

Parents are Receptive to a Novel Parenting Assessment Tool Integrated into Pediatric Primary Care

Victoria Lawson, Anna Whitney, Jacqueline Antoun, Laura Henkhaus PhD, Merrill Stoppelbein APRN, Kathryn Carlson MD, Seth Scholer MD
Division of General Pediatrics, Vanderbilt University Medical Center, Nashville, TN, USA



Background

- The American Academy of Pediatrics recommends addressing discipline as a part of primary care, but this is not routinely done.
- A standardized parenting assessment tool could fill this gap by facilitating routine conversations, but it is not known if parents would be receptive to answering questions about their discipline practices.
- The Quick Parenting Assessment (QPA) is a validated, 13 item survey that assesses for healthy and unhealthy discipline practices used in the past month. Scores range from 0-10 and >2 is considered elevated (Figure 1).

Study Aims

• To assess parents' perspectives on the acceptability and usefulness of a parenting assessment tool integrated into pediatric primary care and to examine differences by sociodemographic factors.

Figure 1: The Quick Parenting Assessment Quick Parenting Assessment (QPA) Parents use many options to discipline their children and no parent does it right 100% of the time To support you and your child, please let us know what YOU and OTHER CAREGIVERS do, not what you think you should do. In the past month, what have YOU done when your child needed to be disciplined? . You redirected your child toward a good behavior. For example, you said something like: "Don't | Yes | No bite people, use your teeth to eat food" or "Don't kick the dog, let's go kick a ball". . In general, more than once per day, you used time-out or took away privilege. . In general, more than once per day, you spoke angrily or raised your voice. 4. You told your child that he/she is going to be spanked, smacked, popped, or slapped . You gave your child a spanking, smack, pop, or slap. 6. You told your child something like "You are a bad boy" or "You are a naughty girl . You spent more time with your child to talk about or show them how to improve behavior In the past month, what have your child's OTHER CAREGIVERS done when your child needed to be disciplined? SKIP questions 8-12 if you are the only caregiver. 8. In general, more than once per day, they used time-out or took away privilege 9. In general, more than once per day, they spoke angrily or raised their voice. 10. They told your child that they are going to be spanked, smacked, popped, or slapped 1. They gave your child a spanking, smack, pop, or slap. 2. They told your child something like "You are a bad boy" or "You are a naughty girl" Your health care provider wants to support you. 13. I would like to discuss healthy ways to respond to my child's behavior. Copyright © 2019 Vanderbilt University Medical Center. Yes No

Methods

- In a clinic serving low-income families, the QPA was integrated into well child visits for four different ages: 15-months, 30-months, 5-years, and 8-years.
- Parents completed the QPA during intake and providers were encouraged to review it with parents during the visit.
- After the visit, 417 parents were invited to complete a survey about their experience and 374 (90%) agreed to participate.
- For this cross-sectional study, we focus on 157 parents who reported that the QPA was reviewed by the provider.
- Key measures include parents' concerns about completing the QPA and parents' opinion of the QPA's effect on communication about parenting, helping the provider give the right level of parenting support, and added value.
- We calculated frequencies of parents' responses to the key measures and used Pearson's chi-squared test to assess for associations with sociodemographic factors.

Results

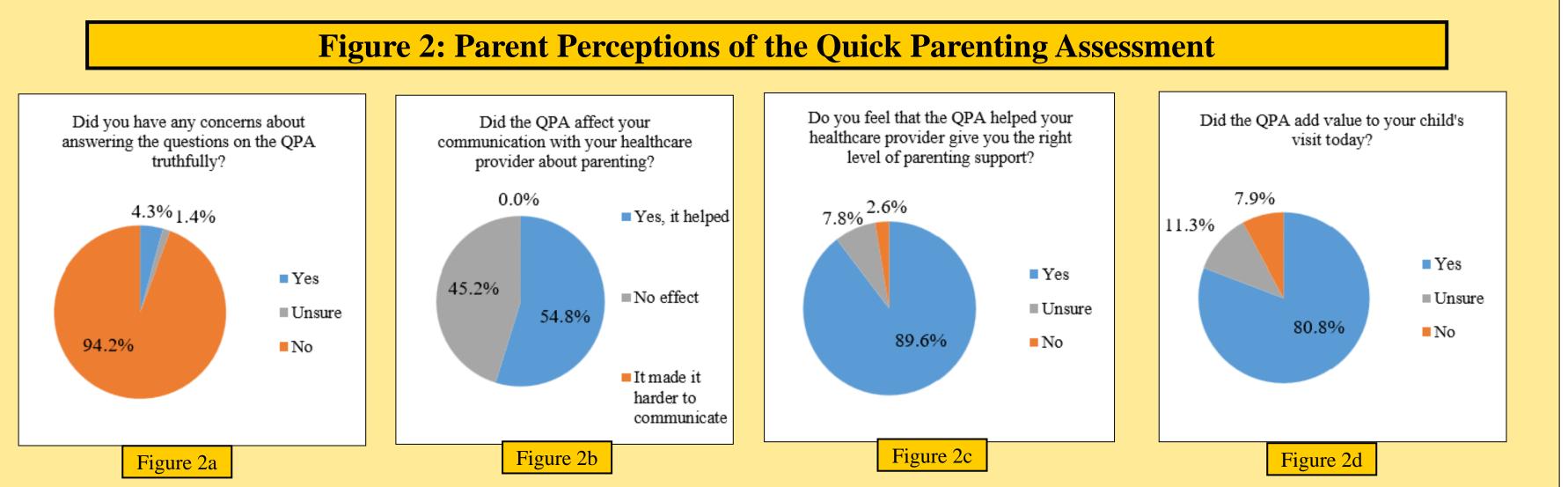


Table: Parent Perceptions of the QPA & Associations with Sociodemographic Factors and QPA Score

| | Parent had concerns about answering QPA questions truthfully % no χ² P | | | The QPA facilitated communication % yes it χ^2 P | | | The QPA helped clinician provide the right level of support 9 yes \chi^2 P | | | The QPA added value to the visit % yes \chi^2 P | | |
|-----------------------------|--|-------|-------|--|-------|-------|--|-------|-------|--|-------|-------|
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | 70 110 | Α | value | helped | ^ | value | 70 yes | ^ | value | 70 yes | Α | value |
| Whole Sample (N=157) | 94.2 | | value | 54.8 | | value | 89.6 | | value | 80.8 | | value |
| Race/Ethnicity | | 1.810 | .613 | | 6.00 | .112 | | 5.320 | .503 | | 8.420 | .209 |
| White (N=30) | 91.7 | | | 58.6 | | | 93.1 | | | 82.6 | | |
| Black (N=70) | 95.0 | | | 44.3 | | | 87.0 | | | 73.5 | | |
| Latino (N=52) | 97.6 | | | 60.8 | | | 94.1 | | | 89.8 | | |
| Other (N= 14) | 100 | | | 71.4 | | | 85.7 | | | 92.9 | | |
| Language | | .403 | .526 | | 5.074 | .079 | | 8.466 | .076 | | 2.929 | .570 |
| English (N=116) | 95.1 | | | 51.3 | | | 89.5 | | | 78.6 | | |
| Spanish (N= 36) | 90.3 | | | 60.0 | | | 94.3 | | | 85.3 | | |
| Arabic (N= 5) | 100 | | | 100 | | | 60.0 | | | 100 | | |
| Parent Education | | 1.930 | .749 | | 1.182 | .757 | | 2.961 | .814 | | 3.707 | .716 |
| < high school (N=31) | 95.7 | | | 60.0 | | | 93.3 | | | 86.2 | | |
| High school (N=51) | 93.3 | | | 49.0 | | | 88.2 | | | 75.5 | | |
| Some college (N=48) | 95.6 | | | 55.3 | | | 91.3 | | | 82.6 | | |
| Bachelors or greater (N=22) | 90.5 | | | 59.1 | | | 86.4 | | | 81.8 | | |
| Number of Children | | .190 | .663 | | .099 | .754 | | 1.386 | .500 | | 9.347 | .009* |
| 1 (N=40) | 94.3 | | | 56.4 | | | 92.1 | | | 97.4 | | |
| >1 (N=115) | 96.0 | | | 53.5 | | | 89.5 | | | 74.8 | | |
| QPA Score | | .265 | .607 | | 4.904 | .027* | | .425 | .809 | | 2.466 | .291 |
| Low 0-2 (N=95) | 95.2 | | | 46.8 | | | 90.3 | | | 77.8 | | |
| Elevated > 2 (N=30) | 92.6 | | | 70.0 | | | 86.7 | | | 90.0 | | |

Conclusions

- A diverse sample of parents were receptive to a parenting assessment tool, finding it acceptable and useful.
- The tool facilitated conversations about discipline, especially for parents using unhealthy practices.
- Parents found the QPA to be a valuable addition to the well child check and this was especially true for parents with only one child
- Parents felt that the QPA helped them receive the right level of parenting support
- The findings support the use of the QPA in pediatric primary care.

Limitations

- This study was conducted at one clinic site.
- There is potential for response bias.

Strengths

- Most parents chose to participate.
- Our sample represented racial and ethnic diversity.

Implications

• The data have implications for how to address parenting as a part of routine pediatric primary care.

Next Steps

- Assess for changes in discipline practices as a result of QPA review.
- Compare perspectives of parents to those of health care providers.
- Trial the QPA at other sites.

For more information, see www.quickparentingassessment.org