

Tracing the consequences of child poverty

The snapshot that follows draws on a forthcoming book that synthesises key findings from the study to trace the consequences of child poverty for Young Lives children and provides priorities for policy and programming likely to lessen risks to children's development and reduce disadvantage. The volume is complemented by a series of papers that provide greater depth on specific topics, such as nutrition, education, gender, family formation and labour market entry and in addition present key findings from each Young Lives country.

Introduction

“Nothing is impossible for me.”

This powerful assertion of hope and determination was made in an interview with thirteen-year-old Hadush from rural Tigray, Ethiopia. His aspiration to overcome all odds to achieve his goals and improve his life chances are echoed by many of the 12,000 children from Ethiopia, India (in the states of Andhra Pradesh and Telangana), Peru and Vietnam who have been followed by Young Lives since 2001.

The study stretches across urban and rural communities in four very different countries. The breadth of issues covered in the data collected over five rounds of household surveys with the children (who fall in two age groups; an Older Cohort born in 1994/5 and a Younger Cohort born in 2001/2) and their caregivers, supplemented by qualitative research and dedicated school-based surveys, is unique. The study permits examination of how different dimensions of poverty (e.g. livelihoods, household wealth, and access to services), affect specific domains of children's development at different points in the lifecycle. We are able to draw attention to threats to health and development that are a function of minority group membership particular to specific countries. Having data from children growing up in poorer and better-off families in multiple locations and socio-cultural contexts across four very different countries, enables us to highlight cross-national commonalities in the findings, making Young Lives globally applicable for policymakers.

Improving the lives of poor children in particular is central to achieving many of the Sustainable Development Goals (SDGs). Young Lives provides vital longitudinal evidence for use in shaping policies that are aligned with SDG targets. The study has particular relevance for commitments to *leave no child behind*. Policymakers who aim to improve equality of opportunity need to know what mattered most for children such as Hadush, and at what points in their development, in order for them to realise their aspirations.

Child poverty in a time of rapid change – who was left behind?

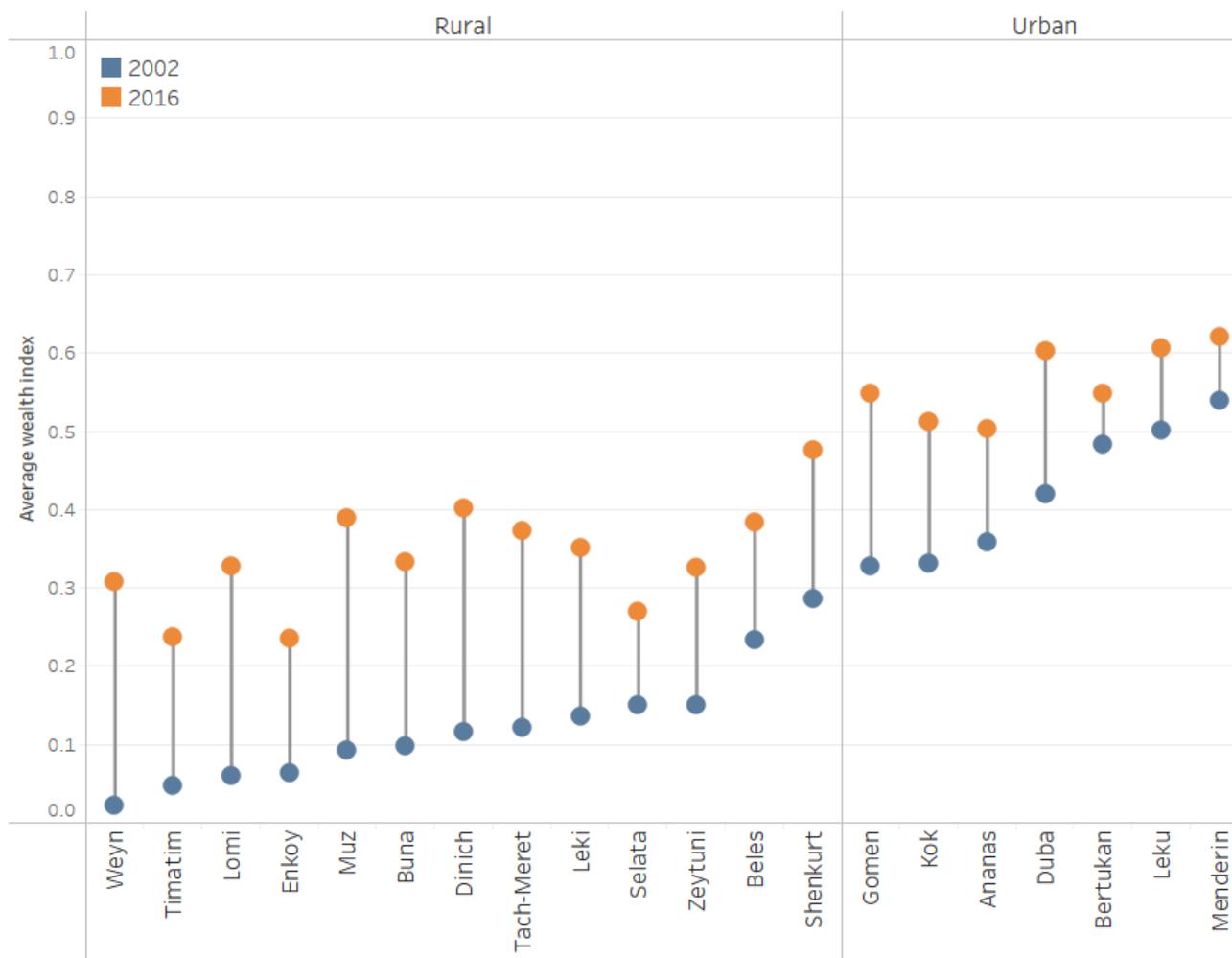
Young Lives children have grown up during a period of rapid economic, technological, social and policy transformation. Figure 1 provides an illustration of change in household wealth from Ethiopian study sites. It shows that while all households experienced some gain over the fifteen years of the study (Rounds 1 to 5), there remain clear differences both between the communities and between urban and rural areas. As the quote by Amira's mother illustrates, despite overall improvement, many households continue to lack improved sanitation which poses a threat to health (particularly for young children).

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“It is very sad to talk about our toilet. There is no toilet in the compound and near our house so we are supposed to walk 3-5 minutes and pay 0.25 cents to use one. This might be tolerable for adults but it is very difficult for children, so we are using a bed pan for them. The toilet is shared by many people.”

Amira's mother, from Menderin urban community in Ethiopia

Figure 1: Improving material conditions but ongoing differences facing children growing up in different communities – Ethiopia, 2002-2016



Note: The wealth index (score range 0-1) is a measure of absolute material circumstances, composed of housing conditions, basic service access and consumer durables. Community names are pseudonyms to protect identities.

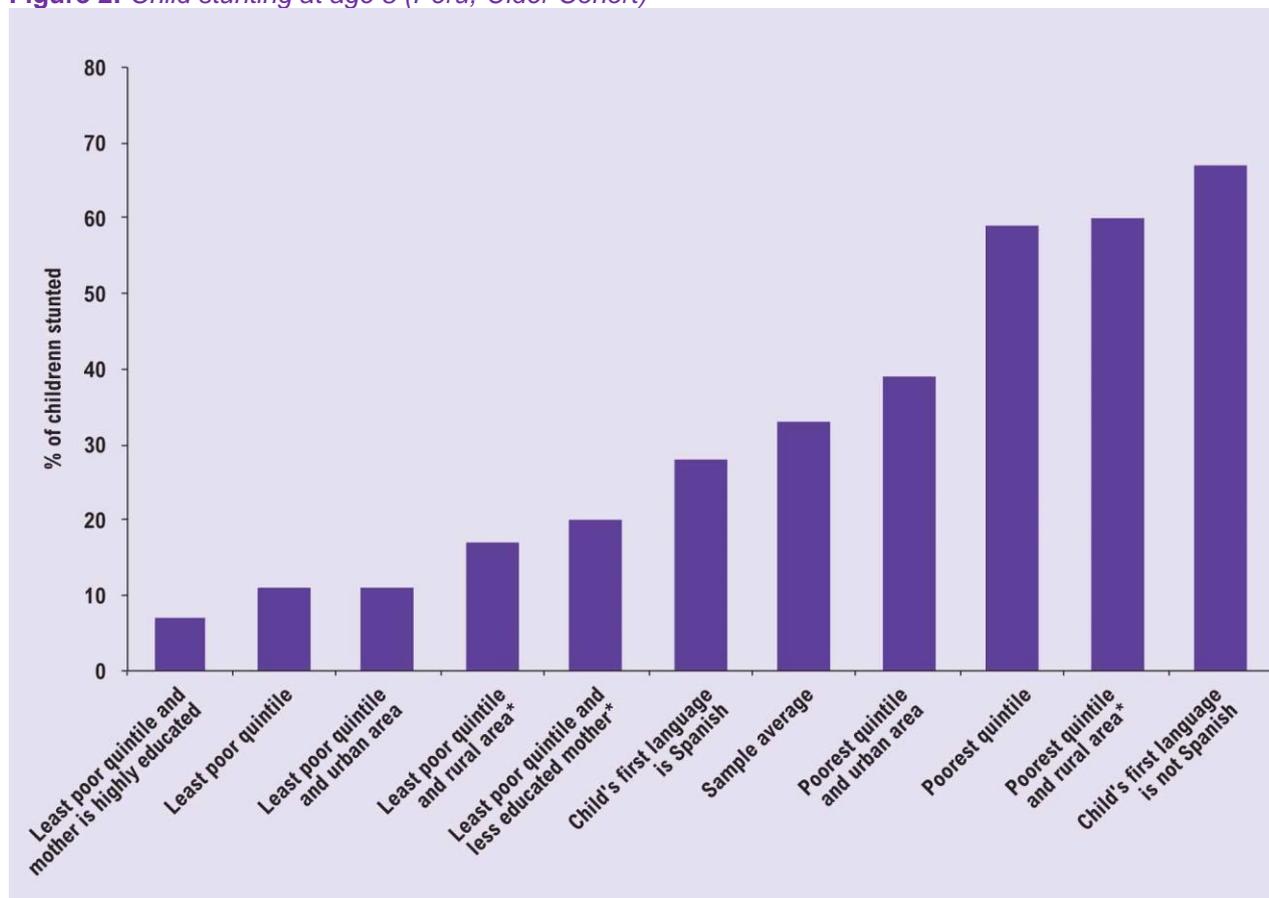
Growth stunting, particularly in early childhood, has significant impacts on cognitive development and children's abilities to learn in school. Young Lives children are taller than their parents, suggesting that health and nutrition has improved over the generations. The cross sequential design of the study, in which the Younger Cohort was enrolled at around one year of age and the Older Cohort at age eight, permits comparisons in growth status and possible reasons between the groups. We find that the Younger Cohort children were less likely to be stunted than their older counterparts. While the amount of improvement varied across the countries, the introduction of social protection programmes such as *Juntos* in Peru, and the Productive Safety Net Programme in Ethiopia, is likely to have benefited the Younger Cohort particularly.

Figure 2 summarises this evidence by indicating which children in Peru were stunted at age eight. As it shows, the poorest children, minority children whose mother tongue is not Spanish, and those in rural areas

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were much more likely to be stunted, with dramatic differences in the risks faced.

Figure 2: Child stunting at age 8 (Peru, Older Cohort)



Note: Stunting is defined as height for age > 2 Standard Deviations below the WHO norm.

In this way, Young Lives highlights that even with overall improvements in wealth, intersecting inequalities are clear. Those children most frequently left behind in their development outcomes (as illustrated in Figure 2) were those growing up in the poorest households; children in rural areas; children from marginalised ethnic, religious or language groups; and children with less educated parents. These are often the same children. The quotes from Rajesh, a Scheduled Tribe boy in India, below are illustrative.

“We faced some problems, they happened this year. There were floods and the fields were inundated. Heavy rains damaged the crops and everyone’s farmland was badly affected.” As a result, he says, “We were forced to buy rice and other things then from outside... Whatever little money we earned was spent on buying rice.”

The family’s situation has improved, as both Rajesh’s parents have been working as part of the Mahatma Gandhi National Rural Employment Guarantee social protection scheme. With the money earned, he says...]

“We bought clothes. I got money to buy notebooks. My sister is studying for a degree, and she will be studying the final year in the next year, so we were able to send her some money for her studies as she was in need of it.” He thinks that his family’s financial situation has improved, “all due to these government schemes, which provide us with work and wages.”

Rajesh, a Scheduled Tribe boy growing up in rural Andhra Pradesh, India

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Even though rural children tended to be consistently poorer and more disadvantaged than urban children, some risks to children are more prevalent in urban areas. A new and disturbing phenomenon observed in many countries is the increased rate of child and adolescent overweight and obesity. This was particularly evident among the Younger Cohort in Peru, India and Vietnam; the problem being greatest in adolescents and urban dwellers.

Access to schooling has improved. Young Lives children have had many more years of schooling than their parents. Again there is difference between the two cohorts, with greater proportions of the Younger Cohort enrolled. Significantly, more Younger Cohort girls in India are enrolled, most likely as a consequence of that country's Right to Education Act. One surprising finding from Young Lives was that during early and middle childhood, gender was generally less important as a source of disparity between children than other factors, such as household wealth or growing up in a rural or urban area. Where gender differences were apparent, they varied across developmental domains and boys were not always advantaged. Boys were more likely to be stunted in early and middle childhood but the difference had mostly disappeared by adolescence.

SDG 5 addresses gender equality. It focuses mainly on women and girls, and in many countries girls remain disadvantaged compared to boys. Young Lives findings show that this is not a uniform story. Whether boys or girls are advantaged depends on which aspect of their lives is under consideration and varies by age. Early marriage predominantly affects girls. However, there is little difference in school enrolment between Younger Cohort boys and girls. In fact, the enrolment gap between boys and girls is smaller than that between poorer and better off children. As far as school retention and performance is concerned, the countries vary. For example, in India, girls are systematically disadvantaged, while in Vietnam girls were actually doing better than boys.

What matters during the early and middle childhood phases?

Young Lives' particular strength lies in its ability to identify mechanisms that shape the various domains of children's development measured in the study. The concept of a development cascade (see Figure 4), drawn from the developmental psychology literature, can be used to understand how influences occurring during early phases of childhood can consolidate or disrupt the emergence of a particular attribute during later phases, such as receptive vocabulary in middle childhood or risk behaviour in adolescence. A cascade approach therefore recognises how each phase within childhood is foundational to the next and that different factors are important in each phase.

In this section we consider what Young Lives data are able to tell us about key factors that influence the emergence of particular outcomes within and across phases of childhood, adolescence and youth. Analysis of Young Lives evidence reinforces global concerns, as articulated for example in SDG 2 ('End hunger') and SDG 4 ('Quality education'), over the threats posed by undernutrition and lack of preschool services in early childhood.

Undernutrition and poor health can have serious long-term consequences for children's development, stunting growth and undermining cognitive development and learning. Few longitudinal studies have measured growth status from infancy through to young adulthood. Young Lives has measured height for age at each survey round to track stability and change in growth stunting over the life course. Rates of growth stunting in Younger Cohort infants (Round 1) ranged from two fifths of children in Ethiopia, to one in five in Vietnam. The poorest children were at between twice and three times the risk of being stunted compared to the least poor children. One source is at work well before birth: being born to younger mothers whose growth is stunted increases the chances of being stunted by 15 percentage points at 12 months, with the status persisting into early adolescence. Poverty is a central risk factor for early growth stunting, which is linked with disease (particularly diarrhoeal diseases), food insecurity and inadequate care. Across the Young Lives

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countries, early stunting (and chronic undernutrition) is associated with poorer performance on assessments of cognitive performance (language and mathematical abilities) in the school years. Early stunting is a key pathway through which poverty translates to disadvantaged later development.

The study has provided important new policy relevant evidence on children's growth. During middle childhood the study found that between a third and a half of children who were stunted at the age of five were no longer stunted at the age of eight. A smaller share (between 3 and 6 per cent) of children had faltered in their growth over the same period. For those who recovered normal growth, improvements in cognitive scores and school progression were also evident. Recovery in middle childhood may be supported by appropriate policy. For example, the Indian Midday Meal scheme was linked to physical recovery of Young Lives children in the early years of primary schooling. Supporting healthy growth both in early childhood and beyond is therefore important for effective learning and other aspects of development.

Stimulation and good care are also key to a healthy start in life. SDG 4.2 recognises this by seeking to give children access to one year of quality preschool by 2030. Data for Young Lives are necessarily dated as participation rates were assessed for a period when the children were young. The data indicates greater participation in some form of preschool programme by the Younger Cohort, except in Ethiopia where rates remained low. Education quality was a significant issue as illustrated in the following quote from Louam, in Ethiopia:

“There are no materials like footballs, or a handball net. There are not enough teachers. For example, in other schools one teacher teaches one subject in Grade 4, but here one teacher teaches all the subjects for one class. [Teachers] are not knowledgeable... We ask them questions, they tell us to work at home, and they get tired.”

Louam, a 13-year-old girl from Amhara, Ethiopia

Substantial progress has been made in Ethiopia with the introduction of their O Class (pre-Grade 1) programme, introduced after the Young Lives children would have been eligible. From 2010-11 to 2015-16, the Gross Enrolment Rate (GER) for all 4-6 year-olds in O Class rose from 5 to 50 per cent. The poorest children are least likely to participate.

Despite the challenges, where Young Lives children did attend preschool, participation has benefited later cognitive development in the primary school years. As preschool quality was not measured in the study, we cannot report on this important aspect (although we do make use of some related information).

SDG 4.1 is to ensure that 'all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes'. Quality should go beyond learning metrics and include safety, hygienic environments and relevance. By 8 years of age, most Young Lives children were in school but basic learning levels and grade progress were often low. At its most dramatic, in Ethiopia 55 per cent of children were overage for their grade by age 12 (and for the poorest children this was 81 per cent). That said, learning shortcomings in India and Peru, especially among the poorest children, are particularly worrying given that these countries are able to marshal far greater resources for education. In all contexts, where children were exposed to violence in school this undermined learning.

Across the study countries, it is evident that realisation of quality primary education is some way off. It was the poorest Young Lives children who typically had the least opportunities to learn due to poor schooling, inability of parents to support their education or to call schools to account and demands to contribute to their households through chores and work. Educational productivity can be used as an indicator of the quality of the system, and important differences during the primary school years were evident across the countries. Overall, by the end of middle childhood, children in Vietnam tended to be well ahead of children in other countries. For example, they had greater improvements in mathematics achievement test scores for each

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year of school than was the case for India and Peru. Analysis of what supports learning suggests the importance of strong foundational skills in the early grades, effective teaching, and ensuring the needs of the poorest children are met.

Minority ethnic children lagged behind other children in Vietnamese schools. Nevertheless, even in this respect Vietnam fared better than the other countries, as there was evidence of catch up in learning by disadvantaged minority children during primary schooling.

What matters during adolescence?

Adolescence is a time of considerable responsibility when many boys and girls grapple with combining education with paid and unpaid work, as well as care of younger siblings or incapacitated adults. Most Young Lives children remained in school during early adolescence, with between 80 per cent (Vietnam) and 97 per cent (Peru) of children enrolled at age fifteen. In adolescence, increasing numbers of both boys and girls were balancing economic and domestic care work alongside their studies.

Across the four countries the poorest children left school earlier than their wealthier counterparts, as boys were called upon to provide additional income for struggling families and girls were engaged in domestic tasks or got married.

As in the primary school years, concerns around the quality of the teaching and learning environment for realising educational achievement remained evident in the secondary school systems. But during adolescence there was also increasing questioning about the relevance of schooling for work. In some contexts, for example parts of Ethiopia and Vietnam, the returns to education diminished for boys as they passed through the teen years and sought to secure their futures economically. New risks were evident in the school context as girls were exposed to sexual violence and did not have access to gender appropriate toilets and other facilities. Both render the school environment unsafe and unsupportive to girls' education, as illustrated in the quote from Susan in Peru:

“I prefer to go to school in the morning, because in the afternoons it is more dangerous - when I come back it is darker. I mean it is dangerous – in the streets there is always danger – but in the morning it is not so dangerous. It is less likely that something happens to you [in the morning], but in the streets at night, there are more adult people, drunken people. I don't know, it is more dangerous.”

Susan, growing up in urban Lima

Addressing gender disparities and discrimination is crucial to SDG 5 and relevant policies often focus on changing gender norms and practice in adolescence in recognition that this life phase comprises a critical policy window. Young Lives has found that adolescence is also when gender begins to become far more prominent in shaping boys' and girls' trajectories through school and work, and other aspects of their lives. Likewise, it is when gender disparities grow. So, even though overall their levels of work were similar, adolescents were steered towards gender-stereotyped work, with boys far more likely to be engaged in paid work and girls to undertake care. Yet India was the only country with a systematic gender bias against girls among adolescents. In the case of dietary diversity, the pro-boy gap in India widened noticeably at the age of 15, with serious implications for girls in terms of nutrient adequacy and growth for both them and future offspring.

Efforts to empower adolescent girls and improve their circumstances often focus on specific practices. Marriage and parenthood during adolescence, especially before the age of 19, has long been a major concern. Globally, the prevalence and the health and social risks are far higher for girls than for boys. In

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Young Lives, the rates of early marriage and parenting were highest in India where 28 per cent of Older Cohort girls had married before the legal age of 18 years and 13 per cent had become a mother. Across the four countries, it was the poorest girls who married early. However, Young Lives findings show that when girls stay in school longer, they are less likely to marry and have children early.

Adolescence is also a time of extraordinary dynamism and change - biological, emotional and social. Young Lives longitudinal evidence highlights how the different transitions - including puberty, school departure, entry into full-time work, family formation - that shape the lives of young people, can be quite abrupt and may not align with each other.

This dynamism was evident even in young people's nutrition and growth. Recovery from early growth stunting was shown to occur during early adolescence in particular. However, while stunting was generally reducing, rates of overweight and obesity were increasing at this age and were particularly stark in Peru, where a quarter of the Younger Cohort was overweight or obese at 15 years old. In comparison with the Older Cohort, overweight rates were higher in Peru, India and Vietnam. It is probable that the rates will rise further in late adolescence as has been the case in the Older Cohort. Among the Older Cohort girls in Peru, those who were obese at age 8 were more likely to have experienced menarche by age 12, which in turn was associated with an increased prevalence of obesity at older ages. Risks to the future health of these children is evident, pointing to adolescence as a second crucial window for public health investments after early childhood to address the needs of the adolescent population and reduce risks to health and well-being in adulthood.

The Older Cohort were 22 years old in the fifth round and the majority were working. With the exception of Vietnam, more men than women were employed. However, being in work did not necessarily mean decent work. Commonly, employment benefits and contracts were lacking. Vietnam again provides an exception, with 62 per cent of paid employees having a contract (substantially higher than in the other countries). Between one in twenty (Vietnam) and one in five (India) were not in employment or studying. Many of these were young women with childcare responsibilities. Between a third (Ethiopia) and half (Vietnam) had completed some post-secondary level schooling or were still studying at the age of 22. Across the countries, young people who had grown up poor were the least likely to have achieved higher levels of education, and only about twenty per cent had had some form of work-linked vocational training, much of which was informal and did not lead to certification.

What mattered most?

The Young Lives longitudinal data allows us to explore what mattered most for children. New analysis of all five rounds of Younger Cohort household and child data has been used to study influences on development of children's maths and receptive vocabulary from early childhood through to early adolescence using Latent Growth Modelling in each country. A model of probable influences on these outcomes was developed based on the existing theory and research on the factors and pathways shaping children's development and then tested in each of the four countries.

Common findings across the four countries were then consolidated. The benefit of this approach is that we can summarise what mattered most for the development of these abilities across the five rounds of data and for all four countries. The fact that models from each country generated very similar patterns provides an unusually powerful cross-national validation of common influences and pathways for policy purposes.

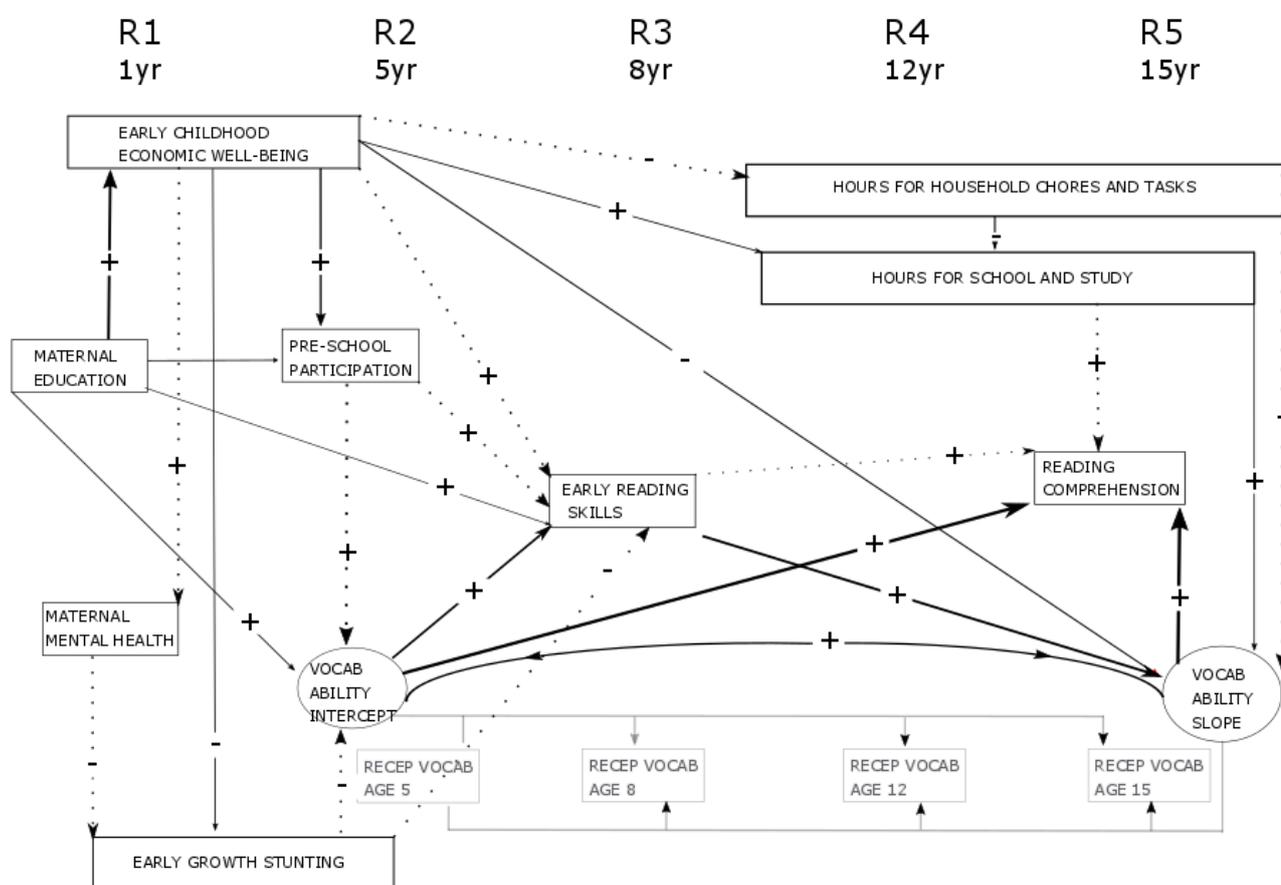
In the concluding section we bring these results together with synthesis of existing evidence (for example from the school surveys and information from the Older Cohort) with a broader development cascade map of how early factors shaped children's later development.

Pulling this together shows that the key factors included:

- **Household material situation in early childhood** (between 12 months and five years of age; termed 'economic wellbeing' in the model which focuses on wealth in early childhood, regarded as the key period) either advantages or places the young child at risk for developmental hazards such as illness and growth stunting. Improving material circumstances (including household access to basic services and social protection) would therefore be expected to improve a wider set of circumstances, with cumulative effects across the life course.
- Findings from two countries indicate that children whose **mothers show the risk of poor mental health** because of the stresses of poverty, are **more likely to be stunted in the early years**, and this impacts language, cognition, and numeracy skills across childhood. As has been observed in other studies, factoring in psychosocial aid to mothers with young children is an important contribution to both supporting mothers and reducing risks to children's development.
- **Preschool participation enhanced early skills development** and the growth in maths and receptive vocabulary over time. A range of both public and private programmes delivered by both professionals and community members were included in the modelling. Children in private facilities generally did better, suggesting better quality.
- Models for both mathematics and vocabulary indicate that children who **perform better on the tests in early childhood continue to stay ahead over time**. Some of the paths by which this happens can be seen: children from better-off homes get better early services (preschools) than their less well-off counterparts. Therefore, early intervention is likely to be particularly important for poorer children.
- **Disadvantages or advantages are reinforced in middle childhood and adolescence** by the extent to which children have to combine household and work responsibilities with schooling and studying. Findings from Young Lives and other studies confirm the positive contribution of children's activities in support of their families, but where these compromise schooling and study time these findings also show that children's academic development is placed at risk.

Figure 3 provides a consolidated summary model of influences on growth in receptive vocabulary drawn from the four countries. Please note that technical details are set out in a forthcoming working paper and sharable on request. The arrows show direction and +/- the positive or negative relationship between the variables. The thick lines are the most substantial effects. Dotted lines are relationships found in two countries, solid lines in at least three. The latent variables (at each point of measurement) are shown in the blocks between 'vocab ability intercept' and 'vocab ability slope'.

Figure 3: Identifying the main influences on the development of receptive vocabulary



Implications for policy and programming

We conclude by summarising the key findings from the synthesis of existing Young Lives evidence and the life course modelling. These are drawn together to create the development cascade in Figure 4, which summarises key factors at each phase of childhood and adolescence. We then move on to consider priorities. Figure 4 indicates that:

- The significance of nutrition and early care and quality preschool during **early childhood**. The Figure also draws attention to the importance of maternal physical and mental health, education and lack of exposure to violence. Social protection and basic services are relevant at each phase, but are likely to have particular role in setting a strong foundation during early childhood.
- During **middle childhood**, Figure 4 stresses the continued importance of healthy growth, but includes indicators of learning and school progression, also noting the importance of improving opportunities to learn in school and beyond. In terms of what supports children during this phase, the model notes the interventions that make a difference. In addition, ensuring that young children are ready for school, schools need to be ready for children, providing quality learning environments, and to make provision for children from very different backgrounds (such as those needing to work, or speaking a minority mother tongue).

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- During the **adolescence phase**, we continue to emphasise the importance of healthy growth, and add school completion, together with being equipped for further education. Again this stage suggests the importance of opportunities to learn, and also places continuing emphasis on ensuring safety and gender appropriate facilities and on the use of institutions (schools, and beyond) as platforms to deliver a broader set of activities and services which can support young people.

Figure 4: Development Cascade of Young Lives findings

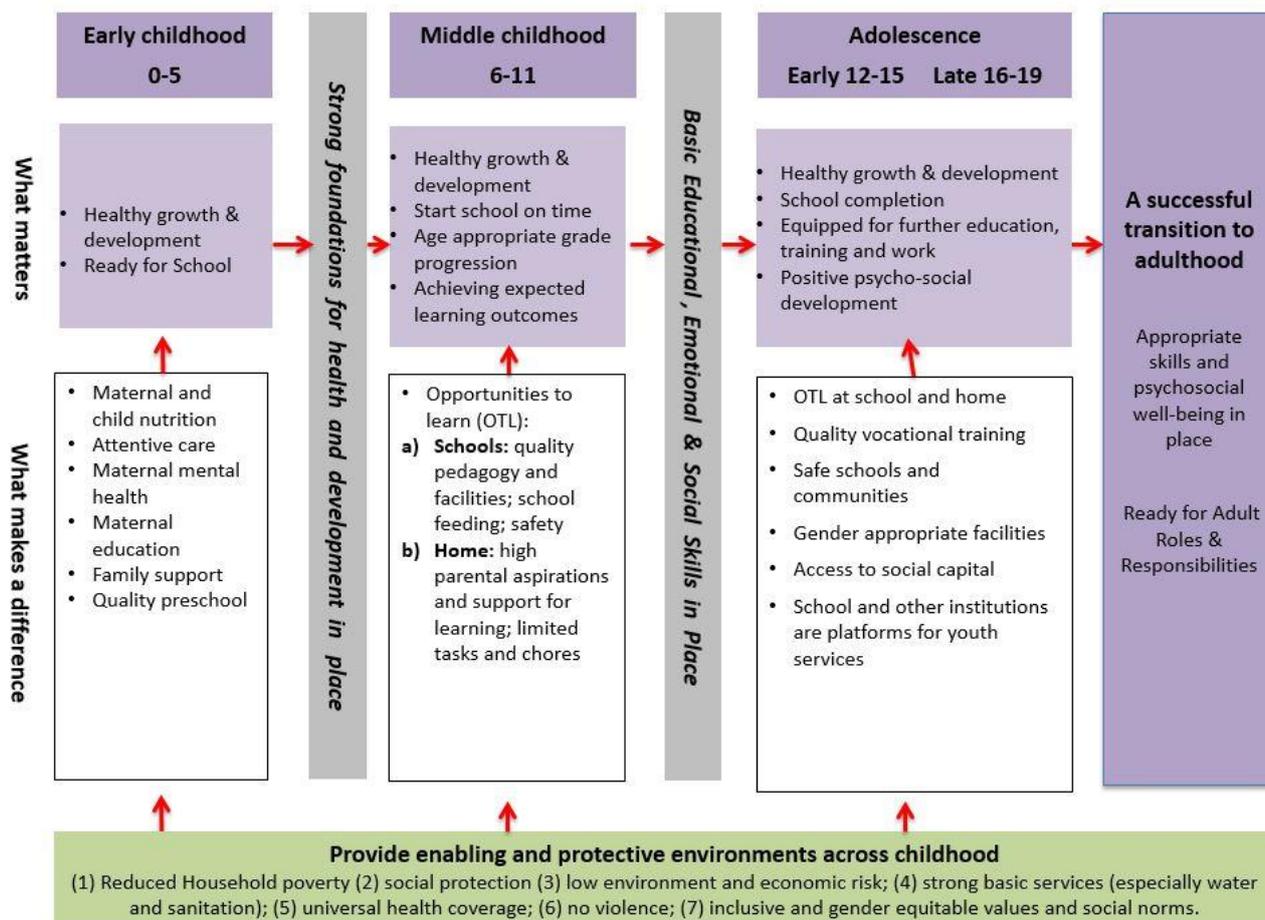


Figure 4 shows the many channels by which poverty in childhood wastes potential and undermines equality of opportunity. The reasons for the loss of potential are multidimensional and multisectoral. Our overarching question, however, is 'what can make the most difference?'. We move on to consider priority investments that are consistent with this longitudinal analysis.

Priority investments

At the highest level, Young Lives findings show that there are good priority investments but no single magic bullet. Investments across the life course can be best supported by a bedrock of strong sanitation and other basic services alongside poverty reduction measures. We emphasise four key priorities:

1. **Expand social protection across childhood and adolescence**, starting with the families with the youngest children. Many countries are seeing this as a key investment, but coverage often remains low. There is a growing literature of child sensitive and 'cash plus' approaches to social protection which highlights the learning about how to design interventions to maximise benefits. Progressive realisation of greater coverage of social protection measures (including universal health coverage) provides a

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foundation for the success of other interventions.

2. Start strong in early childhood. Good early circumstances have long-term consequences. Greater priority ought to be given to assuring safe and nurturing early environments. Supporting children means supporting mothers through interventions which can relieve the stresses they face. The growing wave of interest in preschool should be capitalised on and provides a means of increasing the effectiveness of basic education investments and skills development.

3. Support opportunities to learn basic skills in middle childhood. The school is central to modern childhood and provides an opportunity both for learning and a platform for delivery of other programmes. But often poor children have limited opportunities to learn basic skills: in teaching quality, the environment and the infrastructure of schools, and in the pressures they face beyond the school gates. Improving opportunities to learn is central to the development of universal basic skills and human potential. Vietnam's comparative success shows it can be done.

4. Capitalise on adolescence as the second policy window. There is rising recognition of the potential of adolescence as a policy window. The concerns of this group go beyond those focused upon in policy, for example sexual and reproductive health, and include effective schooling, healthy growth and friendships, and guaranteeing good opportunities for the future. The largest generation of young people ever is also perhaps the most optimistic. There is a significant challenge to deliver quality and relevant services, decent work and entrepreneurial opportunities for this group, but to do so is also to realise a huge opportunity.

Priority approaches

Clearly many governments will continue to face severe constraints on resources and capacity over the SDG period. But economies and awareness of needs have grown, creating space for investments in human development. Investments in children not only secure rights but also human capital and so are investments for the future of whole societies. We end by emphasising three approaches to the progressive realisation of better policies for children.

The first suggests that where choices are to be made between age groups, the most equitable solutions will **prioritise young children**. This is not to say that older phases of childhood and adolescence are not important, but from an equity and efficiency point of view, for example, if investments in the early years and in school are not sufficient, few will reach the highest stages of education.

The holistic nature of children's development and the many factors that shape their development and wellbeing call for better coordination across traditional sectors such as health, education, social protection. But there are **challenges over integrated delivery** and these need to be addressed with pragmatism. Where capacity is limited calls for service integration may be a step too far. Better to focus on achievable steps in this direction, ranging from national plans, supported by finance ministries to encourage synergies between service areas (for example the expansion of health services or school feeding in primary schools), and co-operation and colocation at a local level between schools, health facilities or other appropriate community infrastructure.

The third approach is effective monitoring to support quality. 'Quality' within public services is a touchstone for many governments and donors. **Quality requires resources (financial and people) and can also be supported by monitoring systems** which direct attention to how public services are benefiting the poorest children. The Young Lives school surveys consistently show large variations in the value which different schools add to learning within each country. Identifying and building on existing good practice within countries provides a road map to support achieving quality.

Young Lives summative outputs

This discussion paper draws on the analysis of a forthcoming book (*Tracing the Consequences of Child Poverty*). The book is part of a series that writes up findings from Young Lives so far, providing an overview focusing on Young Lives findings on childhood poverty and inequality.

Thematic reports

- *Adolescence; a second crucial window of opportunity to address child poverty* (forthcoming 2018)
- *Delivering on a right to basic skills: The organisation of school systems, educational opportunities and achievement* (forthcoming 2018)
- *Early is best but it's not always too late: Young Lives evidence on nutrition and growth in Ethiopia, India, Peru and Vietnam* (June 2018)
- *No longer children: What do Young Lives children do when they grow up? Transitions to post-secondary education and the labour market Labour market outcomes* (June 2018)
- *Responding to children's work: Evidence from the Young Lives study in Ethiopia, India, Peru and Vietnam* (February 2018)
- *Children's experiences of violence: Evidence from the Young Lives study in Ethiopia, India, Peru and Vietnam* (February 2018)

Country reports

- *Young Lives Ethiopia Lessons from Longitudinal Research with the children of the Millennium*
- *Reaching the last child: Evidence from Young Lives India*
- *What have we learned from the Young Lives study in Peru?*
- *Leaving no one behind in a growing Vietnam: The story from Young Lives*

What did Young Lives show? 10 key findings

- 1) Inequality undermines the development of human potential from before birth.
- 2) Early childhood development provides the best foundation for positive outcomes but quality services often exclude the poorest children.
- 3) The first 1,000 days of life are profoundly important but post-infancy physical recovery and faltering happen - later interventions also matter.
- 4) The dramatic rise in access to school has not translated into an equivalent increase in learning basic skills.
- 5) School makes a huge difference for learning but the poorest children often have the lowest opportunities to learn, in school and outside it. Schools can cause inequalities not only overcome them.
- 6) Violence undermines children's wellbeing, engagement with school and learning. Effective schools need to create safe environments.
- 7) Long hours and exploitative work undermine wellbeing and learning. But not all children's work is harmful. Some work can result in skills and contributions to families.
- 8) Gender disparities are not significant in early years' development outcomes, but expand with the onset of puberty. Boys are not always advantaged and gender is not always the most important predictor of life chances.
- 9) Adolescence is a time of significant change when disparities and opportunities open up, as such, it provides a second crucial window of intervention.
- 10) Caregivers and children have high aspirations for their futures and place great value on education. A failure to meet aspirations is not the result of a lack of hope.



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