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11 October 2012 Manitoba Centre for Health Policy University of Manitoba Winnipeg, Canada Contact: Jack Rach 204-789-3669 umanitoba.ca/newsroom

HOW HEALTHY ARE MANITOBA'S CHILDREN?

Study finds drops in teen pregnancies, grade repetition, and increase in graduation rates

A new report from the University of Manitoba's Faculty of Medicine finds that Manitoba children have been making some gains in health and social outcomes, but children from lower income areas generally experience poorer outcomes than children from high income areas.

The study, titled *How are Manitoba's Children Doing* published by the Manitoba Centre for Health Policy, looked at almost all children in the province 19 and under from 2000 to 2010. It measured children's well-being in four areas: physical and emotional health; safety and security; education; and social engagement and responsibility.

Improvements include a 10 per cent decrease in teen pregnancy rates, a 29 per cent decrease in grade repetition, and a seven per cent increase in high school graduation.

But, some findings weren't so good. Children from northern regions and those living in the lowest income areas of the province experience the highest mortality rates, with injuries being the leading cause. "The rate of child deaths was over three times higher in the lowest income areas compared to the highest," says lead author of the study, Dr. Marni Brownell.

Similar differences between children from lower income areas and higher income areas were found for many of the measures studied. For example, children from low income areas had higher rates of hospitalization and involvement with child welfare services and teen pregnancy.

Researchers also found that children from poor areas did worse in school. The highest percentage of children who performed poorly were from the lowest income areas. That said, the study found differences in educational outcomes were not as great as those seen in areas of health.

"Inequities tend to increase as children progress through school, suggesting that the early and middle years of childhood may present opportunities for programs and

interventions that enable successful learning and reduce gaps," says Brownell.

One way researchers mapped school performance was to compare results from the Early Development Instrument, which measures vulnerabilities in children in Kindergarten, to outcomes for the same children in Grade 3. They found that with each additional vulnerability identified in Kindergarten, the likelihood of not meeting expectations in Grade 3 for reading and math increases in a step-like fashion.

Children from the lowest income areas were much more likely to be vulnerable in Kindergarten and not meet expectations in Grade 3. But they were also much more likely to change course over time. When looking at children who were vulnerable in Kindergarten, a higher percentage of children with poorer backgrounds went from being vulnerable to doing fine in Grade 3, than children from high income areas.

"These results demonstrate that although low income can have a negative effect on outcomes for some children, this impact does not have to be permanent," says Brownell. "The right policies and programs can help to improve children's health and well-being."

MCHP is a research unit in the department of community health sciences in the Faculty of Medicine at the University of Manitoba. Research scientists and their collaborators at MCHP study health services, population and public health, and the social determinants of health using data from the entire population of Manitoba. Most of the research answers questions of interest to policy makers based on a formal association with Manitoba Health and input from other government departments.

Media note: Dr. Marni Brownell is available for interviews.

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The summary and full report will be available for download on October 11 from http://mchp-appserv.cpe.umanitoba.ca/deliverablesList.html