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THE DEVELOPMENT AND FIRST VALIDATION OF THE “PRETERM SOCIAL, COGNITIVE, HEALTH AND LEARNING OUTCOMES” (PRE-SCHOOL) SOCIOECONOMICS INDICATORS INVENTORY

Marcuello, C. ⁽¹⁾; García, S. ⁽¹⁾; Romero, S. ⁽¹⁾; Clemente, J. ⁽¹⁾; Montañes, A. ⁽¹⁾; Amozurrutia, J.A. ⁽²⁾; Oros, D. ⁽³⁾

⁽¹⁾ *Universidad de Zaragoza, Zaragoza, Spain;* ⁽²⁾ *Universidad Nacional Autónoma de Mexico, Mexico;*

⁽³⁾ *Hospital Clínico Universitario Zaragoza, Zaragoza, Spain*

Abstract:

Background: The consequences of preterm birth, to the individual and society at large, remain a major financial, emotional, social and personal burden in all countries. A complex influence network between the family socioeconomic status, nutrition and infant social interactions determines early childhood environment. The socioeconomic characteristics of families and households define much of the starting conditions and the possible future development of any newborn.

Aim: To develop a socioeconomics indicators inventory specifically focused on preterm children, in order to characterize their early childhood environment to evaluate potential social affordances of infants under 24 months of age.

Methods: The process was divided into four phases: questionnaire development (items and domains generation), pilot testing, validation and exploratory analysis. The final version of the PRE-SCHOOL questionnaire consisted of 190 items, each related to one or more of eight domains (personal data, family situation, health status, economical situation, level of education, social network, leisure and residence conditions). For the exploratory and validation analysis, 52 children were recruited. The parent interview was conducted by two specially trained social workers when the child reached 24 months of age. Internal consistency of the questionnaire was high for all domains (Cronbach's α coefficient of 0.964).

Conclusions: The social and economic contexts define spaces of possibility that directly affect the evolution and life development of each newborn. The PRE-SCHOOL socioeconomics indicators inventory improves the anamnesis process in preterm infants at risk of cognitive impairment. We need to increased socioeconomical informations of the early childhood enviroment in order to propose focused family-centred cost-effective interventions to improve cognitive development.