

Intervention addresses pediatric patient families' social needs

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An intervention that paired caregivers with a navigator to help address the social needs of families of pediatric patients was associated with decreased needs reported by the families and improved overall child health status, according to an article published online by *JAMA Pediatrics*.

Social adversities in childhood disproportionately affect low-income and racial minority populations. Factors such as family financial stress, [food insecurity](#) and housing instability have been linked to increased risk of adverse outcomes. Social interventions have emerged in pediatric clinical settings.

Laura Gottlieb, M.D., M.P.H., of the University of California, San Francisco, and coauthors examined an in-person screening and case management intervention on family social needs and parent-reported child global [health status](#).

The study included 1,809 [caregivers](#), with 937 families assigned to an active [control group](#) and 872 families assigned to the intervention group with a navigator to assist families. The children were primarily Hispanic white and non-Hispanic black with an average age of 5. Caregivers were mostly female and had family incomes below the federal poverty level.

Caregivers used questionnaires to assess 14 possible social needs, including food insecurity, not having enough money to pay utility bills, trouble finding a job, not having a place to live and living in an unhealthy environment. Navigators for the intervention group provided information related to resources including child care providers, transportation, help with [utility bills](#), and shelter arrangements. The control group received written resource information without the help of a navigator or follow-up.

At the study start, the number of social needs reported by caregivers ranged from zero to 11 out

of 14 with an average of 2.7 needs reported. Most caregivers at baseline reported overall child health as excellent or very good.

Four months after enrollment in the study, the number of social needs reported by caregivers in the intervention group decreased more than those reported by caregivers in the control group. Also, caregivers in the [intervention group](#) reported more improvement in overall child health status, according to the results.

Study limitations include using a single item to assess child health status and participants in the navigation arm reporting more social needs on average at baseline.

"These findings extend previous work documenting the associations between social adversities experienced in childhood and health outcomes, as well as on process outcomes related to social interventions. ... While more work documenting health and health care use effects of social determinants of health interventions is needed to guide investments in this area, the finding that the low-intensity interventions undertaken in this study can affect [child health](#) outcomes underlines the value of such programs," the authors report.

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