CHILDREN BORN TO DRUG DEPENDENT MOTHERS: the creation of a unique virtual cohort study

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WHY A VIRTUAL COHORT?

Children born to opioid-dependent mothers are at a developmental disadvantage from pre-birth (Lui et al., 2010). They are additionally affected by the mother's lack of ability to recognise and respond to the newborn's cues (Velez et al. 2008) and development is often compounded by the environment that they experience growing up (Hidden Harm report, 2003).

THE STUDY

PHASE 1: FEASIBILITY

Can we identify children? Are data linkable? Early postpartum results.

PHASE 2: EARLY CHILDHOOD RESULTS

Research to date has focused on early infancy and frequently with very small sample numbers. This group are very difficult to follow-up using traditional methods. A 'virtual cohort' using administrative data could solve this and help us to find out more about these children throughout their childhoods.



Exploring health data and, if possible, looked after child data during the first five years of life.

PHASE 3: LONG-TERM FOLLOW-UP

Linkage of health, education and LAC data up to adulthood.





THE COHORT

Children born between 2007 and 2012 in Scotland c.5000 children born to drug dependent mothers (DDMs) + matched sample of 10,000 children born to non-DDMs Identified through birth records and Scottish Drugs Misuse Database

PHASE 1 RESEARCH QUESTIONS

1. What is the feasibility of creating a longitudinal virtual cohort of children born to drug-dependent mothers in Scotland?

2. What do initial postpartum outcomes look like for this cohort and how does this vary by maternal drug use in pregnancy?

3. How does the support given to mothers in the first few years of life vary, and does this make a difference to early child outcomes?

4. What factors affect children's developmental outcomes at preschool in relation to drug using mothers during pregnancy?









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