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Title:
Impact of very preterm birth on maternal employment and socio-economic status

Date:
2021-04-01

Citation:
Rawnsley, K. L., Cheong, J. L. Y. & Spittle, A. J. (2021). Impact of very preterm birth on maternal employment and socio-economic status. Acta Paediatrica International Journal of Paediatrics, 110 (4), pp.1383-1384. https://doi.org/10.1111/apa.15722.

Persistent Link:
https://hdl.handle.net/11343/298099

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Article type : EBNEO Review

TITLE OF WRITE-UP

Impact of very preterm birth on maternal employment and socio-economic status

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This is the author manuscript accepted for publication and has undergone full peer review but has not been through the copyediting, typesetting, pagination and proofreading process, which may lead to differences between this version and the Version of Record. Please cite this article as doi: 10.1111/apa.15722

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MANUSCRIPT CITATION
Saurel-Cubizolles MJ, Marchand-Martin L, Pierrat V, Arnaud C, Burguet A, Fresson J, et al. Maternal employment and socio-economic status of families raising children born very preterm with motor or cognitive impairments: the EPIPAGE cohort study. Dev Med Child Neurol. 2020;62(10):1182-90. doi:10.1111/dmcn.14587

COMMENTARY, limited to 500 words

Developmental morbidity is high in preterm infants compared with those born at term(1), with increased risk of cerebral palsy, intellectual disability, sensory impairments and developmental delays (1). Nearly 50% of infants born before 28 weeks' gestational age have a disability or developmental delay, with 20% having substantial neurological disability (2). Preterm births are more common among underprivileged families (3), and combined with the special requirements and financial burden of caring for a child with a disability, raises the concern regarding the long-term socioeconomic impact for these families.

Saurel-Cubizolles and colleagues (4) investigated maternal employment rates and socioeconomic status up to 8 years after the birth of a preterm child. They reported mothers of children with severe motor or cognitive impairments had lower employment rates at 5 years after birth, and more financial difficulties at 8 years after birth, compared with mothers of preterm children with no impairments. It was noted that mothers of children with severe impairment had less often been working during pregnancy. This finding, combined with other social risk indicators may suggest pre-existing social disadvantage for children who developed severe impairments. The study's findings are in keeping with other literature regarding disability in the general population, with reduced work participation rates for mothers of children with disabilities (5-7).

The study was undertaken in France, with well-established social, schooling, child care and welfare support systems, which may limit the generalisability of these findings in less well-resourced settings. As the study did not capture data on the social security benefits received by families or disability-related childcare or schooling supports, it is not possible to identify the specific gaps in social policy. Further investigation is definitely warranted to understand the barriers and facilitators to maintaining maternal employment.

Families that responded to the questionnaires were from more privileged social circumstances than children lost to follow up. Multiple imputations were used to account for the missing data; however, the results may have underestimated the impact of impairments on the socio-economic situation of families with children born preterm.

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A strength of the study was its large sample size, across 9 regions in France, which reportedly covers one third of the country's annual births (8). Exploring the impact of locality (metropolitan vs rural), and fathers' employment status on the socio-economic circumstances of families of children with impairments would have added further depth to the study. Given the reported associations of race/ethnicity and racism-related stress with preterm birth rates, even when social risk is accounted for (9), it may have been interesting for authors to report ethnicity of mothers. Further exploring maternal characteristics such as this, may identify subpopulations in greater need of targeted support.

This study highlights the need for health professionals to be aware of the social circumstances of the families of preterm children and to assist families in accessing the local welfare supports. This study may assist policy makers, not only in France but globally, to improve social supports for families affected by disabilities and preserve employment for parents of these children.

URL LINK: URL TO THE FULL REVIEW ON THE EBNEO WEBSITE

FUNDING
KR is supported by a University of Melbourne Graduate Research Scholarship & the National Health and Medical Research Council (NHMRC) of Australia Centre of Research Excellence in Newborn Medicine (#1153176); JC & AS are supported by Career Development Fellowships from the Medical Research Future Fund of Australia (#1141354) & NHMRC (#1108714) respectively.

CONFLICTS OF INTEREST
None

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