

In order to read the tables, an odds ratio of 1.0 or more is interpreted to mean that school leavers have 1.x times more of a certain characteristic or are x% more likely to have the characteristic measured by some predictor variable than stayers. On the other hand, an odds ratio of less than 1.0 is interpreted to mean that school leavers (or their reference group) have (100-x)% less of a certain characteristic or are (100-x)% less likely to exhibit that characteristic compared to the other group.

**These significant predictors of drop-out or school leaver status provide a unique profile of this population sub-group and suggest areas of vulnerability in their relatively low SES, their relatively poor health and disability status, and in their lack of health insurance and other access to private sources of medical care.**

## **Analysis #2**

Figure 4 and Table 12 provide a statistical summary of the logistic regression results predicting school leaving from an additional set of specific illness and injury predictors, including diagnosis of or treatment for heart disease, cancer, emphysema or other lung disease, liver disease, and a host of other health conditions. These questions were asked of half the survey sample.

Most of the same variables emerge from this analysis as distinguishing school leavers from stayers as in Analysis #1. These include poverty, unemployment, male gender, non-metropolitan residence, households containing children and youth under 18, lack of health insurance, increased illness and disability, and recent tobacco use.

Here again, school leavers in the 18-34 age range are at increased risk of each of the above conditions. And again, they are at significantly lower risk of alcohol use in the past 12 months than stayers, as was found earlier.

However, based on this analysis, **school leavers are 3.7 times more likely than stayers to have been diagnosed with or treated for cancer. They are 1.8 times more likely to be children of alcoholics or drug abusing parents.**

**They are nearly twice as likely to use emergency rooms and walk-in clinics as regular sources of medical care compared to stayers.**

These differences are important in light of the barriers to health care access among school leavers who are at excess risk of cancer and other illness and disability despite their youth. However, the fact that school leavers are more likely than stayers to be unemployed, uninsured, to use emergency rooms for routine care, lack affiliation with private MDs and clinics, all suggest that they lack physical, emotional and financial resources to attain the educational, employment, and other opportunities needed to break the cycle of poverty and disability.