The Young Lives study was designed to track children’s lives over the 15-year course of the MDGs across a range of low- and middle-income countries. Its aim is to shed light on the drivers and impacts of child poverty, and generate evidence to help policymakers design programmes that make a real difference to poor children and their families. The research team is following two groups of children – a younger cohort born in 2001-02, and an older cohort born in 1994-95. This means that we can compare the same children at different ages to see how their lives are changing, as well as different children at the same age, to see how their communities have changed over time.

Conducting the study simultaneously in four countries – Ethiopia, India (in Andhra Pradesh and Telangana), Peru and Vietnam – enables Young Lives to report on trends, explore how patterns are similar or different across those countries, and make comparisons that are relevant for other countries with similar circumstances. Cross-country evidence gives us greater confidence that findings from one country are applicable to others, but also shows how norms vary between countries, and what this means for children.

Intended from inception to be a policy-relevant study, the countries were selected in part because of the extent to which their governments were committed to poverty reduction, enabling us to track the effects of specific social policies over time. And because the children we follow are from a range of different social groups and ethnicities, living in both urban and rural contexts, we can see not only how social and economic factors interact, but how policies are experienced differently by children from different backgrounds.
Children of the Millennium

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Contents

About Young Lives 2

Introduction: Tracking the Children of the Millennium: 4

Poverty and Inequality: What has changed for Young Lives children? 5

Nutrition and Health
The poorest children are still waiting to see the benefits of progress on nutrition and health 8

Education and Learning
Increased enrolment and aspirations undermined by poor-quality schooling 14

Gender and Youth Transitions
Gender and poverty still weigh heavily on decisions made by young people and their families 19

Social Policies for Children
Well-designed social protection can support nutrition, health and education 25

The Data Revolution and Cohort Studies 31

Including Children in the Sustainable Development Agenda 34

References and Further Reading 37
Introduction

Tracking the Children of the Millennium: What Young Lives can tell us

Huge optimism surrounded the global commitment at the turn of the century to the Millennium Development Goals (MDGs), many of which relate to children and childhood, including ending poverty and hunger, expanding enrolment in primary education, and improving access to clean water and sanitation. If we can get things right at the start of a child’s life, the world agreed, we have a chance to stop poverty and inequality being passed down through the generations.

During 2015, we have been taking stock of the achievements and lessons learned since the adoption of the MDGs in 2000, in the run-up to the new Global Goals for Sustainable Development. There have been some important advances, with a reduction in childhood poverty and rise in essential services across many developing countries. In most, boys and girls are now attending primary school in equal numbers. However, average numbers cannot tell the whole story; the figures hide discrepancies between countries, as well as between children within countries, and gaps in quality and inclusiveness.

Using data gathered from 12,000 children and their families over the timeframe of the MDGs, and in children’s own words where possible, this short report from Young Lives looks beyond the ‘big data’ to see what has changed in the reality of children’s lives in the context of the shifts in national policy, priorities and outcomes associated with the MDGs.
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Poverty and Inequality: No One Left Behind

What has changed for Young Lives children?

Since 2000, the economic situation in all four Young Lives study countries has improved. According to the World Bank, between 1995 and 2010, per capita Gross National Income (GNI) grew by 91% in Ethiopia, 122% in India, 61% in Peru and 145% in Vietnam. And, using the MDG definition of poverty as the percentage of the population living on less than a dollar a day, overall levels of poverty have fallen in all four countries.

Most of the families in the Young Lives study are poor, or relatively poor. What has economic growth meant for them? On the whole, they have become less poor, despite the global financial crisis in the late 2000s and a widespread rise in food prices. During the past 15 years, there has been a pattern of generally rising living standards, with many families noticing improvements in their homes and communities. They now have greater access to consumer goods, and services such as electricity, safe water, sanitation and roads, though there have been smaller gains in housing quality. Overall levels of stunting – low height-for-age which is a sign of under-nutrition – have also fallen.

Louam, age 9, who lives in Ethiopia, feels her family’s situation has certainly improved. Her village has a new road, a new bridge, a school, a health centre and a church, and some people now have mobile phones, though her family does not. “We have built a kitchen and a toilet, so we no longer have to go outside,” Louam says. “We have tap water, but no power supply.”
However, as with the MDGs in general, progress for Young Lives families has been uneven. Often, it is the children from better-off families who have experienced the greater gains, so disadvantage is increasingly concentrated among the most marginalised children and inequalities are becoming entrenched. The poorest families, who have benefited least from economic growth, face the greatest risks, be these economic (such as food price rises that lead them to cut back on meals), environmental (such as droughts, that cause the harvests to fail), or health-related (such as repeated bouts of illness, leading to loss of earnings). And these are the families with the fewest resources to cope, throwing into sharp relief the need for social protection policies.

Hung is 17 and lives in rural Vietnam. A few years ago, his family lost its entire crop of oranges after a flood left them all rotten. Two years later, they lost their pigs to foot-and-mouth disease. “We had 45 pigs. They were very big and as long as a shoulder pole (yoke),” says Hung’s mother, who comes from a poor family of eight children. “I burst into tears when counting how little money we earned that year.”

Then, Hung’s brother, who has never been healthy, fell ill and needed surgery, which was both worrying and costly. Hung dropped out of school and started looking for a job, finally finding work with a construction company. He still has hopes for the future, but is reluctant to talk about them. “I’m afraid that if I talk about my dream, it would never come true,” he says. A cash transfer scheme or health insurance might have prevented Hung from leaving school and supported him to achieve his aspirations.

The gap between rich and poor is growing, but so too are the gaps between rural and urban areas, ethnic majority and ethnic minority children and between different caste groups in India. And in India the disparities between boys and girls remain. These different forms of inequality interact and intersect; the same children often face multiple disadvantages: on the basis of where they live, what ethnic group they come from, and whether they are girls or boys.

So, for example, we find that the poorest children in all four countries are as likely as ever to be stunted, and that the poorest children and those in rural areas are still the least likely to have access to safe water and sanitation. The same children are falling behind before they have even started school, and the rise in low-fee private education is serving to widen the gulf, and can exacerbate gender-based inequalities. The poorest children are the most likely to drop out of school after the age of 15, and girls from poor and rural families are the most likely to marry and have their first child while still in their teens.

The MDGs have been an important catalyst for change, prompting the introduction of many valuable pro-poor interventions and social policies, which have seen widespread gains in terms of nutrition, health and education. However, there is clearly still a long way to go to tackle the root causes of poverty and inequality; above all, for children, on whom future development and economic growth depend.

‘No one left behind’: Towards the Sustainable Development Goals

The Sustainable Development Goals (SDGs) agreed in September 2015 set out a plan of action for the world for the next 15 years. The new agenda builds on the MDGs, and seeks to complete what these did not achieve, particularly in reaching the most vulnerable. “As we embark on this collective journey, we pledge that no one will be left behind,” the commitment states. “We will endeavour to reach the furthest behind first.”
Findings from Young Lives countries suggest there are a number of key entry points in poor children’s lives that provide an opportunity for policymakers to do just that. Our longitudinal data enables us to track the dynamics of poverty, so we can see where it persists, and where – and how – it has lessened. Our central argument is that inclusive policies – or ‘leaving no child behind’ – are about enabling all children to reach their full development potential, with the lasting consequence of creating healthier adults and more productive and just societies, and breaking the intergenerational transmission of poverty.

**Millennium Children, Millennium Goals**

Young Lives is a long-term study of children across the world, led by researchers at the University of Oxford. By studying different aspects of children’s lives, we produce evidence that improves policies and programmes for young people everywhere.

We are following
12,000 children
from 4 countries
for 15 years

We looked at 4 areas of children’s lives:

- Stunted growth & under-nutrition
- Sanitation & clean water
- Education & learning
- Gender & adolescence

The UN’s Millennium Development Goals (MDGs) achieved headline-grabbing successes in these areas:

**MDG 1:**
to halve the proportion of the population suffering from hunger was almost achieved.

- 2000: 23%
- 2015: 13%

**MDG 2:**
for universal primary education was almost met. Net enrolment is

- 91% with almost all children enrolled in school at age 8.

**MDG 3:**
to eliminate the gender disparity in education:

- 2/3 of developing countries have achieved gender balance in primary schools

**MDG 7:**
to halve the proportion of the population with no access to improved drinking water. achieved in 2010:

- 5 years early

But these improvements are not being felt equally, and there are huge disparities among and within countries. Some groups are much less likely to see the benefits of these improvements:

1. **CHILDREN FROM THE POOREST BACKGROUNDS**
2. **CHILDREN IN RURAL AREAS**
3. **CHILDREN FROM MARGINALISED ETHNIC GROUPS**
4. **GIRLS ARE SOMETIMES, THOUGH NOT ALWAYS, DISADVANTAGED**
Nutrition and Health

“Food shortage means I go to school hungry”: The poorest children are still waiting to see the benefits of progress on nutrition and health

Children born in Young Lives countries today are less likely than their predecessors to be stunted, and more likely to have access to clean water and sanitation. However, the poorest children are as likely to suffer stunting as they were 15 years ago, and are increasingly disadvantaged relative to other children.

Good nutrition and health are fundamental to children’s chances of achieving their full potential in life. With growing evidence from Young Lives and other studies that recovery from stunting is possible, we need a focus on both early and sustained interventions to ensure these foundations are in place throughout even the poorest child’s formative years.
Key findings

- While overall levels of stunting have fallen, across our four study countries the poorest children are as likely to be stunted as ever. The problem is increasingly concentrated among the most marginalised children, with implications for their cognitive development, health, performance at school and social and emotional well-being.

- Some children are able to recover from early stunting while others falter in their growth after infancy. Poorer children are more likely to see a dip in their physical development, while better-off children are more likely to recover after a shaky start, so the gulf between them widens even more as they grow up.

- Young Lives children have seen positive changes in their communities, including the provision of services such as clean water, sanitation and healthcare. However, poorer households and those in rural areas are still less likely to have access to these services, and continue to be at risk of recurrent illness as a result, deepening their vulnerability and the fragility of their livelihoods.

Food security and economic shocks

The MDG1 target of halving the proportion of people suffering from hunger was almost achieved; it fell from 23.3% in 1990 to 12.9% in 2015. However, while Young Lives saw overall levels of stunting fall, the poorest children are as likely as ever to show the signs of this proxy for under-nutrition. In India, for example, the poorest 40% of children have seen no improvement at all in levels of stunting since 2000, despite a doubling of GDP in India, highlighting the need for pro-poor interventions to tackle entrenched inequalities.

The poorest children live in households that are also the most vulnerable to food price increases, and the global economic downturn in 2008 led to food insecurity for many Young Lives families. At the peak of the crisis in 2009, a massive 88% of the children in the younger cohort in Ethiopia were in households that had experienced food price inflation during the previous three years.

Such shocks can push families into poverty and threaten children’s nutrition (see box, ‘Bertukan and the impact of food price increases’), underlining the key role of social protection programmes in providing a safety net. The father of one Young Lives boy, Tufa, who lives in rural Ethiopia, thinks that life for his children is harder than it was for him as a child. “Though my family was not that rich, there was enough food for everybody. Neighbours would share,” he says. “But children these days do not have enough food even to satisfy their basic needs.”
CASE STUDY

“Sometimes the children have to miss breakfast or lunch”: Bertukan and the impact of food price increases

Bertukan is a community in the heart of urban Addis Ababa in Ethiopia. The population of about 14,000 is mixed in terms of ethnicity and religion, and there are a large number of female-headed households. The community is located close to a major fruit and vegetable market and within walking distance of the city’s main general market. Most households rely on informal-sector activity such as street vending, transporting goods and selling food and drink.

Sharp increases in food prices affected 56% of families in Bertukan ‘very much’, with poorer households hit particularly badly and only 3% not affected at all. Coping strategies employed include reduced food consumption (among 37% of households), taking on additional work (20%) and reducing food quality (18%).

“Earlier we would eat meat twice or three times a week, but now we eat it once in a week or once in two weeks,” says the brother of one of our study children.

Nutrition and learning

Children who experience food shortages or malnutrition while they are young continue to see effects on their development during middle and later childhood, when they are significantly less likely than their peers to have a healthy body mass index for their age. There is also a well-known link between malnutrition and other aspects of a child’s development; Young Lives children in India who were stunted at 1 year old went on to show lower levels of cognitive ability in tests we administered at age 5, and those who showed signs of stunting at 8 had lower reading, writing and mathematical skills when they reached the age of 12.

“Food shortage means I go to school hungry. I cannot properly concentrate in class if I am hungry, so it affects my schooling,” says 14-year-old Kassaya, who lives in rural Amhara in Ethiopia.

Children who experience early stunting also show lower levels of well-being in later life. We found that those who at 8 had a low height for their age were likely to be less self-confident when they reached the age of 12, and to have lower self-esteem and educational aspirations, which translates into lower school achievement.

Teje is a 9-year-old girl living in urban Ethiopia whose family fell into poverty after her father became ill and was unable to work. She, her four siblings and their parents – who all live in one room – now rely mainly on her mother’s income, and food-price inflation has made matters worse. “Sometimes the children have to miss breakfast or lunch,” Teje’s mother tells us. “(Before), they would at least eat bread for breakfast. I used to buy 30 or 40 kilos of teff (a type of flour) but now I can only afford to buy 25 kilos and it doesn’t even last a month.” A school-feeding programme could potentially have supported Teje’s nutrition and that of her siblings after her father became ill.
Catch-up growth and faltering

Tracking our cohorts of Young Lives children since 2002 has enabled us to identify that ‘catch-up growth’ may be possible for some children, reversing stunting that occurred in the first two years of life. This finding has also been found in other datasets gathered from children in other countries (e.g. the Cebu health study in the Philippines), highlighting the importance not just of prevention but of remedial policies which support children’s nutrition throughout the early years and into middle childhood.

Some children in all four of our focus countries have been able to recover from stunting while others, often the poorest children, have faltered in their growth. Half of children in Ethiopia who were stunted at the age of 1 were no longer stunted when they reached the age of 5, but one in five children in India who were not stunted at age 1 were showing signs of stunting by the time they were 5.

Children who recover physically from stunting at an early age may also show improvements in other aspects of their development. Young Lives children in Peru who were stunted at age 1 but who appeared to have recovered when they reached the age of 5 had similar scores in cognitive and vocabulary tests to children who had never been stunted.

This potential for catch-up has important implications for public policy. While tackling poor nutrition in early childhood remains the key priority and the most efficient form of intervention, there is growing evidence that nutritional deprivation at birth can be at least partially compensated for if circumstances in later childhood are improved; for example through school-feeding programmes (see box, ‘Deepak and the Midday Meal Scheme’).

CASE STUDY

“The food is nice and school is good”: Deepak and the Midday Meal Scheme

Deepak is about 8 (he’s not quite sure). He belongs to one of India’s indigenous tribal groups, and lives in a remote rural community in Andhra Pradesh. His mother died in childbirth, and his father is a day labourer who is often away.

When we interviewed him when he was 6, Deepak was helping his older half-brother look after their two younger sisters, with the help of his grandmother. His health wasn’t good, he was very thin, and he often skipped classes at the local school he attended.

Now Deepak is boarding at a boys’ hostel, which is free because his family is poor. He says he has five good friends in his class of 54 children, and that he is studying well and is happy. “I like my school now,” he says. “I mix with others well. The food is nice and the school is good.”

Deepak benefits from India’s Midday Meal Scheme, which aims to improve levels of nutrition and increase enrolment, retention and attendance rates. An estimated 139 million primary school children across the country receive a cooked lunch intended to provide 450 calories and 12g of protein.

The scheme appears to have had significant impacts on both nutrition and learning, with children aged 4 to 5 taller and heavier than might otherwise be expected, and children aged 11 to 12 showing signs of improved learning.
Children of the Millennium

**Stunted growth and under-nutrition**

Poor nutrition in infancy and childhood can affect someone’s whole life. It can lead to stunted growth, which is linked to poor cognitive development and lower well-being later in life.

1 in 3 of the poorest children suffer stunted growth.

2 in 5 of the poorest children suffer stunted growth.

In general, children from poor, rural, and ethnic minority backgrounds are still at significantly higher risk of stunted growth.

Stunted growth and under-nutrition

**Ethiopia**

- Rates of stunted growth in 12-year-olds have not improved.
- 30% in 2006 vs. 29% in 2012.

**Peru**

- Rates of stunted growth in 12-year-olds have decreased.
- 40% in 2006 vs. 21% in 2013.

**Vietnam**

- The poorest children, and those from ethnic minorities, still suffer the worst rates of stunted growth.

- 52% of the poorest children were classed as thin or underweight in 2013 vs. more than in 2006.
- 52% in 2006 vs. 14% in 2013.

**India**

- 2013 data
- 1/3 of 12-year-olds were classed as thin or underweight in 2013.
- 21% in 2006 vs. 14% in 2013.

But there was a 5% improvement in the overall rate.

**Water and sanitation**

The MDG7 target of halving the proportion of people without access to improved drinking water was achieved five years early, in 2010, and 2.1 billion people have gained access to improved sanitation since 1990.

In general, children across Young Lives countries are now more likely to have access to safe drinking water and sanitation, including in poorer communities. In Vietnam, for example, few of the ethnic minority families in our study had access to safe drinking water in 2002, but now nearly two-thirds of them do. In India, almost all Young Lives children now have access to clean water, and in Ethiopia, children are nearly three times as likely to have access to safe sanitation.

As with other services, however, the poorest children and those in rural areas are still those least likely to be enjoying the benefits of the increased provision. Almost a quarter of children in rural areas of Vietnam still don’t have access to clean water, and 50% of poor families don’t have access to sanitation. This leaves them vulnerable to the spread of infectious diseases, which in turn can affect children’s nutritional status and their participation in school.

Nine-year-old Y Sinh and his family are from the H’Roi ethnic minority in Vietnam, and live in a small house on stilts in a rural community. They and their neighbours are very poor, and mostly use water from a public well, bathing and washing their clothes in a stream. Y Sinh’s mother depends on Y Sinh to support the family by working for money, because her husband rarely comes home and she suffers from poor health.

“When I was tired and could not cut more canes… I was sick… Y Sinh took a sickle and went to cut sugar cane… He cut 69 bundles of sugar cane in two days,” she says. “I rely on Y Sinh. If I didn’t have him, I would die.”
Access to clean water and sanitation is not only crucial for children’s healthy development and well-being, but plays an important role in reducing the burden of disease and malnutrition. Ensuring access for all children, including those in rural areas and from marginalised groups, together with food of adequate quantity and quality, is a vital part of ensuring children have the foundations they need to reach their potential.
“Education is necessary for everyone”: Increased enrolment and aspirations undermined by poor-quality schooling

Young Lives children are now almost all enrolled in school, and have high hopes for their education, but their aspirations are being undermined by the poor quality of many schools, which too often works to reinforce existing inequalities.

Many children from poor households help their families by assisting with domestic chores, working in a family enterprise or farm, or doing paid work for someone else. This can affect their concentration in school and their attendance – but sometimes children’s earnings make it possible for them, or a sibling, to go to school as they can be used to buy books or uniforms, or pay for transport to school.

Pro-poor early childhood interventions are key to prevent the poorest children from falling behind, while a carefully designed curriculum, high-quality teaching and a focus on the whole class may help to deliver more equitable outcomes at school.
Key findings

- Almost all Young Lives children have been enrolled in school and their aspirations for education are soaring, but this has not been reflected by a rise in learning; an 8-year-old child today is no more likely to be able to read, write or answer a simple maths question than an 8-year-old in 2002.

- Poorer children and those in rural areas have already fallen behind by the time they start school, and even those who perform well at 5 drop back by the age of 8. However, evidence from Vietnam suggests that carefully targeted, good-quality teaching can narrow achievement gaps and deliver more equitable outcomes for poorer children.

- The availability of low-fee private schools is increasing rapidly, especially in India, and, disillusioned with the quality and effectiveness of government schools, even some of the poorest families are now finding a way to meet the costs of these schools, often choosing to invest scarce resources in educating boys rather than girls.

Enrolment and the quality of education

The MDG2 target of achieving universal primary education was almost met, with the net enrolment rate rising to 91% in 2015. Policies associated with this drive saw a big increase in access to schooling in Young Lives countries, with almost all children enrolled at age 8. And across the four countries, children and their parents now have high hopes that education will provide a route out of poverty - the single most striking intergenerational change we have seen.

Sadly, though, in Young Lives countries, increased school enrolment has not been met by improvements in education effectiveness and relevance; the quality of formal schooling remains poor and uneven, leading to a mismatch between children’s aspirations and the learning levels they actually achieve.

A large number of children are completing primary school without being able to perform basic tasks. Strikingly, an 8-year-old child today is no more likely to be able to read, write or answer a simple maths question than an 8-year-old in 2002. In Ethiopia and India we see evidence that learning has actually declined; fewer 12-year-olds in Ethiopia were able to answer our maths questions correctly in 2013 than had been the case in 2006.

The MDG2 target of universal enrolment is now recognised as only the first step towards the more ambitious goal of 'Learning for All', which places considerable emphasis on both equity and quality in education. Better-quality, well-resourced and well-managed school systems are needed to translate increases in enrolment and high educational aspirations into realistic opportunities for young people.

Education and inequalities

Rather than providing opportunities for all, too often education works to reinforce existing inequalities. The poorest children, those in rural areas and from marginalised social groups, are being consistently 'left behind' through a combination of differential access to pre-school education and primary school; infrequent attendance; early drop-out; and poor quality teaching.
Poorer children and those in rural areas have already fallen behind by the age of 5, hindered by a lack of opportunities to learn. Parents and children who require most support are often doubly disadvantaged: by the poverty of their circumstances, and by difficulties in accessing good-quality early childhood programmes. Minority groups are especially at risk because of language and cultural barriers.

In Peru, for example, many children from indigenous groups don’t have access to bilingual education, and the schools they attend are often poorly equipped and resourced, with negative effects on their learning. Like other indigenous children, Manuel, whose family is Quechua-speaking, is older than the usual age for his school grade. Now 16, he lives in a rural area of the Andes, and has missed a lot of school through picking coffee in the rainforest with his father. Quechua children are only half as likely to finish secondary school as their Spanish-speaking peers.

Even those children from poorer families who perform well at the age of 5 drop back by the age of 8, while their less-able – but, crucially, less-poor – peers catch up or overtake them. In addition to household wealth, these gaps in school performance relate to differences in urban and rural provision and resources, as well as levels of parental education. The MDG push to increase enrolment means that many poorer children are the first generation of learners in their family.

The importance of this last factor is illustrated by the experience of Shanmuka Priya, 8. She lives in rural Telangana with her mother, who never learned to read, and her father, who dropped out of school at the age of 10. Shanmuka Priya likes to learn and is now in fourth grade at the local school, but says she struggles with her homework. “No one helps me,” she says. “No one in my house knows how to write.”

There is some good news, however. Marginalised children in Vietnam appear to be learning at a faster rate than majority groups, and are therefore narrowing the gaps in achievement. The Vietnamese school system focuses on teaching a carefully targeted curriculum to the class as a whole, and standardising qualification levels for teachers. These could be important lessons for the battle to address inequalities within education (see section on policies for children, below).

Education aspirations and the rise of private schooling

Parents have high hopes that education will enable their children to make a better life for themselves and escape poverty. Disillusionment with the quality and effectiveness of government schools is fuelling the demand for low-fee private schooling, most notably in India. In Andhra Pradesh and Telangana, an 8-year-old is now nearly twice as likely to be enrolled in a low-cost private school as seven years ago, as many families, even some of the poorest (and increasing numbers of rural families), vote with their feet.

While evidence on whether children can expect better outcomes at these schools is mixed, the trend has long-term implications for equity. Unsurprisingly, the children least likely to be able to attend a low-cost private school are those from the poorest households, rural communities, and ethnic minority or low-caste groups, and those with low levels of parental education.

With parents often choosing to invest limited resources in boys’ education rather than in girls’, choices about type of school are also increasing gender-based inequalities (see box, Aspirations for education in Peru). The parents of Shanmuka Priya (above) send her
younger brother to a private school and want him to go on to higher education, while they expect her to go to the village school but only up to Grade 10.

The direct, indirect and opportunity costs of putting a child through private school can be a major burden for families, and one with no guarantee of a return on their investment. When children are unable to fulfil the high expectations placed on them – either through failing to meet anticipated learning achievements, or by being unable to find secure, well-paid work when they enter the job market - parents can be left disappointed and children experience a deep sense of failure.

Atilio, a boy in Peru, left the school his mother sent him to in the provincial capital and migrated to Lima, where he now works in the market selling food. His mother, who had hoped that he would get a good job, feels that her efforts to secure his education were wasted, and that he will end up back in the community he grew up in. “All his life, he will suffer in the fields,” she says.

This underlines the importance of ensuring that the rise in school attendance and aspirations is matched, not only by better teaching and better resourced schools, but also an improved curriculum, so that the skills children learn at school are those that will equip them for the future.

**CASE STUDY**

“We’re not going to suffer like this in the mud”: aspirations for education in Peru

Fifteen-year-old Marta lives in Andahuaylas, a Quechua community in the southern highlands of Peru. The community is mainly reliant on agriculture, and the overriding desire of parents is that their children should escape farm work, which they associate with suffering and hardship, and instead have the opportunity to pursue higher education and become professionals.

Marta attends the local secondary school, while her brothers go to school in the provincial capital, where the quality of education is perceived to be better. Marta's mother struggles to cover the indirect costs of her children's schooling, particularly transport and accommodation costs for her sons, and says she can't afford to send all her children to the same school. “Sometimes I can’t make ends meet, and so I sell my cows,” she says.

Marta nevertheless hopes that she can pursue further studies and one day become a nurse. She tells her mother: “We’re not going to suffer like this in the mud… it’s better that I go and study.”

Despite her aspirations, Marta is acutely aware that her future is uncertain, and therefore views secondary school as serving a dual purpose: to enable her to progress to further studies, but also to equip her with the skills to generate an income selling agricultural produce if her hopes are not realised.
High enrolment rates can mask slow progress

Simple enrolment rates can mask slow progression through school. In India, for example, of the 49% of 19-year-olds still enrolled, one in five of these had still not completed secondary school.

Ethiopia shows high rates of retention in education, with 59% of young people still studying at 19, but there is considerable evidence that many of them started school late and had been delayed in their progression through school. By the age of 19, young people who had enrolled on time (at age 7) and then completed one school grade each year would have reached Grade 12. In fact, one in five young people who were still in school had not passed Grade 8 by the age of 19, and a further third had not passed Grade 10.

Ethiopia

Standards are falling:

1.2 x 4 = ?
Fewer 12-year-olds in 2013 could answer this question correctly than could the 12-year-olds of 2006.

83% > 71%
2006 2013

59% of 19-year-olds still enrolled but;
1 in 3 had not passed Grade 10.
1 in 5 had not passed Grade 8.

India

49% of 19-year-olds still enrolled but;
1 in 5 of these had not completed secondary school.

41% < 65%
Scheduled castes Other castes

Peru

Over-age children
In class is a persistent problem. It correlates strongly with maternal education, poverty, and urban/rural divides.

26% < 46%
Public school, urban Public school, rural

Young people from poor backgrounds or from scheduled tribes or castes, and young women, are far less likely to be in education or training at age 19.

Vietnam

Parental education
Correlates with the greatest educational gaps for 19-year-olds. Percentage of 19-year-olds still in education, by parent’s level of education:

74% > 16%
> 9 years education No education

Young people from ethnic minorities, those from rural areas, and boys are also more likely to leave education.

Almost all 8-year-olds in Young Lives countries are enrolled in school.

But the quality of education hasn’t improved, and learning levels have actually declined in Ethiopia and India.

And late entry into education and slow progress through school are common problems in all 4 countries.

MDG 2 aimed for universal primary education, as a vital tool to improve children’s life chances and aspirations.
Gender and Youth Transitions

“Why spend money on a girl’s education?”: Gender and poverty still weigh heavily on decisions made by young people and their families

Gender parity in primary school enrolment has been achieved in many countries, but gender differences widen during adolescence. To prevent poorer children, and especially girls, leaving school early, they and their parents need to see the benefits through increased job opportunities; measures to combat perceived risks for girls around continued education; and support in meeting challenges young people commonly face, including illness and violence.
Key findings

- Gender becomes a more significant factor during adolescence, affecting boys and girls in different ways at different times, as decisions about education, work, marriage and fertility are shaped by their own, their family’s and their community’s perceptions around risks and opportunities.

- Despite the high aspirations for education held by all young people, marked differences in school enrolment emerge in early and middle adolescence, with the poorest children most likely to leave by the age of 15. Decisions to leave school early are often influenced by pressures to work and contribute to the household economy.

- The decline in rates of early marriage and adolescent fertility remains slow. Girls from poorer households and rural areas are most likely to marry or have their first child at a young age.

Gender and adolescence

The drive to meet the MDG3 target of eliminating gender disparities in education by the end of 2015 has led to around two-thirds of developing countries achieving gender balance in primary schools. In Young Lives countries, the chances of girls and boys aged 3-5 accessing pre-school education are almost equal; levels of household wealth are a much more significant factor than gender.

However, gender differences widen during later childhood and adolescence, particularly in the transition from primary to secondary school, and by the age of 12, girls and boys already have different aspirations for education: hopes are higher among girls in Peru and Vietnam, and among boys in Ethiopia and India.

Gender differences are amplified by the increasing pressure to work felt by older children from poor families: boys typically spend more time doing unpaid work on the family farm or business, while girls spend more time caring for others and on domestic tasks. In Ethiopia, Peru and Vietnam, poor boys are more likely than poor girls to drop out of school by the age of 15, possibly because of the higher wage-earning potential they enjoy.

In India, parents still have markedly lower aspirations for their daughters than their sons at the age of 12. By the age of 15, girls also have lower ambitions for themselves. The mother of Shanmuka Priya, for example, explains the differential treatment of her son and daughter by saying that most people in the village will make sure their sons stay on at school because they will look after them when they are old, while the girls leave for their husband’s family.

“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?’” says Shanmuka Priya’s father. “They also say: ‘Since we can’t benefit, why spend money on a girl’s education?’”

However, while girls in India are significantly less likely to be studying than boys at the age of 19, the opposite is true in Vietnam, where boys are more likely to be working to contribute to the family income. And in Peru, the poorest girls have the lowest rate of enrolment, while girls from better-off families have the highest, underlining the importance of looking at how gender and other factors interact.
Household incentives for investing scarce resources in particular children are shaped not only by perceptions of opportunities, but by perceived risks. Secondary schools may be seen as presenting a more threatening environment for girls than primary schools, and longer journeys from home may lead to fears of assault.

In India, for example, sending a girl out of the village to study can be seen as a social risk, because of fears that others will question her reputation and she may be unable to marry. Harika, 16, lives in a village but had to go to the city to continue her education after completing Grade 10, and is now staying at a girls’ boarding hostel (see box, “You get better jobs if you study”). “If I had gone alone, I would not have stayed there,” she says. “Because I went with my friends, we could support each other.”

The message for policymakers seeking to encourage girls to stay in school for longer is to consider not only increased livelihood options for women, but a safer school environment and journey to school.

**CASE STUDY**

**“You get better jobs if you study”: Harika’s plan to be a doctor**

16-year-old Harika used to work in the cotton fields of Andhra Pradesh when she was younger to support her family, but the work affected her health and she often missed school. As the only daughter, she also shared the housework with her mother, while her younger brother did not have to do any household chores.

Since then, Harika has persuaded her parents to let her go back to school. It wasn’t easy, but she is determined to continue her studies and wants to be a doctor. “You get better jobs if you study and you have a better life and can marry an educated husband,” she says. “We see our parents working and we feel that we do not want to be like them.”

Harika is the first girl in the family to be educated up to Grade 10, and now attends a girls’ boarding hostel in the city. Her mother did not go to school, and worries about the cost. “We wanted to stop her going on to further studies because we didn’t have the money,” she says. “Girls don’t go (to school) here.”

Despite this, Harika’s family has said that she will not get married for four or five years because she is studying, and her mother is clear that it is Harika who will decide whether she wants to continue with her education.

**Education or employment?**

For Young Lives children, attending school does not replace the need to contribute to the household or farm, or do paid work, especially in the contexts of poverty, weak school systems and uncertain future opportunities, and many children balance both. This generation of children is negotiating schooling and raised expectations for the future of their families as a whole, while at the same time maintaining their traditional working roles and contributions to the household.

Children whose families experience multiple, recurrent shocks and the persistence of poverty may take on extra responsibilities, leading to repeated or prolonged absences
from school that affect their learning. Family illness and parental death also trigger patchy attendance and slow progression, and children in Ethiopia are particularly at risk, as their families are ill more often than those in other Young Lives countries.

At 14, Haymanot from rural Tigray, was attending school in the afternoon and working on the government’s Productive Safety Net Programme in the morning with her sister, as her mother was too sick to work. However, Haymanot’s sister also became ill, and a combination of famine, drought and sickness ran down the household assets, with the result that Haymanot dropped out of school in Grade 5. She was sorry to leave, as she had been winning awards for her performance, but was herself suffering repeated bouts of malaria, diarrhoea, vomiting and fever at the time, exacerbated by her work in a stone-crushing factory.

Illness is both a cause and a consequence of poverty, triggered by poor living environments and exacerbated by the indirect and direct costs of being ill. To support affected children to remain in school, governments need to ensure adequate social protection measures are in place to help families cope with shocks, and should consider introducing free health insurance for poorer families (see section on social policies, below).

How children experience poverty and inequality may itself affect whether they remain in school. Young Lives children display an acute awareness of their relative disadvantage; what they often find most distressing is the sense of shame that comes with ‘not having’ or ‘not fitting in’.

Bereket, a 16-year-old orphan in Ethiopia, finds it difficult at school when the other pupils come in wearing better clothes. “I don’t like to feel inferior to them,” he says. He used to hope that education would help him change his life, but now, disillusioned and determined to earn some money to improve his situation, he is focused on his job washing cars. This underlines again the need for better quality education, and a boost in employment opportunities to match it.

As children become older, the opportunity costs of schooling rise; children’s ability to support household livelihoods increases; and gaps in school enrolment rates widen, with the steepest decline seen among the poorest children after the age of 15. At 19, it is the least-poor young people, those whose parents had higher levels of education, and those growing up in urban areas who are most likely to remain at school.

Policymakers seeking to change this should consider introducing poverty reduction or social protection schemes to reduce the financial need for children to work. Creating more flexible school systems that could accommodate the range of challenges and responsibilities faced by poorer children; for example through half-day schooling, or terms arranged around harvest times would acknowledge the reality and help children to stay in school. In contexts where schooling is unlikely to transform employment opportunities, combining the formal curriculum with life-skills and technical training may also help school retention.

**Child protection**

Violence remains a feature of many children’s lives, despite national and international attempts to reduce it both within the home and at school. Corporal punishment appears endemic in schools in India, with poor children more likely than their peers to be beaten for lacking school materials and uniforms, and for being absent because of the need to
work. Violence within the home is also a reality; over a third of girls and a quarter of boys in Peru report being physically hurt by a family member.

“My uncle used to help me (with my homework), but not any more. If I did something wrong, he used to hit me,” says 10-year-old Lupe, who lives in Lima. “My grandmother also beats me, so I said… ‘Better if I don’t ask.’ Now I do it alone, but sometimes I ask my sister.”

**CASE STUDY**

**“A difficult situation”: Violence at home and at school**

Nga lives in the town of Da Nang in Vietnam. When she was 15, she failed the entry exam for higher secondary school, and instead enrolled at a continuing education centre. However, as a result of fighting between students and feeling that she wasn’t making any progress with her studies, Nga decided to “stay at home to help out my parents.”

Nga now works at her mother’s café, and gives her earnings to her mother. She has started staying up late so she can go to the bar where her father drinks. “I go wake him up and tell him to come home,” she says. In this way, Nga protects her mother, by being the one to let her father back into the house when he is drunk.

Nga says she didn’t have many school friends, but instead socialised with “a few good children who had to quit school because of their family situation.” This group of friends supported one another, including financially, “because their situation is just as difficult as mine,” Nga says.

International attention has also focused on the risks to children from traditional practices that are harmful and violate their rights. In Ethiopia, for example, early marriage and female genital mutilation (FGM) are now both against the law. However, moves to abolish these practices have encountered resistance, as both were traditionally seen as a way of protecting girls and securing their future through a good marriage by keeping them safe from abduction, as well as sexual activity and pregnancy outside marriage. There are even examples of girls undergoing FGM despite their mothers’ objections.

“The circumcision of my daughter who is 14 years old was done at her request,” says one mother. “After she witnessed a girl insulting another who was not circumcised, my daughter came home and asked me to organise her circumcision.”

This suggests that strategies aimed at reducing these practices need to be linked to other initiatives to improve the health and socio-economic status of women and families more broadly, including ensuring that girls can access good-quality schooling, health services and employment opportunities.

Across all Young Lives countries, both young people and their parents now believe it is acceptable to marry later and delay childbirth for economic and health reasons. However, while the rise in schooling is enabling more young people to access information about reproductive health, many girls are still entering into early marriage and childbirth, despite the association with higher infant and maternal mortality, health risks due to physical immaturity, and higher overall fertility.

By the age of 19, over a third of girls in India are already married, and in both India and Ethiopia, many girls are still marrying well below the legal age of 18. Early childbearing is
also still prevalent; nearly a quarter of girls in Peru have had a baby by the time they are 19. In other Young Lives countries, girls from poorer households and rural areas are most likely to enter into early marriage and childbearing, and in Ethiopia and India, girls whose mothers have less education, continuing the cycle of poverty.

Seble, who lives in rural Oromia in Ethiopia, was married nearly a year ago, when she was 16. Her mother, who was married at 14 and had two children by the time she was Seble’s age, is ambivalent; on the one hand, she wanted Seble to wait and be educated; on the other, she wants to protect her daughter’s reputation and future life-chances and believes girls must be married early to avoid ‘dangers’. “Going beyond 16 or 17 is not good,” she says. “We live in corrupt and dangerous times; it is better that she is married early.”

The situation of Seble and her mother illustrates how early marriage and childbearing can transmit poverty across generations, as adolescent mothers tend to be less well-nourished and less educated; have less access to economic opportunities; have reduced autonomy and agency; and can be more vulnerable to abuse.

Seble herself, who wanted to be a teacher when she was younger, has dropped out of school, and her husband doesn’t want her to work. However, she hopes to wait until she is 20 before having a baby, so that she and her husband can “get on better in life first”. She continues to take contraceptives and wants her children to be educated.

As with FGM, Seble’s story suggests policymakers aiming to reduce adolescent fertility should seek to combine improved access to health services and social support networks with effective and relevant education and increased livelihoods opportunities for women.

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**Gender & adolescence**

Without equal access to education, boys and girls can’t enjoy the same life chances.

<table>
<thead>
<tr>
<th>Age 3 to 5</th>
<th>boys and girls have an almost equal chance of accessing pre-school education.</th>
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**By age 12**

girls’ enrolment has declined.

**By age 15**

boys are more likely to drop out in Peru, Vietnam and Ethiopia. but girls’ education and ambition is lower in India.

**By age 19**

1 in 3 young women in India are married. 1 in 4 girls in Peru have had a baby.

1 in 8 young women were married by age 19; compared with fewer than 1 in 100 young men.

1 in 5 This rises to 1 in 5 young women in poor or rural areas.

1 in 3 young women are married by age 19.

Average age when married: 16.6 years. Legal age for marriage: 18 years.

Young women who have had a child by the age of 19.

Married at 19

14% 12%

By wealth index

Poorest third

Wealthiest third

Ethiopia

55%

Poorest third

7%

Wealthiest third

10%

Majority groups

Ethnic minority

8%

Poorest third

Vietnam

34%

Poorest third

21%

7%

Girls

Boys

Peru

Shorter

Location

High

Urban

12%

25%

World index

36%

21%

12%

More young women are married than young men.

Young women were 3 times more likely than young men to be married or living with a partner at age 15. 21% 7%
Social Policies for Children

“Luckily she had insurance”: Well-designed social protection can support nutrition, health and education

Young Lives children and their families have seen significant gains in health, nutrition and education as a result of social protection policies introduced since 2000 that aim to reduce poverty and inequality. However, pro-poor interventions must be well designed and implemented if they are to avoid potentially adverse consequences, and should aim to change expectations about how choices or investments will play out if inequalities are to be reduced.

Key findings

- Marginalised families in Young Lives countries have seen significant gains in terms of health, nutrition and education as a result of social protection programmes that support them by providing food, employment or cash in return for compliance with certain conditions.

- However, some families have experienced tensions because narrow or complex targeting leads others to feel unfairly overlooked, and at times beneficiaries have been stigmatised. In some cases, children may take the place of their parents on schemes that require adults to work in return for food or cash or take over responsibilities in the home, such as caring for younger siblings.

- Gender-based differences may be reduced by policy interventions that change expectations about how choices or investments will play out in later life.
Social protection and support for marginalised families

Many Young Lives children live in households that benefit from social protection schemes aimed at poor families, which are an increasingly common way for governments to tackle poverty, help families manage risk, and increase child well-being. Such schemes may provide money, employment or food in return either for work or for compliance with certain conditions, such as visits to health centres or school attendance.

A number of major policies introduced in Young Lives countries since 2000 have helped marginalised children and their families by reducing the disadvantages they face (see page 30). In Peru, for example, more children are in school, and the attendance and performance of teachers has improved, as a result of the Juntos programme. In Ethiopia, vulnerable groups have felt the benefits of the Productive Safety Net Programme (PSNP). And in India, poor households have been given a cushion in the form of the Mahatma Gandhi Rural Employment Guarantee Scheme (MGNREGS), which has proved particularly valuable in mitigating the impacts of drought.

Desalegn, 9, lives in rural Amhara, Ethiopia. His father, Ayal, is delighted to be involved in Ethiopia’s PSNP, which has enabled him to buy a number of animals, including a cow which provides milk for the children, and two oxen to plough the land. “I used to be very poor, unable to provide enough food for my wife and children, and we often suffered from hunger,” Ayal says. “This year we have produced enough crops to sustain us for a whole year.”

However, these social protection programmes are not without their problems. There is a risk of unintended and possibly adverse consequences if the schemes are poorly designed or implemented, and in particular, if targeting is too narrow.

In Ethiopia, for example, it can be difficult to identify clear differences in poor communities between those who are entitled to benefits under the PSNP, and those who are not, and some families still struggle when they reach the threshold and ‘graduate’ out of the scheme. In Peru, tensions have arisen because some people who are not eligible for cash transfers under the Juntos programme consider themselves as poor as those who are. Comments made by children who benefit from the scheme about others who don’t, such as “he hasn’t had his vaccinations” and “he looks untidy and dirty all the time” only exacerbate the tensions.

Programmes to support the early years

In recognition of the fact that the first 1,000 days of a child’s life, starting from conception, are key for long-term outcomes, governments across Young Lives countries have tried to develop policies that will ensure access to nutrition, water, sanitation, healthcare and early learning programmes for marginalised groups during this period.

Peru’s Government has rolled out the Juntos programme, which provides cash payments to poor and indigenous families if they comply with certain conditions. Pregnant women must receive medical care both before and after the birth of their babies, ensure their children receive all of their vaccinations, and take them for regular health check-ups. In return, money is given, usually to the mother, to help ensure the child will receive adequate nutrition.
Most Young Lives families in **Juntos** say the programme is ‘good’ or ‘very good’. However, some mothers find the monitoring oppressive. “**Juntos** is everywhere. We need to be careful and do what they say, otherwise we lose the money,” one says. They also worry about whether the programme will last long enough to help them in future.

The Government in Vietnam passed a law in 2009 that entitles children under 6, ethnic minorities and poor people in rural areas to free health insurance, a policy that has been helpful for many marginalised families.

H’Mai lives in a remote rural area where few people speak Vietnamese as their first language. Married at 16, she fell pregnant shortly afterwards and had a difficult labour. “When she was done giving birth, she stayed at the hospital for six days,” says her mother. “Luckily she had insurance, or it would have been very costly.”

As in the rest of the world, disadvantaged children in Young Lives countries are less likely to benefit from early childhood programmes than their better-off peers. Minority groups are especially at risk, because of language and cultural barriers. The Vietnamese government has tried to address this by rolling out Vietnamese language teaching for pre-school ethnic minority children through its Programme 135 (see page 30).

However, most people in the H’Roi community where Y Sinh lives feel this isn’t necessary, because children will learn to speak Vietnamese when they start school. Faced with the barrier of a different language, it’s perhaps not surprising that Y Sinh attended school for only a few days. As a result, he still speaks only H’Roi; he doesn’t know how old he is, or the name of his village, but he does know a lot of songs.

Ethnic minority families like Y Sinh’s are still more likely to be poor and less educated, still less likely to have access to safe drinking water and improved sanitation, and their children still more likely to be underweight or small for their age than those of families from the ethnic majority. But the good news is that efforts by the government in Vietnam to reach these groups with social protection policies seem to be taking effect; Young Lives children from ethnic minority groups have recently seen poverty rates drop three times faster than children from the ethnic majority.

**The primary years: tackling inequalities in learning and catch-up nutrition**

Too often, as we have seen, education works to reinforce existing inequalities. However, in Vietnam, the poorest children are now making the greatest learning gains, thereby reducing the achievement gaps between themselves and less-poor children.

There are a number of factors that may be at work. First, Vietnamese teaching is focused on the class as a whole reaching an acceptable level, rather than stretching the most able pupils. Second, the Vietnamese curricula appear well-suited to appropriately develop children’s ability. And third, the centralised teacher-training system in Vietnam means that the qualification levels of teachers in poorer locations tend to be quite similar to those teaching in more advantaged areas, highlighting the potential of effective school governance systems to ensure access to quality teaching for all.

Primary schools have also been the context for some important health interventions that aim to both maintain good nutrition and support growth recovery for children who may have been stunted at an earlier age. Schools are well-suited to be a platform for
governments to deliver services for children, since they are present in every community, and virtually all children attend school at this age.

India, for example, has rolled out the Midday Meal Scheme, the largest school meal programme in the world, covering an estimated 139 million primary school children. Launched in 1995, the scheme was extended to all states in 2002, and in 2004 it became mandatory to also provide midday meals during summer vacations in ‘drought-affected areas’. In Andhra Pradesh and Telangana, the scheme reaches 7.26 million children, and over 9 in 10 of Young Lives children who are enrolled in government schools benefit (see Deepak’s story, above).

Assessing the impact of the scheme is not easy, because children in government schools who receive the meals are typically from poorer, more disadvantaged households than children in private schools, who do not get the meal. However, children aged 4 to 5 are taller and heavier than might otherwise be expected, and learning among children aged 11 to 12 shows a significant positive impact, although it’s not clear if this is generated by reduced hunger or by improved school attendance.

The secondary years: maintaining enrolment across gender and poverty divides

In later years of schooling, the large gaps in enrolment that open up in the early years but ‘plateau’ in middle childhood start to widen again, as poor children feel increasing pressure to work. Policymakers have tried to address this by focusing on the structural causes of children working, and supporting the poorest households and those prone to shocks and illness with social protection and work schemes.

India's MGNREGS provides a guaranteed 100 days of unskilled manual labour work a year for poor households, with equal wages paid to men and women. More than three-quarters of Young Lives households in rural sites have a job card to work on the scheme, which has altered economic opportunities and household coping strategies. Children whose families register and take up the scheme are likely to enjoy better nutrition, and children whose mothers participate are likely to attend school more and gain better grades, particularly daughters and children from the poorest families.

Almost all Young Lives households in the village of Katur have MGNREGS job cards and have worked on the scheme, which has reduced migration to urban areas for work, and put a welcome floor under wages. Eight-year-old Tejaswini says only the landowners haven’t benefited, because no one is willing to work for 40 rupees a day any more.

Govindh, 17, describes how the MGNREGS helped his family cope better after a series of poor harvests and illnesses left them heavily in debt. “Through the employment guarantee scheme, we cleared the loans,” he says. Govindh works on the scheme at weekends and during school holidays in order to support his family.

Children also work on the PSNP in Ethiopia, despite an official minimum age of 18. They have experienced mixed impacts from the scheme on their time use; the need for adults to work in return for food or cash seems to increase the demand for children’s paid work, but has also reduced the time they spend on chores in the home, and, according to some evidence, has enabled girls to spend more time studying.
Hadush, 16, says that if his parents are unable to work on the scheme, he covers for them so that the family does not miss out on its monthly grain payment. "It is the same type of work for adults and children," he says. "We all dig holes and only if you finish your work do you get to rest. There are also school students who miss their classes to take part."

We saw earlier how Haymanot had worked on the PSNP when she was 14 to cover for her sick mother, together with her sister who subsequently also became ill. When asked how the PSNP could be improved, Hadush suggests that "when people are absent because they have very serious problems, they should not be considered absent."

Poor children and their families have also gained support from an increasing number of self-help groups, especially in India. In Andhra Pradesh and Telangana, there are over 700,000 such groups, organised under the state government's poverty alleviation programme, Indira Kranti Patham, which focuses on women's empowerment through access to credit. One woman in Katur describes the advantages of being able to take out a low-interest loan from a self-help group. "Many families have purchased cows and goats through the group loans," she says. "There is no problem repaying the loans, and we are regularly repaying the loans taken."

Children from families that have access to these groups are more likely to be enrolled in school than peers whose families do not, and more likely to have a healthy body mass index for their age.

Transitions from school to work and family: reducing early marriage and fertility

As we've seen, gender differences grow during middle and later childhood, and policy interventions aimed at reducing gender-based differences are most successful when they change expectations about how choices or investments will play out in later life, rather than simply changing the law (as with early marriage and FGM in Ethiopia).

One example is an experimental research design in India, which found that expanding labour-market opportunities for women in randomly selected villages resulted in shifting aspirations and increased investments in girls and young women in those villages. Girls and young women aged 15 to 21 were more likely to enrol in a computer or English-language course, and even younger girls showed increased school enrolment and greater body mass index, reflecting better nutrition and/or health investments.

A similar programme aiming to affect gender norms is the Girl Child Protection Scheme in India. Implemented by the Women and Child Welfare Department of Andhra Pradesh, it targets low-income families with one or two daughters, and is open to those to who have used family-planning services. When an eligible girl is born, the state government deposits 5,000 rupees in a bank account for her, which can be accessed on completion of Grade 10 or when she turns 18. Around 15% of Young Lives households that have at least one girl aged between 5 and 17 years old have benefited from the scheme so far.

The primary aim of the Girl Child Protection Scheme is to eliminate prejudice and discrimination against girls, particularly through trying to ensure they finish high school. It also aims to protect their rights, empower them socially and financially, and eliminate negative cultural attitudes and practices towards girls. It's too early to know what the impact of the scheme will be, but given experience elsewhere, the focus on empowerment and achievement at school bodes well.
## HOW SOCIAL POLICIES SUPPORT YOUNG LIVES CHILDREN

<table>
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<tr>
<th><strong>The Productive Safety Net Programme, Ethiopia</strong></th>
<th><strong>The Mahatma Gandhi National Rural Employment Guarantee Scheme</strong></th>
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<tr>
<td>Launched by the Government in 2005 and backed by international donors, the PSNP is the biggest social assistance programme in Ethiopia. It consists of two components: Public Work and Direct Support. Public Work is by far the larger programme, and pays daily wages for unskilled labour (either in cash or in kind) to people who do not have enough to eat, mainly in rural areas. Direct Support provides free food for people who are not able to work, such as disabled or elderly people, pregnant women and women who are breastfeeding. About 41% of rural households and 7% of urban households in the Young Lives study participate in the Public Work programme, while 13.5% of rural and 4.6% of urban households benefit from Direct Support. Overall, the programme seems to be having some success in benefiting more vulnerable groups; more poorer and female-headed households take part than better-off and male-headed households.</td>
<td>MGNREGS is the biggest social security programme for the informal sector in India. It sets out a legal commitment on the part of the Government to provide employment for those who seek work: 100 days of unskilled manual work a year for each household. As such, the scheme is one of the most important ways of alleviating poverty in India. The programme covers all districts of Andhra Pradesh and Telangana. By 2009, 78% of people in 15 of the 20 Young Lives study sites were involved. Poorer and lower-caste households were more likely to register, as were those affected by drought. In general, the programme seems to offer a viable security net for households and a range of employment opportunities. It also seems to have an important effect on children; for example, registration reduces the probability of a boy working by 13% and that of a girl working by 8%.</td>
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<tr>
<th><strong>The Juntos programme, Peru</strong></th>
<th><strong>Poverty Reduction Programme 135, Vietnam</strong></th>
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<tr>
<td>Juntos, which means ‘together’ in Spanish, is one of the largest programmes introduced by Peru’s Government, reaching almost half a million people. A conditional cash-transfer scheme, it targets families who live in rural areas and who are both poor and indigenous, providing them with money each month if they agree to certain conditions. These include: sending children to school and making sure they attend at least 85% of classes; ensuring children get all their vaccinations and taking them for regular health check-ups; medical care for pregnant women before and after the birth of their baby; registering children at birth and ensuring adults have national identification cards. Money is usually given to mothers, and payment can be suspended if not all conditions are met. Over a quarter of Young Lives families with younger children receive around 30% of their monthly income from the scheme. Although only 57% of families overall know about the programme, this is higher among mothers with low levels of education.</td>
<td>The Vietnamese Government established Programme 135 in 1998 to address poverty among people from ethnic minorities in mountainous areas. The programme targets the most vulnerable communities, developing infrastructure and covering access to credit, health insurance, education, housing, clean water and agricultural extension services. Programme activities include the construction of roads, irrigation schemes, schools and health centres; training for grassroots communities, for example, in local governance and gender issues; support for the construction of housing, water and sanitation facilities; school feeding; training for ethnic minority teachers; and Vietnamese language teaching for pre-school ethnic minority children. Young Lives families who are part of the programme have their school fees paid, and construction fees for a house are waived or reduced. Families in the programme also receive an annual food provision. Poverty rates among Young Lives children are dropping faster for ethnic minority groups (down 31% between 2006 and 2009) than they are for ethnic majorities (down 9%), although the ethnic minority communities are also more affected by economic crises.</td>
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The Data Revolution and Cohort Studies

Understanding the causes and consequences of child poverty: the role of cohort studies

Consultations on the SDG proposals highlighted calls for a ‘data revolution’ to support the new global sustainable development agenda and move beyond measuring national averages, which not only mask differences at sub-national levels but fail to show the concentration of disadvantage among the poorest children. “Despite achievements during the MDG period, millions of the most disadvantaged children are being left behind, partly because without concerted efforts to track different results for different groups, inequities can go unnoticed,” UNICEF warned in its report Beyond Averages: Learning from the MDGs.

The new framework recognises that policies and programmes need to be based on good evidence, and that the quality, validity and coverage of this evidence is crucial. Calls for better, more inclusive data that can shine a light on the scale of social problems and monitor progress towards the new goals, led to the need for a data revolution being written into the SDG agenda. “Quality, accessible, timely and reliable disaggregated data will be needed to help with the measurement of progress and to ensure that no one is left behind,” the commitment states. “Such data is key to decision-making.”
However, while it’s true that part of the revolution must be delivered by more and better data to measure and monitor social problems, there is a need for a second part of the revolution: to evaluate those problems, and provide a greater evidence base for policy interventions. If governments are to understand the causes and consequences of child poverty, and weigh up the choices facing children and their families in fast-changing societies, we need longitudinal studies to show how families on the margins move in and out of poverty.

Longitudinal data enable us to see how persistent particular circumstances are, and so evaluate the different impacts of continuing circumstances – or one-off changes – on later well-being. They also reveal key points when interventions are most timely, and how investments in one area of a child’s life, such as nutrition, may support development in another, such as learning.

Only cohort studies yield insights for policymakers into which children face particular disadvantages, how children develop, when differences emerge, what shapes later well-being, and how policy can support children more effectively. They provide a clearer understanding of the dynamics of child development, enabling us to identify links between earlier circumstances and later outcomes; for example, revealing how a child’s feeling of being respected at the age of 8 is strongly predictive of higher test scores in school at the age of 12.

In addition, cohort studies can motivate and shape the development of interventions that can be tested experimentally, including through Randomised Control Trials. An example is the research design in India described above, in which job opportunities were expanded for women in selected villages, and panel data collected over a three-year period to assess the effects on the aspirations of and investments in girls and young women. Using cohorts to inspire and focus experiments improves the chances that they will show useful results.

And finally, cohort studies are often the best – sometimes only – way of evaluating major changes that happen unplanned. The rapid transformation in the socio-economic contexts of developing countries has ambiguous effects on the welfare of children and their long-term prospects. Significant changes may occur even in a very short period of time and may not be foreseen; the outcomes for children may be unknown unless longitudinal surveys are in place to capture them.

Interventions aimed at supporting households can have a significant, positive impact on children when they are based on evidence of the challenges children face, their needs, and the effects such interventions have upon them. Policies that are not designed on the basis of such evidence, in contrast, will be at best inefficient, and at worst, detrimental to the very children they seek to protect.

As we move into the era of the SDGs, it’s clear that we need a great deal more evidence on how rapid social and economic change is impacting in different ways on children in specific contexts. We need to expand the evidence base concerning the factors that promote and impede children’s development across domains, functions, contexts and age groups, to gain clarity on why the outcomes for so many children have not improved as a result of economic growth and increased prosperity. Cohort studies can fulfill that role and inform timely and effective policy responses to changing circumstances, during the next 15 years and beyond.
CASE STUDY

Understanding accumulated disadvantage: Why do girls marry early?

In all the Young Lives study countries, young people say they want to delay marriage until they are in their mid-20s. But because cohort data enables us to compare earlier aspirations with later realities, we can see that many of the girls in our sample in Ethiopia who initially wanted to wait are still marrying below the legal age of 18.

Longitudinal analysis reveals the complex reasons some girls marry early: while cross-sectional research can show factors that increase the chances of early marriage, it cannot show how multiple difficulties accumulate to affect girls’ lives.

For example, Haymanot’s mother’s ill health meant that Haymanot worked from an early age to support her family and had to miss school. She married at age 15, which meant her family situation improved; she could support her mother with access to better food, and she no longer needed to work so hard. However, her husband subsequently divorced her, and she was last reported living with her mother and baby.

Disadvantage accumulated over time for Haymanot, but there were key intervention points – at school, or through access to healthcare for her mother – at which being able to access some support could have improved her situation and reduced the chances that she would marry young.
Including Children in the Sustainable Development Agenda

The SDG Declaration has an explicit aim of building on the MDGs and completing what they did not achieve. The focus on universality and inclusivity, peace and social justice is creating a global policy agenda of unprecedented scope and scale. The commitment to leave no one behind, to reach the furthest first, and to create a nurturing environment for children and young people is ambitious and optimistic.

The experience of the Young Lives children presented in this report highlights some of the key challenges which national governments face and will need to address in this quest to eradicate poverty in all its forms and dimensions.

Effective policies aimed at benefiting poor and marginalised children will need to...

- Recognise that children are members of families and communities, not individuals in isolation, and that they can play an active role in shaping their own lives. Children have valid ideas about solutions to the problems they confront. Social policies will be more effective if they treat children as individuals with the capacity to act independently, rather than simply as beneficiaries.
Children of the Millennium

Page 35

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- Take into account the context in which children live, and consider what works for them and their families, what motivates them to respond, and what the full impacts of a policy are likely to be.

- Take into account the point in children's lives at which policies are applied; investments in early childhood are particularly valuable, but there are also windows for intervention at later ages.

- Be sustained if they are to work in the long term. To be sustained, they must receive general acceptance by the population so that political leaders are inclined to continue them.

- Adopt a multidimensional approach to children's development - for example, by using schools to deliver health and feeding interventions aimed at children.

- Ensure good data is available to identify which age and social groups are being ‘left behind’, and how to ‘equity-proof’ policies to reach the most disadvantaged groups.

**Poverty and inequality**

Social protection programmes are particularly promising as a means of reaching the poorest groups and reducing susceptibility to risk. They show positive results for poor children and their families, providing a safety net to enable them to cope better with crises, and supporting their uptake of other services, for example by paying for materials so that children can attend school. If countries are to meet the new SDG targets, the challenge will be to raise the social protection floor by increasing both the coverage of programmes and participation of the poorest and most marginalised families.

**Nutrition and health**

Access to primary health, nutrition and ante/post-natal services, as well as early stimulation and learning is critical during the early childhood phase, especially for marginalised groups. Young Lives evidence shows how ‘early is best but it’s never too late’ when it comes to supporting a child’s nutrition, which is key for cognitive development, health, learning and social and emotional well-being. Governments can prevent malnutrition in the critical first 1,000 days by targeting pregnant women and mothers with babies with poverty alleviation measures, such as cash transfers. Remedial policies such as school feeding programmes can also prevent faltering later in life and enable catch-up growth among children who have suffered early under-nutrition.

Access to clean water and sanitation is crucial for children’s healthy development and well-being, and plays an important role in reducing the burden of disease and malnutrition. Policymakers should ensure all children, including those in remote rural areas and from marginalised groups, have access to safe water and sanitation and are supported to adopt hygiene behaviours that prevent the spread of infectious diseases.

The SDG target to achieve universal health coverage, including financial risk protection and access to health-care services and affordable medicines, will help to reduce the catastrophic costs that illness can mean for poor families, both in terms of lost earnings or assets, but also for children’s well-being if they have to care for family members or their school attendance suffers.
**Education and learning**

There is a mismatch between high levels of aspiration and school enrolment on the one hand, and children’s learning and education outcomes on the other. Effective governance systems must be put in place to ensure well-resourced and well-managed school systems that deliver for disadvantaged children. Governments must focus on raising the quality of education, particularly to identify what supports poor children’s learning and mainstream this in improvement programmes. To support poorer children to remain in school for longer, they should consider more flexible school systems, for example with half-day schooling, and ensure that the skills and learning being gained are matched with increased employment opportunities for young people.

However, the poorest children fall behind before they even start school, and too often education reinforces existing inequalities. To tackle this, policymakers must expand the delivery of high-quality early childhood programmes for the poorest children, those in rural areas and those from minority groups, who are especially at risk because of language and cultural barriers. Teaching quality is key for more equitable outcomes, and education must be supported by strong social protection schemes to help children stay in school.

**Gender inequalities and transitions to adulthood**

In promoting gender equality and supporting positive transitions to adulthood, policymakers need to consider how poverty, gender and other characteristics interact, to help address the barriers that prevent both girls and boys staying in school. Gender differences widen during adolescence, with lasting effects on children's life-chances, but girls are not always disadvantaged. Policymakers need to address the socio-economic context that influences parents’ and children’s choices, as well as discrimination and gender norms, including perceptions of risks and opportunities that shape decisions around education, work, marriage and fertility; for example by expanding relevant job opportunities for women. But they must also tackle the structural causes of inequality, by putting social protection measures in place to help families cope with shocks that might otherwise cause poor children to drop out of education.

Policymakers seeking to reduce early marriage and adolescent fertility should support poorer girls and those in rural areas to stay in school for longer, by making the school environment and journey safer and improving the quality of education. They should expand labour-market opportunities for women, particularly in rural villages, and improve access to health services and social support networks.

**Data and measurement**

To measure progress towards the SDGs and ensure that no one is left behind, governments must invest in collecting better, more inclusive, disaggregated data that enable more accurate targeting of policies and programmes; provide evidence for civil society to advocate for children; and enable their citizens to hold them to account.

But as the causes and consequences of child poverty can only be understood if we collect information about and with children over time, governments must also invest in longitudinal cohort studies that expand the evidence base for policy, and can help them evaluate the options and choices they face in fast-changing societies.
References and Further Reading


Acknowledgements and credits

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Huge optimism surrounded the global commitment at the turn of the century to the Millennium Development Goals (MDGs). Many of the goals related to children and childhood, including ending poverty and hunger, expanding enrolment in primary education, and improving access to clean water and sanitation. If we can get things right at the start of a child’s life, the world agreed, we have a chance to stop poverty and inequality being passed down through the generations.

During 2015, Young Lives have been taking stock of the achievements and lessons learned since the adoption of the MDGs, in the run-up to the new Global Goals for Sustainable Development.

Using data gathered from 12,000 children and their families over the timeframe of the MDGs, and in children’s own words where possible, this report from Young Lives looks beyond the ‘big data’ to see what has changed in the reality of children’s lives in the context of the shifts in national policy, priorities and outcomes related to the MDGs.

There have been some important advances, with a reduction in childhood poverty and rise in essential services across many developing countries. However, average numbers cannot tell the whole story; the figures hide discrepancies between countries, as well as between children within countries, and gaps in quality and inclusiveness.