ABSTRACT

Name of Trainee: Juliann Reardon (juliann.reardon@yale.edu)
Mentors: Pnina Weiss (pnina.weiss@yale.edu) and Thomas Murray (Thomas.s.murray@yale.edu)
Type of Trainee: Fellow

Title: MENTAL HEALTH IN THE PEDIATRIC SUBSPECIALTIES: PHYSICIANS' BELIEFS, CONFIDENCE, AND PRACTICES PROVIDING CARE
J Reardon, P Lembeck, T Murray, A Martin, P Weiss; Yale University School of Medicine

Background: Mental and behavioral health (MBH) issues are prevalent in children with chronic medical conditions and negatively impact health outcomes. However, rates of screening and referral for MBH issues are low among subspecialists. The American Board of Pediatrics has recommended that curricula be instituted to improve subspecialists’ MBH care. However, the goals of such curricula are unclear as barriers to subspecialists and trainees providing MBH care have not been defined.

Methods: Yale School of Medicine pediatric faculty and fellows were surveyed on training, confidence addressing (5-point Likert scale), and screening for MBH issues. Respondents completed a modified Physician Belief Scale (PBS), divided into two subscales (beliefs and burden), with a higher score indicating more negative MBH attitudes. Results were analyzed with descriptive, inferential, and predictive statistics.

Results: Surveys were completed by 71 pediatric faculty and 26 fellows (87 subspecialists, response rate 53%). General pediatricians (GP) endorsed screening more often for MBH issues than subspecialists (OR=3.3, p<0.001). Logistic regression revealed that the significant predictors of a subspecialist screening for MBH issues were MBH education in the past year (p=0.02) and overall physician confidence addressing MBH issues (p=0.02). There was no significant difference in overall PBS scores between subspecialists and general pediatricians. Most notably, subspecialists derived less satisfaction from addressing MBH issues (p=0.02) and believed less strongly that patients want MBH issues treated in their clinics (p=0.02). Many providers reported not having time to address MBH issues (58%). Fellows and attendings reported the lowest confidence with screening and developing MBH action plans for patients; fellows were significantly less confident than attendings in initiating a conversation about MBH issues (p=0.001).

Conclusion: Subspecialists believe less strongly than GP that they should address MBH issues and screen less frequently. Recent education and confidence providing MBH care increased a subspecialist’s likelihood of screening. To improve the quality of care delivered to patients with MBH issues, subspecialists should have frequent MBH education. Training should highlight the importance of addressing MBH issues in subspecialty clinics while addressing perceived burdens on time. Training sessions should teach strategies to initiate discussion about MBH issues, screening, and quick within-visit MBH interventions.

Word Count: 350