

Children's poor development linked to risk factors

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Routinely collected health data on pregnant women could be used in a better way to identify 'at risk' children earlier and more effectively, according to a new report.

The latest report from the University of Auckland-based, Growing Up in New Zealand longitudinal study, evaluates how commonly New Zealand children experience 12 family and [environmental risk factors](#) previously shown to increase the chances that children will have poor developmental outcomes.

These factors are routinely recorded by health professionals in New Zealand during the antenatal period and include being born to a teenage mother, living in overcrowded accommodation, and having parents who receive an income-tested benefit.

The twelve risk factors have previously been considered for European populations as a tool to assess early vulnerability in children.

This is the first time they have been evaluated together for their applicability in the New Zealand context.

The report, "Exploring the Definition of Vulnerability for Children in their First 1000 Days" used information collected from a cohort of almost 7,000 New Zealand toddlers in their first two years of life.

The ethnicity and socio-demographic characteristics of these children

and families can be broadly generalised to children being born in New Zealand today.

"Whether a child is considered 'at risk' and likely to have a poor developmental outcome later in life is often based on just a single factor, such as maternal depression, having a teenage mother or growing up in poverty" says Growing Up in New Zealand Director and Associate Professor Susan Morton from the University of Auckland.

"One risk factor on its own is not sufficient to define which children are most vulnerable. Our analysis found that in reality these single risk factors tend to cluster, and that we may be in a better position to understand which children and families need the greatest support in early life if we consider combinations of factors, rather than single risk factors," she says

To identify families who could benefit from early intervention Dr Morton suggests implementing a 'check-list' approach to assess how many of the twelve risk factors children are exposed to, even before they are born, rather than relying on a single marker of risk or waiting for a child to develop signs of poor [early development](#).

"Additional support could be provided to families experiencing more than three of the twelve risk factors, regardless of which risk factors they are exposed to, for example."

The advantage of using the twelve risk factors described in this report to determine the risk for vulnerability is that they are criteria that are already routinely measured by health professionals during the antenatal period, she says.

"We already collect the information required from families in routine health checks, especially during pregnancy, so potentially this routine

information could be used to classify the level of support a family receives when their child is born."

The report also found that Māori and Pacific children tend to be exposed to a greater number of risk factors for vulnerability than New Zealand European or Asian children, and that exposure to multiple risk factors increases the likelihood that children will experience poor health outcomes during their first 1000 days of development.

"By nine months of age we already see increased rates of ear infections and more serious respiratory illnesses requiring hospitalisation in children who have been exposed to clusters of risk factors for vulnerability from the time they were born," says Dr Morton.

The report also describes a higher incidence of low birth weight infants, a lower rate of exclusive breastfeeding beyond the first month of life, and more incomplete immunisations for infants born to mothers exposed to greater vulnerability during their pregnancy.

Future reports in the 'Vulnerability and Resilience' series will address how the exposure to vulnerability risk factors affects children's cognitive outcomes, education, socialisation and behaviour as they grow older, and evaluate why some children seem more resilient to negative outcomes than others, despite growing up in family structures and neighbourhoods that appear comparably disadvantaged.

"Not all children who are exposed to multiple risk factors for vulnerability will have poor outcomes. If we can understand what characteristics of their parents, families, communities and environments are likely to promote resilience in the face of exposure to these risk factors, we will be able to develop more effective programmes to optimise early life wellbeing and support good outcomes for all our New Zealand children," says Dr Morton.

The twelve [risk factors](#) used for defining vulnerability in the cohort:

1. Teenage pregnancy (Young maternal age)
2. Mother with no formal secondary school qualifications (Maternal education)
3. Maternal depression
4. Poor maternal physical wellbeing in late pregnancy
5. Mother smoking regularly/daily during and after pregnancy
6. Mother with no current partner (Relationship status)
7. Reporting highly stressful money problems (Financial stress)
8. Living in a decile 9 or 10 NZDep 2006 area
9. Mother actively seeking work but not currently working (Unemployment)
10. Living in public rental accommodation
11. Having two or more persons on average per bedroom (Overcrowding)
12. Being in receipt of an income tested government benefit

Growing Up in New Zealand is a longitudinal study tracking the development of approximately 7,000 New Zealand children from before birth until they are young adults. The study has collected detailed multidisciplinary information about children's early development and reflects the ethnical diversity of today's pre-school children.

Growing Up in New Zealand is designed to provide unique information about what shapes children's early development in contemporary New Zealand and how interventions might be targeted at the earliest opportunity to give every child the best start in life.

Early information from the study provides insight into areas like vulnerable [children](#), housing, breastfeeding/early solids, immunisation, languages, early childhood education, interaction with health and other

key services, paid parental leave and maternal return to the workforce.

More information: The complete report is available online:
www.growingup.co.nz/pdf/reports/report04.pdf

Provided by University of Auckland

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