Fragmented Care for Inner-city Minority Children with Attention-deficit/Hyperactivity Disorder

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OBJECTIVES: To identify systematic problems in coordinating care for inner-city minority youth with attention-deficit/hyperactivity disorder (ADHD).

DESIGN: Focus group study.

SETTING: We recruited participants from inner-city minority communities in a single metropolitan area. We held separate meetings for pediatricians, mental health therapists, school staff, and parents (both African-American and Latino).

PROCEDURES: We audiotaped and transcribed the meetings. We identified themes by consensus and used Root Cause Analysis as a conceptual framework to guide our analysis.

RESULTS: We held 13 focus group meetings. Participants uniformly perceived insufficient communication and coordination of care. Five themes representing system and human factors emerged that contributed to this fragmentation in care: 1) a lack of consensus about who should oversee care; 2) changes in health care providers or teachers; 3) uncertainty in the diagnosis, insufficient training, and few resources; 4) distrust and blame that emerged when relationships among people caring for the child were absent or otherwise inadequate; 5) lack of support from employers, friends, and family to engage in collaborative care.

CONCLUSIONS: Using a Root Cause Analysis framework, we identified system- and human-level factors that were perceived to impede communication and coordination of care for this population of children with ADHD. These results suggest that better organizational policies that define provider responsibilities and accountability, support the coordination of care, bridge relationships between agencies, and provide additional education and resources may improve collaboration. Further study is needed to assess the generalizability of these finding to other settings.

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