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Assessing Reach of Family-Based Behavioral Treatment for Pediatric Childhood Obesity Offered through Primary Care

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INTRODUCTION

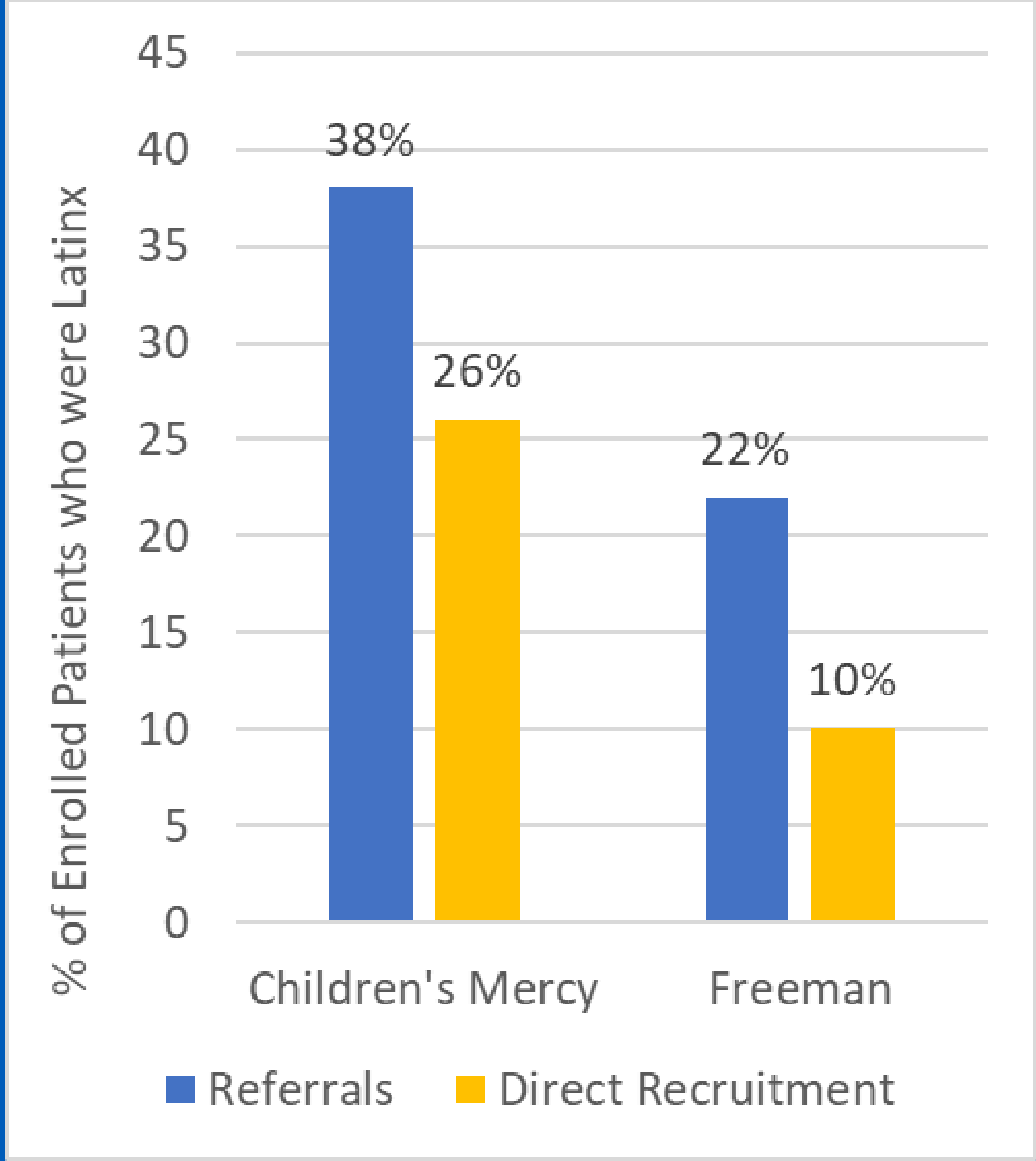
- Obesity disproportionately affects children from low-income families, highlighting the need to improve treatment reach for this population.
- This study assessed the reach of family-based behavioral treatment (FBT), a multicomponent intervention, in two health systems serving low-income families.

METHOD

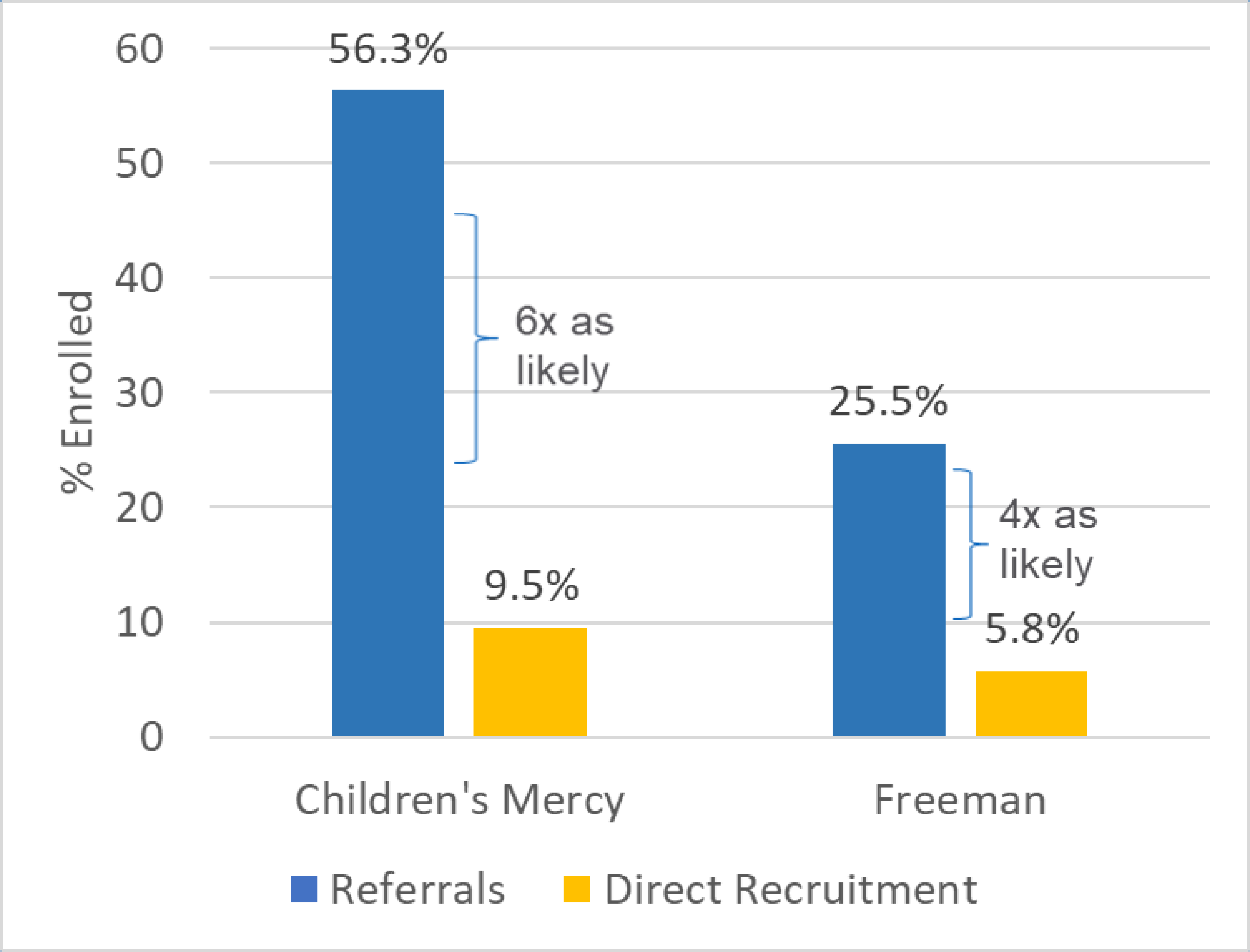
- FBT was implemented in rural Freeman Health System (FHS) and urban Children's Mercy (CM) pediatric practices.
- Eligible patients included children ages 5-12 years with a BMI percentile ≥ 95 th enrolled in Missouri Medicaid.
- Patients were recruited through provider referrals during clinic visits or via letters/calls from intervention team.
- Patient reach was calculated by comparing the number and representativeness of referred and enrolled patients to all eligible patients.

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Patient Race/Ethnicity				
			Enrolled	
	Eligible	Referred	Via Referral	Via Direct
Children's Mercy				
% White	11%	6%	8%	9%
% Black	51%	42%	50%	48%
% Latinx	29%	42%	38%	26%
% Other race	9%	10%	5%	17%
Freeman				
% White	74%	70%	70%	85%
% Black	6%	9%	4%	5%
% Latinx	14%	13%	22%	10%
% Other race	6%	8%	4%	0%



Provider Referral Rates		
	Children's Mercy	Freeman Health System
# eligible patients	827	489
# referred, total	71	90
% referred, total	8.6%	18.4%
Per provider		
% of providers with ≥ 1 referral	40%	100%
Mean % referred across providers	10.9%	17.4%
SD % referred across providers	24.2%	8.3%



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RESULTS

- Referral rates varied across providers, with FHS providers referring an average of 17.4% (SD=8.3%) and CM providers referring an average of 10.9% (24.2%) of eligible patients.
- Referred patients were significantly more likely to enroll in treatment than patients recruited directly (FHS OR=4.15, 95% CI=2.15, 8.08, $p<.001$; CM OR=12.30, 95% CI=6.58, 23.58, $p<.001$).
- 22% and 38% of patients enrolled via referral were Latinx, whereas 10% and 26% of patients enrolled via direct recruitment were Latinx, in FHS and CM respectively (FHS OR=2.50, 95% CI=.428, 14.6, $p=0.281$; CM OR=1.70, 95% CI=0.65, 5.571, $p=0.357$).

DISCUSSION

- Although only a small proportion of eligible patients were referred to FBT by their primary care provider, provider referrals supported reach by increasing enrollment among patients.
- Encouragement from primary care providers may be valued highly by some patient families, and this may be especially true in certain population subgroups such as Latinx families.

