


National Survey of Child and Adolescent Well-Being




Caregiver Depression, Mental Health Service Use, and Child Outcomes

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Mental Health Needs and Service Utilization among Children and Families in the Child Welfare System:
Recent Findings from the National Survey of Child and Adolescent Well-Being

20th Annual Research Conference
A System of Care for Children's Mental Health: Expanding the Research Base
March 6, 2007


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Study Aims

- To explore the prevalence and correlates of major depression in caregivers of children in contact with child welfare;
- To identify the rates, predictors, and outcomes of mental health service use for caregivers with major depression; and
- To examine the impact of mental health service receipt by depressed caregivers on their children

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METHODS


SAMPLE:
N = 2,959
Caregivers and children at home at baseline (N = 4,285)
Exclusions: Children under age 2 (N = 1,222) and depression measure missing (N = 104)

STUDY PERIODS: Baseline, 18-month, and 36-month

MEASURES:
Demographic characteristics
Baseline risk assessment
Composite International Diagnostic Interview Short-Form (CIDI-SF) for depression and substance dependence
Type of maltreatment
Mental health service use by caregiver and child
Child placement out of home
New report of abuse

DATA ANALYSIS: Descriptive, Bivariate analysis, Survey logistic regression


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Predictor Variables

Caregiver	Child
Age	Age
Gender	Gender
Highest degree	Mental health service use
High School	CBCL (clinical range any wave)
Some college	Internalizing
B/BS and above	Externalizing
Poverty	Subsequent maltreatment
Urban	Time
Risk factors	18 months
Medium	36 months
High	
Diagnosis and service use	
Depression	
Substance dependence	
Mental health service use	


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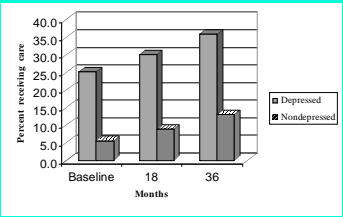
Significant Differences (p<.05) Between Depressed and Nondepressed Caregivers

Characteristic	Depressed Caregivers (N = 1,143 / 40.3%)	Nondepressed Caregivers (N = 1,816 / 59.7%)
Caregiver		
Poverty	56.9	48.1
Substance dependence	14.5	4.8
Child		
Clinical range		
CBCL		
Internalizing	40.3	24.6
Externalizing	57.9	35.1
Total	58.0	38.0
Mental health service use	52.5	38.2
by 36 months		
New report of abuse	38.4	23.6
by 36 months		

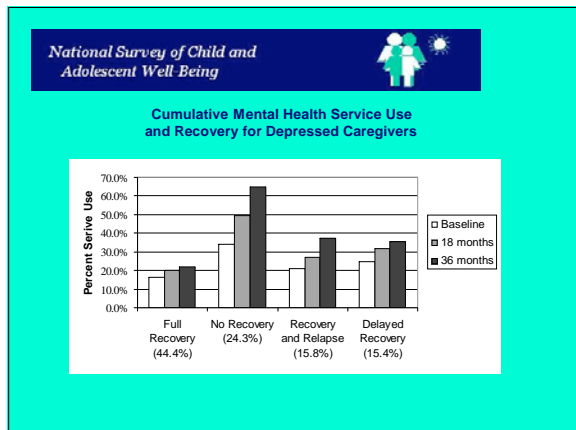
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Cumulative Mental Health Service Use by Depressed and Nondepressed Caregivers



Months	Depressed (%)	Nondepressed (%)
Baseline	~28	~10
18	~32	~15
36	~38	~20



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Impact of Caregiver Depression on Caregiver Mental Health Service Use
Selected Significant Odds Ratios (Standard Errors)

Outcome	OR	(SE)
Caregiver mental health service use		
CBCL internalizing	1.03	(0.01)
CBCL externalizing	1.03	(0.01)

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Impact of Caregiver Depression on CBCL Clinical Range
Selected Significant Odds Ratios (Standard Errors)

Outcome	OR	(SE)
CBCL in clinical range (main effects model)		
Caregiver depression	2.78	(0.47)
Child MH service use	4.92	(0.93)
Mediating effect of caregiver MH service use		
Caregiver depression	2.51	(0.40)
Caregiver MH service use	1.72	(0.32)
Child MH service use	4.69	(0.88)

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Impact of Caregiver Depression on Child Placement
Selected Significant Odds Ratios (Standard Errors)

Outcome	OR	(SE)
Child placement (main effects)		
Older caregiver	1.03	(0.01)
High risk factors	3.19	(1.11)
Mediating effect of caregiver MH service use		
High risk factors	3.97	(1.88)
Subsequent report of maltreatment	2.31	(0.82)

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Impact of Caregiver Depression on Report of Subsequent Maltreatment
Selected Significant Odds Ratios (Standard Errors)

Outcome	OR	(SE)
Subsequent report of child maltreatment		
Poverty	1.72	(0.37)
Medium risk factors	1.79	(0.43)
High risk factors	2.21	(0.58)
Caregiver depression	1.60	(0.33)
CBCL externalizing	1.90	(0.48)
Child MH service use	1.60	(0.34)
Mediating effect of caregiver MH service use		
Poverty	1.77	(0.41)
Urban	2.04	(0.51)
Medium risk factors	1.78	(0.41)
High risk factors	2.24	(0.67)
Caregiver MH service use	1.82	(0.42)
CBCL externalizing	1.73	(0.47)
Child MH service use	1.58	(0.33)

- National Survey of Child and Adolescent Well Being**
- Summary**
- Caregiver depression is prevalent, highly associated with clinical range CBCL for youth, and full remission over 36 months is low (60%)
 - Mental health service use for caregiver depression was also low (35%) with minimal increase over time (from 25-35% over three years)
 - Clinical range CBCL for youth is closely related to caregiver depression and mental health service use by both caregiver and child
 - Child placement is predicted by older caregiver, high risk factors, and subsequent maltreatment, but not by caregiver depression or caregiver mental health service use
 - A new report of child maltreatment is predicted by many factors, including caregiver depression, but not by caregiver depression when depressed caregivers received mental health services



Implications

- The high rate of co-occurring caregiver depression, and clinical need among their children, strongly suggests screening for both
- Prior research, particularly by Weissman and colleagues (2006), documents the benefits of treatment for caregiver depression on clinical outcomes of youth, not found in NSCAW, suggesting earlier intervention and exploration of quality of care for this population
- Children of depressed caregivers were more likely to receive mental health services (52.5%) than their caregivers, which underscores the need to coordinate treatment for both or to provide integrated care