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Caregiver Mental Health Screening in a Pediatric Feeding Clinic

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Caregiver Mental Health Screening in a Pediatric Feeding Clinic Dana Bakula, PhD,^{1,2} Laura Slosky, PhD,^{1,3} Kelsey Dean, MS, RD, CCRP,^{2,4} Ann M. Davis, PhD, MPH, ABPP,^{2,4} Sarah Edwards, DO^{1,2,3}

INTRODUCTION

- 1 in 4 adults have a mental health (MH) condition.
- Caregivers of children with feeding problems are at elevated risk for MH problems.
- Caregiver MH problems have a negative impact on child quality of life.
- It can be challenging to screen for caregiver MH problems in a busy pediatric feeding clinic.
- Feasible and brief methods of caregiver MH screening are essential.

METHOD

- From 2019-present our multidisciplinary feeding clinic has been administering a 2-item MH screener to caregivers of children at the new visit.
- The questionnaire asks: "Does the parent/caretaker have a history of mental health diagnosis (i.e., anxiety, depression, postpartum depression)". A follow up item asks what diagnoses each caregiver has.
- We descriptively evaluated these screenings.

LOVE WILL.

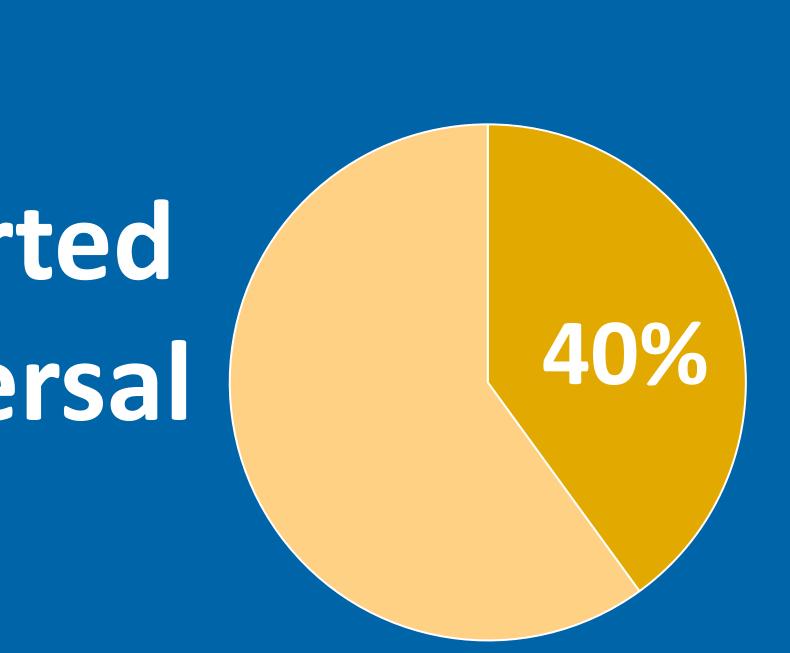
40% of caregivers reported a MH problem on universal screenings.

This 2-item screener is not a perfect measure of MH but is feasible to implement and can be used to identify caregivers in need of support.

Regular caregiver MH screenings paired with point-of-care interventions are needed in pediatric feeding clinics.



¹Children's Mercy Kansas City; ²Center for Children's Healthy Lifestyles & Nutrition; ³University of Missouri Kansas City, School of Medicine, ⁴University of Kansas Medical Center





Center for Children's Healthy Lifestyles

- N=327 cai new visit
- 40% of ca
- Rates of N caregivers
- The most anxiety an
- 22% of MI having pos
- These rate to the liter

Anxiety Disord 75%

paperwork.



RESULTS

regivers of children presenting for a in feeding clinic.				
aregivers endorsed a MH problem. MH problems were higher for s of infants (<12 months; 45%). common MH problems were				
nd mood disorders.				
IH problems were identified as				
ost-partum onset.				
es of MH problems are comparable				
erature (20-40%).				
Caregiver MH Diagnoses				
ders Mood Disorders	PTSD	ADHD	Other	
68%	7%	4%	5%	

DISCUSSION

• This two-item screener shows promise and was easily integrated into new visit

More research is needed to refine best practices in caregiver MH screening in pediatric feeding clinics, and to evaluate the sensitivity and specificity of this measure. Given these high rates of MH problems, point of care interventions to address caregiver MH in clinic are needed, as they would reduce barriers to seeking care in the community. This type of intervention may be particularly important for caregivers of infants, given high rates of postpartum MH problems.





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