



Parental Perception of Facilitators and Barriers to Health Among Young Children with Down Syndrome

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Background and Significance

Children with Down syndrome:

- are at heightened risk for obesity and related co-morbidities.
- demonstrate rapid weight gain between the ages of 2 and 6.

In order to develop health promoting interventions tailored to meet the needs of children with Down syndrome, it is critical that we understand the unique facilitators and barriers to health families experience.

Objective

To describe the facilitators and barriers to health among young children with Down syndrome from the perspective of parents.

Methods

Design: Qualitative (semi-structured interviews)

Participants:

- Parents of young children (aged 1-3) with Down syndrome

Measures: Transcribed interviews, Codebook, NVivo

Data Analysis:

- A codebook of topics and potential themes was developed using a socioecological model of obesity risk for children with developmental disabilities.
- Interviews were coded in NVivo software using the codebook by three independent coders.
- Facilitators/barriers were categorized at the level of child, family, or community.
- Iterative thematic analysis was completed by the research team to identify common themes reported among participant families.

Results

Demographics (N=25)

Child Characteristics	n (%)	Parent Characteristics	n (%)
<i>Child Gender</i>		<i>Parent Gender</i>	
Female	14 (56)	Female	25 (100)
<i>Child Race</i>		<i>Parent Employment</i>	
White/Caucasian	22 (88)	Full-Time	11 (46)
Multi-racial	2 (8)	Works in Home	9 (38)
<i>Child Ethnicity</i>		<i>Parent Education</i>	
Non-Hispanic	20 (80)	Bachelors Degree	8 (33)

FACILITATORS

At the child level:



At the family level:



BARRIERS

At the child level:



At the family level:



Conclusion

- Families of young children with Down syndrome face similar barriers to healthy habits as other families (i.e., competing demands and convenience of fast food).
- Children with Down syndrome also have unique medical issues and developmental delays that contribute to additional barriers to healthy habits (i.e., satiety signals, sleep apnea, need for adaptive devices).

Clinical Implications

- Existing obesity prevention intervention programs may not meet the needs of families with young children with Down syndrome.
- Tailoring interventions to empower parents to build healthy family routines and overcome these barriers is critical to promote better health outcomes long-term.

Future Work

We are currently testing the feasibility of a novel intervention, PrO-PEAR (Preventing Obesity through Parent Empowerment and the Activation of Routines) in a sample of young children with Down syndrome.

This intervention was developed using existing obesity prevention programs, mixed methods data, and a steering committee of stakeholders.

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