What Do Families Want From Well-Child Care?

Primary reasons for attending well child visits:

1. Reassurance
   - Confirm that their child was growing and developing normally
   - Reassurance regarding parenting skills

2. Opportunity to discuss parent priorities
   - “I want to come in and talk about my own topics and not have my time taken up by other things. I don’t want the doctor talking about sleep habits if my kid is sleeping fine”

Recommendations for Enhancements

• Pre-visit materials, such as checklists to facilitate better use of limited time
• Use wait times as an opportunity to provide information
• Seminars and workshops led by pediatricians on child health and parenting
• Better linkages with community resources

Anticipatory Guidance and Violence Prevention

- Parents voiced concerns about not knowing why a pediatrician might inquire about matters that they considered to be outside the scope of pediatrics.

- Pediatricians’ attitudes in conveying messages was crucial.

- Participants offered advice concerning effective ways to communicate parenting messages.

Gun Safety

• Many parents described gun ownership as normative behavior
• Parents felt that “pediatrician would not be able to convince them that keeping guns out of the home is the way to keep children from getting shot”
• Parents within a family may not agree on the issue
Gun Safety cont’d.

- Parents didn’t want record of gun ownership
- Suggest that pediatricians offer gun safety information without asking about ownership
- Present information in a non-condescending way
- Families appreciate written materials to supplement discussion
- Varied comments on usefulness of statistics

Pediatrician Focus Groups

- Difficult to strike a balance between what pediatrician wants to discuss and what family wants to discuss
- Often use news stories or personal experience to bring up difficult topics
- Feel that they receive little specific training on providing anticipatory guidance
- Difficulty in prioritizing issues

Pediatrician Focus Groups

• AAP policy is at odds with the social norms of many patient populations
• Concerns about legal ramifications of corporal punishment discussions

Parents and pediatricians agree that these are difficult topics, but parents do appreciate being provided information on these topics.
Why is it important to discuss “Family Interactions”

- In 2009, Ohio’s child maltreatment fatality rates exceeded the national average by 24%

- In 2009, one child died every 4.6 days from child abuse or neglect

- Ohio’s maltreatment fatality rate has increased by 53% from 1998-2009

http://www.healthyohioprogram.org
Child Maltreatment in Ohio

- In 2009, Children Service Agencies reported that 86 children (< 18yr) per day were the victims of child abuse.

**Child maltreatment by type of abuse, Ohio children <18 years, 2009**

- Medical Neglect
- Psychological
- Sexual Abuse
- Physical Abuse
- Neglect

http://www.healthyohioprogram.org
Child maltreatment rates (per 1,000), Ohio children ages birth to 18, by age group, 2009

http://www.healthyohioprogram.org
References

• http://www.healthyohioprogram.org/~media/HealthyOhio/ASSETS/Files/injury%20prevention/childmaltreatmentfact.ashx
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