare or Cover Kids	Private Insurance	Uninsured
2024	47%	47%	6%
2023	41%	54%	5%
2022	45%	51%	4%
2021	44%	50%	6%
2020	46%	45%	9%
2019	43%	53%	4%

Percentages within each year shown

Trends in Insurance Coverage, 2019-24



1.4 Trends in Uninsured Status by Race and Ethnicity, 2019-24



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1.5 Loss of Insurance Coverage (2024)

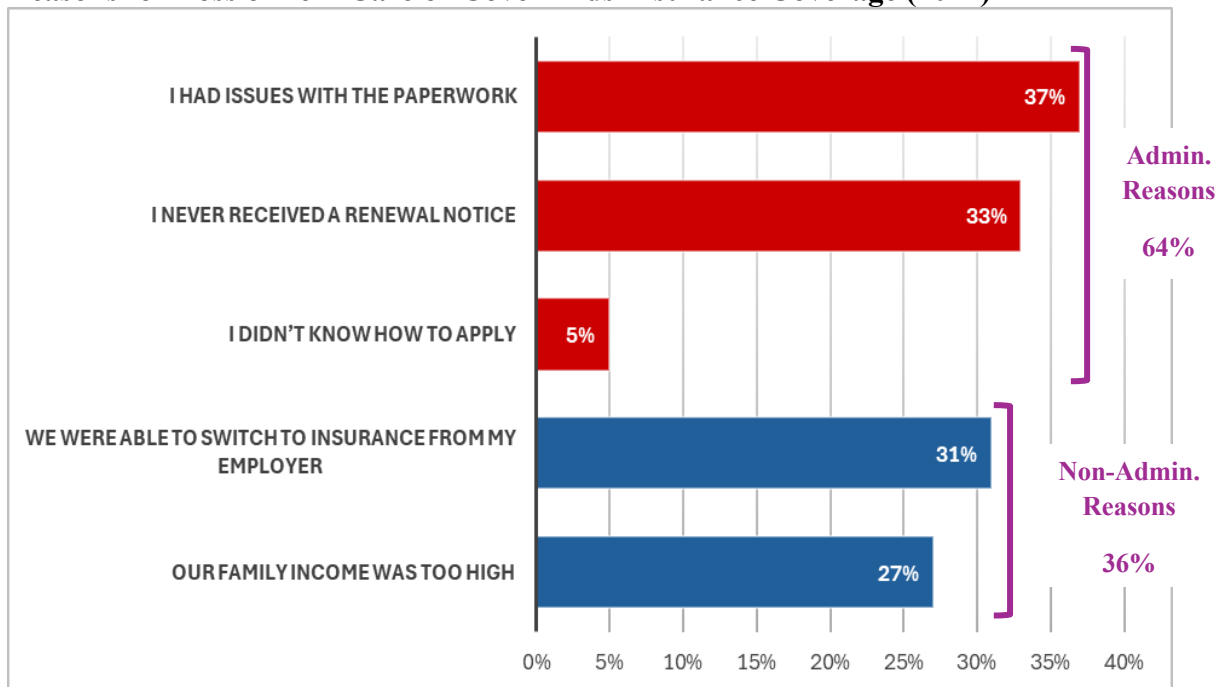
Among parents reporting their children were covered by TennCare or Cover Kids in the past 12 months, 16% indicated that they had lost coverage for some period during this time

1.6 Reasons for Loss of TennCare or Cover Kids Insurance Coverage (2024)

Administrative reasons (any)	64%
Family income too high	27%
Switched to insurance from employer	31%
Issues with the paperwork	37%
Non-administrative reasons (any)	36%
Never received a renewal notice	33%
Did not know how to apply	5%
Other	8%

Respondents could select more than one option; percentages may total >100%

Reasons for Loss of TennCare or Cover Kids Insurance Coverage (2024)



Respondents could select more than one option; percentages may total >100%

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SECTION 2. HEALTH CARE ACCESS

2.1 Accessing Health Care Services Within the Last 12 Months (2024)

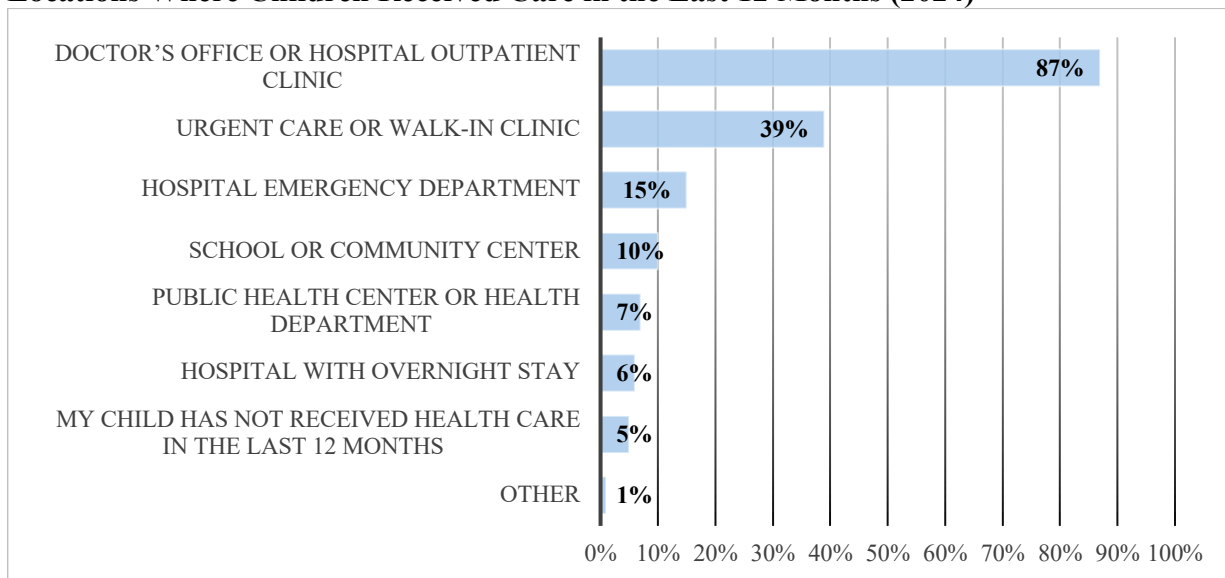
95% of parents reported accessing one or more health care services within the last 12 months

2.2 Locations Where Children Received Care in the Last 12 Months (2024)

Doctor's Office or Hospital Outpatient Clinic	87%
Urgent Care or Walk-In Clinic	39%
Hospital Emergency Department	15%
Hospital with Overnight Stay	6%
Public Health Center or Health Department	7%
School or Community Center	10%
Other	1%

Respondents could select more than one option; percentages may total >100%

Locations Where Children Received Care in the Last 12 Months (2024)



Respondents could select more than one option; percentages may total >100%

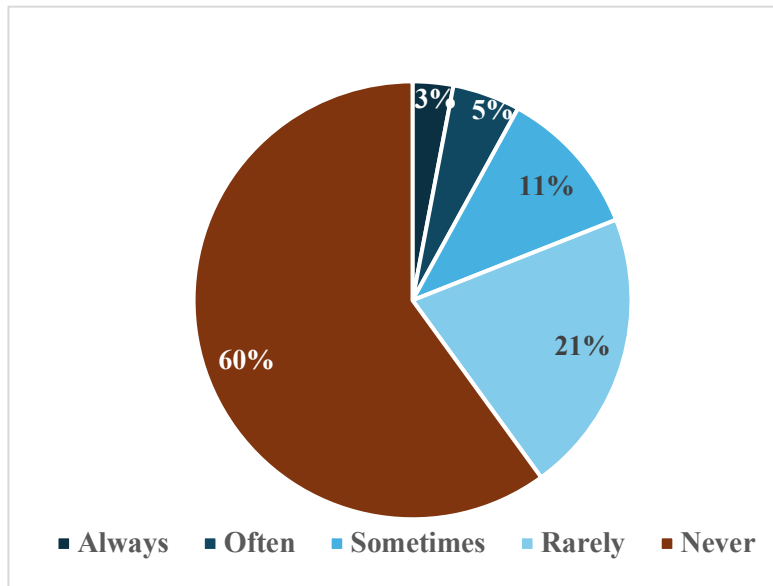
2.3 Most Common Locations for Preventive and Sick Care (2024)

Care Location	Preventive Care	Sick Care
Doctor's Office or Hospital Outpatient Clinic	89%	73%
Urgent Care or Walk-In Clinic	7%	22%
Hospital Emergency Department	-	4%
Public Health Center or Health Department	3%	1%
School or Community Center	1%	<1%
Other	<1%	1%

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2.4 Frequency of Health Care Visits without a Parent or Guardian

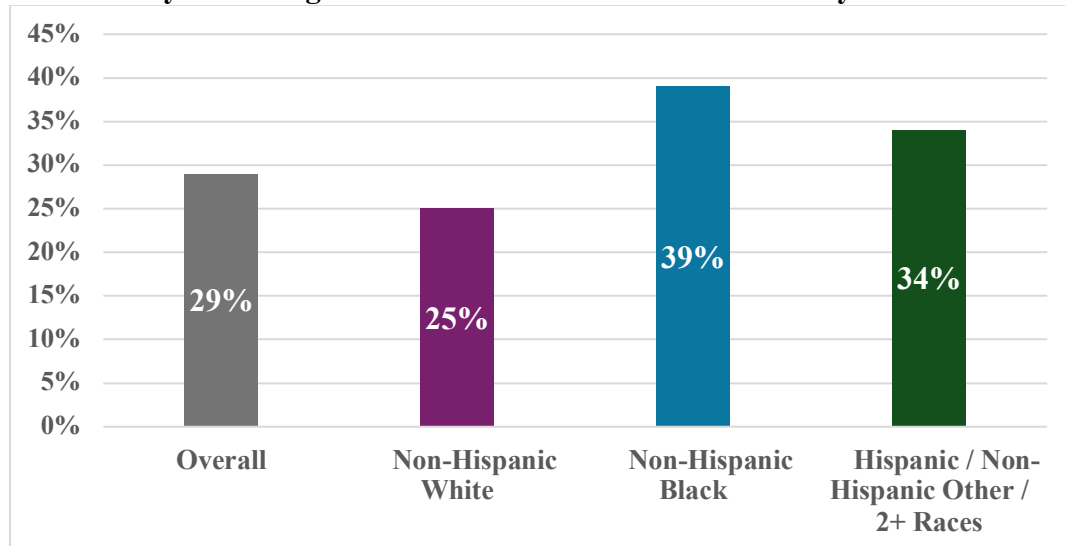
Any	40%
Always	3%
Often	5%
Sometimes	11%
Rarely	21%
Never	60%



2.5 Difficulty Receiving Care without a Parent or Guardian (2024)

Among respondents who reported accessing care without a parent or guardian at any time during the last 12 months, 29% had difficulties getting the care their child needed as a result

2.6 Difficulty Receiving Care without a Parent or Guardian by Race and Ethnicity (2024)



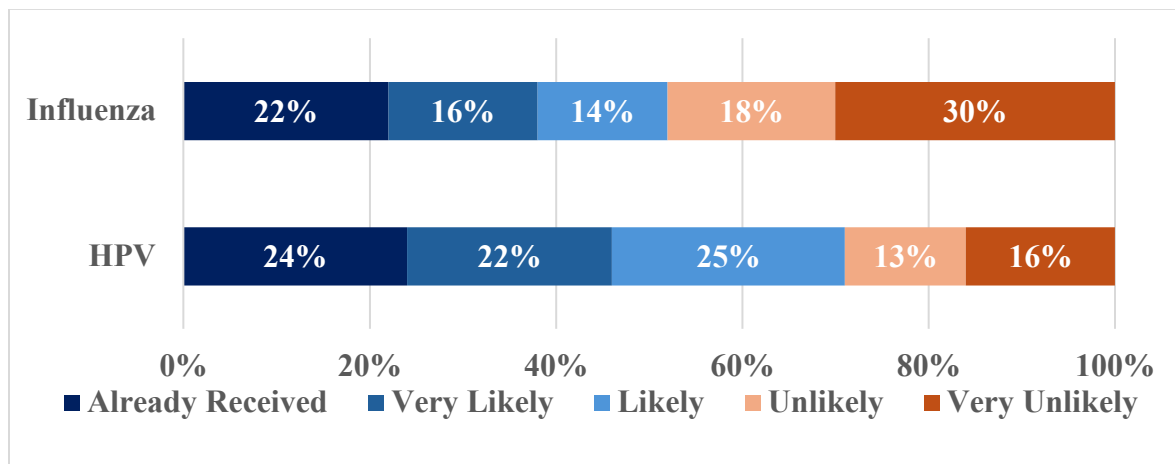
Percentages are among parents who reported accessing care for their child without a parent or guardian

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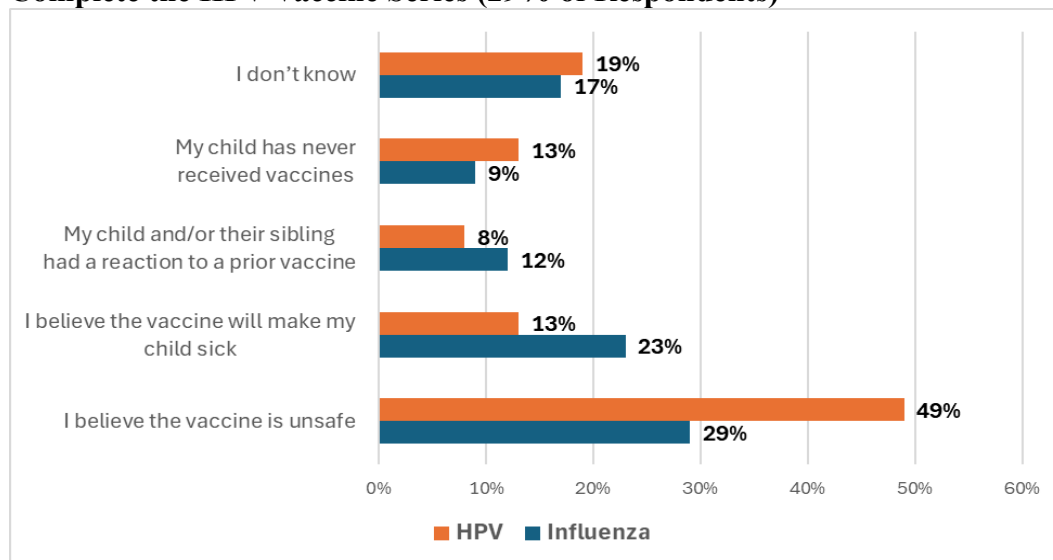
SECTION 3. VACCINE HESITANCY (INFLUENZA AND HPV)

3.1 Likelihood of Receiving Seasonal (2024-25) Influenza Vaccine and Completing Human Papilloma Virus Vaccine Series

Likelihood of Receiving or Completing	Seasonal Influenza	HPV Series
Already Received	22%	24%
Very Likely	16%	22%
Likely	14%	25%
Unlikely	18%	13%
Very Unlikely	30%	16%



3.2 Reasons for Vaccine Hesitancy Among Those Reporting Their Child Was Unlikely or Very Unlikely to Receive Seasonal (2024-25) Influenza Vaccine (48% of Respondents) or Complete the HPV Vaccine Series (29% of Respondents)



Respondents could select more than one option; percentages may total >100%

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SECTION 4. ABOUT THE 2024 VANDERBILT CHILD HEALTH POLL

Background. The Department of Pediatrics and the Monroe Carell Jr. Children’s Hospital at Vanderbilt University Medical Center are committed to improving the health and wellbeing of children, adolescents, and their families throughout Tennessee. One way we accomplish this goal is through connecting with the public to better understand the concerns of Tennessee parents about the health of their children and the health care services they receive. To this end, we have conducted an annual child health poll of Tennessee parents in collaboration with Ipsos Public Affairs (Ipsos) since 2019.

Population Sampled. The poll was conducted on KnowledgePanel®, a probability-based web panel designed to be representative of the United States, supplemented with additional interviews using online (opt-in) panels other than KnowledgePanel, to maximize the overall sample size. The target population consisted of parents in Tennessee with at least one child under the age of 18 who lives in the household. Selected KnowledgePanel members received an email invitation to complete the survey and were asked to do so at their earliest convenience; various methods were used to contact respondents for the other online panels.

The 2024 poll was fielded between December 6 and December 31, 2024. A total of 1,180 participants responded to the poll (median completion time was 12.4 minutes). 158 cases were terminated for eligibility reasons (e.g., non-resident of Tennessee, not a parent, age < 18 years). 14 additional cases were excluded due to data quality issues, resulting in a final completed survey sample of 1,008 (85% of total respondents).

Response Weighting. Once all data are collected and processed, study-specific design weights are adjusted to account for any differential nonresponse that may have occurred. Depending on the specific target population for a given study, geodemographic distributions for the corresponding population are obtained from the CPS, the U.S. Census Bureau’s American Community Survey (ACS), or in certain instances from the weighted KnowledgePanel profile data. For this purpose, an iterative proportional fitting (raking) procedure is used to produce the final weights. The resulting weights are then scaled to aggregate to the total sample size of all eligible respondents.

For this study, benchmark distributions of Tennessee adults age 18 and over from the 2022 ACS were used for the raking adjustment of weights. Starting with a weight of 1.0 for both KnowledgePanel and other panel qualified cases, respondents were weighted to represent parents of 0-17 year-old children from Tennessee, using the ACS 2022 benchmark data.

Design Limitations. All forms of public opinion research are subject to unmeasured error that cannot be eliminated. When a probability-based panel like KnowledgePanel is used, Ipsos employs the total survey error approach to identify and minimize error due to coverage error, sampling error, nonresponse error, measurement error, and data processing and editing error.