



# HEALTHY HOMES, HEALTHY FUTURES: A HOME VISITATION CURRICULUM FOR PEDIATRIC RESIDENTS



CHILDREN'S NATIONAL HEALTH SYSTEM

Washington, DC

*Educators from the District of Columbia's largest pediatric residency program developed a focused home visitation curriculum to improve residents' understanding of the social determinants of health, how these determinants relate to obesity, and critical obesity-management skills beyond the office setting. This program could be completed at any time during resident training.*

## SCENARIO

Washington, DC, consistently exceeds the national average in prevalence of obesity in children 10-17 years old. Although pediatric clinical guidelines suggest addressing the multifactorial causes of obesity through behavioral lifestyle modifications to create a healthy home environment, office-based counseling is often ineffective when delivered by providers who lack a working knowledge of the barriers that families face struggling with obesity face in their homes and neighborhood environments.

A needs assessment of pediatric residents in the Community Health Track indicated that they needed additional training on ways to discuss obesity management with families from different backgrounds than themselves. Program leaders endeavored to develop a program that would (1) improve residents' understanding of community resources and insights into families' perspectives and (2) cultivate tangible skills that could be used in future clinical encounters such as referrals and communication strategies.

### Educational Objectives

Enable residents to:

- ▶ discuss appropriate child nutrition recommendations;
- ▶ illustrate how social determinants of health affect obesity;
- ▶ apply motivational interviewing skills to guide a family struggling with obesity through choosing appropriate personal healthy living goals; and
- ▶ formulate personalized recommendations for a family struggling with obesity based on what is learned from a home and neighborhood assessment and discussions with the family.

## About the Educators



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Community Health Track



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### KEY COMPETENCIES:

Disparities/Inequities in Care  
Integration of Community Care  
Language for Obesity  
Strategies for Patient Care  
Weight Bias & Stigma



# CURRICULUM

A **home-visitation curriculum** was developed and implemented in consultation with leaders from other residency programs with success in this area and several content experts, including two registered dietitians, the Director of Home Visiting for a local agency, and a community social worker. *Appointing a curriculum coordinator is highly recommended.*



## Self-Study Modules

Residents reviewed three 1-hour modules and an article on motivational interviewing.

- Home Visitation 101
- Nutrition & Health 101
- Social Determinants of Health 101

Optional: AAP Change Talk interactive module to practice motivational interviewing skills

## In-Home Visits

Residents selected a family from clinic to complete two home visits.

- Assessment Visit: scripts and checklists guide residents through obtaining patient history and assessing home environment
- Intervention Visit: residents review their Healthy Homes Intervention Recommendations and collaborate with the family to set goals and action plan for healthy living

## Windshield Survey

Residents completed Healthy Homes Windshield Survey to assess the family's neighborhood for play areas, safety, food availability, and demographic and socioeconomic factors affecting the neighborhood.

- Completed after first home visit
- Followed by 30-minute consult with local dietitian to discuss the patient's barriers and possible solutions to assist the family in making more healthy choices

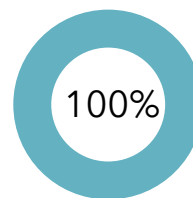
# OUTCOMES

Effective implementation of the program required 10 hours to fully complete the training and home visits. During post-curriculum qualitative interviews, residents described the experience as eye-opening and revealed that lessons learned from the visits will alter how they approach patients with obesity in future clinical practice.

**Twenty residents** who completed the curriculum reported improved counseling skills and improved understanding of the social determinants of health. Residents increased confidence in counseling families on physical activity, weight management, and healthy eating.

Methods of assessment:

- ✓ Pre/post antifat attitudes questionnaire
- ✓ Pre/post comfort in lifestyle counseling
- ✓ Qualitative interviews with residents



of residents felt that home visiting was a valuable experience and that they learned things about the family and neighborhood that they otherwise would not have known



*[This curriculum] made me feel more in touch with the community and have a better appreciation for their lives and what it means to live where they live and have the resources that they do and have the jobs that they have.*

– **1<sup>st</sup>-year resident**



Resources and guidance needed to implement this curriculum – including scripts for the residents to use at each visit, resources for the family, and evaluation tools – are available from: <https://www.mededportal.org/publication/10480>