



Healthy Child Manitoba Office

Healthy Baby Programs

Socio Economic Characteristics of Participants

October 2010



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## REPORT PURPOSE AND OVERVIEW

In June of 2004, Healthy Child Manitoba Office started collecting information about the Healthy Baby Program and program participants. Data collection includes:

- "We're Glad You are Here" forms
- Attendance Sheets
- Infant Feeding Charts
- Prenatal and Postnatal Participant Surveys
- Session Tracking Sheets

In this report we provide information about socioeconomic characteristics of Healthy Baby Program participants. Income and Social Status is a key determinant of health identified for positive health outcomes by the Public Health Agency of Canada (PHAC). In fact, according to PHAC, this is the most important determinant of health as research shows that health status improves as income increases. That is, with more income, people are better able to afford to live in safe housing and purchase nutritious food for example and the healthiest populations are those with the most equitable distribution of wealth.

Because we do not collect information about income specifically, this report provides some highlights of information about how many women receive Income Assistance (IA) as a proxy indicator for low or no income. Information for all participants is provided in the first section of this report. In the second section, information obtained through linking program data to the provincial Families First screening data is presented.

The Families First screening data were available for all births to December 31, 2009. Of the 18,853 participants who attended Healthy Baby programs between June 1, 2004 and March 31, 2010, we were able to link 11,161 (or 59.2%) the Families First Screening data. Unless otherwise noted, this report includes only the participants for whom Families First screening data were available.

Healthy Baby Programs take place at many different locations throughout Manitoba. Agencies are funded to deliver Healthy Baby Programs but do not use the name "Healthy Baby Program" - each agency and site has its own name and may have specific target groups (for example, there are some "teen sites" offered by some agencies).

Please direct any questions about this report to Cynthia Carr at [epiresearch@shaw.ca](mailto:epiresearch@shaw.ca)

## 1. CHARACTERISTICS OF HEALTHY BABY PROGRAM PARTICIPANTS

- According to the Healthy Baby Program survey data, financial concerns were by far the most common type of stress experienced by both prenatal and postnatal participants. Overall, one in three (32.4%) of participants indicated that they had financial concerns (see Figure 1).
- Between June 1, 2004 and March 31, 2010, 29.4 per cent of Healthy Baby Program participants indicated that they received Income Assistance (IA). This ranged greatly by agency from 6 per cent to 77 per cent of participants (see Figure 2).
- In total, 18 per cent of rural participants (1,233 women), 26 per cent of urban participants (3,824 women attending sites in Brandon and Winnipeg) and 42 per cent of participants in the north (507 women attending sites in Burntwood, NORMAN and Churchill) reported receiving IA.

Figure 1. Participants who have stress by type of stress, June 1, 2004-March 31, 2010.

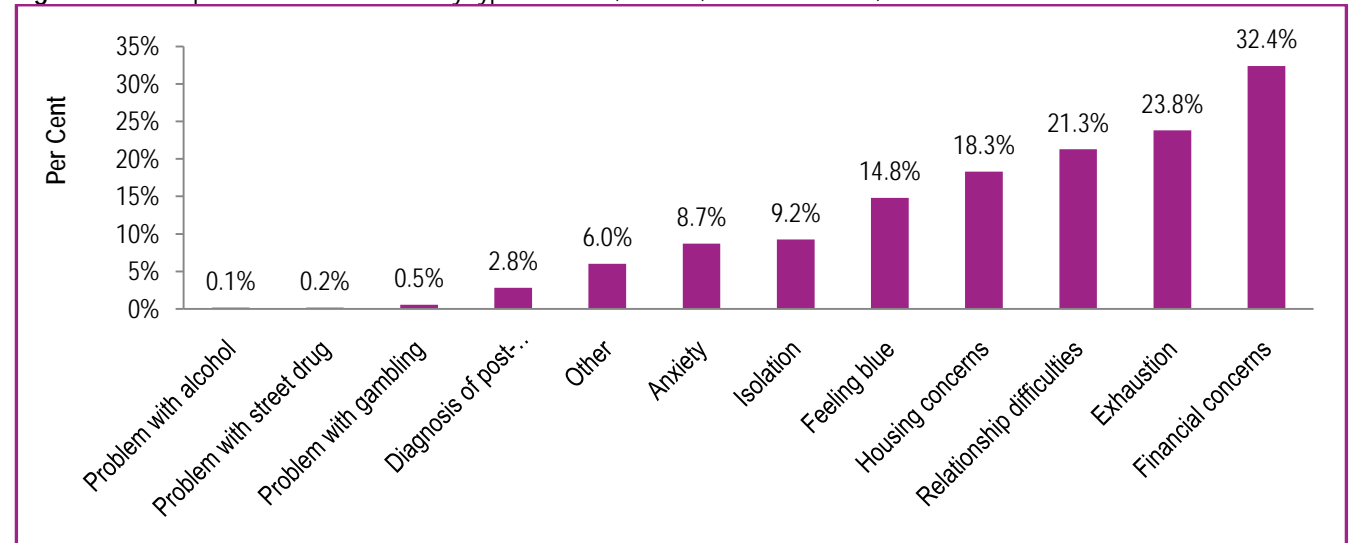
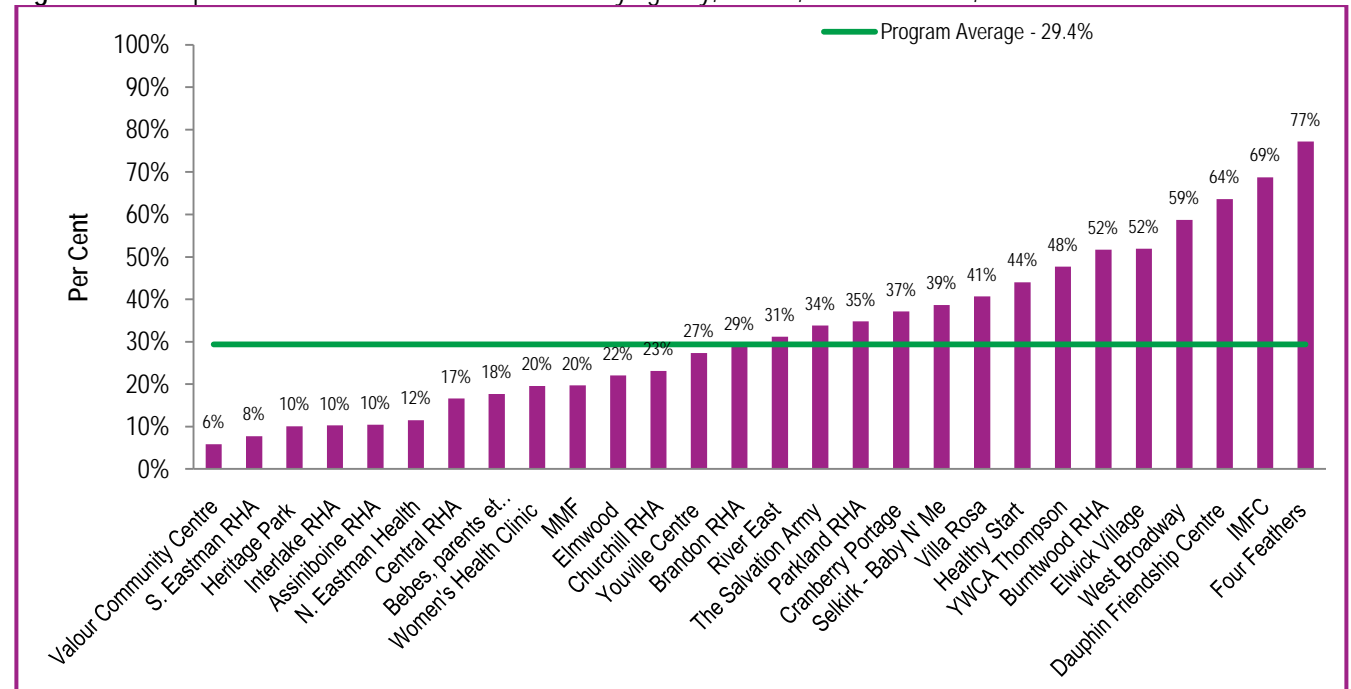
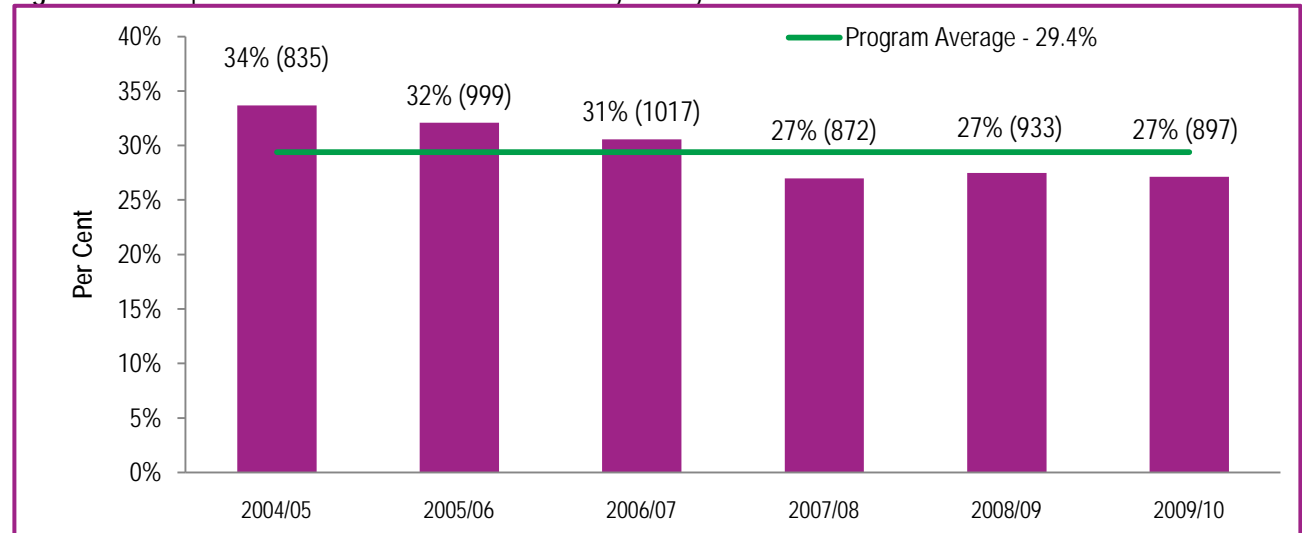


Figure 2. Participants who receive Income Assistance by agency, June 1, 2004-March 31, 2010.



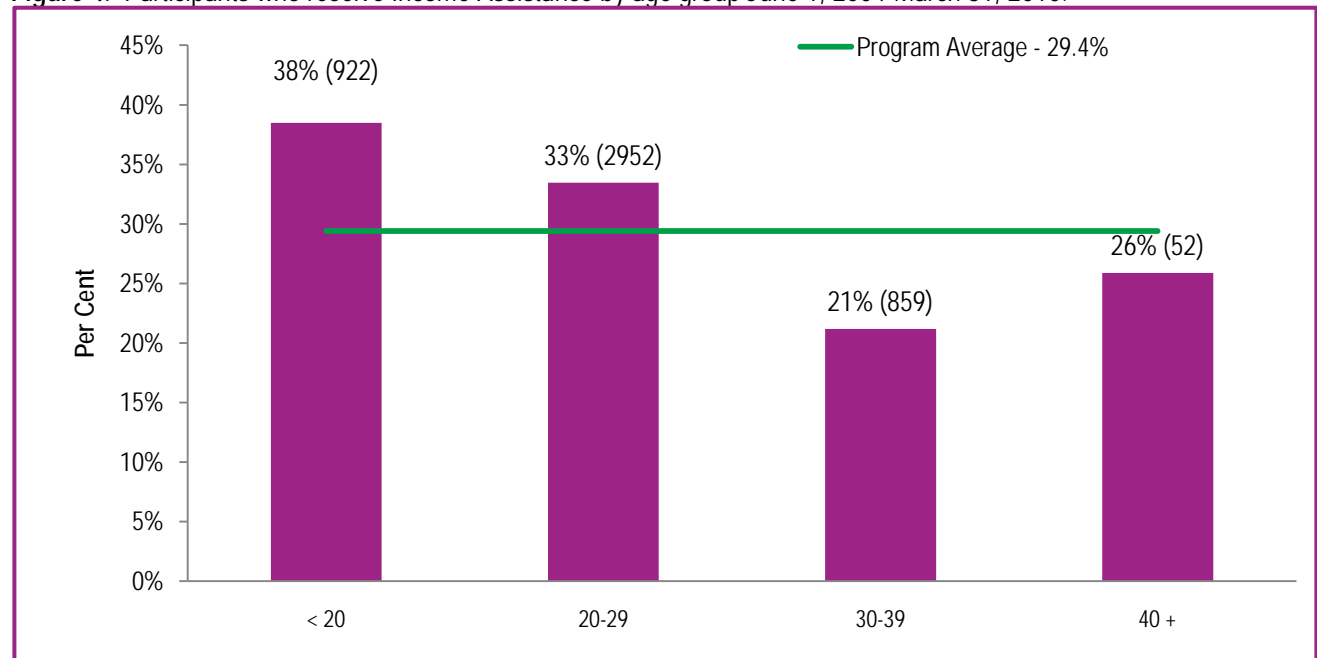
- IA and completion of high school appear to be related. 56 per cent (3,349) of participants who did not complete high school are receiving IA compared to just 19 per cent (1,996) of women who did complete high school.
- **Figure 3** shows that the per cent of Healthy Baby Program participants who report receiving IA has declined slightly between 2004 and 2010 from just over one in three participants (34%) to 27 per cent of participants.
- As **Figure 4** illustrates, women are most likely to receive IA if they are younger. Just over one in three (38%) of participants under age 20 receive IA.
- Aboriginal women are more likely to receive Income Assistance (59%) than are non-Aboriginal women (17%).
- The amount of time a participant has lived in Canada does not appear to be strongly related to receiving IA. Overall, 31 per cent of women who have lived in Canada less than 10 years compared to 29 per cent of women who have lived in Canada for 10 years or more, reported that they receive IA.
- Women who receive IA are slightly less likely (80% or 4,469) to have a regular healthcare provider compared to those who do not receive IA (88% or 10, 297).

**Figure 3.** Participants who receive Income Assistance by fiscal year 2004/05-2009/10.



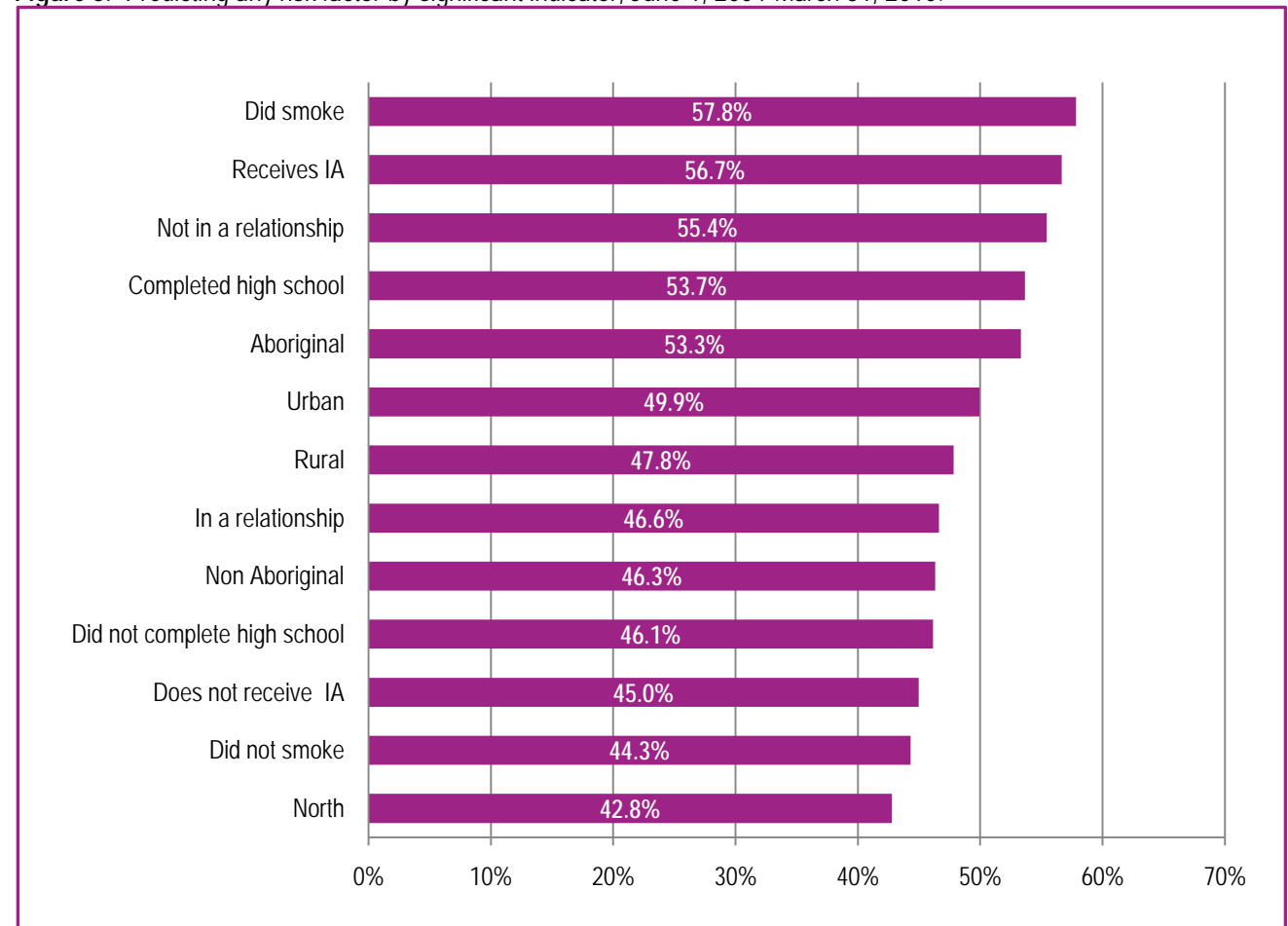
Note: 2004/05 data include June 1, 2004-March 31, 2005.

**Figure 4.** Participants who receive Income Assistance by age group June 1, 2004-March 31, 2010.



- Healthy Baby survey data illustrates the importance of the relationship between low income and pregnancy outcomes.
- Risk Factors identified during pregnancy include:
  - Anemia
  - Diabetes
  - Urinary tract infection
  - Depression
  - High risk pregnancy
  - Isolation
  - High blood pressure
  - Too little weight gain
  - Too much weight gain
- Receiving IA was the second most important risk factor with 56.7 per cent of women who receive IA also being identified with at least one risk factor (see Figure 5).
- In reviewing specific risk factors, receiving IA was the most important predictor of "High Risk Pregnancy" with 11.2 per cent of women receiving IA experiencing a high risk pregnancy.

**Figure 5.** Predicting any risk factor by significant indicator, June 1, 2004-March 31, 2010.



Note: Only indicators that are statistically significant in the logistic regression model (in predicting the outcome) are included in graph.

## 2. RELATIONSHIP BETWEEN SOCIOECONOMIC STATUS AND OTHER FAMILIES FIRST SCREENING RISK FACTORS

- The most common risk factor for the Healthy Baby program participants (11,161) who could be identified through the Families First data is "receiving Income Assistance or experiencing financial difficulties". Just over one in three (36.7%) participants answered yes to this question which is more than double the rate in Manitoba overall (17.1%). The highest rate was found for northern site (Burntwood, NOR-MAN and Churchill) participants where 51.0 per cent said yes to this question followed by 47.2 per cent of participants at urban sites (Brandon and Winnipeg) and 20.2 per cent of participants at rural sites.
- In total 42.4 per cent of Healthy Baby program participants answered "yes" to three or more Families First screening questions but the rates are very different for participants receiving IA or experiencing financial difficulties compared to those who are not. In total, 76 per cent (2,533) of HB participants who receive IA or experience financial difficulties had three or more risk factors compared to 27 per cent (1,953) of those participants who do not.

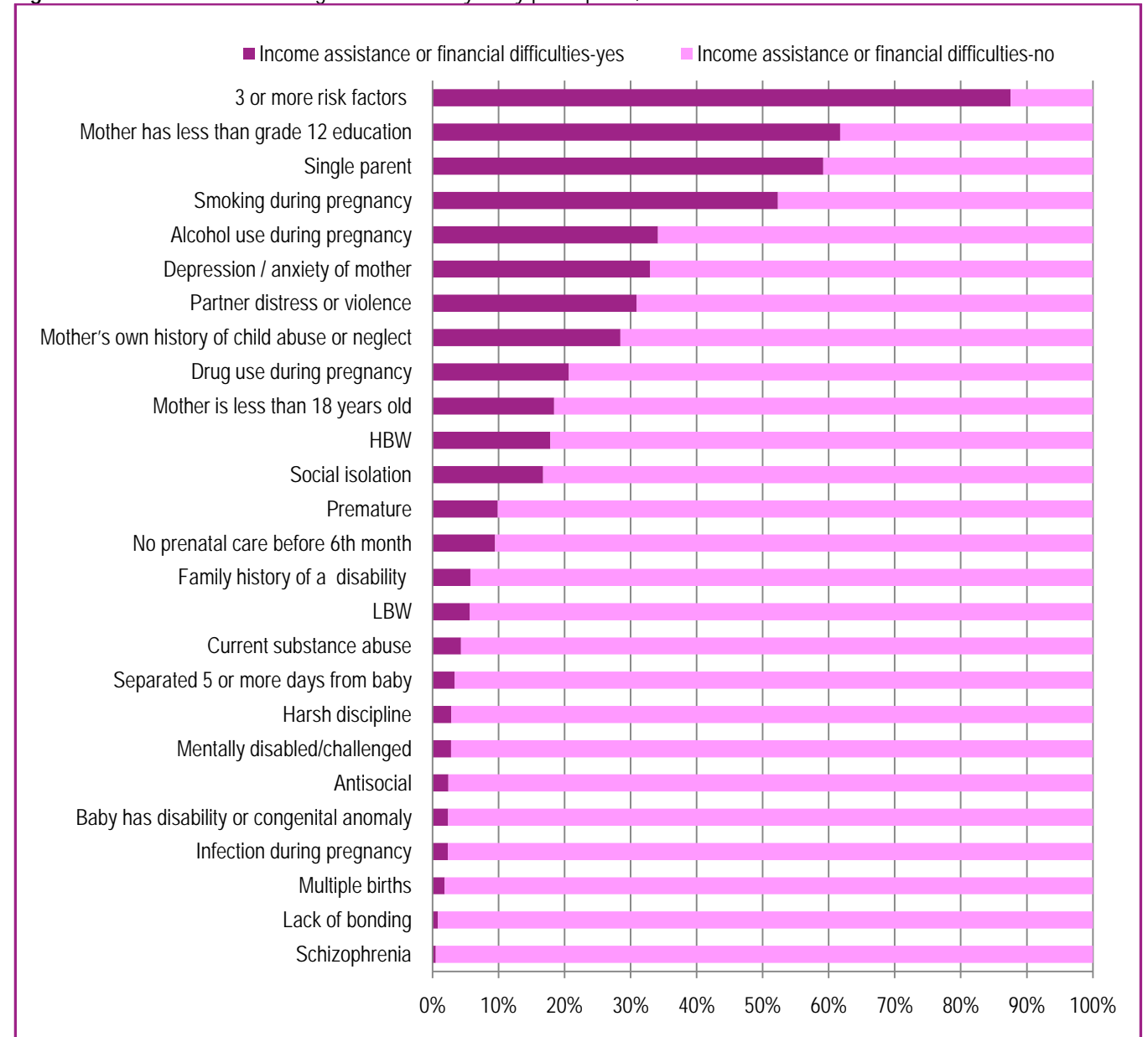
### ***Financial difficulty or receiving Income Assistance and risk factors in mom***

- Women who experience financial difficulty or receive Income Assistance are:
  - 17.0 times more likely to be the lone parent compared to those who have not experienced financial difficulty.
  - 11.0 times more likely to not have completed grade 12.
  - 10.6 times more likely to NOT receive prenatal care in first six months of pregnancy.
  - 10.5 to experience partner distress or violence.
  - 10.2 times more likely to be current substance abusers.
  - 9.7 times more likely to be mentally challenged or disabled.
  - 9.2 times more likely to use drugs during their pregnancy.
  - 7.2 times more likely to smoke during pregnancy.
  - 7.2 times more likely to exhibit harsh or inappropriate disciplinary practices with their own children.
  - 6.5 times more likely to have experienced child abuse or neglect.
  - 6.4 times more likely to be diagnosed with "antisocial behaviour".
  - 5.7 times more likely to be under the age of 20.



- **Figure 6** shows the relationship between receiving IA or having financial difficulties and the other risk factors assessed through the Families First screening. This graph identifies groups with risk factors and illustrates the percentage of women experiencing financial difficulties.
- Overall, 87.5 per cent of participants who have three or more risk factors receive IA or have financial difficulties.
- Of the participants who have less than grade 12 education, 62 per cent also experience financial difficulties.
- 59 per cent of single parents experience financial difficulties as do 33 per cent of participants who have been diagnosed with depression and/or anxiety.

**Figure 6.** Families First screening data for Healthy Baby participants, 2004-2009.



Note: data include women living off-reserve only.