Alaska Childhood Understanding Behaviors Survey (CUBS)

Location: Alaska  
Category: Emerging Practice

BACKGROUND
In Alaska, health-related data for mothers and infants are collected from Pregnancy Risk Assessment Monitoring Survey (PRAMS). For older children and teenagers data are collected from the Youth Risk Behavior Survey and for adults data are collected from the Behavioral Risk Factor Surveillance System. However, very little is known about the health, behaviors and early childhood experiences of young children before they enter school.

The Alaska Childhood Understanding Behaviors Survey (CUBS) is a follow-up survey to PRAMS. CUBS’ purpose is to fill a gap in knowledge by collecting information related to child behavior, health, health care access, and school readiness among Alaska’s 3-year-olds. By using the methodology of re-interviewing mothers who completed a PRAMS survey, CUBS is also able to evaluate factors present at birth or early life that affect risk for later adverse childhood outcomes.

The Alaska Division of Public Health, Section of Women’s, Children’s and Family Health developed CUBS in 2006 after consulting with numerous child health stakeholders statewide to determine data needs.

PROGRAM OBJECTIVES
The goal of CUBS is to provide data related to the health and well-being of Alaskan 3-year-olds. This goal is accomplished through the following objectives:

- Collecting high quality data regarding the health status and care of Alaskan children at three years of age
- Performing data analyses to advance the understanding of how health systems, individual behaviors and family practices contribute to health outcomes during early childhood

TARGET POPULATION SERVED
The target population for data collection is women living in Alaska who have participated in the PRAMS survey and who have a 3-year-old child.

PROGRAM ACTIVITIES
The PRAMS survey uses a stratified randomized sample to select about 1/6 of all births in the state. All women who respond to PRAMS are sent a CUBS survey when their child is 3-year-olds. Women are not eligible for follow-up if they have moved out of Alaska since the child’s birth. In 2009, 1,158 women were eligible for CUBS and 577 responded. Data are weighted by year of child’s birth (using PRAMS methodology) to represent all children born in Alaska in that year.

CUBS uses a modified PRAMS protocol, including mailing a pre-letter soon after the child’s third birthday, followed by up to two copies of the survey. Phone interviews are attempted.
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for women who do not respond by mail and who responded to PRAMS by phone. Sampled women are offered a music CD for children as an incentive for completing the survey. CUBS data are used to supplement existing child health indicators tracked at the state level, and are provided to healthcare and educational professionals to improve service delivery.

PROGRAM OUTCOMES/EVALUATION DATA

The primary result of CUBS is that data are now available for a variety of health-related measures among young children in Alaska. Data from CUBS have been used by the Alaska Obesity Prevention and Control program, which has included the data in their Physical Activity and Nutrition trainings for childcare providers and a Burden of Childhood Obesity Report. The Alaska Oral Health program is using CUBS data to track success in encouraging parents to take their child in for a dental visit before age one. Data on children witnessing violence is used in a scorecard issued by a statewide coalition to prevent domestic violence. Two questions from CUBS (tooth decay and child height and weight) were selected as State Performance Measures for the Alaska Title V Block Grant.

PROGRAM COST

Supplies and postage for CUBS in 2009 totaled approximately $10,000. This does not include staff time for 1.5 FTEs on the program. In 2009, 1,158 women were eligible for CUBS and 577 returned a survey. Costs are therefore about $8.63 per eligible woman or $17.33 per response.

LESSONS LEARNED

➢ The most time consuming aspect of CUBS is tracking down women whose addresses have changed in the three years since they responded to PRAMS

➢ Having a diverse steering committee is important for "marketing" the data so that stakeholders know that it is available

FUTURE STEPS

Staff members plan to keep the current Phase 3 version of the CUBS survey in place through 2011. The survey is being revised and a new phase will begin in 2012.

An Alaska Native Maternal and Child Health data book will be released in the summer 2011, highlighting data from both PRAMS and CUBS.

COLLABORATIONS

The CUBS Steering Committee is composed of health care providers, public health practitioners and researchers, representatives from the Alaska Native Health Consortium, and child care providers. The Alaska PRAMS program is a key collaborator as well.

PEER REVIEW & REPLICATION

Although the CUBS process itself has not been peer-reviewed, staff members published an article in 2009 in the American Journal of Obstetrics and Gynecology, a peer-reviewed journal, using CUBS data to look at persistent maternal depression in Alaska. Additionally, a PRAMS follow-up survey similar to CUBS, the Rhode Island TWOS survey, was described in a recent article in the Maternal Child Health Journal titled “New Options of Child Health Surveillance by State Health Departments.”

The CUBS program is not entirely unique. Three other states, Oklahoma, Rhode Island, and Oregon, currently conduct similar PRAMS follow-up surveys. These states were consulted to hear their lessons learned prior to initiating CUBS in Alaska. Oklahoma began their follow-up survey in December 1994, Rhode Island began in January 2005, and Oregon in September 2005.

RESOURCES PROVIDED

None were provided at the time of submission.

Key words: Data, Assessment, Evaluation, Surveillance, PRAMS, Child Health, Early Childhood, Epidemiology

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