

Presentation:



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Background

This project was completed at UH Rainbow Ahuja Center for Women & Children (UHRCWC), which is located at 5805 Euclid Ave, Cleveland, OH 44103. The Center offers many health services, including outpatient pregnancy care, general OB/GYN care, general pediatrics, adolescent medicine, psychiatry and behavioral health services.

Population

The Center offers health services to patients living in Midtown Cleveland. The Center aims to serve pediatric and adolescent patients, as well as women.

Learning Objectives

- 1. Create** – I consented patients and obtained new data from them via conversations, surveys and questionnaire answers.
- 2. Analyze** – I assessed data that was collected in the surveys and questionnaires.
- 3. Understand** – I managed the data that was collected using UH REDCap to understand and explain the findings.

Activities

I was responsible for recruiting patients at the Center. I worked with Dr. Catherine Lipman to consent her patients and obtain assents for children over age 7. I assisted them in filling out their surveys and discussed their interests regarding behavioral health services. I also created the SDQ and BIPS surveys in REDCap and entered all data.

Deliverables



1. An informative brochure that can be provided to members of the community to educate them about this study, the behavioral health services currently available at the Center and the services that current families are interested in.
2. A dataset for my preceptor and other researchers to use in order to continue this study.

Objective

The purpose of the study was to obtain diagnostic information about referrals to the integrated pediatric behavioral health clinic and to gauge interests and perceived importance of behavior topics, preference for intervention, and the modality for intervention. We hope to improve service delivery and increase patient engagement.

Methods

Families were recruited at the time of referral to the behavioral health care coordinator during the child's primary care clinician (PCC) visit at the UHRCWC, as well as at the time of receiving services from psychiatrists and psychologists at their first session at the UHRCWC.

Inclusion Criteria:

Parents/guardians of children ages 18 months - 12 years 11 months, child seen by a PCC at UHRCWC, child was referred for behavioral health services by the PCC

We aimed to enroll 100 families in this study (one parent and one child per family), however the study is still ongoing, and we are still recruiting more participants.

Interested families were given a consent form and the opportunity to ask follow up questions. They then filled out the following:

Demographics Questionnaire:

- Used to gain insight about each family
- 13 questions

Behavioral Information Preferences Scale (BIPS):

- Used to assess parents/legal guardians' preferences for behavioral topics addressed, interventions received, and delivery of those interventions
- 2 versions (18 mo – 5 yrs 11 mo / 6 yrs – 12 yrs 11 mo)
- 54 and 58 questions
- Likert scale

Strengths and Difficulties Questionnaire (SDQ):

- Used to correlate topics and preferences with reported behavioral challenges
- Assessed emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems, and prosocial behavior
- 3 versions (2-4 yrs / 4-10 yrs / 11-17 yrs)
- 25 questions
- Likert scale

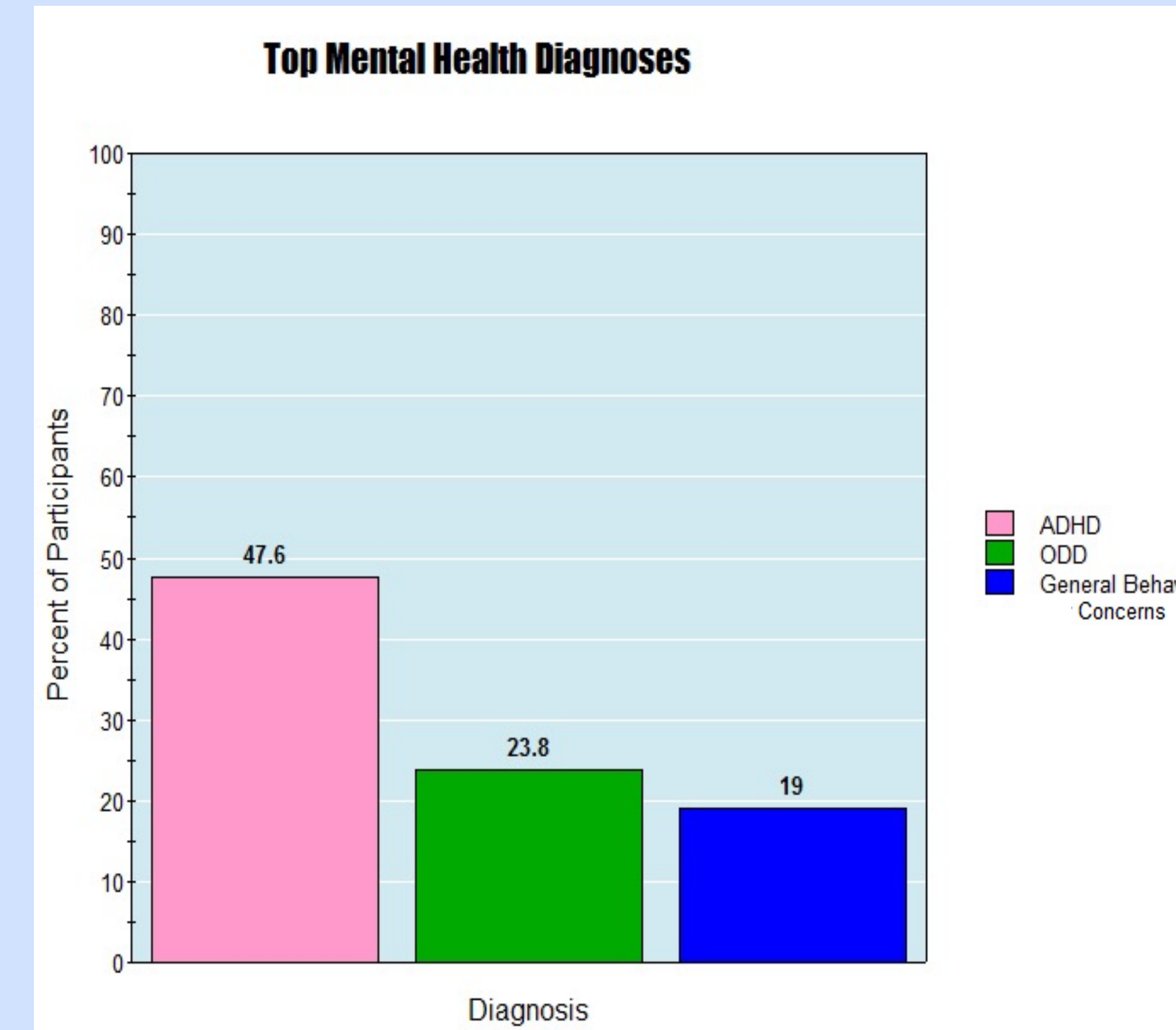


Figure 1: A visual representation of the top three mental health diagnoses of children referred to the pediatric integrated care clinic.

SDQ Category	Mean	Standard Deviation	High/Low/Average Range
Overall Stress	18.4	4.79	High
Behavioral Difficulties	4.40	2.46	High
Hyperactivity and Concentration	7.35	1.95	High
Emotional Distress	2.30	2.0	Average
Difficulty Getting Along With Others	3.85	1.04	Average
Being Kind and Helpful	5.15	3.01	Average

Figure 2: This chart displays the mean and standard deviation values for different items found on the Strength and Difficulties Questionnaire (SDQ).

Public Health Implications

- **My Work:** I was able to create a brochure and dataset to assist future patients at the Center, as well as other physicians and behavioral health specialists.
- **The Project:** This project helped us learn about families' preferences for behavioral topics, interventions, and delivery of interventions. This allows for public health officials to allocate more time and resources to the services that families in Cleveland need.
- **The Organization:** The UHRCWC works to promote health among families in Cleveland.

Results

- 21 caregivers participated in this study
- The top 3 mental health diagnoses of children referred to the pediatric integrated care clinic were ADHD (47.6%), ODD (23.8%), and general emotional and behavioral concerns (19%)
- Based on the SDQ:
 - The overall stress, behavioral difficulties, hyperactivity and concentration scale scores fell in the high range
 - The emotional distress, difficulty getting along with others and being kind and helpful scale scores were in the average range
- Based on the BIPS:
 - Increased importance on how to learn to set up appropriate expectations for child behaviors was associated with higher behavioral difficulties and increased problems with hyperactivity and concentration
 - Increased importance of receiving information on how to reward and show approval for good behaviors was associated with increased child hyperactivity and concentration problems
 - Increased importance of learning of how to manage parent stress was associated with higher child behavioral difficulties

Lessons Learned

Working on this practicum project taught me about responsibility, professionalism, the research process, analyzing data in a real-world context, interpreting results, assessing population needs, evaluating current public health programs, and communicating audience-appropriate content. This was the first research project that I have worked on, but I am excited to continue in the future.

Acknowledgements

I would like to thank my preceptor, Kimberly Burkhart, PhD, for allowing me to work with her on this project. She was an excellent mentor. I would also like to thank Catherine Lipman, MD for allowing me to work with her to consent her behavioral health patients. Furthermore, I would like to thank Angela Tuggle, MSSA, LSW for her assistance with the consenting process.