

Preemies born in poverty 4 times less likely ready for school

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Advances in neonatal care enable two-thirds of premature babies born with respiratory problems to be ready for school at an appropriate age, but those living in poverty are far less likely to be ready on time than their better-off peers, researchers from the University of Chicago Medical Center report in the July issue of the journal *Pediatrics*.

Although several medical factors including [chronic lung disease](#), brain hemorrhage, and male gender were associated with lower school readiness, by far the most powerful factor determining school-readiness level was low socioeconomic status.

“The good news is [premature babies](#) are surviving. Neonatology has done a remarkable job in lowering mortality without increasing morbidity,” said study co-author Jeremy Marks, MD, PhD, associate professor of pediatrics. “The bad news is poverty leads to huge disparities in school readiness, with poor kids faring four times worse than others.”

The finding extends a study of babies born prematurely with immature lungs that the University of Chicago researchers began in 2000.

The researchers wanted to determine how many of them were ready to begin primary school when they reached school age, and to understand the factors associated with lack of school readiness among these children.

The researchers were able to collect follow-up data on 137 of 167 (81

per cent) of the patients born prematurely with respiratory distress syndrome.

“As a single-center cohort study, we were pleased to be able to track such a high portion of the patients we had originally seen,” said Michael Msall, MD, chief of developmental and behavioral pediatrics. “We knew that premature infants are at increased risk for abnormal neurodevelopmental outcomes at two years. But we didn’t know what factors prevented these children from entering school on time.”

Using assessments of each child’s understanding of basic concepts, perceptual skills, receptive vocabulary, daily living functional skills, and whether children had sensory impairments or autism, the researchers assigned each child a school-readiness score. The multidimensional analysis also included standardized neurodevelopmental and health assessments, as well as measures of the family’s socioeconomic status.

“As an academic specialist, our expertise is in improving outcomes for preemies and treating babies with severe lung disease, intracranial bleeding and other complex diagnoses,” said Michael Schreiber, MD, professor of pediatrics at the University of Chicago and the study’s lead author. “However, the stresses of poverty really put our neonatal ICU graduates behind the eight ball, developmentally.”

“We will continue to search for new and better therapies to improve the care of babies born prematurely,” Schreiber said. “However, society must provide the additional long-term resources these vulnerable children require if they are to ever reap the full benefits of our medical advances.”

Source: University of Chicago Medical Center

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