Evaluating Knowledge of Developmental Disabilities Among WIC Participants

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Evaluating Knowledge of Developmental Disabilities Among WIC Participants

Carolina Regalado; Alison Chavez, B.A.; Julie Reeder, Ph.D., M.P.H.; Katharine Zuckerman, M.D., M.P.H.

Background

- One in six children in the U.S. has a developmental disability (DD) such as intellectual disability, language delay, autism spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD) or Down Syndrome.
- Early diagnosis of DDs improves long-term child development and improves family coping strategies; however, under-diagnosis and late diagnosis are more prevalent in low-income and racial/ethnic minority families.
- The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is a national public health program that has been providing health screenings, nutritional education, referrals and supplemental foods for the last 40 years.4
- WIC may be a promising setting for early identification of DDs since little is known about the reasons behind late diagnosis amongst minority children.

Objectives

- To assess what parents attending WIC know about typical child development and common developmental conditions of early childhood.
- To evaluate the connection between ethnicity and English proficiency in WIC participant knowledge of child development and in knowing someone with a developmental condition.

Methods

- Parents (n=539) with children 24-59 months of age attending WIC clinics in six Oregon counties were asked to complete a survey in English or Spanish.
- Two bilingual, bicultural research assistants helped parents needing oral administration.
- Survey items included:
  - Questions asking whether parents know individuals with DDs
  - “Quiz” on signs of typical and atypical child development
  - Parents’ familiarity with DDs
  - Questions asking whether parents know individuals with DDs

Respondent Demographics

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Parent Gender</th>
<th>Parent Race/Ethnicity</th>
<th>Education Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Percentage</td>
<td>Percentage</td>
<td>Percentage</td>
</tr>
<tr>
<td></td>
<td>(N=539)</td>
<td>(N=539)</td>
<td>(N=539)</td>
</tr>
<tr>
<td>Female</td>
<td>91%</td>
<td>31%</td>
<td>16%</td>
</tr>
<tr>
<td>Male</td>
<td>9%</td>
<td>70%</td>
<td>24%</td>
</tr>
</tbody>
</table>

Parent Race/Ethnicity

- Non-Latino white 31%
- Latino - English proficient (EP) 20%
- Latino - limited English proficient (LEP) 38%

Education Level

- 8th grade or less 16%
- High school graduate or GED completed 28%
- Some college education 34%
- Associate or Bachelor’s degree completed 6%
- Mean parent age 31

Results

- Down Syndrome: White non-Latino 16%, Latino-EP 23%, Latino-LEP 16%

Conclusions and Implications

- Lack of information and awareness about DDs may constitute a significant barrier to DDs identification within the Latino population.

Suggestions for Creating Awareness about Disabilities

- Since low health literacy may be an obstacle to understanding written health information, visual and auditory materials on child development in English and Spanish may be viable alternatives for teaching Latino families about the early signs of DDs.
- Encourage Spanish language media exposure, community outreach, and public presentations focusing on recognizing typical and atypical child development.
- Increase knowledge and awareness of DDs in the Latino community by providing information and support in areas Latinos frequent for healthcare services, such as WIC clinics. Support services could take the form of organized parent support groups focused on sharing concerns about developmental conditions.
- Inform healthcare providers on how to educate the Latino community about early signs of developmental disabilities.
- Advise WIC participants with limited English proficiency to take advantage of interpreter availability during doctor visits to ensure they communicate all healthcare concerns.