

# Association Between Reviewing a Parenting Assessment and Discussions About Discipline in Pediatric Primary Care

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#### **BACKGROUND**

- Parenting is a social determinant of health
- Discussions about healthy discipline are recommended by the American Academy of Pediatrics
- However, many caregivers report not having discussions about discipline with their providers
- The Quick Parenting Assessment (QPA), designed to assess parents' disciplinary behaviors, is a validated tool that has been integrated into well visits at our institution (Figure 1)
- We hypothesized that if providers reviewed the QPA with caregivers, it would increase discussions about discipline

#### **OBJECTIVES**

- Assess association between reviewing a parenting assessment and having a discussion about discipline
- Assess association between reviewing a parenting assessment and measures related to supporting caregivers

# **METHODS**

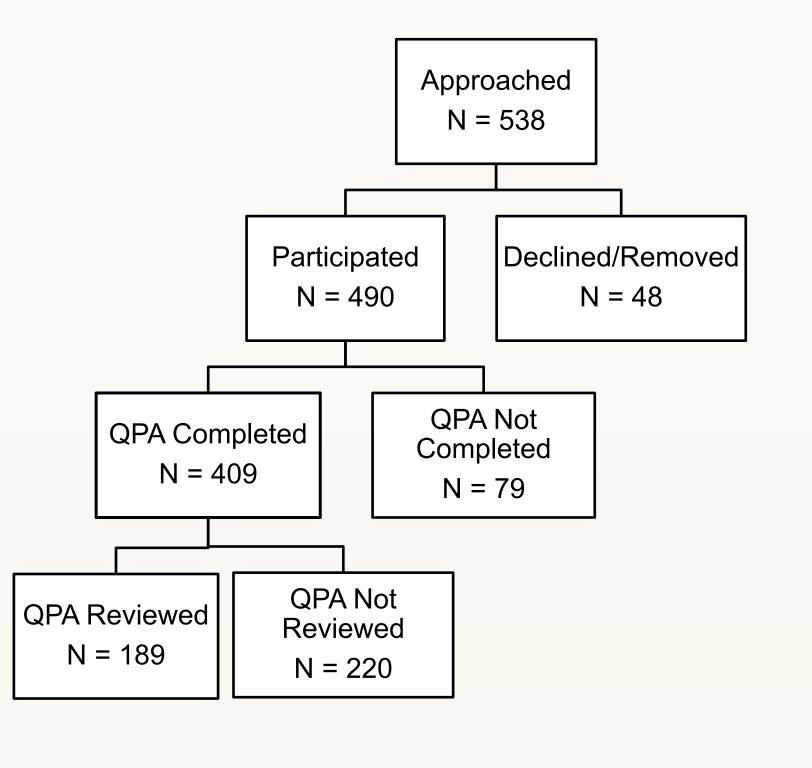
- Setting: primary care clinic serving a diverse population
- QPA given to caregivers at 15-month, 30-month, 5-year, and 8-year well visits
- After visit, caregivers invited to complete a survey about their experiences with the QPA
- Key caregiver-reported outcomes:
- Did a discussion about discipline occur?
- Should healthcare providers ask questions about discipline?
- Who are you likely to seek advice from regarding discipline?
- Outcomes compared between caregivers whose providers reviewed their QPA responses with them and those who did not

# **METHODS**

Figure 1. The Quick Parenting Assessment Items

•	olined?	)
1. You redirected your child toward a good behavior. For example, you said something like: "Don't bite people, use your teeth to eat food" or "Don't kick the dog, let's go kick a ball."		No
2. In general, more than once per day, you used time-out or took away privilege.	Yes	No
3. 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.		
5. 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."		
7. You spent more time with your child to talk about or show them how to improve behavior.	Yes	No
In the past month, what have your child's OTHER CAREGIVERS done when needed to be disciplined? SKIP questions 8-12 if you are the only caregiver.	your c	hild
	your c	hild No
needed to be disciplined? SKIP questions 8-12 if you are the only caregiver.	- -	
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.	Yes	No
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Figure 2. Caregiver Participation Flowchart



# RESULTS

Table 1. Self-Reported Caregiver Characteristics

Caregiver Characteristic		
Parent age (N=399)	31.8±7.9 years	
	% (N)	
Parent gender (N=407)		
Female	86.5 (351)	
Male	13.5 (55)	
Parent race/ethnicity (N=410)		
White	25.2 (103)	
Black or African American	44.7 (183)	
Hispanic or Latino	25.4 (104)	
Other	4.6 (19)	

Table 2. Caregiver-Reported Outcome Measures by QPA Review with Provider

Caregiver-Reported Outcome	Total Sample (%)	QPA Not Reviewed (%)	QPA Reviewed (%)	P-value
	N = 409	N = 220	N = 189	
Did you discuss discipline with your provider? % Yes	57.4	32.4	89.2	<0.001
Should providers ask questions about how children are disciplined? % Yes	84.5	78.2	91.9	<0.001
Who are you more likely to seek discipline advice from?				
Your child's doctor	55.3	50.0	61.5	0.042
A religious leader	8.3	7.3	9.5	
Mental health provider	9.6	12.1	6.7	
Other	26.8	30.6	22.3	

Table 3. Adjusted Odds Ratios for Key Outcome Measures

Caregiver-Reported Outcome	OR	<b>Lower 0.95</b>	<b>Upper 0.95</b>
Discussion about discipline occurred	24.0	12.4	46.6
Providers should ask about discipline	3.73	1.82	7.60
Seek advice from a healthcare provider	1.70	1.08	2.66

# Logistic regression adjustment variables:

Parent age, parent gender, child gender, parent race, parent education level, parent marital status, number of children in household, whether parent was spanked as a child

#### CONCLUSIONS

- Reviewing the QPA was associated with an increased likelihood that providers had discussions about discipline with caregivers
- It appears that a QPA review provides the platform, or scaffolding, for discussions about discipline
- Reviewing a parenting assessment was associated with positive caregiver attitudes toward the role of providers in supporting healthy discipline

### **IMPLICATIONS**

- Incentivizing providers to review a parenting assessment could serve as a standardized way to ensure more caregivers discuss discipline strategies with their provider
- This study has important implications for improving pediatric primary care services and reducing rates of health problems associated with exposure to unhealthy parenting behaviors

#### LIMITATIONS

- Social desirability bias: may lead to underreporting of unhealthy parenting techniques on QPA
- Generalizability: QPA implemented at one academic center to date
- Unknown what prompts providers to review or not review QPA

# **FUTURE STEPS**

- Implement QPA in other clinical settings (e.g., private practice)
- Compare provider and caregiver opinions about QPA
- Investigate the effect of using the QPA on long-term patient outcomes