

Children with chronic health conditions less likely to graduate from high school

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Approximately 32 million U.S. children have at least one chronic health condition, which can negatively affect their chances of receiving a high school diploma or its equivalent by age 21, finds a new study in the *Journal of Adolescent Health*.

During the past four decades, the number of children diagnosed with one or more chronic health conditions has quadrupled. Chronic conditions and their accompanying medical problems create formidable daily challenges, including simply getting to and staying in school.

"Previous studies have revealed mixed results, with more recent studies showing an effect between chronic conditions and educational

attainment," said the study's lead author, Steven W. Champaloux, PhD, MPH, a scientist in the Division of Reproductive Health at the Centers for Disease Control and Prevention. "Educational attainment" was defined for this study as the achievement of a high school diploma or passing the general educational development (GED) tests.

"Many studies adjust for educational attainment, but very few epidemiology studies focus directly on it," Champaloux added.

The researchers were surprised to find that where a young person lives and attends school does not have a significant impact on how chronic conditions affect educational attainment. "When we adjusted for family, for neighborhood and for school environments, that association [between the presence of a chronic condition and high school graduation] remained," Champaloux said.

Baseline data from the National Longitudinal Survey of Youth – Cohort 1997, which included nearly 9,000 youths aged 12 to 16 was used for the study. Participants were resurveyed until 2009 as they transitioned from school to work and adulthood.

Chronic health conditions, which included 20 different diagnoses, were sorted into four groups: (1) asthma; (2) cancer, diabetes or epilepsy; (3) heart and cardiovascular; or (4) other. The researchers found that young people with conditions that fell into the first two categories were less likely to graduate from high school or successfully complete the GED tests. The relationship between chronic disease and the likelihood of high school graduation (or GED) was particularly strong for those who had a high number of absences, had repeated a grade in school or had a high level of depressive symptoms.

"Our results also show that addressing depressive symptoms among adolescents with chronic [health conditions](#) needs to be a clinical priority

to optimize their educational outcomes," the authors noted.

Gary R. Maslow, M.D., assistant professor of psychiatry and behavioral sciences and assistant professor of pediatrics at Duke University School of Medicine, noted that "This study adds a detailed examination of the relationships between academic and psychosocial variables and the lower odds of high school graduation/GED receipt." However, Maslow also observed that "The vast majority of youth with chronic illness, or 85 percent, graduated high school or received a GED, and this was only slightly lower than the 88 percent of youth without a chronic condition who graduated [high school](#) or received a GED."

The study highlights the importance of focusing on the relationship between a school and students with chronic illnesses and addressing challenges created by absences from school. Maslow added, "Schools have the opportunity to support students with illness by striving to maintain a strong relationship with the student, even when they are missing school, and to help the student keep up with their education despite absence, so that they do not have to repeat a grade."

The study's authors emphasized that their findings "may aid in developing preventive strategies to keep these youth on a successful educational trajectory."

More information: Champaloux, SW, Young, DR. "Childhood Chronic Health Conditions and Educational Attainment: A Social Ecological Approach." *Journal of Adolescent Health* [DOI: 10.1016/j.jadohealth.2014.07.016](https://doi.org/10.1016/j.jadohealth.2014.07.016)

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