

WMU Homer Stryker MD School of Medicine

Research Day

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Patient and Provider Factors that Increase Disclosure of Psychosocial Problems

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Disclosure

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Study findings have been informed by Cradle Kalamazoo partners and Kalamazoo community members.



Background

- **Domestic violence, mental illness, and substance abuse are leading psychosocial risk factors**
 - They are surprisingly common
 - They present substantial health burden, especially during pregnancy
- **Both providers and patients face multiple barriers to disclosure**
 - Patient barriers: CPS, safety, access to healthcare¹, physician trust²
 - Physician barriers: comfort asking the appropriate questions, having the resources for the unique needs of that patient available to them³

Background (cont'd)

- **Disclosure & Provider Relationship**

- Qualitative study indicated that patients may use openness as a strategy to feel comfortable in relating their experience, which may be a precursor to patient-provider relationships and shared decision making.²

- **Disclosure & Socioeconomic Status / Race Demographics**

- Lack of literature H
- However, many studies report on health outcomes in patients with low SES⁴

Research Objectives

1. Describe rates of disclosure to providers

Psychosocial Risks



Disclosure



Research Objectives

1. Describe rates of disclosure to providers
2. Determine if disclosure varies by demographics or by patient-provider relationship

Psychosocial Risks



Disclosure

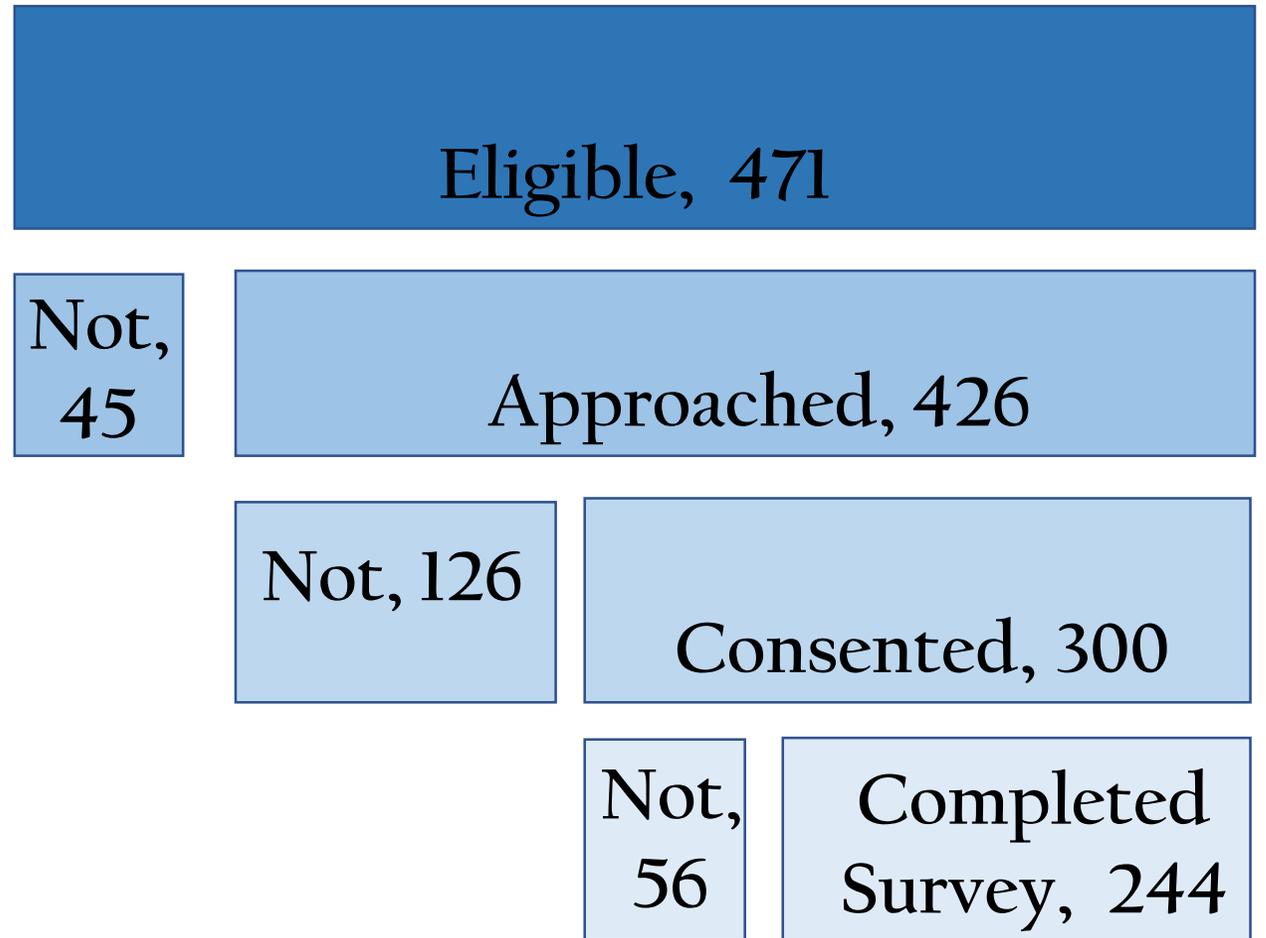


Methods

- DESIGN: Prospective cross-sectional study
- SAMPLE: 244 postpartum women
- RECRUITMENT: Postpartum hospital floors
 - Bronson & Borgess (January-September, 2017)
- DATA COLLECTION: Mixed Methods
 - Telephone survey conducted 2 months postpartum
 - Abstraction medical records
- ANALYSIS: Pearson Chi Square, Logistic regression, $\alpha < .05$

Recruitment

No
differences
by race or
SES



Reasons for not completing:
-2 Withdrew from study
-32 Never reached
-22 Declined survey when reached

Demographics

- The final study sample was representative of the county maternal population across demographic characteristics
 - age, insurance, race and marital status
- Obstetrically, study women were similar to the county maternal population in the proportion
 - with first pregnancies (primagravida) and with single gestation
- However, study women
 - had significantly higher rates of prior preterm deliveries
 - were significantly more likely to have initiated care in the first trimester.

Outcome Measure: Disclosure

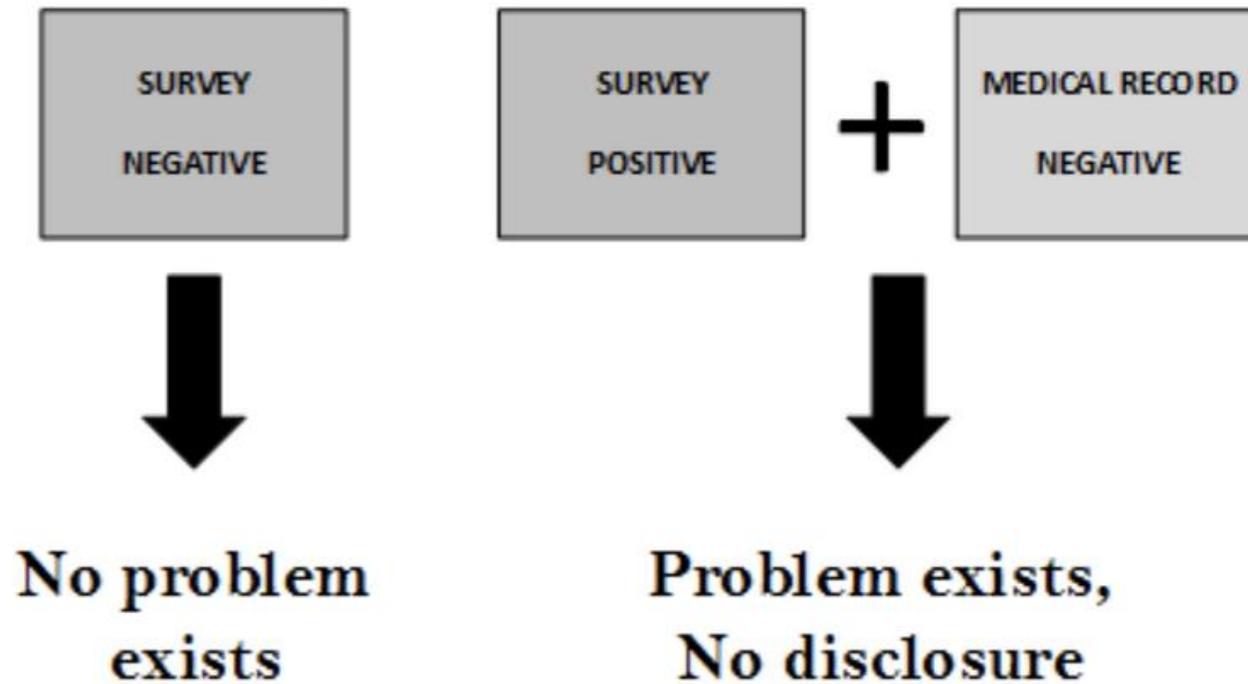
Outcome Measure: Disclosure

SURVEY
NEGATIVE

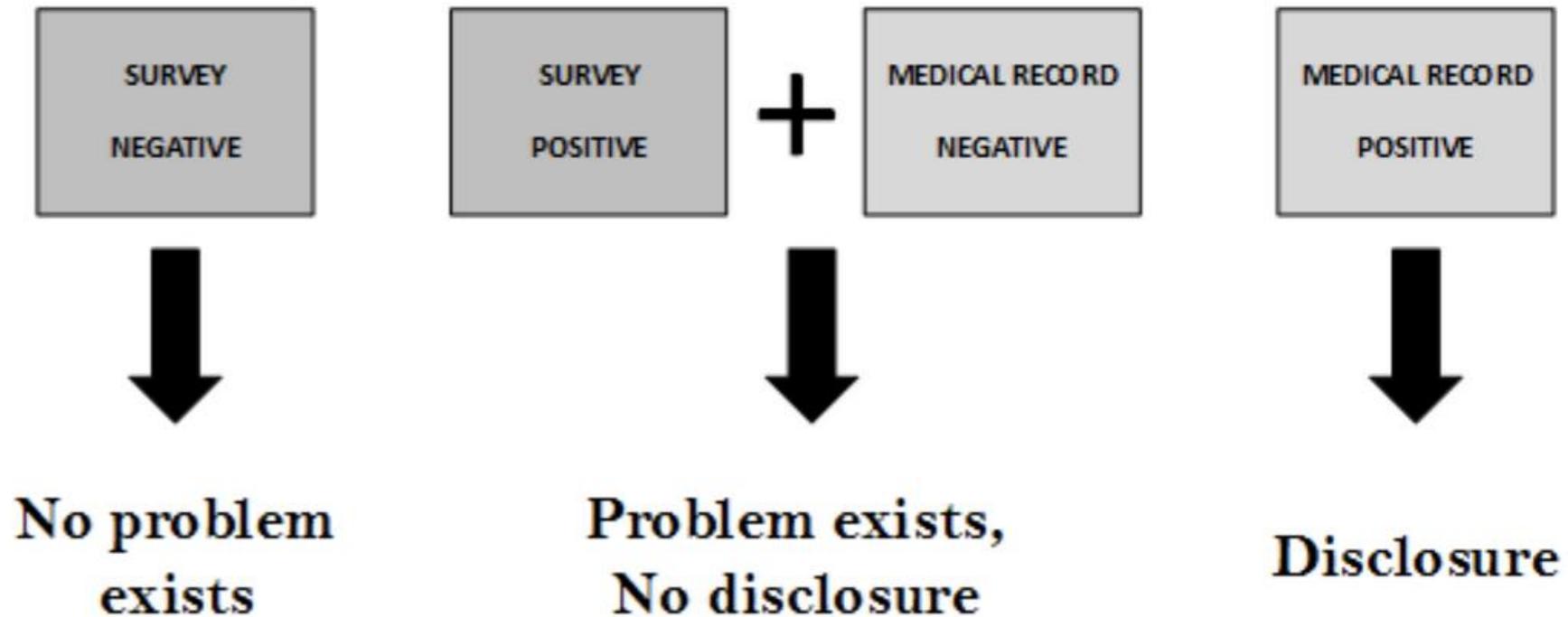


**No problem
exists**

Outcome Measure: Disclosure

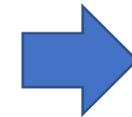


Outcome Measure: Disclosure

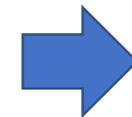


Measuring the Problem(s)...

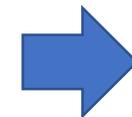
Psychosocial Risk Factor	Measuring Tool Used
Domestic Violence	HITS Domestic Violence Screener, E-HITS
Substance Abuse	NIDA Quick Screen, 5 items
Depression	MI_PRAMS 2012-2015 (CDC Pregnancy Risk Assessment Monitoring System)



Prenatal
HITS 7+



Prenatal
Alcohol

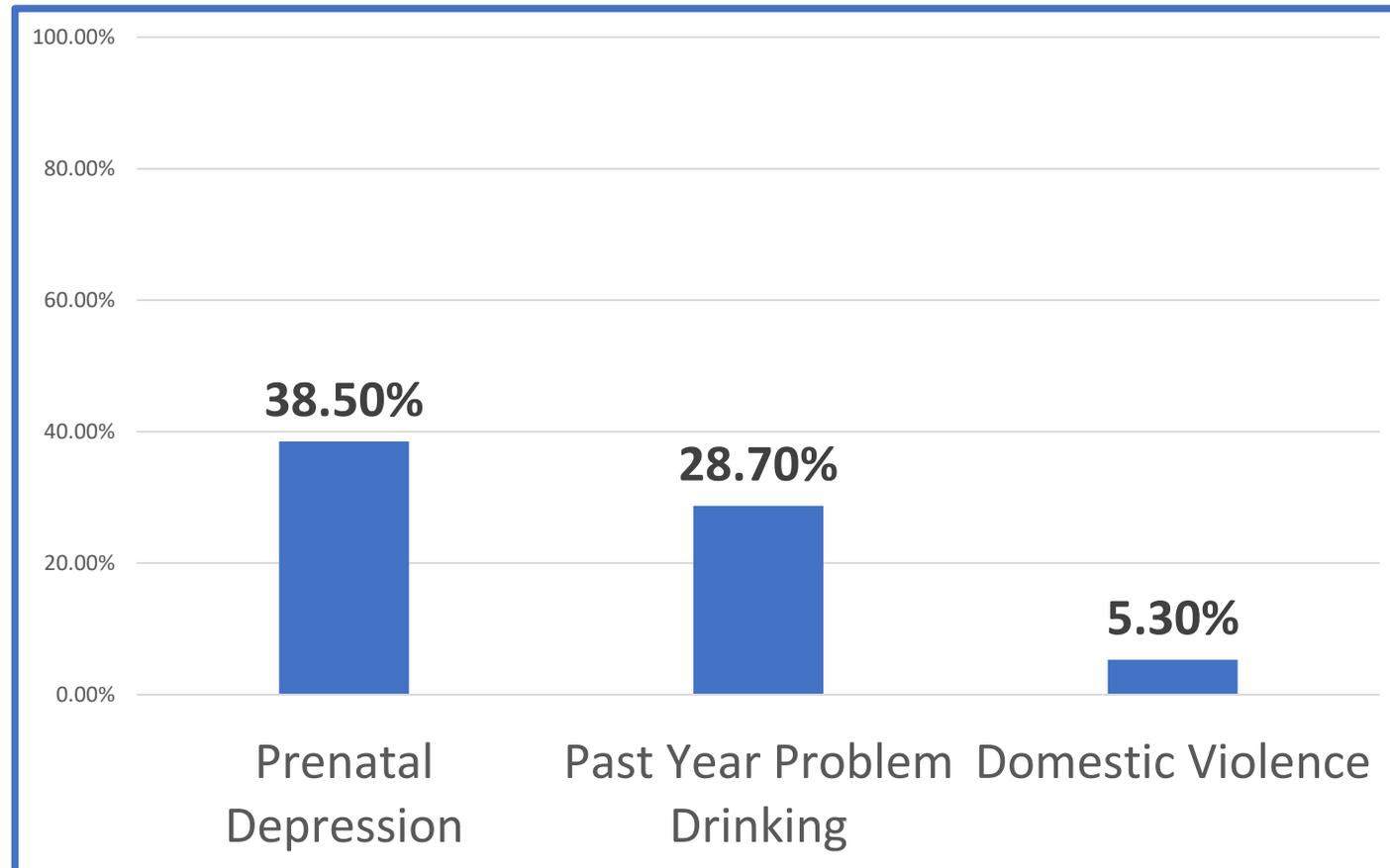


Prenatal
Depression

Problem

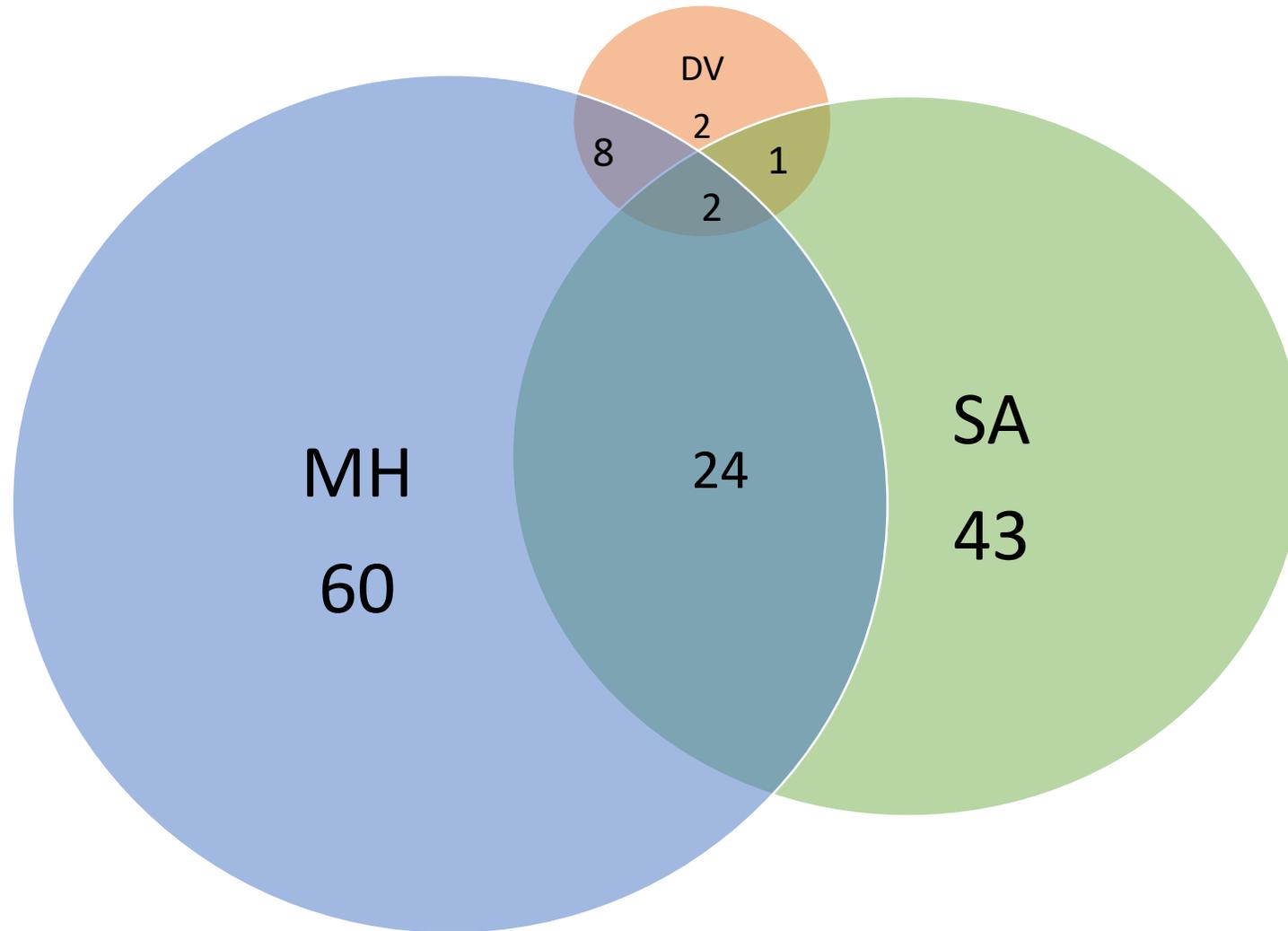
Results: Prevalence of Problems

n=244



57.3% of women experienced a psychosocial problem during perinatality

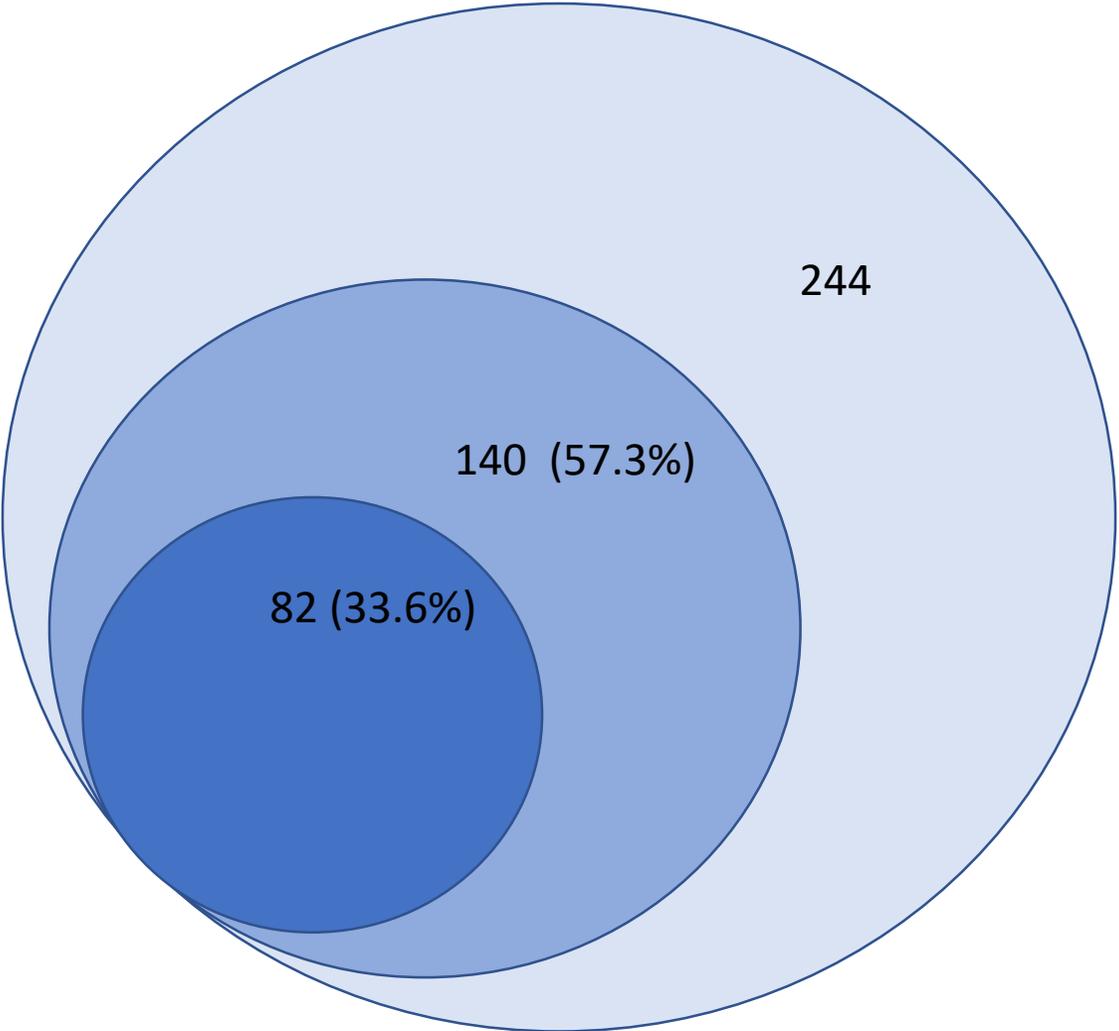
Results: Overlap of Problems



n = 140

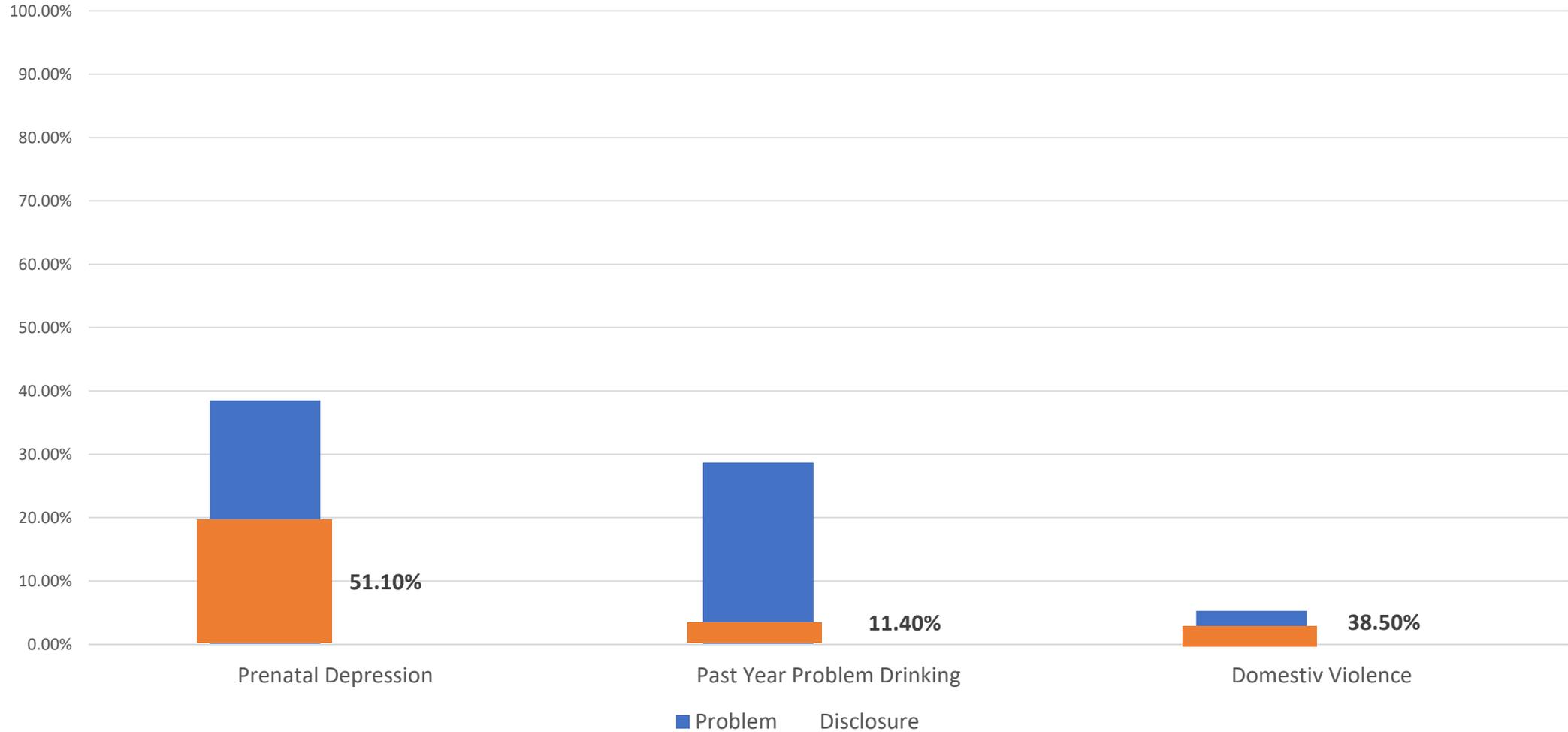
Disclosure

Results: Overall Disclosure



n = 244

Results: Disclosure Rates Vary by Problem



n = 244

Results

LOGISTIC REGRESSION – Predicting Disclosure among those with Problem(s) (n=140)	
Pt-Provider Factors	Medical home (ref=no)
	PCP (ref=no)
	Communication Index*
Problem Factors	Mental Health (ref=no probl)
	Subs Abuse (ref=no probl)
	Dom. Viol. (ref=no probl)
	Multiple problems (ref=single)
Demographics	SES (ref=private ins)
	Race (ref=white)



Results

LOGISTIC REGRESSION – Predicting Disclosure among those with Problem(s) (n=140)			
		Simple Regression	
		OR	CI (p)
Pt-Provider Factors	Medical home (ref=no)	3.03	0.62, 14.81 (.172)
	PCP (ref=no)	0.67	0.34, 1.33 (.251)
	Communication Index*	1.03	0.95, 1.11 (.532)
Problem Factors	Mental Health (ref=no probl)	9.35	3.02, 29.02 (<.001)
	Subs Abuse (ref=no probl)	1.21	0.49, 2.97 (.685)
	Dom. Viol. (ref=no probl)	1.06	0.31, 3.69 (.925)
	Multiple problems (ref=single)	2.76	1.26, 6.05 (.011)
Demogra- phics	SES (ref=private ins)	2.43	1.22, 4.84 (.012)
	Race (ref=white)	1.13	0.57, 2.22 (.735)



Results

LOGISTIC REGRESSION – Predicting Disclosure among those with Problem(s) (n=140)					
		Simple Regression		Multivariable Regression	
		OR	CI (p)	OR	CI (p)
Pt-Provider Factors	Medical home (ref=no)	3.03	0.62, 14.81 (.172)	--	--
	PCP (ref=no)	0.67	0.34, 1.33 (.251)	--	--
	Communication Index*	1.03	0.95, 1.11 (.532)	--	--
Problem Factors	Mental Health (ref=no probl)	9.35	3.02, 29.02 (<.001)	6.81	2.51, 18.47 (<.001)
	Subs Abuse (ref=no probl)	1.21	0.49, 2.97 (.685)	--	--
	Dom. Viol. (ref=no probl)	1.06	0.31, 3.69 (.925)	--	--
	Multiple problems (ref=single)	2.76	1.26, 6.05 (.011)	1.33	0.56, 3.15 (.521)
Demographics	SES (ref=private ins)	2.43	1.22, 4.84 (.012)	1.88	0.88, 3.99 (.102)
	Race (ref=white)	1.13	0.57, 2.22 (.735)	--	--



Results

- Provider factors were not significantly associated with disclosure.
 - Provider factors include:
 - Medical Home
 - Primary Care Provider
 - Provider Relationship
- The type psychosocial problems is associated with disclosure.
 - As Depression increases, so does disclosure

Limitations

- “Problem” measure is a proxy (self-reported)
- “Disclosure” measures are limited...
 - Our abstraction from the medical records
 - Just because its not documented doesn't mean it wasn't disclosed or asked.
 - We also don't know if it was asked multiple times and not recorded

Conclusions

- Psychosocial problems are common among pregnant women
- Disclosure was not
- Patient circumstances mattered more than provider characteristics
 - Patient circumstances included having multiple problems and having a lower income
 - Provider characteristics included having a medical home, a primary care provider, and a relationship with the provider

Implications

- Consider flipping the medical diagnose-treat, and applying a resource-first approach to social problems
- Depression should be a red flag
- It could be the first step for women with multiple, complex psychosocial problems

Citations

1. Fleegler EW, Lieu TA, Wise PH, Muret-Wagstaff S. Families Health-Related Social Problems and Missed Referral Opportunities. *Pediatrics*. 2007;119(6). doi:10.1542/peds.2006-1505
2. King PAL, Cederbaum JA, Kurzban S, Norton T, Palmer SC, Coyne JC. Role of patient treatment beliefs and provider characteristics in establishing patient-provider relationships. *Family Practice*. 2015;32(2):224-231. doi:10.1093/fampra/cmu085
3. Feder GS. Women Exposed to Intimate Partner Violence. *Archives of Internal Medicine*. 2006;166(1):22. doi:10.1001/archinte.166.1.22
4. Schultz, William M, et al. "Socioeconomic Status and Cardiovascular Outcomes." *Circulation*, vol. 137, no. 20, 15 May 2018.