Epidemiological Study of Developmental Progress in Vulnerable Oklahoma Families

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**Background**

Developmental and behavioral difficulties (DBDs) cost society an estimated $250 billion per year. With DBD prevalence on the rise, the economic gradient is steepening. DBDs predominantly persist among two groups of vulnerable children: 1) those susceptible to child abuse or neglect due to insufficient care or nurturance; and 2) those, who despite adequate care, suffer developmental and/or behavioral delays or disorders from a very early age. Both groups of children are disproportionately represented among low SES families. When unnoticed and untreated, the price of DBDs and the number of ensuing negative impacts increases. Early interventions have proven effective at remediating and preventing many DBDs, but resources for early identification are limited. The present study examines DBD prevalence among a sample of highly vulnerable Oklahoma children, and attempts to build the case for wise use of resources aimed at targeted therapeutic efforts.

**Methods**

This study is part of a larger evaluation of Oklahoma home-visiting programs with recruitment being based on Medicaid and WIC eligibility.Using an in-home survey, 1204 vulnerable families in four Oklahoma counties answered screening questions about the following areas of concern: general developmental and emotional delays (ASQ-3), autism spectrum disorder (ASRS, MCHAT, CSBS), child sexual behavior problems (CBCL items), and child abuse potential (BCAPI).

**Results**

The ASQ-3 “at-risk” cut-scores are intended to reflect the bottom 2.5% of the population. This study’s sample percentages were as follows: Communication 22%, Gross Motor skills 11%, Fine Motor Skills 20%, Problem Solving 12%, and Personal-Social problems 13%. When screening for ASD, 17% of the eligible participants (n=240) were classified “at risk” on the MCHAT (compared to 7% nationally), 26% on the ASRS (n=180) qualified for the “very elevated risk” category (98th percentile nationally), and 18% on the CSBS were “at risk” (n=658; 90th percentile nationally). The CBCL responses ranged from 0% to 4% with no significant deviation from national norms. The BCAP child abuse scale indicated that 29% fell into the “at risk” category (n=568).

**Conclusions**

The results show the at-risk proportion for nearly all developmental markers exceed normative expectations. These findings suggest that screening and subsequent referrals for this population would be a cost-effective use of early identification resources.