Birth Outcomes and Early Health Trajectories.

Brian Karl Finch, Ph.D.
San Diego State University

Extended Abstract.

Social conditions are known to be a fundamental cause of population health and a key determinant of health disparities (Link and Phelan 1995). In fact, socioeconomic status (SES) is a key determinant of morbidity and mortality for virtually all ages of the life-course (Adler et al. 1995). Recent research has documented that these gradients and subsequent disparities emerge as early as infancy and childhood (Case, Lubotsky, and Paxson 2001; Finch 2003a; Finch 2003b) and persist throughout the life course (Elo and Preston 1992). Given the universality and persistence of health disparities, the study of infant and child health is crucial for several reasons: (1) pre-kindergarten age children rely almost exclusively on their external environment for their health and are generally (if not entirely) unable to modify their own health; (2) the origins of health disparities and social gradients emerge as early as infancy; and (3) poor childhood health increases the likelihood of illness and premature death in adulthood. Further, since the direction of causation between health and social conditions among adults is often in dispute (Smith 1999), the study of child health is especially conducive to capturing the extent to which social conditions are *causally* related

to health because the socio-economic status into which infants are born were determined prior to their birth.

Therefore, we propose to assess the extent to which adverse birth outcomes can be overcome by various socio-economic conditions in early life. Given that children with adverse birth outcomes (e.g., pre-maturity or fetal growth restriction) are at much higher risk for poor health in childhood, we propose to study the processes by which socio-economic conditions in early childhood may affect the well-established relationships between adverse birth outcomes and health disparities in very young children (ages 1-6). *Thus, the core of this study aims to identify key biosocial interactions between etiologically specific birth outcomes and early life socio-economic conditions and how they contribute to both the health of children and to early-life health disparities*.