Summary of the Young Lives Conceptual Framework (Draft Version to accompany 'Practical Guidelines and Lessons Learned')

1. Introduction

The first phase (2000-2003) of Young Lives was supported by the UK Department for International Development (DFID) with the purpose 'to measure and find out about what happens to children born into poverty in the millennium'. This purpose is to be satisfied through meeting four objectives:

- Develop methodologies and instruments for conducting panel surveys of children and poverty which can be replicated in a range of developing country situations;
- Collect, analyse, report, archive and maintain the results of these surveys;
- Strengthen capacity for such research in selected developing country institutions; and
- Disseminate and publicise the research and its results to a wide range of audiences, including making raw data available as appropriate.

This paper sets out the conceptual framework that underpins the project and was developed prior to the design of the data collection instruments in Phase 1.¹ As Young Lives is a 15 year project, the conceptual framework will be reviewed before the project enters into its second phase and a final version will be available in the Young Lives working paper series in January 2004.

Section 2 gives a brief overview of approaches to conceptualising childhood and the concept of childhood adopted by Young Lives. Section 3 considers what is meant by childhood poverty, and the reasons why it should be a focus of study in its own right. Section 4 outlines the framework for analysing the causes and consequences of childhood poverty and the reasoning behind it.

2. Conceptualising Childhood

A key issue raised in the literature on childhood is that of cross-cultural similarity and variability in the meanings and experiences of childhood (James, Jenks and Prout, 1998). Theoretical analysis can set up a mutually exclusive relationship between the global and the local (i.e. the global *versus* the local). This suggests that researchers must somehow chose between a

¹ 'Practical Guidelines and Lessons Learned from Young Lives' discusses the process of developing the conceptual framework at some length and Document 9 has examples of the flow charts that were used. The Young Lives Guidelines and Technical Documents package are available on the website www.younglives.org.uk

global model of childhood that fails to account for any socio-cultural differences, or a local model of childhood that denies any universal commonalities. However, for those engaged in large-scale cross-cultural studies, such as Young Lives, the challenge is more one of finding ways to encompass the universal aspects of childhood, whilst allowing for sociocultural difference where it is significant.

Young Lives is not the first study to take a holistic approach to childhood and make comparisons across countries and cultures. Whilst Young Lives looks specifically at childhood poverty, the European project 'Childhood as a Social Phenomenon' looked at general sociological aspects of childhood, (such as children's use of time and space, institutional attitudes towards children and gender differences) across 16 countries. In response to those critics who claimed that the project should refer to 'childhoods' and thus better capture the complex, plural realities of children's worlds, the project director, Qvortrup explains the risk of allowing acknowledgement of differences to blind us to global aspects of childhood,

Who can possibly claim there to be only one childhood when it is so obvious that children lead their life under a variety of conditions, depending not least on the socio-economic background of their parental home? On the other hand this view would, if followed to the end, constitute an insurmountable obstacle to any generalised insight, because it indicates the preponderance of what is unique over what is common. (1994, p.5)

In a similar vein, rather than allow cultural difference to become an 'insurmountable obstacle' to drawing any general conclusions about the causes and consequences of childhood poverty in developing countries, Young Lives focuses on those universal aspects of childhood well-being and development that have been shown to be suitable for meaningful comparison across cultures.

In approaching childhood as a predominantly global phenomenon, Young Lives draws on the concept of a global child promoted by human rights. The 1989 United Nations Convention on the Rights of the Child (CRC) has created a universal system of rights that apply to all children under the themes of survival, protection, development and participation. A series of rights that apply to all children regardless of space and time suggests points of commonality in all childhoods.

Linked to the four key CRC themes, it is possible to identify universal spaces of childhood, namely home, school and community (and in some contexts, work) that have an impact upon a child's life and can shape the focus of a comparative study. The meanings and organisation of these spaces will differ not only from country to country, but also from community to community within a country and even for different individuals within the same social space, for example, a child's gender, ethnicity, and religion will shape his or her experiences. The nature of home for a child living on the street will be very different to that of a child living in an extended family. Similarly, what constitutes 'school' for a child living in a remote rural community will be very different to the experience of a middle-class child in an urban area. However, whilst the contextualised nature of children's individual experiences needs to be acknowledged, meaningful patterns of common experiences, outcomes and motivations can still be identified. The World Bank 'Voices of the Poor' study (Narayan, 2001) illustrates how common views and experiences can be found amongst poor adults and children living in very different conditions.

In turn, common spaces can be linked to common experiences. For example, although there are wide cultural variations across societies in approaches to parenting, all societies have processes of socialisation. Levine (1998) points out that it is possible to identify key elements in cultural models of childcare practices, regardless of where they take place – 1) moral direction 2) pragmatic design and 3) set of conventional scripts for action - which can be used to focus cross-cultural work on parenting. Therefore, accepting the importance of culture in shaping the meaning and experience of childhood does not necessarily lead one to the extreme position where all childhoods are irrevocably unique and infinitely variable. It is possible to identify common frameworks of inputs through which individual childhoods are shaped.

From a biological and psychological perspective, all societies recognise something equivalent to infancy and childhood as stages within the human lifecourse, and there are quantifiable inputs and indicators of child well-being that can be meaningfully compared across cultures. The five quantitative child well-being outcomes discussed in Section 4, draw on these indicators. Childhood is the period of human growth and development divided into universal and quantifiable stages. Each stage can be identified by biological and behavioural characteristics that relate to measurable phases in body growth, brain development, dentition, and reproductive development (Bogin, 1998) A shared biological process of maturation across cultures has led to the development of a series of demographic and anthropometric indicators of child well-being that can be meaningfully compared globally. (Panter-Brick, 1998). Our understanding of cognitive maturation during childhood has also developed to the point where there are sets of cognitive, communicative, emotional and social capacities associated with each stage in childhood (Panter-Brick, 1998). There has been some criticism of a universal process of human development that fails to account for cultural difference. It is argued that the gold standards against which a child's development can be compared are drawn from a limited, often Western understanding of childhood (Burman, 1994). However, rather than use this as a reason for not using gold standards, an alternative approach is to ensure that findings are not simply interpreted with reference to the gold standard but are also interpreted with reference to the local context. Also, any research should allow for locally significant aspects and values of childhood to be incorporated into the study wherever possible/necessary.

It is inevitable that in an international study that wishes to make meaningful comparisons across a wide range of issues and to generate findings to inform policy, some of the local complexity of childhood experiences will be lost in favour of highlighting commonality. Therefore, whilst Young Lives recognises

that responsibilities, characteristics and meanings attached to childhood will differ from culture to culture, local cultural aspects of childhood will only be examined in so far as global comparisons need to be contextualised in order to be fully understood. The research methods used reflect this approach to conceptualising childhood. Core questionnaires for global use are adapted to the local environment through the addition of country-specific questions and modules. Results are interpreted with reference to the country- and community- contexts and more focused thematic studies will allow a greater exploration of the importance of cultural values in determining child well-being wherever appropriate.

3. The Importance of Looking at Poverty in Childhood

By following the lives of 8000 children over 15 years, the key aim of Young Lives is to deepen our understanding of the causes and consequences of childhood poverty. Before discussing the project's approach to analysing the dynamics of childhood poverty, it is necessary to outline why it is important to focus on children's experiences of poverty.

What is Childhood Poverty?

Young Lives understands poverty to be a multi-dimensional phenomenon. Poverty cannot be understood in purely material terms as lack of income, expenditure or consumption, but encompasses a broader range of both quantitative and qualitative deprivations. Drawing on the DFID livelihoods framework (www.livelihoods.org) Young Lives assesses poverty based on access to the five types of capital defined in the framework:

- The adequacy of income, assets and other forms of financial capital to sustain the household
- Levels of health, education, skills
- The quality of one's environment (e.g. housing, infrastructure, access to services, personal safety)
- Social connectedness both at a household level and within the wider community
- Access to natural resources (mainly rural and peri-urban areas)

When households are deficient within any of these areas, they are likely to encounter reduced livelihood options, which in turn reduces the household's capital assets further in a cycle of poverty.

Based on this framework, childhood poverty means growing up without access to sufficient financial and natural resources, health services, education, supportive family and community structures, and safe environments to ensure survival, development and quality of life.

This definition raises the question of what, if anything, is different between poverty experienced by children and poverty experienced by adults? Surely, all people, regardless of age need access to these types of assets in order to avoid poverty? A key difference is the nature of access. As explained in

Section 2, childhood begins with a state of complete dependency followed by a process of development and growth that is accompanied by increasing independence from the family unit. Therefore, a child's access to resources is mediated by the household, especially in early and middle childhood when dependency is greater. Whilst access to the five types of capital in the livelihoods framework is considered positive because in theory it leads to access to sustainable livelihoods for those of working age, positive outcomes for a child living in that household will clearly not be indicated by his/her access to livelihoods or direct access to financial resources. Therefore, we need to include some measurements of well-being related to children's lives to ensure that a livelihoods framework is sufficiently sensitive to poverty as experienced by children.

Young Lives draws on the 1989 Convention on the Rights of the Child (CRC), which identifies the key areas of rights as follows;

- Survival (adequate living conditions and health care)
- Protection (freedom from exploitation, corruption and abuse and access to the justice system: perceptions of security and safety of living environment)
- Development (Education, play and leisure)
- Participation (Freedom to express opinions, the extent to which children feel their opinions are taken into account, extent to which they feel they have control over their lives and active role in society)

As discussed in Section 2, what sets childhood apart from adulthood is the process of growth and development, vulnerability and the related state of dependence, and the status of being 'incomplete adults' or 'invisible citizens'. By comparing the elements of the livelihoods framework and the CRC, it becomes clear that is it these differences between adulthood and childhood that distinguish childhood poverty from poverty experienced by adults. Therefore, what sets childhood poverty apart from poverty in general is a focus on access to spaces that facilitate development i.e. education, play and leisure, a focus on protection in the various spaces children inhabit to limit their vulnerability, and a focus on the importance of recognising children as citizens in their own right as they are very often conceptualised as passive, 'incomplete' adults without agency.

Why Study Childhood Poverty?

The sheer number of children living in poverty identifies childhood poverty as a phenomenon worthy of greater analysis. UNICEF (2000) estimates that 600 million children are growing up in poverty, and people under the age of 15 constitute between one third and a half of developing country populations. For example, in Ethiopia, 49 per cent of the population is aged below 15, in Peru, 35 per cent and in Vietnam, 40 per cent. Therefore, addressing childhood poverty should be central to any poverty reduction strategy. Childhood and children are socially constructed as a group apart from adults, yet assumptions regarding children do not always reflect the reality of children's lives. Children's experiences of poverty are different to reasons discussed above, and, therefore, policy makers that wish to target the needs of children effectively, should base policy interventions on empirical evidence of children's experiences of poverty rather than assumptions. The need to conduct research into poverty that focuses on children's specific needs is evident.

One of the most cited reasons for focusing on children living in poverty is an understanding that deprivation in childhood has long-term consequences for mental, emotional and physical health in later life. Therefore, childhood is seen as a transitional phase when investment in development can reap benefits for society in the future by creating productive adults. There are a couple of problems with this justification for focusing on childhood poverty.

Firstly, such an approach reduces children to nascent human capital where investment now leads to economic gains later. With this perspective on childhood poverty, there is a tendency to only focus on those inputs that are directly related to producing healthy adults capable of contributing to a country's development i.e. health, nutrition and education. Childhood is not just a precursor to adulthood and somehow a lesser experience. As childhood is a 'lived' experience, child welfare should be seen as an end in itself, and research and anti-poverty measures should take into account things that matter directly to children.

Young Lives recognises the agency of children and will incorporate methods at later stages that allow the study of childhood agency at a local level and give children a voice in the research process. The importance of ethnographic work in deepening our understanding of the role children's agency plays in children's experiences of poverty can be seen in Iverson's (2002) work, which illustrates how children make independent decisions regarding migration and work rather than simply following adults

Secondly, although there is empirical evidence that supports the assertion that deprivation in childhood has an impact upon capacities and access to adequate resources in adulthood, such linkages run the risk of being overly deterministic. Yaqub (2002, p.1088) argues that there are '... developmental sensitive periods, when certain types of damage to functionings can – *but not always*- result from childhood poverty, and some – *but not all* – may be permanent.' Yaqub concludes that damage from childhood poverty can be resisted or reversed both during childhood and in adulthood, and as the individual gets closer to biological maturity, behavioural as opposed to biological mechanisms play a greater role in altering developmental trajectories. Therefore, children are not simply passive recipients of developmental inputs and socialising processes that permit them to grow and be moulded into adults. What this means for a study that looks at the causes and consequences of poverty throughout childhood, is that children's agency in responses to poverty must be accounted for.

The tendency to overlook children as individuals in their own right and see them more as lesser members of a household has led to a lack of detailed information about the reality of children's lives. As mentioned earlier, wellbeing in early childhood is a sensitive indicator of poor environments, and therefore, there has been a lot of work that focuses on children between the ages of 0 and 1 (infants) and 1-5 (young children). However, there has been relatively little work in comparison on children from ages 5 to15 (Panter-Brick, 1998).

Qvortrup (1994) highlights the fact that there is a lack of coherent statistical information on children, as information regarding children is usually extrapolated from household data. Therefore, children's access to resources and levels of consumption are defined through the household's resources and adult levels of consumption. There are both quantitative and qualitative limitations with this approach. White and Masset (2002) show that calculating child consumption as a proportion of that of an adult male fails to capture patterns of intra-household allocation and can lead to the miscalculation of the numbers of children living in poverty. Using the household as the unit through which to analyse childhood poverty also runs the risk of assuming that all households consider child welfare of equal importance and therefore, that all children will benefit in the same way. Research that has looked at women's experiences within the household has shown that there are often gender disparities amongst adults, with women often eating least, having less control over household resources and being less likely to spend money for their own benefit (see, for example, Mehta and Shah, 2003, p. 503). Households can be spaces of abuse and exploitation for children and household data cannot capture this adequately. As with gender and age² disparities in adults' access to household resources, not all children will necessarily benefit equally within a single household; certain children may be disadvantaged due to certain characteristics. Therefore, girl children may be less likely to be enrolled into post-primary education than their brothers or may be more likely to be engaged in household chores in some communities. Children with disabilities may be excluded from family social activities. Stepchildren may be at greater risk of abuse. The other key limitation of extrapolating information about children from general household data is that children are perceived as passive consumers of resources rather than individuals who actively contribute to the household in a number of ways as they get older e.g. making a financial contribution through work in and outside the household, caring for younger siblings, and doing domestic work.

² For a discussion of the relationship between poverty and old-age, see Barrientos et al. (2003)

4. The Young Lives Framework for Studying Childhood Poverty

Having explained the concept of childhood adopted by Young Lives and the reasons why a study of childhood poverty is important, this section discusses the conceptual framework that underpins the Young Lives approach to studying the causes and consequences of childhood poverty over time.

The starting point for developing the framework is to identify the output variables Young Lives is interested in, namely, how child welfare is being measured. This is discussed in 3.1. Then, in 3.2, in order to explain variations in these welfare outcomes, the framework defines a range of factors at micro-, meso- and macro- levels that potentially influence child welfare outcomes.

4.1 Young Lives Child Welfare Outcomes

The starting point for developing the framework is the output variables that are indicative of the welfare status of the child. Young Lives understands childhood poverty to be related to, but different from adult poverty, which has implications for the type of data collected. Therefore, it is important that child welfare measures include things that matter directly to children and do not simply reproduce adult poverty indicators. The outcomes are related to the four themes identified under the CRC: survival, development, protection and participation.

Young Lives will gather information on six child-specific outcomes:

- Outcome 1: Nutritional status
- Outcome 2: Physical morbidity
- Outcome 3: Mental morbidity
- Outcome 4: Life skills (literacy, numeracy, work skills etc)
- Outcome 5: Developmental stage for age
- Outcome 6: Perceptions of well-being and life chances

Outcomes 1 and 2 (nutritional status and physical morbidity) relate to the child rights area of survival. Health indicators, such as nutrition and physical morbidity are commonly recognised indicators of child welfare. For example, of the 16 UK child-poverty indicators two relate directly to the health of the child (see Appendix 1, Table A.1.). Health indicators are well developed: Living Standards Measurement-type surveys ask questions on illness and treatment in the previous two weeks³ and Demographic and Health surveys ask about diarrhoea and other illnesses.

Mental health, outcome 3, is an important indicator of child welfare and an important part of any multi-dimensional child specific poverty measure. However, little work has been done comparing child mental health across a

³ See, for example, the Vietnam Living Standards Survey

range of developing countries. The prevalence of child psychiatric disorders in the developed world is 10-20%, but in the developing word the prevalence may be higher. Little is known about the extent to which risk factors identified in the developed world apply in developing countries (Hackett and Hackett 1999). There is no consistent definition of mental health and therefore no gold standard way of measuring it.

Outcomes 4 and 5 (life skills and developmental stage for age) relate to the child rights area of development. Education, like health, is a commonly recognised indicator of child welfare. Questions on educational attainment and attendance (and reasons for non-attendance) are common. Measures of cognitive development are less common in developing countries, although there are exceptions. For example, cognitive tests are used alongside the Ghana Living Standards Survey. There are well-developed scoring systems for the various aspects of child development. This is not quite the same as recording developmental milestones, which is viewed as too 'jagged' an approach because it ignores the stages leading up to reaching the milestones and the consolidation of these achievements. However, as discussed in Section 1, such systems are often based on a Western model of childhood and therefore their use in a developing-country setting needs to be done with some sensitivity. Also, the use of such measures may not be feasible in a survey setting with limited time available.

Outcome 6 relates to children's perceptions of well-being and life chances. If we accept that children experience poverty and well-being in different ways to adults, and if we also recognise that children have a right to be heard through greater participation (CRC,1989), it is essential that any research project looking at the lives of children must gather data on the experiences and opinions of children. With this in mind, Young Lives will gather information on children's perceptions of their own well-being and their future life chances. This will clearly be a child-centric, subjective measure, and, as such, this qualitative information will complement the other more quantitative child-specific outcomes being measured. Subjective indicators have been used successfully in some developed countries to measure child welfare. For example, the Canadian National Longitudinal Survey of Children asked 10-11 year olds about their perceptions of key aspects of their life; friends and family, school, themselves, feelings and behaviours and the quality of their relationship with their parents (See Appendix 1, Table A.2.).

Indicators for perceptions of well-being are both age- and context-specific. As children grow up, the scope of their living environment inevitably extends, and therefore, a greater range of institutions and individuals come to influence their perception of well-being. For an 8-year-old, their key social environments are likely to be the family, the school and the immediate environment, whilst, for a 15-year-old, the workplace and peer-group activities away from adult supervision may have greater prominence. Perceptions of well-being cut across all the four areas of child rights. Children's qualitative assessments of their experiences of health care, education and family and community life can all provide a deeper understanding of the dynamics of

childhood poverty. Such assessments can also reveal the role of children's agency within their own development and welfare.

One dimension of poverty that routinely appears when discussing adults' experiences of poverty is that of dignity and autonomy (e.g. Baulch, 1996). Dignity and autonomy as experienced by children could be seen to relate more to those issues listed under the right of participation i.e. freedom to express opinions, the extent to which children feel their opinions are taken into account, and extent to which they feel they have control over their lives and active role in society. Just as dignity and autonomy as an adult experience have not proved very amenable to quantitative data collection, the collection of qualitative data on children's perceptions of well-being could also include children's perceptions of being listened to or of being in control of their lives.

In the area of protection, although community and household indicators may suggest a safe living environment, children's perceptions of their environment may reveal something different. Within the community environment, adults may believe children are unaffected by environmental degradation or the incidence of crime. However, consultations with children have shown that children are aware of the limitations of their physical environments and do feel threatened and/or 'depressed' by their environments. Abuse such as bullying may go unnoticed by adults in the child's life. Children's perceptions are also important in order that findings are not misinterpreted. Whilst some cultures may consider all forms of child work exploitative, children may consider the work they do as enjoyable and a key indicator of their increasing status within their community. Needless to say, gathering information on sensitive issues such as corruption, abuse and exploitation is problematic and a surveyapproach is rarely appropriate.

4.2 Influencing Child Welfare Outcomes

Young Lives has developed a number of flow diagrams that suggest the different ways in which various factors can influence child welfare outcomes (See Document 9 in the Technical Documents). Determinants of child welfare outcomes can be collected at the level of the child, the household (family), the community and the country and beyond. For example, Luthar's (1999) review of poverty and child development in the US identifies determinants at the level of the child, the family and the community (see Table 1).

Category	Factors
Child attributes	Gender
	Age
	Personality (including intelligence)
Family attribute	s Teenage mothers
	Family structure (e.g. single parent)
	Ethnicity

Table 1. Classification of poverty influence on child development in US

	Parental behaviour
Community (exosystemic) influences	Support networks
	Physical environment Neighbourhoods
	Violence
Source: Luthar (1999)	

Of course, 'determinants' does not imply certain consequences only probable ones; hence we may prefer to speak of 'risk factors' rather than determinants. For econometric analysis of the data, only the micro-level determinants (child, household and community) can really be used.

In conceptualising the relationship between the various determinants (or risk factors) and child welfare outcomes, Young Lives draws on three key frameworks; Mosley-Chen (1984), Garcia Coll and Magnuson (1999) and Brookes-Gunn et al (1997). The first two look at a series of variables in relation to single welfare outcomes in children, whilst the latter considers the relationship between a range of variables and a range of individual outcomes.

The Mosely-Chen framework (see Appendix 1, Figure A.1.) essentially identifies the conditions for successful strategies for the production of healthy, well-nourished children. Key assets for such strategies are the time and skills of the parent/carer (in relation to existing siblings), the physical environment, and assets that can be deployed for the production or purchase of food, medicines and clothes. Key policies and institutions include access to, cost and quality of health care for the household and the carer. Health, development and nutritional status of a child at a particular age also depend on past history. The key shocks that may affect the strategy include illness or death of a parent and drought. The insight of this approach is that underlying *socio-economic status* manifests itself in (measurable) *proximate* determinants.

García Coll and Magnuson's (1999) framework (see Appendix 1, Figure A.2.) for the mental development of infants, identifies exogenous variables such as family socio-economic status and mother's age and education, intervening variables like stress and a measure of child mental development as the outcome. In the Brookes-Gunn *et al.* (1997) framework (Appendix 1, Figure A.3) for analysing a range of individual outcomes, exogenous factors of macro structures and processes are mediated through neighbourhood and family responses.

Additional terminology from the study of child development may also prove useful. The first distinction is between factors which contribute to *resilience* or *vulnerability* to risk. The second is between *mediators* (those things which affect risk, such as teenage mother or being in a low-income family) and *moderators* (variables which affect the impact of mediators - for example evidence from the US suggests that young girls are less likely than young boys to be adversely affected by a dysfunctional home environment) of development outcomes (see Luthar,1999). The idea of moderators emphasises the fact that the different factors do not operate in isolation, but may reinforce or offset one another. The methodology needs to be able to capture this interaction.⁴

Combining these considerations suggests the general framework shown in Figure 1.

Figure 1. Basis of Conceptual Framework

Economic,	Socio-	 Proximate	Moderators	Outcomes
political and social context	economic status (SES)	determinants		
	(020)			

The conceptual framework needs to identify critical socio-economic forces for the 6 Young Lives child welfare outcomes and the proximate determinants that affect the outcomes.

A number of studies were reviewed and typical determinants at the three levels of Young Lives data collection - child, household and community - are discussed below.

Child Attributes

Certain determinants at the level of the child influence welfare outcomes. These include variables such as sex and gender, age, birth rank, ethnicity and personality.

For example, evidence from the US suggests that young girls are less likely than young boys to be adversely affected by a dysfunctional home environment (Luthar, 1999). The focus of the Millennium Development Goals on gender equality access to education indicates that gender can play a role in determining whether or not girls have access to education.

Disability is en example of an attribute that can be both a consequence of poor child welfare outcomes and a cause. Poor welfare in early childhood can

⁴ In econometric analysis it can be done through the use of interactive variables. Qualitative analysis needs careful thought, without premature aggregation, to capture these interactions.

lead to disability. In turn, a child with a disability may be excluded from school and other community spaces due to discrimination and/or inaccessible environments and therefore may fail to acquire the same levels of life skills as other children of his/her age group.

Blood ties can also be important. A child's status as orphaned, adopted or having a non-biological relationship to the head of household have all been shown to be indicators of negative welfare outcomes.

Basic determinant child attributes, such as age and sex as identified by Luther (Table 1), are clearly collected as a matter of routine. Information on other attributes may only be relevant to certain cultural contexts e.g. caste in India. Another consideration is that some key child attributes such as personality and intelligence, can be more difficult to deal with within a survey.

Household Attributes

The key household attributes that Young Lives is considering are access to services, livelihoods, social capital and the home environment. The latter covers a range of factors including quality of dwelling and plot, the characteristics of the carer and household head, household composition, parental attributes, and wealth status. It is important to point out here that Young Lives is not collecting income-data. Section 3 discussed the limitations of income-poverty data to identify childhood poverty because it is not a child-specific poverty measure. This is no great loss to our child welfare indicators, however, as we will collect data on household assets as an indicator of economic status. Household attributes are clearly interlinked. For example, access to livelihoods can bring income that allows a household to cover the cost of accessing services, access to social capital can lead to better market linkages which has benefits for livelihood, and access to social capital.

Access to livelihoods can understandably influence child welfare outcomes in a number of ways. For example, living in a workless household and living in a household with a relatively low, absolutely low and/or persistently low income are considered to be key indicators of child poverty in the UK (Table A.1.). When it comes to a household's access to services, this can relate directly to the child and his/her welfare (e.g. a child's access to education and literacy/numeracy outcomes) or access to services by other household members (e.g. the mother's access to antenatal care and health outcomes for the child). Assessing a household's access to services can be done by mapping the range of services available within the community and linking information on the individual household's use of services. For both health and education, quantitative data can focus on levels of satisfaction with services and can assess an individual child's access relative to the number of facilities available. For example, the World Bank has developed a Core Welfare Indicators Questionnaire (CWIQ), which as its name suggests is a rapid quantifiable survey focusing on use of and satisfaction with health and education facilities.

Quality of social life as a household attribute matters in two ways, each suggesting a different measure. The quality of home life (i.e. the closeness of the family network) matters since it provides security for the child: Durbrow (1999) documents that children of single mothers in the Caribbean are not disadvantaged compared to other children because of social acceptance of and support for such mothers. Wider social networks can be important for a child's life chances in terms of survival, development and welfare. Negative social environments can be detrimental to child welfare: deficiencies in the home environment can affect long-term mental development, productivity and life chances. Correlations between home environment and delinquency and drug abuse are well-established.

Parental characteristics such as health, education levels, whether or not the head of the household is present, the language used in the home, and emotional health have all shown to influence child welfare outcomes. Aspects of household composition are also key e.g. number of children in the household. In Luthar's (1999) study in the US, the key household level factors that influenced child welfare outcomes included whether or not the main carer was a teenage mother, the family structure (e.g. single parent), ethnicity and parental behaviour.

The household roster will collect basic data on parental characteristics and household composition. However, data related to parental behaviour is far more difficult to collect.

Community Characteristics

If the household attributes include information relating to an individual household's actual access to services, livelihoods and social capital, community characteristics show the range of livelihoods and services available, and the broader cultural, physical and economic environment within which they exist.

A profile of a community can never provide a definitive picture of opportunities and context, as people obviously move beyond their immediate community on a regular basis for work, leisure, health services etc. As a result, it is often easier to build up a more comprehensive profile for a rural community than an urban one, as opportunities beyond the community are more difficult to access due to distance. Such community-level information is vital for understanding the causes of child welfare outcomes. For example, there is a difference between a child who does not attend school because no school exists in the immediate area and a child who does not attend school when one does exist in the neighbourhood: one points to community-wide social exclusion based on a range of community characteristics, whilst the other relates to differentiation between the child's status and that of other children in the community, and suggests that household-level variables are determining whether the child attends school.

Macro- Level Variables

As mentioned earlier, for econometric analysis of the data, only the microlevel determinants can really be used. Analysing the link between macrolevel variables and child welfare outcomes is clearly more challenging. However, one key objective of Young Lives is to explore the linkages between macro-policy and child well-being and development. There clearly is a link in that pro-poor growth raises general socio-economic status, which in turn will have an impact on child welfare outcomes. The challenge is to go beyond such a general statement. In this work we will be attempting to break down and expand this statement, exploring how far, in particular circumstances, key policies have delivered/ are delivering pro-poor growth, and what the implications for different groups of children have been.

There may be some policies which affect different households differently (e.g. pricing policy) and differential effects can be studied, but otherwise household survey data may well not yield that much insight on macro linkages. There is one study that does include macro variables (such as terms of trade shocks) in the analysis of child mortality (Working Group on Demographic Effects of Economic and Social Reversals, 1993) but that used DHS data for several countries (and is a somewhat dubious procedure). The most promising approach is to have a good understanding of the country context, so that it is known which economic activities are likely to prosper and which are not, and to interpret the quantitative and qualitative data in this light (which means classifying children into functional cohorts based on parental occupation). Such an analysis should be able to pick up issues of inequality. This will illuminate effects of macro policy operating through livelihoods, but other effects, for example, those deriving from effects on key services, will need to addressed through more focused thematic studies. The effects of macro policy on children's quality of life, and children's and families social capital / support networks will also need to be picked up by qualitative work. There are of course also other relevant aspects of country context such as environmental situation, conflict, HIV/AIDS and other epidemic diseases etc. Young Lives will use ongoing policy monitoring to provide background information on the range of policies in each country, indicators of policy impact and information on macro and meso level resource allocation.

Based on the review of the literature and the outcomes of the flow diagrams (see Document 9), some of the proposed indicators the Young Lives will consider are shown in Figure 2.

Figure 1. Young Lives Conceptual Framework for Analysing the Causes and Consequences of Childhood Poverty

Economic, political and social context	Socio- economic status (SES)	Proximate determinants	Moderators	Child Welfare Outcomes
Qualities of Governance Resource allocation Nature of economic growth or decline Vulnerability to shocks Indebtedness Endemic violence/corruption Environmental/clim actic factors	Principal income source Economic status (asset ownership) Formal sector employment Education Ethnic Group Gender	Demographic characteristics ⁵ Access to services and quality of services Work of children and parents Social relationships	Gender Education Social capital	Nutritional status Physical morbidity Mental morbidity Life skills (literacy, numeracy, work skills etc) Developmental stage for age Perceptions of well-being and life chances

⁵ E.g. rural/urban residence, asset tenure status, ethnic group, religion, migration status, household structure - including single parents, polygamy etc.

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APPENDIX 1

Table A.1 UK welfare indicators for children and young people

- 1. Increase in the proportion of seven-year-old Sure Start children achieving level 1 or above in the Key Stage 1 English and maths tests.
- 2. Health outcomes in Sure Start areas: (a) reduction in the proportion of lowbirth weight babies in Sure Start areas; and (b) reduction in the rate of hospital admissions as a result of serious injury is Sure Start areas.
- 3. Increase in the proportion of those aged 11 achieving level 4 or above in the Key Stage 2 tests for literacy and numeracy.
- 4. Reduction in the proportion of truancies and exclusions from school.
- 5. Increase in the proportion of 19-year-olds with at least a level 2 qualification or equivalent.
- 6. Reduction in the proportion of children living in workless households, for households of a given size, over the economic cycle.
- 7. Low-income indicators: (a) reduction in the proportion of children in households with relatively low-income; (b) reduction in the proportion of children in households with low incomes in an absolute sense; and (c) reduction in the proportion of children with persistently low-incomes.
- 8. Reduction of the proportion of children living in poor housing.
- 9. Reduction in the proportion of households with children experiencing fuel poverty.
- 10 Reduction in the rate at which children are admitted to hospital as a result of unintentional injury resulting in a hospital stay of longer than three days.
- 11 Reduction in the proportion of 16-18 year olds not in education or training.
- 12 Improvement in the educational attainment of children looked after by local authorities.
- Teenage pregnancy: reduction in the rate of conceptions for those aged under 18 and an increase in the proportion of those who are teenage parents in education, employment or training.

Source: Department of Social Security (1999) *Opportunity for all: tackling poverty and social exclusion. Indicators of success: definitions, data and baseline information.*

Table A.2 Sample questions from NLS Module	Example Indicator			
Section A: Friends and Family	I have a lot of friends			
	Other kids want me to be their friend			
	During the last 6 months how well have			
	you gotten along with			
	mother/father/brother/sisters			
Section B: School	How do you feel about school			
	I feel safe at school/on way to school			
	I feel like an outsider			
Section C: About Me	In general, I like the way I am			
	A lot of things about me are good			
Section D: Feelings and Behaviours	I am not as happy as other children			
	I am too fearful or anxious			
	I am cruel, bully or am mean to others			
Section E: My Parents and Me	Praise me			
	Threaten punishment more than they use			
	it			
	Seem proud of things I do			
Sections F-H: cover puberty, smoking, drinking and drugs, and activities.				
Source: NLSC Questionnaire for 10-11 year olds				

Table A.2 Sample questions from NLSC

Figure A.1 The Mosley-Chen framework for analysing mortality





Figure A.2 Causal model of mental development for eight month old babies

Source: García Coll and Magnuson (1999).

Figure A.3 Gephart and Brookes-Gunn Conceptual Model for Analysing Neighbourhoods, Family Processes, and Individual Development

COMMUNITIES AND NEIGHBOURHOODS, FAMILY PROCESSES, AND INDIVIDUAL **EXOGENOUS FORCES** DEVELOPMENT Macro-structures + processes Attributes of neighbourhoods Family responses Individual development that produce neighbourhoods of to neighbourhood that may vary with poverty outcomes concentrated disadvantage concentration and affect conditions development outcomes housing discrimination Formal opportunities + Family processes health (physical/mental) constraints achievement racism Family practices of Dangers migration and contingent childrearing interpersonal relations preferences Informal networks family networks depression/self-esteem, institutional practices + policy efficacy Ethnicity (e.g. public housing) household demography Persistent poverty crime labour market conditions fertility "negotiating multiple worlds"

Source: Brookes-Gunn, Duncan, and Aber 1997

Appendix 2 Table 1 Indicators used in developing country analyses

Exogenous variables	Intervening/Mediating variables	Child Outcomes
Child attributes	School	Physical Health
Gender	Travel time to primary/middle in minutes	Under 1 mortality
Age	Distance to primary/secondary	Under 3 mortality
nnate ability Raven's Progressive	Mode of transport to school	Under 5 mortality
Coloured Matrices Test		
Ethnic dummies	Average teacher experience in years	Under 11 mortality
Birth rank	Average teacher schooling in years	Sickness/injury in previous 14/30 days/4 weeks/12 month
	Average teacher training in years	Type of medical care sought for child
Orphan [0,1]		Child immunised BCG/DPT/Polio/Measles
Religion	Percentage of school classrooms with	Child Initianised BCG/DP1/Polio/Measles
	boards	Diamhan in mar inn 04 bar (0 mar ba
Caste rank	Ratio of textbooks to classrooms	Diarrhea in previous 24 hrs/2 weeks
Only child	Library {0,1]	Fever/severe cough in last 4 weeks
Married	Lack desks for some children [0,1]	Guinea-worm/bilharzia
Non-bio relationship to head	Over subscribed [0,1]	Pregnant
	Percentage of unusable classrooms	Smoke
Family/household attributes	No water/electricity [0,1]	
Nother's years of schooling	Private school [0,1]	Anthropometry
Father's years of schooling	Tuition fees/contributions to PTA	Height-for-age
Nother literate	Child live in household while attending	Weight-for-age
	school	
Nother attended	Number of hours on class schedule	Birthweight<2.5Kg
primary/secondary		Dirtiweight 2.5Kg
Father attended primary/secondary	Expenditure on	Arm circumference
ather attended primary/secondary		
land advanted [0, 4]	uniforms/books/transport/school money	Tricens skinfold thiskness
Head educated [0,1]	Expenditure on clubs/extra classes	Triceps skinfold thickness
Mother's age	School scholarship	Number of days alive
Nother marital status	Overall quality of school compared to last	
Nother polygamous marriage		Nutrition
Female head [0,1]		Calorie in take % of Indian RDA (latent variables)
Household size	Health Care	
Age of head	Number of pre-natal consultations	Education
Mid-upper arm circumference of	Maternal tetanus immunisation	Years of schooling completed
mother		
Mother widow	Mother uses bed net	Delayed enrolment after age 6
Mother's birth place (rural/urban)	Mother's knowledge of cause of Malaria	Choice of middle school
Mother married after 18	Use of Malaria prophylaxis	Average hours per day devoted to school in previous 7
		days/3 months
Age of mother at marriage	Mother's knowledge of cause of diarrhea	Currently attending school
BMI of mother	Mother's knowledge of ORT	Main activity school in previous year [0,1]
Height of mother	Type health care utilised by household	Currently enrolled in school [0,1]
Number of adolescents in		
	Health care expenditure	Highest grade attained/failed
household		
Number of children less than or	Assisted delivery	When stopped attending school/reason for not attending
equal to 4 years		
Head reside in household 4 nights	First person consulted when sick	Under 6 attending pre-school
per week		
Head usually present/absent	Location of consultation	
Languages normally used	Distance to location	Cognitive ability
Siblings education	Medical expenditure on sick child	Mathematics achievement test score
5		Reading achievement test score
Physical Environment		Can read/write/do written calculations [0,1]
Finished floor		
Piped water supply/wells	Childcare	Work
Electricity	Who takes care of child	Income generating work [0,1]
	Who takes care of child	Hours on household farm/enterprise previous week/3
Flushing toilet/latrine/no toilet		
oool public transport and the	Meternel Fortility	months
Local public transport available	Maternal Fertility	Number of days worked for wage in previous 3 months
Post office	Number of children	Number of days worked for wage in previous 3 months
Telephone	Modern contraception	Has ever worked as apprentice
Bank	Birth interval	Months as apprentice
Distance to food market	Mother's age at first birth	
Type of roof	Multiple birth	Leisure
	· ·	

Wood main source of fuel	Location of birth		Average hours per day devoted to leisure activities in previous 3 months
Number of rooms/bedrooms Rubbish collected	Months breastfed Age weaned		(includes sleeping)
Socio-Economic Average village wage rate for adult males	Environment Difficult to breathe because of smoke/po	l	Depression/self-esteem/quality of life Life better than 10 years ago (household) n in winter
Average village wage rate for adult Household income Household expenditure Household has working male All women in household work	females Home environment Is household satisfied Things better than 12 months ago for household		Safety/Crime Victim of crime in last 12 months Type of crime assault/robbery/rape/murder/abduction/other Assault by household member in last 12 months How physically safe feel in neighbourhood
Rural/urban Average village wage rate for childr Farming technology			How physically safe feel in dwelling Physical safety in dwelling changed in last 12 months
Mother's hours of work Mother's income Father/mother's wages Child wages			
Occupation of head/ mother/father			
Assets Savings Asset indicator Own dwelling			
Own bike/radio/cattle/sheep/goats Value of farm/home Landless (less than 0.2 hectares)			
Farm size Access to credit/satisfaction with av	/ailable credit		
Social capital Type of organisational membership Four most important groups Male/female only/both Fee to join/monthly contribution Years ago group started Years belonged Result of breaking rules How well does group work overall			
Vote in government election Listen to news programmes radio/tv How many community meetings atte			
How many families feel close to What year did first family member a			
Economic shocks Death of member in last 5 years Serious injury/illness of household r	member	I	
Loss of regular job Cut-off/increase of remittances Abandonment or divorce Theft/fire or destruction of househol	 Id property	I	
Major crop failure Death of livestock Bankruptcy of business Inheritance/lottery win Firm payment Scholarships			
Migration Change of residence in previous 12 Reasons for migration	? months	ļ	

Table 2 Indicators used in developed countries

Exogenous variables	Intervening variables		Child Outcomes	

Child attributes	School	Physical Health
Gender		Pregnancy
Birth weight		Injury resulting in hospital stay of 3 days
Age	Health Care	Suicide
Birth rank	Timely receipt of pre-natal care Receipt of well-baby visits	Anaemia STD/HIV infection
Adopted Race	Receipt of well-baby visits	Respiratory/digestive/infectious/parasitic diseases
Race	Childcare	Immunisation
Family/household attributes	Consistency of caregiver	
Mother's education	Abandonment	Anthropometry
Father's education		Weight-for-age
Married parents	Maternal Fertility	Height-for-age
Religion	Smoking during pregnancy	Low birth weight
Mother's ethnicity	Perinatal complications	
Mother education (years completed)		Nutrition
Mother never married	Environment	Missed meals
Mother married at birth of child		
Mother currently married	Parental Attitudes/Values	Education
Divorced Family size	Composite of rule setting Composite of cultural habits	Failed Full time remedial
Years mother married	Parental expectations of child at school	Poor/good homework
Female head	Parental control - index of child	How well got on with teacher
	responsibilities	
Mother's height	Parental aspirations (parents scoring of	Graduated from high school
liter e neight	importance of school	o a data da monte migre concorte
Father's height	sports etc.)	Years of schooling
Grandparents in house	Parental strictness	Exclusion
Non-biological children in house	Parents proud of me (child perspective)	Truancy
Presence of partner		16-18 year olds not in education or training
Partner school leaving age	Home environment	Enrolment/attendance/drop-out/repetition
Education of mother's parents	Amount of time lives with male/female pare	•
Household structure of mother aged	Parental attention/verbal interaction	Cognitive ability
14 Number of states (second states states and states states and states and states and states and states and states		Deelse de la décidenci. Achieven ent Teete
Number of older/younger siblings	Home Observation of Measurement of the	Peabody Individual Achievement Tests
Mothers age	Environment Inventory (HOME - measure of cognitive,	Maths (PIATMATH)
Mothers age	emotional support)	
	Frequency of mother at	Reading (PIATREAD)
	breakfast/leisure/play/talking/help	······································
Physical Environment	with reading homework	Verbal (PPVT)
-	Frequency of father's positive/negative	Scholatic aptitude
	responses	
Socio-Economic	Family spend evening together once a	Verbal memory
	week	
Mother's income	Toys/books	Class rank
Duration of poverty	Emotional health of parents	Grade point average
Timing of poverty (early, late, early	Regular routines	Armed forces qualifying test
and late)	Derente threaten nunichment more than	8 month MDI
Income to needs ratio	Parents threaten punishment more than use	8 month MDI
Value of state benefits	Parents praise me (child perspective)	TIMSS
Working/non-working father		VERBMEM - short term memory
Working/non-working mother	1	Learning achievements/life skills
Social housing	I	
Household consumption		Work
Number of earners in household		Number of weeks of work experience
Family go on holiday	'	Wage rate
Eat out 2-3 times/week		
Dependent on social benefits		Leisure
Assets		Depression/self-esteem/quality of life
Debt		Fearful (home/neighbouthood)
Savings		Unhappy
Government transfers		Sad
Car		Use initiative
Social capital		Cheerful Kept busy
Participation in social/political/comm	unity organisations	Kept busy Quality of life (as reported by parents)
Support from friends/relatives in othe		Anxiety
Who do you talk to about problems		Positive attitude to self
	I	

Out of school activities

Economic shocks

Migration

Mother born outside US Mother born in developing country Not proud of much I do things as well as most I can't do anything right I am a good person I have good qualities I am a person of worth CES-D depression rank Satisfied with life Lonely Helpless Satisfaction with institutions

Safety/Crime

I feel safe at school/on way to school

Social/At risk behaviour

Illegal drug use/alcohol/solvents Sexual active Behaviour Problems Index (BPI) Motor and Social Development (MSD) School behaviour (met with teacher) Lost temper Bullied Get along with others Carried out responsibilities Did what was asked How well got on with family/peers Inattentive Fighting Juvenile delinquency Do you smoke/how much Age when started smoking

Child care

Age of entry to 10 or more hours of care Average hours per week in care Type of care Quality of care

Psychiatric

Hyperactivity Emotional disorder in last 6 months