The benefits of health insurance coverage for children are well documented. Efforts to reduce the number of children lacking health insurance, such as SCHIP, have reported successes. Nonetheless, disparities in health insurance coverage for both minority and rural children persist, with children who are simultaneously minority race/ethnicity and living in rural areas being particularly disadvantaged. We used twenty-one years of data from the National Health Interview Survey, a nationally representative household survey conducted by the Centers for Disease Control and Prevention, to explore trends in health insurance and health services utilization for children between 1980 and 2001. In this research, “rural” is defined as living in a county that is not in a metropolitan area. Due to data limitations, we cannot analyze the experience of children of all race/ethnicities, but focus on non-Hispanic white, non-Hispanic African American, and Hispanic children.

**Key Findings:**

- Rural children have been consistently less likely to have insurance than urban children, and minority status adds to the disparity.

- Factors consistently associated with lack of health insurance, such as poverty, low education, and non-parental households, have been more prevalent among minority children since 1979, and remained so in 2001.

- The proportion of children with no physician visits during the preceding year has steadily declined since 1979. However, minority children, both urban and rural, remain more likely to have had no visits during the preceding year.

*A full copy of the report can be obtained from the SC Rural Health Research Center at [http://rhr.sph.sc.edu](http://rhr.sph.sc.edu)*