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Title

Impact of Healthcare Location Concordance on Receipt of Preventive Care Among Children Whose Parents have a Mental Health Dx

Priority 1 (Research Category)

Child and adolescent health

Presenters

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Abstract

Context: Children of parents with substance use and/or other mental health (SU/MH) diagnoses are at increased risk for physical and mental health problems; thus, regular access to preventive healthcare services such as well child checks (WCCs), are critically important. Children of parents with SU/MH diagnoses are at higher risk for missing these visits. With a multitude of barriers known to affect WCC adherence, it is important to identify factors that may facilitate recommended pediatric care. Objective: To examine receipt of WCCs and immunization completeness among children who received primary care at the same vs. different location as their parent. Study Design: Retrospective observational cohort study. Setting or Dataset: Electronic heart record (EHR) data: 280 community health centers (CHCs) across 17 states from the OCHIN practice based research network. Population Studied: 41,413 parents with >1 SU/MH diagnosis, linked to 65,417 children aged 0-17 years, each with >1 visit to an OCHIN clinic. Outcome Measures: Four dependent variables: rates of WCCs during (1) the first 15 months of life, and (2) ages 3-17 years; vaccine completeness by (3) age 2 years, and (4) age 18 years. Estimates were attained using generalized estimating equations Poisson or logistic regression Results: Among children utilizing the same clinic as their parent versus children using a different clinic (reference group), we observed greater WCC rates in the first 15 months of life [adjusted rate ratio (aRR)=1.06; 95% confidence interval (CI)=1.02-1.10); no difference in WCC rates in ages 3-17; higher odds for vaccine completion by age 2 [adjusted odds ratio (aOR)=1.12; 95% CI=1.03-1.21]; and lower odds for vaccine completion by age 18 (aOR=0.88; 95% CI 0.81-0.95). Conclusions: Among children whose parents have at least one SUD/MH diagnosis, parent-child clinic concordance was associated with greater rates of WCCs and higher odds of completed vaccinations for children in the youngest age groups, but not the older children. This suggests the need for greater emphasis on family-oriented healthcare for young children of parents experiencing SUD/MH; this may be less important for older children.