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Declarative title: A pilot mental health drop-in service for the siblings of paediatric patients

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Commentary on: Bennett SD, Rojas N, Catanzano M, et al. Feasibility, acceptability and preliminary effectiveness of a mental health drop-in centre for the siblings of young people attending a paediatric hospital. J Child Health Care. 2023 Oct 18:13674935231206895. doi: 10.1177/13674935231206895

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**Implications for clinical practice and research:**

* In this study significant levels of mental health problems were identified in the siblings of paediatric patients, who presented at a drop-in mental health clinic.
* A combination of brief intervention, onward referral and signposting was associated with significant improvements in mental health and quality of life in this sample.
* Further research with larger samples and control groups could establish whether the problems reported by parents in this study are representative and whether the apparent success of this service is replicated.
* Efforts to provide more accessible support for families by co-locating services in outpatient paediatric settings may reach groups that would not otherwise come forward for help.

**Context:**

The literature on the wellbeing of siblings of children with serious medical conditions indicates that they are at elevated risk of emotional and behavioural problems1. Children may well worry about their brother or sister and may miss spending time with them, if they are frequently hospitalised. In addition, they may react to reduced parental attention by acting out or, conversely, by hiding their own concerns so as not to further burden their caregivers. However, they remain an under-researched population and there is little evidence as to how best to support them2.

**Method:**

This study3 focused on sibling data collected as part of a larger 17 month project evaluating the impact of a drop-in mental health service, based in the outpatients department of a large Children’s Hospital. Families were able to self-refer or could be referred by a health professional. Parents completed a mental health screener and a measure of quality of life for each participating child and were offered a range of different support packages, including the provision of relevant psychoeducation, signposting, onward referral elsewhere and up to 6 brief evidence-based treatment sessions.

**Findings:**

Data on 18 siblings are presented and show elevated levels of mental health symptoms in these children as compared with community norms. The majority of referrals came via ‘active recruitment’ by a health professional involved in the paediatric patient’s care (62%), as opposed to self-referral. The largest referral category was ‘challenging behaviour’ (50%), with 22% of siblings referred for anxiety. The most common form of input provided was brief evidence-based psychological intervention (44%), followed by referral on to another service (33%). Complete data at baseline and 6 months on mental health and quality of life were available for 16 and 10 children respectively. Statistical analyses demonstrated a large effect (d=0.84) in relation to improvement in mental health and a moderate improvement (d=0.76) in emotional quality of life.

**Commentary:**

This study highlights the needs of the siblings of children with long term medical conditions. The evidence presented suggests that an innovative drop-in clinic, co-located at the index patient’s hospital, managed to reach and help a number of children who may well not have been seen otherwise.

It is notable, however, that the sample of siblings recruited was markedly smaller than that of patients themselves (n=186)4 or parents (n=149)5. This may reflect their relatively lower frequency of problems but given that internalising’ problems (ie anxiety and depression) are usually more common in this group, it may be that siblings’ distress was not fully appreciated by parents in this study.

The fact that there was no control group makes it impossible to be sure whether the improvements seen were simply the result of the passage of time, but the attempt made by this research group to improve access to support for the families of children receiving paediatric treatment, is laudable, particularly given the wider sociodemographic project data4, which suggest that members of previously under-represented groups were reached in this way, when they had not been before.

**References**

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**Competing interests:** None declared