

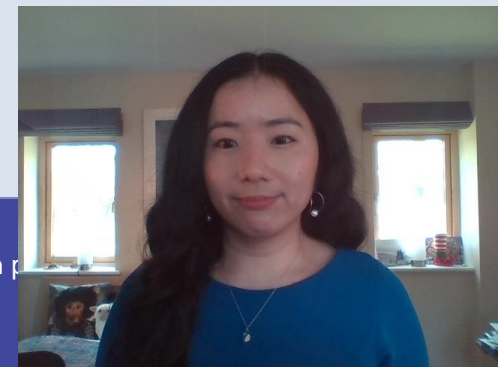
## RECAP preterm

Collaborative Research on Very Preterm Birth: Concepts and Methods – Working with the RECAP preterm Data Platform

### WP9 Social Functioning in Adults Born Very Preterm

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# Learning Objectives

1

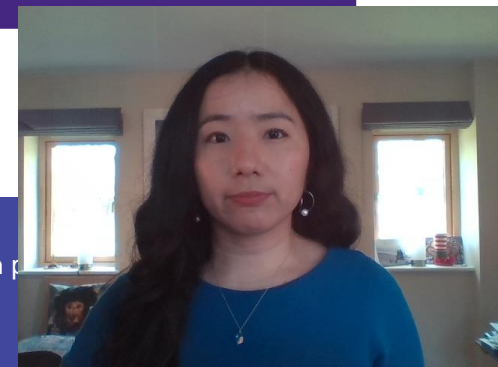
Why is it important to investigate social functioning in adulthood following very preterm birth (VP; <32 weeks of gestation)?

2

New findings from an IPD meta-analysis of self-perceived social functioning

3

Practical implications



# Why is it important?

## Social functioning

- Reflects an individual's interactions with human environments and the ability to fulfil their role within environments such as education, work, and social relationships with friends, partners and family (Bosc 2000).

## Social relationships

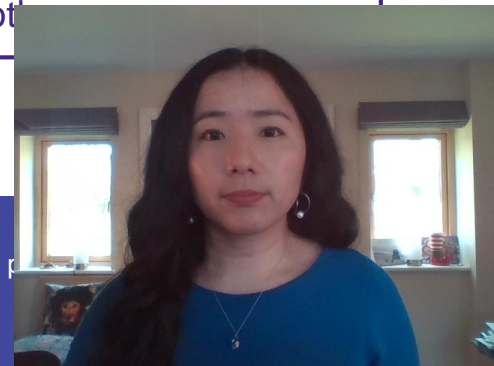
- Important determinants of well-being, health, and quality of life.

## Evidence from factual information

- Adverse impacts on social functioning in adulthood following VP birth (Mendonca et al. 2019; Bilgin et al. 2018)
- Lower educational attainment, higher rates of unemployment, increased likelihood of receiving social benefits, decreased likelihood of having a partner, and fewer friends

## Lack of research on individual perceptions

- How VP adults perceive their social experiences and relationships with others



# An IPD meta-analysis of self-perceived social functioning



## Objectives

- To investigate differences in levels of self-perceived social functioning in VP/VLBW (very low birth weight; birth weight <1500g) adults compared with term-born peers

## Outcomes

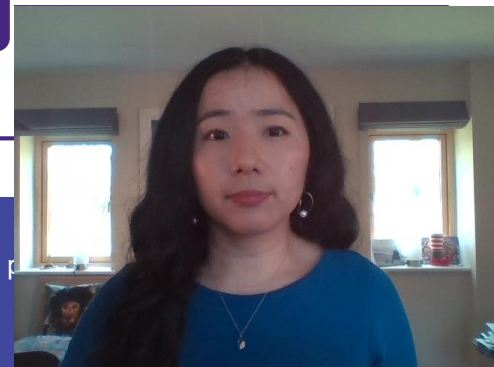
- The ASEBA ASR Adaptive Functioning scales (Friends, Spouse/Partner, Family, Job, Education).

## Five European cohorts

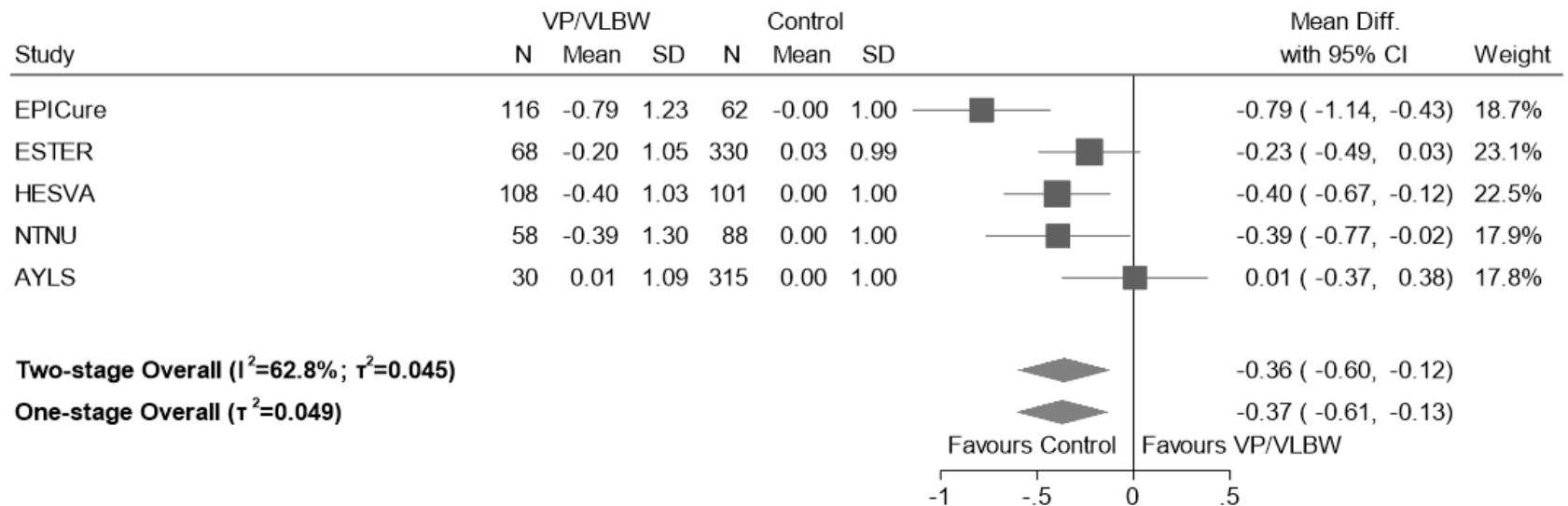
- EPICure, ESTER, HESVA, AYLS, NTNU

## Participants

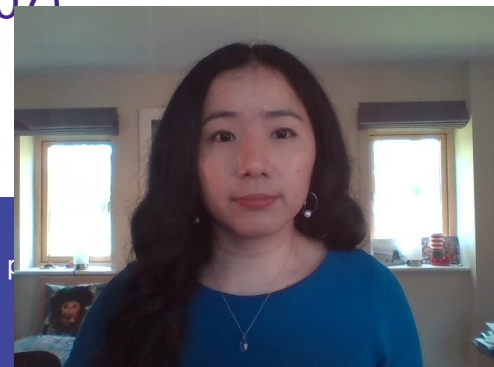
- 385 VP/VLBW adults and 900 controls



# Key findings from 1-stage and 2-stage IPD meta-analysis: Friends

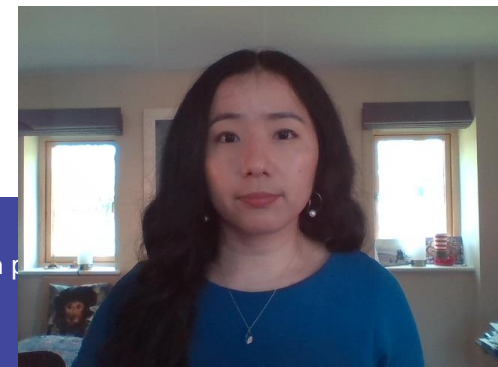


Effect size was slightly reduced after excluding participants with childhood neurosensory impairment ( $\Delta$  -0.34, 95% CI -0.61, -0.07)



# Key findings: the other scales

Scales	Mean Diff (95% CI)	
	Two-stage	One-stage
Family	-0.05 (-0.19, 0.08)	-0.06 (-0.20, 0.08)
Spouse/Partner	0.05 (-0.16, 0.26)	0.04 (-0.16, 0.25)
Job	-0.07 (-0.26, 0.11)	-0.10 (-0.32, 0.13)
Education	-0.02 (-0.19, 0.15)	-0.02 (-0.19, 0.15)



# Key findings: what predicts friendship within VP/VLBW adults (one-stage results)

Variables	Effect (95% CI)
Age at assessment	0.01 (-0.07, 0.10) [n=380]
Sex (ref.=male)	-0.06 (-0.29, 0.18) [n=380]
SES Low	Medium vs 0.27 (-0.08, 0.62) [n=361]
	High vs 0.29 (-0.13, 0.70) [n=361]
Neurosensory impairment in childhood (ref.=no)	-0.48 (-1.02, 0.06) [n=348]
Gestational age (weeks)	0.06 (-0.02, 0.13) [n=380]
Birthweight z-score	0.01 (-0.14, 0.16) [n=380]
Multiple birth (ref.= singleton)	0.05 (-0.33, 0.43) [n=379]
IVH Grade 3-4 (ref.= no IVH or IVH grade 1-2)	-0.39 (-0.93, 0.14) [n=271]
IVH (ref.= no)	0.24 (-0.11, 0.59) [n=271]
<b>BPD (ref.= no)</b>	<b>-0.46 (-0.77, -0.15) [n=306]</b>

IVH, intraventricular hemorrhage; BPD, bronchopulmonary dysplasia



# Practical implications

- The importance of **including individual perceptions of social functioning**
- Provide a **comprehensive** picture of adult social life
- **Reassuring findings** in the areas of family, spouse/partner, work and education
- **How to improve friendship in adulthood?**
  - Early interventions in clinical, family and school settings to enhance social skills and social inclusion in childhood

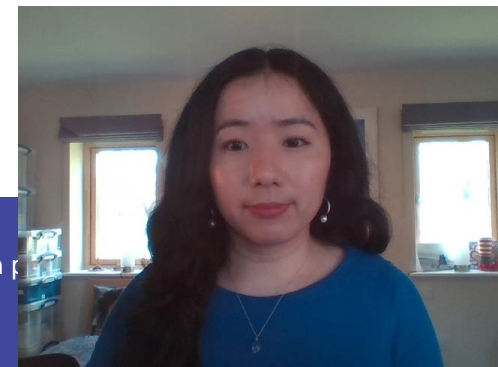




# References



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# Thank you

In case of questions, please feel free to contact  
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