

Care-experienced children have poorer health outcomes

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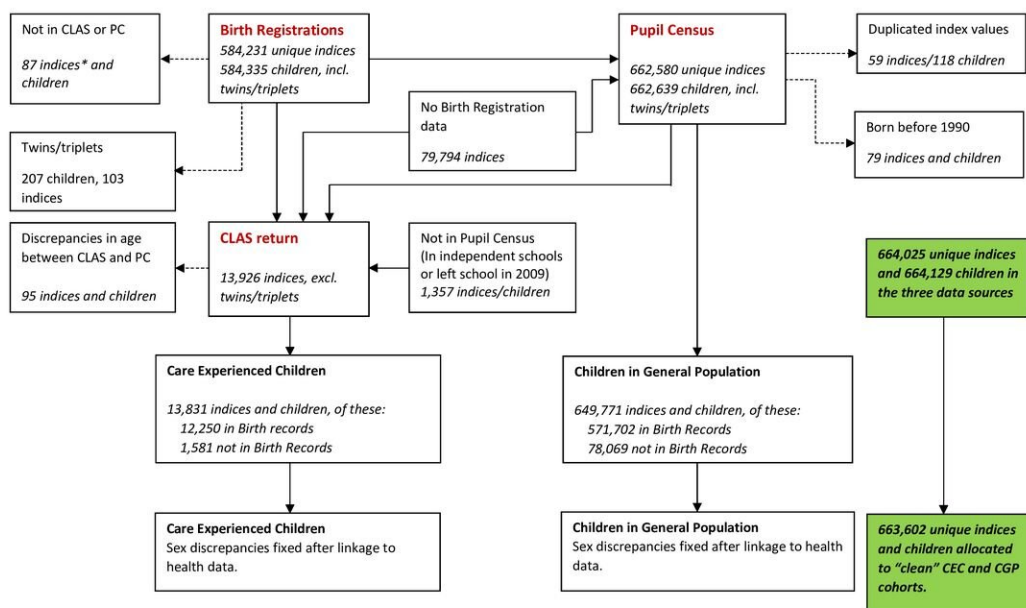


Figure 1. Development and size of the two study cohorts. *Each index refers to a unique child. When there are more index values than children in the data (in Birth Registrations and Pupil Census) this means that more than one child had the same linkage identifiers (date of birth, postcode, sex). This is the case for twins/triplets and other linkage errors, these duplicated index values were removed from the data as it was not possible to determine which health records belonged to which child. Note: Dashed arrows indicate children who were

removed from the cohorts during data cleaning. Credit: DOI: 10.1136/bmjopen-2021-054664

Care-experienced children in Scotland have poorer health and higher average rates of mortality when compared to children in the general population, according to a new study.

The study—led by the University of Glasgow and published in *BMJ Open*—also showed substantial differences in [health outcomes](#) and [health](#) service use between care-experienced [children](#) and children in the general [population](#).

The findings come from the Children's Health in Care in Scotland (CHiCS) study, which was set up to provide, for the first time, population-wide evidence on the health outcomes of care-experienced children in the UK.

Between 2009–2016, children who had experienced care were more likely to have been in contact with the health services, having had higher average rates of prescriptions and hospitalisations.

In particular, compared with children in the general population, care-experienced children had more frequent contact related to mental, sexual and reproductive health. Care-experienced children also had a higher rate of prescriptions for depression, psychiatric outpatient clinic attendances and acute inpatient admissions due to mental and behavioral disorders.

The proportion of care-experienced children hospitalized due to injuries, drug poisoning and other external causes was also high compared to children in the general population. Although rare, mortality among care-

experienced children and young people was five times higher compared to children in the general population.

Dr. Mirjam Allik, Research Fellow at the University of Glasgow's MRC/CSO Social and Public Health Sciences Unit, said: "We already know that care-experienced children have, on average, lower socio-economic status at birth and they live in areas of higher deprivation compared to children in the general population; but this is the first time differences in health between care-experienced and other children have been expressed in numbers at population level.

"Health inequalities between children and [young people](#) with and without care experience are not inevitable. This can and should change. We hope that over the next year the study will provide the first robust nationwide evidence to help inform policy in relation to care-experienced children; and that it assists with the prioritization of services by identifying precise areas of heightened needs.

"Going forward, our research will focus on understanding differences in hospitalisations, prescriptions and mortality, and will look at how these are affected by the number and type of care placements, socioeconomic background and pre-existing health conditions."

The study included [school-aged children](#) who were on the 2009/2010 Scottish Government's Children Looked After Statistics (CLAS) return and on the 2009 Pupil Census; and looked at 10 data sources to study health outcomes, including in and outpatient hospitalisations, prescriptions, accidents & emergency attendances, pregnancies, and mortality.

The paper, "Cohort profile: The "Children's Health in Care in Scotland" (CHiCS) study—a longitudinal dataset to compare health outcomes for care-experienced children and [general population](#) children," is published

in *BMJ Open*.

More information: Mirjam Allik et al, Cohort profile: The 'Children's Health in Care in Scotland' (CHiCS) study—a longitudinal dataset to compare health outcomes for care experienced children and general population children, *BMJ Open* (2021). [DOI: 10.1136/bmjopen-2021-054664](https://doi.org/10.1136/bmjopen-2021-054664)

Provided by University of Glasgow

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