Risk of psychiatric disorders in offspring of parents with a history of homelessness during childhood and adolescence in Denmark: a nationwide, register-based, cohort study

Sandra Feodor Nilsson, Thomas Munk Laursen, Carsten Hjorthøj, Anne Thorup, Merete Nordentoft

Summary

Background Children and adolescents from deprived backgrounds have high rates of psychiatric problems. Parental and social factors are crucial for children's healthy and positive development, but whether psychiatric morbidity is associated with parental social marginalisation is unknown. We aimed to analyse the association between mother’s and father’s history of homelessness and the offspring's risk of psychiatric disorders, including substance use disorder, during childhood and adolescence.

Methods We did a nationwide, register-based cohort study of 1072 882 children and adolescents aged 0–16 years, who were living or born in Denmark between Jan 1, 1999, and Dec 31, 2015. Parental homelessness was the primary exposure, data on which were obtained from the Danish Homeless Register. The Danish Civil Registration System was used to extract the population and link offspring to parental information, and the outcome, psychiatric disorders in the offspring, was obtained from the Danish Psychiatric Central Research Register and the Danish National Patient Register. We analysed the association between parental history of homelessness and risk of psychiatric disorders in offspring by survival analysis using Poisson regression and incidence rate ratios (IRRs), adjusted for year and offspring characteristics, and additionally adjusted for parental factors (age at offspring’s birth and parental psychiatric disorders).

Findings 17 238 (2%) offspring had either one or two parents with a history of homelessness, and 56 330 (5%) children and adolescents were diagnosed with any psychiatric disorder during the study period. The incidence of any psychiatric disorder was 15·1 cases per 1000 person-years (95% CI 14·4–15·8) in offspring with at least one parent with a history of homelessness, compared with 6·0 per 1000 person-years (95% CI 6·0–6·1) in those whose parents had no such history (IRR 2·5 [95% CI 2·3–2·7] for mother homeless, 2·3 [2·2–2·5] for father homeless, and 2·8 [2·4–3·2] for both parents homeless, after adjustment for year and offspring characteristics). This risk remained elevated after additional adjustment for factors including parental psychiatric disorders. IRRs in offspring were increased for most specific psychiatric disorders, with the highest risk for attachment disorder when both parents had a history of homelessness (IRR 32·5 [95% CI 24·6–42·9]) and substance use disorder when only the mother had a history of homelessness (6·9 [4·9–7·7]). In offspring whose mothers had a history of both homelessness and a psychiatric disorder, 35·9% (95% CI 27·1–44·8) had been diagnosed with a psychiatric disorder by the age of 15 years.

Interpretation Parental homelessness was associated with an increased risk of psychiatric disorders in offspring during childhood and adolescence. These findings have important implications for public health and policy because they suggest a need for improvement in the support of socially marginalised families to help prevent psychiatric illness in offspring.

Funding University of Copenhagen, The Lundbeck Foundation Initiative for Integrated Psychiatric Research (iPSYCH).

Copyright © The Author(s). Published by Elsevier Ltd. This is an Open Access article under the CC BY 4.0 license.

Introduction

Children and adolescents from socially marginalised families have severe health problems compared with those from higher socioeconomic backgrounds.\(^1\) In a report\(^1\) from the UK, half of adult mental health problems were estimated to begin before the age of 14 years. Emotional influence and social support from parents have been acknowledged as important factors in child mental health and development.\(^2\) Social determinants are suggested to be among the biggest influences of children’s health.\(^3\)

Homelessness has been linked to severe health problems and excess mortality.\(^4\) Additionally, in a review\(^5\) from 2014, it was stated that rates of homelessness have increased in countries in the European Union during the past 5 years, with young people, women, and families accounting for a higher proportion of people who are homeless than previously.

Children living without a home or who have mothers who were formerly homeless have been found to have more psychiatric problems than housed children from low-income backgrounds.\(^6\) Additionally, substance use...
problems (ie, use of recreational drugs, alcohol, and other psychoactive substances) are prevalent in homeless adolescents.\textsuperscript{10} However, findings have been inconsistent, for example, for specific psychiatric disorders and age groups.\textsuperscript{7,10–31} with some studies showing no differences between children in homeless families versus low-income housed families.\textsuperscript{14,15} The effect of homelessness on children’s health is difficult to measure,\textsuperscript{3} and there were methodological limitations in previous studies (eg, small sample sizes, and absence of comparison groups and adjustment for confounders).\textsuperscript{31} Research into the associations between social determinants (including parental homelessness) and child psychiatric illness are scarce.\textsuperscript{17,31} especially studies outside the USA. We aimed to analyse the risk of any and specific psychiatric disorders during childhood and adolescence in individuals whose parents had a history of homelessness.

Methods

Data sources and study participants
The population in this cohort study comprised children and adolescents living or born in Denmark between Jan 1, 1999, and Dec 31, 2015. The Danish Civil Registration System,\textsuperscript{9} which contains data since 1968, was used to establish the study population. This register contains information on vital status, date of birth, country of origin, sex, and the personal identification number (civil registration system number) assigned to all Danish residents. The civil registration system number makes accurate linkage between registries and linkage to parents possible. We excluded children and adolescents with an unknown mother or father.

Parental history of homelessness was the main exposure, data on which were collected from the Danish Homeless Register, established on Jan 1, 1999.\textsuperscript{7} The register covers dates for all contacts with homeless shelters in Denmark, which are covered by the Act on Social Services 110, and states that the municipal council should offer temporary accommodation to people with specific problems who need support and who either have no home or are not able to stay in their home. Women with children who have experienced violence or threats of violence are not covered by this register. A parent was defined as having a history of homelessness from the date of first homeless shelter contact since 1999 and onwards.

Information on parental psychiatric disorders was obtained from the Danish Psychiatric Central Research Register,\textsuperscript{8} which contains data on all psychiatric inpatient admissions in Denmark since 1969 and outpatient
دریافت فوری متن کامل مقاله

امکان دانلود نسخه تمام متن مقالات انگلیسی
امکان دانلود نسخه ترجمه شده مقالات
پذیرش سفارش ترجمه تخصصی
امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
امکان دانلود رایگان ۲ صفحه اول هر مقاله
امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
دانلود فوری مقاله پس از پرداخت آنلاین
پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات