

Parental depression linked to kids' increased use of health services

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Parental ill health, especially depression, is linked to heightened use of health services, including emergency care, among their children, finds research published today in the online journal *BMJ Paediatrics Open*.

Family context may be an influential driver of healthcare needs and use, suggest the researchers.

Survey data have pointed to a link between parents' use of [health](#) services and patterns of use among their [children](#). To explore this issue further, the researchers reviewed the [electronic health records](#) of more than 25,000 patients registered with one family doctor (GP) practice in London, covering a period of 12 months.

They created 'household' groups of patients living at the same address and then calculated the impact of parents' long term conditions and use of health services on their children's health seeking behaviour in four domains of care: GP appointments; emergency department attendance; hospital admissions; and outpatient appointments.

The children were divided into three age groups: 0-5; 6-10; and 11-15, and potentially influential factors, such as deprivation levels, derived from postcode; parental age; and gender were taken into account.

Some 6738 children up to the age of 15, living in 3373 households with parents aged 18-55 were included in the final analysis. Nearly 2500 (41%) children lived in a single parent household; the same proportion

lived with two parents; and nearly one in five (19%) lived with three or more adults.

The most common long term condition their parents had was depression. Nearly 1000 (16%) children had a parent who had been diagnosed with this.

After taking account of parents' use of healthcare, the analysis showed that parental depression was associated with increased odds of a child's use of [health services](#).

The odds of attendance at an emergency department rose by 41 percent; while odds of admission to hospital and an outpatient appointment rose by 47 percent and 67 percent, respectively. And the risk of a GP appointment rose by 28 percent.

Parental GP consultations were associated with a 7 percent greater risk of the child seeing the GP as well, while the parent's attendance at an [emergency care](#) department was associated with 27 percent greater odds of the child also seeking emergency care.

This is an observational study, and as such, can't establish cause. What's more, given that the study focused on one general practice, the findings might not readily apply elsewhere, say the researchers. Nor was it possible to assess the degree of social support these families had from relatives, such as grandparents, who didn't live in the same household.

But there are several possible explanations for the findings, they suggest, including parents' perception that their children might be more susceptible to health problems, or that [parental depression](#) might be a consequence of prolonged illness in a child.

"The results presented in this paper suggest that a holistic assessment of

family needs, particularly parental mental health and social support, may be an effective approach to improving the health and wellbeing of [children and young people]," they conclude.

More information: Associations between parental mental health and other family factors and healthcare utilisation among children and young people: a retrospective, cross-sectional study of linked healthcare data, [DOI: 10.1136/bmjpo-2018-000266](https://doi.org/10.1136/bmjpo-2018-000266)

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