



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

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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 1 072 882 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 [4·9–9·7]). 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.

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Introduction

Children and adolescents from socially marginalised families have severe health problems compared with those from higher socioeconomic backgrounds.¹ In a report² 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.^{3,4} Social determinants are suggested to be among the biggest influences of children's health.²

Homelessness has been linked to severe health problems and excess mortality.^{5,6} Additionally, in a review⁶ 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.^{7–9} Additionally, substance use

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Research in context

Evidence before this study

We searched PubMed in June 17, 2017, with no restrictions set for papers with the search terms "homeless*" in combination with "parent*" OR "child*" OR "father-child relations" OR "mother-child relation" OR "parent-child relation" OR "adolescence" OR "family" AND "mental disorders" OR "mental health" OR "substance-related disorders" OR "alcohol-related disorders" OR "child psychiatry". All terms except from homeless were chosen as major topics in the search function to search for the most relevant articles. Furthermore, studies identified from the reference lists of the included articles were used. Titles and abstracts were reviewed and potentially relevant papers were read. We included original research and reviews from high-income countries that addressed homelessness in relation to adverse child and adolescent psychiatric outcomes. Studies, primarily from the USA, but also a few from Europe, have suggested that being homeless is associated with higher rates of psychiatric problems in children and adolescents, but the literature has been inconsistent. This inconsistency could be explained by small study samples, demographic differences, cross-sectional designs, residual confounding, and absence of comparison groups. Thus, greater clarity is needed on the association between homelessness and children's risk of psychiatric disorders based on prospective and population-based studies with adjustment for psychiatric family history. Furthermore, studies of whether a mother's or father's history of homelessness is linked to offspring's psychiatric morbidity are scarce.

Added value of this study

This is the first nationwide register-based cohort study with prospectively collected data and up to 16 years' follow-up, studying both the mother's and father's history of homelessness and its association with offsprings' risk of psychiatric disorders, including substance use disorder, during childhood and adolescence. We found an association between both mother's and father's homelessness and offspring's risk of any and most specific psychiatric disorders, including after adjustment for parental psychiatric disorders, and we noted a higher risk associated with maternal than paternal homelessness. The highest excess risk in the offspring of specific psychiatric disorders was found for attachment and substance use disorder.

Implications of all the available evidence

This study adds a new perspective by focusing on the mother's and father's history of homelessness as a social determinant. Parental history of homelessness can be seen as an important long-lasting indicator of susceptibility to psychiatric illness in offspring besides from that associated with parental psychiatric disorders. Our findings suggest a need for increased political focus on the risk of severe child and adolescent psychiatric morbidity associated with parents' social marginalisation. Better support for the socially marginalised families is needed to improve the children's lives and reduce adverse consequences in the longer term. Future prospective studies focusing on the causes of homelessness are needed to guide prevention of homelessness in practice.

problems (ie, use of recreational drugs, alcohol, and other psychoactive substances) are prevalent in homeless adolescents.¹⁰ However, findings have been inconsistent, for example, for specific psychiatric disorders and age groups,^{7,11–13} with some studies showing no differences between children in homeless families versus low-income housed families.^{14,15} The effect of homelessness on children's health is difficult to measure,¹¹ and there were methodological limitations in previous studies (eg, small sample sizes, and absence of comparison groups and adjustment for confounders).^{7,11} Research into the associations between social determinants (including parental homelessness) and child psychiatric illness are scarce,^{2,7,8,13} 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,¹⁶ 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, 1999.¹⁷ 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,¹⁸ which contains data on all psychiatric inpatient admissions in Denmark since 1969 and outpatient

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