

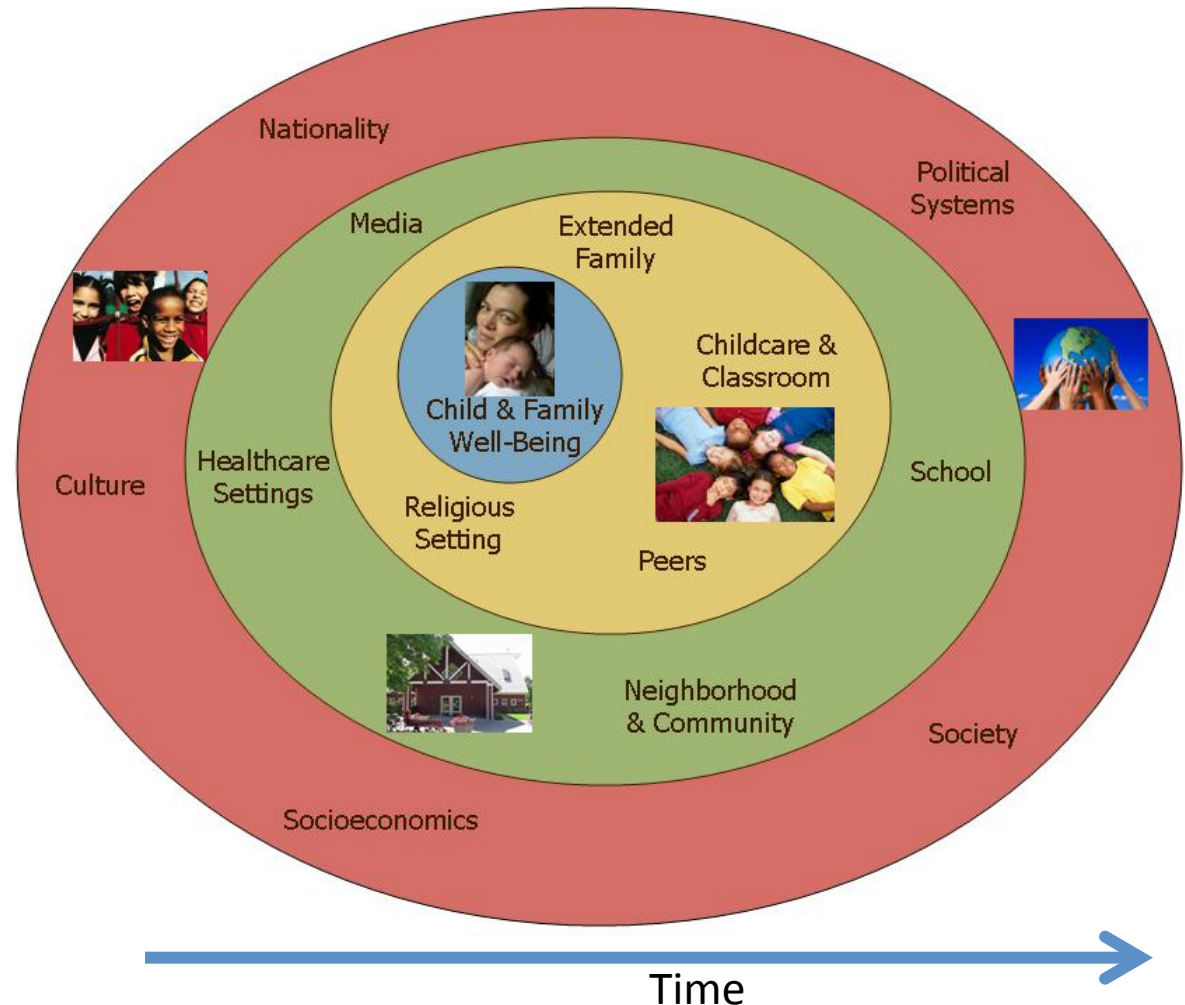


# Bioecological Model of Risk and Adversity: Children's Developmental Outcomes

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# Bioecological Model

To improve the lives of children, we need to address the complex context in which they are developing.



# Child Well-being



## Child

- Physical Health/  
Nutrition
- Physiological  
Stress Responses
- Mental Health
- Social/Emotional  
Adjustment
- Academic  
Achievement

# Wide spread and long term impact on children's developmental outcomes

## Physical Health:

- Low Birth Weight
- Poor health
- Death from Infectious disease
- Asthma
- Obesity

## Cognitive:

1.3x more likely to have developmental delay or learning disability

## Social/Emotional:

- Higher rate of problems with aggressive, oppositional, anxious, depressed Sx

## Academic:

- School Readiness – 1/3 enter kindergarten already behind
- 50% of these will not meet 4<sup>th</sup> grade reading standards
- 2x rate of grade retention and expulsion
- 6x more likely to drop out in HS

## Adolescent/Early Adult:

- 3x rate of Teen Birth
- Teen parents have high school drop out rate
- Children of teens have more mental health problems and drop out
- Economic Inactivity
- Higher rates of depression and substance use
- Increased likelihood of living in poverty as adults





# Co-occurring Risks

## **47.6 percent**

The nation's poorest kids primarily live in households headed by a single female. Children of single mothers experience poverty at more than 4 times the rate that of kids in married-couple families.

## **38.2 percent**

The poverty rate among black children is more than twice as high as the rate among whites. The poverty rate for Latino children is 32.3 percent.

## **Between 13.4 and 16.5 million**

1 in 5 children are living in poverty. That is higher than any other age group (14% for 18- to 64-year-olds, and 9% for seniors).

**80 percent** of unmarried teen mothers are on public assistance; only 1/3 complete high school. Children born to teen moms are at greater risk for being abused. A child born to a teenage, unwed, high school dropout is 9x more likely to live in poverty.

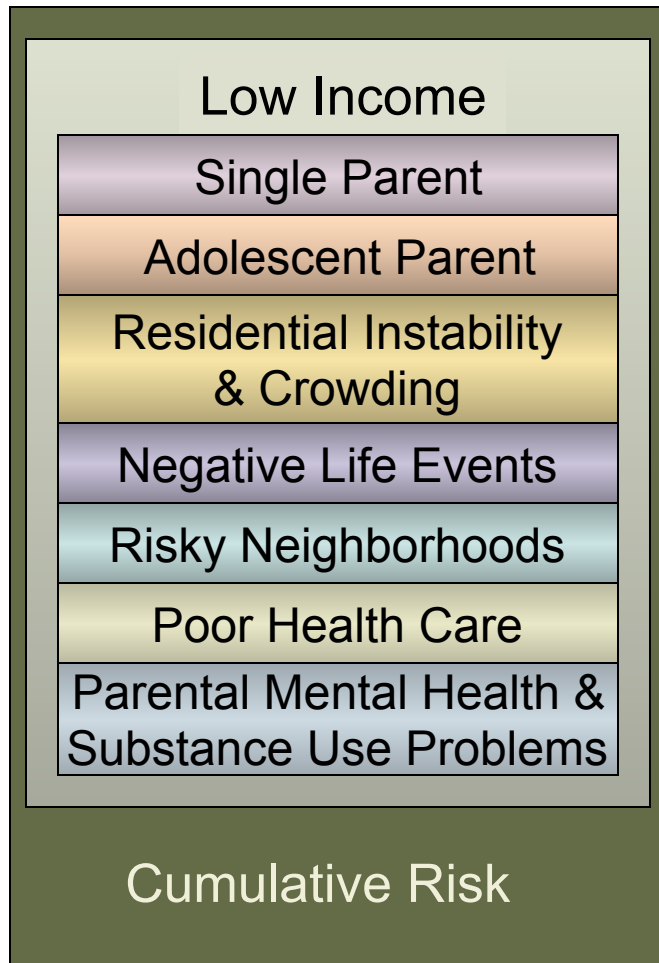
# Cumulative Risk



Children under age 6 whose parents exhibit depression, substance use or domestic violence are at 2x to 5x the risk for homelessness, use of food banks, medical neglect, unsafe child care, and placement in foster care.

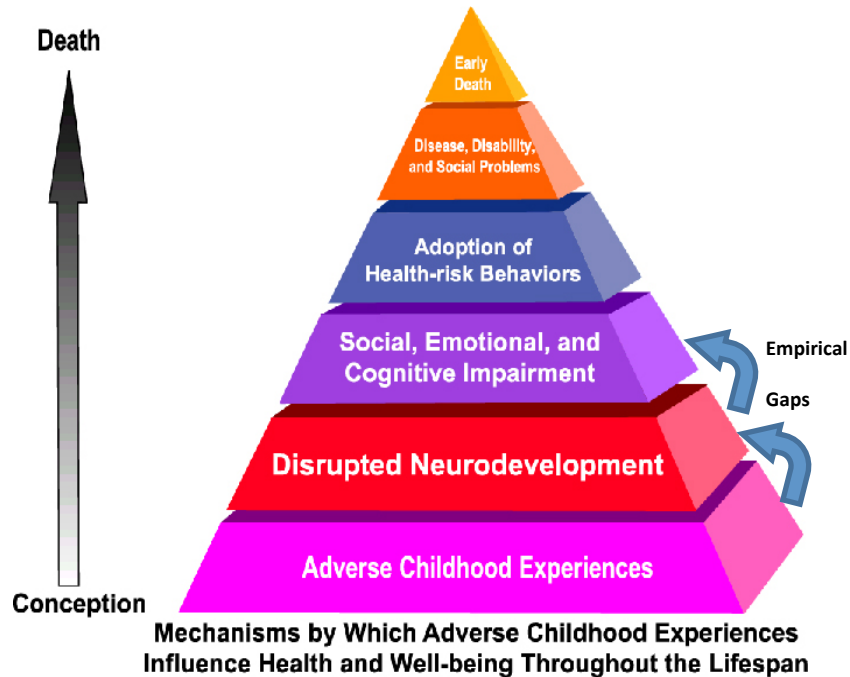
Cumulative risk is a more robust predictor of risk for abuse and child well-being than other single factors.

# Economic Disadvantage and Cumulative Risk

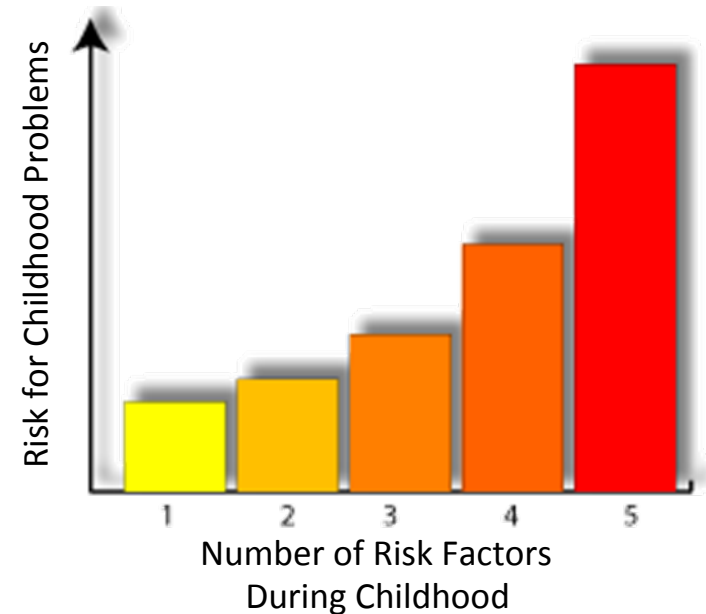


8 Risk Factors	Income and CR correlated .61			
	Percent of:			
# Risk factors	Whole Sample	Poverty	Low Income	Mid- to Upper
0	56	17	55	80
1	27	36	29	19
2	10	21	11	0
3	4	13	4	1
4+	3	13	1	0

# ACES in Adults = Cumulative Risk in Childhood

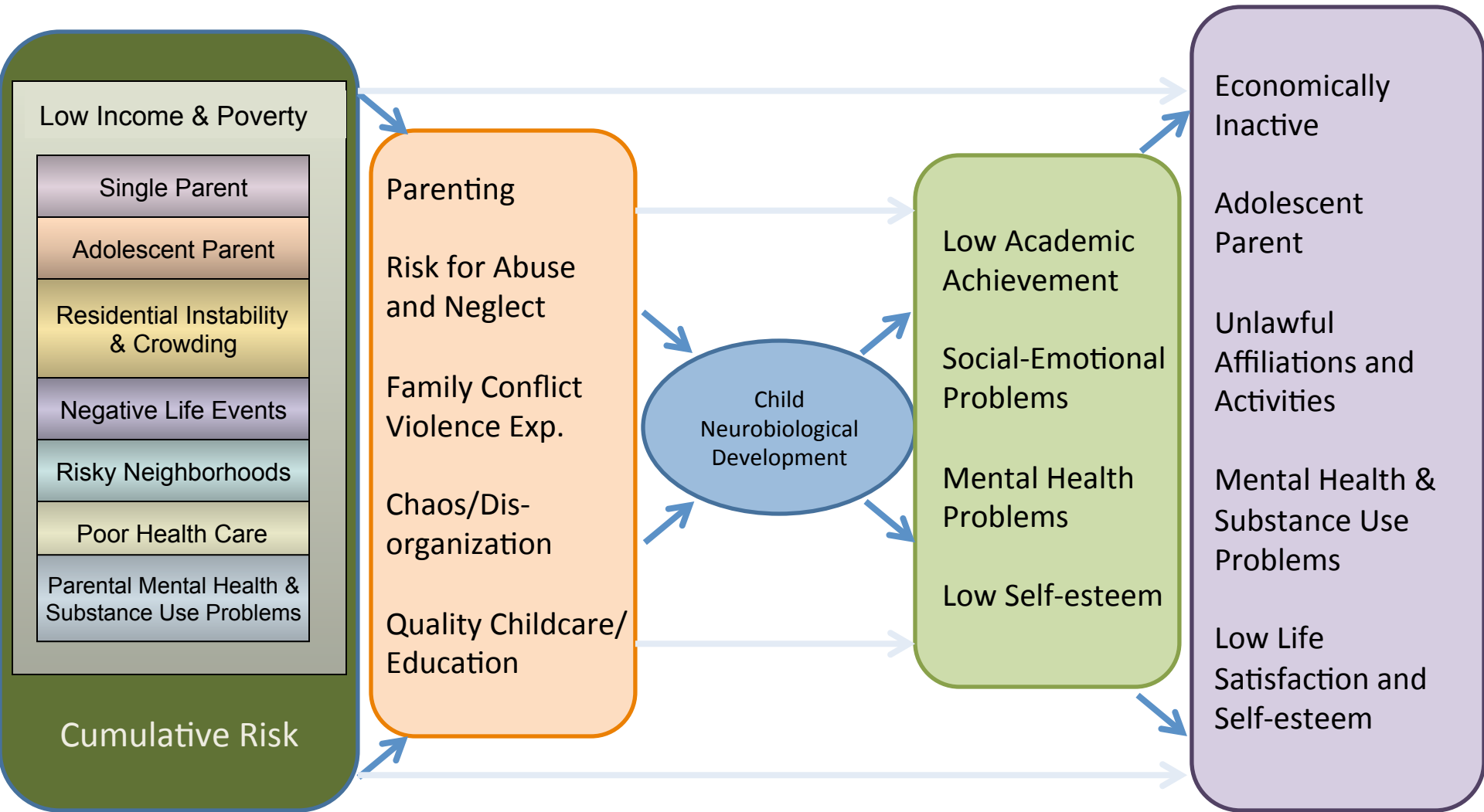


## Accumulation of Risk





# Cascade effects of Cumulative Risk on child well-being



# Take away points...

Bioecological model - to improve children's lives, have to address the nested levels of influences on children, proximal to distal

Low income, single and adolescent parents are demographics that flag a higher likelihood of cumulative risk (ACEs).

Cumulative risk has cascading adverse affects on the family and parenting, which in turn disrupt children's neurobiological systems that lead to more developmental, academic, behavioral and mental health problems.

Preventive approach – identify children at elevated risk for ACES/cumulative risk before the risk happens: e.g., moms who are low income, single or adolescent

Assess families for cumulative risk and parenting risk – different needs and intensity of intervention needed