Effects of an Education and Training Intervention on Caregiver Knowledge of Non-Urgent Pediatric Complaints and on Child Health Services Utilization

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OBJECTIVES: The objective of this study was to test the impact of an education and training intervention about management of common childhood illnesses on caregiver knowledge and health service use by an index child.

METHODS: This was a quasi-experimental, preintervention-postintervention pilot study of a primary care-based intervention among 32 caregivers of urban children aged 7 months to 5 years. Intervention consisted of a 90-minute educational activity developed after input from focus groups and taught by pediatric nurses; it addressed management of fever, colds, and minor trauma in children at home. Caregiver knowledge before, immediately after, and 6 months after intervention was tested using a written instrument. Health services utilization for an index child in the family was collected 6 months before and after intervention.

RESULTS:Caregiver knowledge, as assessed by mean score on the test instrument, increased immediately after the intervention. It was lower at 6-month follow-up but remained higher than pretest. Total health services utilization, adjusted for patient and caregiver factors, did not change significantly 6 months after the intervention. After-hours calls to the primary care physician increased from a mean of 0.33 to 1.46 per patient (P = 0.047), making it the only behavior with significant change. Preintervention health services utilization was the strongest positive predictor of postintervention health services use.

CONCLUSIONS: The primary care-based intervention led to increased caregiver knowledge regarding management of common minor childhood illnesses and to increased after-hours telephone use. There was no significant decrease in ED use. To reduce reliance on the ED for nonurgent conditions, additional strategies may be needed.

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