

From Infancy to Adolescence: Growing Up in Poverty

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About Young Lives

Young Lives is an international study of childhood poverty, following the lives of 12,000 children in 4 countries (Ethiopia, India, Peru and Vietnam) over 15 years. www.younglives.org.uk

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Introduction

Improving children's life chances is central to development in low- and middle-income countries. Half the population of sub-Saharan Africa are aged 18 or younger (UNICEF 2013), and they comprise nearly half of all people living in extreme poverty worldwide (Olinto et al. 2013). As the largest single demographic group affected by extreme poverty, children can no longer be seen as a 'special interest group'. There is increasing recognition of inequalities within countries, and a recognition that some groups have been 'left behind' by development (Open Working Group on SDGs 2014). Poverty undermines not only children's rights to life, survival and development, as enshrined in the UN Convention on the Rights of the Child, but also the skills and capabilities that fast-changing economies need for future growth. Poverty in childhood is a key mechanism by which poverty persists between generations, and life-course analysis explains why this occurs. There is no better public-policy investment than in children.

The Young Lives study is following the lives of 12,000 children over 15 years in Ethiopia, Andhra Pradesh in India,¹ Peru and Vietnam. It includes an Older Cohort of children born in 1994–95 and a Younger Cohort born in 2001–02 (see Figure 1). By collecting information in low- and middle-income countries at different stages of national development, we hope to tell a broader story of what matters for children and when. Longitudinal analysis enables us to identify how and why factors early in life shape children's later outcomes, and how inequalities emerge, giving insights for key entry points for policies to support children's development and well-being at different ages. The design of Young Lives enables us also to consider differences in the outcomes of children at the age of 12, comparing the Older and Younger Cohorts in order to identify change between 2006 and 2013.

Figure 1. Young Lives study design



¹ In this paper we present data collected in 2013 from our sample across six districts of Andhra Pradesh before it was divided into two new states of Andhra Pradesh and Telangana on 2 June 2014. See our preliminary findings sheet on Round 4 survey design and sampling in India for further details.

In 2002 Young Lives began asking children and their families key questions about their lives. Since then the same children have been interviewed in 2006, 2009, and most recently 2013. This paper considers evidence on inequalities in development trajectories. Our central questions are to understand how, why and when inequalities become established through childhood. Throughout the paper our analysis takes account of initial household circumstances and characteristics (such as being in the poorest or least-poor tercile in terms of household wealth²) recorded in the first survey round, when Younger Cohort children were aged 1 and the Older Cohort children were aged 8. We explore how children and young people's trajectories diverge over time; and we provide preliminary findings on education, nutrition and youth transitions to higher education, work and marriage and parenthood, from the latest survey round.³ We find that the poorest children, those in rural areas and/or from marginalised social groups, are consistently being 'left behind' in terms of nutritional status, learning and opportunities to continue in education. We conclude by considering how policy interventions at different stages of the early life course can mitigate the development of such inequalities.

What are the new findings? Five highlights

- 1. Children value school and want to study for longer, obtain better jobs than their parents did and delay marriage and starting a family.** Among the Older Cohort, between 75 per cent (Ethiopia) and 92 per cent (Peru) of children aged 12 aspired to undertake vocational training or to attend university. Children and their families are investing in school, and they see it as life-changing.
- 2. Stunting is profoundly damaging for children and is very common, particularly among the poorest groups. Early intervention is best but post-infancy change occurs which needs to be better understood.** Early malnutrition has critical, long-term consequences for children's physical and cognitive development. The poorest children face much the highest risk of experiencing early malnutrition, which is thus a key channel for the transmission of disadvantage. Poor children at the age of 1 face between 1.7 times (Ethiopia) and 3.1 times (Peru) the risk of being stunted than less-poor children. However, after the first thousand days children can both falter in their physical development and physically recover. It is important for research and policy that we understand such patterns better. When children physically recover from early stunting, this change is associated with positive gains for their learning.
- 3. Improving achievement levels for poor children is central to overcoming the global crisis in learning.** Global attention has rightly moved beyond enrolment alone, towards addressing low levels of learning in school. Across each country it is the poorest children, those in rural areas, and those with less-educated parents who do least well in school. At the age of 12 in Ethiopia, 35 per cent of children have a reading problem, and poor children were found to be 1.6 times more likely to experience difficulties than the average, while the least-poor children were half (0.4) as likely to experience these problems. Young Lives also identifies national differences: comparing the Older and Younger Cohorts at the age of 12, we found evidence of falling achievement levels in Ethiopia and Andhra Pradesh, but positive signs of rising achievement in Vietnam and Peru.

² Household wealth is measured by a composite indicator of consumer durables, services access and housing conditions.

³ These are published as a series of short fact sheets for each country - focusing on Education and Learning; Nutrition and Health; and Youth and Development – to give a brief overview of children's outcomes at age 12 and age 19 looking at differences by poverty level, rural/urban location and gender.

- 4. Despite high aspirations for education and work, the reality at age 19 is very different.** Substantial numbers of young people are still in some form of education at the age of 19, often combining this with work. The least-poor young people, those whose parents had higher levels of education, and those growing up in urban areas are most likely to remain in education. In Vietnam the least-poor young people are twice as likely as their poorer peers to be studying (69 per cent, compared with 35 per cent). In Ethiopia, enrolment rates are high, but they often relate to slow grade progression and many young people are still completing the early stages of secondary education. Gender-related differences increase during adolescence, especially for the poorest children. By the age of 19 young women in Andhra Pradesh are 16 percentage points *less* likely to be studying than young men. However, in Vietnam young women were found to be 9 percentage points *more* likely to be studying than young men.
- 5. The poorest girls are the most likely to have married and had a child before the age of 18.** Across the countries the majority of young people are not yet married, but in Andhra Pradesh 37 per cent of girls are married by the age of 19 and 21 per cent have a baby. Between 9 per cent (Ethiopia) and 24 per cent (Peru) of girls had given birth by age 19. Poorer young women and those living in rural areas are more likely to have married and had babies. Early marriage and other traditional practices, such as female genital mutilation (FGM), are often seen in communities as ‘protective’ of girls’ social reputations and as a means of ensuring that girls are provided for in adulthood.

Using life-course analysis to inform policy

‘Life-course’ approaches not only consider children’s lives at one age point but analyse how earlier circumstances relate to later outcomes, and how an individual’s life course is shaped by wider social and economic forces.

What matters: by collecting information on the same children over time as they grow up, cohort studies enable analysis that can link earlier circumstances to later outcomes. This is useful for policymakers, because it helps to assess the risks and protective factors for children’s later development. Such analysis has shown, for example, that under-nutrition is associated not only with worse health outcomes but with damage to children’s learning: in order to improve learning, we need to consider children’s health and nutrition, not only their schooling.

When does it matter: developing a picture of children’s development across different age points provides a way of identifying critical and sensitive ages of development. This is important for identifying the most effective points in children’s lives for intervention, and for assessing the potential for later remediation. Such a timing dimension also provides tools to identify preventative approaches. Much attention has been given to the crucial role of early nutrition, but adolescence is also increasingly recognised as a key transitional time.

Lives in context: identifying the wider social and economic changes that affect children highlights what may shape children’s and young people’s development. Not all the factors that influence children’s well-being operate at the level of the individual: equally important may be prevailing social norms and economic opportunities available to their households. Most children live in households, and so household circumstances are a key influence on children’s chances.

1. Children value school and want to study for longer, obtain better jobs than their parents, and delay marriage and starting a family

Children and young people have high hopes for their lives and see school as being central to transforming their life chances. Analysis from our survey and in-depth qualitative interviews demonstrate that young people typically report high aspirations for education, and an expectation that education will enable them to escape from poverty and disadvantage.

“If one can learn and study hard, they will always have a good job at the end that can change their family’s life.”

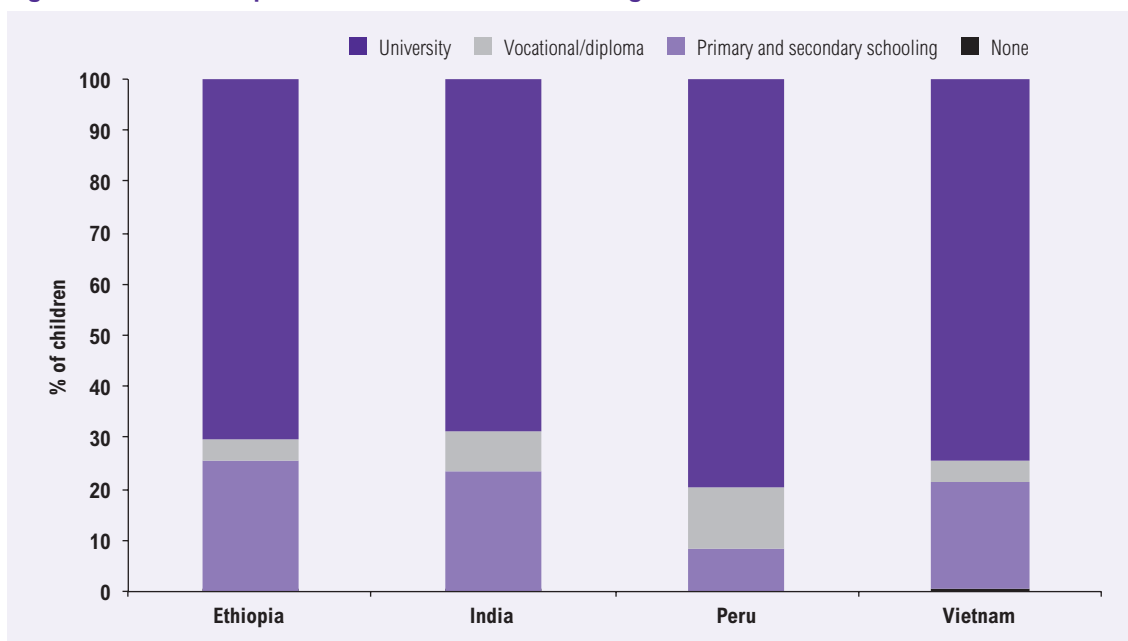
(Fatuma, 15-year-old girl growing up in Addis Ababa)

“For any job they require you to have finished secondary school, and I think that to be a driver, or whatever, you need to have finished your secondary schooling... [If I left school] I wouldn’t be able to keep myself in the future. With studies I can be something.”

(Susan, a 16-year-old girl from Lima)

Among the Older Cohort, at the age of 12, between 75 per cent (Ethiopia) and 92 per cent (Peru) of children aspired to vocational training or higher (post-school) education (see Figure 2). Even when children are asked whether they think they will be able to reach their goals, their expectations remain high. For example, in Vietnam 85 per cent of 12-year-olds said that they expected to reach their aspiration – which, for four-fifths of young people, was vocational or university-level study.

Figure 2. Children’s aspirations for formal education at age 12



When the same children were asked at the age of 12 and then again at age 15 and age 19 about their aspirations for the future, in Ethiopia and Vietnam their aspirations remained high. In Peru and Andhra Pradesh, the explanation seems to be that some young people's aspirations had shifted from university education to post-school vocational training, an education level still much higher than would have been experienced by most parents.

Young people want to delay starting families. Across the four countries, 19-year-olds think that the best time for men to marry and have children ranges on average from the age of 25 (in Andhra Pradesh) to 27 (in Peru and Vietnam). For women, the desired age varied from 21 years in Andhra Pradesh to 26 years in Peru (see Table 1). Young people want to complete their education and obtain a job before starting a family.

Table 1. What do you think is the best age to become a parent?

	Ethiopia		Andhra Pradesh		Peru		Vietnam	
	For men	For women	For men	For women	For men	For women	For men	For women
Young men	26	22	25	21	27	25	27	24
Young women	26	23	24	21	27	26	27	24
Poorest third	26	22	24	21	26	25	26	23
Least-poor third	27	24	25	22	27	26	28	25
Average	26	23	25	21	27	26	27	24

Note: These results are averages of the responses we received, rounded into full years.

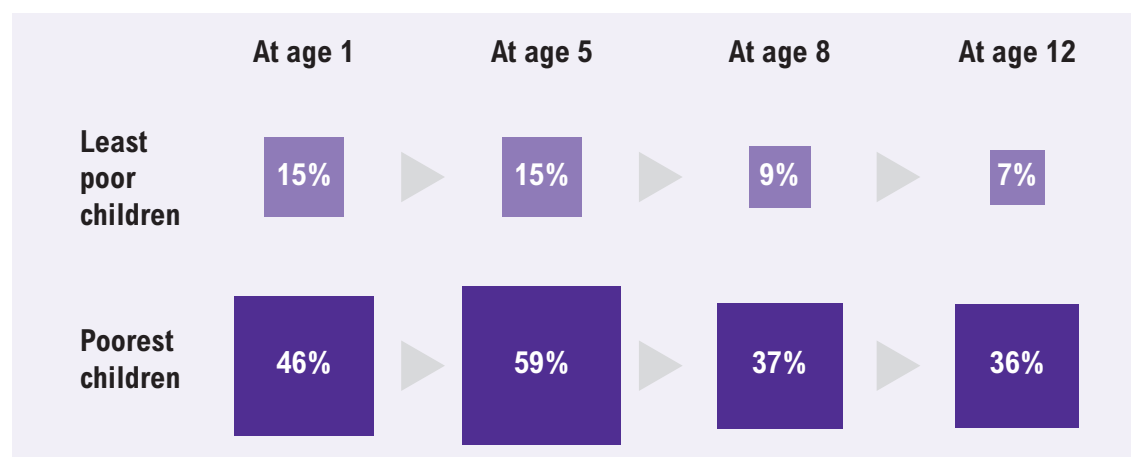
These aspirations clearly do not reflect reality for many children and young people, as we shall see throughout the paper. However, such views show that where hopes are not fulfilled we need to look beyond individual motivation and consider the reasons why children and young people leave education early, marry and start families young.

2. Stunting is profoundly damaging for children and is very common, particularly among the poorest groups

“We have made a conservative estimate that more than 200 million children under 5 years fail to reach their potential in cognitive development because of poverty, poor health and nutrition, and deficient care.” (Grantham-McGregor et al. 2007)

Early under-nutrition is a key risk-factor for child mortality and illness, and has been shown to affect children’s later learning (including within the Young Lives sample see Duc 2011; Sánchez 2009). Stunted growth provides a proxy for chronic under-nutrition. Children’s very early development is closely related to household circumstances, and gaps between the average stunting levels of different groups of children are well established in infancy. Physical growth in height is measured with reference to WHO-expected growth norms. In the Young Lives samples, at the age of 12 stunting rates varied considerably: 30 per cent in Andhra Pradesh, 29 per cent in Ethiopia, 21 per cent in Peru and 20 per cent in Vietnam, but the rates of stunting affecting the poorest third of children were much higher. Poor children face between 1.7 times (Ethiopia) and 3.1 times (Peru) times the risk of being stunted in infancy than less-poor children. Children in rural areas and those with low levels of parental education were also much more likely to be stunted. Figure 3, using the example of Peru, summarises the emergence of marked differences in stunting levels across age points by 12 years of age.

Figure 3. Parallel lives: Stunting trajectories of children in Peru



The two-cohort design allows Young Lives to examine the differences between the development outcomes for the Younger and Older Cohorts at the age of 12, and so to measure change in children’s outcomes in Young Lives communities (between 2006 and 2013). Figure 4 shows inequalities in Andhra Pradesh, showing both the level of current inequality between groups and the level of change. As the chart shows, stunting rates fell between 2006 and 2013, but the smallest gains were made for the children who were initially most disadvantaged: the problem of stunting therefore has become increasingly concentrated among the poorest children.

Figure 4. Inequalities in stunting rates by social group (Andhra Pradesh, 12-year-old children)

Note: Stunting rates are high in Andhra Pradesh. However, the association between higher stunting rates and poverty, rurality and ethnic/caste marginalisation is common to the four countries.

Early nutritional status predicts not only growth but health and later learning. Early intervention is therefore critical. Key measures include household-poverty reduction and improved food security, preventative health care, safe sanitation and nutrition-specific interventions (see UNICEF 2013). It is often the poorest children and families who cannot afford food of sufficient quality, who experience a high burden of illness, and who, relatedly, have the worst access to clean sanitation and water. In such circumstances it is unsurprising that under-nutrition is a key channel by which poverty in childhood affects later inequalities.

“ Food shortage means I go to school hungry. I cannot properly concentrate in class if I am hungry, so it affects my schooling. ”

(Kassaye, 14 year-old-boy, rural Amhara, Ethiopia)

Changes in physical growth trajectories after infancy

Evidence from Young Lives – across all four study countries – shows that there was real change in children’s growth trajectories after infancy, with children both recovering from early stunting and faltering in their growth between the ages of 1 and 5, and between 5 and 8 (Lundeen et al. 2013). When children physically recover, height gain is associated with their doing better on tests of learning than would otherwise be expected (Crookston et al. 2013). Material conditions and community factors influence the chances of physical recovery (Schott et al. 2013). However, poverty is shown to increase the risk of children faltering, and higher socio-economic position is a factor associated with a greater chance of recovering, suggesting that disparities between children are likely to widen with age. More research is required to understand better what might affect children’s chances of physical recovery and faltering, and what this means for their development and longer-term outcomes.

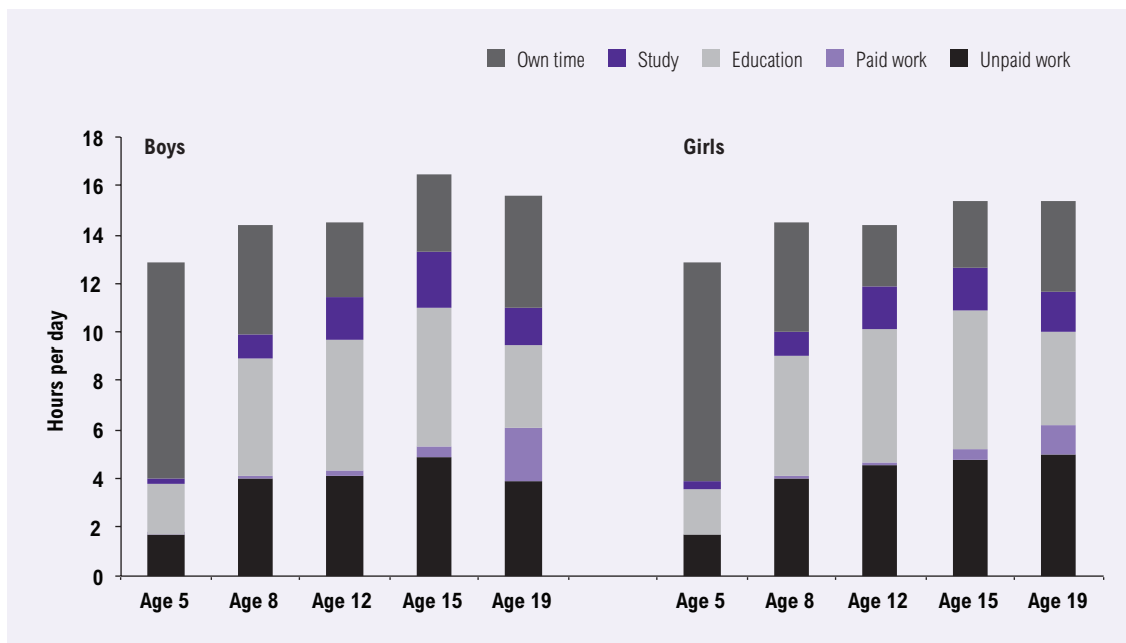
Policies therefore need to remain focused on early prevention, but this evidence of later change shows both that efforts are needed to maintain good nutrition and growth (and prevent faltering), and that remedial programmes may have the potential to support recovery later in childhood with wider gains for learning.

3. Improving achievement levels for the poorest children is central to overcoming the global crisis in learning

“Of the world’s 650 million primary school age children, at least 250 million are not learning the basics in reading and mathematics.” (UNESCO 2014: 19)

Schooling has become central to children’s lives, and enrolment is now almost universal, with 95 per cent (Ethiopia), 97 per cent (Andhra Pradesh), 98 per cent (Vietnam) and 99 per cent (Peru) of children at the age of 12 reported as enrolled in school. These enrolment rates represent the success of policies to expand access to schooling. Figure 5 shows how much time children report spending in education and studying. In Andhra Pradesh, for example, overall enrolment rates at age 12 represent an increase of 8 percentage points between 2006 and 2013, wiping out enrolment inequalities, although inequalities remain in the teaching that children receive, and the type of school (government or private) that children actually attend.

Figure 5. Children’s time-use in a typical day (Ethiopia)



Note: Sleep is excluded. This chart relates to Ethiopia, but consistent patterns occur across the samples, illustrating the dominant role of education throughout childhood, but also significant lengths of time spent in work (mostly unpaid), increasing into early adulthood.

Experiences in school differ between groups of children. In Andhra Pradesh, boys were one-third more likely to be in private schools than girls (urban children and the least-poor children were also much more likely to be in private schools). However, the quality of schooling in private schools, despite parental perceptions, is not necessarily better than in government schools. In Vietnam, the least-poor children were twice as likely to receive extra tuition as the poorest children. Progression rates within school can also be different, depending on the

school system. In Ethiopia by the age of 12, the least-poor third of children had on average completed two more grades of schooling than the poorest children.

Learning levels vary both between and within countries

Systematic differences in the average learning levels of groups of children are established early in life, and they are associated with key household characteristics. Poor performance in cognitive tests at the age of 5 is associated with household characteristics, with poorer children and those in rural areas scoring least well (Woodhead, Dornan and Murray 2013). Learning gaps develop before school enrolment and are then associated with later performance; this shows the need to intervene before children even start school to secure better later learning (Singh 2014). Household characteristics are also associated with different opportunities to learn, with systematically different experiences of pre-school services (Woodhead et al. 2009).

Across each country, there is a consistent difference in learning levels, with children in rural areas, or with low maternal education, poorer children and those from minority or marginalised ethnic and caste groups the most likely to score poorly on tests of literacy, vocabulary and numeracy. At this age boys and girls scored similarly. At age 12 in Ethiopia, where 35 per cent of children have a reading problem, poor children were 1.6 times more likely to experience difficulties than average, while the least-poor children were half as likely to experience these problems.

The design of Young Lives allows us also to consider differences in the outcomes at the age of 12, comparing the Older and Younger Cohorts. Worryingly, although this suggests rising performance in Vietnam and Peru, test performance in Ethiopia and Andhra Pradesh fell, with children at age 12 less likely to get these questions right in 2013 than children growing up in the same communities had been in 2006. The declines in Andhra Pradesh are across government and private schools, and across social groups, but seem to be greatest for the poorest children and for those in government schools. Such evidence is a cause for concern and warrants much closer analysis. The decline for the poorest children is also shown in Ethiopia.

It can be seen, therefore, that schools vary in how much they enhance children's knowledge and capabilities. School systems may have potential to counteract inequalities, but they often reinforce them. While differences between groups of children exist even before children enter school, during middle childhood the school itself becomes a key determinant of how much progress children make in their learning (Rolleston and James 2011). Across the Young Lives countries there are different patterns of learning gain, with a higher gain observed in primary schools in Vietnam than in Peru, Andhra Pradesh and Ethiopia (Singh 2014). Within countries there are also differences in the degree to which school systems are equitable: in Andhra Pradesh the growing private-school system is linked with worsening socio-economic and gender equity (Woodhead, Frost and James 2013a), while in Vietnam the school system seems to narrow gaps between ethnic-minority and ethnic-majority children during primary school (Rolleston et al. 2013). Such evidence reinforces the need to go beyond a focus on access only and towards learning, but it also highlights the need to understand education-improvement challenges within the national context, particularly since across contexts it is always the most marginalised children who are left behind.

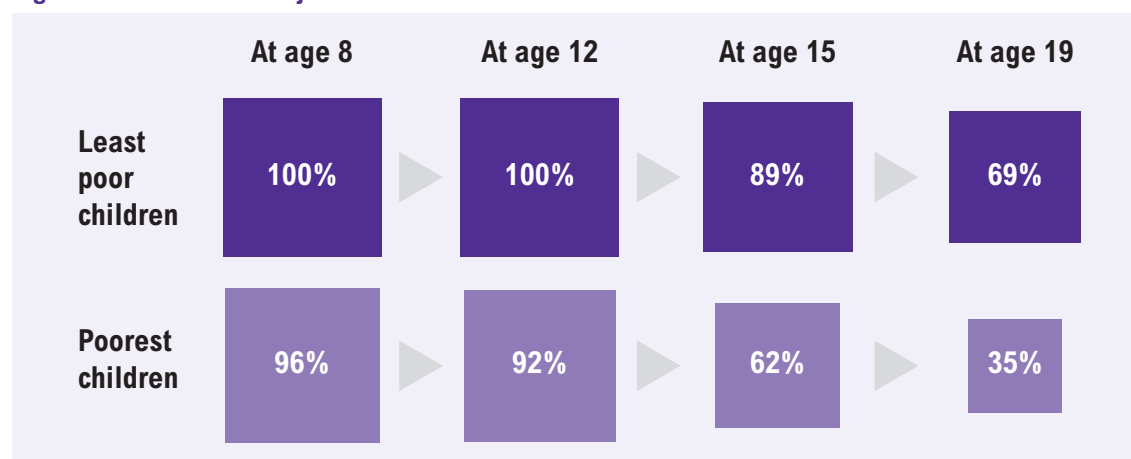
4. Despite high aspirations for education and work, the reality at the age of 19 is very different

“Despite the large increase in educational attainment in recent years, demand for well-educated workers remains high and the economy continues to reward them.”
(World Bank 2013)

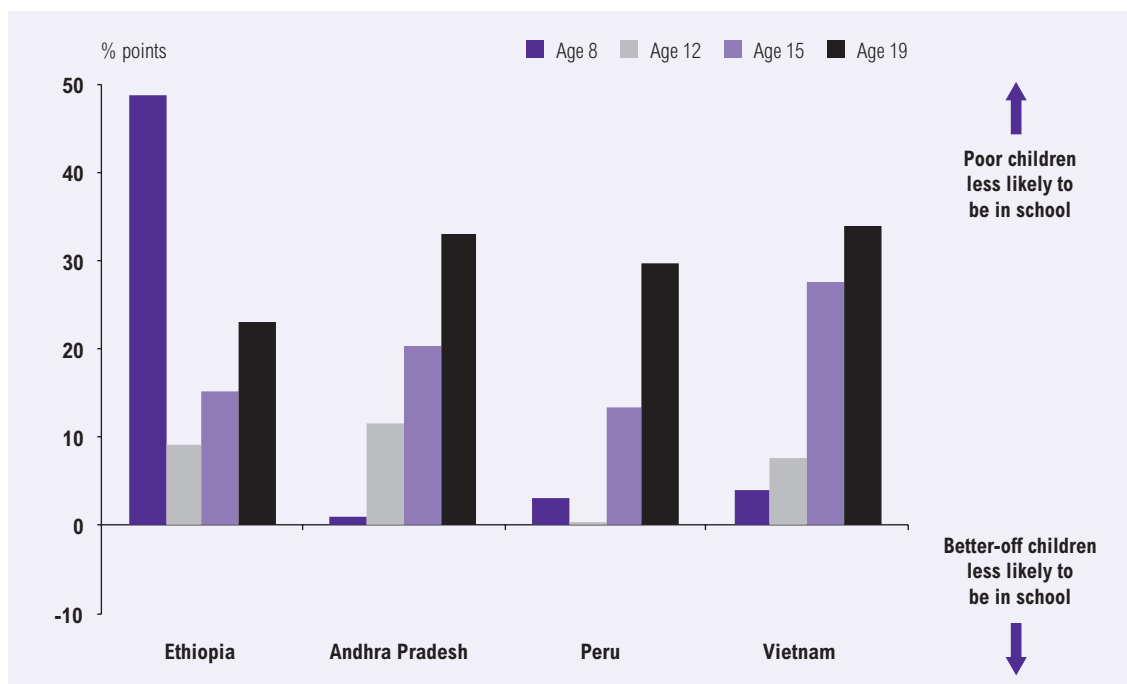
We have so far seen how early disadvantage results in diverging trajectories in children’s nutritional status, school enrolment and learning. Across each of these indicators the poorest children, those in rural areas and from marginalised social groups, and those in families with the lowest education levels tend to do least well. Such outcomes at age 12 are precisely the roots of some of the disadvantages apparent for the Older Cohort at age 19. Despite young people’s high aspirations for education and work, and in spite of their expressed wish to delay marriage and parenthood, the reality for many young people is very different – as the following two sections will show.

Enrolment rates peak during middle childhood and then decline during adolescence, particularly for the poorest children after the age of 15. Using data from Vietnam, Figure 6 summarises how marked differences emerge across adolescence. Young people from more advantaged backgrounds are twice as likely as poor young people to be in education or training by age 19 (69 per cent, compared with 35 per cent).

Figure 6. Parallel lives: trajectories in school enrolment in Vietnam



Presenting the same data in a different way, Figure 7 shows how across the four countries the gap in enrolment between children from the poorest and least-poor households widens during adolescence, ranging from a difference of 23 percentage points in Ethiopia to 34 percentage points in Vietnam at the age of 19. As children grow up, other pressures compete with schooling, such as the need to work to support the household, especially for more disadvantaged groups – and so the opportunity costs of studying increase.

Figure 7. Differences in enrolment between the poorest and the least-poor children

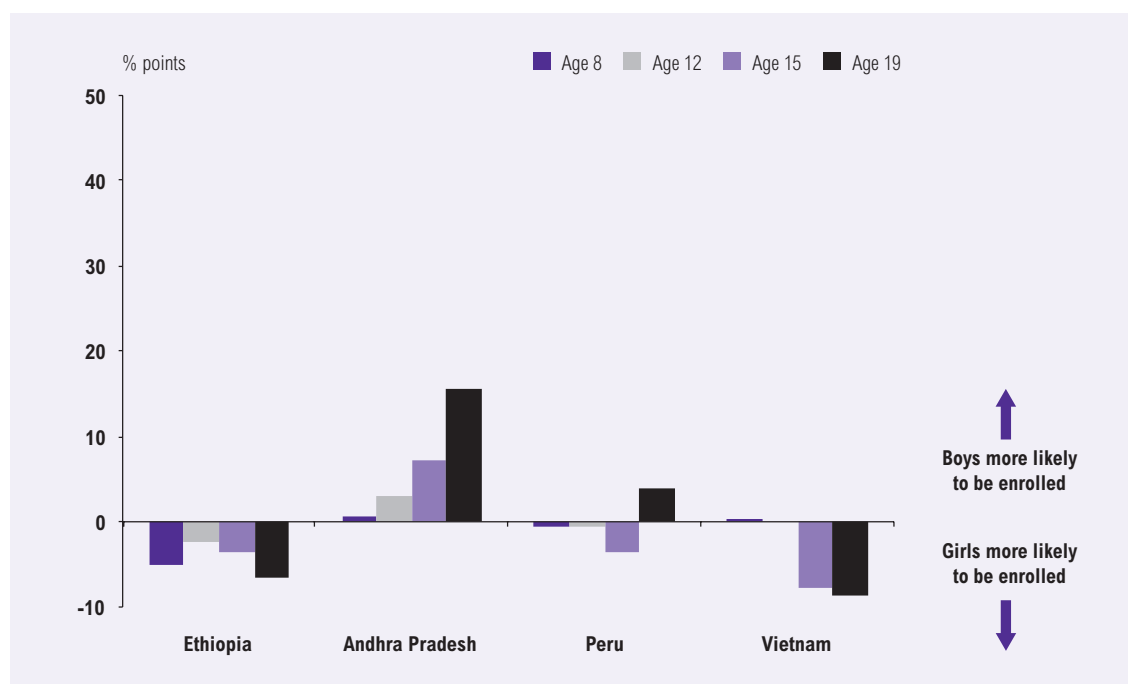
Gender differences grow during adolescence, especially for the poorest children

Analysis of differences between boys and girls shows a more complex pattern: enrolment gaps at younger ages are small, but they widen through adolescence. We find that girls and young women are particularly disadvantaged in Andhra Pradesh and are 16 percentage points less likely to be studying than young men by the age of 19. But young women are not always disadvantaged: for example, in Vietnam, young women are 9 percentage points more likely to be studying at age 19 than young men. Gender differences take different forms within and between countries and are shaped by intra-household dynamics, socio-cultural context, institutional structures and economic pressures (Woodhead, Dornan and Murray 2013).

Gaps between boys' and girls' enrolment also increase during adolescence, but they are smaller in size than gaps determined by poverty (Figure 7). Moreover, different patterns emerge across the countries. Figure 8 shows the percentage-point difference in enrolment between girls and boys over the early life course. Social norms, as well as care responsibilities, increase the chances of young women leaving school early, and for boys the need to work (and their earning potential) are likely to increase with age. Aspects of the school system also increase the chances of young people exiting early. For girls, secondary school often presents a more threatening environment than primary school, for example with longer distances from home leading to risks of sexual assault (Morrow 2013a). In Andhra Pradesh, if children fail the Grade 10 exam, they are prevented from continuing in education (Morrow 2013b).

“ Some people say that girls are just like boys and they should be educated well. And others say, “What are they going to do with higher education, since they will be going to somebody else’s house?” They also say, “Since we can’t benefit, why spend money on a girl’s education?” ”

(Father of 8-year-old Shanmuka Priya, rural Telangana, India)

Figure 8. Differences in enrolment between boys and girls (Older Cohort)

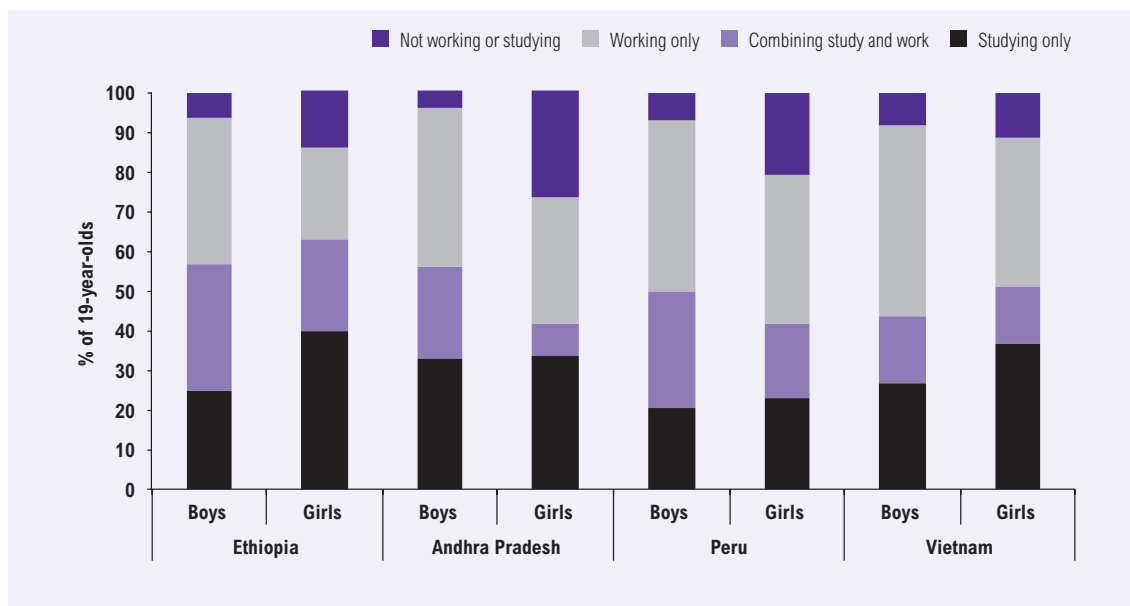
However – importantly – when disaggregating enrolment figures by gender *and* poverty status, further differences within and between the countries emerge. In Ethiopia and in Vietnam poor young men are less likely to be enrolled at 19 than poor young women. In Peru, the poorest young women have the lowest enrolment rate, whereas the least-poor young women have the highest enrolment rate. In Andhra Pradesh, young women are less likely to be enrolled than their male peers regardless of household wealth level.

High enrolment rates can mask slow progress through school

Simple enrolment rates can mask slow progression through school. In Andhra Pradesh, of the 49 per cent of 19-year-olds still enrolled, one in five of these still had not completed secondary school. In Ethiopia, there are high rates of retention (59 per cent of young people still studying at age 19); but there is also considerable evidence that many of these young people had been delayed in their grade progression through school. By the age of 19, young people who had enrolled on time (age 7) and then progressed by one school grade each year would have reached grade 12. However, one in five young people had not passed grade 8 by the age of 19, and a further third had not passed grade 10 by that point. Two in five young people are in more advanced levels of study (vocational, pre-university and university), with one in ten of those enrolled at 19 reporting being at university.

At the age of 19, 59 per cent (Ethiopia), 49 per cent (Andhra Pradesh), 45 per cent (Peru) and 48 per cent (Vietnam) report still studying in some form, often combining study with paid work (see Figure 9). Across the countries, around one in twenty young men and between one in ten and one in four young women report not being in either education or work. The rates for young women are highest, because many are looking after young children.

Figure 9. What are young people doing at age 19?



Note: 'Not working or studying' includes both young people who appear 'inactive' and those (overwhelmingly young mothers) who do not report work outside the home or study, but do report having a child to look after. The data in this chart from Peru has been weighted which slightly increases the size of the gender gap as against Figure 8.

As skills gained through formal schooling become increasingly valued within labour markets in many countries, barriers to progression through education and training present a waste of potential talent. Overcoming the differences that determine which social groups are most likely to progress to the highest levels of formal education and training also provides a strategy for improving equality of opportunity.

5. The poorest girls still marry and have children well below the age of 18

“Adolescence is the pivotal decade when poverty and inequity often pass to the next generation, as poor adolescent girls give birth to impoverished children.” (UNICEF 2011: 3)

Rates of early marriage and adolescent fertility have declined in global terms, but the pace of change remains slow. A series of risks are associated with early marriage and childbirth, including higher infant and maternal mortality; health risks due to physical immaturity and sexually transmitted infections; higher overall fertility; and intergenerational transmission of poverty, as adolescent mothers tend to be less well nourished, to be less educated, to have lower access to economic opportunities and information, to have reduced autonomy and agency, and to be more exposed to abuse (Bird 2007: 24–25). Early marriage and childbearing are not only a risk to the individual but constitute costs for wider society through lost social and economic contributions, as well as the intergenerational transmission of poverty (UNDESA 2013).

Despite the aspirations for delayed marriage and fertility, explored in Section 1, by the age of 19 37 per cent of girls in Andhra Pradesh, 25 per cent in Peru, 19 per cent in Vietnam and 13

per cent in Ethiopia had married or cohabited. In Andhra Pradesh and Ethiopia, many young women who had married had done so below the legal age for marriage (an average of 16.7 years in Ethiopia and 16.5 years in Andhra Pradesh). By the age of 19, between 8.8 per cent (Ethiopia) and 24 per cent (Peru) of young women had given birth (Table 2). Poorer girls and those living in rural areas are more likely to have married and had babies.

Table 2. Which girls have become mothers by the age of 19?

%	Ethiopia	Andhra Pradesh	Peru	Vietnam
Urban	2.6	10.7	22.3	6.1
Rural	12.5	24.0	29.3	13.7
Poorest third	11.8	25.3	32.1	28.1
Least-poor third	2.8	13.0	15.3	4.9
Average	8.8	20.9	24.1	12.4

National differences in age of marriage and first pregnancy highlight the importance of addressing both poverty and social norms. Social norms such as early marriage and, indeed, female genital mutilation (FGM) in Ethiopia violate girls' rights; but such practices are often seen by communities as 'protective' of girls' social reputations and an enhancement of their marriageability (Pankhurst 2014). Similarly, early marriage is seen as ensuring that girls are provided for in adulthood and protected from economic and social risks. Seeking to abolish such practices without fully addressing underlying issues of risk reduces the chances of success. Addressing poverty, helping to keep girls in education for longer, providing later employment opportunities for women, and investing in high-quality schooling would be strategies to reduce early marriage.

“Marrying after 16 or 17 is not good. We live in corrupt and dangerous times; it is better that she has married early. Many children have already fallen into bad ways. For instance, one girl I know, who is still a child, has had a baby. She suffered a lot; her father is not alive and it was hard for her and her mother. When you see these kinds of things, it is better that a girl marries early.”

(Mother of Ayu. Ayu married at 16 and lives in rural Oromia, Ethiopia.)

Policy implications

“In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration.” (UNCRC 1989: Article 3.1)

We conclude by considering how policy interventions at different stages of the early life course can mitigate the development of such inequalities. From a social investment perspective, life-course analysis continues to show the absolute centrality of the early years – with children's later outcomes shaped by that earlier period. A key message from cohort analysis is, however, that later outcomes are seldom wholly 'fixed' at the very earliest point in life; rather, change happens at other age stages also. As such, Young Lives provides support for some existing key policy interventions, but adds the crucial dimension of continued support and preventative intervention from very early life through childhood and adolescence.

Across all of these age points a message of prime importance is the key role of household circumstances as an immediate mediator of children's chances, and so this is the point at which we start. After discussing age-specific interventions, through early and mid-childhood and adolescence – endorsing the need for both early prevention and support for later development – we end by considering how policy responds to the multidimensional disadvantage that many children face.

Supporting households to invest in children and young people

Provide access to social protection for vulnerable households. While families often work hard to protect children, children's experiences are often shaped by wider household circumstances. Poverty reduces caregivers' capacity to invest in children; it requires hard choices, and it reduces resilience to shocks. Given that children are over-represented among poor people, policies which seek to reduce household poverty are therefore more likely to be pro-child, and considerable consensus exists that social protection has a fundamental role in development: the key challenge is to extend the coverage of social-protection programmes. Breadth of targeting ought to reflect national conditions, but it is notable that in the Young Lives samples it is not only the poorest 20 per cent of households that face deprivation but often those that are higher up the wealth-distribution scale (certainly 40 per cent, and often higher).

Much recent debate on child-orientated social protection has highlighted the role of conditional cash transfers (CCTs). Such schemes are common in South America (for example, Prospera, Bolsa Família or the Peruvian Juntos programme, which condition payments on engagement in education and health care). CCTs have advantages and disadvantages (see Fiszbein and Schady 2009), but they may be challenging to implement in low-resource environments. Simpler alternatives, which retain a child focus, include the established South African child-support grant.

Build strong preventative and curative health services to support families. Parental or sibling illness may also affect children profoundly, through lost household income and greater costs and care needs. High enrolment rates mean that schools can be an effective way of reaching children to achieve broader health-related objectives, for example through vaccination programmes.

“ *We don't need to pay to go to the hospital; we just need to pay the room fee and our food expenses. Medicines are free for us... It helps us a little, saves money for us. If we have a cough, or a light cold, we can go to the medical centre to get some medicines. We can get free medicines after showing the insurance.* ”

(Mother of 10-year-old Y Thanh, from a Cham H'Roi family who receive free health insurance in rural Vietnam)

Getting the foundation right in early childhood

Ensure access to primary health, nutrition and antenatal services. The period of early childhood is fundamental to children's physical development and later learning, and investments in Early Childhood Care and Education (ECCE) provide a foundation for later learning in school. Early-childhood services are a recognised strategy to support this age group, raising several key global questions: (1) how to extend coverage of availability; (2) how to improve the quality of such services; and (3) how to ensure that such services reach

the poorest children (see also Woodhead et al. 2009). To support the effects of ECCE, governments should prioritise social protection schemes that target income security, and extend access to affordable health care, to reach households with very young children. As the analysis in this paper highlights, while prevention in infancy and before is vital, there is also potential for remedial investments (for example, social protection and school feeding) made later in childhood to support children's later development and to prevent later faltering.

Sustaining healthy development in middle childhood

Improve equity of access and quality of schooling. School is a dominant institution in children's lives at this age. Global attention is turning to the quality of children's learning in school. Different groups of children have different opportunities to learn. School quality improvement programmes can be supported both by an equity focus and by a better understanding of what it is about the school that adds value to learning. Such questions require country-specific answers. Young Lives evidence highlights how opportunities to learn affect children's outcomes and points to the action of teachers within schools, as well as the importance of understanding children's experiences of schooling (Rolleston et al. 2013; Guerrero et al. 2013; Singh and Sarkar 2012).

Addressing the potential for remedial action for children who have fallen behind. While early childhood is a vital time for preventative action, middle childhood is a period when children can fall behind, or a period when education policy can support children who have experienced early deprivations. Given that most children are in some form of school at this point, the school offers huge potential as a policy instrument to support remedial interventions for learning and healthy development, for example through in-school feeding programmes.

Supporting adolescents

Ensure a better match between education and skills and opportunities for income generation. In tackling the poverty cycle, better policy for children provides a social-investment strategy to boost human capital. Providing more education in the absence of job opportunities or other income-generation opportunities will not prove life-changing. Indeed, if children and parents cannot see the likely pay-off from schooling, they are less likely to invest in it. Social mobility for children requires not only skills from education, but the opportunity to use those skills in the jobs market. As the World Bank (2012) and others have identified, the next decades present a challenge for low- and middle-income countries in delivering growth rich in jobs (see also Hardgrove et al. 2014).

Delaying marriage and childbirth. A recent review of multi-country approaches to preventing early marriage highlights the importance of addressing the root causes of the factors that put girls at risk. Improving access to health services and information, and strengthening social-support networks, are key components in enabling young people to make informed choices about reproduction/reproductive health. This needs to be supported by strategies to enable girls to stay in school for longer, such as increasing livelihood options or social protection to buffer households from shocks, and making the school environment and the journey to school safe for girls (ICRW 2013; see also Hardgrove et al. 2014).

Leaving no-one behind: multidimensional approaches to reach the most disadvantaged

“When everyone, irrespective of household income, gender, location, ethnicity, age, or disability, has access to health, nutrition, education, and other vital services, many of the worst effects of inequality will be over.” (United Nations 2013)

A cross-cutting focus on equity. It is imperative to identify those children with the worst outcomes, to ensure that policies are reaching the most disadvantaged groups. While patterns vary across countries, there is consistent evidence that the poorest children, those in rural areas, marginalised ethnic or caste groups and those whose parents are less educated are commonly disadvantaged in terms of learning, nutrition indicators and later schooling. This logic has been accepted through the post-2015 Millennium Development Goals review process (see Open Working Group on Sustainable Development Goals 2014), but will need to be replicated at the national level, which itself requires better data.

The shift to move beyond a focus on school access and towards an emphasis on the impact of education (and other key services) requires a recognition that different groups of children benefit unequally from the same services. Children may experience services differently: for instance, household circumstances undermine children’s ability to make use of services, because, for example, their own need to work undermines their study. Poor children may be ‘sorted’ into lower-quality schools, for example if rural schools are of lower quality than those in urban areas. Poorer children may be treated differently in the same schools, if their teachers do not expect children from particular backgrounds to do well. Finally, parents who have had little education themselves may not be well placed to make effective use of public services for their children. An equity-proofing approach to public services, focused on narrowing the inequalities produced through systems, therefore needs not only to ensure access for all but to address the reasons why the same services may produce different results for different groups.

Multidimensional approaches to children’s development. Children who have poor outcomes in one domain, such as physical health, typically have poorer outcomes in others, such as cognitive development, and these domains interact (see Sánchez 2013). However, policies and interventions are often implemented by different government sectors. Collaboration between sectors is vital, but challenging – even in the early-childhood sector, where the case for integration is strongest (see Britto et al. 2014). However, there are pragmatic steps that can be taken. For example, joint planning at a national or regional level can ensure that children and families have access to multiple services (such as education, health care and social protection), even if such services do not actively collaborate on the ground. Tangible examples of joint initiatives, such as school feeding programmes (see, for example, Singh, Park and Dercon 2012) can provide benefits in terms of both education and health.

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From Infancy to Adolescence: Growing Up in Poverty

Paul Dornan and Kirrily Pells

Improving children's life chances is central to development in low- and middle-income countries. Half the population of sub-Saharan Africa are aged 18 or younger, and they comprise nearly half of all people living in extreme poverty worldwide. As the largest single demographic group affected by extreme poverty, children can no longer be seen as a 'special interest group'. There is increasing recognition of inequalities within countries, and a recognition that some groups have been 'left behind' by development. Poverty undermines not only children's rights to life, survival and development, as enshrined in the UN Convention on the Rights of the Child, but also the skills and capabilities that fast-changing economies need for future growth. Poverty in childhood is a key mechanism by means of which poverty persists between generations, and life-course analysis explains why this occurs. There is no better public-policy investment than in children.

In 2002 Young Lives began asking children and their families key questions about their lives. This paper considers evidence on inequalities in children's development trajectories from the fourth round of survey interviews carried out in late 2013. Our central questions are to understand how, why and when inequalities become established through childhood. Our analysis takes account of household circumstances and characteristics to explore how children and young people's trajectories diverge over time. We find that the poorest children, those in rural areas and/or from marginalised social groups, are consistently being 'left behind' in terms of nutritional status, learning and employment opportunities. We conclude by considering how policy interventions at different stages of the early life course can mitigate the development of such inequalities.

The findings are grouped around 5 key messages:

1. Children value school and want to study for longer, obtain better jobs than their parents, and delay marriage and starting a family.
2. Stunting is profoundly damaging for children and is very common, particularly among the poorest groups. Early intervention is best but post-infancy change occurs, which needs to be better understood.
3. Improving achievement levels for poor children is central to overcoming the global crisis in learning.
4. Despite high aspirations for education and work, the reality at age 19 is very different.
5. The poorest girls are the most likely to have married and had a child before the age of 19.

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