

When the more is not the better: The impact of Cumulative Familial and Maternal Risks on Child Health

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[HANDOUT]

Background: Child health is associated with familial and maternal risks. A singular familial or maternal risk could underestimate its capability to interfere with child health; therefore, cumulative familial and maternal risks (CFMR) might be better describing adverse consequences on child health. This study examined singular and cumulative effects of familial and maternal risks in predicting different children's health outcomes.

Method: Using data from the National Survey of Children's Health (USA), including 65,680 children (6-17 years old, Boys 51.8%).

Measures: Cumulative Familial and Maternal Risk scale (CFMR; including family size, employment, parenting stress, and maternal health, emotional health as well as education level), parent-rated child health, teeth health, obesity, ADHD, internalizing behavior (depression, anxiety), externalizing behavior (behavioral problem), and covariates (child sex and age).

Analysis: Chi-square test, Univariate/Multivariate logistic regression

Results: The findings identify the hypotheses that the singular risk and numbers of risks both predicts health outcomes for children. Among singular risks, the effect of maternal general health on children's health outcomes is the greatest (OR=2.44). CFMR reveal significant gradients for all studied health outcomes and the impact on general health and behavioral problems are most manifest (OR=19.98 and 13.59 respectively). In addition, with the contextual factor, poverty, taken into account, it is found that the impact of CFMR on general health of children from affluent families (OR=8.17) is greater than that of children from the poor families (OR=5.91).

Conclusions: Compared to singular risk factors, cumulative risks cause much higher likelihood of adverse consequences on children health. The more risks present, the worse the health could get. The consequence is more evident on children from affluent families than that of their counterparts. In other words, children from the poor demonstrate stronger resilience in such circumstance, which could be a critical strength for them to achieve health. Also, the scale can serve as a health evaluation base and the findings support critical needs for the comprehensive early preventions and intervention for child health, especially for disadvantaged children.