Title: Early Caregiver Concerns: Differentiating Diagnoses in Young Children

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Introduction: The American Academy of Pediatrics early screening guidelines recommend that practitioners listen closely to parents concerns (Johnson & Myers, 2007), as studies consistently demonstrate that early identification and early intervention ameliorate the symptoms of many childhood conditions (Zwaigenbaum, Bauman, Stone, & Yirmiya, 2015). Research suggests parent concerns often precede a diagnosis of a neurodevelopmental disorder such as ASD (Zablotsky et al., 2017). Further, specific parent concerns may be predictive of a diagnosis of ASD (Ozonoff et al., 2009), as well as differentiate children with ASD from other developmental disorders (i.e., Horovitz, Matson, & Sipes, 2011). If we better understand the early parent concerns of multiple diagnoses, we may better devise screening tools. Therefore, this study investigated the extent to which parent concerns differentiated multiple diagnostic categories among children aged 12 months-12 years.

Method: We conducted a secondary analysis with data drawn from a large community-based diagnostic center. The sample included n=1083 children 12 months-12 years (M= 65.51; SD= 30.66), including children with ASD (n=594), ADHD (n= 171), ASD and ADHD (n= 89), conduct disorders (n= 88), developmental delays (n= 80), and speech and language disorders (n= 61). Prior to a diagnostic evaluation, parents reported their top three concerns on intake paperwork. Parent concerns were coded into eight categories including 1) externalizing behavior, 2) medication, 3) motor, 4) general development, 5) speech/communication, 6) social interactions, 7) stereotyped behaviors, 8) medical. We performed multinomial logistic regression with parent concerns as predictors of six diagnostic categories (i.e., ASD, ASD and ADHD, ADHD, conduct disorders, developmental delays, and speech and language disorders), while controlling for chronological age.

Results: Parent concerns significantly differentiated children with ASD from all other diagnostic categories, with a significant overall model fit ($\chi^2=318.523$, $df=45$, $p<0.001$; Cox and Snell $= 0.255$; Nagelkerke $= 0.272$). Children with ASD were significantly differentiated from all other diagnostic categories when parents reported concerns of speech/communication or social interactions, except for children with both ASD and ADHD. Children with both ASD and ADHD were differentiated from children with ASD when parents reported externalizing, medication, and general development concerns.

Discussion: Overall, our results suggest parent concerns may help predict multiple diagnostic groups. While certain types of parent concerns may predict ASD, fewer studies have examined how parent concerns predict and differentiate multiple diagnoses. Results indicated that parent concerns preceding a diagnostic evaluation significantly differ among children with various diagnoses, indicating the clinical value of parent reports of concerning child behaviors. Parent concerns often aligned with core diagnostic criteria, suggesting parent observations of child behavior may be better integrated into existing screening measures.

References/Citations: